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Understanding Offenders with Responsivity Needs



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editor's note



Rehabilitation can only be successful if the risks and needs of incarcerated offenders are addressed. To effectively address offenders' risks and needs, correctional authorities must be mindful how offenders will respond to interventions and design them according to their unique learning style, abilities, strengths and motivation. This is known as the responsivity principle in the Risk-Needs-Responsivity framework. Hence, the development of rehabilitation and reintegration programmes need to progressively include the responsivity factors of offenders, especially those who are in the minority and vulnerable such as women and psychiatric offenders. Towards this cause, our members have generously offered their insights on various initiatives they have developed to target offenders' specific responsivity and gender-specific needs in this latest edition of the APCCA Newsletter.

Australian Capital Territory highlighted its post-release programme, Extended Throughcare, which offers pre-release and intensive post-release outreach support such as accommodation, healthcare and finances to offenders for up to 12 months of post-release. With cognizance that family support plays an important role in an offender's rehabilitation journey, Macau held its first Mother's Day event to ease inmates' feelings of homesickness. Participating inmates made greeting cards and photo frames to express their gratitude and filial piety to their mothers. The event was filled with warmth when inmates and mothers began to hug and interact with each other.

Malaysia offered a peek into Kajang Women Prison (KWP) which is the largest prison for female offenders in Malaysia with around 1,500 female inmates presently. Being a dedicated women's prison, KWP recognises the importance of gender-specific programmes and consequently offered them to meet the physical, social, and psychological needs of female inmates. They included programmes that focuses on pregnancy, childbirth as well as pre and post-natal care for mothers. In addressing offenders with mental disabilities, Singapore has set up its Psychiatric Housing Unit with differentiated treatment that aids their recovery and enhance their potential for rehabilitation and reintegration upon release from prison. South Australia introduced a Women Offender Framework aimed at laying a strong foundation of rehabilitation opportunity to address challenges faced by women in their social reintegration and desistance from crime.

I would like to thank the members who have contributed to this issue of the APCCA newsletter. Despite our different socio-cultural backdrop, it is encouraging to know that members recognise the unique needs of offenders and are going the extra mile to design programmes that facilitate offenders' pursuit for a purposeful and crime-free life. I hope you will enjoy reading the newsletter as much as I have enjoyed putting the articles together.

Desmond Chin
Singapore Prison Service



Extended Throughcare – The ACT addresses the drivers of recidivism

Contributed by Australian Capital Territory Corrective Services

Transitioning back into the community and life after prison can be a daunting and critical time for detainees.

The ACT Government is highly committed to supporting people to address the obstacles and barriers present when they are released.

In June 2013, the ACT Government provided funding to ACT Corrective Services to pilot the Extended Throughcare program. While this post-release care model is not unique to the ACT, the Extended Throughcare model is unique in offering support for 12 months post release and in offering this service to ex-detainees irrespective of any further mandated involvement with the agency. The aim of the Extended Throughcare program is reduced reoffending, improved community integration post-release, and improved social and health outcomes for clients. A reduced recidivism rate will lower the financial burden of incarceration on the ACT's budget.

The ACT Government has committed to a target of reducing the return to custody of detainees by 25 per cent by 2025. The Extended Throughcare program is one element in achieving this goal.

Extended Throughcare is a voluntary program that provides support to detainees returning to the community at the end

of a period in custody at the Alexander Maconochie Centre (AMC) – the ACT's only adult correctional facility. Eligible detainees exiting custody with the support of Extended Throughcare receive pre-release and intensive post-release outreach support to assist them to reintegrate into the community for up to 12 months post release.

Currently the program is open to all women who have been imprisoned, regardless of their legal status, and men who have served a period of imprisonment under sentence. Eligibility is not dependent on whether someone has further involvement with ACT Corrective Services such as a parole reporting requirement or a good behaviour order.

Throughcare clients can face multiple disadvantages: mental health issues, substance abuse issues, low levels of literacy and numeracy, sporadic employment history as well as high level of homelessness.

The program provides support to eligible clients in five key areas, either directly or through an outreach provider or a community organisation. Those core areas are:

- Basic needs: clothing for release; a means to leave the gaol on day of release; basic toiletries; provision of identification; creation of a bank account; etc;

The ACT Government has committed to a target of reducing the return to custody of detainees by 25 per cent by 2025. The Extended Throughcare program is one element in achieving this goal.

- Accommodation: support and advocacy in linking with accommodation providers and with the ACT's public housing provider;
- Healthcare (including mental health): arranging contact with a primary healthcare service provider where appropriate; supporting engagement with established providers; completing referrals to appropriate services;
- Financial sustainability: assessing an individual's needs to maintain stability in the community; assessing training and employment needs; exploring training and employment opportunities; and
- Connections: exploring and supporting an individual's pro-social links in the community.

Support starts while they are still in prison. Most detainees exiting the AMC to Extended Throughcare have their release coordinated by the pre-release Assisted Release into Community (ARC) program.

A key focus of the Extended Throughcare program is assisting detainees source appropriate accommodation, whether it is with pro-social friends or family, the ACT's public housing provider, residential rehabilitation centres, or crisis accommodation providers.

Clients are supported in the community by both ACT Corrective Services staff, on a drop in basis or via telephone, and by external services providers. Service providers include outreach, counselling, training, employment, alcohol and other drug counselling, mental health services, foodbanks, non-government agencies focussed on supporting individuals involved with the criminal justice system, and culturally specific support services. ACT Corrective Services also facilitates access to and support when interacting with other services such as banks, primary care providers, and resolving transactional issues, such as obtaining identification.

All supports are arranged on an as-needs basis.

ACT Corrective Services engaged the University of New South Wales Social Policy Research Centre to undertake an impact evaluation of the Extended Throughcare program. The evaluation was released in March 2017. The results will help inform future decision-making about post release support and programs aimed at reducing recidivism.

The report analysed the impact of the program and interviewed clients, families and support staff from community service agencies who provide case management services to Extended Throughcare clients.

Support starts while they are still in prison. Most detainees exiting the AMC to Extended Throughcare have their release coordinated by the pre-release Assisted Release into Community (ARC) program.

The report suggests that the return to custody for detainees has reduced, and those returning to custody are remaining in the community for longer periods on average. It also observed that outcomes

for Aboriginal and Torres Strait Islander women were particularly good, noting the very small sample size, but that return to custody outcomes for Aboriginal and Torres Strait Islander men remain high. ACT Corrective Services is committed to working with appropriate community organisations to improve outcomes for this cohort.

Clients reported that by providing stable housing and basic material support upon release, Extended Throughcare helped them avoid returning to crime. Some clients also feedback that counselling has helped to reduce the likelihood of reoffending.

The evaluation also showed that, although there were some limitations with the data, the benefits to the community will outweigh the cost of establishing and ongoing running of the program.

The results from this research are encouraging and ACT Corrective Services is committed to building on the successes in continuing to implement the Extended Throughcare program.



The Most Heartwarming Mother's Day In Prison

Contributed by Macau Correctional Services Bureau

Family is always a vital support to the path for rehabilitation. As the annual Mother's Day approach, the Coloane Prison of Correctional Services Bureau held its first Mother's Day event on 7 May 2017 to ease inmates' feelings of homesickness.

There were 15 family groups joined the program. For the reasons of prison security, inmates can only communicate to their family through a telecom device and with a glass partition in between during regular visit. Consequently, both the inmates and their beloved ones cherished this opportunity for a close reunion very dearly, they hugged tightly once they saw each other.

The event was commenced under a scene of warmth. Participating inmates chatted happily with their family and couldn't wait to give their mother sweet massages to express their gratitude and filial piety. Moreover, inmates and their mother also made wish cards and photos frames together, the formers were filled with words of encouragement, while the latters were inserted with photos taken of each family during the event, and were presented by the inmates to their family as a gift to remember such moments of happiness.

Besides the interactive activities, inmates also performed to their family by playing music and singing a number of songs to express maternal



An inmate gives her mother a sweet massage



An inmate makes the photo frame with her mother

and family love, as well as their yearning for their beloved mother and family. One of the female inmates, "Sio I", mentioned that how it would have been a pipe dream for her to hug her mother since her imprisonment, thus she had been looking forward earnestly to this event several weeks earlier. On the day, she promised to her mother that she would turn over a new leaf and never let her family down again. At the end of the event, lots of

mothers said it was the most heartwarming Mother's Day and the best festive gift ever.

The Bureau hopes to build stronger family bonds for inmates by continually organizing events of the kind. With the support from families in such a way, inmates would hopefully have greater determination for a self-reform, and be better off for their social reintegration in the future.



Inmates sing a number of songs to express their yearning for their mother and family



A mother holds his son tight once they see each other

The Bureau hopes to build stronger family bonds for inmates by continually organizing events of the kind. With the support from families in such a way



Soft Tender Behind the Wall

Contributed by Malaysia Prison Department

Mother-Child Bonding

The mother-child bond result from biological dependence and parental response and is the starting point for the chain of development leading towards the child's functioning as a healthy adult. The bond or attachment begins during pregnancy. The days immediately subsequent to birth are especially influential in the initiation of the maternal bond, triggering a sequence of maturing responses that may have long lasting effects on the mother-child relationship.

Subscribing to the above and the philosophy that neither the mother's nor the child's best interest are served by separating a new born from his or her mother, Malaysian Prisons Department provides female offenders with programs and services designed to meet their physical, social, and psychological needs. The department also provides female inmates with medical and social services related to pregnancy, birth control, and child placement. Inmates are medically screened for pregnancy upon admission and are instructed to inform medical staff as soon as they suspect they are pregnant.

Female Inmate In Malaysia

INSTITUTION	FEMALE		TOTAL
	MALAYSIAN	NON-MALAYSIAN	
Kajang Women	537	977	1514
Kluang	74	259	333
Seberang Perai	180	118	298
Pokok Sena	110	179	289
Kota Kinabalu Women	137	147	284
Tapah	67	179	246
Sungai Udang	152	90	242
Bentong	119	89	208
Pengkalan Chepa	117	72	189
Tawau	26	117	167
Simpang Rengam	29	81	110
Sandakan	61	42	103
Miri	20	25	45
Puncak Borneo	17	27	44
Alor Setar	19	19	38
Sibu	21	1	22
Limbang	0	8	8
TOTAL	1686	2462	4148

Children Of Female Prisoner

Prison regulation 2000 states that;

13 (1) A child under three years of age may be admitted with his mother by the Director General.

(2) Any child admitted with his mother under this regulation may be provided with basic necessities for the child's maintenance and care by the Director General.

(3) When any child has presumably attained the age of three years, the Medical Officer shall report if it is desirable or necessary that the child should be longer retained.

(4) Except by special authority of the Director General, a child shall not

be kept in prison with his mother after attaining the age of four years.

(5) When a child attains the age of three or four, as the case may be, the Officer-in-Charge shall refer to the Director General for instructions should the Officer-in-Charge know of no relations willing or in a position to receive such child.

Kajang Women Prison

Kajang Women Prison (KWP) is the largest prison for female inmate in Malaysia. At present, it houses 1514 female inmates.

Catering for pregnant inmate

Pregnant inmate is given medical



Front view of Kajang Women Prison (KWP)

examination from healthcare personnel in order to identify and presumably treat any problem with the pregnancy as soon as possible, and to improve maternal and child health. At present there are 2 Medical Officers, 3 Medical assistants, 1 Pharmacist and 1 Staff nurse besides 7 medical orderly in KWP. Female inmates shall receive, within the second trimester of gestation, a dental examination, periodontal evaluation, and the necessary periodontal treatment in order to maintain periodontal health during the gestation period. This policy is to make sure the safety of the inmate and her unborn child. It will also ensure that the inmate receives proper medical care.

NURSERY IN Kajang Women Prison (KWP)

Breastfeeding



Group counselling sessions



Breastfeeding session supervised by Medical Staff

Every mother is guided and supervised while breastfeeding. Prison authority also provides special diet for mother who breastfeed so that the child gets sufficient nutrition.

Special diet, Vaccines and other facilities

The special diet not only given to mothers but also for infants above 6 months in recommendation by the medical officer. Appropriate vaccines are also given to both mother and baby scheduled by the medical officer. Toiletries such as soap, shampoo and baby powder are also provided besides other basic necessity such as mattress and baby blanket. Non-governmental organizations also regularly sponsor other requirement like diapers, toys and books for children. Recently, HAWA, the non-profit organization visited KWP and donated some basic needs for children and mothers.



The Person In Charge of the KWP nursery receiving donations from the HAWA President. Mattresses and toys are part of the donation given by HAWA.



The Prison Ladies Club visits prison nursery during Mother's Day Celebration



PSYCHIATRIC HOUSING UNIT

Contributed by Singapore Prison Service

John, who was convicted and sentenced to seven years' imprisonment for corrective training, is not your typical inmate. He is an offender with schizophrenia. Inmates such as John, who require differentiated treatment in view of their psychiatric conditions, can benefit from a special regime in a dedicated Psychiatric Housing Unit (PHU) which aid in their recovery and enhance their potential for rehabilitation and reintegration upon their release from the prison.

Before the formation of the PHU in April 2011, offenders with mental disabilities (OMDs) were managed by having their psychiatric symptoms treated by medication and their disruptive behaviour monitored and controlled to minimise disruptions to prison regime. Those with extremely severe conditions were managed at the Prisons medical centre or transferred to the Institute of Mental Health (IMH) for treatment.

The evolution of the management regime of OMDs led to the commencement of the Beautiful Minds Group which saw a group of OMDs participating in basic psycho-education and recreational activities. This was followed by having OMDs enrolled in mental health awareness courses with topics such as coping with stress and

mental health issues, as part of a preventive approach to mental deterioration.

The PHU was formed following the recommendations of the Inter-Ministry Committee on OMDs to enhance the management of OMDs. It is a dedicated housing unit where OMDs are centralised and managed. This initiative was launched in collaboration with IMH, which provides intensive psychiatric care for these inmates, and the Prisons Clinical Psychology Unit, which provides psychological screening, attends multi-disciplinary meetings, and coordinates and conduct individual psychological intervention.

As an alternative to imprisonment, some OMDs may be eligible for the Mandatory Treatment Order, which is a community sentencing option for offenders suffering from mental conditions which have contributed to their committing the offence. They will avoid a jail term but must undergo psychiatric treatment for up to two years.

Objectives and Programme Overview

The objective of the PHU is the effective management of OMDs by adopting a

different operating philosophy that factors in their mental conditions and needs. The consolidation of OMDs in a single housing unit has not only reduced disruption to the mainstream prison regime but also provided these inmates with appropriate interventions so that they could benefit from subsequent mainstream programmes upon discharge from the PHU, and improve their reintegration potential after their release from the prisons.

There are two PHUs, one each for male and female offenders. OMDs are categorised into phases based on their readiness for treatment. The three phases set out below serve to gauge the level of treatment needed for the OMDs, as well as a means for IMH to track their progress.

a. Stabilisation Phase –

A phase where OMDs exhibit uncontrollable psychiatric symptoms and are unstable. They shall be stabilised first and assessed before they could attend programmes in the Intervention or Recovery Phases. The duration lasts a minimum of four weeks.

b. Intervention Phase –

OMDs undergo programmes to improve their function level, to come to terms and cope with their mental illnesses, and to prepare them for the mainstream prison regime after their discharge from the PHU, or reintegration with the community upon their release from the prisons. The duration is between 12 to 16 weeks.

c. Recovery Phase –

A step-down care programme for OMDs who have attended the programmes in the intervention phase. They will be assessed

for discharge to the mainstream prison regime in consultation with IMH. The duration lasts a minimum of four weeks.

Despite the best efforts put in by the staff and specialists, there will be OMDs who are assessed to be unsuitable for the mainstream regime. This group of OMDs are known as Permanent Long Stayers, whose conditions are so severe that they will not be discharged.

A point to note is that the progression from phase to phase is not always linear due to poor progress and relapses, where some OMDs return to the stabilization phase, or have to repeat their intervention phase.

Profile of PHU Inmates

The PHU manages OMDs with Axis I condition, which is clinical in nature and manageable through medication and psychological intervention. Examples of Axis I conditions are schizophrenia (delusions/hallucinations), depression, anxiety disorders, etc.

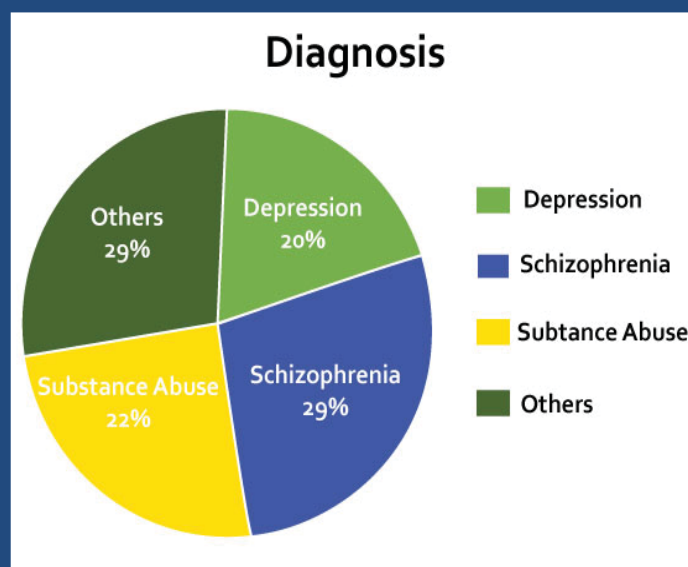


Chart 1: Breakdown of Diagnoses of PHU Inmates

Management of PHU Inmates

OMDs in PHU are managed differently from the mainstream inmate population. This is in view of their conditions which hinder their ability to adhere to the strict discipline of a mainstream prison. With the help of the mental health professional team from IMH and the Clinical Psychology Unit, their conditions could be managed through various interventions and treatment plans.

Interventions

Interventions consist of:

a. Psychiatric Reviews:

OMDs are seen and reviewed by the Advance Practice Nurse and psychiatrist on their condition and effects of medication;

b. Nursing Programmes:

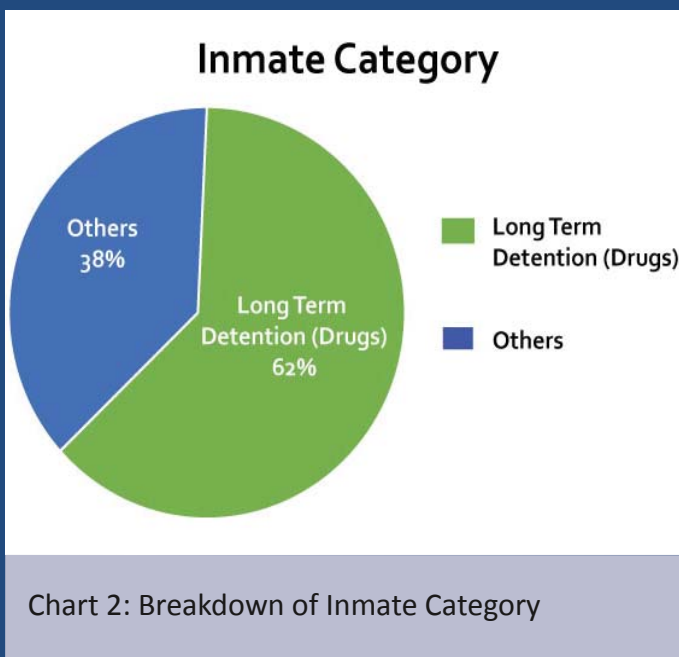
Nurses conduct psycho-educational programmes such as symptom and medication management for the inmates;

c. Occupational Therapy Programmes:

Occupational therapists conduct relational and skills-based programmes to improve inmates' level of function. These include expressive art, computer groups, role-playing, sports, recreational activities, and support groups.

d. Psychological Intervention:

Psychologists from the Clinical Psychological Unit provide psychological intervention to



The more prevalent diagnoses include schizophrenia (29%), substance abuse (22%) and depression (20%). Other diagnoses include sleep disorders and anti-social personality disorders. A breakdown by sentence category showed that more than 60% of PHU inmates are serving long term detention for drug-related offences including drug consumption, possession, and trafficking.

There are two PHUs, one each for male and female offenders. OMDs are categorised into phases based on their readiness for treatment.



OMDs with problems such as the propensity to pose risk to others and self, experiencing distress affecting daily function, etc.

Multi-Disciplinary Team (MDT)

The needs of OMDs are more complex and multi-faceted compared to a normal offender. Special attention is required in their management as the link between mental health and offending has been well established. Hence, a multi-disciplinary approach is adopted in the management of OMDs to address their needs.

A multi-disciplinary team (MDT) was formed for this purpose. The team consists of professionals of various specialisations working together to provide comprehensive intervention and care for the OMDs, with the common goal of preventing re-offending.

The MDT is led by the Superintendent of the institution, and comprises prison officers, psychiatrists, medical officers, psychologists, occupational therapists, nurse educators, advanced practice nurses, and staff nurses. The team also works closely with other parties such as prison intelligence officers and prison programme officers for aftercare and community arrangements. The multiple specialisations and perspectives

in the MDT team paints a complete picture of the inmate, including difficulties they face, and the progress they have made. It also facilitates robust and well-informed decision-making towards increasing the potential of success in their rehabilitation.

Aftercare

Other than incare interventions, IMH also provides aftercare psychiatric services for OMDs with chronic and severe psychiatric symptoms. The Forensic Psychiatric Community Services (FPCS) programme assigns each offender a medical social worker and a case manager to follow up on his or her case. These services include early engagement of the OMDs during their pre-release phase and close follow-up in the community on their psychiatric treatment so as to reduce the propensity to relapse. As treatment at the IMH is voluntary, OMDs who do not fall under the purview of IMH would have their aftercare needs arranged by a voluntary welfare organisation known as the Hougang Care Centre.

Training for PHU Staff

In order to effectively manage such a unique inmate population, it is essential that PHU

As an alternative to imprisonment, some OMDs may be eligible for the Mandatory Treatment Order, which is a community sentencing option for offenders suffering from mental conditions which have contributed to their committing the offence.

staff are provided with relevant training, which includes skills such as Mental Health First Aid, counselling, and knowledge such as aggression assessment and de-escalation and restorative practice.

As managing OMDs is no easy task, continuous training and development is essential in keeping staff updated on the changes and latest development in the mental health care arena.

Evaluation Results

As it is typical for OMDs to have disciplinary problems, one of the evaluation indicators of the PHU programme is the number of disciplinary offences committed by the OMDs. Based on a comparison of the total disciplinary offences committed over a year before and after the admission of OMDs to PHU, it has shown a 67.5% reduction. This is a positive validation of the programmes in the PHU and serves as great encouragement to the staff and specialists who have worked hard to ensure the success of the programmes.

Going back to John, he has shown much improvement after receiving treatment at PHU for a year. The number of disciplinary reports submitted against him has decreased from 11 (for more serious offences such as fights) to just one (for attempting to hide medication). He is also observed to be cooperative and participative in the classes, and is also better able to interact with his fellow inmates and the officers.

Conclusion

The formation of PHU has indeed benefited both the mainstream inmates and also the OMDs. The centralisation of OMDs minimises disruption at other institutions, allowing their fellow inmates to enjoy an environment that is more conducive for rehabilitation. OMDs like John are managed by prison officers who are specially trained and also professionals from the Clinical Psychology Unit and IMH, giving them a better chance at managing their conditions and successful reintegration back into society eventually.





Strong Foundations & Clear Pathways: Women Offender Framework and Action Plan

Contributed by South Australian Department for Correctional Services

The Strong Foundations & Clear Pathways: *Women Offender Framework and Action Plan* is South Australia's approach to addressing the reintegration and desistance from crime challenges faced by women. It is aimed at laying a strong foundation of rehabilitation opportunity for women offenders. In order to achieve this, the initiative sets out practical steps to enable women to access the types of opportunity, support and resources they may need to sustain necessary changes in their lives.

The Framework and Action Plan have been developed based on consultation findings and research into effective engagement and intervention with women who offend.

In May 2015 the South Australian Department for Correctional Services (DCS) published the Consultation Report: *Phase 1 Women Offender Framework Development Project*. In keeping with the South Australian Government's commitment to opening up projects for public consultation at an earlier stage in the process, the report findings are based on having listened directly to the people affected or impacted by women's offending.

Many of the Consultation Report findings challenged normalised ideas and practices and called for a new shared vision for addressing offending by women. Consistently emphasised in the Consultation Report findings was the importance of:

1. acknowledging women's gendered and cultural needs in design of correctional environments, services and practices;
2. designing and implementing approaches that strengthen the reliability and quality of service pathways to support women's community reintegration; and
3. mandating planning and accountability requirements that reflect women's priorities.

While holding women accountable for the crime they commit, the Framework and Action Plan do not shy away from acknowledging the resilience and resourcefulness of women and their ability to focus on a new life pathway for themselves and their families. The initiative sets out practical steps to enable women to access the opportunities, support and resources they may need to make and sustain necessary changes in their lives.

Despite women constituting a smaller percentage of the correctional population there has been a 79.3 per cent increase in the female daily average prisoner population in South Australia over the past decade. These increases in the South Australian prison population (female and male) are in line with similar trends in other Australian and international jurisdictions. This initiative is particularly important as

women involved in correctional services are some of the most at risk and disadvantaged. Understanding and implementing trauma informed approaches to management of women in correctional settings holds potential to break not only the cycle of offending by women but intergenerational correctional involvement over time.

Three key research-based understandings underpin the initiative and include:

1. Women offender needs often differ to male offender needs.

The Strong Foundations & Clear Pathways: *Women Offender Framework* assumes the correctional management of women to involve many different considerations from the correctional management of men and as requiring different approaches.

2. Effective prison and community processes are central to contributing to community safety.

The Strong Foundations & Clear Pathways: *Women Offender Framework* places considerable focus on the importance of strengthening practices and building staff capacity and confidence in efficiently and effectively working with women.

3. Long term community safety is more likely to be achieved when women are afforded opportunity and encouragement to take responsibility for what they have done and acquire new competencies and capacity to live safely in the community.

The Strong Foundations & Clear Pathways: *Women Offender Framework* establishes requirement to ensure the delivery of gender and culturally responsive management practices, programming and services to reduce

women's re-offending and to enhance the likelihood of their safe community integration. The strategy recognises that the 'one size fits all' approach does not recognise the individuals who make up the correctional population, particularly women and Aboriginal women. The Action Plan outlines the following three strategic aims:

1. Reduce women's re-offending

Objectives:

- Deliver a correctional service for women to reduce re-offending.
- Deliver programs to meet the diverse and unique needs of women.

2. Gender responsive correctional services

Objectives:

- Workforce recruitment, training and development.
- Deliver gender responsive correctional policy and planning.

3. Strong partnerships and alliances

Objectives:

- Establish strong pathways to community and cultural linkage and support.

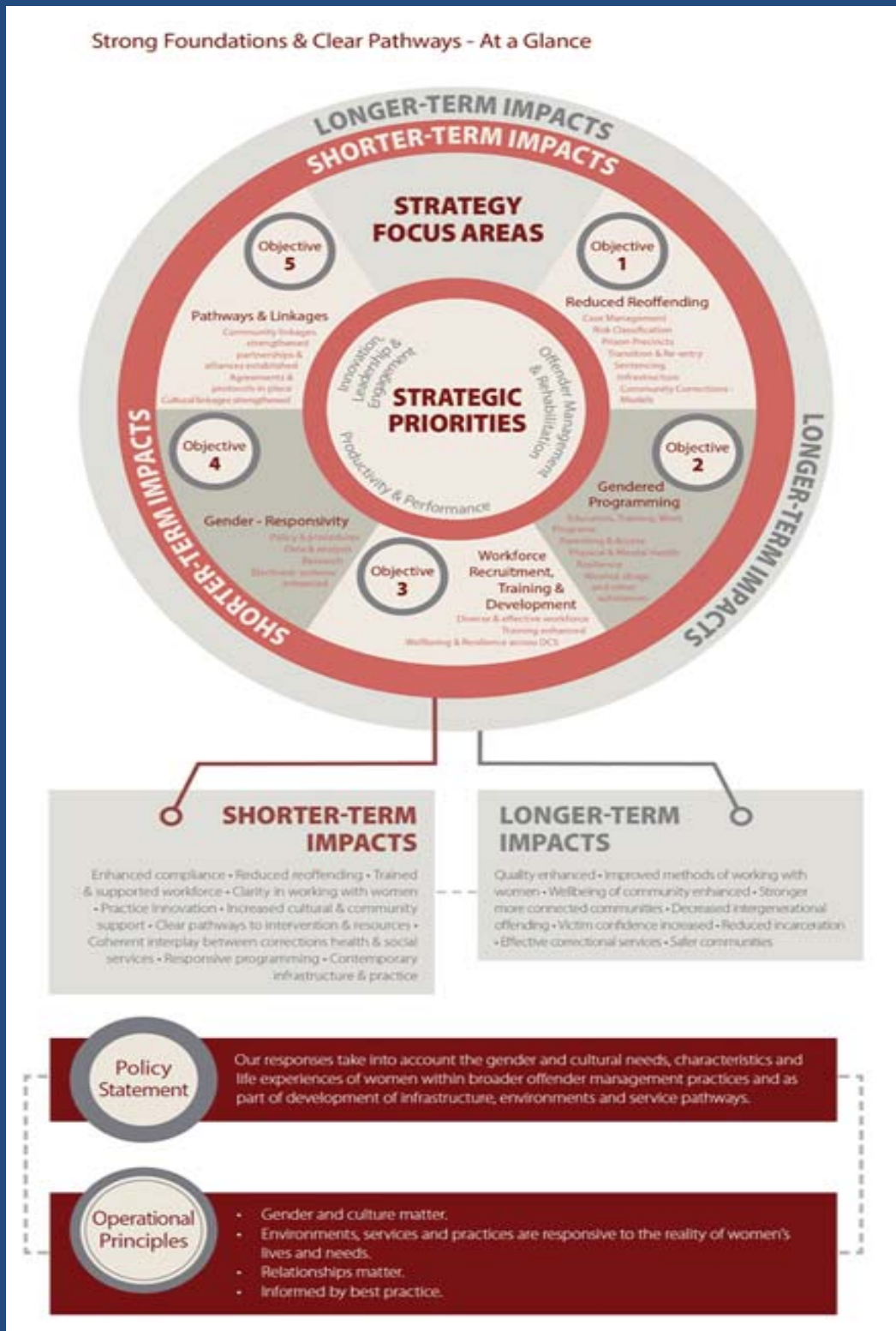
Another explicit intention of the initiative is enabling opportunity for the community as a whole to contribute to building safer South Australian communities. We know that producing quality justice outcomes requires broadening the circles of positive influence in the lives of women offenders including family, cultural and spiritual groups, individuals, business sectors, industries and organisations cascading out to the broader community.

To support implementation of the Framework and Action Plan, a Ministerial appointed

Workgroup was established. It is comprised of government, business and community sector representatives, and provides a mechanism for overcoming obstacles to development and system change, as well as opening up opportunities for input by a broad range of

key interest groups.

A comprehensive version of the Strong Foundations & Clear Pathways: Framework and Action Plan can be accessed at www.corrections.sa.gov.au.





M U L T I M E D I A H U B
Tanah Merah Prison
Singapore



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*Special thanks to the inmates at MMH for their dedication
and commitment in the design and layout of this newsletter.*



**SINGAPORE
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