# LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

#### STANDING COMMITTEE ON COMMUNITY SERVICES AND SOCIAL EQUITY

## (Reference: the effectiveness of support services for families of people in custody from the ACT)

Members:

## MR J HARGREAVES (The Chair) MS R DUNDAS (The Deputy Chair) MR G CORNWELL MRS H CROSS

#### **TRANSCRIPT OF EVIDENCE**

#### CANBERRA

#### **THURSDAY, 2 OCTOBER 2003**

Secretary to the committee: Ms J Carmody (Ph: 6205 0129)

#### By authority of the Legislative Assembly for the Australian Capital Territory

Submissions, answers to questions on notice and other documents relevant to this inquiry which have been authorised for publication by the committee may be obtained from the committee office of the Legislative Assembly (Ph: 6205 0127).

## The committee met at 9.18 am.

## HEATHER McGREGOR and

## ALASDAIR ROY

were called.

**THE CHAIR**: We will commence this public hearing of the Standing Committee on Community Services and Social Equity, which is investigating support services for families and young people who have been incarcerated. Welcome to the Community Advocate. Thank you very much for coming. I am obliged to read this card out, so I shall do so.

You should understand that these hearings are legal proceedings of the Legislative Assembly protected by parliamentary privilege. That gives you certain protections but also certain responsibilities. It means that you are protected from certain legal actions, such as being sued for defamation for what you say at this public hearing. It also means you have a responsibility to tell the committee the truth. Giving false and misleading evidence will be treated by the Assembly as a serious matter.

Thank you very much for your submission. What I want to do is invite you to make an opening address and then we will see where questions take us from there. Welcome to Alasdair as well. Before you do so, would you identify yourself for purposes of Hansard?

Ms McGregor: I am Heather McGregor, the Community Advocate.

Mr Roy: I am Alasdair Roy, the Deputy Community Advocate.

**THE CHAIR**: Thank you. I should also let you know that this hearing is being recorded and, of course, broadcast through the building and to certain offices. I invite you to make an opening statement.

**Ms McGregor**: Thank you, Mr Hargreaves. I think the first thing that I wanted to clarify with the committee was the extent of its inquiry into people in custody. Are you confining your inquiry to people who are in the criminal justice system?

**THE CHAIR**: I can clarify that. This inquiry is not about restorative justice or any type of justice philosophy as applied to people in our prisons or our corrective institutions. It is about the families of those people who are in those institutions.

One of the issues, however, that have come to light as we have looked at this is what constitutes the family. Initially and instinctively we think of parents, siblings, grandparents, aunts and uncles but, in the course of receiving submissions and talking to people, we have found that there are another two groups.

Those two groups—and there may be more and you may have better knowledge of this than we do—are the informal families that occur within ethnic groupings, particularly with indigenous groupings—people have family title, in fact, but they have an extended

family with no blood relation—and the significant others for people generally. Of course, if we have people in jail and their families are suffering, often there is someone completely unconnected to the family at all who will have a role in either supporting them, or the opposite.

Has that clarified the matter for you? All we know is that the inquiry is not about the person in jail, but the other people.

**Ms McGregor**: I was thinking more of the definition of people in custody that is embraced in legislation such as the Coroners Act, for example, which also includes people in our community who are on involuntary detention orders under the Mental Health (Treatment and Care) Act, and people who are in the psychiatry services unit at the Canberra Hospital, whose rights and freedom have been removed. These are, of course, key clients of the office. I just wanted to check that you are not addressing those. I had made the assumption.

**THE CHAIR**: Actually, we would regard the type of people to whom you refer as the same as those people being accommodated at Goulburn. However, we are concerned with the support, the family networks, of those people who are in, say, the psych unit or under mental health orders. Those people, the families and the people who are affected by that are absolutely encompassed by our inquiry.

**Ms McGregor**: Okay, fine. I am going to make some preliminary comments about that group of people and I am going to leave it to Alasdair to talk with you about the second of your terms of reference in a more expansive way.

The area of support services for families of people in custody is, from our perspective, one where there is a fundamental lack of attention and resources. Yet, it is in this area that we could, as a community, be doing far more, in a preventative sense, to alleviate the need for incarceration. One of the things that we want to highlight over and over is the close connection between children and young people who have been in the care and protection system and those who are in the criminal justice system or the youth justice system. We are, as a community, failing to stop that progression from one system into the other in a large percentage of cases.

It is fair, also, to point out that, with respect to the mental health system, where we are removing people's rights and freedom because a judgment has been made that they need to be in protective care and they need involuntary treatment, there is a very close connection between the people in that system and the care and protection system. In particular, females who have come to the attention of the state system at an early age are more likely to be represented in the cohort of people in the psychiatry services unit, and males are more likely to find themselves in the criminal justice system.

That is our general perspective of the lack of support services for families of people who are in these systems. It is my view that one of the criteria for a system that acts in a preventative way is that it actually provides a person with very strong links to their own community. There is a close connection between a lack of strong links with the community, a role in the community and a sense of belonging, and a progression into a criminal justice system, or into a system where people are acting outside what we call the acceptable norms of our society. Without wanting to criticise the services that do exist, from our point of view you are looking into an area like a void, in a sense. It is not as though you are examining what exists: it is as though you are looking at a void. That is the way I see it.

**THE CHAIR**: You suggested that there could be a link between lack of family support and a person going into the criminal justice system or into the psych system—and I think that point is taken and we might expand on that later on—but could I also ask your views on the actual supports that we give the families of those who are incarcerated, who are not necessarily likely to go into the criminal justice system? I imagine those people would be in all manner of physical and emotional distress. There may be other things at play which might come to your attention, for example, schooling for children, the destitution of women and all manner of other things needing advocacy.

Do you have a feeling about whether our attention ought to be on a twofold approach to this: one to cut the nexus of recidivism, and the other to address whether these people are going to be healthy members of our society?

**Ms McGregor**: I think that, in a general sense, the families of people in custody are very much left on their own. To my knowledge there is no coordinated service provision for, or responsiveness to, that group of people. The focus really is on getting the person in custody and all of the procedures that occur around that. However, to my knowledge there is a lack of understanding of, and a lack of response to, the people in the family context from which that incarcerated person comes.

**THE CHAIR**: I think you made the point earlier on that there are services out there, but I think the point you just made is that they lack coordination.

Ms McGregor: Yes.

**THE CHAIR**: Is that because you think that, as a society, we do not consider these people victims in the process, we do not consider them at all, in fact.

**Ms McGregor**: I think you are right. I think that the families are not seen as being the responsibility of anybody, whereas there is a whole system built around the people who have committed the offences. That does not extend in an obvious way to the families. That is not to say that there are not services and responses being provided, but there isn't a service with a name.

We make the point, and we made this point to you previously, that there isn't a support service or an advocacy service for the parents and families of children and young people who are in care. We think that that would go a long way towards alleviating some of the difficulties with the Family Services aspect of service provision, and that it would act in a very positive and preventative way in that area. I think the same is the case for people in the mental health system and the same is the case for people in the criminal justice system.

If you take as an example the fact that there is not a system that automatically provides transport or accommodation for people who want to visit someone in an interstate prison, as we do not have a prison in the ACT and our prisoners go interstate. The Canberra Hospital has an accommodation service that is available to interstate families of people in that hospital. That is the kind of support service that I think would go a long way towards keeping people who are incarcerated in touch with their links, in touch with their families and in touch with their community, which is vital to the rehabilitation of that person.

**THE CHAIR**: One of the things about which I am also interested in your view is that the current corrections philosophy recognises the worth of the family as part of the rehabilitation process, particularly as it relates to young children and young people. We are saying that that is a very strong rehabilitative tool, but are we giving the family the strength to be that strong tool?

**Ms McGregor**: No, and the family members are fairly likely to have been involved in the care and protection system, the mental health system or the criminal justice system themselves.

**MR CORNWELL**: What do you have in mind, though? I presume that social security or a similar agency would provide the necessary welfare if the so-called breadwinner is in jail. What else do you see as assisting the families? You mentioned at the beginning that you felt that we could alleviate this in some way, I presume by preventing people getting into prison in the first place. I think that is beyond our terms of reference. What examples, what concrete evidence, can you give us about what they need?

**Ms McGregor**: If we start from the care and protection system, which is where we see a lot of the origins of the later problems, what we think is that there are two ways of working with families: one is to work against them and the other is to work with them.

If there was a response to families, at an early point, to provide education, advice, counselling and inclusive practices to the family when a problem is identified, and if that were to progress—at the moment, what we have is people going into the Belconnen Remand Centre or an interstate prison, but nothing much happening with the families to prepare them for the return of those people or to support them during the absence of those people. What that means is that the level of dysfunction is increasing rather than being addressed in a preventative way. It is about building support around that group so that we are doing something to intervene in what seems to be a progression.

**MR CORNWELL**: People could very well say, "Whoever is in jail is there because they have broken the law. Why should it be society's responsibility, therefore, to look after those left behind?" One would hope that the person who broke the law thought of that in the first place.

**Ms McGregor**: A lot of people would say that, Mr Cornwell, and one argument that can be made in response is the economic argument. It does cost an enormous amount of money to keep people in jail and we are not spending anything like that amount of money to keep people out of jail. That is just one argument. If you want to make a response to—

**MR CORNWELL**: I am not sure that that is within our terms of reference. Could I ask about the question of taking families to prisons, and such like, to visit, because

you mentioned it. What happens interstate? Is money provided to allow people to visit their relatives?

**Ms McGregor**: I don't know.

**THE CHAIR**: Perhaps I can help out there by way of example. The Fulham jail is about five or six kilometres out of Sale.

MRS CROSS: Is that in Victoria?

**THE CHAIR**: Yes. It is in Gippsland in Victoria. It has 600 male prisoners from all over the state and it contains a rather large contingent of Asian people. The Victorian corrective services people assist the families to go to Sale—not pay for them, assist them. There is accommodation assistance, and the prison puts on a bus from the centre of town out to the prison and back twice a day.

**MR CORNWELL**: You would still have to get from Melbourne to Sale, however, wouldn't you, or Sydney to Grafton?

**THE CHAIR**: Yes. I think you mentioned something, Ms McGregor, about the way we assist people in the medical system, the interstate patients transport assistance scheme, which provides a certain amount of money for mileage allowance, and a certain amount of money for overnight accommodation in Sydney if your family member has to go up there and requires your support. It is a similar system to that.

We do not have a similar system, as I understand it, for people incarcerated in Goulburn, partly because they are in the New South Wales system and there is no guarantee they are going to stay in Goulburn. They could go to Cessnock, Singleton, Junee or anywhere, depending on their classification and the crime they committed.

**MR CORNWELL**: The same thing would apply to New South Wales prisons. I read recently in the newspaper that Milat or somebody similar has been moved from Lithgow to Goulburn. It is the same situation.

THE CHAIR: I think he is going to stay in Goulburn for a fair while.

**MR CORNWELL**: You could be moved around the state, but I have a bit of a problem understanding why we cannot do it ourselves, in that respect. Mr Chair, could we get some information about what is provided?

**THE CHAIR**: Yes, we will get that. We might ask that question of the Corrective Services people.

MR CORNWELL: Yes, I would even be interested in the situation in Victoria.

**MRS CROSS**: Good morning, Ms McGregor. Have you made any submissions to government or have you put anything together at all recommending greater support for the families of people in custody?

**Ms McGregor**: Not recently. The responsibilities of my office go to people in custody who have mental illness or mental dysfunction, and we do a great deal about that smaller group of people. I should make it clear to you that I do not have responsibility for all people in custody.

With respect to the people with mental illness, mental dysfunction or intellectual disability who are in the Belconnen Remand Centre, I worked for a number of years on the Corrections Health Board. I am no longer a member, but the Corrections Health Board has done a great deal to change what was a total lack of appropriate health services for people in custody, and that work has continued. Our focus has been on the interests and wellbeing of the people in custody. I have not recently addressed issues related to the families of that group in a specific sense.

However, we have also been involved in some work related to the families and carers of people in the psychiatry unit, people who fall into the category of carer in a general sense. It also relates to their access to support services, and in fact their access to information about what is happening to the person who is on an involuntary treatment order.

This raises another matter that I wanted to mention to the committee. It is about privacy. A lot of carers will report that their access to information about their family members, people who are in custody or in the psych unit and for whom the family members care, is blocked. The Privacy Act has quite proper and quite stringent requirements for access to personal and confidential information. This is often the other side of the coin; this often means that carers who come to visit are provided with no information about the person who is either the patient or the prisoner. That is an issue for family members and carers and it does, in lots of ways, block people's access to knowledge about what is going on, what kind of issues the person in custody is facing and so on.

The national privacy legislation is throwing up all sorts of issues like that because, on the one hand, we want people to have a right to privacy and, on the other hand, there are some people who are closely involved with the person in custody, whose inclusion in the process of treatment and care would probably be a positive thing, if they felt more included or became more informed about what is going on. That would be a really positive thing in lots of circumstances.

**MRS CROSS**: Can I just follow up on my question? I understand what your job is. I understand that you are exposed to probably more elements than we will ever see in a lifetime, but do the terms of reference about your responsibilities preclude you from observation and making recommendations, or is there a very clear delineation between your role and the role of others that stops you from doing that? Again, I am a supporter of preventive measures because I think prevention is better than cure. Would you answer that?

**Ms McGregor**: I do not have any direct responsibility to family members. That would not stop me.

MRS CROSS: But do you make recommendations?

**Ms McGregor**: Yes, I would take up an individual case. For example, I took up an individual case of a person with a mental illness who was in a New South Wales prison. I saw that it was in that person's interests to have visits from family members, and for the family members to have contact with, and access to information about, that person. I took that up as an individual case.

MRS CROSS: Sure. So what is your solution to the privacy issue?

**Ms McGregor**: I suppose, if the person is able to say, "Yes, this family member should have access to information about me," that is the solution. If the person is not able to say that, which is the case with my clients, then I think that a judgment ought to be made as to what is in the best interests of the person in question. The criterion should always be what is in the best interests of that person, not the family member.

MR CORNWELL: Who would make the judgment?

**Ms McGregor**: I would make that judgment if I was the person's guardian. A guardian is empowered to make that judgment. However, it has to be a judgment that is made in the best interests of the person. Sometimes that can be really confusing because the best interests of a family member may not—

MRS CROSS: May not be in the best interests of the person. Thank you.

**MS DUNDAS**: Is that an issue when people are released from custody, in that they are released into the care of their family or their carers, and the family or carers do not know what has happened to that person in custody so they cannot deal with any issues or any patterns of behaviour that may have arisen in custody?

**Ms McGregor**: Yes. I think it is a big issue. I think that the responsibility for the care after incarceration is often imposed on the family or the carer without giving them any preparation or information. A family that is in the dark is not going to be able to provide a good environment from a rehabilitation perspective. It would be good if the discharge planning that goes on, or that should go on—often it does not go on at all—included the carer group or the family group.

**THE CHAIR**: Can I pick up on that? When you say that there is a lack of involvement in the preparation for return, when the person actually does turn up, whether it is from the psych unit or from a prison, is that lack of preparation likely to increase the possibility that there will be further family dysfunction and distress?

**Ms McGregor**: My anecdotal response to you would be, yes indeed, but I cannot give you examples of scientific research, Mr Hargreaves, to prove that point. However, it's rather obvious, isn't it, that if a person comes back and there are no ideas about how to address the new family dynamics—

**THE CHAIR**: That is the very point that I think is at the nub of this inquiry. You put your finger on it earlier on: there are plenty of systemic solutions to the reasons for a person's incarceration and the rehabilitation, but there seems to be no focus on the family stress, distress and dysfunction which is directly linked to the reason for the incarceration.

I hear you say that there do not seem to be supports for people to manage that in itself. Then, on top of that, I think I heard you say that, because the families are not supported or informed, the anecdotal evidence shows that, when they come back, the likelihood that those families will experience further stress, distress and dysfunction will increase.

**Mr Roy**: Could I add something on that? The terms of reference, except for the second, obviously, seem to have an implied emphasis on adults, which is understandable, given more adults are in custody than children.

Following on from your question, Mr Hargreaves, a lot of young people who are in custody, as Heather mentioned earlier, do come from disadvantaged, disempowered families. They usually have siblings who are involved in the care and protection system or the criminal system, or parents and so on who are, themselves, in the criminal system or have been in the care and protection system.

A lot of the children may not be with their natural families. Some of them will be with foster families or other substitute care arrangements—refuges and so on. Some of the children will be subject to care and protection orders, which means that Family Services has a responsibility to provide parental responsibility functions for that child. Failing to incorporate those families, or the placement of that child, into the discharge arrangements for that child is extraordinarily problematic and increases the likelihood of that young person reoffending.

The families themselves are often left in isolation. The families of young people who are in Quamby are rarely contacted or engaged in any sort of discussion or planning by the department. Sometimes families do not want to be. Not only does that affect the child who is in the custodial system, but it also affects that child's siblings. As facts and figures will show, this generational presentation of children and young people to the custodial system is quite problematic and concerning.

**MS DUNDAS**: On that generational point, you have provided us with a survey from 1999-2000. Do you know whether, when a parent is taken into custody for any reason, Family Services are notified if there are any children? Does that happen automatically?

Ms McGregor: Yes, it does.

**MS DUNDAS**: You raised a number of points in your submission about youth justice referring children to Family Services and those notifications not being officially noted. Considering those two points, what kind of support do you see Family Services providing to the children of people who have been incarcerated? On the other point, as youth justice refers them to Family Services, are those two different channels of support there?

**Mr Roy**: I suppose there are two issues there. There is the issue of Family Services providing support to the child of an adult who is in custody, and there is also the one of Family Services providing support to the families and the child in custody.

In terms of Family Services providing support for the child of an adult who is in custody, the role would be, as per normal, to see whether the child needs a substitute placement.

We hope that the child can remain with a family member somewhere. Family Services would probably have a limited role if the placement of the child somewhere within the family unit was safe.

**MS DUNDAS**: So if the family unit appears to be stable—intact is a better word—Family Services don't—

**Mr Roy**: Whether Family Services should have a greater role is a different matter, but currently they probably wouldn't.

MS DUNDAS: Is it up to the parents to indicate that they have children?

Mr Roy: I don't know.

**MS DUNDAS**: I know it was an American case that was on the news last night and I do not think it is happening here in Australia. A woman, who was incarcerated for a couple of weeks on bail or remand, forgot to mention that she had a two-year-old daughter.

THE CHAIR: She deliberately did not mention that she had a two-year-old.

MRS CROSS: She starved to death.

MS DUNDAS: No, she was still alive.

MRS CROSS: Another one starved to death.

**MS DUNDAS**: Is the onus of responsibility on the parents to make it clear that they have children, or are we assuming that these are families that are known to Family Services already?

**Ms McGregor**: We would not necessarily assume that they are known to Family Services, but certainly Corrective Services would have a role, in the pre-sentencing interviewing of the person. Lawyers have a role, in their interviewing of the person, to make reports if they understand that there is a child who is going to be affected. If the parents are not going to declare that they have children, then it really would be up to those who have been in contact with those parents to make the report to Family Services.

**Mr Roy**: On the second point, the issue of parental responsibility is quite important here. A lot of young people who are in the custodial system are subject to a care and protection order. If we just look at the figures for this week, around 47 per cent of children who were in Quamby were known to Family Services. I do not know whether that actually means they were on care and protection orders. It is a bit ambiguous.

Family Services having parental responsibility means that it has to take the role of the parent. It is a substitute parent, it is a substitute family for this child. I think that Family Services frequently does not see its role as more than that of substitute decision maker or case manager. We would say that Family Services, as the parent of this child, should visit him or her in Quamby, and should actively engage with the child to discuss his or her life circumstances and return to the community.

**THE CHAIR**: So we need a cultural change, in a sense, within Family Services, a directional change from the way in which they perceive their role to the way in which they can have an effective role with respect to those kids?

Mr Roy: For the kids for whom they are responsible, yes.

**THE CHAIR**: They actually need to have both, don't they? Family Services needs to be the effective decision maker—

Mr Roy: Certainly, yes.

**THE CHAIR**: —but you are also telling us that there is a big hole in the family relationship, and the children need that relationship. I know Mrs Cross has a question but this may actually add to what she wants to say. You are doing a qualitative project at Quamby, in a couple of bites as I understand it.

Mr Roy: That's right.

**THE CHAIR**: I wondered if you would tell us what it is, how you are going to go about it, and what you hope to get out of it in the end?

**Mr Roy**: Certainly. The project came out of concern about the number of children and young people who presented at Quamby repeatedly over a number of years, or the number of children from the same family who presented at Quamby again over the years, sometimes over many, many years. It also resulted from a concern about the discharge process in itself, in the sense of whether we are providing for children and young people exactly what they need and what they want to enable them to return to the community and to stop offending.

To give you some facts and figures on that issue, I am looking at the figures for this Monday for children and young people in Quamby. There were 19 children in Quamby and, on that day, 63 per cent had been there at least once before, and probably many more times than once before, and 31 per cent had been in exactly one year ago to the day. That does not mean that they had been there on that day and stayed there for a year: these kids had been there a year ago, had been released and then re-entered, released and re-entered. I cannot tell you how many times they had been released or re-entered but, even if it was only once, it is still quite a concerning figure.

On that basis, we designed a three-stage project. The first stage involved meeting with a random sample of children and young people in Quamby on a particular day. We spoke directly to 20 people, which is more than a random sample because it was almost the entire population on that day.

MRS CROSS: Does that mean that 6 per cent were in once and never came back?

Mr Roy: Sorry?

MRS CROSS: You said 63 have been repeat offenders once.

Mr Roy: Yes. I don't know about the "once".

**MRS CROSS**: And 31 had been there a year to the day, so that is 94. Does that mean the difference is—

Mr Roy: Sorry, no.

THE CHAIR: Thirty-nine per cent had not been there before.

MRS CROSS: I see.

MR CORNWELL: It was 31 per cent of the 63.

Mr Roy: Yes, I don't know if you can say that.

**Ms McGregor**: We cannot say that either because they may have been there the day before and we are just looking at a particular day.

MRS CROSS: Okay, thanks.

**Mr Roy**: It was just a snapshot. On that day, 47 per cent were known to Family Services too.

Cate Mahaney from our office met directly with the young people. She visits Quamby on a monthly basis and is quite familiar with the children and young people. She asked the children and young people a set of four questions. Broadly, the four questions were: what would be the worst thing that could happen to you upon your discharge?, what would be the best thing that could happen to you upon your discharge?, what would you like to do when you are released?, and what supports do you think would help you avoid coming back to Quamby?

It was an open-ended qualitative-type project. The responses were very, very informative and interesting. We are waiting for those children and young people to return to Quamby. Some of them already have. I know that "waiting" sounds horrible and we hope they don't return to Quamby but, if they do, we will return and ask those children and young people what went wrong.

We will say, "This is what you said. What did happen? What didn't happen? How was the system in providing the services that you felt you needed?" We will then match that, in the third part of the study, with what actually was provided, what the discharge plan said. If the child says, "I need X and Y," and the discharge plans provides A and B, presumably something is not working out as well as it should. We have finished stage one of the project and, as I said, we have begun stage two.

**THE CHAIR**: You are quite rightly checking out what these young people perceive as their needs from both services and asking whether any services they were getting were working. It is a great idea. However, they may have needs that they do not know about, but that somebody else might know about. I don't know how you can do it, but I would love to see an approach come into play in which somebody else says, "If this person had had this, it might have worked." It is crystal-ball gazing.

**Ms McGregor**: Another aspect of this is that we might consider that we are really wise people and we know what people need. However, unless the young people actually have ideas to embrace, it does not matter how much you invest, how many resources you put in, how clever your program is or how insightful your ideas might be, it will not engage them and so it will be a waste of time.

THE CHAIR: Point taken.

**Ms McGregor**: So we have to engage them, we have to get them to start thinking about what is going to make the difference in their lives, to turn their lives around.

Mr Roy: And their responses.

**THE CHAIR**: With a bit of a luck, we will see some of the things that we are not doing that they want doing.

Ms McGregor: Yes.

Mr Roy: Very much so.

**Ms McGregor**: Some of the things that young people say they want are what we accept as the ordinary aspects of life. They are things such as inclusion, belonging, having something to do and having something meaningful to contribute to the community. They are not things that we have not thought of: they are sometimes things that we all just take for granted but that young people do not actually have.

**Mr Roy**: The overwhelming view expressed by a lot of the children and young people and they were very insightful in recognising that they have a role to play and that they also require support to actually achieve some of these goals—was that they wanted somewhere to live, they wanted a sense of belonging, they wanted a sense of place. That was sometimes within the family unit and sometimes they accepted that their family unit was inappropriate.

MRS CROSS: Routine.

**Mr Roy**: They wanted something to do during the day, they wanted income, they wanted to have their boredom alleviated, and they then said they needed support. That was something that virtually every child and young person said—they needed support to achieve this.

The comments about the support were: "Youth justice could help but they don't," "They're not there when you need them," "Youth justice could help but they're not there," "They say they'll ring you but they don't," "People make promises they don't keep" and "People need to be more available to you".

**MS DUNDAS**: On that support point, we have heard in other submissions about the Family Services and youth justice staff—and I am not sure of the right word, but it was described to me in this way—when somebody is leaving Quamby, the staff sometimes say, "You'll be back."

#### THE CHAIR: See you later.

**MS DUNDAS**: Yes, as opposed to, "Go back on the right path." It is the "We expect you to be back" attitude that is being picked up by some of the young people through Quamby. Is that something that you are seeing, as well? You have mentioned that the young people are saying to you that they need support and that they are not getting it, but it is also that there is that attitude barrier in front of them that holds that once you're bad, you're always bad?

**Mr Roy**: I can't comment directly on that. I would hope that is not the case. I think a lot of Family Services and youth justice workers are very, very professional and very, very supportive. There tends to be a systems view, though, that the older the child gets and the more the child offends, the more he or she is becoming a criminal, which is a philosophical debate I suppose we could have. We would probably say that a child or a young person who offends is a child with care needs who has criminal behaviour.

When the children are young, the system is quite supportive of them but, as they get older, the response tends to be, "They are criminals. It is entrenched." Even if they are known to Family Services, the response is still, "It is more of a youth justice matter than a Family Services matter."

**MS DUNDAS**: Even in your own report, there does not seem to be a lot of evidence, in that the age at which most people appeared in front of the court was 14. Then you still have 17-year-olds who, at 14, you would think would have been getting the most support, re-offending at up to, and including, the age of 18. So I guess the intensive support services for those aged 14 are not working.

Mr Roy: It is a perception of the child. There is a child of 10 in Quamby this morning.

**MRS CROSS**: I just want to touch on something you said, Ms McGregor—or it might have been Alasdair—which is that youth justice can help but it does not. I have a two-part question.

Mr Roy: That was a quote from a child. It was not my view.

**MRS CROSS**: That's fine. I will ask about your perception of that comment and, secondly, do you have a figure, a percentage, for those children who offend or reoffend who have family members who offend or re-offend? In other words, do they learn behaviour that is repeated generationally?

Mr Roy: I don't.

Ms McGregor: That is not a statistic that we have kept.

**MRS CROSS**: What about youth justice? What is the problem there? Is there a problem?

Mr Roy: That is a very broad question. As I said, youth justice frequently does an extraordinary job in extraordinary circumstances. Like many agencies, it is under-

resourced for providing the services that it is required to provide. I don't have a single solution for you.

**MRS CROSS**: Given that you are the Community Advocate, do you feel that youth justice could be doing more? Is it a resource issue?

Ms McGregor: Yes, it could do more and yes, it is a resource issue.

Mr Roy: It is a resource issue.

MRS CROSS: Thanks.

**Ms McGregor**: Mr Chairman, could I make a point that I think is important to balance some of what we talked about?

## THE CHAIR: Please do.

**Ms McGregor**: It is not something that we have actually made clear. It is with respect to adults who are in the criminal justice system. It is often the case that those adults have put family members and, in particular, children and babies, at quite severe risk, in fact, at risk of death. We should not overlook that aspect of the serious nature of crimes that are committed against children and babies. In particular, I have in mind those who, when they are released from custody, pose just as great a threat to the baby, the child, the young person or the family member as they did when they went into custody.

I think it needs to be said that we are not dealing with rose gardens here: we are dealing with highly complex matters, where people's safety and wellbeing have been quite seriously compromised by a family member. Because our system is such that we are not good at rehabilitating people to a non-violent way of behaving, agencies such as Family Services have enormous difficulty in ensuring the safety of children, which is its core responsibility, and in engaging family members who have threatened the safety and wellbeing of families.

**THE CHAIR**: Am I reading this correctly if I say that there is insufficient attention given by Family Services to the post-release safety of the child, but there is almost none given to the post-release safety of adult members of that family? There is no systemic approach to that.

**Ms McGregor**: In a couple of cases that I am aware of, where that has been the neardeath of a child or a baby, Family Services have been very concerned about the safety and wellbeing of that baby or child on the release of the person who harmed them. I think that is something that Family Services does take very, very seriously.

**THE CHAIR**: What, then, is the problem with that? Is the problem a disconnection between Family Services and the police, for example, or restraining orders after the release? Is there a systemic breakdown here where there could be a number of agencies who actually provide protection for that family unit, but they are not talking together and they do not have the legislative clout to be able to achieve that?

**Ms McGregor**: It is not really possible to get a protection order unless you have evidence to show to the court that there is, or has been, risk. If a person has been in custody, then it is hard to prove that there is a risk if the initial incident happened quite some time in the past. My point is more that you are looking at the support that is available for the families of people who are in custody, and we are talking about ways to prevent further harm and further incarceration. It is just a reality that the return of a person from custody can present real threat to the family. The management of that is a very complex and difficult matter.

**MRS CROSS**: John, I think this is your concern: is that a bigger problem than ensuring that there is a connection, an ongoing communication between the family and the person who is incarcerated, to ensure that the rehabilitative process is a holistic one? Is the potential harm that could come to the person at home a greater problem than achieving the holistic approach that this inquiry is looking to address?

**Ms McGregor**: I don't know that I can answer your question in a general sense. I think that, in individual cases, there will be an increased risk of harm to a family when a person gets out of custody.

MRS CROSS: Is that because they are not rehabilitated properly in jail?

**Ms McGregor**: Yes. I believe that, if someone has an attitude that the use of violence is a legitimate form of interaction with a family member, it is a very hard task to change that person's attitudes and behaviour, in particular, while they are in the criminal justice system where there is a culture of the use of violence and intimidatory practices.

MRS CROSS: So the problem is in there.

**MR CORNWELL**: No, not necessarily. Here we are looking at a situation; on this committee, all of us are nice, law-abiding, middle-class people, addressing problems associated with a different type of person and attitude. Have you any answer to this? I haven't myself.

I can see the same problem with Family Services. It is the same group of people addressing issues when they may have no idea at all about the culture of violence that you were mentioning, and the fact that perhaps it is endemic in a particular family or group. I am wondering how we can get through to it when we are all acting and living at a much higher level?

**THE CHAIR**: With respect, I think we may be getting off the track a little, in that there is another debate about to occur about the efficacy of rehabilitative programs within the restorative justice philosophy. That will talk about the application of these things to the people incarcerated, so that they do not do harm to the community again when they come out. That is a debate that is about to happen.

MR CORNWELL: Yes, I think that is a different debate. I agree with you.

**THE CHAIR**: Ms McGregor, I think you actually touched on something which had not occurred to us—I speak on behalf of myself particularly, but also about the community—and that is that we assume that the person coming out of a prison or

a psych unit is going to go back to a welcoming environment within that family unit. What you are telling us here is that there are a bunch of families out there who are scared.

Ms McGregor: Absolutely terrified.

**THE CHAIR**: And the lack of support for family and group A equally applies to family and group B, and we ought to be aware of that and give thought to it.

**Ms McGregor**: There is some very solid evidence about incidents of murder in Australia that the AIC has produced that point to the danger points for people. One of the high-risk moments, if you like, in a person's life is at a point of separation, when there is a relationship breakdown. When a person has just been told that the relationship is over it is a time of very high risk. That is when murders are most likely to occur. A change in life circumstance, such as the release from custody, is also a very high-risk time. So, yes, I think those factors need to be taken into account when you are looking at support for families. It could be that supporting them is about dealing with safety issues.

THE CHAIR: Okay, thank you very much.

**MR CORNWELL**: We have the law in this country, but we do not have justice, Mr Chairman.

**THE CHAIR**: We will wrap that up. Thank you very much for your evidence. It has been most helpful.

Ms McGregor: Thank you.

Mr Roy: Thank you.

#### **BRIDIE DOYLE** and

## PAULINA HELLEC

were called.

**THE CHAIR**: Okay, thank you very much, representatives of WIREDD, for coming in and seeing us. I am obliged to read this card out. You have a copy of it there in front of you. We do this for all witnesses.

You should understand that these hearings are legal proceedings of the Legislative Assembly, protected by parliamentary privilege. That gives you certain protections, but also certain responsibilities. It means you are protected from certain legal actions, such as being sued for defamation for what you say at this public hearing. It also means that you have the responsibility to tell the committee the truth. Giving false or misleading evidence will be treated by the Assembly as a serious matter.

The way we conduct the inquiry is to ask you if you would like to make an opening statement and we'll see where questions lead us from there. There are a couple of things I should mention. Firstly, when you first speak, could you identify yourself into the microphone and the capacity in which you appear so that the guys up in the Hansard office can get it right.

You should also be aware that, when those lights are on, it means that the sound is being reticulated around this building so that any of the offices in this building can hear what's going on in this committee room, and it is also in some senior public service offices around the town. So, with that, welcome to you. I invite you to make an opening statement.

**Ms Doyle**: My name is Bridie Doyle. I'm the coordinator at WIREDD, which is a women's drug and alcohol support service. I guess our main involvement as a service in this area is that we go out to Belconnen Remand Centre every week to visit any women that might want to see us out there. So we ring up and ask, and usually there are women and we go out every week for that.

And we've run programs in Quamby for the young people on drug and alcohol issues. Gee, it's hard to know where to start. There was a number of things that came up in the bit I just heard that were of interest. I guess one of them was that class difference around—or how do you get over that. And my thing would be: you ask them. You actually ask the people themselves what they want. And it sort of tied in with something I'd heard about that culture at Quamby of "you'll be back" that you were talking about, Roslyn. Certainly that was the observation for us out there.

And you could see that in the programs that we did when you asked the young people what they liked best about that program. They said that we treated them like human beings. That was consistent through, which is just devastating, and it says something about the culture that they feel like they're in. And I think that's not to criticise—

**THE CHAIR**: Bridie, before you get off that point, does that say something about the environment from which they came as well as the one they're in?

**Ms Doyle**: I think so, and I think it is around that question of what families need. One time when I was out at Belconnen Remand Centre, I think we had six women there that day, and it was just the way they were talking. I asked them whether any of them had had families incarcerated. All of them had. It was just this really clear moment where you thought, "This is generational. It's right through the families". And I think that's also true at Quamby—that what was unusual and what they liked about the program we ran was that it was probably the first time that someone had actually tried to find their positives, and really encourage them to follow those.

We made a video out there, which we then gave them copies of, that was really about trying to build on their strengths and what they saw as their—but nobody's ever done that. Nobody's actually said to them, "This is what's good about you and how might you develop that further?". So I think it's both. I think it's the institutions they're in and the institutionalised nature of the families that they're in.

MR CORNWELL: What are they there for?

**Ms Doyle**: The young people?

MR CORNWELL: No, the ones at Belconnen, the women.

Ms Doyle: The women are mostly in for drug offences.

**MR CORNWELL**: What, traffic or using?

**Ms Doyle**: Usually it would be trafficking, but some of it—it depends on the quantities they got caught with, but I think the stats in Australia are something like 82 to 86 per cent of women incarcerated are in for drug offences.

**MS DUNDAS**: You mentioned in your submission, and you've just mentioned now, the generational impacts, especially those on the women. We've heard from the Community Advocate that Family Services is meant to chase up a family when a family member is put into custody to see if there are support needs there. Did you hear from these women whether or not Family Services assisted them if it was a parent that went into custody, or was that support lacking and has that been part of the problem, that there is no intervention?

**Ms Hellec**: I'm Paulina Hellec. I work at WIREDD too. Coming to that point, most of the women who stay at the Belconnen Remand Centre say there is no support for the family; there is not much linking. They didn't mention any organisation, but we—maybe we don't know. There is not much support between them and their children, especially for information for the family, for transport, for help. There is not much sort of linkage between them inside and someone outside helping their family.

**Ms Doyle**: And I think the other part of that comes back to that issue you raised. We don't use these terms much in this country any more, but for almost institutionalised and working class families, Family Services, like all the other services, are actually the

enemy. There's this incredible divide. So often maybe they don't hear what's—certainly the observation we got when we asked women about this was that they don't know what's available for them or their families, and some of that may be that they're not going to see Family Services as a support service for them.

One of the things that Paulina and I talked about was the need for there to be someone independent in between that almost case manages what a family might need and that isn't seen as, perhaps, part of a service that's potentially an enemy.

MRS CROSS: Is that where you'd come in—providing mediation?

**Ms Doyle**: Well, possibly. That's what we try to do in the work that we do—or at least offer to let them know some of the information on what services are available to them. And certainly we work really hard around that—and I could have opened with that, about the fact that they're the person that we're working with, and so we work hard to not be seen as the enemy, and we're not in a position where we need to report to be that, but I think the courts could appoint that. Certainly in New Zealand they do that.

**MR CORNWELL**: These women in Belconnen for drugs, though—if they have children, who is looking after the children? Do they have partners? Sometimes.

Ms Doyle: The partners, if they have them, are inside.

**MR CORNWELL**: They're inside as well—they have probably got nicked at the same time, have they?

Ms Doyle: Yes, or just before them or they'll see them on the way, like really overwhelmingly—

MR CORNWELL: Right, so what happens to the child?

**Ms Doyle**: They are often with other family members, the parents of the person, or they've been taken by Family Services.

MS DUNDAS: Can I ask how that is organised, and—

Ms Doyle: Very ad hoc and random, and often immediate.

**MS DUNDAS**: Well, let's say there's a scenario where somebody's picked up during the day and their children are actually at school. Have you heard from women about the police following that up, having somebody there to pick the children up after school to make sure that those kids are then having a meal, if there is no other partner or—

**Ms Doyle**: No, what we would mostly hear is that they managed to make the phone call to somebody that manages to sort it out for them.

MS DUNDAS: So they phone a friend or a family member?

Ms Doyle: Yes.

**MS DUNDAS**: And there's no coordinated support on that point. So the Family Services intervention, then, that we heard about—that a parent is incarcerated and Family Services checks it out—there's no real understanding that that's actually happening?

**Ms Doyle**: No, and I think it comes back to the point you asked about in that last bit as well, around what support there is for adults, in that Family Services focuses on the protection of the child, and I don't think that they have the resources to expand that to what is the need of the family—who is looking after the children, how well will they cope, what support might they need, what are they going to do when another partner comes out? I think there's a whole lack of coordination around what the whole family needs, as opposed to Family Services being focused on what the child needs. I don't think it's their job, but I think that's one of the bits that's missing.

**THE CHAIR**: Before we go down that track a bit more, you mentioned the process in New Zealand. Could you expand on that a bit please, Bridie?

**Ms Doyle**: Yes. One thing that they do in particular is appoint an outside independent person to represent every child on any matter that goes through court, and so that person's job is to link them up, to explain what the legal proceedings might mean, to coordinate who they're going to stay with if—

THE CHAIR: That's not a Commissioner for Children, is it?

**Ms Doyle**: Yes, except that they appoint independent, more youth-based workers rather than a Family Services type thing. And that's appointed to the child, but it's about whether the child's actually the subject of a custody hearing, where they might be mentioned in a Family Court matter or if the child is a perpetrator. They get appointed this person, and, certainly on the limited information I saw from young people talking about the appointment of that person, that made all the difference to them around negotiating. So that would probably apply more to the—

**MRS CROSS**: And do they come from an agency, Bridie? This independent person that's appointed sounds like a great idea. Where do they come from?

Ms Doyle: I'm not that informed about it.

MRS CROSS: Okay.

**MR CORNWELL**: I'm worried about the middle class welfare issue there. But you mentioned that you go to Belconnen. How do the people in Belconnen who ask for you find out about you?

**Ms Doyle**: We have notices up in Belconnen Remand. Hopefully, most of the workers know, and we ring every week, and so someone will just call out if there are any women that want to go. What often happens is that perhaps only one of them needs to want to come, because the reality is that they're really bored—they don't get a lot in there, and they'll come, even if they don't identify themselves as having drug and alcohol issues, for something to do. So often, if there are only five women, they'll all come, because one of them will say, "No, come." They're nice people, basically.

**THE CHAIR**: Is it the case, too, that female prisoners are more likely to support each other than male prisoners are, and so if somebody's a bit reluctant to go to a service like that, one of the other women in there will say, "I'll come with you," just to make sure they go?

Ms Doyle: Yes.

**Ms Hellec**: And also Belconnen was created for men mostly, and women also don't have facilities there for—

MRS CROSS: Child nappy changing and-

**Ms Hellec**: Yes, there are no facilities, and there are also no facilities for women who are there, like a gym, education, because it's mostly for men. That means, as Bridie said, that when we come there, mostly they come because they're not having any visitors or maybe they don't have many activities, and that is—

THE CHAIR: So there's a message there for the designers of the new remand centre-

Ms Doyle: Absolutely.

MR CORNWELL: Hold on. How long are they there for?

Ms Doyle: Often for a prolonged period—

MR CORNWELL: How long?

Ms Doyle: Enough that that's a worry.

MR CORNWELL: Prolonged is not an answer, sorry. How long?

Ms Hellec: One of them was around three months, and that was the longest one.

MR CORNWELL: What's the average?

Ms Hellec: I think it is around four or five weeks.

MR CORNWELL: Thank you.

**MRS CROSS**: And what happens is, because of the numbers and the requirements to keep that safe, they pretty much don't take women to education and the gym, because it's hard—the men have to not be in it.

MR CORNWELL: No, that's what I was thinking.

**THE CHAIR**: We are getting off the track, and we need to bring ourselves back to the families. I'd just like your view on this. When we talk generally about the philosophy of people coming out of the jail and going back to family, because 95 per cent of the prisoners are men, we naturally think about a woman being at home with the kids and

then having this person coming back into the family unit and the problems that they might have.

There is no mindset in my head about what happens when a woman comes out of jail in terms of going back and re-establishing herself with her children and her family, and her wider family, and/or her husband or partner that's sitting there. Have you got a feel for that sort of—

**Ms Doyle**: There pretty much isn't any. There may be some systems of support, but women certainly don't know about it. They tend to come out blind, go back. You know, there's nobody coordinating whether or not they might want some help with parenting skills, or child care, so it's often very difficult.

And I know it will sort of take us off the track a bit, but what happens to women also, in our observation, is that it's like the children and family visits are used as punishment, and so the children have often felt punished, and the families, as well as the woman. If a woman misbehaves in Belconnen Remand, they'll cancel the family visits. And I guess one of the things we'd be saying is that I don't think that assists that generational impact—that it would be much better that that's a given, regardless of the behaviour, because otherwise you're punishing the family. So often there are some very upset children and family members who have been also punished by the system, so there's quite an alienation in there, and I think that's something that's missing and that case management would actually fix.

**MR CORNWELL**: Bridie, you say that women often discourage visits from their family. Now, who ultimately decides on whether the visit takes place or not, leaving aside the cancellation—

**Ms Doyle**: Either or both. Women can decide, and they do decide sometimes, not to because of the impact of strip searching, they feel like their children are being punished, and so they won't have them in—

**MR CORNWELL**: Then that has an effect upon the families if they want to see their mother?

**Ms Doyle**: It does, and it works the other way as well—the visits being used as a punishment if women misbehave. It's both.

**MRS CROSS**: Bridie, is there a separate women's section at the remand centre separate from the men? Secondly, I noticed from your submission that there's strip searching that's done for people that go in to visit. I assume it's because they're worried about illicit drugs coming in?

Ms Doyle: Yes.

**MRS CROSS**: And, thirdly, I noticed you said that 82 to 86 per cent of the women that are incarcerated are there for drug offences. What happens to these women after they've left? You said that the terms go from four or five weeks to three months. What happens to them after they leave?

**Ms Doyle**: Not very much. They tend to go back to—either get moved on to the prison system in New South Wales—

MRS CROSS: So how many are repeat offenders?

Ms Doyle: Lots.

**MS DUNDAS**: I was just going to ask a little bit more about what you said in your submission about Quamby and the programs that you need, and it does overlap also a little bit with what you said about the women in BRC and the individual workers there and how their attitudes can mean so much, in that sometimes when children come to visit BRC they are allowed to touch their parents and at other times they're not.

And you are running two programs, I think, out at Quamby, and one went really well and the other one didn't. Can you elaborate more on those two points and what you think needs to be done so that the system will always work irrespective of who is working it.

**Ms Hellec**: Maybe I can answer the first one about what the women are saying—because I haven't been involved with Quamby. Women said there was a confused message from the officers from the Belconnen Remand Centre to the families that visit, because there's no consistency, and the kids were very sort of—one visit they touched their mother and then another visit they don't. That means it wasn't very clear and they were asking that, to be clear—there's no consistency really. And also, if the kid needs to go to the toilet, that means they have to finish the visit. There is really no flexibility.

The rules are like that, but maybe when there's families and kids they must be more flexible. That's what women were saying. And also there is a lack of information. That means the family doesn't know when the visit has been cancelled, and sometimes one of the grandmothers with three kids has had to organise the transport and the kids, and they just get there and the visit has been cancelled—no-one has contacted the family to say, "Don't come," or whatever.

**MS DUNDAS**: Do you find also that the women don't know their rights within the system so they can't—

Ms Hellec: Yes.

**MS DUNDAS**: For example, if the rules say that you can actually hug your child, they don't know that so they can't argue with the officers about that right. So, besides the support for the families, I guess we also need a greater education program for people in incarceration themselves about what's going on.

MRS CROSS: Because there seems to be an arbitrary approach to this there.

**MR CORNWELL**: Are attempts made to smuggle drugs into Belconnen Remand Centre?

Ms Doyle: Attempts, and successful attempts, to smuggle everywhere.

**MR CORNWELL**: And are children used?

Ms Doyle: Sometimes.

MR CORNWELL: Yes, I'm trying to put a balance on this-

Ms Doyle: I know, yes.

MRS CROSS: That's why they're strip searched.

MR CORNWELL: Exactly.

MRS CROSS: On everybody.

**MR CORNWELL**: And I'm trying to put a balance on this; it's not necessarily being done out of—

MRS CROSS: Spite.

MR CORNWELL: Spite.

**MS DUNDAS**: Yes, but consistency is what is lacking. Can you explain more about the programs you are running at Quamby?

**Ms Doyle**: Yes. They are about providing drug and alcohol education to the young people. The big difference, I guess, between the two is that I think, like anywhere, there are some really dedicated, wonderful workers who really like young people and like doing the work that they're doing. I think that that always can get a bit hard in an institution that brings a history with it, and any institution carries its own ways of being, I guess. And what happened for us in the first one of those was that we had an incredibly fabulous worker who was very keen on the program, and, I guess, on the young people getting what they might need. And so what happened with her involvement was that she was basically out of the picture; it was very much us and the young people without interference.

On the one week in that where we had the—what do they call them now? What are the officers called? I just can't remember their title. But anyway we had an officer in the room—

**THE CHAIR**: If you can't remember the title of the officer, Bridie, there's a problem in that—

**Ms Doyle**: No it's only that they just changed it. I think they're called youth workers rather than custodial officers. I was trying to work out whether that term is going to explain to you what I'm trying—

**THE CHAIR**: We have a nod in confirmation from the gallery. Thank you very much, Mr Matthews.

Ms Doyle: So I should then say "Quamby employed youth workers", because in fact we're youth workers, and it's a very different position. On the weeks where they were

present, which wasn't often, the young people were so shut down. The difference for us was incredible. And so that shut down one or two weeks, but what happened the following one was that there was nobody coordinating it, some weeks we'd have 12, we'd have pretty much all of them, and then the next week some of them who wanted to come back weren't allowed to come back. We certainly didn't have explained to us why that was. I certainly felt that some of the people, including the teacher out there, were quite hostile to the way that we worked and to our presence in the space that she was in, whereas none of that happened on the first program.

And the outcome of that first program, I think, was fairly good. The worker that I did that with, the youth worker from Open Family, still sees some of those young people and certainly at least a couple of them still talk about what it was they got out of that first program. So I think that there was a real difference around how it was managed. Having one person in there who was really supportive of it, and supportive of the young people, made all the difference. It was very hard to do it in that context in the second one.

**MR CORNWELL**: How do you get on with families of people in custody who are in denial? I mean, you see it all the time. If something happens and you've got somebody saying, "No he's a good boy, you know. He'd never have done anything like that", and it turns out he's chopped half a dozen people up with an axe, how do you deal with this problem? When they come out again, what, has it all been a terrible mistake, a miscarriage of justice? It hardly helps with the rehabilitation.

**Ms Doyle**: But that's true of most of the work we do in drug and alcohol—you're working with varying levels of denial basically. And so I think you have a whole repertoire of skills that are around starting to make some inroads into that denial. There's a whole range of techniques you can use, and it depends on how much denial there is, but I think that's probably a huge part of our workload in general.

**MR CORNWELL**: And, getting back to the terms of reference, the support services for families of people in custody, is this a problem if the families themselves don't believe the person should have been in custody?

**Ms Doyle**: To some degree, and I think it's that thing that I guess I started with. I'm not saying we know the answers, but I think the bit we're missing is the generational aspect—that these are families that are consistently going through—and it doesn't seem to me that there's much work around interrupting that. We need to put more effort into trying to break that, which would be educating the families as well about what they might be doing. I think there's a whole bigger picture.

**THE CHAIR**: Can I explore this in the context of the terms of reference and support for families, Bridie. The women that you see in BRC are in there predominantly for trafficking, or drug offences. Is it true to say that often these people are not doing it in isolation from other members of their family, or their extended family? It's actually the context of it, if anything—

## Ms Doyle: Yes.

**THE CHAIR**: And in that context there are kids involved in that environment. While the person is in jail, or about to come out, are you aware of any services that are brought to

bear to change the environment from which these women come, and into which they're likely to go when they get back? And is that lack of a change of environment a contributor to the recidivism for these women?

**Ms Doyle**: Yes, I'd agree with all of that, and I think it's really difficult. Certainly the statistics show that women are introduced to particularly the hard drugs—which is what we're talking about for most of these women—by male partners, and the biggest predictor of whether or not they can change their life from that is whether or not they're still with the using partner. So there are a whole lot of connections in there that I don't think people are doing much work on. Certainly we try, which is why we go in there. And part of why we go in there is to link them up with us when they get out so that they don't go out without some level of support.

MRS CROSS: So it's just band-aid solutions.

## MR CORNWELL: Of course.

**Ms Doyle**: Yes. But certainly we're picking them up a lot when they come out—like it really is that we're seeing them again.

**THE CHAIR**: Can I explore with you something that Ms McGregor raised with us just at the end of the session with her, and that is the possibility of a lack of safety when a person comes back out and the person is likely to re-offend, but in the context of the family unit. Is this a problem for the women returning to the family unit? They get on the rails okay because the supportive programs work. I don't know. I didn't get this answer when I went to a couple of women's prisons; I didn't actually ask this question. Is fear one of the drivers which makes them re-offend when they go back—they go back into an environment and they are basically told, "This is the way it's going to go"—the fear for their own safety and the safety of their children?

**Ms Doyle**: Some of it, and some of it is that we don't have a particularly—certainly the American term we'd use it for would be co-dependency. There's the relationship—and it is true of any domestic violence or any other dysfunctional relationship—and the dynamics are incredibly difficult to interrupt.

I don't know that fear is the only motivating factor in that. Often it is that these women, from the lives they've had, don't see themselves as being worth anything without the male partner; they're really dependent. There are some really dysfunctional ways of seeing that relationship happening, and so some of the work we do is about trying to have a look at that and interrupt some of that dynamic. Most of the women we'd see would have a history of picking fairly damaging and abusive relationships.

**THE CHAIR**: Now, while they're in the jails and they're working with your group and groups like yours and they're starting to get their life together, do they express to you about the environment from which they came, and in which their kids are still sitting, that they are afraid for the safety of their kids? And is there anything there to look after the kids while they're there?

**Ms Doyle**: No. The children are very rarely with the male partner. If the woman is incarcerated, the most likely place they would be is with her mother.

THE CHAIR: So, in fact, the kids are a bit better off because of that?

**Ms Doyle**: Well, except that that's the family that produced this person as well, so in some ways the dynamics are still going to be there. I mean, there's a different relationship between parents and grandparents, but it's not that direct. It's much more the culture that that slowly breeds.

**THE CHAIR**: This is the problem of the extended family being the issue that we as a committee should be addressing—the need for services for the extended family and not just the immediate family.

Ms Doyle: Yes.

**THE CHAIR**: And am I correct in assuming that it also applies to significant others who are not blood-related in that extended family?

Ms Doyle: Absolutely.

**MR CORNWELL**: On that very question, with the incarcerated one's mother or family, in a practical sense, what happens in terms of social security payments and suchlike? Are there delays? Let's say the mother's been getting the welfare and then she goes to jail. What happens now?

**Ms Doyle**: There'd need to be a swap of the child payments, and none of that's happening very smoothly. None of those systems work together very well.

**MR CORNWELL**: Why not?

**Ms Doyle**: I think because they're so busy surviving in their own environments that it's hard to see the connections.

MR CORNWELL: Okay, so what do they actually have to do? Take me through it.

Ms Doyle: I'm actually not sure.

**MR CORNWELL**: Right, so they presumably have to get permission to transfer the money. You see what I'm saying—

Ms Doyle: Yes.

**MR CORNWELL**: Suddenly grandma is left with two or three children and there's no welfare assistance coming in because—well, I presume it's still going to the mother. I'm just wondering what the mechanics of that are. Perhaps we could explore that, Mr Chairman?

THE CHAIR: We might explore that with the department in terms of mechanics.

**MR CORNWELL**: Yes, if you wouldn't mind, because I think it might be important particularly in terms of the time it takes. You don't want somebody waiting around a month or six weeks.

**THE CHAIR**: Yes, indeed. If there are no further questions, thank you very much for coming in, Bridie and Paulina; it's been most useful.

## Sitting suspended from 10.42 to 11.05 am.

## **DANIEL STUBBS** and

## KAREN NICHOLSON

were called.

**THE CHAIR**: Thank you very much for sparing us the time to come to the hearing. Although you've been to many hearings before, you know I have to read this card.

You should understand that these hearings are legal proceedings of the Legislative Assembly and protected by parliamentary privilege. That gives you certain protections but also certain responsibilities. It means that you are protected from certain legal action, such as being sued for defamation for what you say at this public hearing. It also means that you have a responsibility to tell the committee the truth. Giving false or misleading evidence will be treated by the Assembly as a serious matter.

Thank you for the submission from ACTCOSS. The proceedings are being recorded for Hansard purposes. They are reticulated through the building and through some public service offices.

We will ask you to make an opening statement and see where questions take us from there. When you first speak, please identify yourself on the microphone for Hansard and state the capacity in which you appear before the committee. We now invite you to make an opening statement.

**Mr Stubbs**: My name is Daniel Stubbs. I am Director of ACTCOSS—the ACT Council of Social Service.

Ms Nicholson: I'm Karen Nicholson-Senior Policy Officer for ACTCOSS.

**Mr Stubbs**: The submission was a fairly long one, so I'll give some of the highlights for the committee and then we can discuss it. It was a joint submission from ACTCOSS and the youth coalition. I understand you'll be hearing from the youth coalition separately, so I'll leave a lot of the issues they've raised in respect of young people for them to discuss with you.

We convene a group called the ACT Community Coalition on Corrective Services, of which the youth coalition is part. We drew on that group heavily. The group is made up of a range of service providers—church groups, prisoners aid and other interested parties—in the corrective services area and is of about 12 or 15 people.

Let me raise a few important issues. I believe it's important to recognise that probably a key issue we need to consider in services is the mental health of all concerned, whether it be the person who is incarcerated, or indeed their family. We have also raised the idea that the Assembly needs to consider the issue of the rights of inclusion as part of a community. That's especially important for families of people who are incarcerated and, indeed, what their rights may or may not be at that time. We'd like to see the services for prisoners managed in a through-care model, which is often talked about—not only with regard to the prisoners but also their families. It's important to involve the families in those sorts of processes in the entry into prison—and particularly when leaving prison. Those transition points are absolutely crucial.

Families have recognised the need for more information on a range of issues. I refer to basic things such as the services available to them as families, and indeed, family members and information on the rights of the family member who might be in custody. If they know their rights, this will allow family members to understand their rights to access, the rights of the family members and the rights of the families themselves.

Transition points are crucial in any area of our community. Whether we're talking about people making transitions in and out of school, through into employment, or in and out of unemployment, transitions are crucial. This is probably one of the most crucial ones. When we're talking about people who lose or regain liberties, we need to make sure that the transitions are carefully managed. When a person is making the transition between prison and going back into his or her family, it can be incredibly disruptive and can cause breakdowns. In our view, that area needs to be case-managed extremely carefully.

Similarly, if people haven't got good housing or accommodation to go to and don't have a family—they may have a family but don't necessarily have a place to go back to—we need to make sure there are halfway house-type models for prisoners to go to, so they don't have to rely on an inappropriate situation.

If they don't have somewhere to go back to because the family's accommodation isn't appropriate, they might end up remaining in custody. That isn't appropriate—we want people out of custody. Therefore, the idea of different forms of halfway houses, located in different places around Canberra, is most important.

Travel costs for people incarcerated in New South Wales are obviously important. We often have people located in remote places. Even Goulburn is hard to get to, for a lot of families, let alone places much more remote than that. We need to make sure that families can get to visit their family members who are incarcerated, to maintain relationships.

Similarly, we need to make sure that prisoners can travel back when they're released. We're seeing a situation where, often, people are released from a prison and that's it. They're taken from the courts in Canberra and eventually let out of prison somewhere in New South Wales. They should be brought back to where they were first taken from, even if they are just brought back to the Supreme Court.

**Ms Nicholson**: That's an issue for the families. They get very little notice of release and, quite often, are unable to make appropriate arrangements. That cost falls back on the family, and that person's extended family. That is highly unfair, given the short notice they get to meet those expenses.

**Mr Stubbs**: In many ways, I think New South Wales corrections has a responsibility here. We think we could be a bit stronger with that department. We recognise that we are paying a fair bit of money out to New South Wales corrections, and that they have

a responsibility to the ACT, as their client, to ensure families aren't having problems in trying to visit their family members in custody.

That would ensure the wellbeing of the prisoners we have under New South Wales corrective services. As Karen was saying, it would ensure that full information is well and truly advised to the family—for instance, when a prisoner is moved from one prison to another. It can be quite stressful if they find out after the fact. It should also be well in advance of when the release is happening—and how that's going to be managed.

We need to also make sure that all of what we're talking about goes towards ensuring we have the best practice prison in the ACT, when that happens down the track. This isn't the first report to be done on issues relating to people in custody. We'd like to see the committee recommend that all this be taken up in the development of a prison. All of this is most important. By far the majority of what we're talking about is consistent with what would need to be taken into account in the development of an ACT prison.

**MR CORNWELL**: We would have to make the same arrangements for New South Wales prisoners incarcerated here as we would hope would be made by New South Wales for our people?

**Mr Stubbs**: Absolutely, yes. All these arrangements would need to be taken into account for our own prisoners, except for maybe taking into consideration that the travel costs aren't as great—or the travel issues aren't as great. There are all the other issues of families having access. It is important that the through-care considerations are taken into account.

**MS DUNDAS**: I noted in your submission the need to renegotiate the contracts with New South Wales with regard to correctional services—and transport is one issue you've raised. What other issues do you think need to be made stronger in those contracts?

**Mr Stubbs**: Prisoners aid is certainly the organisation to discuss this with. With families seeking access to visit family members who are a long way away, a certain amount of flexibility needs to be provided to people when they have to travel. It's hard enough to visit someone in prison, and withstanding all the emotional stuff around that. This promotes a measure of flexibility around supporting ongoing relationships between family members. If there are children involved, that's another difficult dimension to be considered. In many ways, we're passive in our relationship with the New South Wales corrections system.

**THE CHAIR**: That might be the nature of the contract, which will come to a conclusion when the new prison turns up.

MR CORNWELL: What happens if we have an ACT person in jail in Perth?

**THE CHAIR**: There's an arrangement for that person to come back to New South Wales—in the interstate exchange legislation we passed through the Assembly.

MR CORNWELL: How long is it in-between? When do they come back?

**THE CHAIR**: They make application to come back and it's considered by the New South Wales corrections people. There is an interstate prisoner exchange program in legislation—and the ACT is party to that now. The legislation is only between 12 and 18 months old.

**Ms Nicholson**: The other issue there is that, if somebody is in jail in Perth, it would be an arrangement after a conviction in Perth. We're talking about people in the ACT being taken away to prisons and, at the discretion of New South Wales prison authorities, moved around New South Wales without much notice.

There's no control by the prisoner. It's not like he or she committed the crime in New South Wales—or they may they have committed it in New South Wales. It is the actions of the ACT courts that we're fundamentally commenting on here, not that they're convicted in other jurisdictions. Of course the act then comes into play.

**THE CHAIR**: To return the focus to the terms of reference, there is a temptation to talk about the plight of the people who are incarcerated, but that will be the subject of debate in another area.

I'd be interested in your comments on the notion that, in respect of public policy, program development and community attitudes, the focus is on the person who's incarcerated, the plight of the primary victim—and sometimes the secondary victim, being the immediate family of the person who suffered the crime—yet there is no public policy focus, no program or procedural coordination for the wellbeing of the family of the people being incarcerated. What do you think of that notion?

**Mr Stubbs**: We're in a good position to consider this, because they're the people who are left in the ACT. In many ways, we have the most ability to respond to the needs of those people, to ensure that they are supported. It's one of the things we can work on in the ACT—to build a proper policy situation, and programs to enable that.

One of our recommendations talks about the need for a coordinating body to take responsibility for this. It's one of the areas we can see falling between the gaps of departments. Corrections say, "We look after the prisoners." There is health and community services, but who takes responsibility for it? It's probably something we, as a coordinating body, need to identify—and take responsibility to make sure that these people are provided with the services they need.

**Ms Nicholson**: This is a new area of public policy research. The research attached to our submission is leading-edge stuff. There's been little done in the past about support mechanisms. Nevertheless, it hasn't been picked up in public policy because there is an increasing law and order debate, escalating every year—about incarceration and getting people off the streets. That fails to recognise that rehabilitation is the best way of preventing recidivism and that the best supports in a rehabilitation program are the person's support network—their family and the people who care about them.

Up to this stage—it's still very much a punishment regime—we send people to jail to punish them for what they've done. That is supposed to have some restorative value. However, most of the research on the prisoners—the people who are incarcerated—has shown that it doesn't have restorative value.

Until we recognise the ways of the early interventions and the other policy parameters that help to cut down recidivism, we don't have a policy debate about the support networks for people who are incarcerated. It is a brand new debate. It's an area which has only got currency since the expense of incarceration has become an increasing burden—with the escalation of the law and order debate.

**MR CORNWELL**: Can you give me any practical examples of the support services for the families of people in jail? I presume that, for many of them, there would be the usual welfare net that they could tap into—or perhaps they're already in it, given that many of these people are already on welfare and perhaps commit crimes then. What other practical assistance can you see to help families of people who are in jail?

**Mr Stubbs**: I think it will be quite varied, because we need to consider it as a needsbased thing. It is a great challenge when people are released and going straight back into a family. It can be most volatile when people have been separated for a long time. Both parties will have changed in that period.

We need to provide case management. That might involve everything from relationship counselling right through to providing some alternative forms of accommodation before going back home, because maybe returning home straightaway isn't the best first step. That would depend on what's been happening at home while the person has been incarcerated. There's a range of things. It needs to be focused on what's happening for those two groups.

Similarly—again on a practical level—it's about making sure contact can remain with either the family members or the children. It's no great statement to say it's very isolating for both parties.

#### MR CORNWELL: If required?

Mr Stubbs: We can't force people to get together and talk to each other!

**MR CORNWELL**: No. That's the point. It has come forward that some people simply don't want contact anymore.

**Ms Nicholson**: But there's also the issue that you've got two damaged people—and you have to work with them, through their issues. If there's a chance of reconciliation, we still see the family as being the best—even if they're not living together. Re-establishing some of those connections is still shown to help in cutting down recidivism rates.

We're also talking about a cohort of people in the ACT who often spend all their time in the Belconnen Remand Centre—so that, by the time they're found guilty of an offence, they're deemed to have served enough time in that facility to have served a sentence. That can be soul destroying, because of the problems that go with it. Governments on both sides have said it's an inhumane place. By the time those people come out—even if it's only for a short period—they have been exposed to things to which their families haven't been exposed.

There are counselling roles there. There is, in the first instance, information for families. Many families go through this only once—they don't go through it again. They don't know what impact it's going to have on their entitlements to benefits, their employment, finances and housing. So, in the first instance, there's quite a deal of information that families who come into contact with the corrections system—through their relatives—need to know.

**MR CORNWELL**: One of the things which has come up here is the fact that people have gone to jail for child abuse. The fact is that the other partner doesn't want to have anything to do with them when they come out, because of the fear that it will be repeated.

**Ms Nicholson**: That's understandable. However, in those circumstances, there is a wider family network which might be able to help them. We're not talking about returning them to abusive situations like domestic violence, violence, or family disputes. Of course, I would expect that people in those situations—because of the traumas—would have access to services through the Family Court.

**THE CHAIR**: That's the point we're trying to check out, in the context of this inquiry. With the services which provide support to a woman who's got a child at home, firstly, do those support services exist while the person is incarcerated; secondly, do services exist to help her in the transition, when the guy is about to come back; thirdly, do services exist to help them physically and emotionally prepare for the possibility of this happening—or to prevent it? Lastly, is there any coordinating system to facilitate all of that? In other words, is the focus all on the person being incarcerated, and not on the family unit that's sitting there?

**Mr Stubbs**: One of the problems is that there is a large focus on the person being incarcerated, but they're still not being well supported.

**THE CHAIR**: That's a debate for another day, isn't it?

**Mr Stubbs**: That's right. Let's not pretend everything is happening for that person. Putting that aside, no—I don't think those supports are there. As I said before, those transition points are crucial but not being supported. It's extremely difficult for the kind of people we're talking about.

**Ms Nicholson**: It's often reliant upon the person's own abilities to attract those services to themselves. Women who are competent, well informed and highly educated will probably attract those services, not other people who don't have those skills and those moneys.

THE CHAIR: How many of them do you think there are?

**MR CORNWELL**: What percentage of the people are they? That's the real point, isn't it?

Ms Nicholson: A very small percentage!

Mr Stubbs: Particularly with this group.

**Ms Nicholson**: Yes. I was at a forum for the review of the Children and Young Persons Act the other day, where somebody who should know said there was something like a sevenfold increase needed in Family Services—counselling and support services before they could meet the workload they face.

In light of those realities about how much you've got to do for people, decisions are made. The Family Services people put a great emphasis on children who are the victims of abuse, but the pie runs out eventually. It's a matter of who can access those services. It tends to be the ones who are better educated and better resourced overall.

**THE CHAIR**: To pick on something you mentioned earlier, Daniel, when talking about the new prison, you mentioned the policies. Karen, you talked about rehabilitative processes in a restorative justice philosophy. When they come, we'll be checking out with Corrective Services the extent to which the policies and programs which should be introduced into the prison—when it's built—comply with restorative justice principles.

I'm interested in your view on something that I think you were trying to tell us about the role of the family in being a rehabilitative tool. The role of the family as a "tertiary victim" has to be an integral part of the overall policy and procedures we introduce into our new prison. We ought to be doing it now.

**Mr Stubbs**: That's right. None of us around this table are naïve enough to think we can say, "You're part of this rehabilitation and you're part of this person's ability to come back into society." The family will undoubtedly already be damaged in some way, or in many ways. So we need to work with them to make sure they've got the strength, capacity and networks themselves—beyond the incarcerated person—to provide support—and ongoing relationships.

**Ms Nicholson**: It will be a sliding scale. There will be families who won't want anything to do with that—those who will want to do things their own way. It needs to be facilitative, not just a suite of things that you can go and get, should you need them. It has to be facilitated and active.

**THE CHAIR**: You mentioned the words "case managed", didn't you?

Ms Nicholson: Yes.

**MS DUNDAS**: In your submission, you have a whole section about unemployment benefits and family care benefits. You say that, when one partner goes into jail, it changes the income stream and also the support benefits they can get from the federal government.

You also noted, at the bottom of that section, that only about 38 per cent of periodic prisoners in the ACT have employment—and then there are 60 to 70 per cent who don't have any form of employment. So they were living in poverty before they were incarcerated. That would have flow-on effects for their families.

How do you see that we should address that concern? Not only is the person going into custody usually one of the primary income bringers-in, he or she is actually already in poverty. So they're leading an impoverished family to a greater level of impoverishment. You've already noted that these are people who don't always have much faith in the system. How do we approach the issue of getting people to return to work, or helping the families which are left behind to get out of poverty? It is a big-picture question!

**Ms Nicholson**: I'd say a wide suite of services. This is also one on which prisoners aid could probably comment. There need to be points of trust where they can get into these services. That is one of the things we've recommended—that people have information from the time they hit the courts. This is one of the things that leads to the worst possible financial outcomes. People don't recognise that they're going to lose benefits, that their benefit will change with their employment status—and that there are waiting periods.

That financial information has to be up front for them. Even if it's only a remand period, the family can suffer financially for the month or two that people are in remand, and might not recover from that.

**MS DUNDAS**: If a mother is incarcerated, she can't transfer her child support payments to somebody else who's looking after the child, and there are no benefits following through to support that child.

**Ms Nicholson**: Quite often, those children end up in the care of female relatives, rather than the father or partner.

**Mr Stubbs**: I think we've shown, from January this year, that as a territory we can cope with crises on a massive level. These small crises happen every day. The case management response used in the fire recovery centre has been proven to be a valuable approach to talking with affected families—asking them what they want and need.

Several will say, "Nothing." Others will take some time, but you'll realise that they need a wide range of support too. It's about asking people where they're at, what their needs are, and trying to deliver in different ways. There has to be a wide range of things.

**THE CHAIR**: Wasn't one of the many successes of the bushfire disaster that, soon after it happened, there was a show bag of support services given to each of those people? They knew that, whatever facet of the disaster was affecting them the most, they had somewhere to go to fix it.

What I'm hearing is that, when a person is sentenced by the courts, the victim has some support because their support has usually kicked in before that. The incarcerated person gets systemic support if rehabilitation starts to kick in. We then wave goodbye to the family, as the person disappears over the border.

**Mr Stubbs**: After the fires, it wasn't just, as you say, a show bag of support—it was more active than that. After a while, it was realised that it wasn't enough merely to say, "All this is here." We started up a model of active case management, and families were all actively contacted. The individual support system in cases of crisis has been proven to be the way forward.

MRS CROSS: Do you mean the follow-through is there?

### Mr Stubbs: Yes.

**Ms Nicholson**: At the moment, the person has to find their own resources. The person they rely on, in the first instance, is usually their legal counsel. The legal counsel's job is a completely separate one. They might know, but they might not know. If you're talking about legal aid, they just rotate through court. As much as they might like to, they don't get the time or the funding.

**THE CHAIR**: Doesn't the counsel, though, have a client relationship with the person in strife?

Ms Nicholson: Yes.

**THE CHAIR**: They don't necessarily have a client relationship with the family or the extended family?

Mr Stubbs: That's true. That's all the family has.

**Ms Nicholson**: No. Usually all the family has is the legal representative and asks, "What do I do now? What does this all mean?" We're saying that's not an appropriate relationship. It's certainly not comprehensive enough to give everybody some kind of level playing field—to get an idea of where they are and what the incarceration of their family member means.

**MS DUNDAS**: You spoke about active intervention and active case management. We understand that, if a parent is incarcerated, then Family Services has an obligation to check, to make sure the kids are not in an intolerable situation. We understand that that's an automatic thing—we're not necessarily hearing that it's working. Do we need to expand on that and set up a support service which has an automatic role to step in and see the family?

**Ms Nicholson**: I believe you also have an obligation, when that person first appears before court, to ensure that what is going to happen is discussed with them—the worst outcome. Often, when they arrive for their sentencing, that's the first time anybody addresses with them what's available, or what's going to happen after they're incarcerated.

MS DUNDAS: So it should happen from there?

**Ms Nicholson**: That's why we recommend a court-based service—so that people can make inquiries from the day they turn up, when they're told, "You're facing this charge. This will be a simple appearance. You've got to plead either guilty or not guilty." From that point on, the person needs information about what is going to happen and what the potential outcomes are—not once they've got their sentence. There must be early intervention. As I say, at that point, it can simply be information that is needed.

I'm a subscriber to a group called Beyond Bars that was set up in the lead-up to the New South Wales election. They've recently sent around some stuff. There's more work happening on families of people in custody interstate. There were instances of parents

going into custody and refusing to tell Family Services where their children were, because their mistrust of the services is so deep.

For those people, there needs to be a degree of reaching out to their extended family to say, "Here's how we can access services. If you have these people's children, we can extend these services." Some of the barriers, where there is a strict definition of who's eligible to obtain the services, need to be broken down.

A number of people go in with no identifiable immediate family, but they have a longer and more diverse social support network that will serve as their family for the time they're incarcerated. They're the ones who might need the information. The person in incarceration isn't going to be able to hold a dialogue with a facts person in the courtroom. If that service is established, people in the wider family network can go in and get more information.

**MR CORNWELL**: It is difficult, isn't it? You've got big privacy problems there. You've also got the presumption of innocence and yet you're going to be telling people in advance, "This is what's going to happen if you're detained."

**Ms Nicholson**: No. They can discuss the possible outcomes, and the supports available. We say that, "Should this eventuate, this is what we usually do. Should this eventuate, this is what we'll do." The same thing happened after the fires, when people were saying, "Should your partially—damaged house be deemed to be unliveable, we will find these sorts of supports for you."

MR CORNWELL: There was one important difference with the fires.

Ms Nicholson: There are lots of differences.

**MR CORNWELL**: Eighty-six per cent of the population don't believe that the law is too soft on crime. We had 100 per cent support out there for the victims of the fires.

**Ms Nicholson**: If we're going to end up with a community that says we've got to lock up more people, there will be greater need for these services. This is sometimes an argument they don't understand about the value of locking people up.

We live in a society that was born on convict ships—the ACT is a great example of still exporting our convicts—so we don't think about these things. These are our people, not somebody else's.

**MRS CROSS**: I think that's a misconception. Everyone likes to promote that as the case, but most white Anglo-Saxon Protestant Celtics were not convicts. It's just that it's been promoted that way and it's a convenient excuse. Some states were free of convicts.

**Ms Nicholson**: It's something about the corporate identity and the way we've told our stories over time—that's why we identify with them.

**MR CORNWELL**: The fact is that 86 per cent want people punished for their crimes. We saw it in the *Canberra Times* last week.

I accept there are certain areas where community service, home detention or something would probably be a lot easier, if you were dealing with civil offences—failure to pay parking fines or something like that. The fact remains—and we must never forget it—that many of these people have committed serious crimes, and they need to be taken out—off the streets.

**Mr Stubbs**: Mr Cornwell, we're talking about their families—we're not talking about them!

**MR CORNWELL**: No. This is the point I'm making: we have to be careful within this that we don't concentrate—as you said earlier—on the person who is locked up. We've got to look at the families and what can be done. I raised the question of the waiting time before, and Roslyn Dundas referred to it. Do you happen to know what the waiting time is for welfare payments to be transferred from one person to another?

**Ms Nicholson**: I've heard that it is four to six weeks, in some cases. But I understand Centrelink dispute that and say that they can do it quickly—almost immediately—and that they can get a counter payment.

Mr Stubbs: In an emergency, yes.

MR CORNWELL: Well, that's a start.

**Ms Nicholson**: We're not disputing that people get locked up or that they're remanded in custody. Those are legal issues for areas in other debates. There is a real cost if you want the best outcome and you want a community that is safe, with people obeying the laws. That means going down the path of rehabilitation—and that's an expensive one.

**THE CHAIR**: Do you mean rehabilitation as a component of the restorative justice principle, or as a stand-alone notion?

**Ms Nicholson**: No, they're all interactive. I would never say there's a stand-alone principle. These things are all intermeshed.

THE CHAIR: Thank you very much.

### JULIE TONGS and

# KACEY BOYD

were called.

**THE CHAIR**: Welcome to the hearing. I will have to read this card out—you have probably heard it before but I'll still read it out. You should understand that these hearings are legal proceedings of the Legislative Assembly protected by parliamentary privilege. That gives you certain protections but also certain responsibilities. It means you are protected from certain legal actions such as being sued for defamation for what you say at this public hearing. It also means you have a responsibility to tell the committee the truth. Giving false or misleading evidence will be treated by the Assembly as a serious matter.

A couple of things: firstly the lights indicate that these proceedings are being recorded for Hansard. We will give you or let you see a copy of the transcript to make sure that you are happy with what is written. Also what is being said is being reticulated through the offices in this building and the offices of certain senior public servants, who are able to listen in if they feel that they want to.

Before you speak, could you tell the committee your name, the organisation you represent and the capacity in which you appear. This will appear in the *Hansard*. The hearing is predominantly about the families of people and the kids of people who are incarcerated, as well as the kids in Quamby. With that, I might invite you to make an opening statement and then we'll see where questions lead us after that. And welcome to Winnunga Nimmityjah.

**Ms Tongs**: Thank you. Julie Tongs, chief executive, Winnunga Nimmityjah Aboriginal Health Service.

Ms Boyd: Kacey Boyd, youth worker, Winnunga Nimmityjah Aboriginal Health Service.

**Ms Tongs**: Thank you for inviting me here today. Support services for families of people in custody is one of many issues that we are faced with every day at Winnunga. It's difficult for us just to focus on a particular issue. We are big on families but also when people are incarcerated we also like to know that they are getting properly cared for on the inside, and so do their families on the outside. So we can't separate inmate from the family because that's the way that we do our business. We take the holistic approach to whatever we do.

**THE CHAIR**: Before you go on, Julie, one of the things that we were talking about very early in the piece was what constitutes a family. And the normal mindset is, of course, mother, father, daughter, son, blah blah. It's occurred to us that in fact there are two other groups. There are the extended family, blood family, the extended ones, and it can go down to third and fourth cousins.

Ms Tongs: That's right.

**THE CHAIR**: But there is also the non-blood family. And I was just thinking that your community actually exemplifies that approach when we talk about the services to families of people in custody. Are those other two people left completely out of the loop?

Ms Tongs: No, no.

THE CHAIR: Not as far as you're concerned—as far as services to them are concerned.

**Ms Tongs**: Yes, yes, they are. And what happens is that we're often left there to pick up the pieces with no resourcing. I probably should go back a step and say that Winnunga Nimmityjah Aboriginal Health Service is a comprehensive primary healthcare service. We take the holistic approach to health, not the body parts approach. And therefore we work with the whole person—the social, emotional and cultural wellbeing; the body, mind and spirit, if you like. That's the approach that we take to all our issues. We don't separate one thing out from another.

We've got lots of issues for families. Transport is a big issue for our families to actually go and see people when they're on the inside, particularly if they're in Goulburn jail. We actually provide a service to the detainees out at Belconnen Remand Centre. Our doctor, Peter Sharp, goes out there. He has been with us for 14 out of 15 years. He actually does a clinic at Belconnen Remand Centre. But he not only sees Aboriginal detainees, he sees non-Aboriginal detainees, and that's really important. He also gets called to Quamby Juvenile Detention Centre.

My staff, the Aboriginal counsellors, youth workers and Gugan Gulwan staff, spend a lot of time in Gugan, BRC, Symonston, supporting inmates, taking family to see their people on the inside, and also taking money out for them to have buy-ups and all those sorts of things. We have become a transport service. When they're about to go into court we make sure that the family is there on the day and there's a staff member from Winnunga or Gugan there to support that family.

THE CHAIR: You get funding recognition for this, of course!

Ms Tongs: No, we don't.

THE CHAIR: Strange that.

Ms Tongs: No, we don't.

MRS CROSS: You have got to put a submission in to the government.

**Ms Tongs**: We are primarily funded for an Aboriginal health service. We have a comprehensive approach. It's not just about GPs—we don't just take the body parts approach. It's about Aboriginal counsellors. We have got a psychiatrist that we're still not funded for—a female psychiatrist that's there three days a week. Mental health and drug and alcohol are two of the biggest issues facing our communities. A lot of people use drugs for a lot of different reasons. Predominantly in our community it's about selfmedication; it's to take away the pain. A lot of our people have been born into poverty and their lives are just a cycle of the old revolving door—you are in one door. You start off and maybe come into contact with Family Services, then from Family Services it's Quamby.

MRS CROSS: Like a vicious cycle.

**Ms Tongs**: Yes. And then from Quamby you graduate to the remand centre, and from the remand centre you end up in Goulburn jail.

We are big on continuity of care, and that doesn't happen in mainstream here. We have our doctor and an Aboriginal health worker from Winnunga actually. We are funded to provide a clinic for Aboriginal inmates at Goulburn jail and we've got a memorandum of understanding between New South Wales Corrections Health and Winnunga.

A lot of what we do here in the ACT is best practice but it's difficult for us to be able to document that and articulate that because the resourcing goes into service delivery. So then I go begging. I'm up there trying to do all this. People want me at every meeting in town, and I'm one person to do all this without any PA or any support. But if you start taking doctors and stuff and send them off to diabetes meetings and all that sort of stuff then we're losing income because doctors generate income through Medicare. So that helps us—

**THE CHAIR**: So, Julie, in your health service funding you get presumably an amount to provide the services of Dr Sharp to BRC, Quamby and any kind of health perspective that you might like to think of. Whether or not it's enough is another argument. But there is a recognition that there is a cost to provide health services for incarcerated people in the ACT and you have just told us you've got the same arrangement with New South Wales for our people in Goulburn. Should it not also be the case that you're talking about the wellbeing of people—we're talking about the families of people incarcerated as being a victim?

Ms Tongs: That's right.

**THE CHAIR**: And the health of that victim ought to be resourced as well. But you're not getting anything from New South Wales to help the families either?

**Ms Tongs**: No, we're not. The thing is that we always do more for less—they're our mob and it doesn't matter. We're black 24 hours a day. We don't go home at 5 o'clock in the afternoon and think, great, I'm through that door and now I can just kick back. That phone starts ringing, the mobile starts ringing.

I'll give you an example of support for a family. We had a young man a couple of years ago that OD'd and was taken into the Canberra Hospital into emergency. Two of his brothers were incarcerated. One was out at the remand centre, one was in Goulburn jail. Another one was in prison in Queensland and there was a fellow up the north coast. That mother has got six sons and five of them are users. And this young fellow actually died. But in that process, at the Canberra Hospital we supported that family.

I actually rang James Ryan over at Corrections on a Saturday afternoon to see whether he would give permission for that boy in BRC to come over to the hospital to visit his brother. I've got a very good relationship with James and Frank and Corrections. He had

made a decision earlier that he wasn't going to allow that to happen but once I contacted him and asked him would he revisit that decision he actually changed his mind and said he could come. On the Monday I got into the hospital.

At midnight on Sunday night I got a call from a really desperate mother who was really, really upset. I actually made arrangements for the next day regarding the boy in Goulburn. The social worker left the office in the hospital and let us move in. So in a lot of ways they abrogated their responsibility. It wasn't my responsibility as a chief executive of the Aboriginal Health Service to actually have to do all those things. But we do do those things and it was really important for the boy in Goulburn jail to be able to come and see his brother. So that's just a bit of a snapshot of what we do. What happened to that family is not an isolated case in this community. We've got lots of families in the same position—no transport, no telephone.

We had a lad on home detention and his mother didn't even have a home. We were told by the courts to find him a home in two weeks for that mother. What happened was his mother's sister moved to Queensland, she moved into her government house and then we had to get the phone on for her so that that boy could have home detention. For respite he came over to Winnunga on Wednesdays and he just hung around with our mob and stuff over there so that his mum actually got out of the house and did some things that she wanted to do. I mean, it's not an ideal situation but it's the best that we can do at this time.

A lot of the services are lacking, a lot of these young people that are incarcerated have got young children of their own so that impacts on us all—it's not just on the family but it's also all the people on the outside; it's the people that are supporting the family, it's the workers at Winnunga. We're lucky that we've got such committed people and dedicated people that actually work at Winnunga because they are the backbone out there doing it and working with the families. It makes my life a lot easier that I've got staff that know what their job is. I trust my staff and they get on and do it.

**MRS CROSS**: Julie, it's good to see you again. I've been out to Winnunga and you've got an outstanding facility and you provide some great support. I really admire you. I have a couple of questions. Firstly, how many of the people that you look after come from New South Wales; what percentage? Secondly, what percentage of your funding is federal and what percentage is local?

**Ms Tongs**: We have quite a transient population, as you all know. Winnunga has 5,550 clients. We've always prided ourselves on the fact that we don't discriminate, so 700 of those clients are non-Aboriginal people, and often they're disadvantaged non-Aboriginal people that can't or won't access mainstream services. Probably, at a guess, I'd say maybe 10-15 per cent would be New South Wales or transient. Sorry, what was the other part of your question?

MRS CROSS: Your funding—federal Commonwealth versus local.

**Ms Tongs**: I reckon 90 per cent of our funding comes from the Commonwealth—90 per cent Commonwealth and 10 per cent ACT.

MRS CROSS: Okay.

**MR CORNWELL**: Just following up on that before I get to the next one. So 10 per cent is ACT but you say that you have got 10 per cent of people who are transient, possibly New South Wales, so New South Wales makes no contribution?

**Ms Tongs**: No, and this has always been an issue for me because I know that the Canberra Hospital is a regional hospital.

MR CORNWELL: Yes.

Ms Tongs: And there is an agreement with New South Wales.

MRS CROSS: There's a reciprocation.

MR CORNWELL: It's exactly what I was thinking.

**Ms Tongs**: And the same with Goulburn jail, but there's never been a contribution, we've never been written into those agreements.

MRS CROSS: Have you asked for it?

Ms Tongs: I have on many occasions.

MR CORNWELL: We'll make a note of that. That's an important point.

MRS CROSS: Can I ask for how many years you've been asking to get that looked at?

**Ms Tongs**: I've been asking since I've been the CEO, the chief executive, of Winnunga and that's—

MRS CROSS: And for Hansard, how long has that been?

Ms Tongs: Six years.

MRS CROSS: Thank you.

**MR CORNWELL**: Could I just follow up with the question I wanted to ask actually— I'm surprised I haven't asked it before or others haven't because it's not a matter of black or white, it's a matter of people.

Ms Tongs: That's right.

**MR CORNWELL**: What do you do with people who are in for a long time, say 20 years, in terms of assistance for their families?

**Ms Tongs**: I guess in a lot of ways we're family. We talk about that extended family. People often latch onto us and we become their family, their extended family.

**MR CORNWELL**: You would need a longer-term infrastructure, wouldn't you, and you would need probably a much stronger one if somebody is in for 20 years?

**Ms Tongs**: That's exactly right. Our community becomes pretty resilient around a lot of this stuff and the support—

MRS CROSS: You mean they just get used to it and just continue, Julie?

**Ms Tongs**: Yes. We get knocked down and we get up again and we go again. We just struggle and we fight. I think that we would have a lot more serious problems if it weren't for Winnunga and Gugan in this community, and not just for our own people but also for non-Aboriginal people because mainstream services don't cope well with things that are a little bit difficult.

### MRS CROSS: Such as?

**Ms Tongs**: Particularly when people have got mental illness or drug and alcohol and a lot of our people are locked up because of those reasons. This is instead of having services where we can address the real issues like why people are doing this. I'll give you an example. When people come out they've often got bail conditions or they're on parole and they've got requirements they need to meet. What will happen is we'll be contacted to say that they're out and these are their bail conditions or whatever and then if people don't turn up or they don't ring up or whatever they'll contact us. My staff will go out and find that person and they'll even use our mobile phone to ring up so that they don't breach their parole or they're not locked up again.

There are all the issues around Centrelink and other services but also with the parole a lot of the times now the magistrates are saying you have to go to anger management courses or you have to do particular things. Well, I had Relationships Australia contact me because a lot of our people are—that's part of their conditions—either turning up and not participating or they're not turning up and breaching their bail conditions.

# MR CORNWELL: Why is that?

**Ms Tongs**: They don't want to sit up there where there's a lot of non-Aboriginal people, even though they've all been in trouble with the law and that, and tell people why they're so angry—that they've been sexually, physically or emotionally abused as children and all those sorts of other issues. They want to talk to their own people.

**MR CORNWELL**: Have you mentioned this to the courts, by the way, because it just seems to me to be rather a waste of time if you're going to impose these conditions and it isn't going to work for something as fundamental as that.

**Ms Tongs**: Well, we try to change that. We have entered into a partnership now with Relationships Australia where Winnunga staff get trained to do the anger management. We work in partnership with Relationships Australia. It's kind of like a two-way learning and so it's more likely that if there's a program run from our service people will come. They will feel comfortable about talking, and they won't care if there's non-Aboriginal people there because—

**MR CORNWELL**: I'm with you. In other words, we're looking again at this middle class welfare being imposed upon people.

Ms Tongs: That's right, yes.

**MS DUNDAS**: I have a question for Kacey. As a youth worker you would deal with the kids who end up in Quamby and that's part of our terms of reference.

**Ms Boyd**: Yes, I deal with a lot of kids through Quamby. They contact me a lot when they're out so I deal with them while they're on the outside. But it is a lot easier dealing with them on the inside because they don't have any distractions. But I guess the worst part is that on the inside there's a lot of different issues that arise with them. Sometimes it's needing to work with Ted Noffs to maybe address the drug and alcohol issues; other times it's actually trying to work with Family Services, which doesn't happen often, to change a lot of these kids' bail conditions.

A lot of our kids are actually with Family Services before they enter into Quamby and are unable to go to their own home or back to a family member, so therefore they have to be placed into care of either another organisation or of a foster family. But most of the time we're getting a lot of youth refuges like Marlow and LASA and places like that. Our kids hate it; they absolutely hate it. They're just not appropriate to the way our kids are, so they're breaching bail straight away basically because they're doing a runner. So we've been trying to talk with Family Services for a while about changing some of the places where they actually send these youth.

MR CORNWELL: Where would you like them to go?

**Ms Boyd**: A lot of our kids actually, if they can't go with family, sometimes prefer to go to services out of Canberra which are Aboriginal identified and specific to their needs. But that's also very hard because a lot of the time Family Services won't allow them to cross the border.

**THE CHAIR**: Kacey, how many kids are we talking about, in a year?

**Ms Boyd**: We've got a high percentage of kids in Quamby. We can be talking up to five to 10 at any one time.

THE CHAIR: So you'd say that there would be about eight all the time?

Ms Boyd: Yes.

THE CHAIR: Different kids, but about eight all the time.

**Ms Boyd**: All the time. There's a very high population within Quamby, which is sad to say. We are over-represented in there. They keep going in and out because Family Services make the same old case plan, therefore they're running straight away and getting locked back up again the next day for breaching their bail.

**MS DUNDAS**: To go further on that: we have already heard that there may be some staffing attitude problems, both in Family Services and at Quamby where on the way out a kid will say, "We'll see you soon."

Ms Boyd: Yes, that's exactly so—and that demoralises these kids.

MS DUNDAS: So how do you think we can address that? Do we need to do something—

MRS CROSS: Muzzle the staff.

**THE CHAIR**: That's a bit harsh.

**MS DUNDAS**: But it is having an impact on the kids in that they're themselves being taught that this is all they're going to be.

**Ms Boyd**: It does. It's very demoralising and it's a lack of self-esteem, especially for these young kids. They don't have a lot of self-esteem and that's sometimes from the family they've come from. But what we try and do is we go out there on a regular basis just to show these kids that we do care. We always give them a hug and a kiss at the end and always tell them to stay strong, and that no matter whatever happens they can always come above this. That's what we try and give them—the empowerment to think that maybe they can come above this. So we support them through the courts and we support the family as well, accessing Quamby, because it's very hard for a family to access Quamby as well because the staff are not nice.

MRS CROSS: At Quamby?

Ms Boyd: Yes.

MRS CROSS: What's your success rate?

Ms Boyd: Our success rate of entering into Quamby or-

**MRS CROSS**: Well, given that you provide this nurturing, which is important, how many of the people that you provide this nurturing to re-offend?

**Ms Boyd**: Some of them do re-offend because they're going back out on the street and hanging with the same people. A lot of them aren't re-offending. What they're doing is breaching their bail because they don't like their case plan. So it's not actually re-offending—they're only breaching and in a week's time they're out again anyway.

MRS CROSS: Okay.

**MR CORNWELL**: Why are the people at Quamby not nice?

**Ms Boyd**: Just some of the staffs' attitudes just aren't the best. A lot of our community members do feel that they're getting looked down upon, which is not a nice feeling for anyone.

MS DUNDAS: Julie, do you do similar visits to women or anybody remanded at BRC?

**Ms Tongs**: Glenys Church, who is the team leader of our substance issues team, and her team do a lot of work in Belconnen Remand Centre and also Quamby. They have fairly

regular visits and so does Jane Lynch, our drug and alcohol nurse. A lot of our people, when they're brought in they're actually coming down off drugs, so it's about getting them onto methadone and doing all those things to try and help them and make it a bit easier. So Jane and Dr Sharp have a lot to do with Dr Graham Thompson and the clinical side of the services, whereas the Aboriginal counsellors have more to do with the client contact and the talking and letting them know that the family is okay on the outside and making sure that they're not a high risk on the inside and doing all those things.

**MS DUNDAS**: Do you find the staffing attitudes are similar at BRC as we're hearing they are at Quamby?

**Ms Tongs**: I don't know whether it's because I'm the chief executive of it or not, but I haven't had that same sort of—

MRS CROSS: Probably scared of you.

**Ms Tongs**: Yes, I wonder. Maybe I intimidate them or something, I don't know, but the thing is, no, I've never had a problem, particularly with the senior level people. But when you get down on the ground it's not always the same. Some services are very good at the top and not so good at the bottom. Other services are very good at the bottom and not so good at the top. We're all here to do a job and I'm here to look after our mob—not just our mob but also the disadvantaged; other disadvantaged in this community.

**THE CHAIR**: Julie, could I explore with you one of the questions that's in my mind about preparing families for when somebody comes back. The concept that I have in my head—and I suspect this happens with Aboriginal people just as much, if not more so than others—is that a bloke will get 10 years for his troubles but when he goes away his little boy is six and when he comes back the kid is 16. He's been the significant male in that family unit for that time, and the bloke comes back, wants his job back, and all sorts of family crises occur out of that. The bloke comes back and he hasn't had a relationship, emotional or physical, with a woman for 10 years. He's coming back looking forward to this and yet—

Ms Tongs: It's gone. Often it's gone.

**THE CHAIR**: It's gone and then it's the preparation for both of those two things. Is any of that sort of stuff, to your knowledge, given to the families of returning prisoners?

**Ms Tongs**: It's difficult for us to be proactive. We're always reacting, there's always a crisis somewhere. These are the sorts of issues that need to be really seriously looked at and addressed. Often, when people are locked up for a long time, the partner will move on. They'll come out and they haven't got anybody. The first point of contact will more than likely be Winnunga. Because they've been away for so long, they don't know how to live on the outside. It's really scary for them.

A lot of them go and do crime again because they feel safer on the inside than what they do on the outside. That's a sad thing to say but that's what happens a lot of the time. Because people are so institutionalised, the outside world frightens them and that fear is what makes them do crime again to get back inside because that's the only life they know. But these are the sorts of issues that we need to really be looking at, John. How do

we address these? But anything that's Aboriginal certainly comes to Winnunga or anything that's a little bit too hard for mainstream will be given the flick.

**THE CHAIR**: So if in fact we put some public policy focus and some resourcing into preserving a functional family while the person is away, then the chances of the person coming back and having a nice whole family again is going to be increased, but if we don't do anything our chances are nil.

**Ms Tongs**: That's right, yes. And particularly if there is going to be a prison in the ACT there are lots and lots of issues that need to be addressed and there's a lot of considerations that need to happen, particularly for our community. Say there is a 450-bed prison. If we don't have the present population here in the ACT there will be New South Wales prisoners that will want to come to the ACT. The majority of the prisoners are Aboriginal, so we're going to end up with families from all around. Where are we going to put them? Where are they going to live?

**MR CORNWELL**: It will also make a farce of the argument, by the way, that we shouldn't send our people to New South Wales.

**THE CHAIR**: Well, actually that was something I wanted to raise with you. I think I got this right: when I visited Queensland and the Northern Territory there was a tendency for non-Aboriginal families to stay put when the person went. It didn't matter whether they went to Goulburn, Junee, Singleton or whatever, they stayed put. I went to Townsville, Rocky, Lotus Glen in Queensland, and it seemed to me that what happened was that the family picked up and moved as close to the jail to their incarcerated rellie as they could find and where they were going into crisis was where a bloke was moved without notice and, of course, they then had to do it again. Is that a fair comment that in fact the families will move—

**Ms Tongs**: That's right, they will follow that person, yes

**THE CHAIR**: So from an ACT perspective we're going to be better off for our Aboriginal community by having a prison here but we're going to be worse off for those people who are coming in here. If we do have public policy developed to support the families of incarcerated people then we had better prepare ourselves for an influx. That's what you are telling us, isn't it?

Ms Tongs: Yes, I am saying that and-

**THE CHAIR**: Well, that's a new one.

**Ms Tongs**: We all know about the Royal Commission on Aboriginal Deaths in Custody and one of those recommendations was that the prisoner be located as closely as possible to their family. If their family is relocated to Canberra and you get a sympathetic minister then they will say, "We want that person moved to the ACT." So how are we going to support all this, what sort of infrastructure is going to be in place? This is what really concerns me.

We struggle as it is. We know that, particularly since the bushfires, you have to wait five years for public housing and all those sorts of things. That's just something else that will

impact on Winnunga and Gugan. They're our people. We can't afford to be putting people into motels. We don't have houses. We're not rich people. We survive. The things is, we don't have an Aboriginal hostel. We need to be working with Aboriginal Hostels, the government needs to be working with Aboriginal Hostels, to have an Aboriginal hostel at least in the ACT where it can cater for families as well as other people.

**THE CHAIR**: Kacey, that would address some of your problem, wouldn't it, for these kids. I got the feeling when I spoke to kids out at Quamby—one of them was in there for a bit of respite himself—that a couple of them were in there because that place had become the norm for them.

Ms Boyd: That's right, yes.

**THE CHAIR**: And if we don't have a place for them to go as an alternative to Quamby, even for breaching bail conditions, then we're just continuing that same cycle. So what you're saying is that we need to have a family support which isn't their family?

**Ms Boyd**: Yes, we do need another support for these kids that isn't family because a lot of these kids don't understand why they can't go back to family. They love their parents and they don't think that their parents are doing anything wrong.

MRS CROSS: Even though they might be?

**Ms Boyd**: Yes, even though they might be. Any kid—looking through a kid's eyes—just loves their parents, their parents are their world, and they don't understand why they're being taken away to begin with and that leads into the same old cycle, leading into Family Services, then they get in trouble and they head back to Quamby. And Family Services sometimes are quite happy to put these kids in Quamby when they can't place them anywhere, and that's not fair either.

THE CHAIR: That's because they haven't got anywhere else.

**Ms Boyd**: Winnunga as an organisation have been lucky at the moment. We are actually starting up a female youth refuge. It is for 12 to 17-year-olds and we'll be able to take up to six at any one time. It's going to be a 12-months program to give them some living skills and then further to look into whether we can reconnect them with the families so that they can go back; whether they are with Family Services so then we might have to look at another option after that 12 months. But that is a good stepping stone, I think.

THE CHAIR: Who's funding that one?

Ms Tongs: ACT Housing and Disability Services.

# THE CHAIR: Good.

**Ms Tongs**: This has been a big issue for us for a long time now and Gugan Gulwan. I spoke with the chief executive of Gugan, Kim Davidson, and as we all know Kim's husband passed away a couple of weeks ago and Kim has had a pretty rough time for the last two years with Dennis being so sick. Kim and I talk about things and the needs of

50

our community and we agreed that she would support Winnunga to actually run that youth refuge because we saw that there was such a great need for it in our community. It's about giving kids opportunities, about us being able to work as an organisation with those families. A lot of our families are dysfunctional, so from dysfunctional parents come dysfunctional kids. But I don't blame the parents of these kids either. It's because of the lives that they've had.

THE CHAIR: This is a cycle, Julie. You're trying to cut the cycle?

Ms Tongs: It is a cycle.

MRS CROSS: A generational thing.

**Ms Tongs**: That's right, and we need to break that cycle. I really believe that we can and we will, but it's having the will of the governments of the day to be able to do that.

**THE CHAIR**: Can I explore something with you, Kacey. You talk about kids in Quamby. Are they predominantly male?

**Ms Boyd**: They are predominantly male but we do see a lot of females in there at the moment. There is a male refuge at Isabella Plains which is run by Corrections and I think hostels have a little bit to do with that as well. This refuge we are about to start up was supposed to be for males but we've got a variation for it to be for females because we're seeing a very high need in the community at the moment for a refuge for young girls, especially for a lot of these girls who are entering Quamby. It might be a really good stepping stone for them when they come out somewhere other than where they have been going and this time we might see a better turnaround and a lot more non-offenders coming through the program, which I think would be really good.

**THE CHAIR**: Do you think that—this might even provide a vehicle for this sometimes when people come out of custody and they're going back into a family which we have supported, and sometimes we haven't supported, they actually need to go somewhere before going home? It's not a replacement for going home, it's a preparation for going home.

Ms Tongs: Yes.

Ms Boyd: Yes.

THE CHAIR: Is that what this is going to do for those kids?

**Ms Boyd**: That's what we're trying to do. Of course, it's not always going to be Quamby kids in there but it is going to be a place where we're going to try and reconnect them as a family unit again. And that's going to be by little bits at a time because you can't just rush in with a lot of these kids and say, "Well, here's your mum and dad. Go for it." It's going to have to be a short process of inviting—getting them to invite their parents over for dinner sometimes or even seeing their brothers and sisters again for a little bit until they build up that link again with their family.

**THE CHAIR**: Are the kids in Quamby, because there is a lot of kids going back and back and back for whatever reasons, developing their own family in there?

**Ms Boyd**: They are. That is why we really need to break the cycle because a lot of the time some kids will offend because all their mates are on the inside. They're used to that one little group, you see, so if their mates are on the inside they think, "Well, I prefer to be on the inside with my mates than being out here." That's because they've got a strong bond, a strong linkage. They understand each other, I guess, in the way of what they're all going through rather than what the parents do understand.

**THE CHAIR**: This is a similar arrangement to what I saw in Darwin jail—four generations of the same family in the one prison, the grandfather, the father, the son, and the—

MRS CROSS: Holy Ghost.

**THE CHAIR**: The next one down. And it was a rite of passage, in fact. That was the problem. Do you have the rite of passage problem here?

Ms Tongs: We do.

**THE CHAIR**: We need to actually change that at the family unit, don't we? That's where the services need to change that?

**Ms Boyd**: Within Quamby we've had families in at a time. We've had the older brother, the younger brother, the younger sister. I have also been to Symonston and BRC where we've got families in there—it might be two brothers and a cousin—and the same with BRC. Half the time when you go into Quamby or BRC or Symonston, they're all linked in some way. Although they might all be in there with their brothers and their sister, then you'll see that their cousins are in there, and then their second cousins are in there. It works all the way through that system.

**THE CHAIR**: And the only way to break that cycle is to have the support services for the family unit. You used the words "a dysfunctional family" and you were saying that dysfunctional parents will produce dysfunctional children—

Ms Tongs: That's right.

**THE CHAIR**: and it's not because they're bad people, it's because they're dysfunctional.

Ms Tongs: No, that's right. And you don't put the blame on the parent.

THE CHAIR: They're dysfunctional, they're not bad.

**Ms Tongs**: That's exactly right. And the thing is we're running programs at Winnunga we're running a parenting program, because a lot of our parents are sole parents; because the partner is either locked up or dead. Our life expectancy is 28 years less than for the wider community in the ACT, so what does that say? I'm old. Forty-five in our community is old. Nationally the life expectancy of Aboriginal people in Australia is 18 to 20 years less. Well hello, you know, here we are in the ACT.

So we need to really look at the way that we do do our business. I've had young people do community service orders at Winnunga because that's where they choose to come. And we won't say no to that. What happens is that I'll sit down and talk to them and they'll say to me it's a family thing. The whole family. I'll say, "Well why did you do what you did? Why did you steal a car?" What makes these kids tick? They'll say it's a family thing. You know, dad does it or his uncles do it. And I think that's really, really sad, and that's really an indictment on people.

There is a lot of goodwill in this community, and we need to continue to build relationships but it's difficult for us to keep entering into partnerships with mainstream services when they've got all the dollars and we get nothing. We get all the work.

THE CHAIR: Yes, I've heard you say that before and I'll probably hear you say it again.

Ms Tongs: Yes, and I'll just keep saying it until people start to—

THE CHAIR: Yes, you will keep saying it until something changes.

Ms Tongs: That's right, yes.

THE CHAIR: Good on you, Julie.

Ms Tongs: Thank you.

**THE CHAIR**: Look, thank you very much for coming in. I know you are very, very busy, and we really appreciate you giving us your time. One of the things I hope as an individual member of the committee is that at the end of the day we will encourage the government to come up with some sort of a strategy to address the public policy issues of the effects on the families, as I consider them to be tertiary victims. You have got a person who is a perpetrator, you have got a victim. The secondary victim is the family of the victim and the tertiary victim is the family of the perpetrator. And we don't have a public policy approach to that, and that's one of the things that we are sort of exploring in the context of this hearing. So thanks again.

**Ms Tongs**: I think the sad part about all this is that often the perpetrator gets all the services and the victim misses out, or it's the other way around, whereas at Winnunga we not only work with the perpetrator, we also work with the victim. It's about how you work.

**THE CHAIR**: What we're seeing, though, is that with the perpetrator a whole corrective services system kicks in. With the victim, often other systems kick in—counselling services, victim of crime financial assistance, a whole range of community support things. But apparently there is no cohesive support system which kicks in which is a sort of a consolidated and coordinated one for the family of the perpetrator.

You know the sexy bits of a person in jail because everyone likes to hear about that. And then the victim—that's a bit sexy as well if the story is a good one. But the story is never a good one. And often—and this is something you would probably know better than us, and maybe you could say something on it just briefly—the first time the wife finds out about something is when the police turn up.

Ms Tongs: That's right, yes.

THE CHAIR: And we're concerned about that sort of stuff.

Ms Tongs: Yes.

THE CHAIR: Well, thanks very much Kacey and Julie for your evidence.

Sitting suspended from 12.30 to 3.11 pm.

### HUGH SMITH and

# **BILL ALDCROFT**

#### were called.

**THE CHAIR**: You should understand that these hearings are legal proceedings of the Legislative Assembly and protected by parliamentary privilege. That gives you certain protections but also certain responsibilities. It means that you are protected from certain legal action, such as being sued for defamation for what you say at this public hearing. It also means that you have a responsibility to tell the committee the truth. Giving false or misleading evidence will be treated by the Assembly as a serious matter.

You will be aware from previous appearances before committees that the hearings will be broadcast throughout the offices in this building and other public service offices. We'll be recorded for Hansard purposes, and we'll give you a look at those transcripts so that, if there's an error or something, you can correct it for us.

Please identify yourself to the microphone and state the capacity in which you appear before the committee. I'll invite you to make an opening statement, and then we'll see where questions take us from there. With that, over to you.

**Dr Smith**: My name is Hugh Smith. I'm president of Prisoners Aid (ACT), and I appear in that capacity. I will make some general remarks to begin with, summarising what our submission said.

Any prison sentence is going to have an adverse effect on families, even if the prison is just around the corner from where the family live. Of course, in the ACT that is not the case. It means at least two things. First, families have great problems getting to visit prisoners for all sorts of reasons: poor public transport, unworkable timetables and the cost of travel and overnight accommodation, especially for people already on a low income.

Secondly, there's a more psychological problem. We send prisoners out into a different system, where even the ACT authorities lose control over much of what happens to them. We can decide when they go in and when they come out, but what happens under the New South Wales system is largely determined by the New South Wales authorities.

That also applies to the families. The families are worried. Are they getting good medical treatment? Are they going on courses for alcohol or anger management? Are they on protection when they need to be? There are all those sorts of things—even which prison they're in. We've had families go to visit one prison and find that the prisoner has been moved somewhere else. Families experience a psychological anxiety that prisoner concerns are somehow removed from their world and put under some other control.

Our submission also argues the case for support for families on two fairly obvious grounds. One is the social justice ground: don't punish families for what the prisoner has done, and don't punish the prisoner after his or her release by making the family situation worse or allowing things to deteriorate. The other is a business case for

assistance: don't let families spiral down into financial, social or accommodation problems because they've suddenly lost one member of the family, usually the breadwinner. Of course, when the prisoner comes out, if there's a more stable social background to go back to, everything suggests that there's a lower chance of repeat offences. That, on purely practical grounds, makes sense.

I'll say a word or two about Prisoners Aid. We're a volunteer organisation. Most of us have had training in other welfare type organisations. We have three "nons": we're non-judgmental, non-sectarian and non-official. We find that a great asset in dealing with families and prisoners on their release. We don't represent authority in any way; if anything, we represent the community. We find that it has a positive effect on people that there are actually others in the community who needn't bother about prisoners and their families but who actually do.

Finally, we have argued, for many years—28, I think—for a prison in the ACT, and we're finally hopeful that one will come about. We look forward to not only a major change in the position of prisoners' families but also a major change in our own activities, that will focus much more on prison visiting and the through-management of cases, from the time people go into prison—and even before they go into prison. We know a lot of people before they even get sentenced, one way and another.

Management, from pre-sentence to post-release, would combine prison staff, corrections, related government public servants and volunteers, so we'd see a need for major coordination of those three elements, as and when a prison is established. I might draw my remarks to a close there.

THE CHAIR: Thank you, Hugh. Bill, did you want to make an opening?

**Mr Aldcroft**: No, I think it's already been said, except that my name's Bill Aldcroft, and I'm a committee member of Prisoners Aid. In actual fact, I'm working part time with the Court Assistance and Referral Service, part of Prisoners Aid. It was referred to just now that we see people before they go into jail, often enough. We are in major contact with Belconnen Remand Centre and the people there. We assist the people in the remand centre, we assist the families to get there, if we can, and we also work with the courts very closely.

When people go on bail to rehabilitation centres, if they have no funding and we have the money, we will organise to send them to the rehab centres. We contact them first and make sure everything's okay. Often enough, when people are sentenced, especially for long terms, the family are distraught, don't know what's happening and have no idea. We fill a gap there: we talk to the families and we maintain contact with the families as long as they want us to. If they need assistance to visit, well, that's what we do as well. Our major role is to assist in the courts and in the remand centres.

We have an office in the Magistrates Court where we work from, for about three or four hours. Well, we're supposed to work three or four hours a day, but we are volunteers, of course, as well as being paid. We get phone calls from the prisons to our office. If they need to, Probation and Parole from New South Wales are in contact with us, asking if we can assist. In one case it was, "Can you get this poor man a set of teeth?" because he'd had them knocked out in a bit of a fracas there and couldn't eat. He was only in for a short term, and the New South Wales prisons don't come to putting false teeth back in.

We have major contacts with all the rehabilitation centres; they pop up like mushrooms all around the place. Because of the make-up of Prisoners Aid, all of us are involved with other agencies. For example, I was on the committee of Karralika for a long time. I'm still a member of Karralika, so I have an in there. Often how it works is that it's not what you know it's who, and that works for our clients who want to rehabilitate.

This is another section of Prisoners Aid, which is very active, and together we work very well. In fact, we work exceedingly well. Until fairly recently, the court assistance program assisted victims, and we still do often enough. People come in there who are victims of a crime. But we generally shunt them off to an agency that looks after victims more than we do.

We have major contact with Aboriginals and Aboriginal families because, as you're well aware, they are prominent in our prisons—about 70 per cent, somebody told me. I'm not too sure whether that's right. Because of our contact with the mothers, mostly, of these young men, we have a major input into the Aboriginal community and their services, such as the Aboriginal legal services, the health services and housing. We are a referral agency, so we make sure that we know about all those.

Other than that our main focus, as Hugh has told you, is on Prisoners Aid. Our clients are the prisoners, but we help the prisoners by helping their families. All of us have families that we counsel, help and advise. We do all those things necessary to maintain a family situation for when, hopefully, these people come back out of jail and go back to their families. That's the main rehabilitation effect. If they have families visiting, they have a contact with the outside world. It's the poor boys that have nobody, for whatever reason, who come back two months later. They're back in again. They have nothing here.

We have been lobbying very strongly for a prison—and have done for many years— and a new remand centre. We are also very conscious of the fact that, when people come out of jail they have no accommodation. They have nowhere to go, generally speaking. Many of them we know come out and they sleep outside, in the back of cars or maybe they've got a friend.

The other thing we have been strongly advocating for years is to have a halfway house or hostel here, either pre or post release. It's a matter of opinion. Mine is it that it should be pre-release so that corrective services have control over the situation. They can then release them into the community to look for jobs, help them get jobs or work training programs. All these things, allegedly, are done in the prisons, and it depends which prison you're in. I think I've said enough.

**MS DUNDAS**: I have a question about the Court Assistance and Referral Service. How do you find the families? Do the prisoners have to say to you that they are worried about their families, or do you have the ability, pending privacy legislation, to track them down because you think that there might be a problem? We've been hearing that information isn't flowing through to families unless they're being quite active about watching or

participating in the case. Many of them might not want to do that but might still need to know what the outcomes are.

**Dr Smith**: If I can comment on that, it's been a longstanding problem for us to make sure that we at least contact everyone. They may not all want to use our help. It's simply got nothing to do with anyone else; that's their choice. We try and distribute information. I guess the main source is through the court assistance service. The court assistance service sees a fair proportion of the people who go before the magistrate or judge in the ACT, so we can usually pick out where a family is in need of help.

We send information to all the prisons in New South Wales and ask them to make sure it gets through to the ACT prisoners when they're taken there so that they can tell their own families. Some prisons do that better than others; some lose the pamphlets we send them and it's out of our control. The other main method we've discovered is the grapevine. One way or another, prisoners' families know each other and say, "Prisoners Aid helps me to get up to Junee,"—or wherever—"Maybe you can contact them."

**MS DUNDAS**: What was the point you made when you were saying you give a bit of financial assistance in a small number of cases? I think you had 40 on your books?

**Dr Smith**: At any one time we have about 40 out of 120 to 180—whatever the ACT prison population is. Some don't want any contact at all. Some we simply don't get through to. They don't hear about our services.

**THE CHAIR**: A lot of the followers of the development of a corrective services philosophy in the country would know that Prisoners Aid is very significant in leading the change from a warehousing to a restorative justice philosophy. Your contact with people who are incarcerated full time is quite widely known. You talk about the grapevine, which is where that would kick in easily. Do you have a similar sort of relationship with people on periodic detention and home detention?

**Dr Smith**: I think the brief answer is no. Our charter limits us to people held in prison, and we've extended that unofficially to those held on remand. I really don't think our resources at this stage—

THE CHAIR: Is there a resource issue?

**Dr Smith**: Human resources, which are related to financial resources, won't allow us to extend too far. For similar reasons, we haven't got into youth offenders. That's been far too big an area for us to take on.

**MR CORNWELL**: You say in the report here that you may also provide financial assistance for power, telephone services, school uniforms, outings and car registration. Wouldn't these be available through other charitable organisations?

**Dr Smith**: In many cases, yes. We have to make a judgement. We don't do this very often. We usually do it where we know the family and where we think it will be a one-off thing—just to get them out of a hole, so they don't have to go off to another agency to do all that.

**MR CORNWELL**: The second question is more important. You go on to say that Commonwealth support is not always available quickly or at adequate levels. It has concerned us a bit that somebody ends up going to jail and suddenly the family is bereft of money, that's all. How long does it take to get welfare or that sort of assistance? You people probably know more about it than we do, Bill.

**Mr Aldcroft**: There are certain cases where the breadwinner of a family has gone to jail. The family are living in private accommodation. There is no money, and they are evicted. The Housing Trust, of course, have no property. Six months or more is for absolute emergency. So you then have a family on the street, and this has happened and there's nothing that we can do about it. We're aware of it—we make representations to the Housing Trust, or poor old Bill Wood gets an earful—but we're not in a situation to help a great deal. We do follow up, and we've tried, but it's something that's happening in our community that is outside our orbit.

**MR CORNWELL**: It's a pity that the people or the families can't be intercepted more quickly. They've got to get sentenced and that's that. It seems a pity that they have to wait. I don't know how long they have to wait. You may be able to help us, otherwise we'll find out ourselves. It's a worry if you have to wait until Commonwealth unemployment benefits or child support starts coming through.

**Mr Aldcroft**: Yes, that is a major problem. From where I'm working, I see these people, just as was said earlier on, before they go to jail. They're often just not suddenly sent to jail. There is a major problem. They've been in the remand centre, which we visit, and we have contact. We have a regular visitor going to both Symonston and the remand centre, so we often know the family through that. We know that there are going to be major problems.

We try to get them into Housing Trust. It's all right getting them into Housing Trust but, if they have a government house, then the rents and things like that can be adjusted. In private accommodation, with the rents going up like they are, these landlords want them out quick. They might be paying \$140 a week, and the landlord can rent that place for \$250 a week.

Then it doesn't matter what all the laws around the place are. They'll move them, and they'll move them quick. They'll bring a furniture van in or they'll put their stuff out. That's happened. That is a tragedy. I know that Prisoners Aid is a small non-government organisation which doesn't have the facilities to get into that. I'd like to, but we can't.

**Dr Smith**: We have written to the Commonwealth government about eligibility for sole parent pensions. As we noted in our submission, spouses do not qualify as sole parents if the other one goes into prison—unless they end the marriage.

MR CORNWELL: There's an interesting anomaly, isn't it?

**Mr Aldcroft**: It is something that annoys me a great deal. A woman will go to get the single parent's pension because her husband's gone to jail, and she has to tell them that she's separated so that she can get a higher pension. If she says she's married and wants to remain married, she gets a lower pension.

We've been to the politicians about that, and they all clucked and shook their heads sadly, but nothing ever happened. It's still happening, and I think that's wrong. I think Annette Ellis was the last one; we've been onto her pretty strongly, I have to tell you. I think that they're looking at that to try to do something about it.

**MR CORNWELL**: They can get assistance, but at a lower level, if they say they're married?

Mr Aldcroft: Yes, but I think that's wrong.

MR CORNWELL: Indeed. Now, what happens when he comes out of jail?

**Mr Aldcroft**: The guy? Well, he gets one weeks unemployment benefit. That's called a half cheque. He comes out and has then to make an application for getting onto unemployment benefit. They don't go straight into a job, obviously. They can get another cheque, which is about \$140 if they're single guys; if they're married, a bit more. Then they have to wait two weeks before they get the next cheque, so they're waiting virtually three weeks before they get any real money. So some of them look for the nearest bank—and not to deposit anything.

MR CORNWELL: Yes, I gathered that.

**Mr** Aldcroft: The whole point of us trying to maintain the families is that, if the guy coming out of jail has a family to come back to, there is support from the family to carry them over that period of time. Prisoners Aid also make money available to the guy coming out, which varies from \$50 to \$100, about the max we can offer. They often don't have licences, so we do that. We get into all those kinds of things. It's limited, but we try.

**MRS CROSS**: Mr Aldcroft, is the \$100,000, or less, that you received federal and local government funding or just federal?

**Dr Smith**: It's all local.

MRS CROSS: It's all local government funding?

Dr Smith: In one way or another.

MRS CROSS: How much money do you have to supplement that with?

**Dr Smith**: We don't raise any funds of our own. For two reasons: we don't have the resources to do that, and when we've tried we've been unsuccessful.

MRS CROSS: What does that money cover?

Dr Smith: Our total income.

MRS CROSS: What do you use it for?

**Dr Smith:** About \$50,000 goes on our Court Assistance and Referral Service, which is to pay two workers, one of whom is Bill.

MRS CROSS: Are they full time or part time?

**Dr Smith**: They are part time—15 hours a week part time at standard rates. For this you get three hours a day for five days a week for 48 to 50 weeks a year. Some of the \$50,000 will go on direct assistance to people who need bus fares or train fares, and it's immediate assistance. We then have another \$40,000—about \$20,000 each from the community services grants program.

MRS CROSS: So that's above the \$100,000—because you said \$50,00 goes to staff.

Dr Smith: Sorry, \$50,000 is for the court assistance program.

MRS CROSS: Yes, yes.

**Dr Smith**: It would be two-thirds on staff and one-third on assisting cases in the court system. We've got roughly another \$40,000 in total: \$20,000 from the community services grants program, which can be applied for; and \$20,000 from the department of corrective services, which began a couple of years ago. It's to use on a wide range of support for cases, particularly assistance to people at Belconnen Remand Centre.

MRS CROSS: For petty-cash-type things?

**Dr Smith**: Petty cash. For example, people are often released from the remand centre after the last bus has gone home, so how do they get home if they don't have the money? All that sort of thing.

MRS CROSS: So your time is voluntary, Doctor?

Dr Smith: Yes.

MRS CROSS: Are you a doctor of medicine?

**Dr Smith**: No, nothing useful.

**MRS CROSS**: Okay, so your time's voluntary. Do you volunteer all your time? How much time do you put in a week?

**Dr Smith**: It fluctuates. A busy week can be, say, 10 to 12 hours when there's a lot of paper work to be done. That's the most annoying thing, frankly.

MRS CROSS: It sounds like you need more money.

**Dr Smith**: It would certainly help to have money for cases. That's the main thing, but administrative assistance would certainly help.

MRS CROSS: To have a paid PA who can do all the admin stuff?

**Dr Smith**: It would help if they could do a lot of the admin. Like most volunteers, we really want to help these cases and not spend time at the word processor.

**MRS CROSS**: You've been around for 40 years, and I find it amazing that you're providing an excellent community service. In fact, what you do fits into the terms of reference of this inquiry. How many times have you applied to get an increase in the money you're getting now? How many grants have you applied for? Have you thought of applying for a specific grant to pay for a PA?

**Dr Smith**: We haven't done that. We've taken it a small step at a time. The big advance was to set up the court assistance service, and that took a lot of effort. We've applied for community services grants for many years and always got just a workable amount.

**MRS CROSS**: Lastly, 35 per cent of all ACT offenders are in New South Wales prisons, and you support the families of those offenders here in Canberra even though the offenders are in New South Wales prisons. Is that right?

**Dr Smith**: All ACT sentenced prisoners go to New South Wales and, if an ACT resident commits an offence in Bateman's Bay, we still support the family. Sometimes the family will move from Sydney or wherever into the ACT. The prisoner's been sentenced in Sydney. If we can, we still help the family. It's a need thing.

**MRS CROSS**: You're carrying a significant load, then. You're carrying a third of people that are incarcerated, if I look at the statistics from your submission.

Mr Aldcroft: It wouldn't be a third.

Dr Smith: I don't think it's as high as a third.

**MRS CROSS**: "The client load is approximately 40 cases at any given point in time, and that represents 35 per cent of all ACT offenders in New South Wales prisons."

Dr Smith: Yes, we help about a third of total offenders at any one time.

**MR CORNWELL**: What would you say, roughly, are the percentages in the socioeconomic groups? I don't think you get too many Lord Archers, do you?

Dr Smith: We've had one or two quite wealthy people.

**MR CORNWELL**: The reason I'm asking you is to try and establish the percentage of families that need assistance as opposed to some others. I imagine that Lord Archer's family didn't need assistance. That's the point I'm making.

**Dr Smith**: We've come across some families who have been well-off, and in some cases we've given assistance of a counselling, friendly kind. There was a case where the husband went to jail on sex offences and the wife really didn't know how to handle it. Wealth doesn't come into that. It's a problem that needs help. But it's true to say that 90 per cent of the cases we help are in a low socio-economic group—by definition, almost.

MR CORNWELL: What's the reason for them being there? Is it drugs or is it violence?

Dr Smith: It's a whole range of things.

THE CHAIR: We can get those statistics from corrective services.

Dr Smith: Certainly, drugs is a factor.

**MR CORNWELL**: Just one more question: what do you do about long-term prisoners—somebody in for 20 years, for example?

**THE CHAIR**: You don't touch them.

**MR CORNWELL**: Is that right?

Dr Smith: Yes, we do.

MRS CROSS: Then I guess you don't tell them?

**MR CORNWELL**: The real question is: what do you do in relation to their families? That's what we're looking at here.

Mr Aldcroft: They often don't have them if they're long term. Their families have gone.

MR CORNWELL: I understand.

**Dr Smith**: Families break up. But there is one long-term prisoner with a family, who for various reasons is imprisoned in another state—not New South Wales—and we are helping the wife visit each month and that's quite expensive.

MR CORNWELL: That could be very expensive.

Dr Smith: And if we're looking at five or six years-

MR CORNWELL: Can't you just bring him to a New South Wales prison?

**Dr Smith**: That has been raised in this case, and it seems the prisoner is quite well settled in that prison. He's getting good rehabilitation and good programs.

MRS CROSS: What prison is he in?

**THE CHAIR**: To say the prison would identify the prisoner.

MR CORNWELL: But it's up to him.

**Dr Smith**: He can apply.

**MR CORNWELL**: I think I know what we're talking about. What I'm trying to establish is that, if somebody's over in Western Australia, they can't come back to a New South Wales prison unless they want to.

**Dr Smith**: They have to apply.

MR CORNWELL: They have to apply.

Dr Smith: It has to be approved by both states—sending and receiving.

MRS CROSS: You'd think he'd want to be closer to his family, wouldn't you?

THE CHAIR: Not necessarily.

MR CORNWELL: It depends on what your wife's like.

**Mr Aldcroft**: There's a classic example at the moment of a man who was sentenced to life imprisonment in Darwin.

MR CORNWELL: I thought of that one, Bill.

**Mr** Aldcroft: That, I think, is what you're looking at. They don't need money; they just need assistance. We've been offering what we could over a long period of time to that family because they want to try and get their son into the ACT Corrective Services. I know that the ACT government are not prepared to take him on. What are we looking at? It's \$79,000 a year to keep anybody in jail. If he wants to transfer, then it should be between the Northern Territory and New South Wales, not the ACT.

MR CORNWELL: Who is saying, "We're not interested."

**Mr Aldcroft**: Our role in that one has been to assist the family, and he has a girlfriend in Darwin. We've been involved with that over a long period of time. The money hasn't come into it at all; it's mostly assistance. I've made various inquiries to the Attorney-General about this matter, and I've received and helped the family along that line. You obviously know about this case, which is classical. But we do have another one.

**THE CHAIR**: Before you go too far, Mr Aldcroft, I will remind you that this is a public hearing, and we've got to be a bit careful about privacy provisions.

Mr Aldcroft: I'm not using any names.

**MR CORNWELL**: That's what I mean. You offer assistance even to long-term prisoners—to their families—if required?

Mr Aldcroft: Yes.

MRS CROSS: So you fly the lady up to Queensland every so often to see her husband?

Mr Aldcroft: Do we go?

MRS CROSS: No, I said the lady who's husband is in jail in Queensland.

Dr Smith: No, the case I was mentioning is in Victoria.

Mr Aldcroft: Yes, she does go.

**Dr Smith**: She visits, but I think she drives down. We pay \$200 a month, which is about all we can afford.

THE CHAIR: Did you have a question, Ros?

**MS DUNDAS**: Do you have any working relationship with VOCAL, the Victims of Crime Assistance League?

**Dr Smith**: Not as far as I'm concerned. Bill mentioned that cases they'd pick up in the courts are sometimes referred to VOCAL, where it's victims of crime that come into the office.

**MS DUNDAS**: If you're in a situation where a prisoner has perpetrated a crime against their family, would that be something picked up by VOCAL, not by you, even though you're trying to provide support to the families of prisoners?

Dr Smith: You've had cases of that kind in our office, Bill.

Mr Aldcroft: Yes. You're trying to establish how we get our contacts, I think.

MS DUNDAS: Yes, but also who picks up the gaps.

MRS CROSS: And also to see how you work together.

**Mr Aldcroft**: The courts often refer them. The magistrates in the court will tell some of these people, "Will you go downstairs"—we're only downstairs—"and see a court assistant. They'll help you." For example, if you have someone distressed in the bail office, as you often do, they'll ring down and I or Saija, who's a much nicer person than I am, will go up and help and make that contact.

The other contacts that we get are word of mouth. We are actually in the courts, and the families will come down—you see many of them. We're very busy. The courts really only operate during the mornings, so in the morning we are quite busy. The contacts that we make with those families we put up to Prisoners Aid on a monthly basis, or even before if it's urgent, but basically that's how the cases come in.

We go to a meeting once a month. We were there yesterday. I don't know how many new cases we had, but we put them up. They discussed them and they have their volunteers go out and contact the families. I have contact; I have families, too. I'm a volunteer as well as working in there. We all have case loads.

**Dr Smith**: CARS itself is a referral service and sometimes, as in the case you suggest where the wife is a victim as well as a wife of a prisoner, we deal with that ourselves if the individual concerned is happy about that, or we may refer them on to VOCAL.

MRS CROSS: Have you referred people on to VOCAL?

### Dr Smith: Yes.

MRS CROSS: So you cross-pollinate when necessary?

### Dr Smith: Yes.

**Mr Aldcroft**: And men, too, don't forget. The other thing is that our office is located in the area where women come in looking to get court orders against their spouses, and they bring the kids in. We have two rooms there, and we take distressed women—it's nearly always women, sometimes men—into that other room, where we look after them—you know, give them a cup of tea and a cake. We do that.

There is that other aspect of what we do in the courts. In the area we're in, they have counsellors from the courts who see the people who are taking out domestic violence orders or preventative orders and things like that. The area where we work is right in the middle of that, so we also get those people in.

THE CHAIR: I'm conscious, Dr Smith, that you've got a time constraint.

**Dr Smith**: Three or four minutes.

**THE CHAIR**: In that case, we might conclude today's hearing. Thank you very much for your submission and for sparing us the time.

Dr Smith: I'm happy to leave copies of our latest annual report to review.

#### **Resolved**:

That, pursuant to standing order 243, the committee authorises the publication of evidence and submissions received by the committee during this hearing, together with any supplementary material arising from the public hearing.

**THE CHAIR**: With that I will adjourn the public hearings of this inquiry. Thank you very much for coming.

# The committee adjourned at 3.51 pm.