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THE LEGISLATIVE COUNCIL SESSIONAL COMMITTEE ON GOVERNMENT ADMINISTRATION 'B' MET IN COMMITTEE ROOM 2, PARLIAMENT HOUSE, HOBART ON TUESDAY 20 JUNE.

INQUIRY INTO TASMANIAN ADULT IMPRISONMENT AND YOUTH DETENTION MATTERS

Mr ANTHONY BULL WAS CALLED, MADE THE STATUTORY DECLARATION AND WAS EXAMINED.

CHAIR - Good morning. Welcome, Mr Bull, to the Committee hearings this morning. This is a public hearing for the inquiry into the Tasmanian adult imprisonment and youth detention matters. I will introduce to you the members at the table - Meg Webb, Rob Valentine, Tania Rattray, Rosemary Armitage, and Josh Willie. We have an apology from Jane Howlett. We also have Committee Secretary support from Simon Scott.

This is a public hearing and it is recorded. The *Hansard* of this hearing will be published on the Committee website when it becomes available. If there are any areas that you wish to share with the Committee in confidence, just ask for that and we will stop the broadcast and go through the appropriate process. You have privilege when it comes to this part of your evidence but when you go outside, that privilege is not afforded to you.

We would be happy for you to share with the Committee a little of your journey, thank you.

Mr BULL - My journey through the institutions and welfare if you like started when I was 9 or 10 years old. I'll say the names - Wybra Hall, Ashley and eventually an adult prison. In prison, I became an advocate and started to stand up for people and their rights. I've been a part of the welfare system nearly all of my life.

CHAIR - You indicated earlier, Tony, that you hoped your presentation here today would make some changes. Do you want to share with the Committee what sort of changes you would like to see from your appearance and your input to this inquiry?

Mr BULL - As a youngster in Wybra Hall and Ashley, I remember my journey. Wybra Hall was a little different, because I suffered the abuse that came with Wybra Hall - not by any offender, but by the staff itself. That certainly made a massive difference to my life. My experiences of Wybra - hopefully that's changed and will continue to.

I was remembering my experience as a 14- or 15-year-old going up to Ashley boys' home for the first time, as a sentenced prisoner. It was like driving up to a farm environment - there were no walls and no bars and no uniforms. We were in an environment where we interacted with the community; we worked with the farmers. I used to go hay-baling. We used to go swimming and have sporting events, and be really involved.

Yet, about five or six years ago, I went up the same driveway to visit my son, unfortunately. The experience was totally different. I drove into razor wire and bars. It was a prison experience. Aaron's experience in there was a lot different than mine was. My experience was often abusive, again, but you had opportunities. We used to go and interact in

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the community. We used to work for the farmers. I got my first ever job on a farm out the back of Mole Creek as a 15-year-old living by myself, in the middle of nowhere on a farm.

CHAIR - They call it God's Country up there.

Mr BULL - Mole Creek is fantastic. I was still a long way from an adult, but I got the opportunity and could've taken that a lot further if I'd wanted to. Yet, my son's experience was totally different. I went to visit him and it was a prison environment.

I have to tell you this story. My son escaped from Ashley, him and another young feller. It just so happened that we crossed paths pretty soon into his adventure. I took him from Launceston and brought him down here. I had him where I lived and just sat with him for two days. He didn't want to go out and party, he didn't want to go out and drink and do all the stuff you want to as a free prisoner. He just wanted to sit at home. I said to him, 'Well, what's the story, Aaron, why did you do this?' He just wanted to go. He just wanted to get out. I said, 'Look, we have to look at what's going on now, you have to go back to Ashley, how about I make that happen?' They allowed him to go to Launceston, play a game of football and they came and arrested him after that game of football.

That's the changes in the experience. Like my first prison experience - I went to jail and there was industry, there was woodwork, metalwork, tinsmiths, the laundry, everything you could think of as far as an industry sense. We were involved in sports, we played competition football with teams outside. The Spartan Debating Club was a big thing for me; it changed my life in many ways. We were very involved. I remember as a kid growing up in Risdon Vale, people used to buy all of their stuff from the prison - their woodwork, their bread, their milk. The laundry was massive. The industry that was there. That continued for quite a long time. I've seen people do apprenticeships and get out and be something different. I learnt to carve and I still do that today, all of my woodwork. I was there when it happened. Everything was fine until they brought in the bargaining enterprise, where the prison had to bargain with everyone else in the industry for work. Seriously, everything just stopped. All of the industry shut down. Hobbies, sport, everything. Rather than progressing, I've seen it regress and get a whole lot worse. For me and my journey, I am not saying anything different than what I was saying in 1986, it is just that a few more people are listening to me in a different way now. The fact that I am still saying that is the problem with the system.

It has been so focused on containment and control, it does not know how to educate and rehabilitate. You have got no better an audience than a captive one. There is no reason why a young fellow - or an old fellow, for that matter - can't go to jail a criminal and come out a carpenter. Would you rather him build your house or rob it? That's a pretty easy thing to do, but you need education and opportunity. Both systems, especially the young offenders' system of Ashley, is non-existent for opportunity now. Continually treating people with that ignorance has a massive effect on people's lives.

For me, I'm still institutionalised in so many ways. While I don't stand at my door and fold up my blankets so often, I have done most of my life in a contained and controlled environment where I lost of all the basic living skills. For someone to come out of the institution, whether it be after six months or six years, and yet still be homeless - it's a really big problem. You can't expect anyone to change and make a difference if you don't give them the opportunity. You don't do it in an authority-driven way, because you will get resistance every time. You've just got to look at the way the system ran in the late 1980s to mid-1990s,

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the way it ran then in comparison to now. It was because we are all busy, doing something. Today, unfortunately, if you go into the system - whether it be the young offenders' system or a prison system -

CHAIR - Too much time on your hands.

Mr BULL - There's almost every chance you are going to either come out a drug addict, a gang member or angry with someone. It doesn't really have to be like that. A lot of young people who go to jail now, they're doing the same thing as what their dad and their grandfather did. It's generational. Why is the unemployment like it is? Because no-one wants to work. For me to get the change that I have been able to get has taken quite a bit. It has taken a change in environment, a change of friends and whatnot; but I still hang and mix with the people that I used to crack safes with. We just don't crack safes anymore. We don't do all of that sort of stuff. If you want someone to change, you have to try to teach them how to be someone different, and it all comes from confidence and self-esteem. If you teach in the right way and give the right opportunities, you really can make a difference.

CHAIR - Bring back the farm - is that what you are telling us, Tony?

Mr BULL - I thought about that this morning, and what a stupid decision to sell that. They even messed that up. They could have sold it the first time to the first buyer, and instead they pretended they had parrots up the back and lost money at the end of the day. The farm still is the perfect environment. You have to encourage, especially the younger generation now. You want someone to be different, you have to encourage them towards that and give them the confidence and self-esteem that they need.

Most car thieves are pretty good mechanics. I laugh about this a lot. Bring back the old days of Risdon, for God's sake. I started the conversation of the new old jail that we have got. I initiated that a long time ago, and I was so happy and so proud when it was going to be built because I thought it was going to be different. It's not. The problem isn't the jail, it's the people who have control of the jail.

Mr VALENTINE - The methods used.

Mr BULL - I mean contain and control. They don't know any different: once a criminal, always a criminal. One of the hardest parts for me was reidentifying myself. On Campbell Street, driving down there one day I found a wallet on the street. I thought I would do the right thing and took it to the police station and said, 'Look, I found this on the street; here you go.' He said, 'What's your name?' I said, 'I'm not telling you', and he said, 'Why not?' I said, 'Once I do, you'll think I stole it.' It's reidentification. That cop had no idea who I was, no idea of my history.

It's a really big culture change to make; but you have to encourage, and you can't do it with contain and control. A lot of what goes over in Risdon is illegal, it has to be. They can't keep people locked up for so long. I didn't think I would tell you about this, but I am going to; and this is what I call an ignorant justice system. A young feller went to jail; he was defined 'mad' by the courts; he was redefined by the Risdon doctors that he was bad, not mad; and he was released. Here's the kicker: on his release he said to two prison officers, when they asked him what he was going to do when he was getting out, and you know what his answer was? He was going to buy a cigar and stab someone in the face.

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You know who that poor woman turned out to be? That shopkeeper in North Hobart. You tell me that is not ignorant and wrong in so many ways. That's what I call an ignorant justice system and that really has to change. The funny thing is, here in Tasmania - and I don't know why no-one has picked it up - the crime rate hasn't gone up so dramatically, but the recidivism rate is one of the highest in Australia. Isn't it obvious even to people like me who a good place to start would be with the criminal?

We need jails - every society needs a jail and some people deserve to be there for the rest of their lives. But why can't we have an educational facility where, 'All right - what do you like'? As I said, most car thieves are good car mechanics. Where people can go and learn the life skills that they don't learn at home or at school. You've got to understand that the confidence and the inspiration that inspires in someone young and not knowing which way to go is magic. All you've got to do is teach them the skills to do what they want to do and they'll go the rest of the way. You're not only changing that person, but you're changing the next generation.

We're all creatures of habit and do what our families do. You don't get much opportunity in the Rokebys, in the Gagebrooks, in the Bridgewaters. That's the way it is. It was like that when I grew up in Risdon Vale. It's not so now. The only way you're going to get change and make a difference is through education and opportunity. We've got farmers that need workers. We've got lots of business around Hobart - Incat, for one. We used to do all this stuff. The Botanical Gardens, the fire crews. The Risdon Prison Fire Crew was one of the best fire crews in Tasmania. It got awarded as such. It saved properties and lives and all that sort of stuff. They were prisoners. We used to do all that, there were work gangs and all that sort of stuff.

It shouldn't be where you earn your 50 cents a week, or whatever the disgusting amount is. They should be able to go out, help someone in the community and earn a living where they can, and then they're taught the life skills that they need. I've got my own little business, and I'm the worst businessman in the world, seriously, I mean -

CHAIR - What, do you forget to send the accounts out, Tony?

Mr BULL - Yes; for EIS property I was sending them for a month to the wrong people. I just stopped putting them in. I haven't learnt the basic life skills. When someone's released from prison, why can't he go to work at Incat, or down at Channel Constructions or down at Mures, he's got a good little bank balance there, he can understand. You do a prison sentence now, and seriously, you leave with nothing. If it rains, you get wet. If you don't know anyone, you sleep on the street.

Now, seriously, you can't expect that person to stay the legal once his unemployment [benefit?] runs out. You can't expect it. If you're living in poverty before you get on the street, of course, you want to go back to prison. So, why can't the prisoner come back out a redefined worker, with the social skills that they need to survive and appreciate family. I was in the middle of the ocean and six months into fishing, when I got to appreciate my freedom for the first time. I was lucky, I had good people around me; still have.

I've done quite a lot to change my life and, again, this is a reflection of the system. Last year in September or October, they had Education Month, and Andrea [inaudible] - I only spoke to her on the phone; she was really excited about me going over there and speaking to the

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inmates about the importance of education and opportunity. I was really excited, because I see that as the full circle thing for me. I was super stoked. But I had to say to Andrea, 'You need to be careful when you mention my name to anyone in a uniform.' She said, 'Oh no, we'll be fine, we'll be fine, times have changed.' Poor bugger; when she mentioned my name, she was basically kicked out of the office and told to never mention my name again. They wouldn't let me talk to one prisoner, let alone 100.

That's a problem with the system. I used to argue as a yard rep, 'What about rehabilitation? What about opportunity?' And the answer I got from the George Lawlers and the Graeme Barbers of the institution, 'It's not our job to rehabilitate. We're here to keep you here, make sure you stay here, and that's it. We don't care about anything else.' That's exactly the way the system is now. Why would you put probably an already vulnerable and volatile person through the experience of prison, knowing what it is like? He is going to come out angrier. The funny thing is, when that young fellow that killed that lady in North Hobart, when he went back to jail, he refused to take the medication that the jail gave him in the beginning. Now, he lives as a normal, everyday person that made a serious mistake and spends the rest of his life in prison. That's what the system is. You've got no opportunity to be anything other than a criminal. Keeping people locked up all of the time promotes gang mentality, and people are complaining about that around Hobart now. Risdon is where it started. It started with Launceston and Hobart, your bad boys and whatnot. That all began in Risdon. What you do really does make a difference.

CHAIR - Tony, we could listen to you most of the day but I know that my colleagues here are keen to ask a question or two. I am going to invite Josh Willie to ask the first question.

Mr WILLIE - Thanks, Tony, for appearing today. You obviously had a very difficult childhood and upbringing. I am just interested in -

Mr BULL - I was lucky at home, I grew up with three pretty good sisters and a good Mum. There were different reasons why I got into crime.

Mr WILLIE - Okay, I was just going from your submission. I am interested in what clicked for you. You have described this difficult environment, in the jail; but at some point, in your life you decided you were not going back. I'm interested in what goes through a prisoner's mind to make that change.

Mr BULL - I've always sort of been a little bit old school and I have stayed within that tradition of the crimes that we used to do. There were lines that you did not cross. I was sitting in the prison yard one day and one fellow, Lukey, was going to be bashed by eight other fellows - one of the first gangs - for all of the wrong reasons. To me, Lukey was a likeable, well-respected fellow. I stopped it from happening, but I looked at my mate and said, 'Look, if you are happy with that, you are as bad as they are'. The environment changed, the people -

I never used to mind presenting as Ted Bull the crook, the druggie, the alcoholic, whatever you choose. I didn't mind identifying as that. There are a lot of times in my life where I had to - necessity and need. Yes, the people within the system changed and the system was becoming more archaic than progressive. I chose at that time not to go back to prison. When I started fishing, with Mures Fishing, that changed my life.

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Mr WILLIE - That was an employment opportunity that helped. What about some of your fellow criminals, where you have seen them change, too? Is it an employment opportunity usually?

Mr BULL - We sort of grow up and it is sort of fun. My bestie - Smarty - he lives up in Launceston and I have to say that a big part of me being able to change in the way that I have is because I am now living down here in Hobart, rather than my life in Launceston. That is where Ted Bull lived for 20-odd years and it is funny, no-one down here knows Ted, but no-one up there knows Tony. They think we are brothers.

Ms WEBB - They know now.

Mr BULL - Yes, but even most. I went to see a friend of mine - an ex-prisoner who had just come home after a long time - and I said to the fellow down at the window, 'Can you tell him Tony Bull is here to see him?' When the feller went, I thought, 'Oh, my mate doesn't know Tony Bull', and my mate wasn't going to come down. He only came down because he thought I might have been related to Ted Bull. So, for me to be able to change in the way that I have, of being more Tony Bull and the people that I socialise with now, has really made that difference. But I still socialise with my co-accused and the people I used to hang with.

There were a few times a few years back where I've rung my bestie and said, 'How about we just get busy again, I've fuckin' had enough of this', and he has talked me out of it. I couldn't imagine myself being the criminal that I used to be. The longer I'd done it, and the more things that I'd done, I got to feel the pride that everyone was talking about.

Mr WILLIE - It sounds like a changing environment, an employment opportunity and maybe a bit of age and experience.

Mr BULL - Age has something to do it. I can't climb fences or run as fast as I used to be able to do.

CHAIR - That goes for a lot of us.

Mr BULL - Yeah. I'd need a tractor to get me mate over the fence now. It was like fishing as well, it was an important moment for me. It was sort of funny; I got a job on the *Kristy Lee* down at Kettering. Turned out they had electrical problems, so the trip was put off for a day. In that day I went down to the Mures boat, *Diana*, and got a job that was to change my life. The next day Tim went out with his new-found deckie, and they both died.

Being on the *Diana* a week or two, I was lying out in the boat hatch at 4 a.m. in the morning about an hour before we started working, I was just staring at the sky. In prison you tend to stop looking up because all you see is the bars and it interrupts your views, so you stop looking up. It was from that moment on that I started appreciating my freedom and understanding my freedom for what it was. I like to say I was caught between the two blues - the blue of sky and the blue of the ocean. Everything in between it is whatever you want it to be. The funny thing about fishing is, it is a lot like being in prison. The isolation and routine is exactly like being in prison. It wasn't until three years later when I stopped working on the boat because I got a dog, and I had to live in society - I got a smack in the face pretty quick. I had to pay my rent and do my groceries and I did all the things that I never had to do before, so, it has been an interesting journey.

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CHAIR - Thanks. Meg?

Ms WEBB - We hear a lot about staffing issues and it seems like a lack of resources into the prison for things like staffing or health or mental health services. That lack of resources is one factor that might be a potential barrier for supporting prisoners in a way that might be effective, but there is also this culture issue. You have spoken a bit about that, an attitude or a culture about what the place is about.

Do you think it is a bit of both, or do you think there is one more important than the other, in terms of looking ahead for positive change?

Mr BULL - I don't think the system has done anything to promote change in the last 20 years. You can't have an institution where there is no alternative to violence program, or no drug and alcohol program, or no parenting program. I was there when all these programs began. I was part of creating them and making them, as my job at programs. You can't say that an institution, any institution for that matter, is focused on change at all if they don't do one thing to promote it and allow it. I mean, it is okay to say yes, the boys can do this and boys can do that. Well, on paperwork they can, but inside the walls they can't. There's no opportunity. You've got to understand the concept of containment and control. Seriously - and this is what makes me laugh, but it is so true - if that prison was filled with horses, cows and ducks there would be thousands of people picketing out the front every day for the abuse and the continued ignorance that is shown to those inmates, through the lack of programs and the lack of resources.

You talk about a lack of staff. Well, I think most of them are on sick leave, aren't they? For that to happen and be allowed to happen and continue happening - even I know it is a rort. My next-door neighbour was a prison officer and told me it was a rort; he jumped on the same wagon. So, the system doesn't do anything to allow for change. They are just locked up and ignored.

Ms WEBB - You described things being different in times past when there were more programs -

Mr BULL - It really was, yes.

Ms WEBB - So, from your observation, did they withdraw funding for those things? They didn't get funded anymore and that then worked to change the culture; or what happened?

Mr BULL - I saw it happen. You have to focus on what the system was like - containment and control. They had to be boss. As a prisoner advocate, and a long-time advocate, it was considered that I ran the prison and not the superintendent; so there was always a war between me and them. My arguments or points of view were always about basic human rights and education and opportunity, nothing more. I used to have quite a bit of power - I could stop the yards and they would strike or refuse to go to work because we wanted better conditions. While all that was happening the screws hated it, they despised it and they despised me.

So, when we had a strike one day they kept us locked down and brought protection out of the yards, and then the protection inmates ran the entire prison. It was from that moment on

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that everyone started to get locked down and basically ignored. To be honest, that was exactly what happened. George Lawler, Graeme Barber - they were the instigators of it all. They took containment and control to an extra level, and it was a power-based war - us against them - and they needed to show that they were boss. That was where it all began.

Mr VALENTINE - Just a supplementary to that, Tony. Let's imagine we get all of these things in place that help to reduce the number of people going into prison. You've got the people there, that gang mentality and all of that sort of thing; what is it that needs to change to reduce that so we can get to a better place, and how do we better deal with inmates? Because there are some pretty hard-nosed people in there and those gangs -

Mr BULL - It would only be hard because the institution makes you hard.

Mr VALENTINE - I appreciate that; but I am just thinking, how would we move it on?

Mr BULL - Thank you for that question. I thought a lot about that; and all right - it's okay to suggest this and that, but how do you do it, especially in today's environment? Back years ago, it wouldn't have been so hard because we were trusted to an extent, because we were inmates. That allowed blokes to go to university and work at Incat and do all that sort of stuff. It was like, you showed faith in us, so we will do the right thing, because two groups of people were helping each other and for a long time, that resistance in containment and control has created an 'I hate you, I hate you, I hate you' attitude. How do you begin to change that? Do you use the bracelets and the home detention ones?

Ms WEBB - Do you support that, Tony, do you support home detention as a first step?

Mr BULL - I did until I was speaking to the officer that was running home detention and I thought, what a joke, it is only an excuse. If you have got the resources and the opportunities to help the people who are wearing the bracelets, that will then make a difference and you can do that by school.

I started university as a prisoner. I was a maximum-security inmate doing a social work degree at uni. While university was difficult, and very different from what I had learned at grade 9 at Geilston Bay High School way back whenever, the more I did it, the more confidence I got within myself. It is like debating. I learned from walking into the prison as someone who wouldn't open his mouth to someone who won't shut it.

CHAIR - That is what happened to me here.

Mr VALENTINE - Thank goodness you won't shut it. It is very interesting.

Mr BULL - As I said to Mr Harris, it's not so much of what I say; I was the Pied Piper of people, according to him. It is not so much what I say; it's why I am saying it. They weren't all bullshit reasons; they were heartfelt, true stuff and that is why it works so well.

That control and containment system, with Graeme Barber in control, he would always believe that once a crim, always a crim. And you are always going to be a crim if you are not given the opportunity. But how do you create a prison without bars? One of the things - and more so now - people like me know whether people like you understand or not, and that really makes a difference.

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CHAIR - How are we going?

Mr BULL - Yes, good. In this case, if you change the teachers, you will get a different student, you know what I mean? You have to be realistic in looking at this. Is it the walls that are the problem? No, not really; it is the people that have control within those walls, and the attitude has to change.

CHAIR - Is that both ways, though?

Mr BULL - Yes, but you will find that if you continue to lock a person down, whether it be a prisoner or whatever, if you continually lock them down, be ignorant and be abusive to an extent, you are not going to get a nice, happy reaction. I know, Risdon was a whole lot colder and it was really bad in a human rights sense, but we were happy, as the other prisoners, because we were doing things. We had our hobbies, we had our sports and people were interested in that.

Mr VALENTINE - Which period are you going back to now?

Mr BULL - Late 1980s, early 1990s.

CHAIR - Not that long ago.

Mr BULL - This is the stupid part about it. When I was working in programs, I was a trusted prisoner. The Salvation Army developed a program where I go to speak to the troubled kids at the high schools. The deal was, and these are my rules, I had to go as a prisoner in prison clothes, because you want reality. I didn't mind having a screw with me, it had to be a civilian which happened to be Tony Davies and we went to probably four or five schools. Two people I am friends with now, I am really proud to say, were part of the meetings I had with them about identifying as a criminal and a prisoner.

Not taking the light off it, out of probably 50 people that I spoke to, two never went to jail and decided not to be a criminal. I loved doing that. Yet, Graeme Barber, because he had the power, stopped me from doing it because he did not want me to influence the youth. That is the change of attitude.

CHAIR - We have time for a couple more questions.

Mr VALENTINE - You talked about homelessness when exiting prison. Clearly, that is really important. Is it because if they are homeless they are going to reconnect with their old networks?

Mr BULL - You have no choice. You have to understand they are going into prison in 1983 and coming out in 2003. To you, it is still 1983. Getting out of jail is one of the most euphoric feelings you have ever felt in your life. To be honest, the last thing you think about, of all of the things that you thought about while you were in prison. It is elation at its max. Then, if you have nowhere to live, no money in your pocket, you have no choice but to go back to the very life that you left.

Mr VALENTINE - The services that are being offered at the moment -

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Mr BULL - There aren't any.

Mr VALENTINE - The likes of Beyond the Wire and those sorts of services.

Mr BULL - You can only do so much for so much.

Mr VALENTINE - Not enough services?

Mr BULL - None at all. You've got people who have done life sentences and coming out being homeless. I mean, seriously? The system, that has to be all organised and sorted out before you get out, not when you get out, because it is not going to happen. That is something that we used to do and I used to do as a program support worker. I used to initiate and encourage these things and help. There is none of that now. We are not all smart crooks, you know? There is a reason why we steal. It is because we are not clever.

Ms WEBB - I wanted to pick up on the answer that you are giving to the Chair around the use of home detention and it not necessarily working. Was that about you also have got to put supports and services around that person, even if they are in home detention, in order for it to work? Was that what you were talking about?

Mr BULL - Yes, that was exactly what I was talking about.

Ms WEBB - And that is not happening now?

Mr BULL - No, not at all. We are just replacing the cell in Risdon for the cell in Claremont. That is ridiculous. If you have a young fellow or an old fellow or whatever that has no money because he doesn't know how to work, or he has a drug habit - all of the stuff that goes on in lower-class society, all of those struggle points - and what do you do? Lock him in a lounge room. You have to have the support so that you can progress as a person.

CHAIR - Tony, it has been a real pleasure to meet you but, also, we greatly appreciate your being so candid with us and providing some insight into your life journey. Obviously, it is a journey that a lot of other Tasmanians have been on as well, and continue to be on.

Mr BULL - Thank you, that is really what I want to get through. I am in my spot and it is not about me, it is about the other people. I have seen them - they are good kids. All they need is the opportunity, a kind word and encouragement, all of the stuff that they do not get at home. I want to be a prison mentor where, if someone wants to stay on the straight and narrow and really do the right thing by himself, I want to be help him do that. Yet, I am not allowed to because the system will not let me.

Ms WEBB - We do not have any programs or systems where we use lived experience expertise like yours to feed back into the system?

Mr BULL - Nothing. I am not allowed up the driveway. We haven't got a halfway house. Seriously? If this is really a priority, the money that you are going to save in lowering the rate of recidivism is going to be of benefit anyway.

CHAIR - Thank you very much. We certainly appreciate it.

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THE WITNESS WITHDREW.

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Ms HEATHER KENT, CHIEF EXECUTIVE OFFICER, AND STEPHEN SHREEVE, EXECUTIVE MANAGER, BETHLEHEM HOUSE, WERE CALLED, MADE THE STATUTORY DECLARATION, AND WERE EXAMINED.

CHAIR - Thank you for your submission to the Inquiry on Tasmanian Adult Imprisonment and Youth Detention Matters, and for agreeing to be part of our hearings today. You've read the relevant information regarding being a presenter here today? I remind you that all evidence at this hearing is protected by parliamentary privilege, but that anything that's said outside of these hearings may not be afforded the same privilege.

If there's anything you'd like to share with the Committee in a confidential matter, please do request that and the Committee will make a judgment and we'll facilitate that if all possible. The *Hansard* will be available at an appropriate time.

We've received the submission, but there may be something that you'd like to point out to the Committee or share with the Committee, whoever has taken the opportunity to do that, please commence.

Ms KENT - My role is as a CEO of the society more generally in Tasmania and you would see in our submission that I've touched a little bit upon the nature of our work. There are a couple of elements from that that I'd like to draw forward to emphasise. Most particularly, we are not just a member-based organisation. We are truly a member-led organisation. Since our establishment in Tasmania in 1899 it has been our members on the ground that deliver support to those who are experiencing disadvantage and poverty.

We have in Tasmania, at this point, about 260 members and they fulfil their Vincentian vocation by undertaking home visitation, providing emergency relief to those who are experiencing hardship. In that role, naturally, they encounter many who are experiencing cyclical areas of disadvantage and they regularly do come into contact with those who encounter the justice system, both as adults and as youths. They are increasingly aware of the impact of trauma in childhood and how that can have an impact in later adult life, which often brings them into contact with the justice system again.

Over those 124 years, we have enlarged the services of our members to have a paid team. Perhaps the area I want to focus on most particularly, in relation to Bethlehem House, is that our members are charged with identifying special works. It was 51 years ago that the members in Hobart identified a need to respond to an increasing degree of homelessness. Bethlehem House is one of four special works of the society, as I say, operating for 50 years and changing dramatically over that period of time. It brings into fine focus our work with those who are experiencing a high level of disadvantage and more frequently, and most particularly, who have worked within the justice system and have been released through there.

Bethlehem House, when it was first initiated, was simply an overnight roof where the men were invited to arrive in the early evening. They could have a shower. They would have a meal. They would have a bed for the night, but then they were exited from the accommodation the next morning. From there things have really evolved, so I would like to introduce Stephen, who is a more recent appointment as our Executive Manager. Listening to Tony speaking a moment ago, Stephen has had the good fortune of working with men through the prison mentoring program for many years and has a strong, deep, rounded view of the prison system.

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Mr SHREEVE - My background, surprisingly, is insurance, but I spent four years mentoring at Risdon Prison every fortnight so I had a good insight into the cohort of people that we currently deal with in Bethlehem House. I saw the good and the bad in the way that people are managed at Risdon Prison, and in Bethlehem House, we take a therapeutic approach. You will see in our submission we refer to our residents as 'people who have experienced homelessness' rather than homeless people or murderers, or whatever tag you want to put on them. It is a very different approach.

I would like to point out from our submission that one of the key differences and a point of difference in our service is our case management model. It is not part of the submission and you won't be able to read that, but it is our point of difference. We get men in and, at day two, we start by setting some goals. It is very different to what you might get in another service. We sit down with them and we say, 'What do you want to achieve in life?' Out of that comes a lot of things. It could be not just literacy, not just a home or a job, but it might be reconnecting with family. It is quite a different approach, and our success rate has been quite good. I can't give you exact numbers but it is around 60 per cent or a bit more where people leave and move into stable accommodation. And it is not just that; it's about getting a job as well, and reconnecting with family and those sorts of things.

Ms KENT - Fundamentally, we are excited about the opportunity to reconsider the Tasmanian approach to imprisonment. I am going to park the youth detention side and not comment on that area. At a national level, Vinnies has become an active signatory into the Justice Reform Initiative. One of our core elements of purpose is social justice advocacy. So, we see this as an ideal opportunity to invite the Tasmanian Government to reconsider the current approach to adult imprisonment, to look at more inclusive approaches to rehabilitation and, particularly, reconnection with the community. We would really highlight the case management model as a core part of our success. Again, I couldn't help but ponder Mr Bull's comment about the prison pump, and regrettably in several instances, folks turn in a fairly negative way fairly soon after.

Witnessing what happens at Bethlehem House and that full wraparound support that is designed to get people moving back into the community in a productive way - we see many models that are showing great effect, whether they're the Denmark model that Martyn Goddard commented on or you'll see that we've highlighted a particular approach that's been effective in Texas, which is very new and different, created by Jerry Madden. Even in other Australian States, there are different approaches to achieving rehabilitation and restorative justice in a way that still accepts that communities still have expectations around safety and retribution, and that there are different ways of approaching this.

CHAIR - Before I open it up to other members, in the work that you do at Bethlehem House, you talk about 70 men experiencing life on the street if there wasn't this service. Is it the fact that you don't have enough resources to cater for more than 70? I'm just interested in how you meet the needs of the community, given that our previous presenter said that there was virtually nothing.

Mr SHREEVE - We currently have capability for 66 men. We've got the Warwick Street address. We've also got what was the old Waratah Hotel, which currently houses 24 men, and you're no doubt well aware that there's a new building being built on

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Harrington Street just behind the old Waratah Hotel, which will house 50. By 1 January, we will be able to house 74 men.

I might just touch on what we currently do that's impacting the justice system. At the moment, we do take parolees into the existing agreement of Bethlehem House, and we have a limit of nine parolees. That number was fixed some time ago, basically because we want to keep the equilibrium within the house. If we have a house full of parolees, that creates a different environment and dynamic, and it can potentially cause issues for the other people who haven't been through the prison system.

We currently have nine. We get a referral from the prison. We assess them on paper, we will then do a Zoom interview with that parolee and determine whether they are appropriate for the house to keep that equilibrium. We do currently take parolees. Those fellows get to experience the benefits of the case management model. We work with them; it could be to work through the ongoing justice commitments that they have; it could also be reconnecting the family, dealing with drugs - whatever their goals are in life.

To your point, Tania, if we had another facility, that number could increase. It's not going to be the same as some of these alternative models that have been spoken about, but it's certainly helping the system.

CHAIR - It may provide a home for enough time for somebody to see that they have future outside of the prison system.

Mr SHREEVE - If I could just touch on one, I'll give you an example. We've got a fellow that's just moved in early February, and now we've got him mid-June. He said to us recently it's the longest period he hasn't been in prison for ages. His crime of choice was armed robberies. He's not on drugs. He's going through this case management model. He's got hope. He's consciously deciding to not mix with the wrong people that he used to mix with. It's a massive turnaround. It's a fantastic turnaround, and I put it down primarily to the case management model and that intervention that's helping that. And there's a number of people, as I said, we've got nine parolees at any one time.

I might also add that there's quite a waiting list from the prison. We currently have three that are assessed that are suitable to come into the house, but we've got nine, so we can't take them. Beyond that, we would probably have about another six at the moment that want to come into the house but haven't been assessed because it's too early. We can't provide something in the short to medium term.

CHAIR - Supplementary, Ms Webb.

Ms WEBB - You have partly covered my supplementary question, which was about the unmet need in terms of, if you take nine, how many are banked up waiting to come? You do mention, in your submission, that there are situations where parolees are forced to complete their sentence instead of applying for early release because there is nowhere, presumably, to offer them support. Are there other services offering similar support or somewhere for parolees to go, particularly, say, in the north or north-west of the State, that you are aware of?

Ms KENT - That is such a salient point. Beyond the Wire does provide a very effective case management system. Again, they are advocating for throughcare - that early connection

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while incarcerated. They do not have the properties in order to provide that wraparound service. Since joining Vinnies, one of my biggest comments is that not every person leaving Risdon Prison wants to live in CBD Hobart. They have family and supportive connections in other parts of Tasmania. I would advocate that there is a need for a similar model in the north of the State.

Ms WEBB - In terms of the sort of model it might be - you mentioned that you have limited the parolee number to nine. You have an equilibrium then because you provide services to people coming from other entry points into your service. Do you think there is a benefit in having that sort of mixed model, or should there be more targeted models that are for parolees only, for example?

Mr SHREEVE - I think there is fantastic benefit in a mixed model. The parolees get to experience, in one sense, a different group of people. I think that helps with an integration. It helps to normalise their environment. If it was only parolees, that would be a different dynamic. It would probably require a different skill set in terms of the management of those people and probably different security, although we have reasonable security at Bethlehem House at the moment.

Ms WEBB - Is it that we don't have men's shelters in the north and north-west who could do a mixed model like Bethlehem House is doing in the south? That it's a situation where you simply don't have men's shelters in those areas?

Ms KENT - Correct. Absolutely.

Ms WEBB - It is shocking.

Ms KENT - It is. If I could also move on. With our Warwick Street, the existing Bethlehem House site, we began looking some time ago at the future use of that. We met with various parties about the options such as a halfway house, mixed, a mental health-focused facility. In those discussions, it became very clear that a mixed style of environment is going to lead to better outcomes. That is the focus that we would like to take. I would also highlight that we are sitting here talking only about men and their experience upon leaving the justice system. What about women? You might be familiar with the Argyle Street base for Vinnies in Hobart, which is where we have our retail store and above that is our southern regional office. We put forward a proposal to Homes Tasmania and received notification late last week about partial funding for redeveloping that as a site for women. It will be a site for women over 55, but that site is accessed through Church Street, which is about 200 metres or so from the old Bethlehem House site. It's a difficult building; it is a historical building and it has been added onto in so many different ways - but we're looking at those two sites to provide the equivalent degree of support to women. Then, women who are leaving on parole or who may, ideally, not even have been incarcerated but would be living a homeless life and may be tempted to move into the area of criminal activity - we would like to see that option for women as well.

Mr VALENTINE - I am interested in the case study model and how you are dealing with parolees and the like. Does any of that involve connecting with service providers out there in the community to help -

Ms KENT - It is about 80 per cent of it.

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Mr VALENTINE - Across the State, Meg raised the issue about what was there in the north and north-west of the State. Has there been any attempt to find employment for folk are coming out of prison and might be from the north or the north-west, so that you can connect them to work and indeed, a home, which is a fundamental issue?

Ms KENT - Absolutely. I am going to share with you a case of a fellow called Joey. Joey is a young man, he would be in his early to mid-twenties. He has a lifetime cycle of disadvantage and, following his predecessors, he entered into the justice system as a consequence. As a parolee, he came out and lived in Bethlehem House, where he was immediately engaged in an employment program as part of his case management activity. It was a range of things along the lines of literacy and numeracy, but also digital literacy. As a consequence of that program, he was then put in touch with a business entity. If you have left with that criminal history, getting across the line in an employment context where you might need all manner of things like a white card, working with vulnerable people or whatever, there are often so many barriers before you. This is a business called Tas Scaff, and the fellow who runs that has a very inclusive, embracing approach for these men who have left through that system.

He employed Joey and took him through his paces of starting to understand working life - getting up early, getting to work, hard manual labour in the elements - and as a consequence Joey built up his self-confidence and his capacity to pursue further employment. His partner and their children still live in Launceston, so we had a period of time where we had another site that you may not know about - it is in West Hobart and it is part of the Bethlehem House model. It is just a unit, but it afforded an opportunity for Joey to reconnect with his children and his partner before they subsequently transition back up to the Launceston community and continue employment. They are the kind of models that we are really anxious to see spread across Tasmania -

CHAIR - I know the good people of Tas Scaff, they are in my neck of the woods.

Ms WEBB - Yes, incredible.

Mr SHREEVE - If I can just jump back to Rob's point. A key part of our case management model is what we call inreach support services. Whilst we have four case managers on site, there is a lot to do and they do not have skills in everything. So, we have about 50 different support services out in the community that we try and draw upon, depending on the needs of the resident at the time.

Ms KENT - We have those case managers; we also have support workers. The case managers are mapping out, according to the individual's goals, the various steps along the pathway. The support workers work with those residents and assist in connecting. Holyoake, which is about to present, that is a large part of that connection, but the tentacles spread broadly.

Mr WILLIE - You touched on it earlier, and it is obvious you know what works in terms of reducing recidivism and reintegration. How do we balance community expectations with that and how do we change the conversation? It seems like the political system responds to the community sentiment. You mentioned Texas earlier - probably a conservative State in America - how have they changed the conversation there, for example?

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Ms KENT - Yes, I have a tab open here just to respond to that question. I urge you to have a look at a website called www.rightoncrime.com. It shows the way in which those voices around community safety, expectations around punishment and retribution have been flicked around to having more of a restorative and rehabilitative approach. They make a strong point in here about the government's requirement to make good use of taxpayers' money, because fundamentally that sits behind all of this as well.

I would argue that in the years that this has been carried through with high effect, they have achieved cost efficiencies and they have been able to turn the dial on community sentiment. I could not help but read a couple of the other submissions that have come through for this process, and one which spoke about a desire to sit with - in this case, youth - who have committed significant crime, to build a shared understanding of that context; for that youth to have an understanding of the impact that has been made upon that family, for the betterment of his future. There are a lot of examples where this can be delivered better; but it does require a sustained effort with constant messaging to the community that locking somebody away and feeling that is the right thing to do is not the best model.

Mr WILLIE - So, a coalition of community leaders and organisations like yourself running a bit of a community education campaign?

Ms KENT - The Justice Reform Initiative sits behind that. It is large part of it, turning that information around. If you look at recidivism, it means more crime is being committed and it means those in the community are exposed to a greater level of crime. If you look at the outcomes of Right On Crime, it is switched back so that there is a reduced level of crime; those who would otherwise be incarcerated remain a productive part of our community and they remain an active citizen in employment as well.

Mr WILLIE - The Justice Reform Initiative - members around the table would know about that but the broader public probably do not know. How do you get that message out there?

Ms KENT - It is still in its formative stages, as I would highlight. Probably, it is getting greater traction in some of the other Australian States. I note that it's referred to in a number of other submissions and you will be hearing further about that, too. It is something that the Government - it needs to be completely bipartisan - could listen to and advocate more in terms of what needs to be done.

Mr WILLIE - A national conversation as well as a State one?

Ms KENT - Very much so, but with local flavouring. Stephen, you had some stats around the cost of the Bethlehem House model per resident, versus what the cost would be in the justice system?

Mr SHREEVE - I had a look this morning. On the current budget, with the current resident numbers, it is about \$40,000 per person, per year.

Mr WILLIE - It is about \$140,000 in Risdon?

Ms KENT - No, it is about \$300,000.

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Mr WILLIE - \$300,000? Right.

Ms KENT - That is a powerful argument to begin with. You are going to get, naturally, that retaliation around community expectations of safety but there are similarly really great examples; again, that reduced recidivism rate, as a starting point.

Mr SHREEVE - Could I just jump in, at a micro level. One thing that gives me great job satisfaction is to try to sit down with a resident and have one meaningful conversation every day. It could be five minutes, it could be 10 minutes. The reason I say that is because there is probably a perception in the community that people coming out of prison are monsters of all sorts of abhorrent crimes, et cetera. Fundamentally, they are human beings very similar to us. You have heard it before with Tony -

CHAIR - Who have often made poor choices.

Mr SHREEVE - A lot of them are good people. I get so much pleasure out of being a part of their life, and to help them get back on track. I was saying to Heather, we had one leave the other day, and it is just amazing. That is my job satisfaction. I would still like to be paid, by the way; but they are human beings who want to get their life sorted. If the community cannot see the value in doing that, then we have got a big problem.

Ms KENT - I cannot help but think that placing somebody into incarceration, away from the support networks that are going to help them reshape their life, is not always the answer. There will always be those who require that high level of secure imprisonment. Rehabilitation and case management throughcare as well would be ideal; but the better outcome is to have a completely different outlook.

Ms WEBB - Thank you. I am interested in the comments you made in the submission about services provided within prison and then also potentially on exiting. The differences between shorter and longer sentences, and the fact that people who are serving a longer sentence can potentially be provided with more support and assistance, I imagine, moving back out into the community; but shorter sentences are problematic. Could you comment on that, in terms of what you see in the Bethlehem House service around shorter sentences and whether that is something we could think about differently?

Mr SHREEVE - My understanding is that people in Risdon, if they are there for a short period of time, do not get a lot attention. The longer-term prisoners who are leading up towards parole in that 12 months before they are let out, there is some more activity happening. They have more day-release activity and things like that. I might add, just in terms of what we would call throughput as a potential. We have a case manager at the moment who came to us from Risdon. She has fitted in like a hand in a glove. She understands the cohort, she understands what we are trying to achieve.

Ms WEBB - Do you mean as a corrections officer, she has now come to you, or she was an inmate?

Mr SHREEVE - Not as a corrections officer but more like a case management activity at Risdon before they are released. I can see how it would work really well if we had a similar case management to what we have at Bethlehem House, situated at Risdon, so that before someone is released, they start to get that activity and that goal-setting and goal-achieving.

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Then, once people leave there and perhaps come to Beth House as a parolee, there is a continuation of that case management approach. I see huge value in that, and I would be confident to say there would be a far better success for people leaving prison.

Ms KENT - That is the throughcare model that we are talking about. At the moment, it only starts to take place in that initial Zoom interview, which is shortly before release. There is no capacity, at the moment, for greater involvement in the time while they are in prison.

Ms WEBB - Can I just clarify too, though, that there are elements of case management occurring within the prison, prior to release? Are you suggesting, though, that if there was more coordination across the two models that are used, then that would be an effective way to ensure a more seamless transition?

Mr SHREEVE - Absolutely.

Ms WEBB - I note that you have there in front of you a diagram of your case management model; is that something you would like to table for the Committee so that we can see a copy of that, or perhaps send to us at a later date?

Mr SHREEVE - I can do that. I just tried to make this look nice and glossy -

CHAIR - It is impressive, and it is colourful.

Ms WEBB - You have the opportunity to table it with us here today and then we have it as part of our records.

Mr SHREEVE - I might just add, there is a number of documents that hang off each segment of the wheel. In simplistic terms, this is how we do it, but there is a bit more to it. But I am quite happy to table it.

Ms WEBB - Well, you are welcome to either table it or to send something through to the Committee later describing it in whatever way you think is useful.

Mr VALENTINE - I have just been looking at your submission - page five. You have not numbered the pages but it is page five. You talk about visiting specialists are commonplace. I am interested to know whether there are shortages of qualified services in this space. What services do you find hard to access for these people that you are looking after?

Mr SHREEVE - Well, Heather mentioned that Holyoake is coming in soon. In terms of counselling, drug and alcohol counselling, that is funded through a grant from the Tasmanian Community Fund (TCF) so I guess the issue for us is -

Ms WEBB - That is a time-limited fund, then.

Mr SHREEVE - It finishes at the end of June.

Mr VALENTINE - But do you have problems getting hold of the specialists to come and do the work?

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Mr SHREEVE - It is partly that; but it is also funding because we have a fairly limited funding model and approach. It's a matter of trying to get the best value from the funding that we have. We need to put food on the table, and heating, and all that sort of stuff as well.

Ms KENT - We are not funded for those elements; they are additional grants that we need to compete for. If I could highlight the employability program, it is everything from those whom we assist with literacy and numeracy - I am going to struggle to think of the name of it now, it has transitioned to a new name with Rosalie Martin - Connect 42, that's right. That's a great program and we were funded for a period of time to have that, but of course the funding ceases and they are in demand amongst so many other people. Resume writing is another area where many of these men have not needed to write a resume for a great period of time. It is getting that sort of specialist support that people do not immediately think of, but it is the boots on the ground that is going to make a difference for getting their next career.

Mr VALENTINE - And these men who come and stay with you and use your services, what have they talked about in regard to services inside the prison? Have they ever confided to you or talked to you about the services that they wanted inside and they could not get, or were not provided? Do you have any comment on that?

Mr SHREEVE - Not really, no, I don't really know definitively.

Mr VALENTINE - That's all right, I just wanted to ask the question.

CHAIR - You talk in your submission about the language, the terminology that we use to refer to people. Can you expand on how you might see that being important and how we might change that?

Ms KENT - I will go back to the fundamental ethos of the Vinnies model. We don't refer to those that we support as clients. Instead, we highlight that we assist companions. Now, that we are companions does not always sit easily with everybody, but the intent is that we are walking beside those individuals to help them establish their own independence with dignity. In terms of the language - again, the Justice Reform Initiative is a key part of this - there is so much to be gained by educating our broader community about other ways of labelling folk, which is more positive.

I could not help but look at the Danish model that Martyn Goddard placed as part of his submission and early on, instead of referring to folk as 'prisoners' referring to them as 'detainees'. It helps to reset in the community's mind, but even more importantly, it helps to reset in the individual's mind, and that is part of what we see as an important process towards independence.

CHAIR - That has already started with youth justice, but perhaps not in the adult prison.

Ms WEBB - Can I get a little bit more detail from you about funding? You mentioned that elements are not funded and you then have to go seeking grant funding, which is often time limited so there's no security or ongoing assurances that those programs will be available to you. In terms of, say, the nine parolees that you have at any given time, what Government funding do you receive to provide the assistance to those men who are living with you? And is it different to the broader assistance you receive for all the men that live with you at Bethlehem House?

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Ms KENT - It's universal.

Ms WEBB - So it's not justice-related funding that comes to Bethlehem House for providing this service?

Ms KENT - No.

Ms WEBB - Even though there's an agreement that there'll be nine spots for parolees in the service?

Ms KENT - Correct.

Ms WEBB - So, not only is the service not funded, but none of the parts of the case management model that you reach out to receive support from externally is funded either? There's no guarantee that can continue?

Ms KENT - Correct, it's all through Homes Tasmania.

Ms WEBB - And was it that Bethlehem House and Vinnies, through Bethlehem House, proposed to the Government that there would be this allocation of nine beds for parolees within Bethlehem House, or was that something the Government approached Vinnies and Bethlehem House about?

Ms KENT - I'd have to say that was before either Mr Shreeve's or my time. I know that over many years there has been a strong resolve to do what we can to support those who are exiting the justice system. I couldn't say who initiated that conversation.

Ms WEBB - But at the moment it's fortunate, from a State Government point of view, that Bethlehem House is there providing the services, because there's nothing set in stone, in terms of funding, that means it can exist or continue.

Ms KENT - Yes, correct.

Mr SHREEVE - You would be aware that for someone to get parole, they need to have a suitable address. We work in partnership with the Justice department. They understand our position that we can't take too many. But we do what we can, and we've got a good relationship that works well. But it's limited.

Mr VALENTINE - Just the fundamental issues of having an imbalance, if you have too many parolees and not many people that don't have resources. What are the main issues with not having that balance? Is it because the people that are without resources and haven't been through prison risk, in some way, getting to know those who have committed offences?

Mr SHREEVE - There is that; but one of the key ones for our service is that you'll often have parolees that have spent a bit of time in prison and they've bulked up - they've had to survive, it's that sort of environment, whereas, typically for the cohort outside of that, they've got serious health issues. They've had a drug dependency. They're often quite frail. If you start to mix a very strong cohort with a less advantaged one, it can present some problems.

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Ms KENT - And that's not just older men; there are young men who present with that fragility because of their compromised health status, both psychologically and physically. As Mr Bull said, that prison pump can create quite a disjunction within the house.

Ms WEBB - As well as the parolees and the people who are exiting prison, you also have referrals from the courts for people on court mandated diversion programs. Do you allocate certain spots for that area as well, or is that just as you have spaces to fit them?

Mr SHREEVE - It's considered part of the nine.

Ms WEBB - So the nine covers not just parolees exiting prison, but court-mandated -

Ms KENT - That's right.

Ms WEBB - Presumably then, referrals from both those sources far outweigh the nine spots that you have?

CHAIR - That waitlist continues to -

Ms KENT - Magistrate Marron was in contact early in the new year to talk about what is our capacity to enlarge that further. We're open and wanting to do that, but we simply have to manage the overall dynamics of Bethlehem House.

CHAIR - Will that at all change with the new facility coming online?

Ms KENT - The real numbers don't increase it all that much. We're at 66 at the moment, we're only going to 73.

Ms WEBB - Can I just check, then, that there's also no funding that would be attached to those referrals coming through the court-mandated diversion program, either?

Ms KENT - No.

Ms WEBB - So, again, it just looking to utilise the facilities provided by your generalised funding, without targeting it.

Ms KENT - Free of charge. Yes.

Mr SHREEVE - I might just add the success rate for court-mandated diversion (CMD) residents is very low.

Ms WEBB - Would you like to reflect on that for us?

Mr SHREEVE - It almost seems, compared to other parolees, in the CMD programs, the type of people that end up on that often fail and end up back in prison or whatever. They can still fail, but we find a better success rate with the other parolees in the house and going through the case management model and applying that to their lives and having success.

Ms WEBB - You still use the case management model with the CMD folk who come through your system? Would it be your observation that the factors that might contribute to a

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higher failure rate there being they are at the stage of dealing with drug and alcohol issues, mental health issues and circumstantial issues in their lives quite actively, whereas a parolee has had a period in jail and may be not dealing with those things as actively?

Mr SHREEVE - I am not quite sure what the mindset is and what they are doing.

Mr VALENTINE - There is not a single point of failure?

Ms KENT - There's not. It is multidimensional, and it highlights that the current system is simply not equipped to be able to intervene effectively at that point, whereas there is a variety of other models that show how that could be better achieved.

Ms WEBB - You spoke about working with Holyoake on alcohol and drug issues, I assume. In terms of other health services and mental health services, are those areas that you find it difficult to access supports for the men who are living with you?

Mr SHREEVE - Mental health is challenging, because there is not a lot available and, once again, we don't have a huge amount of funding to be able to support that, so we are looking for services that can provide that service for free.

CHAIR - A huge challenge generally, in sourcing mental health services.

Ms KENT - Again, we were talking about that only this morning. With the new Bethlehem House, the first floor of that has been structurally designed to be able to best accommodate men with mental health challenges by having particular security doors that are in place, not used day to day but available, and a different layout to the rooms. In order for us to utilise that as a focused wing for those with higher level mental health challenges, we need this specialist support to be able to work in that area.

A submission did go through to the recent State Government's Budget and we weren't successful. While we have some disappointment about that, our sense is that with proximity of the Peacock Unit in Mt Stuart, and the more recent announcement of establishment in time of the St Johns Park site, that will assist in those areas; but there is so much need.

Ms WEBB - In what way, do you think? Do you mean providing somewhere else for the folk to be rather than at Bethlehem House on the first floor?

Ms KENT - Potentially. Sometimes there are those men who present at Bethlehem House who, by the nature of their mental health challenges, we can't accommodate.

CHAIR - There might be somewhere else that would fit their needs?

Ms KENT - Yes.

CHAIR - Members, we always seem to be lacking in time but on behalf of the Committee, thank you both, not only for your submission but for your time today and expanding on some of those initiatives. Thank you for the recommendations. It is always very helpful. I wrote down that there was something in your submission that I thought would be ideal for the report and I have already noted that.

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We look forward to sharing this journey with you, because it will be quite a journey. I know that I have already learnt so much. Again, thank you for your time.

THE WITNESSES WITHDREW.

The Committee suspended from 10.33 a.m. to 10.45 a.m.

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Ms SARAH CHARLTON, CHIEF EXECUTIVE OFFICER, HOLYOAKE TASMANIA INC, WAS CALLED, MADE THE STATUTORY DECLARATION, AND WAS EXAMINED.

CHAIR - I welcome Sarah Charlton, Chief Executive Officer of Holyoake Tasmania Inc., submission no.48. You are here as a solo representative of Holyoake and we thank you very much for your time. Have you read the information provided around being part of the hearing today?

Ms CHARLTON - Yes.

CHAIR - Thank you. I remind you that you have privilege while you are here at the Committee; that does not afford to you outside of this environment, so when you are outside, if you want to speak, you do not necessarily have the same privilege as you do here. Say whatever you like in here.

Ms CHARLTON - I will say whatever I like in here and out there, too!

CHAIR - That is fine. *Hansard* will be available for everyone to read, and if there is anything that you do feel the Committee would benefit from in a Committee stage where we take it and not have it as free, then just request that and the Committee will consider that. Would you like to take the opportunity to speak to your submission, or is there anything that you would like to add, any particular points to highlight?

Ms CHARLTON - Is that what you would like me to do? To go through it?

CHAIR - Well, just if there are any points that you would like to highlight, that is all.

Ms WEBB - Or any opening Statements you want to make before we ask the questions.

Ms CHARLTON - Okay. Well, the reason that we entered a submission is because Holyoake is quite well placed to comment on issues regarding our clients within the criminal justice system, both adults and young people. We have had a long history of working with criminal justice clients and know them pretty well, and know a lot of the issues they are facing at the moment. We have some comments and points of view that we wanted to put forward; do I need to go through them? I think they are already there, so I am happy if you just ask me questions.

CHAIR - Thank you very much. In your submission, you did talk about the factors influencing an increase in Tasmania's prison population and associated costs. Are you happy to expand a little bit about the cost of the work that you do, compared to the cost that we know is for someone who is in the justice system, as in, is in prison?

Ms CHARLTON - That Statement was based on funding we have for four different programs and I was able to work out how many hours it takes for an average. I am talking mainly about two different programs. One is the Gottawanna program, which is a core program for people who themselves have an addictive behaviour and are seeking support. Then, there is the Recovery program, which is a more intensive and longer program to sort of back up this program for people who need longer support in relapse prevention. They are the two different programs.

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The Gottawanna program, on average, is supposed to take about 12 weeks, but people vary with it. We have people coming to us for years sometimes; they might come every six months, if they are having a hard time, they might come back. It varies. I have taken the average cost per person going through the Gottawanna program and that is where I got that figure from; and the same with relapse program because we have a budget and we were quite easily able to work out how much it costs per person, per year. Which is significantly cheaper, as you can see. I used the cost of \$122,000 to keep a person in prison; that is a ballpark figure I was able to glean, but it might be more than that, I do not know.

Mr VALENTINE - Probably varies, depending who is telling the story.

Ms CHARLTON - I just gleaned that from different reports I have read, and I think it is about an average. We keep people out of prison all the time. I could tell you all sorts of stories; I could be here all day telling you stories about people who have been on the brink of going into prison with their fifth driving under the influence (DUI) or under the influence of alcohol or drugs. We had one bloke, he had everything packed, he put the dog into boarding, he had eaten all his food, he had rented his house out because he knew he was going in. He took a letter from us to show how he had really changed his behaviour and they said, 'Okay, you keep doing this and you can stay out'.

That is just one story. I have so many more I could tell you about people who are sent to us, often by the Magistrates Court - sometimes through the CMD program. Well, that has only limited space, limited funding. It is always full, so what the magistrates have been doing with us for a fair while now is they just bypass that and send them straight to us. It is cheaper and it is better, and we always say yes. So, we have a lot clients coming to us with the magistrate saying, 'I will give you one more chance. If you can show me you have made meaningful behavioural change, I will rethink what I am going to do with you.'

Endless stories like this. They do not always stay out forever, but a lot of them do. To me, it is a complete no-brainer that we put money in that area to keep people out of prison so we can keep families together. We can keep children with their fathers and their mothers - mostly their fathers - there are more men in prison than there are women. They can keep employment, so they might be able to keep their house, so their family do not become homeless because there is no-one else to pay the bills. I could go on forever.

CHAIR - We know the cycle. Those that do not fulfil their obligations, is that perhaps because they do not have the family support around them? Do you see any pattern there with those who do not fulfil their obligation and end up in the prison system, or is that not quite so evident?

Ms CHARLTON - Are you talking about the clients I have just been talking about?

CHAIR - Yes.

Ms CHARLTON - The main reasons why people fail is because they do not have anywhere to live. If you are let out of prison or you are not going into prison and you have nowhere to live, what are you going to do? Live in a tent on the Domain? With a whole heap of other people who -

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CHAIR - Or a caravan park at the bottom of a hill, like some do.

Ms CHARLTON - Or in the car with your two kids. In Maslow's Hierarchy of Needs, the most important thing is shelter. Shelter and food. For these people - how do you get a job? How do you go to the toilet?

CHAIR - If you cannot shower and -

Ms CHARLTON - Basic stuff like that. We have a lot of clients coming out of prison who are homeless because if they are not on parole, if they have done time, they get no support. Off you go. Three days' worth of your anti-psychotic medication; go and find a GP who bulk bills.

Mr VALENTINE - We are basically feeding the system, aren't we?

Ms CHARLTON - We are. We are setting people up to fail. It's awful. What hope have they got? Some of our clients have told us, 'I'm going to go and commit a crime because I can't stand it out here, I can't cope. I have to go back in because it's safer in there for me.'

Ms ARMITAGE - Do you have much of a waiting list for people, or have you got enough funding to see all the people you need to see? How long would someone have to wait for, say, the Gottawanna program?

Ms CHARLTON - I'll just talk about in prison. The waiting list is months, because we only have x amount of funding to go in there. We've currently got a waiting list, we've been told there's a hundred-plus people who they want us to see. In prison, it's a very big waiting list. They're always full.

Ms ARMITAGE - And the CMD ones, would there be much of a waiting list for that?

Ms CHARLTON - We try to prioritise those, because -

Ms ARMITAGE - Keeps them out of prison?

Ms CHARLTON - Keeps them out of prison, and also often they have dates that they have to report back to the court or to the parole board or whatever, so we have to make sure that we work with them in that time frame.

Ms ARMITAGE - So it comes down to funding, really?

Ms CHARLTON - Totally. It's all about money, that's why I'm here.

Ms ARMITAGE - If you had more money you could put more people on to go and do more work?

Ms CHARLTON - Yes. The second program I was talking about, the recovery program, we've just lost the funding for that.. It was only ever for one year; it was some of that spare money that Primary Health Tasmania has, and at the end of the financial year they go for a mad scramble and say 'Oh, quick, quick! We need to spend this money!' So of course, I put my

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hand up for this money. It's gone gangbusters. We've got so many clients now, and more coming, and now the funding's cut.

CHAIR - Just dead turkey.

Ms CHARLTON - Just dead turkey.

Ms ARMITAGE - They're trying to find someone to reapply to get some more money to keep it going?

Ms CHARLTON - Yes. See, they reckon it's your problem, it's the State's problem. I don't care whose problem it is; I just don't want it to be my problem.

CHAIR - It's our problem.

Ms ARMITAGE - What was the funding for that?

Ms CHARLTON - It was about \$100,000, that's all. I mean, it could have been \$200,000; it could have been \$500,000.

Ms ARMITAGE - But that's what it was, it wasn't very much.

Ms CHARLTON - That's what started the program.

CHAIR - For 12 months.

Ms CHARLTON - It was for 12 months, but I asked for an extension. Because of COVID-19, we couldn't get to those clients in the first six months. We knew they were there, but we weren't allowed in. We couldn't get into the prison for other reasons; they had an asbestos scare. We couldn't get in to get the clients, so I asked for an extension of time - not money, just time. That ceases in a couple of weeks. Now I've got all these clients, and I'm thinking, 'Bloody hell, what am I going to do? How am I going to keep them?'

Ms ARMITAGE - Because they have an expectation it will continue?

Ms CHARLTON - Yes. And this is an age-old problem with funding: you get a bit of funding, you do a great job, you raise the expectations of your clients -

Ms ARMITAGE - Then they cut you off at the knees.

Ms CHARLTON - Then they cut you off at the knees, and you think, we could save millions of State money.

Mr VALENTINE - I'm interested in the specialists that you draw on to be able to undertake your programs. Is there a shortage? If you did expand your programs, would you have issues getting a hold of the specialists required?

Ms CHARLTON - If we got this money back that I was just talking about, I've got all the staff I need. I've just terminated a staff member, because that funding won't be there. He

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was only contracted year by year, because that's how you have to do it, you can only contract people -

Mr VALENTINE - These are general counsellors, are they?

Ms CHARLTON - They're not general, I don't have general people, I have bloody great -

Mr VALENTINE - No, sorry, I don't mean to downgrade their profile.

Ms CHARLTON - I have amazing people, and they're so skilled, and I'm so picky, because we have such a high standard to uphold. We're not just alcohol workers. Not that I am being derogatory about alcohol workers; my staff are psychotherapists. They work right back to your childhood and unpack why you are drinking five bottles of wine a night. Sorry for -

Mr VALENTINE - If you increased the number that you are dealing with, are you going to be able to get the number of psychotherapists you need to do the job?

Ms CHARLTON - I will, but I will have to go far and wide. The last two I hired to meet the standard I require, one was from New Zealand and the other one was from Darwin. They are out there, I can get them, yes.

CHAIR - At a premium.

Ms CHARLTON - Well, yes, they are getting paid quite well these days.

CHAIR - Specialised work.

Mr VALENTINE - What is the demand for the services like? You can only do so much with the funding you have, but do you have any handle on unmet needs?

Ms CHARLTON - Yes. One of our programs, which is for the families of people affected by someone else's alcohol or drug use, that ranges from three to five weeks waiting list. As I said, in the prison it can be months. Children, I could quadruple that - the schools that we go to. That is an area that I have grave concerns about - our youth and the crimes they are committing and their families. Often, it is their dad who has committed crimes and is in prison and we have kids whose fathers are giving them ice at the age of eight so they can get them to commit crimes. I know, shooting them up! We had another one who was 10 and another one who was 11. It is incredible. You know where they are going to end up. If they do not go into Ashley, they will certainly end up in Risdon because they start a criminal record when they are minors. And you think, we need to be putting more money into young children and helping them understand about respect and about self-respect and all those sorts of things that we need to try and get to them before they get on that roundabout. You can see it. They're not all little buggers like that, but a lot of them are and you just think, 'You poor little thing, I know where you are going.' Sorry.

CHAIR - Never apologise here for being passionate.

Mr WILLIE - Sarah, you've just covered something I was going to ask about children. Have you seen a change in the trends in the sorts of alcohol and drugs that they are accessing?

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Given you have just raised the issue of very young children, your interaction with the child safety system -

Ms CHARLTON - Yes, I have a lot of interaction with the child safety system. I see a lot of kids and parents who are going through that whole child safety thing. A lot of our clients, our Gottawanna clients, come to us because they always have a motivating reason, they have lost something, they want it back. It could be their freedom, it could be their kids, it could be their licence, it could be their job. Something really bad has happened to them, so we work a lot with child safety and the parents who come back to try to prove that they are nice people now so they can have their kids back.

Mr WILLIE - And in terms of the children that have alcohol and drug issues, you are very concerned about the trends there?

Ms CHARLTON - Yes, I am. I don't know if I put a graph in here about trends, but we are seeing cannabis as the drug of choice with young people. When I say 'young people', I mean under 24 years, but even 12- to 18-year-olds, they are all smoking dope; but more of them are taking ice now because it is quite available now.

Mr WILLIE - And it is highly addictive.

Ms CHARLTON - Incredibly addictive. Probably one of the most addictive drugs and the hardest to get off, and it takes longer with people using ice. Alcohol was a walk in the park, really, to physically get people off it, but ice changes the brain. It overstimulates the serotonin which makes you happy - it is a chemical that gives you pleasure like if you have great sex or a really good chocolate cake or a really good book or film.

CHAIR - I've never thought about those two together but anyway, thank you.

Ms CHARLTON - You know those things that make you happy? It overstimulates that to the point where you are depleted of that chemical and it takes more and more ice to get that happy feeling again. When people come off ice - if they have been a chronic user - they are as flat as a tack. Nothing. They just feel flat because that serotonin has been overstimulated and that has affected the brain physically. It is a horrible thing. It can take years; if people are able to cope with feeling like that, they say it can take 12 to 18 months, and some researchers say years, for that to recover. It is just too hard, so you have more ice because you feel better.

Mr VALENTINE - So you go back on it.

Mr WILLIE - And then that is driving crime rates because they are committing crimes to feed their habit.

Ms CHARLTON - Yes, it is a really strange drug. It gives people super-human strength. I witnessed this years ago when ice first came, when I was in the hospital. It was very early days and a guy came in, he was a bikie. Tiny, skinny, little, runty bloke. We found out he had been using ice, which had only just hit the market. It took six attendants to hold him down - it was unbelievable - from this drug. You can imagine the level of violence that people are capable of if they are really having an episode. It is not like dope where you just do the 'flower pot man' thing.

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Mr WILLIE - Back to children, what sort of interaction do you have with AYDC in terms of case management when kids are exiting there? You talked a bit about the prison, how there is no support -

Ms CHARLTON - None. We work with kids who may have been in, but there is no formalised referral system from them.

Mr WILLIE - Care arrangements?

Ms CHARLTON - No, not at all. You asked about kids, Josh. One thing that has been very alarming is the anxiety and depression in young people. At one point last year, of the young people we were seeing in schools, 20 per cent of them had attempted suicide. I made it very clear to my staff who were reporting this, please make sure you differentiate between cutting, which is not attempted suicide -

Ms ARMITAGE - It is self-harm.

Ms CHARLTON - Yes, and these kids who said 'No, I want to die' and they had tried it. That's really alarming.

Mr WILLIE - Do you think there are opportunities to have a more formalised system in place for kids exiting youth justice, whatever that facility may be in the future? There is obviously some discussion around that, but some more case management and things like that to help turn it around at an early age rather than when it is -

Ms CHARLTON - Definitely and even before, hopefully before they go into the criminal justice system. Could I just mention here, there was a program called IDDI, Illicit Drug Diversion Initiative, which has been around for years. We get some funding for it and it is a police initiative where they can direct clients who are caught with small illicit substances and maybe it is their first that they have been caught, so they then send them to us for counselling. It might be one-off, which is useless but it might be something. That has been stopped.

CHAIR - For what reason?

Ms CHARLTON - I don't know, no-one ever told me.

CHAIR - Just cold turkey again.

Ms CHARLTON - No, we just give you a warning now. That's something you might want to look into because they were brief interventions where these people, who were often but not always young people -

CHAIR - It used to be called 'a boot up the backside'. In my younger day, a policeman would be allowed to give you a 'tap' or a 'boot'.

Ms CHARLTON - This was a brief intervention that, not in all instances but in some instances, would have introduced those people to our service - an entry point. You might want that on your radar.

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Ms WEBB - Thank you. My questions follow on from that because I'm interested to talk a bit more about the funding. You have described already for us a couple of instances in which you've acquired funding for programs or had access to funding for programs but then those programs have to end because the funding source ends. I want to understand what proportion of your funding might come directly, say, from the justice system or the corrections system. When you deliver programs in the prison, does that come from the justice or corrections system?

Ms CHARLTON - No. We don't get any money from the justice system.

Ms WEBB - It comes from your generalised funding, which is through the Department of Health?

Ms CHARLTON - Yes.

Ms WEBB - Primarily at a State level?

Ms CHARLTON - Yes, and at a Federal level.

Ms WEBB - Does that then come into a bucket that you then fund your programs from in a way that you determine is required or are they tagged to a program?

Ms CHARLTON - Yes, they are all tagged to a program. Each small bucket of funding is tagged to a particular program.

Ms WEBB - The Gottawanna program - what funding source is there for that program?

Ms CHARLTON - We get some from the State and we also get some general money from the Federal government as well.

Ms WEBB - For the Gottawanna program, you deliver that in the prison and you deliver it in the community as well -

Ms CHARLTON - Yes.

Ms WEBB - and then is it just a decision for you or for Holyoake in terms of how you divvy up the funding so, therefore, what you can allocate into the system in the prison and what you can allocate to your community delivery?

Ms CHARLTON - Yes. The funding agreement basically States it's to provide a service to people who have an addictive behaviour, and their families. It doesn't specify the prison.

Ms WEBB - I'm interested in this because -

Ms CHARLTON - We don't get any money from Corrections at all.

Ms WEBB - This is what I'm coming to understand - we rely on particular programs delivered by various organisations in the community and perhaps also within the State system as well, but they're not funded out of Corrections in an aligned way or a dedicated way. So,

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you may have to decide to pull that program out of the prison at some point if you felt you needed to reallocate that a different way.

Ms CHARLTON - But I never would.

Ms WEBB - No, I'm sure you wouldn't but in terms of personal commitment, it's interesting.

Ms CHARLTON - I couldn't, it would be immoral.

Ms WEBB - Absolutely. You've already said that what you're always seeking to do is increase it, but you're not able to because the funding's not there to do it.

Ms CHARLTON - Exactly.

Ms WEBB - I'm interested because of the comment on the first page of your submission you talk about the Health of Tasmania's Prisoners, 2018 report, which found that Tasmania has the second-highest rate of illicit drug use for prison entrants in Australia - 86 per cent. Do you have any insight into why we might be sitting in that position?

Ms CHARLTON - Not really.

Ms WEBB - That's okay, I just wondered whether there was any context around that.

Ms CHARLTON - Australia is one of the biggest illicit users in the world so that's a start. Generally, we use a lot more drugs and we spend a lot more money on illicit drugs, too, which is why there are so many in here because the organised crime syndicates can make squillions.

Mr VALENTINE - I have a follow-up on that. With regard to illicit drugs, do you have any thoughts on the decriminalisation of drugs and looking at it as a health issue that you want to share with us and how that may or may not impact?

Ms CHARLTON - Along with all the experts in Australia, I am for decriminalisation of drugs because it's not working. There are too many people making too much money and while they do that we'll never be able to get rid of illicit drugs, so we need to control them and we need to treat drug use. This has to be done carefully and this has to be done in stages because this is obviously going to be a very sensitive thing for the community to deal with.

Mr VALENTINE - Absolutely.

Ms CHARLTON - My opinion, and this is the opinion of the ATDC and everyone else in Australia who has any knowledge into this, is that we need to start looking at perhaps the model that they have done in Canberra to decriminalise certain amounts of cannabis. We need to get the community starting to think that this is okay. We can't just go in and say 'Let's sell ice at Service Tasmania'. We can't do that; people aren't going to cope with that and I don't think I'd cope with that either, but there are other ways.

People will use the drugs that are available, that's one thing that I've noticed. For instance, I digress, but 10 years ago when ice first came around, you could see it coming from

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America like a truck or train. You can always see it and eventually it hits us. You can see it starting to come. As ice, which is crystal meth, became available, the use of other amphetamines dropped in direct proportion. People out there will use what is available. If you take away the really nasty drug and give them a less nasty drug, they will use that. We can shape the use of drugs if we are clever about it.

Getting back to decriminalisation, I am completely for decriminalisation in an incremental way. We have to get with it. Putting people into prison for growing a bit of cannabis is ridiculous. What harm are they doing?

CHAIR - Some would say, being the devil's advocate, that might put a young person or anyone on a path to getting a more illicit drug. It's a start.

Ms CHARLTON - Sure, it can be, I'm not saying it's not, but then we have 60-year-old pot smokers who have a crook back, can't get into their GP and they've been smoking all their life.

Ms ARMITAGE - Don't you think that is a bit different?

Ms CHARLTON - Yes, that is different, but why are they criminals?

CHAIR - They are not now because you can get medicinal cannabis.

Ms CHARLTON - You can get medicinal cannabis, but it is pretty hard to get. We have a lot of clients who are taking non-medicinal cannabis because of chronic pain. There aren't that many GPs who prescribe.

Ms ARMITAGE - How many would actually go to jail for growing it for themselves? I don't think too many.

Ms CHARLTON - I don't know the statistics myself. You asked me what I thought about decriminalisation.

Mr VALENTINE - I appreciate that.

Ms CHARLTON - I am absolutely for decriminalisation in a controlled, well-researched manner. Not open slather because, as I said, the community won't cope with that.

Mr VALENTINE - With respect to the way you deliver your programs, is it all one-on-one or do you do group sessions? Can you describe how you are delivering your programs, so that we get an understanding?

CHAIR - Is it like AA meeting if it's a group meeting? Not that I've been to one, but I've heard about them.

Ms CHARLTON - No, not at all. AA are totally abstinence-based and we're harm minimisation-based. We are client focused. The client decides what they want to do. Do you want to completely stop drinking or do you just want to drink on the weekends? You tell us and then we will work with you. Sorry, I keep talking to you about drinking, why?

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Mr VALENTINE - That's all right. I'm a type 2 diabetic, I don't drink much at all but I do enjoy a glass.

Ms CHARLTON - Basically, what happens is, we will have an initial interview with the client. We will ask them, why are they here? What do they want and what are their goals? We will set up a plan and they'll go into a group program. Everyone always says, 'A group is not for me, I'm not sharing, I'm not exposing my heart.' So, we just say, 'Look, just go to one, you don't have to say anything, just go and see how it is'. They all come back and say 'That was great, I don't feel so alone now'. We then put them into a group program. As groups, they vary depending on the clients. In the prison we try and make them eight sessions and we try and do it twice a week to keep the guys and the - well, no, it is only guys at the moment - you know, to keep them stimulated to -

CHAIR - Keep thinking about it.

Ms CHARLTON - Yes, but some of the programs can last 12 weeks. The relapse prevention program goes for a whole year - well, it doesn't anymore.

Mr VALENTINE - It did.

Ms CHARLTON - It did go for a whole year so they had about half a year of group programs and follow up one-to-ones.

Mr VALENTINE - Are they generally the ones that are addicted to ice?

Ms CHARLTON - No, not necessarily, but they could be.

Mr VALENTINE - Because you were saying about how long it takes to get back to an equilibrium.

Ms CHARLTON - We have a separate ice program which is just the same as Gottawanna, it has just got a different name because people like to think there is a special program for that.

CHAIR - I was going to say that they are special.

Ms CHARLTON - People do like to think they are special, but it is the same modalities that we use, which is contemporary theories, all research-based of course. So, getting back to your question, yes, and we have to be flexible as well; some clients are not good in groups. Some clients may withdraw, they may suffer anxiety, they may be disruptive. It's not many but every now and then, we will have someone who benefits best from just one-on-ones but we try to mix it.

Mr VALENTINE - Thank you for that.

Ms WEBB - Just to follow up on what you are mentioning there, I think you mentioned that at the moment you are delivering the Gottawanna program to male prisoners and not to female prisoners, is that correct?

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Ms CHARLTON - Yes, but we are seeing the odd female prisoner one-on-one. The only reason we are not in the female prison is money. We only have this bucket of money and I have got to try to get as many -

CHAIR - There would be more male -

Ms CHARLTON - I'm not sure what the proportion is, but there are significantly more males than females. As I said, we do have referrals from individual women and we go in and see them individually.

Ms WEBB - Is that meeting the need that is there, or do you think there is still unmet need?

Ms CHARLTON - No, we have been told that there are 120 people in remand, all of whom want to come and see us, need to come and see us.

Ms WEBB - And you don't deliver the program to prisoners on remand?

Ms CHARLTON - Sometimes, but not as many as we could. We have gone into the remand centre but, again, it is the restrictions of funding.

Ms WEBB - I am also interested in the case management transition for people when they have been in prison and perhaps done your program or are partway through your program and then they are going to be exiting prison. Is there a transition where people who are exiting prison and maybe if they contact your program in that context can then tie in to either continue the program or move to, say, the recovery program once they have exited?

Ms CHARLTON - It is not managed by anyone; in fact, the case management in the prison is rubbish. It is absolute rubbish. We have good communication with Community Corrections but in terms of prison case managers - I assume they have case managers in there, but I don't know because we have never met one - it is rubbish and this is one thing that I say, there needs to be a transition. We need to have a wraparound service, we need to have -

Mr VALENTINE - Continuity.

Ms CHARLTON - Continuity, we provide continuity in terms of throughcare program, but we do that on our own. The prison system sucks, really, to be perfectly honest. I'm sure you have heard that before, it is rubbish and the communication with the outside world is really bad and that's where people fall through these gaps.

Ms WEBB - Can you describe something that you would like to see in place in terms of what could work well to have that transition be a more planned and seamless one?

Ms CHARLTON - Every prisoner exiting prison should have a plan and someone - we don't do case management, we just do what we do - someone should be managing that. I don't know who, someone should be saying, here's Jim, he's due for release, what do we need to do to stop him coming back into prison? Oh, he needs somewhere to live. He may or may not need a GP - probably does because he probably got a bupe [buprenorphine] habit that he got in prison. We need to maybe try to put him on some kind of employment system where someone could find him a job. We need to try to make him independent so he is not going to just go and

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sleep on the Domain, fall back in with all of his druggy friends and go back into prison because he has just robbed the BP station because he needs more ice. That happens. We see that happen all of the time. As we said earlier, we are setting people up to fail. We need to make sure that someone is ticking these boxes to make sure that Jim does not go out with three days worth of his antipsychotics.

Ms WEBB - That needs to be present within the system because we know there are some organisations providing that sort of case management approach. We just heard from Vinnies and we will hear from Salvos as well, who have some provision of that service once people have exited, I believe, and you are involved in that, even I think Vinnies, through Bethlehem House, brings Holyoake in as a service provider once people have exited.

Ms CHARLTON - I am not sure for how much longer, but that's another story.

Ms WEBB - Right, but you are talking about the fact that that needs to occur in prison and then seamlessly hand over to the outside of prison environment as well.

CHAIR - I am always mindful of time, Sarah. That's one of the hazards.

Ms CHARLTON - I could stay here all day.

CHAIR - I know and we'd love to have you. Is there another key point that you would like to leave with the Committee just in regard to what the Committee might recommend through this report? It's fine if you have shared enough.

Ms CHARLTON - I could go on all day but I think I have probably gone on enough. I think you have got the main -

CHAIR - We have, certainly. On behalf of the Committee, we sincerely thank you for your time and for your submission as well and the work that you do.

Ms CHARLTON - Well, it's my staff; I just steer the boat.

CHAIR - Where would the Tasmanian community be without you and other services as well?

Ms CHARLTON - Could I talk about the stadium?

CHAIR - No.

Ms WEBB - Can I just say on the record, I'm sorry that we didn't get to talk to you about the lack of services for young people, particularly about withdrawal and detox and the absolute absence of that in this State.

CHAIR - You have three minutes.

Ms CHARLTON - Okay, there is nothing.

Ms WEBB - That and the comorbidity with the mental health. We have nothing to send them to in terms of psychiatrists.

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Ms CHARLTON - No, we have no psychiatrists. We have no detox unless your parents are rich enough to take you to a private hospital somewhere but even then, where do you go? Because if it is a grown-up hospital -

A MEMBER - Melbourne probably.

Ms CHARLTON - Yes, we have sent kids over there. We have had parents who were desperate to get their child into a detox centre and there is nothing.

Ms WEBB - That's the situation that we have been discussing in this State for years, if not decades, but certainly from my direct experience, years and years. Is there any glimmer on the horizon from where you sit to say that we are going to put something in place to provide kids with detox facilities in this State?

Ms CHARLTON - No, not from where we sit. We, other members of the ATDC, my colleagues out there in the industry, we've been saying this for years and years. Deaf ears. No, I am not aware of anything.

Ms WEBB - It is a significant contributor through into the youth detention system and the youth justice system.

Ms CHARLTON - It sure is, they go hand in hand, as does mental health because you can't remove the mental health comorbidities from addiction.

Ms WEBB - Have you been involved at all in the discussions that are underway right now about redesigning our youth justice system and our youth detention system and how that looks? Has your sector been involved in discussions around that?

Ms CHARLTON - I haven't. You have to ask Alison Lai, ask Ali that question. She is the CEO of ATDC.

CHAIR - Before we cease this part of the broadcast, I want to assure you that you have five pairs of ears listening here and that's the reason that this Committee was established. We won't change the world but we'll certainly be listening and doing what we can.

Ms CHARLTON - I really appreciate the opportunity to talk, so thank you all so much.

THE WITNESS WITHDREW.

CHAIR - Thank you.

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Mr BEN MORONEY, STATE MANAGER HOMELESSNESS AND HOUSING, THE SALVATION ARMY, WAS CALLED, MADE THE STATUTORY DECLARATION AND WAS EXAMINED.

CHAIR - We would like to welcome Ben Moroney, State Manager of Homelessness and Housing, The Salvation Army, submission 53. Thank you very much for your time in presenting to the Committee for our Inquiry into Tasmanian Adult Imprisonment and Youth Detention Matters. It's a really important issue that the Committee are considering. Have you read the information that was provided to you for being provided at the hearing today?

Mr MORONEY - Yes, I have.

CHAIR - I would just like to let you know that the *Hansard* will be available and published on the Committee's website when it becomes available and also that this hearing is protected by parliamentary privilege, but any comments you make outside of the hearing may not be afforded such privilege. If there's anything that you feel the Committee might need to take in camera, please just request that and the Committee will consider that request. If you want to provide an overview or speak to your submission and then we will launch into some questions.

Mr MORONEY - First of all, I would like to thank the Committee for the opportunity to present our evidence and share our experience. The Salvation Army has supported ex-offenders since its founding in Australia in 1840. The Salvation Army has a significant homelessness service delivery footprint across Australia, which in 2021-22 provided around 760,000 nights of crisis accommodation, more than 1.52 million meals to people accessing homelessness services and more than 31, 000 sessions of care to people who were at risk of or experiencing homelessness.

Our submission focuses on our program Beyond the Wire. It's one of the many service models delivered by The Salvation Army that work to address homelessness and the unique housing and support needs among a specific cohort. Run by The Salvation Army with funding support from the Department of Justice, Beyond the Wire has been highly successful in reducing recidivism rates among participants. An annual report of the Beyond the Wire program conducted in 2020 revealed that just 10 per cent of ex-offenders in the program returned to prison. This is in stark contrast to the 47.1 per cent of Tasmanian prisoners who, during the same period, returned to prison. It's a big difference. Access to sustainable housing is one of the most important determinative factors for recidivism. We know that homelessness is the strongest predictor of recidivism and that as many as 35 per cent of prisoners reported being homeless prior to going to prison.

The current housing affordability crisis across Australia is contributing to the homelessness rate. Stable and affordable rental housing is nearly impossible for people leaving prison to access. Private rental is not affordable, breaks in rental history and just the general prejudices that prisoners can face tend to lock the group out of the rental market. Social housing options are also very limited and the wait list is really high, as we all know. We know that people with multiple and complex needs are overrepresented in prisons. The high concentrations of disadvantages inside prisons mean that a large proportion of people exiting prison require intensive one-on-one support to successfully reintegrate into society.

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The high rates of disadvantage among prisoner populations also helps to explain the lack of safe and affordable housing options. So many people leaving prison cannot get their lives back on track once they exit and end up reoffending. Part of that is they haven't got somewhere to stay. If we are going to reduce recidivism, we need to offer people safe and affordable places to live and give them the support they need to stabilise their lives, address their reasons for offending in the first place and be able to work towards a better future.

In summary, the overarching principles of our submission are that intensive case management, participation in adequate services, access to affordable and stable accommodation are some of the most important determinant factors for recidivism. The work of Beyond the Wire highlights that effective pathways out of the prison can be provided that not only address housing and support needs of people exiting the prison system but can substantially contribute to a significant reduction in recidivism and therefore victims of crime. It breaks the cycle of crime and incarceration. When investing in the efforts to reduce Tasmania's prison population, it is important to ensure safety of victims of crime and invest in measures that ensure victims/survivors are not retraumatised by the engagement with the Criminal Justice System.

Again, I would like to thank the Committee for its time for allowing me to present our evidence.

CHAIR - Thank you very much, Ben. I thank you for your submission but also the time and effort that went into the recommendations. It is really helpful for the Committee to have some recommendations to assess on this journey for the Committee.

Mr VALENTINE - Thank you, Ben, and thank you for coming in today. Data is really important and I notice in your executive summary, at the bottom of page v, you talk about the Specialist Homelessness Integrated Platform (SHIP). Could you tell us a little bit about that? Is this something unique to the Salvos or is it something that other service providers also key into?

Mr MORONEY - The Beyond the Wire program links in with Housing Connect, the Tasmanian homelessness and housing system. That's how we support our clients to find housing but also advocating for private rentals and things like that.

Mr VALENTINE - I am trying to find out who runs the Specialist Homelessness Integrated Platform. It is Housing Connect that runs it?

Mr MORONEY - Yes, it is all on the SHIP database.

Mr VALENTINE - It is a State Government service?

Mr MORONEY - Yes, they govern it. It is funded by the Commonwealth Government and State Government.

Mr VALENTINE - Okay, I just wanted to get an understanding.

Ms WEBB - I am interested to speak about funding here, too. You say in your submission and in your opening Statement that the Beyond the Wire program is partially funded by the Justice department but partially through Salvos itself. I am interested in what proportion

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is your self-funding versus funding from Justice. I'm also interested in the reach of the program. Is it statewide? I would like to understand, in terms of people exiting prison, how many are being picked up in that program and supported and how many are going beyond that, not with unmet need potentially?

Mr MORONEY - It is sort of 80/20 split - 80 per cent of the funding comes from the Department of Justice, so Corrections, and 20 per cent from the Salvos. It is almost a statewide program. We have two case managers in the south and another one in the north-west. We don't have a presence in Launceston in the north, which is significant given it is the second-biggest population base in Tasmania. We would really like to have somebody working in that space.

CHAIR - Have you explored that at all, Ben?

Mr MORONEY - Yes, we are in ongoing dialogue with the Department of Justice around what else we could do, because the program works. Our caseloads are capped at about 15, so times that by three, 45, and the current wait list for inmates that have been assessed as eligible is around 120, 130, so you do the numbers. We could double it and we could still meet the need. In the current model that we have, we work alongside Centacare Evolve. They have 12 properties that the Department of Justice fund so we house our clients there. They are all full. It is transitional housing. As you are aware, transitional housing could be three months but it could be two years, depending on how we can support people.

Ms WEBB - These are the rapid rehousing properties that are allocated to this program?

Mr MORONEY - Yes. If we had more housing, that would have far better outcomes. That's the goal.

Ms WEBB - Given that there are only 12 properties allocated for that, the people supporting in the program don't all have a property allocated for them. So you are also looking for accommodation in the private rental market or through other avenues?

Mr MORONEY - Yes, community housing providers. A lot of it is about advocating, which is what you do in a lot of homelessness housing services. 'Look, I have this person. This is what their needs are.' As Sarah touched on, you come up with a case plan at the initial commencement of engagement and then that is usually our goal. It could be the end goal. We do support them around a lot of other issues because we are trying to reintegrate people into society. They have been in an institution. They are institutionalised and everything was done for them. They need to learn how to stand on their own two feet. That takes some time, particularly if they have been in prison for a period of time and they need to be supported, whether it is their mental health issues, drug and alcohol support, or support around any other issues that they may have, like learning how to manage a house. There is a lot of support and the team works closely with other providers - if someone has issues such as they may be a sex offender, that we work with SASH or other case managers.

We engage them with employment services because that is another big barrier. You need to be able to pay your rent moving forward and MAX Employment is the agency we do work with. It would be good to develop a program to help support people learn those skills because a lot of it is referrals and care team meetings and working through those issues.

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The main thing is we don't have a presence statewide. That's really frustrating. It is such a successful program. You look at the statistics: 47 per cent of people who don't go into this program end up back in prison in two years. It's only 10 per cent [for those who] do. It is always a bit of a shock when I find out about it, because it is a shame. It is disappointing because it doesn't happen very often.

CHAIR - Before you continue, Ms Webb, we heard this morning that for prisoners, particularly long-term prisoners, when they come out it is like they have lost those years. If they went in, for instance, in 1983, they still think it is 1983. It must be difficult to work with people to bring them up to speed with what's available. That's probably an extreme example now, but that time lapse seems to -

Mr MORONEY - It is very true. It is a digital disconnect. These days, as you know, even with Housing Connect you need to apply for things online. If you don't have a smartphone and you have never had one, how do you do that? There are a lot of life skills to develop. Do you want to fit into society? Do you want to be successful and helping people develop those skills? They can be a long way back to where they need to be so it is intensive case management. It is a lot of support and that is why the case loads are capped at 15, which seems high but in the homelessness space caseloads cannot be capped at times and it can be whatever comes through the door you need to deal with.

Ms WEBB - In relation to the funding, I am interested to ask a bit more. You mentioned 100-plus on a wait list essentially to come onto the program. Are they still in prison waiting for parole or that sort of thing? Where does that wait list sit?

Mr MORONEY - Yes, in general that's how that would happen because we would go and meet with them. They would be reassessed by the reintegration team, the case management team -

Ms WEBB - Internal case management team?

Mr MORONEY - Yes, within the prison system. They would go, this is somebody that is eligible. Sometimes they may be out on parole, I believe, but generally they would still be waiting to be exited.

Ms WEBB - Could you describe the interactions that you have? You have this case-management approach that you are applying outside the prison system and there's the internal case-management system. What's the correlation and co-ordination between the two like?

Mr MORONEY - It's as good as it can be. We're an NGO and it's the government. There's safety issues in terms of the information-sharing. We work very closely with the prison system. They do what they can but there's also a limit. It's an ongoing dialogue that we have: how can we get this information as quickly as we can, because as soon as we know, then we can start working with that person to support them. Sometimes someone gets exited before we even have a chance to develop that case plan. We may have been working with them and then they get paroled and we don't know about it until the very end when it's like 'Oh, I'm out', so you have to take it from there.

Ms WEBB - So, there's a fairly patchy interaction in that sense, it sounds like?

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Mr MORONEY - It can be. Everyone's got good intentions and tries really hard to collaborate but at times there are resourcing issues from both sides potentially.

Ms WEBB - That's what I'm trying to tease out. Not reflecting on how well people try to make it work together at the moment, but ideally there could be a more strategic and co-ordinated connection between these two systems - internal to the prison and external to the prison?

Mr MORONEY - Absolutely, yes.

Ms WEBB - What improvements would you point to that would help that become a reality? Funding might be one; you mentioned resourcing, but there might be other specific -

Mr MORONEY - How do we share that information that we both need, because I know there are reasons, there are safety issues, but how do we get that happening in a timely way? How do we start getting those plans happening together? Getting everyone in the room - things like that, really simple, basic stuff. But we don't get the information until they're ready to give it to us and sometimes we need it a bit quicker.

Ms WEBB - For people who are coming into your program - either as parolees or people who've finished their sentence who are exiting prison - do you have to be able to provide them with some form of housing support in order to then deliver the rest of your program or can you deliver case management support in the absence of housing support if that's not available?

Mr MORONEY - They go hand in hand, so -

Ms WEBB - Obviously, ideally, you'd like them all to be there together but what I'm checking is, do you have clients in the program who you're not able to assist with housing support who might be unhoused and to some extent homeless, but you're able to assist them with other aspects of your case management?

Mr MORONEY - Yes, of course. There are 12 houses and there are 45 people on our books so, yes, we do support them with everything else to get them housing ready for when a house does become available.

Mr WILLIE - We had a discussion earlier this morning with some other witnesses around balancing community expectations and we're talking about resourcing here this morning. How do you see changing that conversation amongst the community where potentially we're talking about being smarter on crime, reducing recidivism, those sorts of things, because that's going to be key for the political system to respond?

Mr MORONEY - For sure. It costs close to \$150,000 a year for someone to be in prison. That doesn't make any sense. If they've done their sentence, they've rehabilitated and they're ready to return to society then we need to get them in a house. We need to support them and make sure that any issues that we have we can support them to address. This stuff isn't that difficult. It can be complex, it can be sophisticated, but it's a team approach so Beyond the Wire may lead that as case managers but we will support people to do whatever it is they need to do to actually have a house - a housing-first approach. You get the house and then you sort out everything else alongside that. That's what people need. It makes no sense for someone to go back to prison and for the Tasmanian Government and taxpayers to

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pay \$150,000 just because this person committed a crime because they needed somewhere to live. That doesn't make any sense. The program funding for us is three case workers, so you're talking about \$300,000 to \$400,000 and we're actually housing 12 people so if you do the maths, times that \$150,000 by 12, that statistically works out, it's saving a lot of money.

Mr WILLIE - How do we get the population to understand that? There are people in the community who think 'They're prisoners, why do that?'

Mr MORONEY - We need to educate. We need to do some work and say, 'Hey, this is what we do' and tell people, summarise what we do and get the message out there because a lot of times people don't understand. The prison population are people that people don't necessarily think about too much or worry about too much. It is like, 'Ah well, they have done what they have done and this is what they deserve.' But everyone needs a chance to have a happy, successful life and we need to support them until they are ready to do it on their own.

Mr WILLIE - Earlier you were talking about how value for money for the taxpayer is potentially one way to engage in that conversation.

Mr MORONEY - I think if people know, they will agree it is a good idea. I don't think anybody wants someone to be in prison if they don't need to be. If you have done your crime and you've done the time, then you deserve to be out in society and if you need support to do that, then this sort of program and others is able to do that.

Mr WILLIE - I understand that but it is changing community expectations. You live and breathe this. You understand what works and the evidence around that, but changing community expectations -

Mr MORONEY - It is the same with the NIMBYism with the social housing stuff. Social housing is a really positive thing for communities but there is an expectation that it is a negative because people think of what it was like in the past. We need to tell them what it is like now. The current status. Not to think of prejudices or what you think the prison is like or what ex-prisoners are like. We need to show them some case studies, give them some evidence to go 'Hey, this is a success story, this is what happens when you support someone to get back in their feet because everyone deserves that'. That's what The Salvation Army does. We support everybody who needs help. We don't care who you are or where you come from. We just want to make sure, if you need help that we are there to do it.

Mr WILLIE - So more community leaders and service providers telling good stories about success?

Mr MORONEY - Get the message out there, yes. I think this program is successful. It has been going for five years. It could get bigger, it could get better, but we just need to tell people about it.

Mr WILLIE - Yes, because I think if you went and approached someone on the street and asked if they had heard about Beyond the Wire, they would not know about it.

Mr MORONEY - It is a catchy name but other than that, you would not really know. It's about educating people, that's the only we change our opinions, when we go, 'Okay, I thought that's how it was, but now I know this is how it is'.

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CHAIR - Just following on from the question, given the high esteem in the community that The Salvation Army attracts, it is such a well-respected organisation, do you see that there could be a role for you there, not only in supporting the people that you do through Beyond the Wire but also putting that story out there? I'm not sure that people realise that you do more often than just providing a hot meal to somebody.

Mr MORONEY - It is certainly something we could do better and I think it is certainly something we are aware of and it is something we are trying harder to advocate in that space, in a more public space. Definitely, we could do more, not just me.

Ms WEBB - It would be nice if you were funded to do more but it would be funded more, full stop.

Mr MORONEY - People are not going to pay or fund something that they don't know about, so it's kind of on us to actually -

Ms WEBB - The Government should know about this though.

Mr MORONEY - They do, yes.

Ms WEBB - They are the funders, so quite frankly, they should be well aware of the value since they are the ones that cancelled the REO program in the first place and then had to put Beyond the Wire back in place without the housing associated that they used to have associated with it.

Mr MORONEY - Yes, but the housing needs to be drawn back in. That is the biggest barrier.

Ms WEBB - Absolutely, 100 per cent.

Mr WILLIE - That is the political system and politicians responding to community sentiment. There was politics played around REO by the current Government when they were in Opposition.

Mr MORONEY - Yes, you all would know better than I how that works, but I can understand.

Ms WEBB - It is an interesting case in point - not to speak to the politics of it - but just the mechanics of it. The REO program was dedicated funding to provide this sort of support plus definitely housing, too, that was allocated housing. Then, the assumption was that that kind of program could be ended and people exiting prison could be supported within mainstream services and social programs and our mainstream support services. Then they had to reverse that decision because it clearly wasn't meeting the needs of people exiting prison.

Mr MORONEY - The housing crisis. I think that is across the board, housing and homelessness. This was the system when they designed it and it was probably adequate but now the numbers are so high that it does not work. But yes, there needs to be housing that is dedicated, it needs to be quarantined. Whatever percentage of social housing they think is appropriate, that's what the people need.

Ms WEBB - Are you aware of a situation in another jurisdiction, I think it is in Victoria, where justice-related services that are required, say, for people exiting prison, can be sourced and funded from other service systems, whether it is the health system or the housing system or whatever, and it is more quarantined, it is more assumed to be available for people who are exiting the justice system? Are you aware of that working under a better model in other jurisdictions like Victoria?

Mr MORONEY - Yes. There is a fair bit of work in that space around the court system and the justice system collaborating. I know the Salvos have got a new program around housing people specifically exiting that. I don't know it intimately, but I am aware of a few other programs that are working better, or well.

Ms WEBB - I'm interested because in your submission you also speak about the Alexis Program, again from Victoria. That sounded like a successful program you were advocating for consideration of something potentially similar here in this State. That relates specifically to the area of family and domestic violence, I think. Is it a model that would be readily transferrable to Tasmania, or do you think there's some other considerations that would have to sit around it?

Mr MORONEY - I think it would sit really well within the Safe at Home system. I've got a background working in the family violence space, so having the integrated service system that we have that here in Tasmania would work really well. Whoever leads, it could be police-led with other services integrating, but that works really well in Tasmania. Everyone gets in a room and talks about what needs people have and what risks there are and what work we need to do with offenders to make them accountable and what we need to do to support victims to be safer. So, yes, that would be quite easy, or I don't think it would be very difficult to integrate in Tasmania.

Ms WEBB - And in Victoria where it's currently being delivered, is that a program that's funded through State government funding in that jurisdiction or is it, again, a sort of co-funded model with The Salvation Army and State government?

Mr MORONEY - I'd have to take that question on notice. I think it is government-funded, but I can't quite say for sure.

Mr VALENTINE - Just in terms of that Alexis model and the Victorian experience, is there a better data-sharing arrangement there between government and the service provider?

Mr MORONEY - Yes, I think there is, that's part of the integration system. But that would work in Tasmania too because the Family Violence Act allows you to share information if it's going to make people safer. We have the law to be able to do that here, so yes.

Mr VALENTINE - Thinking about the Beyond the Wire service and what currently happens, and the success of Beyond the Wire - 10 per cent recidivism as opposed to 47 per cent I think you were saying - have you had discussions with government about the timely sharing of data in relation to those exiting the system and can you just paint a picture for us about what the real barrier is there? Is it the fact that the prison service is not sharing the data and is saying 'No, we can't do this' or is it the person exiting that's saying that they don't want their data shared?

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Mr MORONEY - It can be a combination. Obviously, the prison system needs to weigh up community safety, so there's always that kind of consideration and there may be information they believe is appropriate to share. There can also be issues around people consenting or providing that information. We're dealing with people who have a lot of complex issues, a lot of trauma, and at times they don't even consider there's information they should be sharing. So, it's a bit of both, it's certainly an ongoing discussion we have around how can we do this better, because everybody wants to do it better.

Mr VALENTINE - So you're actively -

Mr MORONEY - Yes, I've had many discussions with Community Corrections around how can we do this better. Because that's what my team tells me, we need to get this information, it's really frustrating when we get it at the last minute, and it's frustrating for them too, I'm assuming it works both ways.

Mr VALENTINE - On page 11, 3.4, you say:

It's The Salvation Army's experience that sustainable change can be achieved when intensive care management delivers flexible support to ex-offenders when it's required. Appropriate supportive housing, for instance, cannot be delivered without significant lead time, pre-release applications and financial arrangements.

Can you drill down a little bit and talk about the barrier that having insufficient financial arrangements actually causes? Can you paint a picture for us for what the person exiting the system and then coming into your care, if I can put it that way, is experiencing when it comes to finances and how to get themselves back on track?

Mr MORONEY - They are starting afresh. They are not connected to anything so it could be Centrelink where we need to actually go and work through that process -

CHAIR - Good luck with that.

Mr VALENTINE - So, if they don't have a house or an address they can't get Centrelink payments, is that part of it?

Mr MORONEY - Yes, those sorts of things and even their literacy level. There is supporting people to do that work. It is hard work. It's a really simple concept but it takes a lot of resourcing to do that. It may be one appointment or it could be multiple like 'Centrelink are Centrelink and they do what they want', so you have to play their games.

Mr VALENTINE - Do you have conversations with them and let them know that these are real barriers to -

Mr MORONEY - We do yes. They are aware of it but it does take time to still navigate -

CHAIR - You can do nothing without a MyGov account.

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Mr MORONEY - It is that digital disconnect that I spoke about before. We need to get that happening. It could be getting birth certificates, driver's licence, all of that stuff that we all take for granted, it is in our pocket or it is somewhere, but they don't have any of that sometimes. So, we need to start afresh and go 'what do you need?' That's part of the case plan that we developed from the beginning.

Mr VALENTINE - That's why it is successful.

Mr MORONEY - Yes.

Mr VALENTINE - Thank you.

CHAIR - Can I just ask you to expand a little bit on your recommendation 9 around raising the age of criminal responsibility from 10 years to 14. We have seen the number of very young children in that bracket who have sadly have made some poor choices. Could you expand on that for the Committee because that is one of the points that has been raised from a number of submissions that the Committee has received.

Mr MORONEY - Yes, well, we don't work with youth in The Salvation Army in Tasmania, I mean, we do if they are a part of the family -

CHAIR - But you have seen this as a key recommendation.

Mr MORONEY - It is really important, whilst I do acknowledge the change in Tasmania to youth detention raised from 10 to 14, that is great, but a child between 10 and 14 having a criminal record sets them up with some challenges right from the get-go. It does not help them in any way whatsoever. They don't understand what is happening. I have a background in child safety as well, so I have been part of the system where I've seen it firsthand. It is not helpful for anybody. It creates trauma, it disconnects them from their families, it makes the stuff that we are dealing with the adult offenders, it is already commencing, and then there is a trajectory once they have got some sort of criminal record or whatever, then there is a pathway and there is even an expectation from some people that 'this is where I am headed now'. Just changing that mindset and trying to help young people get back on track is even more challenging because they are still developing, they are highly traumatised, they are very reactive and it is really hard to support them. So, to put something in place that is going to make it harder for them, I just don't think that there is any value in that at all. It's good that the State Government has made a significant change, but I think it would be good if they took that extra step and just removed it because how is a 10-year-old criminally responsible? That is very young, in my opinion.

Ms WEBB - Is it about poor choices at that age or is it about other factors that are circumstantially in their environment?

Mr MORONEY - A lot of children in those situations are kind of doing what they are told; kids want to do what they are asked to do. So, it could be somebody that is pointing them in the wrong direction, often it is. They don't have a lot of choice.

Mr VALENTINE - I have got another question, I will probably drop into another area though, it is on page 18 and it is part of 5.6 in your submission and involves your recommendation 8. You are saying that here a more balanced policy and funding approach

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would prioritise efforts in the health and social care, not just law enforcement and incarceration. Is this basically espousing a harm-minimisation approach, in effect, decriminalising drug-taking, those sorts of things?

Mr MORONEY - Well, potentially. I think if decriminalising something takes away resources that can be invested another way, I don't think it is a terrible thing, I think. If you are going to give someone a criminal record for something minor like smoking some marijuana or whatever, it is not helpful. There's another way around that if we can go, 'Okay, you've got a problem, let's get you some support instead of giving you a criminal record.' I think that's a better approach. Harm minimisation is best wherever possible.

Mr VALENTINE - Taking that to its ultimate, there have been quite significant discussions in the community about safe injecting spaces and things like that. Would you go that far or would you say that it's simply trying to take away that stigma and help the person in their particular instance as best you can for them to help themselves?

Mr MORONEY - That's definitely part of it but why are we wasting time and money trying to criminalise things and punishing people for something that's an addiction or a problem? Shouldn't we be supporting them to get help? I'm not saying that if you do step over that line too many times or too much, then there may be some consequences that are needed, but in the first instance we should be asking, 'What's going on for you here?' People do things like that for a reason. There are comorbidity issues, there's trauma, there are reasons that people use drugs and alcohol to that extent.

Mr VALENTINE - With people exiting their incarceration system, we've had it pointed out before about only coming out with three days of a particular medication. From your experience, do you see that happening, and how do you help overcome that particular issue and problem?

Mr MORONEY - Yes, that's a major factor. It's been a problem for a long time, I believe. In terms of how we address it, we're lucky that we've got some funding from the Hobart City Council for a Hobart GP where our clients can go get a script and the cost is covered. It doesn't necessarily cover the cost of medication but we also have a prescription through our Doorways Program where we can support people to purchase medications. We can certainly get people in to get that support but that can take some time, too. By the time that we get that happening, they may have already had some issues because they haven't been taking the medication that they need.

Mr VALENTINE - So, it's getting access to GPs to actually get those scripts?

Mr MORONEY - There is only one in Hobart that we can get somebody into and that's because we have this funding of \$20,000 per year, which is a new program and which is fantastic, but -

Mr VALENTINE - Timely?

Mr MORONEY - Yes, it's fairly good. It might take a day or two to get in. It's better than going through the regular GP system and there may be other barriers around that, too, but it's resource intensive. We don't fund a position to do that - we do it off the side of our desk.

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The team makes the appointment and supports people to get in there, so we're doing this without -

CHAIR - Having a specialised person to undertake the role?

Mr MORONEY - Yes. It's additional work that people are doing when they're already pushed to their limits just because housing and homelessness is so hard at the moment. It's challenging. You can't get people housed that easily, so they keep coming back because they need help.

CHAIR - It's very challenging. We have them through our office doors on a regular basis -

Mr MORONEY - Yes, you do.

CHAIR - so we can certainly appreciate where you're coming from.

Mr WILLIE - I am interested in recommendation 5 around education and training opportunities. I am interested in the clients you work with, their literacy rates and whether they tell you stories about disengaging from school. Since COVID-19 we've seen less attendance in schools. We've seen record high suspension rates and as a former teacher I've seen kids on that pathway where they started disengaging from school. I'm interested in whether we can go further downstream and whether you have any comments on the school system?

Mr MORONEY - Not really; we don't work in that space a lot but I can see what you're saying. Literacy is a big barrier and that impacts on people's capacity to do training as well. It's something we need to recognise and support people around fairly early, and we don't have the expertise to do the education so we need to make sure we can engage with services that do. It's definitely a problem and it has got worse, I believe, since COVID-19 because there are all these ways that you can not show up and you can do it online.

Mr WILLIE - What are the school attainment levels like in your clients? Do you look at those sorts of things?

Mr MORONEY - I'd have to take that on notice, but I'd say it's anecdotally low in general.

Mr WILLIE - It has been a disengagement from school, red flags through the school system but then you are picking up the pieces as adults?

Mr MORONEY - Yes and it comes with that youth detention as well. It is a flow-on effect. It begins fairly early, with early childhood trauma. As a teacher, I am sure you would know, if you have a child with any behaviour issues it is really hard to keep them in a classroom with 30 people because they don't behave in a way that is conducive to people learning. The kids who need the help with it most struggle because they've got challenging behaviours and the resources and time to put in to supporting them is just not there at times. I know there is a lot of work going on and trauma-informed practice has developed a lot in the last number of years. People are aware of what trauma is and how we need to keep people safe before we can educate them.

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Mr WILLIE - In terms of the prison system, we will go back to that. There is TAFE available and there are literacy courses for trying to pick up the pieces from the school system. Is that adequate in the prison system?

Mr MORONEY - It's good but that's also dependent on behaviour. The same kind of issue may be a problem. You kind of need to earn your right to go into programs, I believe. Some of them you are recommended for, depending on what your offending history is. Family violence might be the FVOIP - Family Violence Offender Intervention Program. My understanding is you need to have a level of behaviour or have earned the right to join in on those programs. I don't know why, it could be just because they wouldn't work without it, or there is just not enough in there, but that's probably a question that Justice needs to answer.

Mr WILLIE - Not enough prisoners are accessing those programs because it's based around behaviour?

Mr MORONEY - That might be part of it because it is a barrier.

Mr WILLIE - Should there be a more blanket approach where all prisoners are being given those opportunities, not dependent on behaviour?

Mr MORONEY - There might need to be a more sophisticated or diverse way of providing the programs. The programs are very good, but the way they are delivered may need to be looked at. I don't know how that could be done because there are obviously technology issues that you would need to address and access to things that are safe and whatever.

CHAIR - Hundreds of laptops flying around Risdon Prison might not work.

Mr MORONEY - No, but there might be other ways that they could look into it. That is certainly a question that Justice could respond to.

Mr WILLIE - The other thing that came up in some of the site tours, too, was that short-term prison sentences make it difficult for any sort of program to be implemented in full. Have you got any comments around that and what could be done?

CHAIR - No, because it is a minimum of six months versus three months.

Mr WILLIE - It was said to us on the site tours that there are people bouncing in and out the whole time. The community is not getting a rest because the behaviour is not stopping in the community. They come back into prison, they are only there for a few months and then they are gone again and it is just this cycle.

Mr MORONEY - I can only really comment around our clients but that's where we would step in and do that work with them. If they are coming in and out of prison, if they exit and they enter our program, then we could organise those supports. I can get that's a problem because there needs to be time to do the program. It could be a six-month program, it could be a 12-month program. I don't know. Your sentencing may align with how much support you can have and if you are not in there long enough then what is the point?

Mr WILLIE - Some more case management with what you are doing, yes -

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Mr MORONEY - I think that is where we need to know that and then we can step in and see what we can do to provide that support because people still need it, especially if they are going back in and out.

CHAIR - Thank you. Possibly a final question, Ms Webb.

Ms WEBB - Two quick ones. Do you have data about the people who come into your programs and what length of time they have served? Would you be able to tell us about whether the cohort that comes into the Beyond the Wire program are off shorter-term sentences or longer term? Would we be able to get that from you?

Mr MORONEY - Most of the offenders, or ex-offenders, have got significant offending history. I would suggest that their sentences are reasonably long based on that. I could provide the statistics if you would like.

Ms WEBB - Just to clarify, too, another thing I have been wondering, is the program delivered to male and female ex-prisoners?

Mr MORONEY - Yes, both.

Ms WEBB - Okay, and what is the proportion?

Mr MORONEY - I think the majority are male but a significant proportion of women are supported as well.

Ms WEBB - We might get those data from you. We will write to you about it. Thank you.

Mr MORONEY - I can give you those numbers, yes.

CHAIR - Thank you, Ben, on behalf of the Committee. We very much appreciate not only your time today but the submission. It was very detailed and, again, thank you for the recommendations. They are very useful for the Committee to address their mind to. We will continue on this journey. Thank you for the work that you do through your organisation.

Mr MORONEY - Thank you for the opportunity today, I really appreciate it.

THE WITNESS WITHDREW.

The Committee suspended from 12.15 p.m. to 1.15 p.m.

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CHAIR - Welcome ladies, on behalf of the Committee, I thank you for your time and also the submission that was provided, so please pass on our thanks to the author. We know that you will have some information to share with us. Just in regard to the process, I would just like know that you did receive the information around being a witness for the hearings?

Ms MAYNARD - Yes, we will read it now, how's that?

CHAIR - It is quite lengthy; it is extremely lengthy, actually.

Ms MAYNARD - Give us a quick moment.

CHAIR - It was possibly provided to the office and perhaps maybe got overruled?

Ms MAYNARD - Absolutely.

CHAIR - I will just reinforce some of the information that has been provided while you are reading. All evidence taken at this hearing is protected by parliamentary privilege and I remind you that comments that you make outside the hearing may not be afforded such privilege. If there is anything that you decide you would like to share with the Committee in camera, please don't to hesitate to request that and the Committee will make a decision around that. The *Hansard* will be available following the hearing at a convenient time.

We expect that you will have an opening Statement and then we will open it up for questions from members of the Committee. We would like each of you to make the statutory declaration.

Ms MAYNARD - You are just going to have to bear with us today. I have not been a part of these Committee hearings for probably around about a decade, probably longer, so just bear with us.

CHAIR - Well, this is easy.

Ms SARA MAYNARD, AND Ms SARAH WILCOX-STANDRING, TASMANIAN ABORIGINAL CENTRE, WERE CALLED, MADE THE STATUTORY DECLARATION, AND WERE EXAMINED.

CHAIR - Thank you both and whoever wants to make an opening statement, please do so.

Ms MAYNARD - Thank you all for having us today. Just quickly, the author of the submission was Heather Sculthorpe, our CEO of the Tasmanian Aboriginal Centre (TAC). She's currently interstate, so we're filling in today, so just bear with us.

We know that Aboriginal people are overrepresented in the Tasmanian prison population and in youth justice detention centres. It can be difficult to get reliable data and the TAC obviously wants to prioritise looking after Aboriginal people and providing alternatives and keeping Aboriginal people out of custody.

We know that an overwhelming number of studies have shown that the cost per individual in programs that deal with issues that lead to incarceration and keep people out of

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the justice and prison systems are generally, in some cases, substantially lower than the cost of incarcerations per individuals.

I guess today is an opportunity for us to work together and to explore some options and come up with a solution - and that's with the Aboriginal community, the broader community and obviously you guys because you guys have got a pretty important task ahead. I guess, today, you guys can ask us some questions and we can tell you how we can work together and move forward with things.

CHAIR - Thank you. Sarah, anything you'd like to add to Sara's contribution?

Ms WILCOX-STANDERING - Not at this stage, no thank you.

CHAIR - Thank you. I might kick off. Again, referring to your submission that that Heather has put together so well for us, on the second page it talks about the TAC was established 50 years ago to address injustices experienced by Aboriginal people in the State. It talked about providing a range of services, including health and wellbeing. There's a significant list there: housing, poverty, low literacy and barriers to education, lack of employment, drug and alcohol issues, experience of abuse and neglect, intergenerational trauma, domestic and family violence issues, and resentment towards the majority of society that stole land and continues to practise discrimination against us.

That's significant. I guess it's a whole combination of issues, but can you point to any of those areas that you believe really impact on those who do end up in the justice system, or do you feel like it is a just a combination of those? We've heard a lot about homelessness for people who have gone into the prison system and then come out and that continues to be one of the biggest challenges today. I'm just interested if that's what you feel is the same for the people that you represent.

Ms MAYNARD - We believe, yes, it is a combination of issues but also, we know that we've got a homelessness issue in this State - a crisis. It's been going on well before Airbnb came along. In my role at the Aboriginal Centre, I've been supporting Aboriginal people in Risdon Prison for about 18 years now. That's one thing that I can actually speak to. You can ask me anything in regards to that. A common issue that we find and I personally find in my role is Aboriginal people cannot leave Risdon Prison because there is no safe place for them to go. A good example of this is probably one person that I've been supporting recently who has been unable to be bailed because they've had no suitable place to bail because Bethlehem House is at full capacity, we've got a housing crisis and there's no shelter accommodation or no other programs to support people who (1) wish to apply for parole and (2) who have got no supportive family to be able to reside with.

I would say that a big issue for a lot of people in Risdon Prison, and specifically Aboriginal people in Risdon Prison, that would contribute to people ending up in Risdon Prison and staying in Risdon Prison is the homelessness issue and the lack of supports and programs to support people. We've got to keep in mind that we've got a lot of people in this State with low literacy, I think it's about 52 per cent, so you've got quite a number of people in Risdon Prison for whom, when they do actually get out, there is a lack of support in regards to reintegration. That can be simple conversations to apply for Centrelink [benefits], to get a birth certificate or to get an identification card or to look for employment. That is a massive barrier, let alone education and other kinds of opportunities.

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CHAIR - Your centre, the TAC, would have some support services in place but you obviously still rely heavily on other services out in the community to support the people who are Indigenous that you work with?

Ms MAYNARD - We are actually not funded to support Aboriginal people in Risdon Prison; however, it is a small group of us at the Tasmanian Aboriginal Centre who do that off the side of our desk, which means that we work a lot more hours. No, we are not funded to do that work and we are doing that work with quite a few service providers; we have great contacts within Centrelink, with Bethel House, with other shelter programs, Relationships Australia. However, it is not a culturally appropriate service. Bethlehem House only has a certain amount of beds; there are only limited things that they are able to do.

CHAIR - I know this question has been asked by the honourable member for Nelson a couple times, but can you quantify the unmet need for services for those you know that you represent?

Ms MAYNARD - It is really hard to put that into an answer because every Aboriginal person that is in Risdon Prison that is being released from prison or trying to apply for parole or bail, all of their needs are individual and they all vary. They are very different. But I can tell you they are quite complex and they are never simple. When we have a State government that does not meet the needs of Aboriginal people, that has a huge impact on those very individuals in Risdon Prison who we are trying to prevent from going back into Risdon Prison and afford them the opportunity to live amongst all of us and have access to the same things that we all do that are severely disadvantaged. I also might add that Risdon Prison resources are minimal as well. We all know that there are staffing issues at Risdon Prison and we know that there are a lot of lockdowns. That also impacts a lot of people in Risdon Prison and it also contributes to people's ongoing trauma.

Ms WEBB - I am interested to understand a little more about the services that you provide that aren't funded at the moment. We've got the Closing the Gap's two outcomes that are relevant to reducing the number, the overrepresentation of Aboriginal people in prison. Our State Government has signed up to Closing the Gap activities and outcomes, so has there been discussion between the TAC and the State Government about funding of specific services to assist with addressing outcome 10 and outcome 11 in the Closing the Gap?

Ms MAYNARD - I am sure you can appreciate that it is early days and it is a lot of willingness from our end, but we can't force the Government to do things. We are having conversations, but there is not much action from the other party.

Ms WEBB - Do you have a proposal that you put to the State government, in terms of what a service or program or initiative might look like to be funded, to do the work? It sounds like you are doing that, to some extent, unfunded at the moment. Presumably you must have had a model that you have put forward.

Ms MAYNARD - We have been having conversations with the Government for probably - so many years now. We have had specific conversations around alternatives to prison programs. We used to run a successful program on lungtalanana. Unfortunately, that was not funded. Yes, we have had conversations, we are aware that the State Government had signed up to the Closing the Gap initiatives, but there hasn't been much action from their part,

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it is a bit slow-going. We have provided alternative models to keeping Aboriginal people out of prison, various hearings, various conversations and representations to government for years and years. We have a lot of answers. We know how to support Aboriginal people and we don't want to see Aboriginal people in Risdon Prison. It is how it is resourced from the Government and how it is resourced to us at the Tasmanian Aboriginal Centre.

Are all of you aware about all of the services the Tasmanian Aboriginal Centre provides and offers? Are you all familiar? Because sometimes people get a bit confused.

CHAIR - We would be happy for you to share that. I am sure we all have some understanding, but having it on the public record is helpful.

Ms MAYNARD - Fantastic. Then you are probably guided to ask us more specific questions.

CHAIR - We are a bit broad at the moment, are we?

Ms MAYNARD - We have been around for 50 years and we are a statewide community grassroots Aboriginal organisation. We have offices across the State. We are based here in nipaluna, just up in Elizabeth Street, in Launceston and pataway, which is Burnie. We have an outreach health service at tulinakali, which is Devonport, and one out here at kutalayna, which is Bridgewater. We have an Aboriginal children's centre. Because we are a one-stop shop, we have programs such as the social and emotional wellbeing program, the Strong in Country program; we are about to start a suicide prevention program. We have in-house doctors, nurses, a visiting paediatrician, a visiting psychiatrist, in-house counsellors, nurses, Aboriginal health practitioners, a child and family program, a language program. I am sure you all know about our successful palawa kipli Aboriginal food business. We have a land management program. We do so many different things that we have everyone contacting us, and even though it is not our role, we still continue to try to do the very best we can to support Aboriginal people. They are some of the things that we do.

Ms WEBB - In terms of that then, in potentially making a case to be able to have a funded program directed at providing support to Aboriginal people who are in prison or exiting prison, both those things, would fit well within your service mix.

Ms MAYNARD - Absolutely, because just to take you back, we used to have our legal service funding. Unfortunately, the Commonwealth Government decided to give that to another service provider in Victoria in 2015. We had legal field officers and in-house lawyers within our service. If you had a mum coming in in regards to whether it is family violence or relationship breakdown or needing support, she would be in seeing the doctor and she would be able to come in and have access to a lawyer straightaway. We used to have a successful legal service program. Unfortunately, the funding was given to Victoria for all sorts of different reasons.

CHAIR - It never came back?

Ms MAYNARD - No, and we did have conversations with the Commonwealth Government and we have had conversations here with the State Attorney-General about the legal service funding being returned because we are the most fit organisation and community representative to have the funding to be able to support Aboriginal people in a holistic manner

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and holistic way, and that is what Aboriginal people need. That is what Aboriginal people are not getting at the moment.

In regards to your question, Meg, we would be fit to be able to provide all sorts of different supports because we are doing it anyway. We would be able to do it in a far better and improved way if we had access to that funding.

Ms WEBB - Legal services aside, has the TAC ever had funding to do a corrections-related or justice-related support program? Has it ever been part of the mix, or a youth justice or youth detention-related support program? Have you ever had funding in that space?

Ms MAYNARD - There have been specific amounts of funding, small amounts of funding, and we did a lot more than what our funding requirements were. And to be honest with you, we are still doing that now. I supported an Aboriginal person last week who was released from Risdon Prison and we arranged to collect that person, get that person in to see our AOD coordinator. I organised an appointment for that person for the GP that afternoon because they were released without medication.

CHAIR - Not even three days worth? That is what we've heard. It is three days worth of medication.

CHAIR - Not even three days worth? That is what we've heard, three days of medication.

Ms MAYNARD - No, absolutely nothing because that person was in court that day and then, in short, was granted bail the next day. You have Risdon Prison, Prison Health, you have a lack of staff and resources and no-one is communicating with each other. I know that that Aboriginal person is not going to get the support that they need. I can sit there and put my hands under my backside and say, 'Well, you know, it's not my problem' or I go, 'I know that there is going to be a bit of a communication breakdown, people are not talking to each other, lack of services, lack of support, I had better do something.'

As a service, we do all sorts of different things: ensuring that the person is collected because they cannot just pick up their phone, call us and say they need help; getting in contact with Prison Health to say, 'Are you able to get in contact with the Aboriginal Health Service for medication so we can sort some things out for this individual?'; getting in contact with our health service to make sure that we can get an appointment for that community member who has got mental health issues and I know is not going to be released with medication; making sure that person is collected, that they come in and get the support of our AOD coordinator and our health service to get the medication that they require, as well as lots of other different things I am sure you could imagine.

Mr WILLIE - I am interested in the data around Aboriginal children in the youth justice facility at Ashley and the data not being very robust. The same department now runs schools and Ashley they'd have information on Aboriginal children from the schools they come from. I am interested in what the block is there.

Ms MAYNARD - It is not reliable data. Do you have an answer? Because we sure don't.

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Mr WILLIE - No, I am asking you.

Ms MAYNARD - We don't have an answer because there is no reliable data. I guess, touching base on child protection, we know there is an issue with Aboriginal people going through that process. We know there is a higher rate of Aboriginal people, unfortunately, in out-of-home care. Do we know the specific data around that? No, because there is no accurate information. From the high demand that we receive at the Tasmanian Aboriginal Centre, when we have got child protection services getting in contact with us, wanting us to do their work for them, yes, we know there is a high rate.

Mr WILLIE - A disproportionate number, yes. I am interested in your interaction with Ashley as a facility, too. It sounds like there is no funding, but do you do similar things to what you are doing at Risdon Prison?

Ms MAYNARD - Off the side of our desk we have workers who have regular contact with Aboriginal youth - I should say Aboriginal kids, that is what they are - at Ashley Youth Detention Centre. We will do the best support and the best work that we can. I should touch base that it is not just the kids either, it is the kids' families. As a community, we can have one kid in Ashley Youth Detention Centre and they could have three or four siblings. We are supporting those three and four siblings and making sure that they do not go into Ashley Youth Detention Centre as well as their whole entire family, with mum and dad, with parenting programs ensuring that they get the support and the needs that they require as well. That could come to housing issues or education issues.

I am thinking of Launceston, for example. We have a successful after-school program where we get a lot of Aboriginal youth together; we have a boys' and a girls' group and a joint group. We get kids together learning more about their culture and history and celebrating palawa kani, Aboriginal achievements and ensuring that kids are connected to their community and ensuring that we can keep kids in schools.

Mr WILLIE - Schools is a big one. We were talking about that with an earlier witness seeing increases in non-attendance and suspension rates. Is that a concern? We have also got historically high numbers at Ashley as well.

Ms MAYNARD - It is a major concern. Some of the work that the Tasmanian Aboriginal Centre does, like our families and youth programs, we have a mentor program where we have young kids who we are trying to keep in school and re-engage with school. We have plans to try to ensure that we have kids you know having access to education and seeing what a lot of the barriers are and getting kids back into school, but we do see a high proportion of kids being suspended. I guess some of the programs that we support families in our communities with could be - there is a waiting list, for example, to see a paediatrician in this State. We are lucky that we have a visiting paediatrician so a part of our program and our plans is putting a plan with a whole family and seeing what their needs are. If there is a young kid that needs to see a paediatrician, we will elevate that and we will obviously look at getting kids back into school and having individual mentors and seeing what the barriers are.

We have got kids with different learning - we all learn in different ways, so trying to harness our kids' learning styles and supporting our kids with their individual goals and needs and families.

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Mr VALENTINE - I am just interested in, reading your submission, number 3, and you were talking about the provision of and participation in service for people in prison and leaving, prison health, housing and legal services, and you are talking about 'the right services' and 'the right staff' and the 'right holistic [inaudible] service'. Are you saying there that Aboriginal people need to be those service providers as well or not? Can you just expand on that a little bit just so it increases our understanding of that?

Ms MAYNARD - Absolutely. The prison has had, say, integration workers and they have not been Aboriginal and they have been under-resourced. We all need to recognise that for Aboriginal people there are impacts of invasion and long-life trauma that there needs to be culturally appropriate and Aboriginal-specific services for Aboriginal people. What happens, just as an example, is that there will be a lot of service providers that might get some sort of funding and they might be trying to support Aboriginal people the best that they can. Those Aboriginal people will always come back to the Tasmanian Aboriginal Centre and try to get the support they can from us because they recognise that we provide a culturally appropriate service, we're a grassroots Aboriginal community organisation, we know their history, we know their family because we are working with their family, and we can support them the best way we possibly can.

Mr VALENTINE - So you are saying the best way to provide those services is through the centre.

Ms MAYNARD - Yes.

Mr VALENTINE - What about - and it is sort of the ambulance at the bottom of the cliff - when they are actually incarcerated in the prison and the alienation they may feel or otherwise, is there a place for officers in the prison to be Aboriginal as well? Do you understand where I am coming from there? So that they understand the culture, they understand what that individual is going through and therefore it needs to start there in terms of helping them to cope with the circumstance they are in?

Ms MAYNARD - I believe that if Tasmanian Aboriginal Centre received the funding and therefore had the resources, a member of our staff could be physically based at the prison and we could have an integrative kind of program where we can provide individual support to Aboriginal people. So, you have got an Aboriginal person who is 100 metres away from the Aboriginal person working at Risdon Prison and can provide the supports that are required as well as connect that person with the coordinated care that they require. There are many Aboriginal people in Risdon Prison that have got the TAC on their phone account and we speak to Aboriginal people all the time. I have taken a couple of calls today from people needing the support that they need.

Mr VALENTINE - One other question. You mentioned an Aboriginal name and I cannot think what it is, was it Clarke Island?

Ms MAYNARD - Yes, lungtalanana.

Mr VALENTINE - Yes, is that Clarke island?

Ms MAYNARD - Yes - good work!

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Mr VALENTINE - I was not sure so I had to ask.

CHAIR - It's not operating though, is it, the program?

Ms MAYNARD - No.

Mr VALENTINE - But what caused that all to fall apart? Obviously, funding was an issue, but was it the type of service that was being provided, was it successful or otherwise? Can you just expand on that and whether that is something that could be reinvigorated?

Ms MAYNARD - We hope you could give us the answer because the Government just made a decision not to fund it. We were really successful at keeping young people or kids out of Ashley Youth Detention Centre. Some of the things that we do - are you all familiar with lungtalanana, the alternative diversion program that we ran?

CHAIR - No, that is why I am asking the question so we can get it on the record.

Ms MAYNARD - We ran a really successful program where we did not want kids locked up and we want take them to lungtalanana. We would give a lot of kids connection to culture, history, language and family, because there were a lot of relationship breakdowns. We would have family come together and reconnect with the young people on the island. We would also give those young people life skills, access to psychologists, access to medical care and access to mentors. Funny enough, but unfortunately, some of the conversations that I have with Aboriginal people who are adults in Risdon Prison today say that some of the best times that they have ever had growing up is being on lungtalanana.

Mr VALENTINE - Okay.

CHAIR - It was definitely just funding that was the reason why that program ceased?

Ms MAYNARD - Absolutely, yes and it was not from our part, I might add.

Mr VALENTINE - Do you know what the Government was expecting in terms of data, if you like, coming out of that program? Was that an issue, that they did not have the data to be able to assess whether it was successful or not? Do you have any understanding there?

Ms MAYNARD - I do not think I could personally answer that specific question, but going back at that time and not being specifically involved in that program, my understanding is that we ran a really successful program at keeping Aboriginal youth out of Ashley. I do not believe that the numbers of Aboriginal kids in Ashley were significant enough for the Government to continue to fund Aboriginal kids.

Mr VALENTINE - In the present circumstance, where we have the Government looking at closing Ashley and coming up with alternative models to deal with children, have you had any conversations with the Government as to how appropriate it is to be dealing with Aboriginal children in a different way? Are they coming to you and talking to you about how they see Aboriginal children being treated in the future?

Ms MAYNARD - There has been one conversation, but the conversation was really about them trying to get consent from us about having Aboriginal artwork on the wall and

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things like that rather than proper alternative diversion programs and keeping Aboriginal youth out of custody. Our response to that was, can you please find out exactly how much money you have got in regards to alternatives and then come back and have a conversation with us because we are really not that interested in making the facility culturally appropriate. We do not want Aboriginal kids locked up. Surely, the State Government can come back with us in regards to alternatives and have a serious conversation.

CHAIR - Can you give us some indication of the time frame between that conversation and the length of time that it has been since you were able to have that follow-up?

Ms MAYNARD - I think the last conversation was probably around about -

CHAIR - Three months? Six months?

Ms MAYNARD - Yes, I think it has only been around three to four months, to be quite honest with you. It has been about three to four months. I guess, our concerns were - and thank you for trying to meet with us and coming to meet with us - we do not want to have input into how to lock Aboriginal kids up. If that is what you are putting on the table, we want to know how much money you have for alternative diversion programs. They had a whole team of people. If you have a whole team of people, you have capacity to do the research, look at all sorts of different models internationally and let us all sit down together and have a proper conversation about how to not lock up Aboriginal kids.

Mr VALENTINE - The barrier is at the top of the cliff and not the ambulance at the bottom, is what you are saying.

Ms WEBB - I think we might have touched on this already. I just had a question noted to ask about the programs that we have heard about that are funded to provide support when people exit prison - I am thinking about the Salvation Army's Beyond the Wire program and the program that Bethlehem House runs for some people as well, which is sort of case management programs to assist - is there any relationship between those mainstream programs and the TAC? Do they reach out to the TAC if a client coming into those programs is Aboriginal? Do they collaborate or reach out or bring you into the mix of supports that are provided?

Ms MAYNARD - We are really lucky that we've got a couple of people that are based at Risdon Prison that know the Aboriginal community - that aren't Aboriginal, but they have been there for a very long time - and we've got those long-term relationships and mutual respect for each other where we will support Aboriginal people the best way possible. Bethlehem House's Don McCrae is amazing. If he has got an Aboriginal person that has made contact, he will give us a call because he knows that we can provide support that those guys can't and we work really well together. However, they've only got limited beds and they've only got limited staff and resources. That is an issue.

Beyond the Wire has another issue in the sense of not having the resources and capacity, so it is not the willingness from either of those programs specifically, it is the fact that they don't actually have the resources and they can only take a certain amount of people on their case load. If you are in Risdon Prison and you need support because you've got no family outside, and you are trying to get on to the case load of Beyond the Wire program, and they can't take you, you are just going to be sitting in Risdon Prison. The waiting list is like our

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housing waiting list, so there are waiting lists everywhere across the board. We work really well with a lot of mainstream service providers and they recognise the amazing work that the TAC does and importance of connection to the Aboriginal community. There are no real issues there, it is just that they are under-resourced; and if they are under-resourced, they are limited in what they can do.

Mr VALENTINE - Even if they were resourced, are those programs culturally specific enough?

Ms MAYNARD - No. We do the work anyway. They are kind of, I guess, just an added layer of support, for example. There is no specific Aboriginal housing provider. So if I am trying to look for emergency accommodation or trying to support a person being able to be housed at Bethlehem House, there is no Aboriginal emergency accommodation. I have got to work with Bethlehem House. If they have got no capacity, they can't take that person.

CHAIR - The centre doesn't have any housing, sublease or anything for housing through the centre?

Ms MAYNARD - No, we don't. So the State Government has a variety of homes allocated for Aboriginal people and we work with Homes Tasmania, to try to get Aboriginal people housed - whether it is emergency accommodation, crisis, family, family violence stuff, people being released from Risdon Prison - but no, we don't have allocated homes. So, if there was an Aboriginal person being released from Risdon Prison and they needed to access housing, I would call all of the housing providers and try to support that person.

CHAIR - Just from my own personal experience of being the member who represents the Furneaux Group islands, there, FIAH has a number of housing - they are the only ones who are building houses on the islands; they have built quite a lot in previous times. That is why I was asking about that opportunity to provide housing. I know that they have some non-Indigenous people living in their housing as well, but they certainly house a number of people of Aboriginal descent.

Ms MAYNARD - Members of the Aboriginal community. Yes, look, they have been funded by the Commonwealth Government, as has truwana, Cape Barren Island. Their situation is unique because they are classed as remote so it is lot different to mainstream services.

CHAIR - So that's where they get their funding from?

Ms MAYNARD - Yes, and if we were funded by the Federal government to provide housing, I would be making sure that every young person and Aboriginal person in Risdon Prison had access, just like everyone else. That would be a priority.

CHAIR - That's interesting. Thank you.

Ms WEBB - I am interested in whether you are aware of whether any corrections staff get cultural awareness training or that sort of training that might assist them to be able to work more effectively in that environment with Aboriginal Tasmanians.

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Ms MAYNARD - I am sure you are all familiar with Dewayne Everettsmith and our cultural awareness training team. We provide a lot of cultural awareness training through correctional officers in Risdon Prison and staff, but as you can appreciate, there is a bit of a turnover. As you can appreciate, there are new recruits and we are providing cultural awareness training to everyone in the State. There is a difference between participating in a training course about how to support Aboriginal people and being Aboriginal and providing support to Aboriginal people.

Ms WEBB - Yes, I am not suggesting that as a replacement necessarily for a specific service program that might be more appropriate, but it would be good for us to understand that staff in that area have received cultural awareness training. I presume that your model for that would be not just as a once-off but as something that is repeated and refreshed in a regular way so that you could be confident that it was flowing through into the culture.

Ms MAYNARD - Absolutely. There is a program developed, you are right. It is not just a one-off training session because how could you do a one-off training session in regards to anything, especially learning our history and getting connected with the Aboriginal community and how to support Aboriginal people far more effectively?

We also do some alternative kinds of things as well. When we have NADOC week and Aboriginal community events, we work with the prison to get some of the prison staff to organise a Section 42 to get Aboriginal people out of Risdon Prison with supported staff and coming along to NADOC events and community events. We have had Aboriginal people come out with their support workers who are correctional officers in Risdon Prison, to come and do bushwalks and learn more about Aboriginal heritage sites, for example. That is not just a learning opportunity for Aboriginal people who have been disconnected. That is a really amazing learning opportunity for some of the correctional officers in Risdon Prison and staff.

As you can appreciate, they're under-resourced in particular areas and so sometimes a lot of Aboriginal people don't get access to their culture and community because of resourcing issues at Risdon Prison.

CHAIR - Lack of staff.

Mr VALENTINE - That does go back to what I was talking about before though, in terms of the correctional officers themselves. Is there value in having correctional officers themselves that are Aboriginal so that any Aboriginal person going into that environment feels less isolated because they have somebody of their culture who may well have taken on that role of a correctional officer? Do you see that as something that would be valuable or do you think it simply wouldn't work?

Ms MAYNARD - I can understand and appreciate your thoughts around that. We have a couple of Aboriginal people who are correctional officers, but they are bound by the prison system and the rules; their level of capacity in regards to supporting Aboriginal people is minimal. There was previously an Aboriginal person who used to be a correctional officer and he then was a support worker for Aboriginal people in Risdon Prison, but due to the rules and the culture of the prison system itself, unfortunately, it impacted the very work that he needed to do to provide a culturally appropriate supported service to Aboriginal people.

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Mr VALENTINE - Isn't there some work that could be done in that space though to improve that circumstance so that there was a better way of being able to work with Aboriginal people that find themselves in incarceration? Is there perhaps more work that could be done in that space with management and Aboriginal correctional officers themselves, to improve that?

Ms MAYNARD - I would say no, only because we have worked with various directors, managers and staff; it is a constant process of re-educating how best practice should work and could work. I think the best fit is Aboriginal people and an Aboriginal community organisation supporting culturally appropriate services and working with correctional officers and the various teams at Risdon Prison, that is the best result.

Mr VALENTINE - Keeping them out in the first place.

Ms MAYNARD - Absolutely, we -

CHAIR - That goes for everyone.

Mr VALENTINE - It does.

Ms MAYNARD - Absolutely, you don't have to be Aboriginal, it's everyone, we want to keep everyone out. And it is far more cost-effective to not be in Risdon Prison.

Ms WEBB - I just wondered if there are any other particular programs in this space from other jurisdictions that you look to and think that is a good model that we would like to see replicated here in terms of supporting Aboriginal people in the correction system and the prison. Are you aware of any that you would like to draw our attention to? It may be that it is just more appropriate to design a system that works well here, but -

Ms MAYNARD - Every community across the country is unique and different, so what would work in the Northern Territory would not work here and vice versa. I guess there are various different models that we could use. The first model would be keeping Aboriginal people out of Risdon Prison. What does that look like and how can that be achieved? Alternative programs are far more successful. If you have grown up in poverty, you have got a lack of education, you do not have a roof over your head, you have watched your family go in and out of Risdon Prison, you are so socially disadvantaged. What hope do you have? You are obviously on a clear path to go to Risdon Prison. It is cheaper to look at alternative programs than to send people to Risdon Prison and Risdon Prison does not educate people, Risdon Prison does not give life skills to people, Risdon Prison takes people's dignity away and it is interim housing. Then people get back out and they go back in again, and it costs the State government a lot of money and there is no change.

CHAIR - Thank you. Obviously, these conversations could continue for a much longer time but we are somewhat limited. Sara and Sarah, thank you very much for your time today on behalf of the Committee. We really appreciate the opportunity to be very frank about some of the challenges, expectations and aspirations that you have for the community that you represent. We will do our best.

Ms MAYNARD - Thank you for having us. I just want to make just a couple of more statements before we go because we really mainly focused on Risdon Prison and youth. We

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really need to do something around Community Corrections because Community Corrections are contributing to sending Aboriginal people to Risdon Prison. At the Tasmanian Aboriginal Centre we really need our community legal service funding back because it is unfortunately contributing to the high incarceration rates of Aboriginal people. We as a community - not just as an Aboriginal community but as a whole community - need to find a better solution to what is currently going on in this State when it comes to young kids being housed at Ashley Youth Detention Centre - because that is what they are, kids - and people going in and out of Risdon Prison. Surely we can come up with a better solution.

CHAIR - Thank you very much.

THE WITNESSES WITHDREW.

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CHAIR - Welcome to the table, Dr Sonny Atherton, Statewide Specialty Director for Forensic Mental Health Service. Thank you very much. I expect that your time is super valuable and we do appreciate it. On behalf of the Committee, who I will introduce: Meg Webb, Rob Valentine, Tania Rattray, Rosemary Armitage, Josh Willie, Secretariat Support is Simon Scott and Alison Scott over the back, and I have already introduced our Hansard staff. This inquiry is an important one, into Tasmanian adult imprisonment and youth detention matters. You have read some information provided. The evidence at this hearing is protected by parliamentary privilege, but outside of this then that may not be the case, for some information. If there is anything that you feel that the Committee would benefit from in camera, please don't hesitate to ask for that opportunity. The Committee will make a judgment and a *Hansard* version will be published in the future. Thank you and we appreciate your time. After you have taken the statutory declaration, you may have an opening Statement for us and then we would get into some questions. Thank you.

Dr SONNY ATHERTON, STATEWIDE SPECIALTY DIRECTOR, FORENSIC MENTAL HEALTH SERVICE, WAS CALLED, MADE THE STATUTORY DECLARATION, AND WAS EXAMINED.

CHAIR - Thank you very much and we have your submission, number 46. Over to you.

Dr ATHERTON - Thank you for inviting me today to speak to my submission. Would you like me to outline my title?

CHAIR - That would be great.

Dr ATHERTON - Sonny Atherton, my name is on the Statewide Specialty Director of the Forensic Mental Health Service. I have been working with the Forensic Mental Health Service in that role since January last year and was permanently appointed to that role from October last year.

CHAIR - Congratulations.

Dr ATHERTON - Thank you. Would you like me to outline my qualifications?

CHAIR - That would be useful.

Dr ATHERTON - I am a qualified medical practitioner, I completed my degree at the University of Queensland and am fellowed with the Royal Australian and New Zealand College of Psychiatrists; I am a credentialled forensic psychiatrist. I have a master's degree in forensic mental health from the University of New South Wales and have worked continuously in forensic mental health since 2017 in a range of settings, including prison settings.

CHAIR - Thank you for choosing Tasmania. You might like to speak to your submission.

Dr ATHERTON - As I have outlined in my submission, prisoners experience a higher rate of mental illness. I am speaking specifically in relation to mental health service provision in prison. Prisoners experience a higher rate of mental illness compared with their community counterparts. I think that is widely acknowledged. There is a national survey which indicates

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that the rate is about 40 per cent. There have been other studies that have indicated that it is upwards of 60 per cent of prisoners who have a mental disorder.

In many cases, those patients, if living in a community, would have access to significant resources, including the public mental health system. There is a significantly higher rate of serious mental illness in prison; [rates of] schizophrenia and major depression are significantly higher than in the community. Many of our prisoners with those disorders, if they were in the community, would be managed by community mental health services or managed by the public mental health system.

It is no secret that this patient group is quite a stigmatised patient group and also quite a disadvantaged patient group. There is significant comorbidity with substance use. It is not uncommon that we find such patients coming into prison having fallen out of follow-up with their community mental health supports. Often, they can be several months out of treatment and they come into prison often in a fairly unwell State. Once a mentally unwell person comes into prison, they are at additional disadvantages in comparison to other prisoners. Prison, obviously, can be a quite a stressful environment, more so if you have a serious mental illness. But unlike some other States, Tasmania does not have a dedicated area in our prison for people with mental illness.

Many prisoners, if they are unwell, will also be too unwell to engage with their legal proceedings and that can cause delay in progressing their legal matter and can also, in some cases, lead to perpetual adjournments and prolonged incarceration, even for relatively minor offending when the person cannot instruct their lawyer.

Prisoners can be referred to the Wilfred Lopes Centre for treatment if they need -

CHAIR - Which we visited, as you know.

Dr ATHERTON - Which you visited - if they are acutely unwell, but there are limited beds at the Wilfred Lopes Centre and often there is a waiting list.

CHAIR - Can you remind us how many beds there are?

Dr ATHERTON - There were 20 beds all up but that is a mixture of acute and rehabilitation beds. In the acute side, we have eight beds. The patients that I am talking about here will need acute treatment. Those eight beds are not all available to admit people from prison and at any one time we may or may not have a vacancy. It is not uncommon to have three or four or five patients on the waiting list in prison.

While they are in prison, because of the risks and behaviours associated with their mental illness, they may find themselves being managed in quite restrictive circumstances in prison while awaiting a bed or alternatively, they may be released into the community. Then, we encounter difficulties coordinating their transition of care from prison to the community where they will need ongoing mental health follow-up.

It is a well-established principle in the provision of health care to prisoners that a person in prison should not be disadvantaged by their legal status, that they should have appropriate access to health care regardless of the fact that they are in prison. This has now been reflected in a number of international human rights instruments and policy Statements. This forms the

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basis of the principle of equality of care for prisoners. That principle has been included as the first principle adopted in the National Statement of Principles for Forensic Mental Health, which was endorsed by all Australian health ministers in 2006.

It is fair to say that most other jurisdictions now have taken significant steps in the development of prison mental health service capacities. Compared to other States and territories, Tasmania remains severely under-resourced and underdeveloped, and that has been highlighted now in a number of reports. I have mentioned a few of those in my submission but in particular, the Committee may be aware of the Custodial Inspector's report from 2017-18.

CHAIR - Recommendation number one.

Dr ATHERTON - That is the prison task force report as well. The Custodial Inspector's report in particular was undertaken by Professor Jim Ogloff and he would be, I would say, probably the most respected forensic psychologist in Australia and one of the most respected forensic psychologists in the world.

CHAIR - Can we ask you about the conversations or discussions that you have had with government around meeting that taskforce recommendation and the Custodial Inspector's report recommendation?

Dr ATHERTON - On the basis of those reports, we made a business-case submission for the development of a prison mental health service. This was before I came to the service in 2021. The development of a service would have supported approximately 14 full-time equivalent staff. That business case was approved and signed, acknowledging the findings of these reports and the significant service gaps in Tasmania, but unfortunately it was not then funded. We now find ourselves in the position of having unmet taskforce recommendations and other recommendations like the Coroner's recommendations, but really no meaningful increase in resources. The resourcing level is not significantly improved from 2016 when the serious events which led to the prison task force occurred.

Ms WEBB - You mentioned the Coroner's report there, because of a death in custody of some description.

Dr ATHERTON - I don't have a copy of it with me, but this was the coronial inquiry into the murder of a woman in North Hobart by a person who was mentally ill in prison and was recently released from prison.

CHAIR - That has been touched on already today. It was terrible. Sorry, I stopped you mid-term, I apologise.

Dr ATHERTON - You may be aware that there is a a Statewide mental health service reform underway in Tasmania. The Forensic Mental Health Service has not, to date, been included in that reform, for unclear reasons.

Mr VALENTINE - I was going to say, what are the reasons, that was going to be my question.

CHAIR - Unclear. I think you can take something from 'unclear'.

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Dr ATHERTON - What I would like to emphasise today is that we now find ourselves, to my knowledge, as the only service or the only State in Australia that has not developed an integrated prison mental health service. Even the Northern Territory and Canberra, the ACT, have developed prison mental health services.

The level of services that we provide is grossly inadequate, in my view, to meet the current and, also concerningly for me, the future needs of prisoners in Tasmania, being mindful that there are plans to expand the prison estate. What I would like to emphasise is that we advocate for supporting, in developing our capacities to meet the needs of prisoners, which is a very stigmatised patient group and, I am often told, are not necessarily the most popular patient group and difficult to advocate for.

Mr VALENTINE - They're still people.

Dr ATHERTON - Nonetheless, there is the right thing.

CHAIR - We heard that this morning, very early in our commencement of hearings, regardless, they are still people. Thank you, I will open up the questions and invite members.

Ms WEBB - In terms of what you have described as having a grossly inadequate mental health service in our corrections system, we know that numbers are only increasing and trending on the increase as well, so presumably it gets worse every year, too, because we can assume that given the higher proportion of people who are in prison with a serious mental health disorder, as numbers increase those numbers increase. Presumably we are not even keeping pace with maintaining the same level of service in the face of those increasing numbers. Would that be right?

Dr ATHERTON - Under our case list, we currently have just over 100 patients. We have a psychiatrist working in a 0.8 FTE role, who has oversight of that list. That is an unfunded position.

Ms WEBB - It's a what, sorry?

Dr ATHERTON - It's an unfunded position.

Ms WEBB - An unfunded position, so therefore it is a vulnerable position that is not necessarily guaranteed to be there next year or the year after.

Dr ATHERTON - In theory, but I think it would be untenable not to have that person there.

Ms WEBB - It could be untenable to have it there in such a limited capacity as well but here we are.

Dr ATHERTON - We want to ensure that we are meeting the needs of prisoners. In the interim, while we are still advocating for funding support to develop a prison mental health service, we have mobilised some ad hoc resources to help provide some additional support there, but again those are ad hoc resources diverted from elsewhere in the service that is also under-resourced.

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Ms WEBB - Can I ask then about the business case that you put forward, which was approved but then never funded and the 14 FTE there that was part of that business case? Would that then deliver the basics to meet the requirements that were in those recommendations from the various reports? Or would that be an adequate level of service then, if that were to be funded, as described in the business case?

Dr ATHERTON - Coming from where we are now -

Ms WEBB - Obviously it is far more than what we have now -

Dr ATHERTON - it would be 15 times the amount of resource. It would be a significant improvement from where we are now. I think it would be in line with modelling in other States and would bring us in line with the modelling in other States around the number of FTEs that we should have for the prison population that we have. The Sainsbury model, which is used to benchmark FTE in prisons is roughly 20 FTEs per thousand prisoners. So if we have 740 prisoners, then 14 to 15 FTE is on that mark.

Mr VALENTINE - And you have how many?

Dr ATHERTON - We have one nurse, who is the primary interface for mental health care and they also participate in something called the RIT process, which you might have heard about it today, the Risk Intervention Team. They have a range of functions, but one of those functions is a team that sits under the Tasmania Prison Service but consists of a correctional or primary health nurse and a member from the Therapeutic Services Unit, which sits under TPS. Their job includes reviewing the risk of self-harm and suicide that a patient might pose in prison and to review management recommendations now. Much of the time of that one psychiatric liaison nurse who we have in the prison, who sits under the Correctional Primary Health Service - not the Forensic Mental Health Service - is taken up in those RIT reviews rather than seeing patients.

Mr VALENTINE - They're not solely dedicated to mental health so it's really a lot worse.

Dr ATHERTON - The psychiatrist is working 0.8 FTE.

Mr WILLIE - We've talked a lot about reintegration today. You've made a recommendation around funding for planning and supporting engagement with community-based health care. I'm interested in how that works at the moment and I guess there were people with mental health needs exiting the prison probably with minimal support. You've had one high-profile case that you've talked about, but there's probably a lot of others where it all goes wrong - is it that lack of support?

Dr ATHERTON - The first thing to say there is that it's difficult, in my understanding, for remandees to access transitional support. We have worked very hard at trying to improve the transition out of prison and we have one nurse whose core tasks - again, this is ad hoc resource -

Mr WILLIE - There's only one nurse?

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Dr ATHERTON - Yes. We have a nurse who is there to give extra support to that transitional stuff - arranging GPs, helping coordinate transfer of care to mental health services in the community, and that's incredibly resource-intensive. It takes her a long time to coordinate transfers. There are other parts of the system that are also in development and we are interfacing with those and the general adult service in the community. We know that when prisoners leave prison, it's a risky time. There's a high risk of relapse to substance use. If they're not, there's a high chance of a prisoner falling out of engagement with their ongoing support or not engaging with their ongoing support. As a psychiatrist put it to me the other day, when people leave prison, there's a great risk that they'll just fall off the cliff.

CHAIR - I've heard that analogy.

Mr WILLIE - We've also heard stories today of prisoners exiting the prison system with only three days worth of, say, antipsychotic medication. Why does that occur?

Dr ATHERTON - I'm not entirely sure of the reason of why that occurs. I assume that the prison will have a process or a protocol around how much medication they provide on discharge with the expectation that the person will then seek an ongoing prescription in the community or be able to get to a pharmacy.

Mr WILLIE - But given the challenge to access a GP or any medical practitioner in this current environment, it's not a realistic expectation that they'll be able to do that within three days and get another script.

Dr ATHERTON - You're right, it's one of those things about - are we giving our patients the best chance of success when they leave and it's very difficult -

Mr VALENTINE - Is there a safety issue? Is that why they don't give them more than three days? Do they definitely need to see a GP and to give them more than three days' worth is an issue of some description? Do you have any insight into that?

Dr ATHERTON - I'm not sure of all the factors that are at play there. There will be some patients who you don't want to send home with a large supply of medication and I'm sure there will be cost issues and other things that come into that as well.

The patients who are of most concern to us have serious mental illness. Many of those will be on depot antipsychotic medications and they stay in the system for two weeks and longer, and it's about making sure that they link in to their support so that they can maintain their ongoing treatment.

Mr WILLIE - Where I was heading with my questioning is, it seems like a small resource to connect prisoners exiting the system to community-based mental health support. Potentially, it's a cost saving, isn't it? It would reduce the recidivism rate if they've got support in the community potentially and it would pay for itself.

CHAIR - We don't expect you to have all the answers.

Mr WILLIE - We know it's expensive once they enter the prison system again.

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Dr ATHERTON - The relationship between offending and mental illness is complex, so I want to be cautious about making any comments specifically about that. There is a high risk of somebody relapsing to substance use and not engaging with treatment on release and then needing a more resource-intensive intervention which could have otherwise had been avoided. So, if a person leaves prison, relapses to substance use, does not get their next depot injection and becomes unwell, they will then, ultimately, either need hospitalisation or they will be back in prison, or both.

Mr WILLIE - Both expensive options and more crime in the community.

Mr VALENTINE - I am not sure it is in your submission but do you have any understanding of the recidivism rate of people with mental illness, finding themselves back in prison? Is that measured at all?

Dr ATHERTON - I do not have that figure, unfortunately.

Mr VALENTINE - That's okay, I just thought I would ask the question.

Dr ATHERTON - I suppose when we think about recidivism - and I have to just preface this by saying I am not a criminal justice expert - but we talk about criminogenic need and risk factors which might lead somebody to recidivism and those risk factors include homelessness, substance use -

CHAIR - Lack of positive network - the whole gambit.

Mr VALENTINE - Is there any tracking that you do of patients once they exit?

Dr ATHERTON - Not specifically, we do not currently have the resources to do that but ideally we would.

Mr VALENTINE - I can see that on here, but I just wondered if there was any intent to handing that person on to someone else or -

Dr ATHERTON - It would be interesting for us to look at the reincarceration of people who are open to mental health services. We certainly see many of the same mentally unwell prisoners coming in and out of the system.

Ms WEBB - There has been significant redevelopment at the Risdon Prison Complex and we have discussion in train around a northern correctional facility. Has there been engagement in either of those processes with Forensic Mental Health Services about the inclusion of a dedicated area in prison suitable for prisoners with mental health issues who are not going to be meeting the criteria for Wilfred Lopes but need that dedicated area? You pointed out that we are lacking that. Has there ever been discussion that we should be including it as we are redeveloping or developing new facilities?

Dr ATHERTON - In my time here I have not been directly consulted on that. Our organisational structure is that above the Forensic Mental Health Service there is an operational grouping called the Forensic Health Service and under the Forensic Health Service sit two services: the Correctional Primary Health Service, which essentially provides GP level health care to prisoners across Tasmania and the Forensic Mental Health Service.

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I raised this recently with my group manager and there was some mention that on the back of the task force recommendations there were recommendations that came out that incident around the development of dedicated areas in prison. It sounded as though there were some discussions but they did not translate into any dedicated mental health area of the kind that would meet the task force recommendations.

Ms WEBB - Are you aware of what the barriers to developing that sort of area would be? Is it simply that it does not fit anywhere readily with currently the expense of redeveloping a new area for that?

Dr ATHERTON - I think it is probably a combination of those things, but I am not entirely sure. From my point of view, if we are developing a new prison then there should be the opportunity to consider how we would provide areas which might optimise the provision of health care to prisoners.

CHAIR - You pointed the Committee in your recommendations to the ACT Correctional Mental Health Service and you have obviously visited it, you have shared that, and you said that particular equivalent of care for prisoners could readily be scaled to the Tasmanian context. Can you give us a bit more of an outline of how you see that supports that Statement?

Dr ATHERTON - We have had a look at Canberra's or the ACT's model for prisoner mental health. They are a similar sized or slightly smaller prison than ours, so, a natural comparison for us. When we visited their service last year, they currently have, on any given day, around eight staff on the ground. They have essentially a case management-type model, which is something that is similar to what you would see in the community. If you were a mental health patient in the community then you would be managed by a mental health service and be allocated a case manager. It would be the task of that case manager to work with you to help you towards your treatment goals and review your mental State and provide support in between psychiatric appointments. Currently in Tasmania, we have really no model that supports that type of approach. Between psychiatric appointments, there was no model really for maintaining contact with the patient. We had one nurse -

CHAIR - Nurse. Who does a mighty job, I might add.

Dr ATHERTON - Yes, they are very stretched.

Mr VALENTINE - I cannot understand that. A 12-hour shift you are talking about here?

Dr ATHERTON - Yes.

Mr VALENTINE - How does that work? I mean, a person cannot work 12 hours a day every day? Is that what they are doing? That one individual? Or this more than one individual that is delivering the service, if I could put that way, like part-time? How does it work?

Dr ATHERTON - I cannot speak specifically about the structure of their workday. There are certain hours of the day where there is access to prisoners when the prisoners are out of their cells. Then, I understand that part of the function that those nurses provide is a crisis response type function. If there are immediate concerns about a prisoner, then they would

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participate in the assessment of that and also the intake of prisoners coming near reception into prison will be screened at the point of reception.

Ms WEBB - I am interested, again, in the recommendations used to talk about upskilling of correctional staff as an opportunity for improvement here, too. You point to a program from the UK, the PIPEs program, Psychologically Informed Planned Environments.

CHAIR - The Director of RPC should know this one well.

Ms WEBB - That's true. I am interested in what the elements of that program are that you think would work well here. I am also interested to hear what we have in place at the moment in terms of skilling correctional staff in this area. Is there anything in place in that space or are we talking about putting something in place in what is now currently a gap?

Dr ATHERTON - It is difficult for me to answer the second question because, as I mentioned in my submission, the oversight of mental health care in prison is fragmented. While I'm the Specialty Director of the Forensic Mental Health Service, the primary interface for mental health care in prison is actually under the Correctional Primary Health Service, which is the GP-led service. Essentially, our service provides a kind of in-reaching clinical support to the primary health service, under the current model. There is a separate service line directly under prison called the Therapeutic Services Unit. My understanding is that they do provide some training to prison staff, but I cannot speak specifically to the exact details of what training is provided.

Ms WEBB - We can seek that information out elsewhere though. Then, in terms of the PIPEs?

Dr ATHERTON - The PIPEs. Yes. Again, I visited the UK previously and this was very topical there when I visited back in 2018, the development of enhanced areas in prison where prison staff have additional training in mental health management or mental health support. There are significant pressures on forensic beds throughout Australia and in most other jurisdictions, so that has highlighted opportunities to improve the supports that people have in prison so that you are not exclusively relying in transfer to hospital as the only option. My understanding of this is that these are enhanced environments in prison where there are staff who have upskilling in mental health stuff.

Ms WEBB - More skill. That sounds very interesting.

I am really interested in that rights-based concept of equivalence of care and your comments that Tasmania is the only jurisdiction that is really significantly failing on this side on the moment, in terms of the mental health care that is provided within prisons and things like not having those dedicated spaces, not having the same level of service and support available. Some other jurisdictions have human rights acts or human rights charters and my assumption would be that this is the sort of thing that becomes a matter for discussion when you have such a piece of legislation or a charter in place - ACT, Victoria and Queensland all have them. Do you know of any correlations between improvements to this sort of area in jurisdictions that have human rights acts or charters?

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Dr ATHERTON - Not specifically. For us, the most recent activity around this would have been the OPCAT visit and while we are, I believe, outside the scope of that, Wilfred Lopes being a hospital rather than a prison -

Ms WEBB - People are detained there, so I think it still fits into the areas covered by OPCAT?

Dr ATHERTON - They didn't visit us. We were very keen for them to visit, but, actually, I was away off sick, so maybe they visited during that time -

Ms WEBB - We're speaking to them as part of this inquiry tomorrow so we will ask.

Dr ATHERTON - But I suppose what concerns me is that, while mentally unwell prisoners, if they are waiting for a bed in hospital and otherwise unable to receive adequate mental health care, would often be managed in a more restrictive way. That might include being placed in an observation cell for a long period of time.

Ms WEBB - So therefore their rights are being encroached on further in that sense perhaps because of a lack of ability to support their needs within the system. I am interested in that human rights and correlation.

CHAIR - There will be an opportunity tomorrow to further progress that. Dr Sonny, we have taken up a considerable amount of your valuable time and we very much appreciate the time and effort that you went to, to put your submission together. It is pointing us to a couple of areas that the Committee may like to further explore which is very helpful. On behalf of everyone here, we thank you very much and we will continue on our journey of this very important aspect of the Tasmanian community, so thank you.

THE WITNESS WITHDREW.

The Committee adjourned at 2.44 p.m.