

CORRECTED

REPORT OF PROCEEDINGS BEFORE

STANDING COMMITTEE ON SOCIAL ISSUES

**INQUIRY INTO DOMESTIC VIOLENCE TRENDS AND ISSUES IN
NEW SOUTH WALES**

CORRECTED

At Sydney on Monday 18 June 2012

The Committee met at 9.30 a.m.

PRESENT

The Hon. N. Blair (Chair)

The Hon. G. J. Donnelly

The Hon. C. Faehrmann

The Hon. N. Maclaren-Jones

The Hon. H. M. Westwood (Deputy Chair)

CHAIR: On behalf of the committee I thank you all for coming this morning. As you are aware, the Committee has held six public hearings to date. We have had five site visits and taken over 80 submissions. Today is unique because we are having a round table and I again thank you for your participation this morning. The purpose of this round table is to consider the implementation of the Committee's proposed recommendations, to refine them and to ensure that their implementation will actually work on the ground. It is unusual for a Committee to consult with stakeholders on proposed recommendations, however the Committee believes that it is important to get this matter right and the risk of getting it wrong is far greater than any difficulties that might present themselves today.

We are all here today to further a common goal. I would ask that, as we approach today's round table, we all remember the spirit in which we are here. We are trying to collaborate, with mutual respect for each other and the different opinions that other stakeholders may have, as we progress through today in addressing the issue of domestic violence. One of the key messages that we have heard throughout the hearings is the need for improved collaboration between the key stakeholders. That is one of the things that we are trying to improve today with the round table, to get key stakeholders here to discuss the issue of domestic violence.

The procedure today will be that there will be no opening statements and we prefer that you do not take questions on notice today. This round table is being held in private but we will publish the transcript. I know that most of you have appeared before the Committee before and are appearing under your former oath, however, there are some people here today who have not appeared before the Committee and they will need to be sworn or affirmed. We will do that now.

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DENELE VALLI CROZIER, Executive Officer, Women's Health New South Wales,

JANET LOUGHMAN, Principal Solicitor, Women's Legal Service New South Wales, and

LYN WALKER, Executive Manager, Participation and Equity for Health, VicHealth, affirmed and examined:

HEATHER ELIZABETH BLACKLEY, Youth Services Manager, Western Plains Regional Development Incorporated, and

ALISON JANE FRAME, Executive Director, Office for Women's Policy, Department of Family and Community Services, sworn and examined:

JANE WANGMANN, Lecturer, Faculty of Law, University of Technology Sydney,

DON WEATHERBURN, Director, New South Wales Bureau of Crime Statistics and Research,

MAURA BOLAND, Deputy Director General, Strategy and Policy, Department of Family and Community Services,

ANNMARIE LUMSDEN, Executive Director Strategic Planning and Policy and Business Reporting, Legal Aid New South Wales,

CATHERINE GANDER, Executive Officer, New South Wales Women's Refuge Movement,

GABY MARCUS, Director, Australian Domestic and Family Violence Clearinghouse,

RACHAEL MARTIN, Principal Solicitor, Wirringa Baiya Aboriginal Women's Legal Centre, and

KERRY CHANT, Deputy Director for Population Health and Chief Health Officer, NSW Ministry of Health, on former affirmation:

GRAEME HENSON, Chief Magistrate of New South Wales,

BETTY GREEN, Chair, New South Wales Domestic Violence Coalition,

MARK MURDOCH, Assistant Commissioner, NSW Police Force,

ROBYN COTTERELL-JONES, Executive Director, Victims of Crime Assistance League Inc New South Wales, and

BRENDAN THOMAS, Assistant Director General, Crime Prevention and Community Programs, Department of Attorney General and Justice, on former oath:

BEVERLEY LAZAROU, before the Committee:

CHAIR: This morning we will move through the report that we have sent to you, section by section, in the time allocated to each section on the schedule that you should have in front of you. At the beginning of each section I will ask that you indicate which recommendations you are most keen to discuss, so that we focus on those. We want to avoid reiterating evidence that has already been provided to the Committee. The Committee is more interested in hearing about the recommendations that you think will be difficult to implement and why. If you agree with some of the recommendations, there is no reason to elaborate or go into detail as to your reasons for that. You may not have comments on some sections and that is okay. We know there are some issues which are not covered in the draft report that you have received that will be addressed in the final report. You will all be given an opportunity to comment at the end of each section if you think there is a recommendation or information that should be added.

I would encourage you to engage with other participants, not just the Committee members. But please keep in mind a few things, in particular our Hansard reporters. There are not enough microphones for each person, so you will have to share. Please speak loudly and slowly. I will ask you to speak one at a time and

before you start speaking I will ask you to state your name so the Hansard reporters know who is making the comment. We will start the hearing with section 1, Possible Recommendations Nos 1 to 17. Does anyone have any specific issues or subjects they would like to raise in relation to the first section? Does anyone have any issues, for example, with recommendation 4?

Ms LOUGHMAN: Yes, I have a couple of points about this issue. AVLIC has spent some time talking about the definition and there have been submissions made to the review of that legislation. So that is happening as well. Our particular concern is that we need to make sure that we protect the rights of women with disabilities and we are particularly concerned that they are vulnerable and we need to ensure that their experiences in boarding houses and institutions are as well protected as they can be. We are not quite sure what the evidence is and what the reasons are for separating out those parts of the definition in the legislation.

CHAIR: Does anyone have any further comments particularly on recommendation 4?

Mr MURDOCH: I am an advocate for this particular recommendation and in my evidence to the parliamentary inquiry I provided reasons for that. I think the legislative definition in New South Wales for the Crimes (Domestic and Personal Violence) Act, which is the one the police use, currently is too broad. In my view it is a catch-all and we need to limit our focus, and I accept everything Janet just said. I think the paper makes reference to the fact that if we restrict the current definition, we put in place appropriate measures so that people with disabilities and carers are catered for and that they do not fall outside the protections currently provided by the ADVO process, which do not necessarily apply to the apprehended personal violence orders. My strong view is that the current definition is too broad and it catches too many people and prevents us from prioritising the use of our resources and providing more effective services to those who need it.

CHAIR: Ms Loughman, I refer you to recommendation 38, which you may want to discuss when we get to that, to see if it addresses that issue as well.

Ms LOUGHMAN: Yes.

CHAIR: Are there any further comments?

Ms MARTIN: I agree with Janet. I also am on AVLIC. I assume that people know what AVLIC is?

CHAIR: Would you please expand it?

Ms MARTIN: It is the Apprehended Violence Legal Issues Co-ordinating Committee. This issue has been discussed at length. It certainly was a very big issue as part of the review of the Crimes (Domestic and Personal Violence) Act. I would refer the Committee to that review because a number of us made quite substantial submissions around this particular issue. I think it is a complex issue. I agree with Mr Murdoch, the definition as it is currently is very broad and we all struggle with this, but I think there are other ways to do it differently. In our submission we actually refer to definitions in Victorian legislation, which I think reaches a nice compromise around some of these issues, particularly capturing women, people with disabilities and, say, in carer relationships or people living in residential facilities. I am not going to go into detail about that, but I am not happy with the recommendation and I would urge the Committee to consider the submission made by other services as part of the review of the Act.

CHAIR: Does anyone have a comment on the definition? Is there anything else within section 1? What about recommendation 9 in relation to integration and coordination of services?

Ms BOLAND: We very strongly support this recommendation. We think that in establishing the ongoing governance arrangements for domestic violence, particularly once we have the domestic violence framework in place, we think that this is the kind of area that should absolutely be done in partnership. You reflected it partly as well in recommendation 7 that talks about potential governance mechanisms. We would also be supportive of having at its highest level representation from the non-government sector, which is such an important part of the delivery of these services; and making sure there was open and transparent reporting as well. I just want to touch on recommendation 7.

CHAIR: Before you do that, I have a question about the framework to which you refer. I know that it is quite early in its development, but what sort of consultation will be engaged with the NGO sector in the development of that framework?

Ms BOLAND: You are right. We still have some consultation to do in this area and we are intending that that consultation be relatively broad. Certainly many of the key groups—the Women's Refuge Movement obviously is a very key one, but there are other groups like those pertaining to women's health, legal services and so on—we need to consult with and try to formulate that. We have been talking also with the Premier's Council on Preventing Violence Against Women about appropriate structures as well. We think they have a strong role to play in advising on future governance arrangements.

CHAIR: What do you want to say regarding recommendation 7?

Ms BOLAND: Just because it kind of connects. I think we would probably agree in principle with a multi-tiered approach. I think that it will be difficult for us to agree at this stage fully to this governance structure because we still have some consultation that we would like to do as part of the framework. If the Committee were accepting of this, I think this is a very good input into that that we could then try to finalise. And of course, the issue of a formal ministerial group is one for government to consider.

Ms FRAME: I want to add to what Ms Boland said about consultation with the non-government sector pursuant to the framework that we are progressing. We actually have recognised how critical consultation is to the extent that the current documentation for the framework now lists as a possible extent of that consultation co-design where it may be considered to be appropriate. That is something that we have expanded the language on and, in recognition of how much we want to engage with the sector, the current documentation says that where appropriate we will be looking to co-design with the non-government sector around some aspects of the framework's development.

CHAIR: What about recommendation 10? I want to hear from those of you who are involved in delivering services, particularly in regional areas? What is the best mechanism for regional co-ordination and where should it sit?

Ms CROZIER: I think it is always harder to answer this question when you do not have a coordination team at all. I am very supportive of point seven and the nine, the whole concept of coordination, we have been asking, and mapping of services. Once you really have an understanding of what is available and what is not, and continue to develop those partnerships—because I think there have been very strong partnerships developed over the past eight to 10 years with the non-government sector and working groups, and law and health and social welfare services. That has been growing very strongly but without that coordination role these questions will always be difficult to answer really. I think sharing knowledge and getting together and having a framework in itself will answer some of the questions. Some services in isolation are working quite well in their own community teams. If that were mapped you would have a better understanding of what was there as well. We have not even mapped what is in the city either so I think there are a lot more services working together already in partnership. I think a mapping by a team would be a fantastic piece of work.

Mr MURDOCH: I agree entirely with what Ms Crozier has just said. I think recommendation 7, leadership and accountability, is critical to this whole process. Whether or not it takes place in what is suggested there in that recommendation is another matter but it needs to happen. Once we get leadership, accountability and coordination nailed down we might be in a better position to answer questions.

Dr CHANT: I agree with the previous comments in relation to item 10. I think we actually need to have a lot of thought and it needs to come out of the domestic violence framework. The other element that I am also concerned about is making sure that whatever interagency group we have, it considers like issues; that we are not just creating another interagency group. We know of a number of issues which intersect with the management of domestic violence involving similar organisations. I would like a streamlined interagency approach.

Ms BLACKLEY: If I could second exactly what you are saying. I think it is important that we look at what is already there, particularly out in rural and remote areas. Through community builders projects from Family and Community Services funding we already have quite established interagency groups and they are already looking at the mapping and where the gaps are. I do not think we need to recreate yet another system. I am not sure comparing the city and rural, but I know for our areas that the interagency groups cover a very, very large group for all of the community. That is represented in those.

Ms GANDER: I agree with what everyone has said. The only thing that I sometimes think is an issue in regional areas is that when there are systems failures we do not have infrastructure to elevate those issues. I think that is important. While we might have services that organically come together and work together, and they know what gaps are there, I think as well, sometimes the issues that go on in regional and remote areas, without that connection to infrastructure to be able to address system issues, tend to go round and round. I think it is an important aspect to take into account.

Dr WANGMANN: I have a general comment. I am generally in favour of the recommendations. One of the difficulties is that we do not know what the framework is and so it is hard to talk about what those structures would look like. The other thing is I think we need to ask what we are integrating for. At the moment we sort of say integration, coordination and we talk about committees, but we are actually not asking ourselves what is the result we want to assess it by. I think we need to step back and ask what the result is that we are after. I think the Department of Education would be a key. If we are talking about prevention the Department of Education would be a key body to be on it.

Ms MARCUS: Everything I wanted to say has been said.

Ms FRAME: I want to add further to everyone's comments about recommendation 10, the Office for Women's Policy is actually progressing a full service mapping and gap analysis. We are not looking to reinvent the wheel. As Ms Blackley spoke about what exists, we will be looking to draw on what analysis currently exists but we want to recognise that the framework, as everyone has reiterated, requires that fundamental underpinning. So that is a separate piece of work that we are progressing in the Office for Women's Policy.

Ms CROZIER: I want to add to the comments about where there is a system failure then there is no backup, actually I find the same thing happens over a period of time. You can see it happening in Victoria which we see as quite a good system, when there is a systems success there is no conduit to it either. It seems like we have these huge interventions and then we just keep going. You might set up a team but there is not an ongoing forum where we evaluate new and innovative practice that might be happening, or of things that are not working well. Even a yearly forum of any kind, or anything, would be an improvement on the lack of communication on the field and to the system.

Dr CHANT: I want to pull up on that theme that has been raised, as I think it is really a very important issue, about the fact that we need to continue to build the evidence of what is effective in this space. We need to have that as a robust element of the framework. I think that is a particular which underpins all of the agencies.

CHAIR: I move on to recommendation 11 in relation to information sharing which will be fundamental for any cross agency approach. Mr Thomas, would you like to comment about some of the work that has already been done in this area by the Attorney General and Justice department?

Mr THOMAS: This recommendation was made by the Auditor-General in his examination on the issue of domestic violence. The Attorney has asked us to have a look at how we can streamline information sharing, particularly, in the criminal justice system and particularly from the point of view of police referring people to support services. We have done a fair bit of work in that area and there are some recommendations going to the Attorney in the immediate future. Hopefully, we will have some answers to that pretty soon. Ultimately it is a matter for the Attorney to decide.

CHAIR: Does anyone from the other agencies have any issues with this?

Ms LAZAROU: I very strongly agree with that. I think it is imperative for our services on the ground to sort out the issue of information sharing because at the moment they are somewhat paralysed in delivering services to women directly and for early contact with women in ensuring orders are tailored to meet their needs. We would strongly support that recommendation.

Mr THOMAS: In that work we did some substantial surveying of victims of violence who were going through the court process. We had overwhelming support from them to have their information shared by police with support services at the earliest possible point. There was also really strong support from the people who were talking about doing this work.

Ms MARTIN: One of our concerns is that the recommendation is a little vague. It talks about being mindful of appropriate privacy protection. I assume that means consent. That is a critical issue in terms of

getting the consent of the person who is experiencing the violence. I want to press that particular issue because I do not think there is any neat answer to that. We have varying views about whether or not consent is appropriate. We have deep concerns if it is being contemplated that consent is not necessary. There are different ways of doing referrals and managing working with victims, particularly at crisis, that should be explored. We would be very happy to contribute to any discussion about that.

CHAIR: We will deal with that later in talking about referrals that the police may be able to make. You might want to raise those issues then.

Ms LOUGHMAN: Ms Martin said what I wanted to say. We are concerned about consent. Part of that is about the accuracy of information shared and the safety of the person whose information is being shared. We have serious concerns about that.

CHAIR: What about recommendation No. 12 in relation to risk assessment tools? I know that NSW Health has done a pilot. We will also talk about risk assessment tools with the police later. What is the best risk assessment tool and framework?

Dr CHANT: Hopefully the framework will provide an indication about a risk assessment tool. However, in terms of applying it, for practical or other reasons it may be appropriate to use subsets of that tool. For instance, we use two questions embedded in the screening tool and then do an evaluation of that to see if it elicits reports from women. If that is demonstrated to be effective, embedding that and reaching all pregnant women is a very effective process of identifying domestic violence. There must be evidence of the effectiveness of an assessment tool and there might be slightly different assessment tools used in different settings.

CHAIR: Would that be the same for police?

Mr MURDOCH: Very much so. In fact, I totally agree with Dr Chant. Many government agencies performing those immediate intervention or response roles are dealing with a crisis management environment. What is relevant in a policing context might not be relevant in a health context and what is relevant in a health context might not be relevant in a welfare context. We need some common risk assessment criteria, but how it is applied on the ground and who is applying it needs to be taken into account.

Dr WEATHERBURN: I echo Dr Chant's point. There is no point in having a risk assessment tool unless it is validated. All it does is confer a false sense of security. There is too much of this "let's get a risk assessment instrument". All the good intentions in the world count for nought if the tool does not do the job it is meant to do. The Committee should think long and hard about adopting risk assessment instruments before they have been properly validated, which I think is Dr Chant's point.

Ms BOLAND: I was going to pull that together. The discussions that we have had so far in the steering committee about the framework have determined two factors. First, it must be evidence based. That is, in the sense that there is evidence that the risk factors being examined are appropriate and also, as we have said, that the tool has been validated. Secondly, it must also be practice based and it must consider the jobs that people are doing. If people have high-volume slight contact with people, obviously we cannot do a detailed assessment. If people are in a position where they sit down with a woman and talk about her experiences, it may be more appropriate to ask lots of questions. We are conscious that those things have to be brought together. One of the very good findings that the current project came up with is that it is not possible to have a single comprehensive risk assessment framework that will work in all jobs in New South Wales and that we must be practical as we apply it. We have to ensure it is effective and that it is used. If it is not being used it will not pick up the information it needs to.

CHAIR: Do some of the non-government groups wish to comment? Ms Green, do you want to comment? You work directly with victims.

Ms GREEN: I agree most definitely that we need a risk assessment tool that is workable and that it needs to be applicable in different contexts. We need a tool.

Ms MARTIN: I certainly cannot suggest what the best risk assessment tool would be, but we must also be mindful of cultural differences. We do a lot of work with Aboriginal women. What might work for non-Aboriginal women might not necessarily work for Aboriginal women.

CHAIR: Is it safe to assume that if there is a risk assessment framework the application needs to be tailored not only to the agency or the person undertaking the risk assessment but also to the needs of those for whom the tool is being used?

Ms MARTIN: Absolutely.

CHAIR: I refer now to recommendation No. 13, which relates to case management services. Does anyone have any views about the case management role and where it should sit? Again, we are looking across agencies. Does anyone have any particular views?

Ms LOUGHMAN: We believe the case management role is really important. We often take it on even though we are a legal service and it is a difficult system to navigate. The case management service is crucial for doing that.

Ms GREEN: Coordination needs to be improved in terms of services. It is difficult to get the outcomes that we want if there is also a corresponding commitment to build the capacity of the specialist services operating in this field. By "building capacity" I mean that any funds applied to the sector must be applied to services that are already working in the sector, which means strategic targeting for capacity building and, please, no competitive tendering.

CHAIR: Does anyone have any other recommendations that they would like to see in this section—from No. 1 to No. 17?

Ms GANDER: I would like to make a further comment about case coordination. There may be a whole range of things that will assist that are already in the recommendations. However, there are sometimes policies that are at cross purposes across government and in the non-government organisation sector that could benefit from investigation. It might be that the non-government organisation sector gets to a certain point of ensuring a woman's safety and progress towards a life free from violence. Then there might be policies, for example, where women are ready to move to independence but do not have legal status—they might be on a bridging visa—and they cannot get housing so they are stuck. I think it would be good for us to also review, in the case coordination role, what are some of the cross-purpose policy areas.

CHAIR: Does anyone have any other comments?

Ms CROZIER: The document assumes case management services, for example, improved coordination services, but if we do not identify what services are needed—the whole document talks about mapping out what might be a good response and usually that response is the first intervention. There is nothing that goes further, although it does with perpetrator groups—recognise and arrange for emotional needs in a 20-week program—but there is nothing that identifies what victims of domestic violence might need over a longer period of time to ensure not just that initial case management to get them there but that those services are recognised as being available and supportive. People keep talking about women's refuges as housing, not the whole range of work that they do. There is minor reference to women's health occasionally, but not that 25 per cent of our work is with women with violence. That is not really mapped out with a longer view. I support any form of improved coordination and bringing together, but I would like victims to see it for just a little bit longer as well.

CHAIR: Are you able to guide the Committee as to those areas that need to be mapped?

Ms CROZIER: Counselling and group support work—even those two—because we often recognise housing and child care, that sort of Centrelink involvement, but none of the emotional needs and requirements. I think victims also suffer from a whole range of attitudes and beliefs, and they need strength, encouragement and emotional support. What is often talked about is a year to 18-month program, but the work that happens during that time is invisible in most of the documents I see, so that is the sort of work that I am referring to.

Ms WALKER: The Victorian experience in terms of the statewide steering committee and the work that it did in relation to redevelopment of the service system probably in hindsight—and this is my view—I was a strong advocate for an evidence-based approach, what a blue ribbon service system would look like starting from the time of report or time of incident through to four or five or six years down the track, and then working out where the service system was sitting in relation to that evidence-built approach and working out which bits you could afford, and when and how it would be coordinated. Left to me, I would have put it out to regions to

tender, however, the politics of the day were not quite as progressed as that, so there was an interim sort of step. I agree with you in terms of how you work out what is the best service system response and then what you have in place and what resources you can build over time. It is a bit like you need to know what it looks like in 10 years time and then look back, and I am a really strong advocate of that in terms of knowing where you need to be and working back so you do not put in place another set of problems because of the resource allocation and politics, because I think we are all probably a bit bigger than that.

Dr CHANT: I think the recommendations are very good. In terms of us implementing them, I would like to give some consideration to the fact that clients that are at risk of domestic violence are intersecting with our services at various points. They might be coming in through the mental health or drug and alcohol stream or through outpatient and emergency departments [OED] or through maternity services. The way we do case coordination and management and the lead for that may more appropriately be someone supported by a domestic violence or general social worker, so the models of care will be very different depending on the circumstances of the client and who is most appropriate to do that coordinated care. I think that we should acknowledge those operational differences but ensure that we have mechanisms to capture and that we are actually addressing the outcomes and reducing domestic violence as a component of the quality model of care.

Ms MARCUS: I agree with what Denele Crozier said. I think one needs a long-term view of what women need, but I would like to ask that we have a very broad view of what women need and look at the potential of—and this might be going on to a different track—providing brokerage funds so that you can tailor the provision of what women need. It could be counselling. Often it is services for their children, which I think is something that is missing from this document. It could be driving lessons, it could be scope to go to a physiotherapist, it could be parenting—it could be anything. I think that is the thing about case management, that it provides the opportunity to tailor what you provide to the woman's specific needs, instead of just moving down an "everybody gets this" kind of model. I ask that, when that is being looked at in the framework, the scope of what is considered is really broad.

Ms FRAME: I just wanted to add to recommendation 13 that certainly with the framework we intend that we will be achieving greater coordination of services and integration, and addressing conflicts like Cat Gander outlined where different service operators are heading towards a different outcome. I certainly expect that the framework will deliver outcomes in that regard. We are definitely looking to achieve improved case coordination. Case management, as we all know, is a more expensive concept in terms of potentially brokerage funds or that more intensive level of support, and I just wanted to mention that we would be looking within the framework to do everything we can to achieve increased coordination within the existing funding that we have and there are dedicated case management programs that we currently fund in community services and housing. We will, however, have to stipulate that, were we looking to expand that specific case management approach more broadly, there would be funding implications.

Ms COTTERELL-JONES: Our work crosses domestic violence, apprehended violence orders and criminal matters, and then the Family Court and the impact of what happens in State courts being transferred through. In relation to a lot of our women, the actual violence to them, the direct violence to them, might have been over for years—for one woman, 11 years in the Family Court trying to keep her kids safe. At what point do we talk about here? We have to capture those people or else we are just letting them down further down the track. That would be my comment.

CHAIR: I might now close section 1 and move to section 2, which is prevention and early intervention, recommendations 18 through to 25. Does anyone have any comments, particularly in relation to recommendations 19 and 20, looking at long-term early intervention and prevention focus?

Ms MARCUS: I think the focus on prevention is really important, but I think it needs to be clear. I think you are saying here that there is a definition, but prevention does not equate to community education campaigns, so I think the outcome must not be another set of advertisements or another set of posters. We need to be looking at prevention, not community education.

Dr CHANT: I think one of the challenges for the framework is to pick up activities that agencies are doing that are not badged with the domestic violence label but, hopefully, with one of the consequences of the programs working well, maybe a reduction in domestic violence. I give an example of our early childhood programs and our parenting programs supporting new families. In our drug and alcohol setting there would similarly be programs that, hopefully, have as an outcome a reduction in domestic violence also.

Dr WEATHERBURN: I think perhaps this is one of the most depressing features of this whole thing because research on prevention of domestic violence, prevention of re-offending if you like, is pretty dismal; not so dismal as to be hopeless but close to it. I am talking about the Campbell reviews, the court-mandated programs and those things. I think there is a reach challenge here to try and develop an effective program. The Committee does not have a recommendation on this but it would be great to see a recommendation to make a determined effort to try and develop an effective intervention program. I know that Corrective Services thinks it has a program but the evaluation is not really convincing at this stage.

I am also mindful of the fact that none of the existing programs seem to deal with the issue of alcohol. Alcohol is a factor in 40 per cent to 60 per cent of domestic violence incidents, depending on where you live. I am not so naive as to believe that domestic violence can be cured just by changing alcohol consumption, but it is not as if we have so much control over this problem that we can afford to be picky and choosy about levers we try. I guess the short point here is that we really need to try much harder than we are trying to get an effective intervention among existing offenders, not just the broadscale community-based programs.

CHAIR: VicHealth has responsibility for this in Victoria. We do not have an equivalent agency here in New South Wales.

Ms WALKER: I will try and keep it brief because as soon as I start one thing leads to the next and to the next—that is how my mind works—so I will try and prevent that from happening. Where Mr Weatherburn has just gone is the age-old conundrum, in terms of what you are describing as secondary prevention. Our focus is pretty much solely on primary prevention, which takes us into the other issue about whose business is that? It is probably not the business of most people sitting around this table. It is workplaces, schools, sports clubs, Parks Victoria and local government. There is a good solid science around it in terms of what works where, under what circumstances and who the players should be.

If people think that primary prevention is beyond reach one only has to look at longitudinal studies and attitude surveys over the past 20 to 30 years in this country to be proved wrong. Primary prevention in the right circumstances does actually work. It is a complex scenario when you have largely a tertiary sector completely committed to the elimination of violence against women—it is in all their philosophical statements—but when push comes to shove we are not actually the players who are best positioned to actually do that work. As I said, it is the school-based programs, the sport-based programs and the workplaces, and things like the White Ribbon campaign. The God Lord only knows that we also need to let men into the space, and that is a relatively new phenomenon in terms of women's services. Certainly not at a direct service level but at a primary prevention level that is absolutely an issue.

I think the other thing in terms of a framework—I have been listening to the conversation and I am allowed to say this because I come from Victoria—is that it is going to have to do a lot of things for a lot of people. All I can say is may the peace of the Lord be with you. When it comes to prevention, by the time you have all your coordination mechanisms in place to deal with the service system reforms you are then looking at complete new sectors that are outside that coordination function to actually buy in and do this work. I suppose the good news around primary prevention would be that I actually think it is a relatively resource neutral way of doing business if you are reorientating people to do the things that they should be doing anyway. If you look at sport, for example, sport participation is critical to the sector's survival and women walk away in droves and will not be engaged if they are not safe in those environments. It is also the same in a range of other scenarios.

I really encourage a prevention component being put into this work. The extent to which it is able to be integrated in the framework is anyone's guess but I think it is really critical that you are very clear because secondary prevention to me is basically intervention. Secondary prevention to me is good practice at a tertiary level; it is not prevention. You have not prevented anything; it has already happened. At best, you will prevent the ongoing incident. Finally, in public health terms it is all about diagnosis, looking for cures and then treating. If you do not get the diagnosis right, you will not get the right cure or the right treatment. In terms of the alcohol issue I believe that is a relatively populous view in terms of prevention. We believe that alcohol acts as a disinhibitor so you actually have to have a man who is prone to violence to be perpetrating it in the first place. Alcohol will make it every night as opposed to Friday night and it will not be the fist; it will be the axe. So every blow for alcohol in terms of reduction of consumption is critical but we should not be hanging our hat on if we reduce alcohol we will prevent violence against women. We will not; we will prevent secondary occurrence.

Dr WEATHERBURN: Can I comment on that?

CHAIR: Yes.

Dr WEATHERBURN: First of all, I do not question the wisdom of mass campaigns to try to discourage domestic violence but if you are a victim of domestic violence—at least the women that I have certainly spoken to—you just want it to stop. You are not too fussy about whether that be done by this program or that program; you just want a safe life. If being bashed once a week is a better outcome than every night, it is an outcome worth pursuing as far as I am concerned. I do not see any inconsistency between pursuing broad-based primary prevention programs and tertiary programs but I do see a real problem in simply leaving it all to primary prevention programs. As far as alcohol is concerned, you only have to look at the evidence of alcohol restrictions in Aboriginal communities in Halls Creek and elsewhere to see the benefits it brings to those communities. No, it does not eliminate violence and it does nothing to change the attitudes of men but, nevertheless, it brings relief and I think that is worth having.

CHAIR: Is there any thought as to where this may sit and who has carriage of this?

Dr CHANT: Again we have to be careful that we are not developing a domestic violence stream apart from some of the other program areas which might have crossover benefits. We have been talking about getting women in physical activity and participating in sport and wanting to do that safely, that is a key element of where we want to go. We know that young women, adolescents drop out of sport and differentially females drop out of sport, and we want to do that for healthy lifestyle. There are a number of platforms that we want to achieve that add something else but it may have an advantage in a domestic violence outcome.

I think one of the dangers we have got is labelling things "domestic violence" when we need to do a myriad of things to construct the society and create safety, has long-term attitudinal societal change, but we may achieve that in many different ways. One of the elements of the domestic violence framework is to accept that. Perhaps each of us in program areas who might be doing programs that support this such as our family-parenting programs, which I think is an intervention—now we can argue about whether it is primary or secondary—but we need to be capturing some of the outcomes in developing the evidence of how it is impacting on domestic violence as well. I think it is all of our government agencies; it is not some-one else's responsibility.

CHAIR: VicHealth is a standalone entity responsible for health promotion in Victoria. I know that different agencies have elements of that—I know that NSW Health has a health promotion unit—but does there need to be one single person who drives the early intervention and prevention programs, who liaises with Education, with the workplace and sporting groups? Does anyone have a view on that? In that sense Victoria is unique. We do not have a similar one agency responsible for that in New South Wales; it is embedded in a number of agencies.

Dr CHANT: Can I just make a comment?

CHAIR: Yes.

Dr CHANT: I agree VicHealth is a unified vision but New South Wales also has its strengths in the sense that we do have a health promotion workforce. VicHealth uses the non-government sector and local councils, and both can be equally valid in implementing it. New South Wales is currently doing a lot of work with Education and partnering around healthy lifestyles and healthy physical activity right from the early childhood settings. So I think it is not only about who delivers it, what entity it is, but actually mapping and working together as a whole-of-government agency and learning from Victoria. If Victoria has programs—certainly after this I will be having a conversation with VicHealth about the evidence based programs they are doing, looking at how we can add it on and bolt it on to some existing programs that we are developing.

Ms WALKER: I think it is a mainstream as well as a specialising approach. From where I sit, you actually need a body that can resource and support and coordinate and work with the cross structures, probably in an add-on value way to police and government. We actually find it easier to work with cross sectors than our government colleagues do in terms of their jurisdictions. I believe that it should be a function which is probably tendered to an auspice organisation with a couple of people to actually coordinate resource support, is accountable I would suggest pretty clearly up to a Minister via the Office of Women's Policy and that there is an independent carriage of some description with a board. Every time that you see a slash in resource, nine times out of 10 it will be for promotion of prevention. I understand the need for intervention and treatment, so if you do not actually have political commitment to this end of the continuum and embedded in a recording system that

reflects that, it is one of those ones that will be always an add on. I should think we all need to pay mind to that when you are actually creating this approach. So I very much advocate for what you are describing in terms of the mainstreaming of it but also I think there is a specialisation to it.

Ms GANDER: I want to make the point around prevention is that it obviously—and we have seen this previously with national campaigns—increases service demands. I think we need to think about that in relation to what do we do and be prepared for that beforehand; otherwise I think we have an ethical responsibility for saying, "This is something that we've got this particular view on". Then we need to have services there for women and children to be able to come to.

CHAIR: Is there anything missing out of this section? Are there other recommendations people may have?

Ms LOUGHMAN: I have a question and a comment I suppose about whether we are missing some useful links to the national plan to reduce violence and perhaps a question or comment from Ms Walker about her thoughts on how we can best link into that and take advantage of that.

Ms WALKER: I think there is certainly a linkage and in terms of the States it largely comes from the data services that are integral to both the surveys that they are coordinating or in control of. So there are certainly linkages that are there. I think that it would mainly be the data services which will provide you with baseline monitoring and information over the period of time when it is imperative. I think it is also too early to tell around the actual implementation processes whether there will be synergy with the States. Maybe the Office of Women's Policy here would be the best place to make comment on that.

Ms FRAME: We are certainly looking into and speaking with the Commonwealth about what they are funding in the way of prevention programs under the national plan and we are meeting with them again in a few weeks in that regard. So we will be looking to leverage their work wherever possible.

Dr WANGMANN: We have some real difficulties with data collection in New South Wales. We cannot tell how many people are injuring a partner. We cannot tell the other relationship settings. So when you start to talk about prevention or we start to talk about any census, if we cannot measure it we need to put some funding into those sorts of collection things. So I am looking at recommendations 23 and 24. At the moment I would suggest that we cannot do those things. There needs to be a commitment to funding and there needs to be a commitment to embedding something in the data collection, as well as evaluation. I have noticed, in terms of Victoria, you can see that they do fine work with family violence, like they had some really clear indicators across a range of categories. It is a useful model to look at.

Ms MARCUS: I just want to go back a bit and pick up on a point that was made about the fact that a lot of other programs that are non domestic violence specific do deal with victims of domestic violence and do encounter people in that situation. I think that is absolutely true, but I think there is also a difference between those programs and other programs when those programs do not look at their clients through a domestic violence lens. For example, a drug and alcohol program looks at the person as an addict; they do not necessarily look at the person as a perpetrator or a victim of domestic violence. If those programs are going to be more effective in the way they are dealing with their clients, which obviously we would all like them to be, there needs to be a component of encouraging a crossover of perspectives so that people are aware of domestic violence and the dynamics of it. I am an alcohol and drug worker. You need to be an alcohol and drug and a domestic violence worker.

CHAIR: Last comments on this section?

Ms BOLAND: It is on this section and it is on one that we have not discussed so far. No. 22 recommends a specific Aboriginal family violence strategy. What I want to do here is just to reflect back on some conversations that we have had inside the steering committee of the framework on this topic. In particular, where we got to when we were talking about this was that it was very important that most Aboriginal people were serviced through mainstream services. So the absolute more important thing to do is to make sure our mainstream services work as well as they possibly can. We have talked already about the importance of cultural appropriateness. It is absolutely integral that we build the concept of cultural appropriateness into mainstream services. But if we want to improve the response to Aboriginal family violence more people are helped through mainstream services than they are through anything else. So let us get them right.

The other thing that we spent a bit of time talking about was remote communities. Often we perceive Aboriginal family violence as a remote or a regional issue rather than necessarily an urban one. There are many, many programs going in different remote and regional areas at the moment and in particular communities with lots of different aspects. We felt that there probably was not a lot of benefit in adding something that was explicitly called domestic violence because the way you responded to what was happening depended very much community by community, what were the strengths of the community, who were you working with there, how you could build on the things that were there, as well as what interventions were available and how we make those work. I suspect, and potentially Dr Chant could comment on this, that many of those communities are incredibly aware of domestic and family violence and that that gets built into an integrated response in some of those communities. So I am not sure that there is a lot of value in making that a priority, making a regional or remote Aboriginal community response a priority now. I think though that it is absolutely important, as I said, that there be culturally appropriate services and that mainstream services understand how to respond best to that.

Dr CHANT: I think it is valid that the majority of Aboriginal people in population bases do live in metropolitan areas and we have a significant Aboriginal population in New South Wales. I think that we do need to ensure that our mainstream services are dealing with Aboriginal people well but we do have a number of programs specifically in Health which I think I have gone into in my submission so I will not detail them. I think we have to be careful about adding on a new program rather than tweaking or basically getting some of the interagency work working better. I think there is significant room for better interagency coordination of services. Rather than having another program, I think we should look at the existing programs.

Ms MARTIN: I want to respond to that. The reason is that recommendation 22 is basically a recommendation made by my centre. I thank the Committee for putting up that recommendation. I am not quite sure whether Ms Boland and Dr Chant are disagreeing with the recommendation or not. What we are basically saying is not that we should have a new program; but that we create a unit staffed by Aboriginal specialists working across a broad range of backgrounds and skills—it is in the recommendation—both to work with governments across agencies to properly advise them—it could be with Health, it could be with Police or it could be with any number of different agencies and services—as well as working with Aboriginal communities to improve their capacity building.

As I say, I am not sure whether you are disagreeing with the recommendation or commenting about how services are provided to Aboriginal people. Certainly we acknowledge that Aboriginal people use a whole range of non-Aboriginal specific services, and so it should be. Equally there should be a number of Aboriginal-specific services as well considering the high incidence of domestic violence within Aboriginal communities across Australia. We are talking about New South Wales and that is certainly the case in New South Wales, as I am sure Dr Weatherburn can confirm.

Ms GANDER: I would like to support what has been said but also make a comment on remote services. I agree that a lot of Aboriginal people have their needs met through mainstream services but I think it goes back to what Gaby Marcus was saying before. Having been involved for seven years in a project in Orana Far West in very remote Aboriginal communities with programs that have been specific to domestic violence, I have seen the difference in the approaches and the knock-on effect that has had on mainstream services in that town. That is one aspect. But the services women are getting from the specialist services are not necessarily what they would be getting from a mainstream service that would be looking through that domestic violence lens.

Attitudinal changes have come from those services with even workers saying, "We thought before that domestic violence was something that women just had to put up with in our communities." I do not think we can underestimate the impact having specialist services in those locations has across services, including mainstream services. I think it is a really strong point to make. While I can agree with both sides, I think having a specialist approach and having people who have that domestic violence lens in Aboriginal communities is important. I have also worked for many years for the Aboriginal and Torres Strait Island Commission [ATSIC] in this particular area so I know the difference it makes in remote communities. I want to make that point quite strongly.

Ms GREEN: I also want to support Ms Martin's contention and this particular recommendation. In Liverpool where I am based Liverpool Women's Health Centre has had an Aboriginal-specific position for a very long time. While I agree that Aboriginal people may use mainstream services from time to time they also have a preference to want to use services where there are either Aboriginal workers or it is a service that they trust and know they will get a good service. When we conducted some consultations with Aboriginal women in

our community on what would make a difference in terms of working with young Aboriginal women, one of the key things they talked about was how important it was to have specialist Aboriginal workers. I know if I discussed that recommendation with Aboriginal women in our community in Liverpool they would be quite stoked that that kind of recommendation was even being looked at.

Dr CHANT: Can I make a clarification? None of my comments should have been construed to mean that I do not support a designated resource that is Aboriginal specific but there are a number of resources that sit within Health, and I suspect sit within other agencies, that have a focus on this. I know we have an Education Centre Against Violence [ECAV] team, I know we have an Aboriginal-specific team dealing with domestic violence. We have a number of Aboriginal-specific resources. I just think the first scope is how we can get them better connected and also how we can grow the workforce. That was my point more so than that we did not need it. We have existing networks and we might need to grow and strengthen those in some areas.

CHAIR: Thank you. We will now move on to recommendations 26 to 37 inclusive. Mr Murdoch, would you like to lead off on this seeing as they impact on your agency?

Mr MURDOCH: In terms of the police-specific recommendations we support all but 27 and 37 but we suggest 27 could potentially be rolled up into recommendation 28, and recommendation 32 might need rewording. Recommendation 27 essentially talks about monitoring compliance with the domestic violence code of practice. The only reason I do not support that is it is just too hard to do. We really cannot monitor compliance with that document aside from victims making complaints about lack of service and proper investigation or inadequate investigation. We are really monitoring complaints rather than compliance; it is just too difficult to do.

In relation to recommendation 28, I think we could roll recommendation 27 into 28 and really make it a quality assurance/compliance type recommendation. I have said during evidence to the Committee previously that our biggest issue is we have very robust policies and great training but unless people do what they need to do and apply the training and the policy it all falls apart. Our problem is not our procedures or our training; it is our compliance. Compliance and quality assurance are the issues for us so I think we could probably make recommendation a little more robust to capture the message you are trying to send in recommendation 27.

In recommendation 28, the second dot point relates to the allocations of sergeants specifically to domestic violence matters. Again, that is a workforce issue for us and the levels of domestic violence in a local area command will dictate the priority an individual local area command will give to it. Saying that we want a sergeant responsible for domestic violence in every local area command across the State might not be the best use of our people. With regard to rewording recommendation 32, again, having full-time domestic violence liaison officers in all local area commands is very much an aspirational recommendation. We would certainly support it in principle but the makeup of the individual local area command, the priority domestic violence has in that command, the workload and the volume dictates what could be done about that. To date we have left that to individual commanders. I am not saying that that is the best possible way to manage it. We support it in principle but we need to look at how we do it.

Recommendation 37 deals with the Victorian risk assessment and referral form. It will not fly in New South Wales. I think I have said that before. I take my hat off to VicPol if they can get their people to fill out that very lengthy and comprehensive document and get their people to use it—fantastic. In this environment, for my workforce our people will not do it. If they will not do, it degrades the integrity of the data and makes it essentially of little value, particularly when we are trying to collect a fair deal of information to inform research et cetera. Apart from that, we would support all the other recommendations that are police specific.

CHAIR: Any further comments?

Ms MARCUS: While saying that it is aspirational does take into account the reality of the situation, I think that we should be aiming to achieve the aspirational. And I would have thought that the provision of a Domestic Violence Liaison Officer [DVLO] would be a basic requirement that we should be implementing—not aspiring to—because if women do not get the appropriate response when they attempt to report what has occurred to them, they will not go back. The DVLO is the beginning of a response to that and it should be fundamental, not aspirational. I do appreciate the resource and workforce issues but it should be basic.

CHAIR: Any other comments?

The Hon. HELEN WESTWOOD: These recommendations really came about because, following the evidence that we received from you, Mr Murdoch, when we went out into communities, and particularly into the regional areas, we found that it is not happening in the way that you describe to us when you are here. We found places where a DVLO had not been employed in that position for many months, where yellow cards had sat in piles and not been distributed. As to the issue of DVLOs, we consistently heard from advocates and victims about the importance of having those officers and for them to have some status within the commands. The other thing that is very clear—certainly to me from the evidence we have received—is that the leadership of the command is absolutely pivotal to the way in which domestic violence is dealt with effectively within that command. They are the reasons why we have made those recommendations. I would like to hear from the other participants as well, particularly those who gave us this evidence, what they think about the response that we have had so far from the police.

Mr MURDOCH: Thank you for that, Deputy Chair, but I am not saying for one minute that we should not have DVLOs, in fact we should. We have 80 LACs across the State, and they are all different. They all have different priorities and they have a predetermined number of people and the commander needs to use those people to best effect. I am not suggesting for one minute that the DVLOs or the domestic violence function should be put aside, it needs to be carried out. That harks back to the comments I made about compliance. We have expectations, performance measures, policies and legislation which guides what people should be doing. But ensuring that quality assurance and ensuring they get that compliance is difficult, particularly in remote areas where you have the tyranny of distance with people spread over wide distances. I agree that nothing happens without leadership, whether it is solving the issue of domestic violence or anything else. The aspect of leadership is critical in ensuring that we hit our goals and reach our marks in terms of domestic violence. I am not trying to defend what is happening out there because clearly it is and I am aware of it. But it gets back to the commander making everyday business decisions based on the resources he or she has at his or her disposal.

CHAIR: Dr Wangmann?

Dr WANGMANN: I was going to talk about the Domestic Violence Pro-Active Support Service [DVPASS] so I do not know whether you want to finish this discussion first.

CHAIR: I will start on that as well. The proposed recommendation around the L17 was to replace the DVPASS or the yellow card, which the Committee found was used inconsistently. The purpose of that recommendation was to simplify it for the police, so that their initial response and incident report form could also then double up as a referral tool. That was the reason behind that recommendation: rather than making it harder for Police, we have attempted to capture the necessary elements into one document in order to make referral easier. The Committee heard that sometimes the yellow cards are filled in but there is quite a long delay between the DVLO getting those and making the referral to other agencies.

Mr MURDOCH: I take that on board and I am encouraged by that description. I suppose, as soon as I saw L17, my heart dropped but if that is the intended outcome, it is fantastic.

CHAIR: The L17 is a lengthy document but the Committee is attempting to find a way in which information that is gathered by the police at the incident can be shared with other agencies because that might be the first time that the victim and the perpetrator are coming into contact with the system. We have spoken about sharing of information and cross-agency support, so we are looking at ways in which that information can be captured and referred on.

Mr MURDOCH: If that is the intention, it is fantastic. We are supportive of finding ways to share information and of streamlining the process for everyone.

Ms BLACKLEY: Our comments came from our local area command and it is as Mr Murdoch is saying, the tyranny of distance can be a problem. Our DVLOs have a long distance to travel, often 300 to 400 kilometres. We would see them only once or twice a year. And some of these comments came from both the victims and the service providers, where they say that there is little understanding. And I think if it is the area commander who is making these decisions, then we need to be able to speak to someone at a higher level than that. We need to speak to the Ministers and have reference made to the importance of domestic violence in rural and remote areas.

CHAIR: I can say on behalf of the Committee, the DVLOs with whom we came into contact were amazing. The contact we had with them when we saw them on court days and as we gathered evidence,

particularly in Forbes, was positive. We also heard positive comments about the impact of the DVLOs in some of the case studies.

Ms LAZAROU: I just wanted to say that as we are delivering services at court, where we have very strong relationships with DVLOs we know that we have better outcomes for women. The early contact with DVPASS is also imperative, so that early referrals can be made. We value our relationship with the police. We would not be able to operate effectively if we did not have that close working relationship. We know at the courts where our services work well, they have very strong relationships and there is a great commitment regarding the issue of domestic violence by those local area commands .

Ms LOUGHMAN: In relation to recommendation 26, we thought it would be useful to include a reference to community feedback into the performance mechanisms. That would afford an opportunity to hear stories about how things are working in the field and provide some better support for complaints mechanisms.

Mr MURDOCH: I think that vehicle already exists and it is sitting here talking to you now. I would encourage feedback at any time. That is my role.

Dr WANGMANN: I want to talk about the domestic violence pass section. I am very much in support of the domestic violence pass projects but I have some concerns about the way in which it is written. First, we do not actually provide much funding to the domestic violence pass systems that exist and already they struggle to provide follow-up within the ideal timeframe that we have the victims' pass experience. I am not sure how the Victorian system manages the idea that they can follow-up every single incident that is reported to the police. Certainly the domestic violence passes that I have had contact with struggle to follow-up those that they already have consent to in terms of engagement. The Sutherland one that I have evaluated, one of the key advantages of that domestic violence pass is the ability to refer people that the police—I mentioned this in my evidence—have taken no action for.

It seems that if you are going to start follow-up in every matter then you are going to move away from those where the police have not taken action where you might actually be intervening a bit earlier for those where it has not yet got to the stage of an apprehended violence order. I would have some concern about that. The other thing, which is more a general comment, and may be something that the people do not necessarily agree with, I think we have to be careful about removing choice and consent at every single stage. We are trying to set up a process that is empowering for women. I think if you take away their choice to engage with certain processes, I do not know whether you end up having a positive engagement if you are forcing systems on each other. I am not talking particularly about the domestic violence pass but I just think we need to be careful about making everything mandatory and everything as one-size-fits-all.

CHAIR: Is anything missing from this section?

Mr MURDOCH: Just one comment on recommendation 34 which is in relation to domestic violence liaison officers. It would be fantastic to have them all as sergeants or possibly above, depending on workload, and paying them more for the fantastic work they do but again if we have a number of liaison officer positions across the police: we have licensing officers, crime prevention officers, education officers, domestic violence liaison officers, Aboriginal community liaison officers and a whole range of people. If we give a pay rise to one what is to say that their peer or colleague, doing just as important work, do not need recognition and extra pay? That is all I want to say. We just need caution there. They do fantastic work but it is more about, as I said initially, getting the right people in the right job.

Ms WALKER: I think without leadership from police and significant and integrated reforms it would be at best difficult. At some point in time priorities need to be set in resource-strapped times. For me the knock-on effect is avoidable by saying violence against women is a violation of human rights. It is against the laws. It is completely unacceptable and for the next 10 years we are actually going to make some inroads into this. We will actually resource and support this well. Without that it becomes another issue amongst many that you actually have to deal with. I know that you understand that leadership issue well but I think it mirrors that. I do not know who can pull some rabbits out of the hat to make it possible for priority setting in terms of that area. I think the police are key to this. It is not a matter of if, it is a matter of how.

(Short adjournment)

CHAIR: We will now deal with section 4: Apprehended domestic violence orders and possible recommendations No. 38 to 44. I am sure there will be some comments on this section. What is the NSW Police Force response?

Mr MURDOCH: We are supportive of just about all the recommendations in this section. In particular, we will have more discussion about recommendation No. 38. Recommendation No. 39 talks about the Victorian experience, and we are very supportive of police being able to issue provisional orders. Again, we would probably want to rework that recommendation to reflect the New South Wales context. It is currently built too much along Victorian lines, although we support it. Recommendation No. 40 relates to timeframes in terms of police issuing orders and how long they are in place. The legislation provides for 28 days and we advocate that being maintained. Again, the paper talks about the difficulty of getting matters listed and the problems they have encountered in Victoria. There is not much more I can say other than that we are supportive.

CHAIR: Do you have any comments about how recommendation No. 39 could be contextualised for New South Wales?

Mr MURDOCH: I do not have any problems with the dot points about being over 18, not cognitively impaired and so on. The Victorian system uses hardcopy documents and we work electronically with direct data entry. We would want to retain that. We also advocate in New South Wales that we have the power of detention for the purpose of making and service and that is not so much an issue in Victoria if there is an attendant criminal offence. If there is an attendant criminal offence in New South Wales arrest is an option and we can do the orders and so on back at the police station. However, where there is not an attendant criminal offence we will be advocating for the legislation to give us the power to detain for the purposes of making and service. I think that needs to be indicated in that recommendation and again I note within the papers that the Committee talks about safety mechanisms in terms of depriving people of their liberty potentially. We accept that, but under the Bail Act we do that now. A sergeant of police has the ability to take away someone's liberty under the Bail Act.

CHAIR: Is anyone in opposition to these recommendations? Would anyone like to speak against them?

Ms LOUGHMAN: I do not think we have enough understanding about how they are going to work in practice and I think I would like to see us have that conversation here. Our concerns I suppose include the rationale for doing this. If the rationale for doing it is that women will get immediate safety, then that is a very good thing, but it seems to me that there is still going to be the delay in service issue. The police already have the power to detain for the purposes of serving a provisional order and it seems as though there is still going to be the need to have that, so the benefits of having immediate protection do not seem to be there and I think, for us, the justice issues are not outweighed.

CHAIR: We might hear the response to that point.

Mr MURDOCH: This is all about improving outcomes for victims, all about immediate care and protection. It is not about—not about—making life easier for police; it is about better supporting the victim and getting immediate care and protection. The current legislation does give police the power to detain for service in certain circumstances. We want it all the time, again for the immediate care and protection of the victim. We would also argue that having the ability to remove the perpetrator from the home, if that is where the incident has occurred, gives time for the whole situation to de-escalate, gets the perpetrator out of the place and cools his heels at the police station for so long as it takes to make application for the order, do the paperwork and give it to him. He still gets his day in court. We are not suggesting for one minute that we usurp the role of courts—far from it. The only thing that we are suggesting is that we take the middle man out of play, that is the justice who authorises the orders at this particular point in time. Eighty per cent of the orders we make application for are outside court hours. Currently, with our online application process, our success rate for first-time applications is above 94 per cent, so you could argue that the after-hours justice adds very little to the process. It is all about the victim—all about that.

Ms LOUGHMAN: If the approval success rate with the justices is so high then I see that there are real benefits in maintaining that mechanism. The authorised justice introduces some accountability, which I think is important, and the evidence does not seem to be there to show that it is stopping the police unnecessarily in their work. Is it the case that the police officers attending the scene of the incident will still have to go back to the police station to get a sergeant to approve the safety notice—in which case I cannot see the benefits.

CHAIR: Do you wish to respond or take that as a comment?

Mr MURDOCH: I will take that as a comment. Clearly Janet Loughman and I need to sit down and have a conversation and probably now is not the time.

CHAIR: Judge Henson, could I ask for your view on these orders and the implication on the court system?

Mr HENSON: Philosophically, I am opposed to this yet again further intrusion into the civil liberties of members of the community, but the importance of the authorised justice is that it provides a measure of accountability rather than sit in the exercise of—and I do not use this in a pejorative sense—free will on the part of police officers. The police know that they have to provide a level of evidence up to a point to get a level of satisfaction to generate the order and there is a temptation in this for police officers to take the easy way out. I do not say that they will, but the temptation is there. There is a secondary consideration where it is my understanding that police officers who are subject to a domestic violence order, whether it be provisional or otherwise, cease to be frontline police officers and are removed from frontline duties. Again there is another level of temptation which the police force would have to manage in terms of the exercise of discretion not to issue an order where a person concerned is a serving member of the police force.

Mr MURDOCH: I am not saying that there are not some issues we need to work through. His Honour has picked up a very valid point. It is not one that we have not thought of and there are ways and means around that, but again I think we are getting into the detail of the concept and I think the recommendations recommend a concept and we can work through the detail at a later point in time without getting bogged down now.

Ms LUMSDEN: My point was made by Judge Henson but in addition to that, deprivation of liberty is a fairly serious step. It is done in terms of bail because a person has committed a criminal offence, which may or may not occur in these circumstances. I think rather than giving carte blanche to detention that perhaps we should look at the circumstances in which detention is allowed and try to determine whether there are any gaps and if there are gaps then plug them rather than just allowing a carte blanche to police to detain in these circumstances.

Mr MURDOCH: I am sorry but I take issue with that. We need some balance in this whole argument about domestic violence. There are the civil liberties of the perpetrator and the rights of the victim. We heard, quite rightly, from Ms Walker that it is a basic human right for a woman to live her life free from violence. Let us get the balance right, human rights and civil liberties. If someone has to spend an hour or so at a police station while we make application for an order to protect someone I think that is a fair compromise to make in my view.

CHAIR: In light of the issue that we spoke about earlier about—the definition and the narrowing of the definition—should police then have the powers for any violent incident to be able to issue these interim apprehended violence orders for domestic or personal situations?

Mr MURDOCH: I would not advocate for that. I think that domestic violence in that intimate partner setting is something separate and should be dealt with separately. Again I repeat, I am not suggesting for one minute that similar safeguards do not need to be built into the system to protect the vulnerable who I would advocate be excluded from the definition of a domestic relationship. But the intimate partner stuff for me is where we need to focus our attention.

CHAIR: What about recommendation No. 38? This was an issue that came up earlier when we were talking about the definition at the start? Does anyone have a view on that?

Ms MARTIN: I suppose all I can really do is to restate what I said before. This is a complex issue. In our submission, certainly in terms of the review of the Act, we made a recommendation that the Government consider looking at the Victorian definition of "family". Our view is that in some carer relationships and for some people living in residential facilities they are familial relationships, they are not simply just flatmates. Our view is that "is living or has lived in the same household" can go but our concern as a centre is that there are some people living in carer relationships or being cared for by someone or living in a long-term residential facility that are in effect in familial relationships and are therefore open to abuse. The dynamics of abuse can clearly come into play in those types of relationships. I think the Victorian definition is an interesting definition

to consider. I note there is someone here from Victoria who could comment a bit more about that, but we are reluctant to support this recommendation.

CHAIR: Mr Murdoch, by changing this definition would you see this particular group of people being subject to the interim orders that police may be able to issue in relation to these different settings?

Mr MURDOCH: The group of people referred to in recommendation No. 38, yes, I would support that. The apprehended personal violence orders are sought by all manner of people in all manner of circumstances and I do not want to get caught up in having to deal with everything. If we can be specific in terms of the people who need to particularly come to the attention of police and create for us a range of responsibilities, okay, but so long as it is not everyone that gets caught up in domestic violence.

Dr WANGMANN: I have a couple of points. I am in favour of greater definitional clarity. I guess in that I would like to see something that is around domestic relationship and something that is around close relationships. I would still see the police having an obligation to apply for orders in those circumstances. I would not see it as being anything particularly different. I guess one of the things I agree with—from what Janet and Rachel have both said—we do not know how many are intimate partners, we do not know how many carers apply for orders because we simply do not have the data.

One of the issues with it is that we simply do not know how many orders there are in terms of making a change. Are we really going to make a change that damages people? In terms of interim orders and provisional orders, it comes back to the context that the person is in. If it is a personal violence situation and it is serious stalking, for example, I would still expect the police to apply for that provisional order. It is not the definition that should define it, but the violence that is taking place that can happen in a personal violence situation. I think we need to be careful about saying the definition itself says whether action will take place taking out the violence. In terms of recommendation No. 39, I am not in favour of the police having power to issue their own orders. I do not think we have the basis to say that the current system is not working if 94 per cent of orders are already being granted. I would have concern about the level of evidence and complaint that the police put together if they do not have a judicial officer in terms of oversight or the complaint narrative in terms of the process going forward.

CHAIR: Ms Lumsden, do you wish to make a further comment?

Ms LUMSDEN: No, thank you.

CHAIR: Does anyone else have any other comments on this section, from recommendation No. 38 to recommendation No.44?

Mr THOMAS: Can I briefly say I suppose the flipside to the definitional issue in dealing with domestic violence is that we do have a range of services and programs available for offenders that often exclude people where the offence is a domestic violence offence. Under the current definition there is a range of people who get excluded from certain programs but I do not think that the intent to exclude them is real. It is important to consider that I think in any of these definitional issues. On the issue of police-issued orders, the Attorney has asked us to have a look at some of the provisions or options for looking at how that happens. My understanding is that we are the only jurisdiction that does not allow police to issue orders in this country. So I suppose maybe there are two discussions here. One issue is should police be able to issue orders? If they are—and that is a big if—how do they do it? Mark has raised some issues around whether there should be detention or not but that is an implementation issue I think. The question is should they or should they not? I think there are two separate things to consider.

CHAIR: Does anyone want to make any further comment on this section?

Dr WANGMANN: Can I just make one more point? The other thing is that I think we do a good job in access to orders at the moment. We have not actually done such a good job on action in relation to breaches. I think we need to balance out what end of the spectrum we are focusing on as well.

CHAIR: Just before we do move on I wanted to ask about proposed recommendation No. 42. Mr Henson, is that something you are able to comment on?

Mr HENSON: Yes, it is. I would support it.

CHAIR: Would you please put your microphone on.

Mr HENSON: Sorry. It gets to the ludicrous stage where somebody who is subject to a domestic or personal violence order and is also found guilty of a criminal offence appeals to the District Court, which has the power to deal with appeal, no power to deal with the revocation or confirmation of the other order. So I am totally in agreement that if one lot goes up then the associated civil proceedings go up with it to the District Court. I am not really sure that the Supreme Court would be entering into this arena but certainly the District Court does in its appellate role. They should be given the responsibility, not just the opportunity—there are two different outcomes in that—to deal with it at the same point in time.

Why I differentiate between responsibility and opportunity is because quite often where there are summary proceedings attached to indictable proceedings that go to the District Court, even though they have the power to deal with them a lot of judges send them back to the Local Court rather than deal with them themselves. Unless you make the District Court responsible for determining it to finality without that outcome you will simply create administrative difficulties and expectation difficulties and increase the workloads in both jurisdictions.

CHAIR: Anything further on this section? I want to confirm—I did say at the start that if you are happy you did not have to acknowledge it, but is everyone happy with possible recommendation 44, that we do not pursue the issue of GPS bracelets?

Ms BOLAND: We are accepting of the recommendation at the moment. We think it is probably still a good idea to just keep a watching brief in this area over time. In time there will be new developments that will be advantageous to us so with that caveat we are supportive of the recommendation.

CHAIR: I think that was acknowledged, and particularly the evidence was showing that technology, et cetera, at this point in time probably led us to that conclusion. I will move onto section 5, the legal system and the courts. I think it is only fair that we start with His Honour Judge Henson.

Mr HENSON: I think I will wait for the audience participation, rather than play my hand up front. The only thing I want to say from a historical basis is that point 5.9 on page 36, the DVICM model, is not historically accurately recorded. As you might know, historically the domestic violence court intervention model was trialled at Wagga Wagga and Campbelltown for a number of years. In 2009 a mirror practice direction was rolled out across New South Wales. So in effect since 2009 the DVICM model has been applied to every Local Court in New South Wales. Practice note 1, that is 1 of 2012, is simply a consolidation of both practice directions. It is no longer necessary to differentiate between Campbelltown and Wagga Wagga.

CHAIR: Thank you. His Honour is holding on this round and he will call later. Anyone else like to make some comments?

Mr THOMAS: I think the asset management people from my department would think me remiss if I did not mention that 5.28 might be somewhat difficult to do in some areas but I think we agree with the principle that there should be safe places in each courthouse. There are some practical challenges in some of our courts. They are very old, some of them are very small but certainly it should be included.

CHAIR: The Committee and the commentary around that recommendation acknowledges that. We understand the practical implications. Again, though, on our trip to Goulburn court, a very historical and old court, albeit a large one, it has a room set aside and it seems to be working quite well in that situation. I acknowledge your response to that. Are there any other comments?

Mr THOMAS: In terms of possible recommendation 54, that there be specialist domestic violence court judges, I note that the recommendation suggests that the department look at the feasibility of that, which I am sure we would be happy to do. I do not know whether the likelihood of that occurring is strong.

CHAIR: Again, it is acknowledged by the Committee that we would love to have a perfect world and be able to have finite resources but that is the acknowledgement there as well.

Mr THOMAS: I just might finally say in relation to recommendation 58, domestic abuse programs, we need to stress that those programs be properly and independently evaluated and that we only have those ones that have some strong evidence base behind them.

Ms COTTERELL-JONES: The thing that is missing from this part is the role of the prosecutor. The prosecutor, as you know, in any of the busy courts on AVO day, it is very rushed. That is an issue that often feeds out into victims not understanding what is going on and not getting necessarily what they need out of the process. That is a worry for me. That is a resource issue, but that prosecutor's role is crucial in being able to present to the court what has been going on in this particular matter. So I just make that point.

Ms LUMSDEN: In relation to possible recommendation 51, it talks about minimum standards in the New South Wales Local Court. Of course, Legal Aid New South Wales in particular would agree with those recommendations in principle. It states that "every local court is serviced by at least one support worker based upon the model currently provided by the Women's Domestic Violence Court Advocacy Service". I was speaking with Judge Henson earlier and there are 158 local courts in New South Wales. Not all of them sit—some of them only sit once every month or once every two months. I question the feasibility of being able to provide that sort of service at all local courts throughout New South Wales. We provide WDVCAS service at 108 local courts across New South Wales and we have the domestic violence practitioner scheme at 32 of those local courts. Clearly, being able to provide WDVCAS services throughout local courts is a resource issue. I would just like to express my reservations in that regard in relation to that recommendation. On behalf of—

CHAIR: Can I just clarify whether that reservation is because it is not necessary or because it would not be practical to provide it?

Ms LUMSDEN: In many cases it would not be necessary. I also refer back to possible recommendation 47, which talks about ensuring that every Local Court in New South Wales implements a dedicated domestic violence list day each week or fortnight as appropriate. One reason why there is not a dedicated domestic violence list day is because it is just not necessary in all the local courts across New South Wales.

Mr HENSON: Would you like me to respond to that?

CHAIR: Sure.

Mr HENSON: The reason it is not necessary, even though we have dedicated list days for the return of summons matters—and these are summons established matters—is that there are other matters to be dealt with. If we simply say this day is dedicated wholly and solely to domestic violence then the court would be over by about half past nine. A lot of the courts we attend in New South Wales we do so for social reasons. They really do not have sufficient workload to justify remaining open but the Government wants them to remain open. Every court in New South Wales has a dedicated list day, and within that list day domestic and personal violence complaints will be listed.

CHAIR: Are they listed together though? I acknowledge that the recommendation does have the term "day", but part of the evidence that led up to this recommendation was to ensure that it enabled the WDVCAS workers and the DVLOs to be there and also to ensure that particularly women and children are not waiting around all day, that the domestic violence list matters all be listed together and if possible earlier in the day to allow that to occur. Is that achievable to allow it to group them?

Mr HENSON: Yes, it is achievable. That is the blunt answer factually, but it may come at a cost to government. If you have a list which says that from 9.30 until 12.30 domestic violence matters are to be dealt with at Tumbarumba court and there are no matters listed between 9.30 and 12.30 because we have had an outbreak of hospitality within that particular region, then the court is simply not doing anything.

CHAIR: So it cannot split the list if there are no matters to move on?

Mr HENSON: We have tried staggered listing in local courts over the years and it simply does not work. It leads to long periods of down time and inefficiencies.

CHAIR: But a flip side of that though is that if it is not dedicated could domestic violence matters be then spread throughout a day if there are not dedicated lists?

Mr HENSON: That may well be the case, depending on what went on in court. Not everybody arrives at 9.30. You would understand that. The magistrates do their best, particularly in court areas, and I think you are really talking about country areas.

CHAIR: Absolutely. Again the commentary leading up to this was in order to be able to ensure that services—particularly we have heard the example of a DVLO travelling 400 kilometres throughout an area command to be able to dedicate themselves that they know they will be at a particular court on a particular day at a particular time to be able to service the people they need to see. If that was then programmed throughout that region or locality they could dedicate that time to the right areas. That was the intent. Is there any other way that that can be achieved?

Mr HENSON: I would be surprised if that accommodation was not being made by the local magistrate. A domestic violence liaison officer [DVLO] is a police officer, not a magistrate, and normally there is a reasonable level of communication between the police prosecutor and the magistrate in terms of the availability of resources. Whilst I cannot state this in an empirical sense, I would be amazed if magistrates did not deal with the domestic and personal violence matters en bloc. I can only talk of my experience; that is what I do. I would be surprised if other magistrates were not doing the same thing because they do understand the issues surrounding domestic violence.

CHAIR: So, it is impractical to recommend that there be a dedicated list but it is feasible, and encouraged, to group them together.

Mr HENSON: It is reasonable. It will not always work effectively for reasons to do with attendance at court and the like. For instance, there were problems with magistrates insisting on the attendance of the person who needed protection at the first return date. At the request of the police and a women's domestic advocacy group I wrote to every magistrate personally and individually to say that women have other commitments, domestic or otherwise. They have to take children to school or pick them up from school and it is unreasonable to expect the court to take a pedantic approach and dismiss complaints because they are not there on the first available opportunity. That solved that problem. It is not one-size-fits-all in terms of court management. Courts have to be flexible to meet their workloads. There is a rise and fall in the number of matters that come before the court, depending upon the activity of police and the number of complaints being filed seeking orders.

Ms MARCUS: In terms of the provision of court advocacy services, while I understand it is really difficult in some of the smaller courts that sit less frequently, in some ways those could be the most vulnerable clients because they are possibly in a location where there are very few other services. Especially in rural and remote areas they might have had access to very little else by way of support. I would like to urge those agencies to look at alternative ways of providing them with support if, for example, they cannot provide someone on the ground. They could look at a different model such as potentially having a telephone advocate. Other models have been used in other places that I think might be worth investigating to ensure that those women are getting some level of support and input to assist them in going towards their court date. Otherwise they are basically left with nobody.

Mr THOMAS: It is a challenge providing services to all of those remote courts. It is an aspirational recommendation but I think it is an aspiration we should be aiming to achieve. It is important to note that the recommendation says "one support worker based on a model like WDVCS", but it does not necessarily have to be that. There is a range of other service options that we might think about. Causing us to think more flexibly about how we can meet some of those challenges is an important thing to do.

Ms LAZAROU: Looking at other options in relation to providing an advocate at those more remote courts is a really good idea. We have found by experience that if you can engage with services in those smaller towns there might be an opportunity to provide a brokerage-style service that might be based on a WDVCS model of service provision and they could oversee the person. We know there are better results in those towns if those local workers who are already connected and are known in the communities provide those services. It would be a cost-effective option to do that in terms of travel. We know when we provide outreach services and people are travelling long distances and they are blowing in and blowing out, so to speak, that the people on the ground who require that service do not take it up as well. If there was an opportunity to broker with a local service that would be quite effective in that respect. I reiterate the comments made by His Honour. Where those working relationships in Local Courts are good between police, the WDVCS and local court personnel, including the magistrate, decisions can be made that are effective in running a list.

CHAIR: Judge Henson, I would like your input on possible recommendation 53 relating to sentencing options.

Mr HENSON: This seems to tailor into the referral end of the Court Referral of Eligible Defendants into Treatment [CREDIT] program, which I indicated in my evidence before the Committee is in my view one of the most exciting—not a word you would apply to the criminal jurisdiction—sentencing outcomes in recent times because of its proven results. A lot of boutique sentencing options are developed by people in policy positions which turn out on evaluation to make no impact whatsoever, or at least to make a lesser impact than desired. But CREDIT seems to be one out of the box, as is the Magistrate Early Referral into Treatment [MERIT] program. I agree that increasing the opportunity for the court to explore alternatives to imprisonment is a laudable proposition.

One of the problems, however, in increasing the number of sentencing options is that it impacts upon those who are responsible for their administration—Probation and Parole, for instance. We know that a lot of people we send off to participate in anger management programs or alcohol rehabilitation programs and the like get no participation whatsoever because Probation and Parole and the agencies that support those rehabilitation programs are simply overwhelmed and there is not accountability, at least as I understand it, within Probation and Parole to assess whether people are participating or not, except by those who are more dedicated in the field than others. Provided there is a measure of accountability of participation and a measure by Dr Weatherburn of their success, I would totally support it.

CHAIR: What about the Attorney General's department?

Mr THOMAS: We also support it. There are a number of practical challenges in implementing these types of programs as His Honour has mentioned—access is one, particularly outside Sydney, but also demand in places like Sydney. Certainly we support having a proper examination of alternative sentencing options and the broad suite of options available to treat and support offenders.

Mr HENSON: One of the long-term problems in our criminal justice system in New South Wales—and comments should be confined to that perspective—is availability of these options. The Newcastle-Sydney-Wollongong mentality has inhibited the capacity of the courts, particularly the Local Court, for many a year. Some of these options are simply not available in country towns and in smaller towns because of the cost of importing them into those particular environments. That is disappointing and it frustrates magistrates because it in effect creates a gap where you place people on bond after bond to the point where you reach nothing between bond and gaol, and off they go, whereas someone in Sydney, Newcastle or Wollongong and some of the larger country towns has access to programs that might actually affect rehabilitation. The economic cost of imprisonment, which is a moot point at the moment for good reason, is impacted upon by the lack of viable alternatives in country New South Wales.

CHAIR: Does anyone have any further comments on this section?

The Hon. HELEN WESTWOOD: I would like to ask a question although we have not referred to the matter in the paper. One of the things that struck me when we were doing our inquiry, particularly in regional areas when we were looking at some of these alternatives to sentencing programs was who would provide them. I know the Department of Health has a policy of not providing service to perpetrators—that is what we were told. I can see the look on Dr Chant's face. We were given that evidence by someone in Health. I would like to hear people's view about that and whether it is policy—we were certainly told in one of our consultations that they did not provide counselling or programs to perpetrators.

Dr CHANT: The issue is we need evidence-based programs that work and then to look at which agencies have the skill base to most appropriately deliver those programs. I am not responsible for Drug and Alcohol but I know peripherally of the MERIT program and I believe the Mental Health and Drug and Alcohol Office is supportive of the MERIT program and develop that. We work with Justice Health in supporting some programs in that area as well. I understand that there is some philosophical tension about when we have a perpetrator and a person against whom violence has been perpetrated. However, philosophically, I think Health is here to assist in the provision of evidence-based services provided we are funded for them, given the other constraints on a health system which is struggling under the demand.

Ms GANDER: I wonder whether this recommendation is a little premature, given the current system where we struggle around responses to breaches as it is and where we have not got any evidence of perpetrator programs that work. We need clear standards about what we are expecting in perpetrator programs. We know there is good evidence about programs that keep women safer when perpetrators attend them and I think that, at a minimum, we would want to aim for something like that. However, I wonder at this point whether this needs to be a priority, given that we are struggling. I think we are doing fine in apprehended violence orders being granted, but across the State I am sure you would have heard of the problems that women have with responses to breaches and those breaches being taken seriously by the courts. I think an alternative sentencing option at this point might be premature.

CHAIR: Are there any other comments on this section?

Ms GANDER: I wanted to make another point in relation to Family Law. I am not sure if this is the right area but I could not see where else to fit it. I was disappointed in the consultation at that level. While there were recommendations across the different jurisdictions in relation to State courts and the Family Law Court, I think that it is a huge area for women. Although we have had recent changes to the Family Law Act that you would say does improve in its definition in a range of other areas, I still think that women—particularly women with children—get to a point where it is inevitable that most of them will end up in the Family Law Court. The system needs to be looked at in terms of how it supports women and children who have gone through violence to represent themselves and have proper support in going through the Family Law system.

At the moment a woman may have left the family home because Community Services has told her to leave or her children will be removed. The system creates a situation where, two years down the track, the Family Law Court may order that woman to have contact with the perpetrator of violence. This is a common occurrence in our system. Unless we include the needs of women when they enter the Family Law Court and the evidence that needs to be gathered along the way and the main services role in that, then we are going to miss a big opportunity to assist women and their children in the journey away from domestic violence

CHAIR: Does that go back to the earlier discussion, the point raised by Ms Crozier about the suite of needs that is required for the victims and their family and the point Ms Walker made about thinking ten years down the track? Should we include their interaction with the Family Law issues as part of that ongoing suite of needs?

Ms GANDER: Yes.

Ms COTTERELL-JONES: I see a lot of Family Law matters and it is important that if a person just gets an apprehended violence order, where there has also been physical violence, the Family Court has a descending order of how important that apprehended violence order is and unless it has been contested, the court tends to not view it as being good evidence of domestic violence. I want to make sure, with the changes, that we are thinking about how we can make sure that the evidence that we collect as service providers is what the Family Court is going to need in order to validate that person's experience; and not be minimised by us, somewhat tokenistically, looking at the issue.

The Hon. HELEN WESTWOOD: Ms Walker, can I ask whether you found in Victoria since you brought in this approach, that we have been much recommending here in New South Wales, whether that Family Court, Local Court and District Court issue continues to come up?

Ms WALKER: I have not quite enough to be able to respond now.

Ms MARCUS: I can make a partial response to that. I think it is continuing to be an issue and that is why they have established the specialist courts in Heidelberg and I cannot remember where the other one is, where the Family Law matters are dealt with by the same court at the same time. That problem is a national problem because of the interrelationship between State law and Federal law. That is not a comprehensive answer but I do not think Victoria has fixed it. Jane can probably give a better answer to this. There are clashes between the State and Federal law and there are some processes in place at the moment to fix that but it is a long way from being fixed.

Dr WANGMANN: I cannot add anything except to refer to the Australian Law Reform Commission and the New South Wales Law Reform Commission's report. This is what they grappled with is the intersection

between the different jurisdictional levels. The fact is that we exist in a federation and we have to work out a level of integration that works across those levels. It is going to be an ongoing, long exercise.

Ms CROZIER: I am not sure how much information was given so I am sorry if I repeat something that you have already heard in relation to recommendation 53. Two or three years ago we worked across the board to say that perpetrator support groups and services, not one of the services that have been offered, where there were statistics, was successful. So it was setting women and children up to feel there might be a sense of safety but also setting men up to feel that they might achieve something and with such small measures of effectiveness. For a while we have been saying, stop funding the same programs and get evidence-based programs. You come up with some frameworks so the frameworks have been developed which we are really pleased to see.

We are also saying, why are we not trialling and doing a line of evidence to create services that might work for perpetrators? Be a bit more innovative. We have not had any feedback yet about those programs or their success rates or how many are being trialled so there is not the cycle of where it is all up to. We think these services are needed but it is difficult to support a recommendation when we know that we have not had feedback about any programs that have been effective and suitable for the people using them. We would encourage the Committee to consider making a recommendation to keep pushing for a trial and evaluation of services so that we come up with something that does work.

CHAIR: Judge Henson, I am going to leave it to you if you would like to make final comments on this section.

Mr HENSON: I do not agree with some of the recommendations. Some of them we already do, for instance, audio visual use is not widespread but it is used regularly within the Local Court. It is on a request basis, the use of audio visual link facilities or closed circuit television for victims to give evidence. I do not see there is real problem with that—at least nobody has brought it to my attention. We recently introduced into the Local Courts iPads for every magistrate. They already have audiovisual cameras. We believe with the appropriate support from the Attorney General's Department and other agencies we can turn every court room in New South Wales potentially into a domestic violence court sitting every second month or whatever is required. It will require reasonable but not a significant amount of contribution by the Attorney General to make it.

So far there are encouraging signs of life in the Attorney General's Department. They might understand and be willing to apply funds to make it a reality and that would be groundbreaking. The reason why we are going down this path is the police prosecuting service is also in the process of being issued with iPads as well so it will then reduce electronic evidence in a compatible form with every iPad in every Court House in New South Wales. It will overcome a whole host of problems. It will make a difference. It will be a revolution and certainly evolutionary in terms of the capacity of victims to give evidence at courts which currently do not have closed circuit television. Outside that particular aspect I think the other recommendations are able to be accommodated within the Local Court, even though I do not support some of them.

CHAIR: Do you want to specify which ones?

Mr HENSON: Running an education program to educate magistrates to explain orders to people, really? Magistrates tell people they are bound by the conditions of the order. Every person who leaves a court is given a copy of their order. I do not think it is a universal truth but we believe that they can read and write. If not, they can get somebody to read it to them. Quite often you will find the explanation "I didn't understand the terms of the order" is some sort of a rationalisation for breaching it. Unless you have got some sort of information that I am not aware of that establishes that is real problem, I do think running an education program to tell magistrates what the legislation requires them to do is worthwhile.

CHAIR: I refer to recommendations 59 to 61.

Ms BOLAND: I want to start with this one by getting a clear separation of the difference between the need for emergency accommodation and the need for support. People in the homeless system sometimes need both. Sometimes they just need emergency accommodation, sometimes they just need support and do not actually need the accommodation that goes along with that. Programs like Staying Home Leaving Violence are geared much more towards that. I know there is a positive recommendation about that. When we are looking at this we need to look at the homeless system in New South Wales as it is at the moment. It would be fair to say that it is still a fragmented system. Housing NSW has been doing some work to examine how to get better

joining up amongst professionals amongst the services and other aspects of the system so that we end up with something more coherent.

The intention of that is to try to get better access to services. We think at the moment that one of the reasons that people are not getting access to it is because of the way it is constructed, not necessarily because there is not enough accommodation. There may well be not enough emergency accommodation as well, but access is hard and it would be good to have a single access system. One of the challenges in that as well is how to construct the right service mix; how to get the right mix between accommodation and services. At the moment I know that there are some women's refuges that do a brilliant job, ingeniously using money for - they are probably funded to do emergency accommodation - other outcomes, and offer better outcomes than they would be if they were doing it that way. From a funder's perspective I think it is time for the funder to actually catch up to that and to change some of that funding mix, so that is being examined by Housing NSW as well at the moment.

We think that by getting a more joined up system we are going to get more efficiency in the system, and that hopefully means that more people will be served, and hopefully will be moved faster to where they need to be so that they are not staying in emergency accommodation, which is not really a good outcome for anybody. There is a recommendation in there about temporary accommodation and temporary accommodation being administered by specialist homelessness services. I think it is fair to say that if we had good, robust, joined up specialist homelessness system and it all worked together then temporary accommodation which is just basically short-term accommodation in motels for people who do not have support needs, it might be logically administered there, particularly if you had a single access system. But we do not have those in place at the moment. I think those things need to go in place so that we can then start looking at where is the right place to administer temporary accommodation.

The issue of data was raised in here. It is just worth putting on the record that there was a new specialist homeless service data collection implemented from 1 July 2011, last year. We are just coming up to the end of the first year and hopefully that will give us significantly approved data in this area. In particular, it will give us better data about children. I know that you have pulled up here considering the particular needs of children because children are recorded separately in that data collection. We should shortly have much better information. On the issue of targets and whether we should have targets, we need to make sure we remember that the overall aim is to reduce demand. I appreciate that the report says that this should see a temporary increase in demand but what we really want, over time, is to reduce demand for domestic violence services because domestic violence is not happening. We talked earlier about primary prevention. We need to become effective in primary prevention to try to see if over time, things reduce even if there will be a short-term increase.

I think here we want to try to make sure that we are tracking a long-term levels of demand and making sure that we are not stopping people from going to specialist homeless services when they need it and push it down in that way, but we do want to see fewer and fewer people needing to be serviced because programs like Staying Home Leaving Violence are effective and because other issues are kicking in and we are not seeing as much violence. The final recommendation 59 about consultation with the women's refuge would be better. Of course, absolutely this work should be done in conjunction with the women's refuge movement and other specialist homelessness services as well. I might finish on the other two as well. Recommendation 60, we support. We would note that Staying Home Leaving Violence is actually a Community Services program, rather than a Housing NSW program. On the issue of a Start Safely subsidy, Housing NSW is just completing a review on that issue and has listened very sympathetically to the women's refuge movement which raised that issue. The 12 months that was thought to be enough to get somebody back on their feet might not be enough.

Ms GANDER: In relation to overlays, I think the data probably has shown a turn away rate for about 12 years now without any further investigative services. While I accept that it is really important that services keep looking at the most effective ways that work, and that there are women who do not require accommodation, if women get earlier help and there is possibility that they can using the Staying Home Leaving Violence approach then these are really important options to explore. I am just not convinced that we can state at this particular point that we do not have an issue for crisis accommodation or the turning away of one in two women, and one in two children. I think that there are some services that are doing exceptional work as in what Ms Boland stated, and I think there are some services that could have some help to look at more effective models of working.

I think it is important that we look at really getting the right services for the needs that they have, but I also think it is, to me, we need to remember that the majority of women that come to a women's refuge do not have independent income, around 80 odd-per cent do not have alternatives to go somewhere and they are actually very difficult to track in the system unless they come back into the system once they have been turned away. Then we hear the stories of what has happened to them beforehand. If they have returned, they have often returned to escalated violence, they may have stayed in their car for a couple of weeks with their kids or couch surfed. They have not been saved. We need to know that that is not happening for women and that it is acceptable to say that we do not need more crisis accommodation. I do not think we know that. A little further on we might. We meet with the domestic violence line once a month. They report escalating issues with getting women into refuges. We do not have a method for joining up that data with turn-away figures. It is important we look at that.

Everybody supports Staying Home, Leaving Violence. However, we must also realise that it is not always an option for every woman. While everyone supports the expansion of the program, its resourcing is also an issue. It is roughly \$150,000 a program. I know there is some talk about increasing that amount. It employs approximately two part-time workers and talks about providing a level of intensive support. I know that a number of programs have had to close their books because they cannot take on any more women and children. To keep rolling it out under the current resourcing model with a set amount of \$150 per service is problematic and it needs to be reviewed.

CHAIR: Does anyone have any further comments? Before we bring this together I point out that the final report will probably contain more information than is in this draft report. It will address trends in domestic violence, causes of domestic violence, consideration of rural and regional communities—which I know we touched on today—counselling, special interest groups, children as perpetrators and applications made by parents and the operation of the Children's Court. I also note the issue of domestic violence screening including accident and emergency departments in hospitals. Dr Chant, can you update us on any issues within the health sector? We provided some information to you.

Dr CHANT: In terms of accident and emergency screening, we are happy to take up the issue with our accident and emergency colleagues through the Agency for Clinical Innovation to establish the issues and barriers. We need to get feedback from those clinical groups and work through any issues. There are some particular challenges for us in emergency departments given that the perpetrators may accompany the victim. There are also issues of privacy. Having said that, clinicians have a role in gleaning a clinical history to determine any incompatibility with the purported mechanism of the injury. That is one of the bases for child protection issues and reporting child injuries. Even though there is no formal screening process in our accident and emergency departments, in treating women clinicians should be alert to signs, histories and notes consistent with unexplained injury. I am happy to get back in terms of the thinking of the emergency department clinicians and nurses in regard to this issue.

Ms WALKER: I encourage some consideration of obstetric and gynaecological screening. More often than not the presentation of violence occurs in those settings. Royal Women's Hospital in Melbourne has done a lot of work in that arena, as I am sure has New South Wales.

Dr CHANT: We have universal screening in the anti-natal setting.

Ms WALKER: In obstetrics and gynaecology?

Dr CHANT: Yes. The question is repeated at intervals.

Ms WALKER: Across what setting?

Dr CHANT: Across all our anti-natal services; it is a universal program. They were the two questions. The question the Committee asked is whether we should extend it. We also have it in mental health and other high-risk areas.

Ms COTTERELL-JONES: I would like to remind the police and health that if they ask the question of a person who is scared in front of the perpetrator she is not going to disclose. As recently as last week I had three women say that was the situation. It is important to remember that. If the perpetrator sticks to her like glue, that is probably an indicator. I do not know the answer.

CHAIR: Dr Chant, do you have the timeframe for the review of the domestic violence policy and specifically the work on the counselling services?

Dr CHANT: I know we have concluded the review of the gaps in the counselling services. I think we are on to the review of the policy and the directive consequence of the review of the counselling, which identified some gaps.

CHAIR: What is the timeframe?

Dr CHANT: I think that will be progressed as a priority in the six months to the end of the year.

CHAIR: Have we missed anything? Does anyone have any further recommendations or suggestions? Have we covered all the areas?

Ms LOUGHMAN: Has the Committee turned its mind to the question of compensation? I know a review is underway of victim's compensation in New South Wales. We are concerned about compensation for women victims of domestic violence. We see that as a crucial part of a comprehensive system.

CHAIR: The Committee has not looked at that issue. If you would like the Committee to look at any information, I encourage you to put it in a submission.

Mr THOMAS: I am in charge of that review. If Ms Loughman wants further information I am happy to provide it.

CHAIR: This is what happens when we get all the key stakeholders together. On behalf of the Committee, I once again thank everyone for coming this morning and also for the manner and spirit in which this roundtable discussion has been conducted. This is new to us and some reservations were expressed about it initially. As I said in my opening statement, this issue is too big and the risk of getting it wrong outweighs the risk of getting everybody together to hear their views. Thank you for your participation and responses. I reiterate that document that you were given has a watermark stating "Not for wider circulation". Thank you for respecting the Committee's wish to restrict its circulation. We know that you need to consult within your agency or organisation, but I again remind everyone that the Committee's recommendations and commentary may change as a result of further information. The document has not been marked as confidential, but I ask you to respect the fact that it is not the final report.

Ms LOUGHMAN: Is there a timeframe for providing follow-up information?

CHAIR: Yes. The Committee still has a way to go, but we are aiming to table the report in August. If anyone has any further information they wish to present, I ask that you keep that timeframe in mind. Thank you very much for your participation.

(The witnesses withdrew)

(The Committee adjourned at 12.28 p.m.)