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REPORT OF PROCEEDINGS BEFORE

SELECT COMMITTEE ON THE INCREASE IN PRISONER POPULATION

At Sydney on Tuesday 28 March 2000

The Committee met at 10.00 a.m.

PRESENT

The Hon. J. F. Ryan (Chair)

The Hon. Jan Burnswoods
The Hon. Dr A. Chesterfield-Evans
The Hon. Jennifer Gardiner
The Hon. P. T. Primrose
Ms Lee Rhiannon

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CATRIONA ANN McCOMISH, Assistant Commissioner, Department of Corrective Services, GPO Box 31, Sydney, affirmed and examined:

CHAIR: Ms McComish, in what capacity are you appearing before the Committee?

Ms McCOMISH: As Assistant Commissioner for Corrective Services.

CHAIR: Could you briefly outline your qualifications and experience as those matters are relevant to this inquiry?

Ms McCOMISH: I have been in the current position of Assistant Commissioner for just over two years, since the position was established. Prior to that I was Acting Assistant Commissioner of Personnel and Education for nine months. Prior to that I worked with Corrective Services as Director of Psychological Programs for four years. My other experience that I think is relevant to the terms of this inquiry is that for 10 years I was involved in the delivery and management of health services, particularly mental health services , women's health services, sexual assault services, and as such I acted as a consultant to Corrective Services in Western Australia.

CHAIR: So that health experience was out of New South Wales?

Ms McCOMISH: Yes, in Western Australia.

CHAIR: Did you receive a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act 1901?

Ms McCOMISH: I did.

CHAIR: A you conversant with the terms of reference of this inquiry?

Ms McCOMISH: I am.

CHAIR: If at any stage during your evidence you consider that, in the public interest, certain evidence or documents you may wish to present should be heard or seen only by the Committee, the Committee usually will accede to your request and resolve into private session. I should warn you, however, that Parliament has the power to override that decision at any time and make your evidence public. I thank you for providing answers to the questions on notice. I imagine that this morning you will, for the purpose of clarification, want to make some comments to the Committee first before we go through the answers that you have given on notice.

Ms McCOMISH: I thought it best, given that there were 28 questions nominated by the Committee, to group those questions together in an order that makes some kind of sense. I think that will cover the major concerns of this Committee that are relevant to the terms of reference of the inquiry. I would like to proceed through those. In responding to any particular area that the Committee wishes to clarify with me, that may be the best way to go, given the amount of time available. I do have overheads to show to members of the Committee. Those are to do with the new facility. That probably will go some way towards addressing some of the areas that I know the Committee to be concerned with.

A major area that appears to have been of concern to the Committee and to the many people who have given evidence to the Committee is the whole of the process of planning of a new facility for women. There were six questions that related to this issue. In the papers that I have given to the Committee I have also supplied a copy of the dot points that were given to me. I have numbered them, which, really, is just to make it easier for the members of the Committee and for me to address the areas.

One thing about planning for something as major as a new facility in Corrective Services is that the planning goes on over a lengthy period of time. The process could be said to have started over a decade ago, and there has been ongoing concern. That was noted in the report of the women's task force in the 1980s—about the facilities that are provided for women in prison and about how those facilities constrain the programs and services that can be provided for women who are incarcerated.

There have been numerous discussions, reports and opinions put forward over more than a decade about whether or not it is a good idea to provide a purpose-built facility for women who are in prison. In particular, I have noted some major points regarding the consultation process and the discussion and planning that have occurred before the decision was made to plan a 200-bed facility at South Windsor and extra beds at other centres for women.

The 1994 women's action plan identified the need for more varied placement options. That is a very clear need. One of the major problems with the management of Mulawa has been that the population consists of a whole range of women from different backgrounds who come into prison with an extraordinary range of needs and at different stages of their sentences. It has been clear that that has caused a lot of problems both for the women themselves and for the management of those women. At the time of the women's action plan in 1994 the population projection for the development of a transitional centre, and of Emu Plains as a centre for women, was that we would be able to hold Mulawa at about 120 to 150 beds. That has not been possible. In August 1998, a forum was held which included an enormous range of representation from other government agencies as well as from the department itself, and from numerous non-government agencies and community stakeholders. The forum was really to look at what had been achieved in terms of services and facilities for women in prison and where we needed to go, taking into account the increase in population which was already apparent at that time.

Following on from that forum and with the input from various groups and individuals who participated, obviously there were executive planning sessions within the department that was part of the usual budget process and business planning process, but the increase in the inmates population was, nevertheless, a major focus for the department. Up until that time, we had been regarding the increase as perhaps an exception and as something that may well dip, which it often does at around the middle of the year. That had not occurred, either for men or for women, so it was clear that the department would have to look at the facilities that we had available for men and for women. The issue for the women's population was that it was increasing at a faster rate. It was showing no downturn and Mulawa was well over capacity. We also anticipated that even with the new buildings at Emu Plains we would be well over capacity in the women's system by half way through 2000 and, with the projections that we had, that the increased rate would continue at least over the next three years.

A proposal to provide 300 new beds—not 300 additional beds, but 300 new beds—for the women's correctional system was subsequently endorsed by the Minister as part of the 1999-

2000 forward capital works plan. That plan then went to Treasury. In February there was a statewide capital works program value management study which examined the planning of facilities around the State and how that would reflect both the changed needs of the population and the increase in the population. That value management study confirmed that, indeed, the option of providing a new facility for women would meet all of those needs: that is, it would provide an increased range of options for the placement of women; it would provide a facility which enabled modern correctional management and the best opportunity to help and provide services to women who are in prison; and it would also meet our need for an increased number of beds.

I will not go through all the rest of the dot points which the committee can read at a later time, but one of the things that needs to be emphasised—because I am aware that a different view has been put many times in evidence—is that there was then, following the forum in 1998, an effort to involve various community agencies and also stakeholder groups who had a particular interest in the wellbeing of women in correctional centres. A discussion paper, of which I have given you a copy, was sent in May to representatives of those groups requesting comment, requesting their involvement, and listing the range of options that were being considered, including the 200 bed facility at South Windsor. The response of those groups was, in the first instance, that they wished to meet with me rather than provide separate written comments. A meeting was held in June 1999.

At that meeting, it was made quite clear from various different agencies and community-based groups that they did not support the building of a new facility at South Windsor but they did support an additional transitional centre and the expansion of 50 beds at Emu Plains. The request to those groups was that they provide and continue to provide input. We regarded it to be quite critical that we work together on deciding what alternatives there were and that be an understanding of the position that the department was in when providing adequate accommodation and services for women.

The consequence of that was that the various community agencies and women's stakeholder groups who were represented basically refused the invitation to be involved in any further consultation on any aspect of the planning to meet the increased population of women. That invitation was repeated at a meeting with the Minister and also at a meeting with the commissioner. That is really the emphasis that I wanted to place on that particular discussion.

Very simply, question 3 refers to budgets and the details are given. Those budgets show what has been allocated, in particular as regards the North Coast centre. That is an approximation, given that the planning for that facility is still at the early stages.

Another area that it is important to focus on is the issue of alternatives to a women's correctional centre. I have listed that as questions 4, 5 and 10 that were put to me. In terms of looking at alternatives, it is true that in order to meet the range of needs of women who come into prison and also the needs of the community in both management of the prison population and in relation to rehabilitation offered to people who end up in prison, there needs to be a range of alternatives. This was always considered as part of the planning.

The various alternatives were always considered as part of the response that the department could make to both the needs of the women in prison and also to the increased numbers of women in prison. Indeed, as I have said, planning is in place for a second transitional centre specifically targeted at those women who are not able to access the existing transitional

centre or other pre-release options because of longstanding alcohol and/or other drug misuse issues. There are also programs in the department, particularly for women with children, that offer alternatives to residing in custody with the children, such as the use of section 29 (2) (c). There will be further information given by the Acting Assistant Commissioner (Probation and Parole) who, I think, is giving evidence to the committee this afternoon on alternatives to incarceration and our use of options such as home detention. That more appropriately falls in his area.

One of the other things I would like to emphasise (on page 5 of my submission) is the table which makes it clear that although there are a large number of women in prison who are on remand, in the vast majority of cases they are unsentenced, bail refused. A very small number actually are unsentenced with bail not met and are in prison. If you look at that table, it shows a total of nine out of 281 women at Mulawa, (or approximately 470 women in the system) who have been unable to meet their bail conditions. The other point to make about that is that, of that nine, most stay in prison less than three days. Therefore, the department certainly does not consider it accurate to state that there are large numbers of women who are put into prison because they are unable to meet bail conditions.

An obvious area of concern for this committee and one of the terms of reference for the inquiry is in regard to post-release programs—in particular the issue of accommodation and the need in this case for women to have accommodation upon release. While it is clear that both in terms of humane practice and in terms of providing the best opportunity for women upon release to stay away from further criminal activity and although it is also clear that accommodation is an important issue in relation to that, to assume that accommodation or a lack of accommodation is a major cause of recidivism belies the importance of the numerous other social factors that are critical, such as social support, family support, employment and so on.

Nevertheless, having said that, the department certainly realises that accommodation is a critical issue and is involved in interdepartmental committees to look at the whole issue of housing for former inmates. As I understand it, the committee will be hearing evidence from the Department of Housing which is a department that has a critical role to play in the wellbeing of people who leave prison and who are vulnerable to further offending because they have no support and, indeed, no accommodation. Additionally, it needs to be emphasised that the department funds accommodation services through its Community Grants Program and that the department has initiated a through-care program which will increase the involvement of other agencies such as the Department of Housing and community-based agencies at the pre-release stage to ensure that there is adequate planning and places for people stay in upon release.

I turn now to question 9, the separation of male and female facilities. Reference was made to a statement in the 1994 women's action plan, which referred to concern about placing a small group of women within a male facility or at a complex—in this case it was Long Bay—which has been designed and is run for male inmates. That is the department's experience. I think it is an issue of concern in other jurisdictions. I know, for example, that it was a major concern in Canada. In regional areas you have a minority, a very small number of women, who are sentenced to imprisonment. The easiest way to manage that size of population is to use an existing male facility. There are indeed problems using an existing male facility. The planning for Windsor is not to use an existing male facility and to add on a small unit for women. For the first time, it is to actually purpose-design and build a facility for women, which will have totally separate staffing and resourcing. All the staff will be required to participate in specialised training in working with women.

The Hon. JENNIFER GARDINER: What about at Kempsey? Does the same apply?

Ms McCOMISH: The same applies at Kempsey. Kempsey, again, is a different design; it is a smaller facility. So if we are looking at 50 beds there, the unit will be a self-sufficient unit on the Kempsey complex. However, at Kempsey, there will be more sharing of common tertiary health facilities, for example. So, if there is an X-ray at Kempsey, it may be necessary to give both populations equitable access. But in all other areas the women will have totally separate program, health and visit facilities.

Questions 11 and 12 refer to the health education lifestyles program in the Conlon wing. It is accurate—and as the Committee saw on walking around Mulawa—that there is a refurbishment of half of the bottom floor of Conlon which, until the refurbishment occurred, was not habitable. That refurbishment occurred because of the importance of establishing a residential program for women, which addressed major health education issues, such as the lifestyles unit does at the Bay for men.

That has been a matter of concern both to the department and to various other groups and agencies for some time. With the level of hepatitis C in the female population, and indeed other major health issues, although we run mainstream health education and health promotion programs that the women participate in, they have not had the opportunity to participate in a residential program of some eight to 10 weeks. At times proposals were put forward that perhaps they could have access to the unit at the Bay. For the reasons that I spoke about in relation to the mixing of population, it was not considered appropriate to take the women into a male gaol, albeit into a little separate unit within that male gaol. So, given the amount of time it will take to actually build a new facility, which will have a purpose-built therapeutic unit to house programs such as the lifestyles program for women, it was seen as a good opportunity to refurbish a space which could be used not for permanent accommodation, because it is not appropriate for that, but for a program of eight to 10 weeks. It was done, as the Committee saw when we walked around, using inmate labour, at minimal cost. It is not in any way seen as a major refurbishment which would mean that we would not demolish Conlon once we actually have a new facility for women.

CHAIR: How many beds are in Conlon, by the way?

Ms McCOMISH: There are 80. You will see the different numbers at times because there has been a possibility of doubling up in those cells in the past. Indeed, we will face that in the near future with the way the numbers are increasing. So sometimes Conlon is described as 120 beds.

Question 13 was about the number of beds, both currently held in the system and the planned number in 2003, when the new units and facilities and new beds will be opened. As you can see, currently, the total female population is 485. We anticipate in January 2003 a total of 610. One thing I would like to point out about those numbers is that, as part of our planning, we are including a vacancy buffer, which has always been something that the department has sought both for men and for women. We see it as critical in implementing case management and maintaining some stability in the system. We look for a vacancy buffer of about 10 per cent, which in 2003 would mean about 60 beds. That is across all the beds in the State.

I refer now to program improvements in the new facility. At this point, I would like to go through a plan and a drawing of the facility and of the site. I think by looking at the planning for the facility I can best explain why we believe building a new facility will improve programs and services for women. I have a copy of both the site plan, with a drawing of the new facility superimposed on the aerial photo, and also a plan of the facility at this stage. I ask that, given that this is an aerial photograph of a correctional complex, it is kept to the Committee and that it does not end up being dispersed somewhere else, given the security concerns about it.

CHAIR: Is that a request to keep it in camera, or is it a request for us to make our best efforts to keep it confidential?

Ms McCOMISH: I think it is a request to use your best efforts to keep it confidential.

The Hon. JAN BURNSWOODS: You have allowed one copy for each Committee member.

Ms McCOMISH: Yes, I have.

CHAIR: Of the aerial shot?

Ms McCOMISH: Yes.

The Hon. JAN BURNSWOODS: Would you like to give us just one and we will pass it around. That might be better, given what you have said.

Ms McCOMISH: I will give you a each a copy of the second one.

CHAIR: This place is not that secure.

Ms McCOMISH: I will just explain this to you. This is the Windsor site. As you can see, there is a significant amount of bushland around the actual correctional complex and a lot of that is preserved.

CHAIR: Cumberland Plain Woodlands.

Ms McCOMISH: I think there are various small protected species in the woodlands. There are also some other concerns about the site. This is the main entrance. When you come off the Great Northern Road you enter into the new facility for women.

CHAIR: It is next to the Castlereagh liquid waste dump, is it not?

Ms McCOMISH: This is the new John Morony centre. The new facility for women is here. As you come in the entrance it is the first on the right-hand side. As you can see from that, it is quite separate from the existing John Morony centre. The centre you can see over there on your right-hand side is a superimposed drawing only at this stage, of John Morony 2, which has now actually been completed. But we do not have an aerial photograph of it at the moment.

CHAIR: When was that finished?

Ms McCOMISH: It was finished at the end of last year.

CHAIR: Is it being occupied?

Ms McCOMISH: It is being occupied at the moment—about 100 inmates last week.

CHAIR: Was that the first intake?

Ms McCOMISH: Yes. Although it was finished towards the end of last year various bits of work have had to be finished. It has now been tested and fixed. So I guess that is really to show you the amount of room that is around the new women's facility and to emphasise the fact that it is entirely separate from the male facilities.

The Hon. JAN BURNSWOODS: Will you indicate again what total area it will occupy as such?

Ms McCOMISH: Yes. I am going back to front. It is this [printing to overhead].

CHAIR: It is in part of the old Dharruk boys home.

Ms McCOMISH: What you refer to there is part of the houses (and this area shows some of the grounds) - they will be demolished. Those houses have been used by staff and by other areas of the department. So that is all that is there on the site and that is to be removed. I imagine that you saw it?

CHAIR: I was the sole surviving member of the Committee that made it on the field trip on a really wet day.

Ms McCOMISH: There is a copy for each member of the Committee of this plan. It is important to understand how we are attempting to provide a whole new approach to the way in which we manage the site. As you are aware, this facility is for women at different classification levels. It is for sentenced women, although it may also take women who are on longer term remand. So what we have done in designing it, because we have women there at different stages of their sentence and also different security classification levels, is to do a secure perimeter fence so that you can keep it as open as possible within the site. The planning is also based on the fact that it is extremely important to ensure that family and community links are maintained and, aside from community and family links, that the involvement of community based agencies is easily incorporated. As the design is planned at this stage we have the administrative building at the front.

This section of the plan is seen as a public access area for the women. So it is talked about being similar to a town square, where women would access largely public services like health services, administrative services when they need to inquire about things like property and so on, and also the programs unit. There are separate entrances for visitors, inmates, and staff. Obviously inmates are brought down here in escort vehicles. That is where they are brought in and received. Visitors come in here. When thinking about the design of the buildings we wanted to make it as family friendly and, in particular, as child friendly as possible, recognising that, for many families and children, visiting prisons is a frightening experience. So the staff entrance is separate.

This area on the plan is, as I say, seen as a public area for the whole of the community of women who are in the facility. The separation of the different areas is based on notions of need—looking at the need for more or less supervision. The design of the units within those areas will reflect that. So this is an area where it is seen that there will be an increased need for supervision for the women who are grouped in this area. If we move around to this area it is seen that there is a lesser need for supervision. That is a smaller design with 20-beds in five-bed units. Outside the perimeter security are the honour houses which function as independent units. The women there are involved in full-time work, education or other programs. Essentially they look after themselves and are responsible for ensuring that they get to their daily activities and maintain a reasonable household.

The blue square at the centre of each pod of units on the diagram indicates a community centre. The sleeping areas have living spaces for the women, so the five-bed or 10-bed units have the equivalent of a sitting room, or day room, and a small kitchen. The community centre provides interview rooms, small group rooms, and that is where the staff are based. It is trying to promote the same kind of services that are provided to the community, such as a community health centre. They make appointments, for example, for services. It is an attempt to encourage women to take responsibility for themselves rather than the current situation, partly because of facility design and the pressure of numbers, which has led to an institutionalised response.

The marked area indicates industry, which is linked to the program areas. There is a link between skills and vocational training into the workplace. Significant areas of open space have been provided, which we had not be able to provide for the women previously. It is a bit of a myth that women in custody do not participate in structured programs, or become physically fit. In the old buildings there was no support or place for them to be able to participate in those activities. It is extremely important that that space is provided and that it includes quiet spaces and walking tracks.

As part of that process, and in order to recognise the different groups of women in prison, two of the five-bed units have a space for a worker as well, for women with disabilities. They are designed to provide proper accommodation for people with a disability and to encourage independent living skills. Similarly, as I mentioned before, there is a purpose-designed therapeutic unit where programs such as the residential lifestyles program can be run. That will be part of the community area with a separate outside area so that that group can be intensively involved in the programs while they are there.

A lot of thought has gone into the design and consultation is still occurring with a range of groups. Meetings are being held with Aboriginal elders. There is a specific space for Aboriginal women, particularly for arts and crafts, in an external space and that is to be designed appropriately with their input. Similarly there will be a walking track to reflect indigenous culture. We are planning that in the Second Chance program for Aboriginal men in custody in the Far West. We will offer those options for women also.

CHAIR: In the briefing I received recently I was told that the kitchen facilities for each unit are not specifically designed but that the buildings are yet to have detailed drawings made for them.

Ms McCOMISH: Yes.

CHAIR: The intention was to have a kitchenette in each unit because the women were not to cook their meals, as occurs at Emu Plains. This prison was to be designed for the cook-chill method of meals. When the Committee visited Emu Plains emphasis was placed on this important aspect of rehabilitation of women. Some women ordered their meals or planned menus or were given raw materials. They were asked to organise their meals for the coming week. It seemed unusual to have a purpose-built women's prison which would not incorporate a feature which the Commissioner for Corrective Services made a great deal of, and has been an important innovation for assisting women in rehabilitation and helping them to become self-reliant.

Ms McCOMISH: A fully functioning kitchen will provided in the living units. Also there will be eating facilities, a dining room, within the design. There are two responses to your question, Mr Chairman, one is that the department, across the board, is moving to ProServe which has some significant differences to cook-chill. It involves the preparation, the plating, of food. There are a number of reasons for that and one is to ensure that adequate standards are met and that there is a marked change from the historical perception of the last century that prison food is slops. We have made major progress in providing adequate food for women. That is proceeding and is one of the work opportunities that women at South Windsor will have; that is, to run ProServe at that complex. That will enable them to gain skills in preparation, catering, and so on, which can be linked to competency-based training. However, for the reasons you put forward, it is important that the women also take responsibility for managing budgets and preparing food and doing it co-operatively, we have maintained that option in the units recognising that in some cases it will be the predominant option. For example, women may wish to prepare special food, prepare meals for each other or invite staff to attend. They can do that.

Honour houses include food preparation areas and budgeting for food and catering on the same lines as Emu Plains. It is a bit of a mix in providing an adequate standard of catering to women, as we do with men, but at the same time not supporting an institutionalised response. Traditionally, by and large women have managed that very well, and men have not. We need to recognise non-traditional stereotypes. Many women wish to be involved in other activities and programs which means they do not wish to prepare three meals a day and be on a roster for cooking and cleaning.

CHAIR: At Emu Plains do they cook three meals a day? I do not imagine that breakfast is cooked.

Ms McCOMISH: The kitchens that are supplied to the units will enable the same level of cooking and preparation as happens at Emu Plains.

CHAIR: Will there be a conflict between ProServe and self-catering? Ultimately I imagine ProServe is being implemented because of the cost savings. The Governor will have to make a choice between the cheaper and easily available ProServe option and making the extra effort to allow prisoners to cater as they do at Emu Plains.

Ms McCOMISH: No, I do not think that ProServe is being implemented solely due to budget considerations.

CHAIR: I was not suggesting it is. If the Governor of the new prison has to choose between giving prisoners the option at time to time of catering or planning their own meals, there could be an additional budgetary complication. On-site there will be an industry which provides

ProServe food. Basically he will have to reallocate money for that. In all probability it will not eventuate, will it?

Ms McCOMISH: It will be a management issue. What would be the level of demand for ProServe catering and what budget would be given to the centre for women to buy and prepared their own food? That is not an issue of closing off one option or another. We should ensure that that option is available within the design and then influence management about how to balance the two alternatives. The planning for the ProServe facility has not reached a point whereby a set number of meals will be provided to the women's prison which will fit them with a budgetary constraint.

CHAIR: Is there any suggestion that the food facilities at Emu Plains do not meet the proper standard, given that they are almost totally prepared by prisoners?

Ms McCOMISH: I am unable to answer that. We have done a review of health standards throughout the State, as required by the new legislation. Concerns have been raised at a number of facilities. Again, that is a management issue. I emphasise that many women do not choose to, or wish to, prepare their own food. We seek to provide options. We should not assume that all women like to cook.

CHAIR: I was not suggesting that. But we all eat and have to get used to the routine of feeding ourselves. At home I can choose not to cook.

Ms McCOMISH: But you have the alternative of going to a fast food outlet. It needs to be emphasised that what is important in the whole planning of a facility for managing any population is to have a range of options.

CHAIR: Members may now ask questions about the coloured form regarding the design of the prison. Recently I visited the facility and had it explained to me on site.

The Hon. Dr A. CHESTERFIELD-EVANS: Obviously this is a period zoo. If you are going to talk about integrating people into the community, why build an artificial society within the prison rather than have the department function with smaller prisons that are integrated more into the community? In your plans you have raised your bed numbers from 485 to 610.

CHAIRMAN: They are good questions, but I want members to have the opportunity to deal with this plan first. We will come back to those issues.

The Hon. Dr A. CHESTERFIELD-EVANS: It is not a question of the quality of the zoo; it is a question of whether we need a zoo.

CHAIRMAN: One thing we must report on is whether the department goes ahead and builds this facility. Members need an opportunity to understand exactly what it looks like. Are there specific questions about the layout and design?

The Hon. JAN BURNSWOODS: I am looking at what is obviously the playing field, tennis courts and so on. Is there any gymnasium-type facility?

Ms McCOMISH: Yes, there is.

The Hon. JAN BURNSWOODS: Given what you said about women's needs for recreation, support and fitness, I know there is something labelled "health", but I assume that is mostly medical, doctors and ancillary matters?

Ms McCOMISH: It is. I am just told that every community centre, which is all of those blue shaded areas, has a facility. It actually provides that function of relating to where the women are living, that they can use it as part of their day.

The Hon. JAN BURNSWOODS: Regarding the daily interaction of people in low, medium and high support need, there will be rather little or none. For instance, does that mean the use of the playing fields and tennis courts will be structured during the day or the week?

Ms McCOMISH: Yes it will.

The Hon. JAN BURNSWOODS: Each of those groups will not mix?

Ms McCOMISH: Not necessarily. You are right. By and large their days will be structured somewhat differently and so they would have as part of that access to the public facilities at different times. As you can see, there are no fences between those areas. The units are built to follow to some extent the fall of the land and using landscaping. The encouragement will be that they learn to live with each other within the area and that is the way they will use the facilities as well.

The Hon. JAN BURNSWOODS: What happens to women needing protection?

Ms McCOMISH: The dark orange section, which I described as units designed for those requiring higher supervision. We would prefer not to use protection.

The Hon. JAN BURNSWOODS: There are fences on the plan.

Ms McCOMISH: There are no fences between that block of units and the other two blocks.

The Hon. JAN BURNSWOODS: There are a couple of lines on the bottom left corner, which seem to suggest that one group of 20 actually has a fence.

Ms McCOMISH: What we have attempted to do with this design is that we use lines like that to illustrate where, if required, we could put up some kind of sight barrier, something like a pool fence. We do not want to recreate what has existed at Mulawa, which indeed at times has resembled a zoo, because it has separation by fences and runways and so on—less so than it used to have but it still has them. What we anticipate with having a new facility is that, for the first time, we will be able to stream the women between Mulawa, South Windsor and Emu Plains so that it gives that increased range of options. But on this site we will actually do it by the way in which their day works.

There is increased supervision in those dark orange shaded units, the high supervision or high-need units, including actual space for a staff member in each of those units whereas there is not in the other units where they are based in the community centre. We plan to take care of

things like protection needs, if they are present, by staff supervision and by the way in which the facility is managed rather than using static security, which creates a cage-like environment.

CHAIRMAN: Emu Plains has the capacity for visitors to come on the premises, particularly young children, to access parents in what appears to be almost a park-like atmosphere. This facility will not enable that. Visitors will be processed in a particular place and visitation will take place in a fixed place as it does in other prisons, is that correct?

Ms McCOMISH: That is correct, for the area behind the fence. Which is the same as at Emu Plains when you are describing your perceptions you are describing the Jacaranda Cottages section of Emu Plains, that is more like the honour houses. They are for women at a different stage of their sentence and there are not the same concerns about visits and what gets introduced into the centre. The other thing that needs to be emphasised is that if there were a need for access of community-based workers who are working with the women at pre-release or during their sentence, and maybe even families in terms of some family counselling or parenting programs whether there would be the possibility of access to the units—yes, they would access these in the community centres. So, if it needed to be you could actually bring in individuals or kids—that certainly would be possible.

The visits area, where the majority of visits will take place, is to be designed in a way that makes it appropriate for kids and to have things like a creche so that when there are all-day visits, there is room for a mother to put her kid down to sleep and stay with the them, and then an outside play area. Again, it is attempting to normalise as much as possible what is a fairly abnormal situation, which is what it is for a child to have a parent in prison. But in order to make the surroundings as appropriate as possible, that has all been included in the design. It is exactly within those sorts of areas that it would be worthwhile having input from some community-based agencies that provide services to families and to women in prison.

CHAIRMAN: One of your criticisms of Mulawa, and it is a fair criticism, is that you have to provide facilities for a wide range of different types of prisoners, and because there are a substantial number of maximum security inmates the whole place must run as if it were a maximum security institution. This plan intends to have a mix of different classifications. You have referred also to the fact that also involved in this there might even be people on long-term bail. Are you not going to replicate to some extent at this larger facility—a problem you do not have at Emu Plains—that security will have to be reasonably tight because you have maximum security inmates?

Ms McCOMISH: We do not anticipate having very many maximum security sentenced women because there just are not many in the population. What we have done to take care of that concern is that there is a perimeter security that has infra-red and microphonic wires.

CHAIRMAN: There are 60 people of high need. Would they not be classified maximum security?

Ms McCOMISH: Not necessarily. Some may well be there because of association or protection issues. Those would be where there were concerns really for their safety amongst the rest of the population. For example, women who have problems mixing easily with other inmates sometimes because of their crime. If they have killed their child, that often makes it difficult and it takes some time to be able to put them into a lower supervision environment. They are not in that area necessarily because of risk of escape, which is the major issue of maximum security

management. The other thing is that as Mulawa stays as a reception and remand centre it will continue to contain those women who present multiple problems in terms of management and who need intensive management and service delivery, whether it be a health problem or mixture of health and management problems.

The Hon. JAN BURNSWOODS: Would you expect people with a somewhat more severe intellectual disability or dual diagnosis to be at Mulawa or in this high-need area?

Ms McCOMISH: It will certainly be a matter of individual assessment. But dual diagnosis, given that it usually means, for us in our system, that they have an intellectual disability, they have major behavioural problems, often a severe personality disorder, sometimes a psychiatric illness, and they usually have a major AOD problem, we would see that such women would stay at Mulawa, essentially placed probably in the Mum Shirl Unit. Hopefully, if the health problem was a priority, if they had a psychiatric illness, we would be able to place them in a facility in a community like Cumberland Hospital.

The Hon. JAN BURNSWOODS: What if they had a middle range intellectual disability perhaps accompanied by some challenging behaviour, which made other prisoners dislike them or not want to live in a small house with them, where would they be?

Ms McCOMISH: Where you look at the area that has what we call low supervision needs, two of those units are separated and made with just five beds. So, they are small. They are designed to take people with a disability, that includes physical disability, but they also have space for a worker who can do living skills and live on a daily basis with a group such as you are describing. We would hope that we would be able to house those women there and gradually mix them with a larger group. I do not think it would ever go to 10, but certainly the full number of five over time. That is a facility we do not have at the moment.

Ms LEE RHIANNON: You have given emphasis to commitment and communication with the community. I refer to your statement on environmental effects, which some people have said is like a development application [DA] for this project. A number of community groups did not know about it. It seems as though this has not been given wide circulation, which I was surprised to learn considering the statement talks about links with the committee and the impact on the community. How real has been your community consultation?

Ms McCOMISH: Links with the community and impact upon the community usually refer to the local community. The plans have been available and a community meeting was advertised and held out at Windsor. I think what you are referring to is consultation with what I call stakeholder groups, who really have an interest in and involvement with women in custody. One of our problems, and I guess their problem, has been their stand of saying, "No, we don't think there should be a new facility." They do not feel able to be involved in any kind of consultation process. So, they would not have been sent a copy of the DA because at this stage we are getting no input or advice from them. They have an open invitation to be part of the planning processes and to give us the advantage of their input at any time, but they have not taken that up.

CHAIRMAN: Yesterday I got the impression, particularly with people like Eileen Baldry and Violet Roumeliotis, that I was telling them for the first time that this document even existed and that there was a floor plan that looked anything like this. Clearly, they have had a continuing interest in this issue. Would it not have been at least in your best interests to send them a copy of

the ground plan and some part of this document—all of it is not essential—to let them know that existed? Someone like CRC would have an interest in this, would they not?

Ms McCOMISH: I put that dilemma to them and indeed Eileen Baldry and Violet Roumeliotis were individuals who were sent that discussion paper in May, asked to respond and did come to a meeting with me. At that meeting I said, "I understand your dilemma", which they put to me very clearly ie. "We do not approve of a new facility, we will not support it and therefore we cannot be involved in providing any consultation which might be seen as advice to it." That puts the department in a situation where we cannot win, in a sense, because we can then be accused of not providing them with information but they have made it very clear that they do not wish to have the information because they do not wish to be associated with the planning. I understand the dilemma that they are in but I do not think the department can be castigated for not including them.

CHAIR: It does not appear that any women's group has been shown this other than the Windsor group.

Ms McCOMISH: This plan was only shown to us a fortnight ago.

CHAIR: But this plan is dated—

Ms McCOMISH: The DA?

CHAIR: Yes, and although we have it in black and white, it appears like a plan that is—

Ms McCOMISH: Well, it is a significantly earlier version.

CHAIR: Do you not think that it would have been important to inform women's groups, apart from particular individuals, or groups that represent significant numbers of women such as the CRC and Justice Action, that this was available. If this Committee had not being meeting, discovered this and brought it to their attention yesterday—although now it is beginning to filter through—the only people who would have seen it and been consulted would have been individuals in the south Windsor area.

Ms McCOMISH: There is also a women's advisory network and those groups are represented on that network. They were informed at their inaugural meeting of the network where the planning was up to as well as the status of the DA application. I think some responsibility should rest upon those groups to indicate that they are indeed interested and wish to comment.

CHAIR: There seems to be some fairly fixed thinking with regard to how the prison will operate. Decisions have been made about high, low and medium needs, facilities for sacred space and recreational facility seems to have been thought through. Even the catering appears to have received a high level of consideration. However, I am not sure that Committee members will be convinced that those vital aspects of the operation involved consultation with anyone who is not part of the women's advisory group. I do not know whether it has been passed that group but certainly there would be plenty of groups, apart from expressing their views about the prison, which would like to express some view about the management and design of it and had it not been for this Committee would not have known about it.

Ms McCOMISH: I would be surprised to know that and there is certainly still plenty of opportunity for there to be consultation and input. As I mentioned, meetings have been planned already with Aboriginal interest groups which are seen as a very important part of the consultation process.

CHAIR: How fixed is this and how much time is available?

Ms McCOMISH: This is fixed in terms of the range of women who will be placed here. That is part of our statewide strategy about offering the full range of options to women, as we do to men, in terms of placement and programs. That determines certain things then. It should be noted we also have significant expertise within the department about the needs of women in prison and although you may not see that as consultation, there has been a wide range of input, discussion and debate. As to how fixed it is, this is the latest plan. We have not yet gone to detailed drawings of the different units. The areas are still blocked out. The detail of how they will work, how the community centres will operate and exactly what will be included in the visit section has not yet been described. Given that we know this is the range of women that we need to manage and that we do actually have significant expertise about the needs of the women who fit those categories, the overall design and the separation of the areas are fixed.

CHAIR: Is there anything that members want to have explained as far as the diagram is concerned. I would seek further clarification on some issues raised with regard to the written answers. The Hon. Dr A. Chesterfield-Evans referred to the table on page 11 on which we need to ask questions. I am not quite sure that I understand how you get the Mulawa population from 295 to 130 by only closing an 80-bed unit. I understand you are building 50 new beds at Emu Plains yet it is shown at 180. There are also references to another proposed facility for western New South Wales similar to Kempsey which would provide another 50 beds to be added in total to the 610. There is a reference to two additional transition centres but only one is listed here. Is June Baker at Grafton?

Ms McCOMISH: Yes.

CHAIR: It is necessary for us to close off now but we will need to provide you with another set of written questions.

Ms McCOMISH: I wonder how that process comes to an end. You have yet to hear evidence from Colleen Subir from the Women's Services Unit and Pat Maurer, who has the position of statewide indigenous women's project officer, both of whom may well be able to address some of the issues, particularly in relation to the design of this facility and more general questions about how we manage the general women's population and programs for indigenous women.

CHAIR: Is the lady from the Women's Services Unit going to make a presentation to the Committee?

Ms McCOMISH: Yes.

CHAIR: And we will have a further presentation from the regional Aboriginal project officer as well?

Ms McCOMISH: That is right.

CHAIR: It would be most useful to move on to the presentation, keep accumulating time for questions and do that at another time. There are a raft of questions for clarification. I would like Corrective Services to respond to the detailed paper we were given yesterday from Mr Tony Vinson and Eileen Baldry which raises significant issues.

(The witness withdrew)

COLLEEN FRANCES SUBIR, Acting Senior Policy and Project Officer, Women's Services Unit, Department of Corrective Services, GPO Box 31 Sydney, 2001, affirmed and examined:

CHAIR: Would you briefly outline your qualifications and experience as they are relevant to the inquiry?

Ms SUBIR: I have qualifications in social welfare personnel management and training. I also have 15 years experience with the Department of Corrective Services in a variety of roles, from probation and parole to operations and to planning. Also, my last two recent positions were as programs manager of the Metropolitan Remand and Reception Centre and then most recently as Corrective Services co-ordinator for the Drug Court program.

CHAIR: Have you received a summons issued under my hand in accordance with the Parliamentary Evidence Act?

Ms SUBIR: I have.

CHAIR: Are you conversant with the terms of reference for this inquiry?

Ms SUBIR: I am.

CHAIR: If you should consider at any stage during your evidence that in the public interest certain evidence or documents you may wish to present should be heard or seen only by the Committee, the Committee would usually accede to your request and resolve into private session. However, I should warn you that the Parliament has the power to override that decision at any time and make your evidence public. I understand that you wanted to make a presentation to the Committee so would you please do so.

Ms SUBIR: Unlike Ms McComish, I have nothing to hand to the Committee. My intention was to speak to the questions that have been given to me by the Committee but prior to that I thought it might be useful, because I know the Committee has received numerous documents from the department and from other areas about statistical information and I always find it is a bit difficult to wade through lots of statistics and get a clear idea, particularly in this regard, of the profile of women inmates, to just quickly talk about a profile of women inmates that was done through a women in custody survey that was conducted in 1998 by the Women's Services Unit. This survey has not been released. The research division at the moment is getting it together but we have two interim reports released from that survey.

The two reports that have already come out of that survey relate to a number of issues that were in the questions. I rely on the women in custody survey, which is a self-reporting survey from the inmates interviewed, and also the 1995 and 1999 census that is based on a snapshot of women in prison as at the end of June each year. The department knows from the information from those two sources that a female inmate has a one in three chance of having been removed from her family as a child or a one in two chance if she happens to be an indigenous person. She has a 69 per cent chance of having been physically abused as an adult and a 77 per cent chance if she happens to be indigenous. She has a one in three chance of having been sexually abused as a child. The percentages are higher for emotional abuse as a child than as an adult.

More than half the women have a drug and alcohol problem and of those, 80 per cent tell us that they were intoxicated at the time of their offences. More than 84 per cent are born in countries in which English is the primary language. Of our current population, 24 per cent are Aboriginal and Torres Strait Islanders. The age of the female population is divided approximately equally between the 18 to 29-year-group and the 30-and-above-year group. We decided on those two groups because usually the 18 to 29-year-group is the child-bearing age group and is usually the age of primary carers. We can delineate it into smaller groups, but I thought that those two groups were the most relevant.

CHAIR: How does that compare with the men?

Ms SUBIR: I cannot tell you. I can look it up for you. I have the statistics.

CHAIR: No, not now.

Ms SUBIR: If we look at the comparison between 1995 and 1999, when there was a fairly dramatic increase in the number of female inmates coming into the centre, the number on remand has risen by 10 per cent, which now gives us—and these are very rounded numbers—25 per cent on remand. In 1999 a female in custody has a two-in-three chance of having had a prior period of imprisonment. For indigenous women there is a three-in-four chance of having a prior period of imprisonment.

CHAIR: Does that include juveniles?

Ms SUBIR: 18 and above only.

The Hon. Dr A. CHESTERFIELD-EVANS: Does that include juvenile institutions, though?

Ms SUBIR: No, Corrective Services institutions only.

CHAIR: Would that include sentenced people only?

Ms SUBIR: Sentenced and remand.

CHAIR: Could the prior period of imprisonment have been a period of remand only, or are you referring to people who have been sentenced twice?

Ms SUBIR: It can include those on remand. I will mention why I think that is particularly relevant in a moment, but a prior period of imprisonment. In 1999 she is more likely to be in prison for an offence of violence than in 1995. There has been a 7 per cent increase in the number of offences of violence, but in terms of raising the prison population, the number of women in gaol for offences of violence 1995 has increased from 75 to 135 in 1999. She is less likely to be in prison for property offences. We have actually seen an 8 per cent decrease in real terms; that number has increased from 140 to 160. The number of property offences have been nowhere near the increase in the number of offences of violence. In terms of periods of imprisonment there seems to be little change of the percentage of women in custody for periods of under two years, which, at the moment is approximately 46 per cent. Although there has been an increase in the number of women in gaol for offences of violence, we have not seen an increase in the length of time women spend in gaol.

That is just a broad brushstroke, a picture of what we deal with in terms of complex, difficult, long-term problems that women bring to gaol with them. They have been separated as children; they have been violently, sexually and emotionally abused, and that has resulted in significant drug and alcohol problems. There is an increase of violence and a propensity to commit crimes that return them to prison. When we talk about building new gaols it is important that the Committee realise that that is not the only approach we are taking to the problem with which we have been presented. We are also focusing on programs that attempt to address these massive problems in an environment that is safe and conducive to these sorts of programs being properly undertaken. Women have to confront those tremendous problems and they have to effect a dramatic change in the way they cope. They learn the skills that give them a variety of choices when they are released from gaols. That might go some of the way in addressing the questions that have been put to me from the point of view of the Women's Services Unit.

CHAIR: Could you explain to the Committee what the Women's Services Unit is?

Ms SUBIR: Sure. It came from a specific recommendation of the Women's Action Plan in 1994, which Ms McComish addressed, which is quite a significant document as you can see. It contained a specific recommendation for the establishment of the unit, which would have been established in the 1993-94 financial year.

CHAIR: What does it consist of and how is it integrated in the gaol system?

Ms SUBIR: At this stage we are in the process of re-evaluating the type and number of staff, but at the moment I, as Acting Senior and Policy Project Officer head the unit. We have a Policy and Project Officer, we also have a Co-ordinator of the Mother's and Children's Committee and an Administrative Officer. The idea of the Women's Services Unit is that it researches, develops and assists the rest of the department in the formulation of policy and programs relating to the special needs of women in correctional centres. One of the main areas is to ensure equity of access to programs and services for female inmates.

I do not need to go into the problems created by having a very small percentage of women in a system that is dealing with a large majority of men. The role of the Women's Services Unit is to positively assist the department in comprehensively and appropriately addressing the needs of women within the department. The Women's Services Unit is the area that negotiates or organises the Women's Advisory Network, which was mentioned recently by Ms McComish. The first meeting of the new advisory network was held in February, and a footprint of the proposed south Windsor gaol was tabled. Ms Eileen Baldry is a member of that advisory network, so she had seen those documents at that meeting in February.

CHAIR: Are you able to get the Committee a list of the people who served on the advisory network and some idea of how they came to be on the Committee, whether they are from Corrective Services, or if they represent community groups, what groups they represent.

Ms SUBIR: Certainly. A vast range of community groups is represented. The department put out expressions of interest to all interested parties or community groups that wished to join the network. We are fortunate that we got quite a number of interested groups as well as individuals, so we have what we call "experts" as individuals, including Dr Eileen Baldry, and also interested groups, including Ann Webb from Guthrie House who is also a member of the Women's Advisory Network. We also have a number of women from other government departments who are interested in the delivery of services to women, including the Department

of Women and the Anti-Discrimination Board. I will get you a full list of the names. The majority of members of the Women's Advisory Network come from outside the Deportment of Corrective Services.

CHAIR: How does the new network compare with whatever it replaced?

Ms SUBIR: When we set up the first Women's Advisory Network it was a follow-on from the Women's Action Plan. Included in that was a review of how the network operated and its terms of reference. We have just finished that review and have produced a code of conduct, if you like, the terms of reference for the advisory network, and how it will operate. When we asked for interested people to be involved we sent that document out for comment so that they knew what they were joining and what they were getting into. Some changes were suggested to those terms of reference, which we incorporated, and on that basis nominations to the network were accepted.

CHAIR: Did the composition of the network change?

Ms SUBIR: The charter identifies a number of positions for outside organisations; a set number of positions are identified for individual experts and a number of set positions are identified for staff of the Department of Corrective Services, so they were aware of that. The charter provides for an ex inmate to sit on the committee. We are having a little difficulty identifying someone who is happy to sit on the network. That is the only position that is not yet filled.

CHAIR: Obviously, there was a previous network that would have oversighted whatever the consultation process was between 1998 and so on. The new one has had little time to have an impact. The Committee would be interested to know what the old network looked like. Was it composed of different people?

Ms SUBIR: Some are the same and some are different. Members of that Women's Advisory Network were involved in the consultation process that Ms McComish previously mentioned about south Windsor.

CHAIR: When you are giving us a list of the new members, could you supply us with a list of the previous members.

Ms SUBIR: Certainly.

The Hon. JENNIFER GARDINER: Could you also give us an indication of where the people come from, which parts of New South Wales?

Ms SUBIR: Certainly.

CHAIR: You have given some details of the profile of the prisoners. One of the things that has been discussed in the past couple of days is the number of inmates who have an intellectual disability. We seem to be getting a better handle now on the number of inmates who have Hepatitis C. It appears that there is a difference of opinion. The Department of Corrective Services indicated to us in answer to questions that the number people with intellectual disability would barely be over 10. Yesterday we heard evidence to the effect that one in five inmates could be identified as having an intellectual disability. Given that Corrective Services uses Dr Susan

Hayes as its consultant as well, why is there a difference of opinion between the two in identifying that rather large group?

Ms SUBIR: I cannot comment on where Dr Hayes gets her information. I can comment on how the department arrived at its number. As at 25 February 10 female inmates had been identified as having an intellectual disability. Obviously, because we have a large number of receptions and discharges at any given time, that is a snapshot figure. It may change daily. An inmate with an intellectual disability is identified during the screening and induction process, which is the process that is gone through at reception to a gaol. A number of questions on the screening form relate specifically to the identification of intellectual disability. That form is usually completed by a welfare officer. If those questions are identified in the affirmative, that is indicating that there may be an intellectual disability, that person is referred to a psychologist and the appropriate psychological tests are done to gauge whether an inmate has an intellectual disability and, if so, its extent. That information is given to the Disability Services Unit within the department that keeps track of the inmates identified. That information is also passed on to the case management team so that appropriate placement and case management plans can be formulated.

CHAIR: Is the screening procedure to which you refer the screening procedure that was referred to by Ms Hayes yesterday, under which inmates are asked a series of questions like, "Have you been in a special class while you were at school?" and they are asked to draw up a clock and put faces on it, and so on.

Ms SUBIR: The questions were formulated by the Clinical Coordinator of Disability Services within the department. I have a copy of the intake profile for them with me. I can tell you exactly what the questions are. In section (e) it deals with intellectual assessment and asks:

> Did you have trouble learning at school?
> Did you ever go to a special school or a special class for students who have trouble learning?
> Was it ever suggested that you go to a special school or a special class?
> Did you ever have a job?
> Did someone help you find your job and work with you until you learned how to do it?
> Have you ever worked in a supported employment job or a sheltered workshop?
> Have you ever received any of the following benefits: disability support, invalid pension, sickness benefits?
> Have you had any help from any of the following: the Guardianship Board, the Protective Office, the Department of Community Services?

Those are the questions that are asked, but those questions are to flag whether a person should be moved on to be assessed by a psychologist, who will do a proper and appropriate assessment. So these questions are not to assess whether a person has an intellectual disability but, rather, to flag that the person should be assessed.

CHAIR: It should identify a larger group of people who ultimately might undergo a more discreet test?

Ms SUBIR: That is right.

CHAIR: There are a number of questions I would have about that particular test. One of those questions is whether the person has had a job, then whether the person had some assistance. If the person, like a lot of people with intellectual disability, answers no to the first

question, and gives an answer to the next question that it is not applicable, the test basically would be limited to, "Were you in a special class?" or, "Are you on a particular pension?"

Ms SUBIR: Or, "Have you had any connection with the Guardianship Board?"

CHAIR: That would apply to a very narrow group of people. In fact, I would imagine that if the answer to that was yes, you almost would not need to do any further testing because those persons would already have been through some sort of formal assessment, because it is very difficult for people to come to the attention of the Guardianship Board.

Ms SUBIR: This procedure is not the only time that an inmate can be assessed as perhaps needing a full psychological assessment. That is not the first and only bite of the cherry. All the way through the process, a person who comes to light because of behavioural or other problems can be referred at any time to a psychologist to test the person and assess whether the person has an intellectual disability.

In terms of the number of people identified as having an intellectual disability, of those small numbers that we have in the women's population -- but it also relates to the male population as well -- approximately 55 are identified as having a mild intellectual disability; that is, in terms of an IQ of between 55 and 69. People with a mild intellectual disability live quite happily in the community, and usually live in some sort of non-government supported housing or accommodation or in supported jobs. One of the difficulties that we have with inmates with an intellectual disability is that as well as the intellectual disability they have the added component of criminality. On release, we have found it difficult at times to place people in that particular group with non-government organisations because of management problems that they will have.

CHAIR: One other matter that has been raised with the Committee is the classification system. I myself taught people in that intellectual range. From that experience, I would have to say that the classification system might well miss the some of those people. What sort of assistance does Corrective Services give those people to assist them to negotiate their way through something that to many people would seem to be reasonably complex?

Ms SUBIR: The women's classification system, as you would have read in the submissions from the department, is different from the male classification system. We work on the basis of high need. High need does not necessarily equate to maximum security or high security. In relation to high need, the resources need to be funnelled to that particular group to assess them through that program. So that people with an intellectual disability may well be identified in that high need group.

The Hon. Dr A. CHESTERFIELD-EVANS: You said that you have identified 10 women through this induction screening. Eileen Baldry said it was up to 20 per cent and that she had used reasonably detailed tests on a statistically significant sample. I particularly questioned her as to whether her sample was sufficiently large to be representative of the total prison population, which is of course statistically important to do.

Ms SUBIR: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: She said, yes, that she was both certain that it was statistically significant and that the margin for error was such that the result would be true. You are saying that there were 10 women screened, and she is saying that the figure is 10

per cent of all people. If I understand Ms McComish correctly, there are 485 at the moment; so that 10 of 485 is a little over 2 per cent, as opposed to 20 per cent. That is a massive difference.

Ms SUBIR: Again, I can only say that I have not read Dr Baldry's report.

Ms McCOMISH: Mr Chairman, might I interrupt?

CHAIR: Of course.

Ms McCOMISH: I think you were referring to Professor Hayes.

The Hon. Dr A. CHESTERFIELD-EVANS: Yes.

Ms McCOMISH: It was Professor Hayes who actually conducted the research, not Eileen Baldry. Susan Hayes supervised some research that was done in the 1980s.

CHAIR: She said yesterday it was in 1996.

Ms McCOMISH: We have not yet seen any research that was done within Corrective Services in 1996. What was done was a pilot of what is called the HAYSI, which is the screening test that you spoke about, and which we were involved in. We are still awaiting the publication of Professor Hayes and her associates and recommendations on how and when to implement those recommendations. When she refers to research in 1996 I think that is in regard to the piloting of the screening test.

As we are yet to see a report on that, I really cannot comment on those figures, but I can comment on the figures revealed in a survey that was done in the 1980s. It is a figure that is used a lot; I think it was that 12.8 per cent of the population within prisons had an intellectual disability. There were some problems in that case with the representation of the sample, but the department would acknowledge that there may well be more women, in this case, who have an intellectual disability than we have identified. We do not believe that it is anything like one in five.

We look at it in two ways. One is, as Ms Subir has said, to look at those who are identified on testing to have a mild intellectual disability. Also, we look at the greater range, which I think Professor Hayes referred to, in addition to those with an identified intellectual disability, that is, those who have an IQ of something between 70 and 80 but have other major social adaptation problems which mean that they are unable to manage well in the mainstream. They are a more difficult group to pick up on screening, so that we can be alerted and undertake a fuller assessment. So there are some sound reasons as to why there would be the reported differences in the number of people with intellectual disability. But I would have to say that we have no evidence, and we have not seen evidence, that suggests anything like a figure of one in five of our population has an intellectual disability.

CHAIR: I think your original submission uses a figure in the order of 15, 16 or 17 per cent, and the other figure that I was looking for earlier was 10 per cent. Is it fair for the Committee to come to the conclusion that the system of identifying people with intellectual disabilities within Corrective Services generally appears to need a great deal of refinement? It does appear to be a very inexact science at the moment.

Ms McCOMISH: I think it is an inexact science in the community. I think it is an inexact science because the really important factor is how people manage, so one has two have appropriate measures of their social adaptation and of their social skills. Notwithstanding that, the department would agree that it is very important that we get the screening right in order to get a streamed population on which to do a fuller assessment. That is why we participated in the piloting of this new screening, which we hope will provide a more accurate picture on reception. Indeed, during people's time with us, if there are concerns that they do not appear to understand, or that they have a real behavioural problem in the case management process, we can do a quick and easy screening test that will improve our chances of identifying those with a significant problem.

The Hon. Dr A. CHESTERFIELD-EVANS: This all sounds very jolly, but you are saying the figure is 2 per cent, which is 10 out of 485, as opposed to a figure of 12.8 per cent, which you have had for more than 10 years. The disparity in figures is huge. If the problem is not just IQ alone but the adaptive factors to which you referred and the ability of these people to cope in society, and given the high recidivism rate, surely this should have been addressed in a more systematic manner than by asking questions such as you have referred to.

As a screening doctor, I know that if you mumble through the questions, the person tends to answer no, no, no, regarding that to be the easiest course of action. A questionnaire along the lines of "Have you ever been in a discriminatory school?", or "Have you ever been in the dumb class?" will attracts answer of no and no. If you ask, "Have you ever had to be shown how to do a job?" you will get the response no. It is easier for a person, in a threatening situation of not knowing the consequences of a yes answer, to say no. Obviously, if 10 people out of 485 are responding in the positive, in the face of research that is more than 10 years old saying it is more than 8 per cent, and in the face also of a pilot study done in 1996 showing that adaptive behaviour has pushed that figure up to a suggested 20 per cent, surely you should be telling us about the wonderful programs you have in hand to address this problem. It seems a very serious matter.

Ms McCOMISH: Two points are raised by the question. One is that there is not a pilot paper. It is unfortunate that this group in the community and in institutions is not well served, and we do not have a lot of information about them in the community. Secondly, there are a number of initiatives that have been set in place, but it is not possible to resolve the problems overnight, as much as we would like to. It is not a matter of throwing a whole lot more staff or money at the problem; the aim is to ensure that we have a systematic approach.

One thing we must ensure is that the screening staff have particular training so that they do not get responses of no, no, no, or yes, yes, yes, but that they actually look at the person, the way the person responds, and understand the cues to indicate whether a person has an intellectual disability and will have problems coping with the system. It is a similar position with the case management staff. That certainly will not happen quickly. It is only four years ago that the Statewide Coordinator for the Disability Support Unit was appointed. We were fortunate to attract someone who had very long experience working with intellectual disability in the community, of working with TAFE and working as a senior clinical psychologist. That is why these various initiatives have been put in place. But I share your frustration about how long it takes to see the impact on the ground. The 10 that Ms Subir spoke about have been thoroughly assessed. It is not a matter of them being picked up on screening; there are many more who may have been picked up on screening and found not to have an intellectual disability but to have other issues that need to be addressed.

CHAIR: Who is the Statewide Coordinator of the Disabilities Unit? Is that a person within Corrective Services?

Ms McCOMISH: Yes.

CHAIR: Would that person be available to give evidence to the Committee at a future time?

Ms McCOMISH: Yes.

CHAIR: The other issue that is becoming apparent is the hepatitis C issue. More than half the women prisoner population appear to have this virus. What measures are taken within Corrective Services to make sure that they are getting adequate nutrition, medical attention, rest and instruction on how to look after themselves?

Ms SUBIR: There have been a number of specific programs put together to provide information on hepatitis C particularly. I think that is mentioned in Ms McComish's submission to the committee. One of the difficulties, though, that we have, particularly in the women's population in the context of the number who are doing sentences of two years and less, is that when putting together long-term programs, that can be done more with the males, perhaps. We have less turnaround time for women, if you like, to put in place long-term programs which will address the hepatitis C problems. So what we had to do is look at particular programs of short duration based on models that are accepted in the community and give that information to women who are identified as having hepatitis C.

CHAIR: Many of the programs that Corrective Services offers seem to be opt-in programs where there is an onus on the inmates to identify their needs and arrange to get involved in the programs by making an application on what I think is a blue form. But people who have intellectual disabilities have special problems. It could be said that almost everybody in gaol has hepatitis C or certainly that everybody in gaol is at risk. What effort has been made to assist people and provide general instruction? My quick walk around Mulawa showed not a single poster. Perhaps I did not notice them.

I accept that when addressing an issue such as hepatitis C, perhaps posters may not be the way to communicate; but I think the public expects that something like that may be occurring in prisons so that there is a general or mass education attempt being made to deal with hepatitis C as part of the general culture of the prison in dealing with drug-related issues. Given that 80 per cent of the inmates have drug or alcohol problems, what sort of effort is being made to address something that is obviously a very important part of the whole culture of the prison? Many of the programs seem to operate to the side of the custodial edifice as an opt-in facility with the result that there are dozens of people who go through prison and who miss that option altogether.

Ms SUBIR: I will come back to the first point you made about an opt-in program. I think that is probably not the full picture of identification of specific programs relating to individuals which is actually done through the case management process. Through the case management process, the particular needs of the individual are addressed. The options are put forward in terms of a person looking at this program, that program, or the other program. But you cannot actually force the person to undertake the program.

CHAIR: How often does an inmate meet with his or her case manager?

Ms SUBIR: Their case manager or the case officer?

CHAIR: The case officer. I am not sure of the terms. We have heard from plenty of people who have given us evidence—in fact, almost every inmate—that they do not see those officers very often.

Ms LEE RHIANNON: Never.

CHAIR: They say that it is difficult to make appointments and many of them—I think it was up to 50 per cent of them—said "I can't identify who my case officer is." That evidence appears to coincide with a report written either by the Independent Commission Against Corruption [ICAC] or the Ombudsman on this matter. There is a fairly large report that has been published on case management and I think it was done by ICAC. You and other staff seem to rely very heavily on a system which a report has shown appears to be, or apparently is, not exactly 100 per cent efficient.

I accept that case management is probably something that develops over time but at the moment it would have to be said that it is still developing. Some of the management plans that you have for facilities even refer to staff having a high level of commitment to work so there must be other places where that question is not asked and it can be presumed that there might be staff who do not have that sort of commitment. That type of evidence was certainly given by some other members of staff who said that quite a lot of custodial officers do not believe in the system at all, do not see it as part of their role and still have a level of resistance. Those officers are a very important delivery point, given problems such as drug and alcohol abuse and hepatitis C. That system could be said to be not working. What are you doing to catch what happens between individual case management and general programs?

Ms SUBIR: I guess there are a number of things. One of the things that I read that had been submitted to the committee was about a lack of access to Alcohol and Other Drug [AOD] workers. If we take out the case officers and look instead at the providers of the services, such as AOD officers, education officers and psychologists, the women in custody survey that was done in 1998 showed some interesting feedback about access to those services. What seems to have occurred is that the information seems to be inconsistent on access by inmates to those particular services. In the women in custody survey, of those women who were actually surveyed, 51 per cent of them said that they had accessed AOD services; 65 per cent said that they had accessed psychological services; 71 per cent said that they had accessed welfare services; 62 per cent said that they had accessed educational services; 90 per cent said that they had accessed correctional health services; and 94 per cent said that they had accessed corrective industries.

The Hon. Dr A. CHESTERFIELD-EVANS: The surveys showing that inmates "had accessed" services do not ask whether the inmate has ever been seen by a case officer. It is a question of how many of those inmates have had access to the services and at a level to satisfy the need that they had. That is the question. They are not the same thing, are they?

Ms SUBIR: One of the difficulties is that services can be provided, but you cannot make people go to psychological counselling and you cannot make people go to AOD counselling, even if they know and we know that that is their problem. You cannot force them into that situation.

CHAIR: Nobody is suggesting that you would, but one would imagine that within a prison system, some cultural and educational program must be occurring generally that would make people even desire to seek counselling. These are people who are showing nil interest yet I think the community believes that if we are going to pay $160-odd per day to incarcerate these people, at some stage or other inmates will come in contact with programs that are delivered generally to make them confront their problems—programs that address drug and alcohol problems and assist them to protect themselves from, and to prevent the spread of, hepatitis C

Ms SUBIR: One of the linkages that we are putting in place for delivery and availability of services to inmates and their motivation to attend those deliveries is to identify that they need to address their behaviours to get through the classification system. We need to show that there is a benefit or motivation for them to address the issues that surround their criminal behaviours and take them back into the criminal justice system. By doing that we are trying to provide, if you like, the carrot. Why would they come along to these sorts of things? We want to create linkages with these sorts of system but if somebody has a fixed sentence and he or she knows that he or she will be in prison for two months, three months or four months no matter what he or she does in prison, it is very difficult. You cannot force them into attending.

CHAIR: I imagine that the committee is not interested in people being forced. What the committee is concerned about is that when people do not participate, you presume it is because they do not want to; but it might be that they do not understand, particularly if they have an intellectual disability. They might not even comprehend the very important need to get involved.

Ms SUBIR: I think that we identify inmates with an intellectual disability as a high-need group. The delivery of services to that particular group is a lot different to the services that are specifically targeted to low-need groups.

CHAIR: Do you mean 10 per cent or do you mean 12.5 per cent?

Ms SUBIR: The high-need groups are identified not only in terms of intellectual disability. They may be having some management problems; they may have a dual diagnosis or there may be a whole host of reasons. There is usually not just one reason about a plethora of reasons why a person is identified as having a high need at any given time. Certainly, women with an intellectual disability would go into that group. I accept that a group of people with an intellectual disability need to receive extra coaching or to be given extra time to explain to them why it would be beneficial for them to participate in those programs. I also accept that there still may be a reticence by women to participate in the programs that they are offered and that there are some inmates who would not know the full range of availability. I think that the reasons go across the whole gamut of the issue. It is not that they choose not to; it is perhaps that they do not know, and I think it is also probably a whole range of reasons in between.

The Hon. Dr A. CHESTERFIELD-EVANS: I come back to your statement of the reasons why they do not access the programs. You said that they receive fixed sentences. Do you suggest that if they gain remissions for participating in certain programs, that would encourage them? In other words, if they were rewarded for accessing these programs, they would be more likely to participate. Are you in favour of remissions? Can I conclude that from what you say?

Ms SUBIR: Remission is not there and it has not been considered. The department does not put in place remissions.

The Hon. Dr A. CHESTERFIELD-EVANS: Some members of the committee may be considering it. If we were, we would be interested in your opinion.

Ms SUBIR: When the remissions were in place, the range of programs that were available at that stage was not the same as the range of programs available now, so I cannot comment. Even looking backwards at what was happening when remissions were in, I cannot comment on whether that would work. I do not know.

The Hon. Dr A. CHESTERFIELD-EVANS: Where there more or fewer services?

Ms SUBIR: There were fewer services available then, so I do not know what the impact would be.

The Hon. Dr A. CHESTERFIELD-EVANS: Speaking of the importance of programs, what importance do you think a prisoner is likely to attach to a program when the prisoner makes an appointment to go and see an AOD at the prison and the appointment gets cancelled because there is a lockdown at the prison? Do you think that that communicates something to the prisoner about how important that program is?

Ms SUBIR: In as much as it interrupts the ability of the inmates to access those particular services, yes, I think it is a situation that none of us would like to see. Certainly, the AOD workers and the inmates would not like that situation to occur. We also have the problem of inmates deciding what their priorities are in relation to whether they go on a visit or see a psychologist. They have choices and they are responsible for making those choices.

CHAIR: Is it the role of your unit to advocate for women's needs within the Corrective Services bureaucracy and give that organisation the message that it does not necessarily want to hear?

Ms SUBIR: Yes.

CHAIR: What advocacy have you undertaken within Corrective Services to deal with the fact that there has not been group work done in Mulawa—a place that obviously has a high need for AOD work and where 50 per cent of the drug workers interviewed by this committee said that they are flat out and need more staff?

Ms SUBIR: I think it is more complex than just needing more staff. As discussed about Mulawa in general, you have a population that is way above what Mulawa was designed for. Mulawa certainly was not designed for the ability of Inmate Development Services [IDS] staff to do those programs. Within Mulawa, there are very limited facilities in which conducting group programs can occur because the gaol was not designed that way.

CHAIR: It took two years before we got to John Morony, and those people had to run the Drug Court program in the induction unit. They had to write programs, provide court reports and provide facilities within the prison to assist prisoners to deal with their alcohol and drug dependency. Out of 281 inmates in Mulawa, nearly every person has drug and alcohol problem. Simple mathematics would suggest that two people have absolutely no chance of meeting the incredible need that that problem is likely to generate, much less be able to affect the culture of the whole place to bring about some sort of focus on drug and alcohol problems. Group work is

an important part of what those people do but there has not been group work for more than six months, nor is there a likelihood or possibility of any group work in the future. The Government clearly has a focus on drugs as a health issue because it held a Drug Summit at the Parliament, so there is no lack of commitment from the point of view of the Government. Where has your advocacy been for the provision of at least a couple of extra staff in a situation that appears not to be one of high need, but one of extreme need?

Ms SUBIR: In the delivery of services, not only to Mulawa but to Emu Plains, we are in the process of identifying a system where the delivery of these services is co-ordinated not just in Mulawa but also in Emu Plains. I am involved in the development of that system with the programs manager of Mulawa and of Emu Plains. We are looking at the identification of need and maybe the reallocation of resources to meet that need, getting away from the traditional way of looking at the delivery of services, making it more program-oriented and making it fit the population that we know of at the time, and not what had traditionally been there. I am involved in that process. The Women's Services Unit will continue to be involved in the process of looking at services and how they are actually delivered to women in Mulawa, Emu Plains Bathurst and Grafton.

CHAIR: At what point do you say to Dr Keliher, who I presume is the person to whom you will ultimately make a submission, "There is no way two people can deal with that matter?" You are missing an Aboriginal person as it is. Clearly, they need more than two.

Ms SUBIR: I understand that they have had difficulty in recruiting an Aboriginal person to go into the gaol. Before I go to the commissioner and say, "We want more", we need to know why we want more and what we are going to do with them. More is not always the best.

The Hon JENNIFER GARDINER: Ten months after the Drug Summit?

The Hon. Dr A. CHESTERFIELD-EVANS: You referred to 200 and 208?

Ms McCOMISH: Can I just correct something? There are 2.5 drug and alcohol workers, four psychologists, three welfare officers, one SEO, two education officers and a number of part-time teachers. Although we have a drug and alcohol service, all those services provide services to Mulawa addressing alcohol and other drug issues because they are lifestyle issues. Often they are psychological issues and often they are issues to do with family connections and social support, in which you have a welfare officer involved. So there is, in fact, a significant range of program staff. The Women's Services Unit, as the advocacy unit, conducts a survey. It actually hears from a wide range of women; not just one, two or three giving evidence.

It also does a survey of the staff. It looks at program needs. It puts that up through me and we make recommendations. In fact, at Mulawa, just as Ms Subir has described, what is being looked at is a reallocation of resources. Our experience is that it is not a matter of simply providing more staff. The needs of the population are infinite. It is easy to put the responsibility onto someone else and say, "Well, if only we had 50 AOD councillors, we would be able to address these issues." Group work is happening now at Mulawa. It is unfortunate that they were reduced to two AOD workers. They do not have to supply services

for drugs authorised through the Corrections Health Service. We have already reallocated available resources there to ensure that there is better mainstream access.

CHAIR: So the induction unit is not involved?

Ms SUBIR: For the Drug Court program, no.

CHAIR: That is serviced by additional staff?

Ms SUBIR: That is serviced by Corrections Health Service.

Ms McCOMISH: Those things are important to take to the board. In my written submission I refer to the fact that, in the whole programs and services area, we are moving towards an integrated approach that relates to the needs of the population and the priorities for intervention rather than the traditional approach, which is that, if you have 200 women at a centre, you have two of everything. Well, why do you have two welfare officers, two psych workers, two AOD workers and two teachers? That is not a good rationale. You might need that many staff, but you might need at a reception office far more welfare officers than teachers, for example. That is the way we are moving. That has been in place for some time. There was no additional funding from the Drug Summit for specific additional AOD workers to Mulawa. In part that is because it has always been seen that, in relation to staff numbers, the women have been relatively well served compared to the men.

Ms LEE RHIANNON: Just on the Drug Summit, can you say how much money there was and what has changed since the Drug Summit?

Ms McCOMISH: How much money was allocated to the department overall?

Ms LEE RHIANNON: Yes, to the department.

Ms McCOMISH: That is actually in our submission. I cannot give you the figure overall, but it was dedicated to particular programs. Funding was provided for the capital works for a second transitional centre as part of targeting women with AOD problems in the transitional stage. Money was allocated to the department to increase the AOD services in specialised units. Money was allocated for drug detection services, as provided by both intelligence and drug dog detection teams. So money was allocated across a range of services. Money was also allocated jointly to CHS and Corrective Services for programs and services and to review all the AOD treatments and interventions. That review is under way. We would expect that also to inform us about where we need to target services and what is the best way of doing that.

The Hon. Dr A. CHESTERFIELD-EVANS: I refer to inmate development services. Which of those have had the best effect on recidivism rates, if you put money into one or the other? Have you done any sort of analysis of that?

Ms McCOMISH: Not comparing one professional group or input to another. We much prefer to look at the way in which they work together to provide a holistic program.

That is the way we are going rather than saying essentially that we need more of this particular group.

The Hon. Dr A. CHESTERFIELD-EVANS: Is there a prospective study into the long-term following of inmates through their records?

Ms McCOMISH: We have some prospective studies with particular identified groups where we have the potential to follow through. One of our problems, of course, is follow up in the community. We require a specified research design that targets a group. Let us say, for example, that we have a research design to look at the impact of our sex offender program strategy on recidivism and return to offending. We will also have it, to some extent, in the drug and alcohol area because that is one of the things this review will look at. One of the outcome factors that they will look at is the take up of drug and/or alcohol misuse. I would expect that one of the recommendations would be again that we are involved, together with the CHS and community and other departments, in following through and getting better outcome measures than we have now.

But it has been on select populations that we have been able to get that data. It is not really possible to tease out a factor and say, "If someone has accessed AOD services but has not accessed psychology, does that improve his or her chances of staying out of trouble when released into the community?" There would be a lot of problems with designing something like that. You would appreciate that, in terms of the ethics of withholding treatment, that may be necessary. Because they go across areas it is not possible to say, "He has AOD problems. Here is an AOD service that meets those problems. He will go to that service for that and he certainly will not go to welfare because the welfare problems are not such a priority." It is a mixed bag. Most of them have problems that need to be addressed by experts and specialists in a range of areas.

The Hon. Dr A. CHESTERFIELD-EVANS: One might be addressing, say, blood pressure, diabetes and so on in the population. Obviously, if you had problems, you would measure each of those things at a point of time and follow a prospective link. You would try to get as large a sample size as possible so that you got reasonable cell sizes in your variables. Is that actually occurring? I gather that the answer is no.

Ms McCOMISH: Not at that size. I think that, in an area that is essentially a social issue, it will actually be extremely difficult to do it in just that way. So we do end up with a global effect. Even if we put in the resources and we are able to follow through with a prospective study—we have a long-term study set up—because it relates to a return to offending we are looking at periods of five to 10 years in the community.

The Hon. Dr A. CHESTERFIELD-EVANS: But you would have a good capture rate of them all coming back. Presumably the Corrective Services database captures everybody who comes into prison.

Ms McCOMISH: But is that the issue, or is it further offending in the community, or a further use of drugs?

The Hon. Dr A. CHESTERFIELD-EVANS: It would be better if you could get more degrees. It is like having death as an end point of blood pressure, as opposed to strokes,

heart attacks and everything else. The one thing about death is that it is as nice and simple. It is sort of like going to gaol. It is a bit insensitive as a measure, but it is pretty reliable so far as it goes. Certainly it was difficult 30 years ago when you asked, "How serious is blood pressure as a problem?" You would have had to measure a lot of people for a long time to find out. It is very difficult. But the longest journey starts with the smallest step. It seems that there is an unwillingness to say, "Here is a database. Let us follow these people." These recidivist rates are pretty dreadful, are they not?

Ms McCOMISH: I do not think there is an unwillingness. I think it is complex and that more work needs to be done in looking at ways in which we could design such a study. But what I am saying is that it would be a global measure. It would not be possible to separate out the relative impact of all of these different services we provide because they are all multidisciplinary.

The Hon. Dr A. CHESTERFIELD-EVANS: They have managed to do that with the leukaemia drugs.

CHAIR: We still have not heard from Ms Pat Maurer. As she has come to this hearing we should listen to her presentation. At some stage we will have to organise some additional time to deal with those people who have come from Corrective Services. We appreciate that we have put Ms Subir through the grill but I am sure that she understands that the Committee is working to a time frame. I appreciate her assistance and co-operation.

(The witness withdrew)

PATRICIA MARGARET MAURER, Regional Aboriginal Project Officer, Department of Corrective Services, PO Box 31, Sydney, sworn and examined:

CHAIR: In what capacity are you appearing before the Committee today?

Ms MAURER: Since January I have been seconded and I am now the Indigenous Women's Statewide Project Officer.

CHAIR: For the Department of Corrective Services?

Ms MAURER: Yes.

CHAIR: Could you briefly outline your qualifications and experience which are relevant to this inquiry?

Ms MAURER: My substantive position as the Regional Aboriginal Employment Officer is to implement and monitor culturally appropriate programs for Aboriginal women in the centres. Basically, that position makes sure that all the disciplines and programs running in a correctional centre are appropriate in addressing the needs of Aboriginal women.

CHAIR: Have you received a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act?

Ms MAURER: I have.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Ms MAURER: I am.

CHAIR: If you should consider at any stage during your evidence that, in the public interest, certain evidence or documents you may wish to present should be heard or seen only by the Committee, the Committee will usually accede to your request and resolve into private session. I should warn you, however, that the Parliament has the power to override that decision at any time and to make your evidence public. Do you wish to make a presentation to the Committee?

Ms MAURER: Because a lot of these questions have actually been discussed with Ms Subir and Ms McComish it might be easier if you ask me questions.

CHAIR: It might be useful, first of all, to understand what the Regional Aboriginal Project Officer does within the Department of Corrective Services. I imagine that that is a job which has been designated for someone who has an indigenous background. Will you explain what the role and function of such an officer is?

Mrs MAURER: I am a Maori woman from Queensland, from the Wakka Wakka tribe. Basically I go into the centres at Mulawa, Emu Plains and Parramatta, on an average of two or three times a week. I look at the programs that are running in the correctional centres, including education, welfare, psychology and drug and alcohol [D and A] and make sure that the needs of

women are being addressed and appropriate information is available. I speak to the women on a daily basis. They come to me because I am getting to the age of being accepted as an elder in our culture. I converse with the women on any issue relating to the centre, such as a problem with a custodial officer, the disciplines of the Reiby Centre at Mulawa or any part of the centre. I then investigate those issues and take them to the governor. We try to work them out at a centre level. If not, I report to the regional commander, Mr John Klok. If I am not satisfied with an outcome, I take the problem directly to Ms McComish or straight to the Assistant Senior Commissioner, Mr Rod Woodham.

CHAIR: Are you satisfied that all the recommendations of the Royal Commission into Aboriginal Deaths in Custody have been implemented throughout the New South Wales correctional system?

Mrs MAURER: Yes. However, sometimes it appears that the recommendations are not adhered to. It is difficult to explain this. When dealing with Aboriginal women one has to know the culture and be involved in that culture. I agree with what Ms Subir said about programs and their implementation, but there are certain areas that Aboriginal women may not want to comply with, and they will not comply. I do not believe that statistics always give a true indication of what actually happens. Many Aboriginal women address the needs because they want to; but many do it only because it will help them when they have to go to parole. Statistics from drug and alcohol workers show X amount and then maybe another set of statistics shows a different amount.

CHAIR: According to Professor Chris Cuneen, Aboriginal women tend not to have the same access to community custody options. He said that their representations are proportionately much fewer than the remainder of the community. Do you have any idea is to what might drive that problem?

Mrs MAURER: Part of my position is to network with indigenous and non-indigenous community-based organisations. We have about four community-based Aboriginal organisations to which girls can go on release. Again, some women do not want to access those dwellings, for whatever reason. A lot of Aboriginal women from rural, remote and isolated areas do not want to access those; they want to go home. Aboriginal communities must work together to put those establishments in place so we have somewhere to send the women. If the communities do not get together—and at the moment they are not together—work around each other, and get funding to put together a place to send the women, women in general will not have the option of going to one of those establishments.

CHAIR: What is the Aboriginal pre- and post-release service? It seems from the briefing that it is reasonably new, and has been designed to increase access to employment, education and training. The briefing refers to available facilities. How many people provide the services?

Mrs MAURER: Three regions throughout New South Wales have pre- and post-release officers. In the north-east, north-west and south-west regions there are more pre-and post-release officers than in the metropolitan area because of the size of the area to be covered. I can speak only for the metropolitan area, which has two pre-and post-release officers. The officers get a list from welfare of the people who are soon to be released. They work with them on programs to obtain housing, employment and welfare and help with social interaction to get into them organisations and back into the community.

However, we also have a Yullawiri pre- and post-release program which was founded in Morisset. The officers approached the department, which has a partnership with the Yullawiri program. They work from Mulawa and Emu Plains. Last Saturday I returned from our first program, which was 30 kilometres north of Coffs Harbour. We had taken eight Aboriginal women from Emu Plains to a cultural awareness training camp for five days. The program officer, Cully Edwards, works with the women from Emu Plains and Mulawa correctional centres. The pre-and post-release programs for Aboriginal women, the incorporation of Yullawiri, is working very well. We now have women who will be undertaking a diploma in nursing home assistance. They are looking at housing programs, and the women will begin utilising a huge screen printing facility at Emu Plains. This has happened since last October. In that time we have moved forward with our pre-and post-release programs with Aboriginal women.

CHAIR: Are Aboriginal inmates who are tested for literacy or numeracy lost in the system? If so, how effective is it and what have been the results?

Mrs MAURER: I can answer only through knowing the women. Yes, there is a literacy and numeracy program, which is run through education. The success of the program comes back to whether they are willing to participate. A large majority of Aboriginal women have low standards of literacy and numeracy, which stems from the stolen generation. Education was not instilled in them as part of their lifestyle. On entering our centre, their shame at not being able to read or write is kept low-key. It is not that they do not wanted to participate, but they cannot. I encourage them and a couple have actually participated in university courses. A lot more Aboriginal women now understand why they should have literacy and numeracy as part of their program. Until the stolen generation has passed we will still have the difficulty of Aboriginal women being ashamed of not being able to read or write. That stems from their early childhood, not the fact that they have not had the option whilst in prison.

CHAIR: How many drug and alcohol workers are in women's prisons to assist people with indigenous backgrounds?

Mrs MAURER: At Mulawa there has been a bit of a problem in the past few months. An Aboriginal D and A worker who, for personal problems, left and was not replaced. However, on numerous occasions the department tried to get a non-indigenous person, one who was culturally appropriate, to fill that position. For some time a person was appointed. She responded very well to Aboriginal women, and they responded to her. Her main focus was group therapy, which worked very well. She has now moved on to the MRRC and another woman, of South Pacific culture, has taken her place temporarily. An Aboriginal person was appointed to work with the women. However, if you look at the statistics you will see that unless the women are willing to accept the problem which brought them into the centres, they will not access that person, whether she is Aboriginal or non-Aboriginal.

CHAIR: Are there any Aboriginal drug and alcohol workers in the female prison system?

Mrs MAURER: I can speak only for Mulawa and Emu Plains. The answer to your question is no.

CHAIR: How many people of Aboriginal background are appointed to work on IDS at Mulawa?

Mrs MAURER: One, Miss Vivian Scott, the Aboriginal Welfare Officer. There is no-one at Emu Plains.

CHAIR: The fact that there is one Koori D and A worker operating between Dubbo and Broken Hill, do you think that person has a realistic opportunity of addressing the many problems that exist there?

Mrs MAURER: I cannot answer that. In the Department of Corrective Services there are three identified RAPO—as we call them—positions. My location is metropolitan, so I could not answer what happens for the north-east region.

CHAIR: How many D and A positions in the female prison system have been identified as requiring specific indigenous persons to fill them?

Mrs MAURER: In D and A, only one at Mulawa.

CHAIR: Are there any Koori domestic violence workers at Mulawa or Emu Plains?

Mrs MAURER: There is one welfare worker. Some groups bring in external people to work with them. Sometimes they get Aboriginal community groups to work with them so that they have an involvement with their own culture.

CHAIR: Is any effort made within the Department of Corrective Services to research and study the specific post-release problems for people of Aboriginal background? Are you aware of any research? If so, has the department made any useful recommendations which may be helpful to this committee?

Mrs MAURER: In which area?

CHAIR: Has a study been undertaken of post-release problems of Aboriginal inmates on release in interfacing with parole, how well they complete parole, and whether they are successful in accessing housing and so on?

Mrs MAURER: I do not know if there have been any studies done, apart from the normal research of some studies at Mulawa about which Ms Subir was asked. Pre- and post-release I cannot answer fully because we have pre- and post-release officers in the department. Pre- and post-release does not really come under my guidelines. What we have, which has been really great in that area, is that the department, as of 12 months ago, has run what we call the mercy camp for Aboriginal women. We take 14 women from here to Goodooga in far northern New South Wales on a seven-day cultural awareness training camp with custodial and non-indigenous women inmates.

The reason we started that was that we got a bit of funding, which was to be a one-off, and we went to the department and said that this program was too good to give up. Within that program they are taught all the aspects of prior to leaving the centre and when they actually get out of incarceration. That is done with the elders in the area for the whole week they are there. They are taught all the social interaction. Welfare comes out and gives them talks. They have their blood pressure taken, diabetes and sugar levels checked, all to do with letting them know what is available out there and what can be. They have people that come in to talk about employment.

It is coming up to 12 months now that this program has operated. On that camp we have put 57 Aboriginal women and we have taken 51 departmental staff. Six of those women are still serving within our centre, they have not been released from that camp, and from that camp we have had four return. A lot of those women that have been on that camp have been reoffenders for quite a few years, even from juvenile justice. So, we are making headway with our programs. It becomes difficult because as much as I have the respect of Aboriginal women in the centre, I literally still cannot force them to go and take part in programs that are going to help them when they are on release. As much as we would like it to happen, it is a matter of their choice if at that time in their lives they feel they can accept the reason why they are there and deal with those issues.

Ms LEE RHIANNON: Considering the successful integration of prisoners into the community and the importance of maintaining links with the community while in jail, is it part of your work to assist visiting rights to prisoners? Do you have a budget for that? Is assistance given to people to travel to visit because I understand that often for people from Aboriginal communities it can mean travelling a long distance? Does that assistance extend not just to family members but to people in the community from where they came so they have some links? And do you have any comments on the visiting rights of children?

Mrs MAURER: No, it does not come under my statement of duties. That comes under the ideas staff as far as welfare is concerned. There is money available for that in the department. The family come down and visit the inmate and we reimburse them on moneys outlaid for the families to come down and see them. However, I can speak for Aboriginal people—but I would say it would be across the board for a lot of our women in total—that the socioeconomic status of people today is that they cannot afford to first pay out that money. A lot of our women that are from isolated, remote and rural areas are normally only serving a short sentence. By the time the family were to actually pay the money to come down, a lot have said they are back home anyhow. For the women that stay in for quite a while we have quite a few communities within those communities that actually bring the families down. They do not come to the department for reimbursement and they make their own choice of coming down to see the women. So, we have a lot that do not get to see their children and we have a lot that do.

Ms LEE RHIANNON: Are you saying that you do not believe it needs more money at the moment but you believe it is working?

Mrs MAURER: It definitely needs more money, of course it does. You could not say it does not, but the thing is that at the moment the situation is difficult because our women can only come to Mulawa or Emu Plains. Aboriginal men that are in the system have a variety of places to go to and normally the department tries to keep them as close as possible to their family members. When you look at New South Wales and see where the two women's prisons are, it is very difficult for families to make that transport down with children and everything.

Ms LEE RHIANNON: Why can they go only to Mulawa and Emu Plains?

Mrs MAURER: At the moment they are the only women's prisons that we have. We have Grafton, but that depends on overcrowding. For instance, if Grafton is full, as I said it is not in my region, but from memory if it has 20 beds it has to keep five over for people coming in from court. It may have a total of 15 beds for that day. Depending on what goes through the system that day, through the judges and magistrates, if it is overcrowded, it has no option but to send those women to Mulawa. It has nowhere to keep them. This is the problem we have. The same with Broken Hill. Broken Hill I think takes only maybe 10 women. If it is full, we cannot keep the women out there. Plus, Broken Hill cannot take women on methadone. You have to

look at all CHS of problems. So, you are stuck with bringing them back down into the metropolitan area.

Ms LEE RHIANNON: With Grafton and Broken Hill is preference given to Aboriginal women taking into consideration that they might come from more remote communities and it might be difficult for their families and friends to travel?

Mrs MAURER: It is, and that consideration is given to those women, but they may not meet the criteria. Depending on what the criteria is, they could keep them closer to their families, depending whether they end up in Mulawa or stay in Grafton.

(The witness withdrew)

(Luncheon adjournment)

PETER JAMES McDONALD, Acting Assistant Commissioner, Probation and Parole Service, Department of Corrective Services, Level 18, 24 Campbell Street, Sydney, sworn and examined:

CHAIR: Could you briefly outline your qualifications and experience as they are relevant to the Committee's inquiry?

Mr McDONALD: Yes. I have a Bachelor of Arts with majors in psychology and sociology. I have been with the Department of Corrective Services, and specifically the Probation and Parole Service, for 23 years. I have had substantial operational experience and management experience in the service over that period of time. My substantive position is regional director south for the Probation and Parole Service, which gives me responsibility for the southern part of New South Wales and south and south-western metropolitan Sydney.

CHAIR: Have you received a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act 1901?

Mr McDONALD: Yes, I have.

CHAIR: Are you conversant with the terms of reference for this inquiry?

Mr McDONALD: Yes, I am.

CHAIR: If you should consider at any stage during your evidence that in the public interest certain evidence or documents you may wish to present should be seen or heard only by the Committee, the Committee will usually accede to your request and resolve into private session. I should warn you, however, that the Parliament has the power to override that decision at any time and make your evidence public. Did you bring a written submission with you?

Mr McDONALD: No, I did not.

CHAIR: What you like to make a presentation to the Committee before you are asked questions?

Mr McDONALD: Yes. I would just like to make a brief presentation to the Committee just to orient you with the Probation and Parole Service and its place within the wider Department of Corrective Services. I am sure members of the Committee are aware of the details contained within the department's submission which talks essentially about alternatives to imprisonment. I do not wish to go through all of those but it is important to note that the Probation and Parole Service runs the majority of those alternatives to imprisonment. There are some 16,000-plus offenders currently being managed by the Probation and Parole Service across New South Wales.

They fit into the broader categories of probation orders provided by courts, people released under mandate by the Parole Board under the parole program, the management of the community service orders scheme, the management of the home detention program and the management of the Drug Court. In relation to those programs we also provide a range of pre-sentence assessments to courts prior to sentencing. In the last reported financial year the Probation and Parole Service wrote almost 22,800-plus pre-sentence reports to either the Local

Court jurisdiction or the District Court jurisdiction and we anticipate in the last calendar year having returned something in excess of 24,000 pre-sentence reports.

There is a relatively high degree of credibility in that program in providing sentencors with information as to possible options for managing people in the community before they are sentenced. I guess that is represented by the fact that that program has grown considerably over the last few years. In 1995-96 we were looking at writing 16,000 pre-sentence reports. That figure is now 24,000 and we anticipate in this financial year probably writing to the tune of 25,000 reports such is the demand and the increase in that demand. It might also be anticipated that that demand could increase with changes coming into effect on 3 April, which will require all sentencors to specify reasons where imprisonment of six months or less is being imposed. We would anticipate that the judiciary may further seek assistance in looking for alternatives.

There are approximately 460 operational staff providing those programs across New South Wales. We have encapsulated in our mission reducing the impact of crime on the community by effectively managing offenders and by decisively influencing sentencing and releasing decisions. In community corrections around the world over the last 15 years there has been a substantive shift in the way that those programs are managed, how those programs are evaluated and how those programs are delivered. The world in general has moved away from a welfare model of providing those services to much more a management model of managing risk and of targeting activity towards dealing with specific offender behaviour. It has been pioneered in Canada, it is well documented in the United Kingdom and various jurisdictions throughout Australia are going through that change process at the present time, which would loosely come under the framework of evidence-based practice as the label. We prefer to refer to it as a best practice model of intervention.

Essentially that means rather than having a one program fits all approach to dealing with offenders in the community, we target specific offenders and specific offending behaviour and deal with that in a programmed way. That may well be with an individual, it may be in concert with other services within the community or it may be a program that we may run ourselves with our own staff and/or we may reach out and get in contact with other community programs operating in the community to provide assistance. That gives you the nub of the activity of the organisation.

The other thing to focus on is that depending on measurements—and I am sure the Committee has been bombarded with statistics and interpretations of those statistics—we record that about 87 per cent of supervision orders, both probation and parole, are successfully completed, that 82 percent of community service orders are successfully completed and about 79 percent of home detention orders are successfully completed. That goes to the credibility of our ability to put people through specific offender programs in the community and get a successful outcome at the other end. I am not sure whether you would prefer me to address the questions or just work our way through them.

CHAIR: Are you able to indicate how many of your 460 staff would be supervising women prisoners? Is your service divided in that way or will a parole officer service whoever happens to be in their area?

Mr McDONALD: A parole officer supervises whoever happens to be in their area of expertise. There are two aspects to the parole program. There is the assessment of offenders prior to release to prison and providing advice to the Parole Board on that process. That clearly

relates only to the gaols that incarcerate women, Mulawa, Emu Plains and Grafton currently, but when women are released on parole, there are not specific people who provide a service to women offenders, partly as you would understand, despite the attention of this Committee, because women by far make up a very small percentage of the total population.

CHAIR: At any one time do you know how many women are under the supervision of the Probation and Parole Service? For example, we know the number of women in custody.

Mr McDONALD: I can give you a snapshot of that. The 6th June 1999 snapshot shows 173 women on parole. The Committee might be interested in other data showing that there are 1,400 women under probation supervision and 767 women on community service orders. The numbers on home detention are not quite clear from the statistics. The number quoted here is 70, but that would include people on bail supervision.

CHAIR: What proportion of prisoners discharged from gaol would be discharged to the supervision of the Probation and Parole Service?

Mr McDONALD: A much smaller number than the total. As you would appreciate the daily average gaol statistic of 7,000-plus currently is just that. I am not sure that I can actually bring that to my mind but we are looking at about 18,000 people who would go through the system in a one-year period.

CHAIR: Obviously, any prisoner whose sentence expires while that prisoner is in gaol or at the time of release will not have parole?

Mr McDONALD: That is correct, yes.

CHAIR: I have heard that prisoners on short sentences often do not have parole. If they do not have more than six months of a sentence to serve then they are unlikely to serve any parole.

Mr McDONALD: That is correct, they will not serve. The legislation, which will change on Monday, will not necessarily impact on that. Any sentence of fewer than six months will not carry what used to be called an additional term, but will now be called a non-parole period. The current numbers on parole are approximately 2,500. The Parole Board sits on approximately 1,000 parole cases per annum. But in addition to that a larger number of people are released on what we loosely call automatic parole. They have a sentence of fewer than three years, therefore the additional term to be served by way of parole is determined by the court and it is not refer to the Parole Board.

Those numbers are the order of about 1,500 per annum, which is a much smaller number than the total number. Some of discussion we have had about pre- and post- release services have focused on that group of people who, for the most part, are serving either very small or short sentences, such that the Probation and Parole Service often does not have any involvement with them.

CHAIR: Do we know what percentage of prisoners being discharged from gaol will have an involvement with the parole service afterwards?

Mr McDONALD: If you want an accurate figure I will have to take that question on notice, but we would be looking at something like 2, 500 over 18,000 as a rough proportion.

CHAIR: That is a very small percentage of people being discharged from prison. Possibly only 20 per cent would have parole and the other 80 per cent would walk out the door and their involvement with the Department of Corrective Services would finish?

Mr McDONALD: That is right.

CHAIR: Despite the fact that they have additional time to serve?

Mr McDONALD: No, they would not have additional time to serve.

CHAIR: They have a longer sentence, which the community would understand to be a part of the parole period, if you like. But many of them would not be supervised in anyway.

Mr McDONALD: The majority of people spend six or fewer months in gaol. Significant numbers of those, but not large, would have orders suspended while they were in gaol. They may already have a good behaviour bond but the court, in its wisdom, would not rule on the breach because the court would prefer that person to be under some level of supervision. That person may have a community service order, which would be held in abeyance while that person served a small period of time in gaol. But the majority of people within the system are released without supervision.

CHAIR: How often bought a person on parole meet with his or her parole officer? What form of supervision take?

Mr McDONALD: I hate to use the words "case management", but I will. It is determined by the case management plan. It is simple, cyclical process of assessment, delivery, evaluation and reassessment. The broad answer to your question is that someone is most at risk of reoffending when released from gaol on parole in the first three months of release. That is the critical period, and research supports that fairly substantially. We would envisage seeing that person at least once per week during the first three-month period. However, case management decisions are made about levels of risk. Offenders are released from gaol on parole, often quite nefarious people whom we know do not represent a major risk to the community.

We would make judgments on how often we need to see that person and what the level of case management intervention should be. But for the majority of people it is about once a week in that early three-month period. During that period assessments that were made within the gaol environment, which determine some level of case the planning, will respond to the environment in which offenders find themselves when they are in the community. That case plan will focus on what the offending behaviour was, what processes need to be put in place to support that offender and, even more importantly from our point of view, what processes need to be put in place to manage the risk to the community.

Ms LEE RHIANNON: You said you hate the words "case management". Can you tell us why?

Mr McDONALD: It is only because some issues were raised this morning about case management. The smile and the body language indicates that. I am not sure how well it is understood. I am happy to spend a fair bit of time going to it. That is why I defined the cycle for you. One of the issues in case management in managing someone in the community is to set an

objective about what issues we are seeking to achieve. It is quite individualised because each person comes with a unique set of circumstances, experiences and needs. The case management process is designed to set that objective and to timeframe the delivery of the objective. The evaluation of the process, which also needs to be timeframed, is how successful that has been.

CHAIR: Could you give us a rough idea of the objectives might be; a range of the sorts of things that are often considered as objectives for people on parole?

Mr McDONALD: If someone is coming out of gaol and has a drug or alcohol problem that has been documented within the gaol— that person may have participated in a program within the gaol— part of the case management process would be to identify the level of risk of that person, the level of risk for relapse, what resources are available within the community and what a realistic process might be for someone who has an entrenched heroin habit of 10-years standing and how that addiction will be managed within the community. Does that person need referral to the local methadone clinic? Does that person need referral to drug and alcohol counselling resources within the community? The probation and parole officer would need to decide whether the officer himself would provide the counselling if the level of risk was not high, and what other activities within the community would need to take place.

CHAIR: I take it that objectives could be associated with the management of the drug and alcohol problem?

Mr McDONALD: Yes.

CHAIR: Could they involve housing?

Mr McDONALD: They could involve housing.

CHAIR: Gaining and keeping employment?

Mr McDONALD: Yes. Associates and employment.

CHAIR: Maintaining or not maintaining links with certain associates?

Mr McDONALD: Yes.

CHAIR: I imagine that drug and alcohol problems might be supervised by testing, but how put a probation and parole officer know whether a person who had agreed not to associate with certain people was adhering to that agreement?

Mr McDONALD: That is a fairly good and insightful question. The bottom line is that ultimately the officer cannot prevent that activity from happening, but if it is part of the case plan, if it was agreed upon and if it was established that association with particular individuals was contrary to the prisoner maintaining a law-abiding lifestyle in the community, the activities of a probation parole officer are not limited to seeing an offender in one location. It also involves contact with the offenders family, the offenders associates and the significant others in an offender's life.

Through the process a range of information becomes available to the probation on parole officer, not least of which is the probation and parole officer, by dint of his occupation, has some

dealing with the criminal milieu and information comes from other probation and parole officers and other offenders, the family, significant others, contact with the intelligence officer from the local police and those range of networks. Who is picking up methadone from the local methadone clinic may give some indication of who is associated with whom. It is by no means a scientific process, but if that direction were given— to avoid seeing a specific person— consideration would have to be given as to whether that was serious enough to notify the Parole Board.

CHAIR: The Committee is concerned about women in prison. Evidence from Marilyn Chilvers from the New South Wales Bureau of Crime Statistics and Research stated that community-based sentencing options, including periodic detention and community service orders, had declined for women offenders. In relation to community service orders she reported that either period 1994 to 1998, when a prison population increased, community service orders for women halved from 26 to 13 per cent. It was also noted that the number of women on periodic detention also declined. Do you have any comment to make as wide as Trent may have occurred?

Mr McDONALD: Probably more than that. I want to disagree with it, but I think there are reasons why there might be some difference in statistics. Periodic detention is not a portfolio role of mine, but I have taken out some of the data so I will talk to that more generally. I can talk about the community service order program with a lot more detail. My understanding and later statistics reveal that something in the order of about 120 women are currently performing periodic detention orders. I am not totally up with the detail on that, but in March 1995 56 beds were available for women for periodic detention. There are some other aspects of that, which I will get to, all located at Emu Plains.

Now there are 168 female beds available for periodic detention, including the rural locations of Bathurst, Broken Hill, Mannus near Tumbarumba, Tomago at Newcastle and Wollongong. There is a substantial availability of beds for women to do periodic detention. My understanding is that the number of women in periodic detention has grown rather than decreased.

CHAIR: It had been observed that as the number of the prison in population has increased so has the number of people in periodic detention. The concern is that proportionately fewer people are doing community service orders than they used to be of the total prison population.

Mr McDONALD: I think that is true. Given the current prison numbers, the periodic detention numbers have not increased to the same degree.

CHAIR: He said in your evidence that one of the missions of your organisation was to encourage or impact on sentencing and encourage magistrates to use alternative services to imprisonment, such as community-based options. Is that your role? And if it is, it could be said that the Parole Service has not been wildly successful.

Mr McDONALD: In relation to periodic detention only?

CHAIR: Or community service orders. Why is it that the sentencing system seems to be making less use of your product than it used to?

Mr McDONALD: I think we have to look at the community service order scheme as well. In 1995 there were 606 women doing community service orders. In 1996 that went to 673, in 1997 to 672, which is not good, and in 1998 to 847. Throughout 1999, and up until now, those numbers have continued to grow. What has happened also during that period of time is that there has been a substantial change in the way in which fine default has been dealt with, and there is now a different system in place. So, in the period 1987 through to 1997 it was available to offenders to do community service orders as part of paying off a fine that had not otherwise been paid.

Because of decisions taken by government, there has been a change in the way in which that is done, and currently there are almost zero people doing community service work. I understand that is about to change through an initiative of Attorneys General. So that the total number of people, particularly women, actually doing community service work, if you put those two programs together, will be seen to have reduced. However, the actual number of women doing community service orders has been increasing year by year, and reasonably substantially. I mean, 847 in 1998 compared to 672 in 1997 is a reasonable increase in anyone's eyes.

The second part of the issue is that we are not on a marketing exercise, and the sentencers have made it very clear in our negotiations with them that they do not want us to make specific recommendations regarding sentences. What they want from us is an assessment of the availability of particular sentencing options for offenders when they seek advice from us. That is what we provide. You may say that because periodic detention has not increased to the same degree that that is a failure. I am not sure that I would accept that, because I think we have given the Committee evidence of a particular pre-sentence report of a woman who was charged with an offence such as driving whilst disqualified, and where the person imposing the sentence imposed a custodial sentence, when we had provided a report that proposed a full range of community options. I think the issue for us, in marketing community options, is to make sure that our community options are credible. I do not think we can take responsibility for what sentencors actually do.

CHAIR: Let me take that a further step. The Committee has not had any formal evidence from members of the judiciary, and I suspect that it is unlikely to receive any. But I had an informal discussion with a magistrate a few days ago in which it was indicated to me that some magistrates do not feel that community service options are very credible. I had described to me a circumstance in which a magistrate had made the observation that if offenders were put on a community service order, and essentially the duty of the day was cleaning up some place or something of that nature, those persons would have to be delivered by Corrective Services to the site, with perhaps some people from Probation and Parole arriving to commence the supervision and then leaving the prisoners to their own devices. The view of the magistrate was that magistrates are not convinced that when they put someone on a community service order the person was getting what everyone understood would be the case. Is it ever the case that people are provided with minimal supervision under a community service order, such as being taken to a site and being largely left to their own devices, or would that never happen?

Mr McDONALD: I suppose it is a long day when you say "never". Our particular guidelines and practices are that offenders, as part of their community service, make their own way to the site where the community service is to be rendered. The department would see it as its business to run the community service order scheme, and we do that in partnership with people in the community. For example, we have a partnership with the National Parks and Wildlife Service at La Perouse, where on a Sunday 10 people go out and do environmental work, such as

landscaping and cleaning up in the national parks in the La Perouse area. They are always supervised by a person from the National Parks and Wildlife Service. They are required to sign on and to sign off at the beginning and end, and we employ people on a sessional basis to do a spot checks of all our programs.

So, whilst I cannot say that it would never happen that people would be left to their own devices -- I am sure it probably has happened, because I am sure the learned magistrate has had some experience of that -- I have spoken to a number of magistrates who are very supportive of the community service order programs that are in place and of some of the innovative projects that are operating. There has been a partnership with Canterbury Council and others that has been running for more than a decade now. Again, that has been involvement in an environmental clean-up every Saturday in the environs of Cooks River. That normally involves about 50 people doing community service work. That is always supported by an employee from the council. That is part of the contribution of the council, apart from providing the equipment required and the necessary transport. That program is supported by two of our employees who are employed on a sessional basis. So I think it is probably an unfair criticism of probably one small aspect of the system.

CHAIR: Do people ever complete community service orders under the total supervision of Probation and Parole? In other words, would officers of the Probation and Parole Service always be present at the site at which the work is being done?

Mr McDONALD: No.

CHAIR: That would never happen?

Mr McDONALD: No.

CHAIR: Yesterday, Mr Tony Vinson provided the Committee with a proposal about an intensive level of supervision as an alternative to imprisonment for non-violent offenders who committed a first offence. Basically, the Committee was also told that the judiciary would need to understand that this was a very credible service under which people are supervised in much the same way as they would be were they in custody. At the moment, your service does not provide anything like that, by the sound of things. Do you see that as a viable and cheaper option, as well as a perhaps less damaging option, than incarcerating people who are not violent?

Mr McDONALD: The premise of the question is that people doing a community service order with an agency that we lack credibility, and that that agency would provide supervision and account back to us for the presence or otherwise of an offender. That is a long way short of saying that we do not provide credible programs.

CHAIR: I did not say that.

Mr McDONALD: I am sorry.

CHAIR: What I am saying is: Is there are an option in fact to enhance the program that you offer, so that it will be a program under which there is full supervision? Essentially, imprisonment is about depriving a person of liberty. It seems to me that one possible service that might be less damaging -- at least, this is what was put to the Committee yesterday -- would be a circumstance in which, instead of providing that quality of loss of liberty in a custodial setting, it

might be possible to have someone lose their liberty in a community setting simply by being under the constant supervision of someone from the Probation and Parole Service for an extensive period of time.

Mr McDONALD: To respond to that in a helpful fashion I would actually need to have a look at the detail of Dr Vinson's proposal.

CHAIR: Quite apart from Dr Vinson's proposal, dozens of constituents say to me, "Why don't you pick these people up, take them to the roadside and supervise them picking up papers and doing that sort of thing? That is what we want to see them doing." Obviously, you do not offer that sort of service. I know that some services are provided through other agencies, but some people in the community do not see that as being "in gaol" because obviously offenders who are working for the National Parks and Wildlife Service will have access to recreation, and if they are on a site they will go to a kiosk and interact with the community, and so on. If those persons were under the direct supervision of officers from Corrective Services all of the time, and were doing work in the community under the supervision of Corrective Services officers all of the time, as they would be in prison, then one would not have the bad effects that occur in a prison, such as meeting other criminals, not being able to maintain a job and obtaining guidance, and all the other things that happen in prison that generally seem to be damaging and not typical of what happens in the community anyway.

Mr McDONALD: I am not quite sure of the framework of that proposal. I hear what you are saying, but it seems to me that the bottom line is -- and I think the community accepts -- that imprisonment is a place of last resort, or that it should be. If someone does not need imprisonment, it is a question of the extent to which liberty is removed and of the impact of that on the person. If these were five-day-a-week operations on the side of the road, does the person reside at home? What happens about employment? What happens regarding recreational activities? What happens regarding social security and access to the work test? It is difficult for me to respond to a proposal that I have not seen in detail. The United Kingdom has a system of probation houses, of which there is some literature about, but, by the same token, while they are in existence, the prison population there has increased by something like 50 per cent. I would have to see the detail of the proposal. I am not someone who accepts or rejects proposals, but I just do not think I can give you credible advice without looking at how the planning would go together.

CHAIR: A report prepared by the Department of Corrective Services notes that only 4 per cent of Aboriginal women are placed on home detention orders. Other literature that the Committee has indicates that, as a category, Aboriginal women seem to be less involved with community service orders and so on. Would you like to comment on why it is that Aboriginal women seem to feature so relatively sparsely on these sorts of alternative-to-custody programs?

Mr McDONALD: What appears to be true from the detail that we have is that both Aboriginal men and Aboriginal women are not as strongly represented in community corrections programs as one might expect measured by their level of population within the wider community. I know that only 5 per cent of men and only 4 per cent of women doing home detention are Aboriginal. I think there are a couple of components to that. As the Committee would understand, home detention is still in its early rollout phase; it is only available in Sydney, Wollongong and Newcastle urban areas. There is just not the concentration of indigenous people within those areas.

The other aspect is that home detention, by dint of the legislation, has a number of essential criteria that would automatically excluded significant offences. There is a correlation between the level of violent Aboriginal offenders who are charged, even within urban areas, with offences that preclude them from the inclusion in the home detention scheme. I think there are other elements attached to it. Essentially, there is demographic evidence of the offending population and the resources available. But I would acknowledge that indigenous people have not done well in that particular program.

CHAIR: Does the Corrective Services Department have any plans to expand the home detention scheme in New South Wales?

Mr McDONALD: Yes, it does. There are two proposals, both of which are dependent on funding. The first proposal is, obviously, to extend the home detention program to the mid North Coast of New South Wales. As you know, there are significant indigenous populations in both the Taree and Kempsey areas which would be picked up in that process. There is also a proposal to look at the use of home detention as the final part of someone's serving of their sentence. In other words, the last aspect of their custodial sentence would be served at home. Both schemes will not progress unless there is funding for them to go ahead and that has not been determined at this stage.

CHAIR: The committee has also heard that post-release services for inmates are inadequate because of limited resources. This fact has been cited as a reason for a high recidivism rate among women soon after they leave prison. Could you comment on the adequacy of post-release services? How do you think that they could be improved?

Mr McDONALD: I think earlier this afternoon we spent a fair bit of time making a distinction between those people who are released on parole where there is actually a high level of servicing and those who leave prison for whom the department does not have a mandated responsibility once they are released. Do you want me to go through that?

CHAIR: No. I think that is fair enough.

Mr McDONALD: For those people who are released on parole, there is a high level of very restructured supervision. More recently we have re-released a policy to emphasise the management components of dealing with offenders on parole.

CHAIR: Apparently it is a fact that there has been a significant increase in the number of women being held on remand within gaols like Mulawa and some of these women are not guilty of violent crimes. It has been put to the committee that your section of Corrective Services could help more cheaply and, in a better setting, could manage these people in bail hostel as a means of reducing the inmate population. Would you like to comment on that proposal?

Mr McDONALD: I think there are two aspects to that. The first aspect is that the Probation and Parole Service had a program which was known as the Bail Assessment Supervision Program which was run in conjunction with the Supreme Court. In my experience a number of suggestions of that nature have been made over the last 20 years. What the research has always found is that, no matter what action is taken, there is not a great correlation between what the Probation and Parole Service could achieve and what the courts have been prepared to do in releasing people on bail.

We still operate the Bail Assessment Program and people are still released to the supervision of the Probation and Parole Service for management while they are out on bail. The

numbers are relatively small and it is not highly used by the judiciary. We actually withdrew from the program with the Supreme Court purely because of the lack of use. It was generally regarded by all parties that we were not able to add value because the Supreme Court felt, and all the evidence suggested, that the courts are fairly good gatekeepers in relation to bail.

On a number of occasions over the years we have also looked at the broader issue of bail hostels. More recently I have had contact with my counterpart in Western Australia in relation to that State's experience with a bail hostel. For Western Australia, it was not a positive experience. It was found in relation to the 24-bed bail hostel established in Western Australia, which also was designed to reduce prison numbers, that (a) it did not have that effect; (b) it was never able to fill the 24 beds in the bail hostel; (c) people who went to the bail hostel for the most part actually had accommodation elsewhere so it was just a ramping-up or a way of providing a tougher form of bail without someone actually going to gaol; and (d) people who breached the bail house rules for the most part when they returned to court were then released on bail in the community. After 12 years of operation, the Western Australians got out of the business because they believed it that it did not actually add any value and did not have any impact on the prison system. Essentially, those people who went into the hostel just added to the networking process.

The other thing that the Western Australians did was go into the business of forming relationships with community partners to provide bail beds. They were never ever taken up and, as I understand it, the program has now been abandoned. That broadly coincides with the research and the thoughts that we have found in looking at that issue ourselves. Certainly, the Western Australians experienced the other question that we have considered which was why Western Australia went to the rental bed process. No matter where we may put the bail hostel, unless there is a broad range of bail hostels—and Western Australia is a large state, as is New South Wales—people would be a long way from home.

CHAIR: Are there any formalities that have to be completed between a prisoner being released on parole and when they leave custody?

Mr McDONALD: Yes.

CHAIR: What are they?

Mr McDONALD: I guess the starting point is that when our prisoner is to be released on parole, their post-release plan are articulated before the Parole Board. The post-release plans rely very much on the broader issues of what the offending behaviour is; what, if any, resources might already be tapped into in the community; where that person is going to reside; with whom are that person will reside; and what employment or what methodology that person will rely on for their income. When the person is actually released from custody, there is a transition between the parole officer in the given institution—I will use Long Bay as an example—and the receiving probation officer in the community. When that person actually leaves the gaol, that person has clear, written directions as to what he or she is required to do, whom he or she is required to see and when.

CHAIR: Does the prisoner himself or herself ever enter into any sort of undertaking as well?

Mr McDONALD: They sign a release document undertaking what their obligations are

upon their release.

CHAIR: The case of a person named Carl Ringe has been brought to my attention. Apparently at Silverwater prison complex he was bashed into a state of unconsciousness on 9 February this year. Evidently, while he was in the brain injury ward at Westmead Hospital, somehow he managed to be transferred to the Probation and Parole Service, having previously been in the custody of Corrective Services. It is my understanding from the gentleman's family that that was done for some sort of compassionate reason. I am interested in how it is possible for that transfer of responsibility to take place, given that the prisoner was unconscious and obviously not able to sign documents agreeing to anything.

Mr McDONALD: I am familiar with the offender actually from a personal level. I am familiar with just the broad aspects of that case. I can give the committee just the broad details and that is as much as I can do. As I understand it, he was serving a four-month term which is very similar to the sentences of many of the people about whom we have been talking today. I think something like four weeks of that term remained and, as I understand it, there were issues in relation to what his state of health was. He was in Westmead Hospital such that decisions were taken and the Parole Board was contacted. I think there were concerns.

If a person is held in custody in an intensive care unit, a significant presence of correctional staff is required to deal with the security issues. Otherwise, the committee would be asking me other questions about that. As I understand it, Corrections Health provided some advice about whether or not Mr Ringe was in a particularly good state and whether or not it was appropriate, if his family visited—and I do not know whether they did or not—for him to be seen by family while surrounded by correctional staff. I am not sure about all the other detail that goes with that particular case, but I think it has been dealt with in other places.

CHAIR: Two concerns arise from that. Obviously if the gentleman had remained in the care of Corrective Services immediately after being discharged from hospital, he would have returned to a Corrective Services hospital and continued with his medication, health care and the matters of that nature. As I understand it, this prisoner was ultimately discharged from hospital without any medical help other than medical help that he had accessed himself. Do you not think that Corrective Services probably had some duty to make sure that this gentleman was adequately and properly looked after, given that his injuries resulted from a period when he was the under the care of Corrective Services?

Mr McDONALD: That question clearly seeks my opinion on that particular case about which I have some broad knowledge but not detailed knowledge.

CHAIR: If this fellow had died, would there have been a difference in how his death would have been treated in terms of being classified as a death in custody, if he had been subject to probation and parole rather than having been under the control of Corrective Services?

Mr McDONALD: I guess the simple facts are that had he died in custody, he would have been a death in custody. Had he died in the community, then he would have been a death in the community. As you would understand, the department is not happy and wants to do as much as possible to provide a safe environment for offenders in exercising its duty of care. Each death in custody is a concern for the department but I think it is possibly drawing the long bow to suggest that that is a motivation in this particular case. But I would have to get a whole lot more details to deal with that question in as effective a way as you might like.

CHAIR: From your observation, are home or periodic detention or community service orders being used by the courts as alternatives to imprisonment, as they are meant to be, or are they being used as an alternative to recognisance?

Mr McDONALD: Home detention has some legislated base, so that is pretty valuable. One of the processes in putting together the home detention program was—against, I might say, some substantial resistance—that the judiciary and magistracy were required to make a decision to imprison the offender. In other words, the offence had to be serious enough for them to impose a term of imprisonment before seeking to find out whether that person was assessed as appropriate to be considered for the home detention program. I think that that aspect of the legislation substantially deals with the net-widening issue. I think that argument would be a lot stronger if in fact the assessment was to come before the indication of sentence was given.

Sentencers are locked into the process now before dealing with the offence by home detention. Probation is certainly an alternative to imprisonment. Community service orders, as proposed under the legislation in 1979, were regarded as a lower step in the hierarchy before imprisonment and as an alternative to imprisonment. The original legislation provided for a relationship between a period in gaol and a number of community service order hours. Certainly in the United States, for example, those two factors were not seen as necessarily going together and the US would see reparation orders, such as community service orders, as a reasonable community-based alternative. There is not a clear relationship between the fact that breaches of a community service order always result in a sentence of imprisonment. I have spoken to the sentencers who say that it is not really their intention to put a person in imprisonment. They impose a community service order because they want to see that person make some reparation.

The Hon. Dr A. CHESTERFIELD-EVANS: It appears as though home detention has gone up as community service orders have gone down. But the total of the two is much the same. Is that not the case?

Mr McDONALD: No. I think home detention at the moment is something of the order of 158 offenders—between 158 and 160 at present. Community service orders, as we measure them, are higher now than they have ever been, if we take out the fine default order component, which is not what we are talking about here. But certainly community service orders are not growing in the same way that parole and probation orders are growing. In the last financial year probation orders grew by about 13 per cent and parole orders grew by about 8 per cent. Community service orders, by comparison, grew by about 4 per cent.

The Hon. Dr A. CHESTERFIELD-EVANS: So they are going down as a percentage, which seems odd if we are trying to keep people out of gaol?

Mr McDONALD: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: Or perhaps if we are trying to rehabilitate them?

Mr McDONALD: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: Community service orders represent work. They represent a certain modelling of behaviour that you might think was good.

Mr McDONALD: Yes. The legislation that will come into effect next week will also enable a sentencer, as part of a community service order, to nominate a specific number of hours as a program. So whereas previously, if a person appeared before a court for something simplistic like a drive whilst disqualified, he or she could only be given one sentence. You could give a person a probation order if you felt there were some issues that needed to be dealt with, or you could give a person a community service order, but you could not give a person both. Under the new legislation sentencers will actually be able to give a number of hours of community service orders, plus a number of hours of a development program, if they see that as a need.

The Hon. Dr A. CHESTERFIELD-EVANS: So, in the end, the success or failure of the program relates to whether the judiciary uses it. Perhaps the same could be said for bail hostels. If bail hostels are not filled when the gaols are a third full of people who are only on remand, bail hostels could be a lesser sentence if they were used as such, could they not?

Mr McDONALD: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: The implication of what you are saying is that bail hostels do not work very well, but they were not supported in the way the sentences were handed out. They were not made mandatory for people who would otherwise be in gaol. Presumably they were not used. You said they were never filled.

Mr McDONALD: What I said was that that was the experience in Western Australia. The department has done considerable research over recent years which, broadly, has been consistent with the Western Australian experience. There are other issues with bail. For example, home detention is available as a bail option in both Western Australia and South Australia. Whereas home detention as a prison sentence, which is served in the community as home detention, has a fairly high level of credibility, the bail component of that in Western Australia and South Australia is much more problematic for them. That is the place where they get the most failures.

The Hon. Dr A. CHESTERFIELD-EVANS: Surely that relates to the degree of supervision? You would be saving a lot of money compared to incarceration. If you want to do something you have to supervise it, is that not so?

Mr McDONALD: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: How good is the supervision in the parole system in New South Wales?

Mr McDONALD: It was good enough to ensure that 82 per cent of people who were released on a parole order successfully completed that order.

The Hon. Dr A. CHESTERFIELD-EVANS: My experience as a medical practitioner is that when people come in to have their urine checked by general practitioners [GPs], the system is basically a farce. People come in and aggressively say, "You had better

not supervise my urine. I am going to pass this urine and I expect it to be clean. Watch out for your surgery if it is not." If you ask for it to be passed either under supervision or immediately, there is a lot of resistance. Of course, that means that a large percentage of people get clean urine when they are not really being supervised at all. No doubt that helps the statistics and keeps the costs down, but it makes it something of a farce does it not? Is there any reason why it happens like that? Is the department aware of that?

Mr McDONALD: It is true to say that some offenders are nasty people sometimes. I do not know. I think your implication is that offenders harass general practitioners.

The Hon. Dr A. CHESTERFIELD-EVANS: My suggestion is that, if the department wants to seriously supervise urine analysis, it should not be done using GPs. I do not know whether it is a good idea to monitor people like that. But that is another question. If you are going to monitor it, you should not have a farcical system.

Mr McDONALD: I agree that you should not have a farcical system. The issue of urine analysis more generally is probably fairly problematic. We could probably put a fair bit of time this afternoon into discussing it. One of the issues about any urine analysis program is the chain of custody progress and how it is gone about. If GPs are used, what is the method of payment? Is it done through the Medicare system? There are a whole range of issues. Do GPs actually run a drug counselling service? If you are saying that people are going to a GP to have their urine checked and that there is no chain of custody, or there is no system, I would agree with you. That is farcical.

CHAIR: We will have to find another half day when people from Corrective Services can come back. This is really the Committee's first chance to have a good and detailed look at the question of parole. I guess we were a bit ambitious to think that we could deal with it in three-quarters of an hour.

(The witness withdrew)

CHRISTOPHER EVANS, Commander, New South Wales Police Service, Region Commander, Greater Hume Region, Level 6, Liverpool Town Centre, corner George and Moore streets, Liverpool, sworn and examined:

CHAIR: Are you appearing before the Committee in that capacity today?

Mr EVANS: Yes, representing the New South Wales Police Service.

CHAIR: Can you briefly outline your qualifications and experience which are relevant to this inquiry?

Mr EVANS: I joined the New South Wales Police Service as a cadet in 1966. In 1968 I was sworn in as a probationary constable. Since that time I have worked in the metropolitan and country areas of New South Wales. I have lived and worked in something like nine towns in New South Wales—from general duties to a detective, to a detective sergeant to an administrator, to a patrol commander at Moree, to a district commander at Tamworth and Dubbo, until my last appointment as Regional Commander, Greater Hume Region.

CHAIR: How long have you been a Greater Hume Region Commander?

Mr EVANS: The Police Service commenced a new restructure on 1 July 1997 and all the region commanders took up their positions on that day.

CHAIR: Have you received a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act?

Mr EVANS: Yes, I have.

CHAIR: Are you conversant with the terms of reference of this inquiry?

Mr EVANS: Yes.

CHAIR: If you should consider at any stage during your evidence that, in the public interest, certain evidence or documents that you may wish to present should be heard or seen only by the Committee, the Committee will usually agree to your request and resolve into a private session. I should warn you, however, that the Parliament has the power to override that decision at any time, and to make your evidence public. Marilyn Chilvers of the New South Wales Bureau of Crime Statistics and Research stated in evidence to the Committee that the reason for the increase in the remand population is that the number of persons arrested each year has increased by 37 per cent over the period July 1994 to June 1999. Arrests evidently went up from 8,800 a month to just over 12,000 a month during 1998-99. Are you able to explain or give any background as to the reasons why the number of arrests, particularly in relation to women, has taken place?

Mr EVANS: Yes. The Police Service focus currently is ethical cost-effective crime reduction. We do that in a number of ways. Firstly, we use targeted integrated and intelligence-based policing, which effectively means proactive policing. Maybe I should explain the difference. Every local area command in the State, of which there are 80, has a

first response policing agreement, which is negotiated between the commander and his staff. That basically indicates the minimum number of response vehicles that command requires every shift, every day of the week, to meet community demands; in other words, the calls for service. So, effectively, I refer to those police as reactive and to all other police at local area command as proactive.

Local area commanders tend to use as many proactive police as they can. They currently focus on three things: hot spots, that is, locations of crime where a crime has been committed at least three times in the past 12 months; repeat offenders, where a person has been arrested on three or more separate occasions in the past 12 months; and high risk victims, with again the same scenario where victims have been the victims of three different crimes over the last 12 months. The Police Service continues to have a pro-arrest policy for offences involving domestic violence. Whilst that is not new, it is certainly pushed regularly. We have new policies such as the Crimes Legislation Amendment (Police and Public Safety) Act and the Police Powers (Vehicles) Act 1998. Whilst neither of those specifically account for greater increases of people in custody, they certainly allow more face-to-face meetings with individuals, particularly those who might be wanted for outstanding warrants.

Most local area commands now have fingerprint gatherers, that is, police who are trained in gathering and photographing fingerprints at the scenes of crimes. Whilst it is only relatively new, there is plenty of evidence to suggest that we are having more success in clearing up property crimes, in particular, stolen motor vehicles and break, enter and steal, by identifying fingerprints at the scene. The police in charge of those investigations are notified that certain offenders are wanted by virtue of those fingerprints. That increases the number of people that we are arresting. We have a much better capacity now to form strike forces looking at particular crimes or particular areas of crimes.

By establishing proper terms of reference for those strike forces they tend not to be going off at a tangent; they tend to be continually targeting the people they are looking for or targeting the crimes that they are investigating. We have a particular focus on executing outstanding first instance warrants. I think that, as of today, there are about 62,000 outstanding first instance warrants in New South Wales. Whilst I cannot tell you the number of people that equates to, I noticed this morning that the amount of warrants that have been executed this year and the amount of offenders equals about three warrants per person. So, using that analogy, about 20,000 people in New South Wales are wanted for outstanding warrants.

So there are a variety of reasons why we would suggest that more people are in custody. As to why there are more women, I cannot really tell you. Our computerised operational policing system, or COPS, was developed some years ago as a crime reporting mechanism. It was not developed to give us information that we now find that we do need. However, recently we developed an enterprise data warehouse, or EDW, which we hope with more refinement in the not-to-distant future will be able to pull out those sorts of statistics that you are looking for.

CHAIR: Have there been any changes in the way in which police are trained or instructed to act in dealing with the public which might have increased the rate of arrest as opposed to the use of a court attendance notice?

Mr EVANS: Certainly there has been a change to how police work. They are given targets—people who are wanted—and tasking sheets. Each shift has specific things to do such as targeting hot spots, hot individuals or high-risk victims. As far as processing those people there has been a change, particularly with the introduction of field court attendance notices [FCANs]. If a police officer comes across a person committing an offence the police officer can use his or her discretion and decide to take no action, or give the person a caution. If the officer decides to take formal action there are three or four courses which can be taken. If it is a particular type of offence, most easily described as a traffic matter or parking infringement, a notice can be issued or an FCAN can be issued. Basically that is an on-the-spot document that says the person is to appear at court on a certain date. That notice is issued for a relatively minor offence if police are satisfied of the identity of the person and there are no fears that the person will not attend court.

Police can also issue a summons, which should be the first consideration. Summonses are not used as often as they should be because it is a rather cumbersome process. Police have to leave the offender, go to the police station, issue a breach and seek a summons from the court. An FCAN achieves the same purpose and, in fact, is issued on the spot. From personal experience FCANs were trialled at the Country Music Festival at Tamworth some years ago; the bad behaviour ceased immediately because the individual knew that he or she had to appear at court in the not-too-distant future. If it is decided that a FCAN is not appropriate, the person can be arrested and taken to the police station at which a court attendance notice will be issued rather than a field CAN. The value of the court attendance notice is that we can obtain fingerprints if we are not certain of the identity and do not need to issue bail. A lot of time is saved in that process.

Ultimately, the final action we can take is formal charging which involves arrest, taking the offender to the police station, processing through fingerprints and bailing. There should never be an instance of a person being arrested, charged and released on unconditional bail; instead, a court attendance notice should be issued. Certainly the focus has been to consider all options in that priority order and proceed to arrest as a last alternative.

CHAIR: What management procedures are in place to ensure that police officers are more likely to use a court attendance notice as opposed to the more routine business of arrest and charge?

Mr EVANS: Again, if a police officer turns up at a police station with an offender, there is a supervisor on duty, as well as the duty officer, who will monitor what goes on. By legislation there is also a custody manager who is appointed for the shift and it is his or her job to monitor all aspects of the individual in custody. It is the responsibility of the custody officer to make sure that proper duty of care is exercised and that the proper process of progressing the offender is followed. The custody manager will firstly make sure that the arresting officer has considered a field court attendance notice, then a court attendance notice. If there is a matter that requires a bail determination the matter will proceed to charging.

In 1994-95 a total of 102,500 people were charged with offences, and only 8 per cent were dealt with by court attendance notices. FCANs did not exist, only CANs. In 1998-99, 131,000 people were charged; 55 per cent of whom were dealt with by field court attendance notices or court attendance notices and only 45 per cent by formal charge. The FCAN is very convenient for use on the streets and the police are using FCANs and CANs a lot more frequently.

CHAIR: The Committee heard that one of the reasons for the increase of women in prison is because women are committing more violent offences. Is this supported by police data? What are the most common offences for which women are charged?

Mr EVANS: Again, I cannot be very helpful to the Committee. The word "violent" is difficult to explain because, for example, “robbery” includes the taking of property from a person with actual violence or with a threat of violence. The COPS does not allow for this sort of download so any figures I give would be inaccurate and thus treated with suspicion. However, preliminary figures indicate that in 1999 robbery was the most frequent offence committed by women followed by fraud and stealing from a retail store—in other words shoplifting—which were equally second. Break enter and steal and common assault as well as goods in custody, or receiving, were about equal third.

CHAIR: From your database are you able to tell whether the women were primary offenders or co-offenders? It has been put to the Committee that a lot of women are charged with serious offences because they were accompanying a male offender who was committing a more serious offence.

Mr EVANS: I cannot tell you, nor can I tell you for males.

CHAIR: Can you explain what diversionary programs are available for adults that police are currently involved in and how effective they are in reducing criminal activity and recidivism?

Mr EVANS: Simply put, sir, few. The cannabis cautioning scheme, which came as a result of the New South Wales Government's Drug Summit is undergoing a 12 months trial which commences next Monday. That will provide for a formal cautioning of adult offenders apprehended for minor cannabis offences. As a result of the Drug Summit a drug offenders compulsory treatment pilot will commence running in the Illawarra and Far North Coast areas on 3 July. I have some information on it. Probably the longest one, the most recent one, is the New South Wales Drug Court which we participate in. I was a member of the working party that set up the Drug Court and we have a police officer attached to it.

At the very basic level we have police discretion. As I indicated earlier, if police detect someone committing an offence quite clearly we would not be using those two options of no procedure or no charging if the offender has a previous record or required to appear at court. Field CANs are not a diversionary program but another process we have. We really have very few, and earlier I mentioned the perpetrator programs for victims of domestic violence. We have a pro-arrest policy for people who commit assaults in relation to domestic violence. Currently there are very few, if any, perpetrator programs in New South Wales; one is still being developed.

CHAIR: Would it be fair to say that the pro-arrest policy on domestic violence is likely to result in an increase in women being held?

Mr EVANS: Not at all.

CHAIR: It has been put to this Committee and many others that Aboriginal people traditionally enter the criminal justice system largely through the Summary Offences Act particularly in regard to obscene language or drunkenness and through consequent charges of resisting arrest and assaulting police. Given that the Police Service now has programs and courses

to make officers culturally sensitive to Aboriginal people, has the Police Service observed any significant reduction in these charges?

Mr EVANS: Again, our system does not allow us to provide much useful information to your Committee, sir. However, there is cause for optimism. In 1998-99 60 per cent of non-Aboriginal offenders for offensive language were dealt with by FCANs. At the same time 50 per cent of Aboriginal offenders were dealt with. So, there is still a 10 per cent difference but I suspect that four years ago there would have been a far greater difference. It is a vexed question for police. Aboriginal women are entitled to live in a community free of violence, fear and crime. Invariably police have to resolve issues.

The organisation has done a great deal as far as education and training of police through the Police Academy, through the employment of Aboriginal community liaison officers and expanding that program. We are endeavouring to improve the overrepresentation of Aboriginal people in custody. I am not saying we have got it completely right yet. Recently we obtained access to the Aboriginal Justice Advisory Council report released in September 1999. Obviously it contains recommendations that we are currently considering, which may assist us in improving how we deal with Aboriginal people.

CHAIR: What do you call the evaluation sessions which are held within the Police Service under which the equivalent of area commanders are asked to discuss their programs?

Mr EVANS: Operations and crime review panels [OCRs].

CHAIR: They were the subject of discussion in another Committee of which I was a member. Commander Ike Ellis gave a description of those and immediately after that Professor Chris Cuneen, another witness, gave evidence that he had attended them also. He said that overwhelmingly the evaluation is one in which more arrests result in the commander being viewed in a more favourable light. This procedure may well have been something which has made police officers focus more on arrest. That seems to be the currency which is most valuable. Professor Cuneen said that they were arrest focused. Is that your understanding?

Mr EVANS: More focused on targeting repeat offenders. The commissioner and his executive team examine a number of local area commanders in relation to assaults, stealing motor vehicles, break enter and steal, and stealing. Between 95 and 97 per cent of all victims of crime come from those five crime categories. Quite clearly if we can reduce the number of those crimes we are reducing the victims of crime across the State. Certainly the OCR focuses on targeting repeat offenders. That does not necessarily mean arrest. As the commissioner has said more than once, our targeting of recidivist offenders gives them a number of choices; they can move interstate, stop committing crime or continue committing crime with us in their face. It is more about targeting repeat offenders than arrest, per se. I guess it follows that if we are to target repeat offenders who have chosen the latter option and continue to commit crime, naturally that will result in more arrests of those individuals.

CHAIR: Professor Cuneen said during this evaluation that it was not likely that a court attendance notice might have quite the same value as an arrest. Is that your understanding?

Mr EVANS: No, not at all. The commissioner does not demand arrest as an alternative to a field court attendance notice. It is a matter of dealing with repeat offenders in the most appropriate way.

CHAIR: Similarly with regard to diversion. If the police officer had diverted an offender out of the criminal justice system altogether, Professor Cuneen thought that that might reduce the number of arrests in that patrol and the valuation might not necessarily be seen as favourable.

Mr EVANS: I am not sure what that would have been, apart from involving a juvenile.

CHAIR: Certainly, with regard to juveniles.

Mr EVANS: Certainly with juveniles we have legislative requirements to consider other options before we charge, but certainly not with adults.

CHAIR: How is the commander of a local region going to get credit? He could say, "We have intervened in lots of crime, but we had Diverted all these juveniles and given them cautions" but he may have to compete with someone who has lost of arrests. Is that going to be a problem?

Mr EVANS: No, there is no competition. I have been to ComStat where OCR was born in New York. The bottom line is that no commander in New York got the sack for having crime. He got the sack for having crime and not knowing he had it and, therefore, not doing anything about it. The OCR was born from that. Again, police are required to consider diversionary programs for youth. Under our new system of enterprise data warehouse we can now collate the instances where that is happening. Under COPS we could not because we were not allowed to put certain warnings on that system. However, with some amendments we are able to do that. Now the commissioner will be able to have on his screen the number of juveniles dealt with by warning, caution, conferencing or, indeed, arrests. Certainly, commanders will not be penalised for dealing with juveniles in the appropriate way.

Ms LEE RHIANNON: You spoke about targets. Where you talking about targets as in the number of arrests a police officer had to make?

Mr EVANS: No.

Ms LEE RHIANNON: Or were you talking about targeting areas?

Mr EVANS: Target areas and individuals. For example, it might be the railway station at Macquarie Fields where a lot of motor vehicle thefts or thefts from motor vehicles occur. They will be required to target that particular railway station as a proactive policing initiative.

The Hon. Dr A. CHESTERFIELD-EVANS: If police have their index of success as being the number of arrests and then presumably they go to court or to some further referral action, that place, the court or whatever, may put in place other social strategies to deal with the crime, or the police may be the other action that takes diversionary action at the time when they would have arrested the person. In other words, when they first apprehend the person they can either refer them for action, that is, "We have a high arrest rate, now you guys put the program in place" or, "We are the program. We will divert you before we charge you." Which way do you see the police fitting into a view of fixing the problem without putting people in gaol, which is what this Committee is all about?

Mr EVANS: We have no arrest index. We do not work on arrest as any sort of index. As far as the Operations and Crime Review [OCR] is concerned, every one of the 80 local area

commands in the State is graded on the number of offences in the five particular crime categories I have nominated. In other words, Bankstown invariably is number one in the State because it has the most assaults, break, enter and steals, stolen cars, robberies and stealings. Mudgee is always number 80 because it has the least of all of those. It is quite simply a mathematical number of who has got the most. When we talk about the top 20, that is the top 20 crime areas. There is no index of arrests or whichever way we process people, whichever way we divert juveniles. We do not count that as far as an index goes.

The Hon. Dr A. CHESTERFIELD-EVANS: Say you went to an area and due to wonderful interpersonal skills you diverted all the kids to useful and beneficial things and did not put any in gaol, that would not be noticed in the statistics?

Mr EVANS: I would hope that the number of offences committed by kids would have been reduced.

The Hon. Dr A. CHESTERFIELD-EVANS: It would be if you did not arrest them.

Mr EVANS: No, it would be a matter of reporting. One would hope the report of crimes goes down because the kids who have been identified as committing those crimes are now out of the system. Therefore, one would hope the crime would drop proportionately.

The Hon. Dr A. CHESTERFIELD-EVANS: So you have two separate statistics and you balance them?

Mr EVANS: Yes.

The Hon. Dr A. CHESTERFIELD-EVANS: Do you have data on the different strategies you might use to get what you want? Obviously you would want both to drop?

Mr EVANS: It is difficult to measure which strategy was the successful one if you are doing a number of different strategies. One thing we have not been good at is measuring our success or determining which strategy was the most successful. All we can say is that it seems that by targeting offenders, by trying to target hardening repeated victims and targeting hot spots that we seem to be in the process of getting crime down below the 1996 levels. I think Don Weatherburn commented recently that it was the first time in whatever period that crime had gone down rather than up. There is sufficient anecdotal evidence to suggest the way we are doing it is working.

The Hon. Dr A. CHESTERFIELD-EVANS: Is it true as it was stated in New York that if you target repeat offenders and stick them all in gaol that you get crime down for a short period but you harden them up and they all bounce back? Is that true in New York and, if so, is it in danger of happening here?

Mr EVANS: In a number of cases, quite clearly by putting certain individuals in gaol we are just giving the community a temporary respite.

The Hon. Dr A. CHESTERFIELD-EVANS: Obviously for some people?

Mr EVANS: Absolutely.

The Hon. Dr A. CHESTERFIELD-EVANS: But you cannot draw a conclusion from that?

Mr EVANS: No.

The Hon. Dr A. CHESTERFIELD-EVANS: Obviously you cannot put everyone in gaol?

Mr EVANS: No.

The Hon. Dr A. CHESTERFIELD-EVANS: If you did, there would be a bounce-back phenomenon that would be fairly horrendous?

Mr EVANS: Absolutely. I am not suggesting gaol as the ultimate answer, but regrettably there seems to be little else that seems to be working.

The Hon. Dr A. CHESTERFIELD-EVANS: So you are not impressed with alternatives to jail?

Mr EVANS: Absolutely.

The Hon. Dr A. CHESTERFIELD-EVANS: You have said there are not many of them, have you not?

Mr EVANS: Yes. I was a great proponent of the Drug Court and whilst I did not go to the United States of America to study the Drug Court, I have read a fair bit of literature. If we can just turn around one or two drug addicts who commit, I think Don Weatherburn says, 10 or 12 break and enters for every hit of heroin they buy, that is 10 or 12 victims per day that we will not have. It is a long, slow road and they are only very little pieces, but every little bit makes a difference.

The Hon. Dr A. CHESTERFIELD-EVANS: Is there any danger in your strategy of targeting repeat offenders, that certain people, once they have crossed the law, will never get away from it? I suppose I am alluding to the harassment allegation.

Mr EVANS: The fact that we are allegedly harassing them; we are not causing them to commit more crime. They choose to do that. We just choose to try to be present when they choose to do that.

The Hon. Dr A. CHESTERFIELD-EVANS: You say, "This bloke is likely to commit a crime, let's go to where he would be." Do you follow them?

Mr EVANS: Absolutely. His history indicates he has been a repeat offender. In most cases, particularly in my region and in most of the metropolitan area, the local area commanders cannot even concentrate on those who have been arrested three times in the last 12 months. They go up to five or seven times in the last 12 months because they do not have the resources to pursue the individuals who have been arrested only three times in the last year. So, they would be looking at arrests of five to seven times in the last 12 months. They profile those offenders and profile what crimes they commit and what areas they work in. We certainly visit them.

The Hon. Dr A. CHESTERFIELD-EVANS: But once you are on that list you would be a certainty. If you had been arrested more than five times, and you were targeting people who had more than five, the next three crimes you committed you would get nabbed on whereas the bloke who had committed three would not have reached the critical mass where he had a policeman walking behind him wherever went?

Mr EVANS: It is a matter of resources. You are right. But one would hope that person who has five or seven offences in the last 12 months, for the next one he commits we are there.

CHAIR: A little earlier I was asking you about the OCR process. I have a transcript of evidence of Mr Cuneen's comments. He said:

> I am basing this only on the experience of the one OCR process that I went to, but colleagues of mine have been to more than one and it seems to me that the overall emphasis is on crime reduction through arrest. That is where local area commanders get their brownie points, if you like, and that is what they are congratulated on. You do not get the impression that they are going to be congratulated in the same way on increasing the level of diversion or increasing the level of cautioning. The whole focus is on crime problems and arrest. The process is with telecommunications and the technology of flashing up particular areas of local command and saying, "There are X number of bag snatchers in that corner. What are you doing about it?" That is the sort of focus on questioning that goes on.

Is that an accurate observation of the OCR process?

Mr EVANS: The focus is on ethical cost-effective crime reduction. That does not have to be by arrest. It may be by target-hardening premises or victims so that it is no longer acceptable or possible for the offender to commit crime in those particular areas. I cannot recall specific arrest numbers. Certainly court process is put up on the screen and that is the number of people processed at courts through field CANs, CANs and charges but the principal philosophy is driving down crime. Commanders are asked to identify what strategies you are using to help drive down those five crime categories from which most if not all victims of crime come.

CHAIR: Mr Cuneen said further:

> I have also attended the operational crime reviews, and it seems to me that there is a very strong focus on crime reduction through the process of arrest and charge, which does not leave much room for crime prevention through other sort of mechanisms that might involve community input. That is an important point.
>
> The New South Wales Police Service has an Aboriginal strategic plan, but it has other plans as well. They can be in conflict with each other, and the Aboriginal strategic plan may come out second best in terms of the overall strategies of the service at the moment.

Do you believe the focus on arrest and crime reduction through arrest might be having an adverse impact on the Aboriginal community?

Mr EVANS: It certainly is a dilemma. The focus is on targeting repeat offenders who have been arrested for at least three crimes in the last 12 months. There is sufficient evidence to suggest that 80 per cent of those five crimes is committed by 20 per cent of offenders. We make no apology for targeting those offenders who are committing 80 per cent of those particular five crimes. Certainly, the dilemma of Aboriginal people is one that we consider. Again, as I said earlier, our strategic plan acknowledges that Aboriginal women have the right to live in a society and community free of violence, crime and fear.

The Hon. Dr A. CHESTERFIELD-EVANS: By the sound of your approach you are quite proud of this record, is that fair to say? Do you believe you are making headway?

Mr EVANS: I think the service ought to be proud of the fact that it is focused for the first time.

The Hon. Dr A. CHESTERFIELD-EVANS: Do you believe it has a better plan than it has ever had?

Mr EVANS: Absolutely. The figures show that. Despite our rising population, despite our increased mobility, despite the increase in urban areas, we are still managing to at least contain crime and in some cases take it down.

The Hon. Dr A. CHESTERFIELD-EVANS: Certainly I do not believe that we should lessen our crime rate by having an effete police force. That seems a silly way of going about it.

Mr EVANS: Indeed.

The Hon. Dr A. CHESTERFIELD-EVANS: Obviously we would like prevention and less people in gaol.

Mr EVANS: Absolutely. That is our first goal.

(The witness withdrew)

FIONA POWER, Co-ordinator, Women's and Girls' Emergency Centre, confirmed and examined:

CHAIR: In what capacity are you appearing before the Committee?

Ms POWER: As Co-ordinator of the Women's and Girls' Emergency Centre.

CHAIR: Would you briefly outline your qualifications and experience relevant to this inquiry?

Ms POWER: As I said, I am the co-ordinator of a drop-in centre for homeless women. My qualifications are that I am a social worker and have been employed in the field for 10 years.

CHAIR: Have you received a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act?

Ms POWER: Yes, I have.

CHAIR: Are you conversant with the terms of reference for this inquiry?

Ms POWER: Yes, I am.

CHAIR: If you should consider at any stage during your evidence that in the public interest certain evidence or documents you may wish to present should be heard or seen only by the Committee, the Committee would usually accede to your request and resolve into private session. I should warn you, however, that the Parliament has the power to override that decision at any time and make your evidence public. Do you have a written submission?

Ms POWER: No, I do not.

CHAIR: Would you care to make some comments to the Committee before we ask questions?

Ms POWER: Yes, I would. Basically, the reason that we chose to make a submission and to attend this hearing was that we had some concerns about the relationship between the building of the new prison and the incarceration of women and our client group, which is predominantly homeless women. We have noticed a direct correlation between the rates of chronic long-term homelessness among our clients who have histories of incarceration and we have also noticed there is a cycle in that women who have been homeless are more likely to experience incarceration and when they are released they are more likely to become homeless again. I guess that is the main reason we wanted to make a submission to the inquiry.

CHAIR: Can you explain the services offered by your centre, how long the centre has been operating and where it receives its funding?

Ms POWER: We are a drop-in centre for homeless women or women who are in unstable circumstances. We have been operating since 1975 and our funding is from the Department of Community Services through the SAAP program.

CHAIR: Where does your service operate from?

Ms POWER: We take clients from all over the metropolitan area but we are based in Surry Hills.

CHAIR: Has the dramatic rise in the female prison population impacted on your service and, if so, in what way?

Ms POWER: There has been an increase in the number of clients with a history of incarceration. As I said previously, we have also been aware that our clients are particularly vulnerable to incarceration. Because they are homeless their activities are more visible to law enforcement and they are more likely to get a custodial sentence. The sorts of offences that they commit tend to be reasonably minor offences but they do tend to be repeat offenders and because of their homeless status, they are less likely to be offered alternatives. They are more likely to come to the attention of the police and they are more likely to be charged rather than cautioned and because they have a history of repeat offences, they are more likely to receive custodial sentences.

CHAIR: Have any of your clients been affected by not being able to make bail when they have been arrested?

Ms POWER: That is one issue. They have been particularly affected by not being able to give addresses and by not having sufficient forms of identification.

CHAIR: Are there other ways in which homelessness has an impact on whether or not your clients are likely to find themselves within the criminal justice system and what form that impact might take?

Ms POWER: There are a few different issues there. I do not know if the Committee is aware that the reality is that there are not enough supported accommodation emergency services and there is not enough cheaply priced accommodation available in the inner city so that our clients can all be housed. They do remain homeless for quite long periods of time and do not have access to any kind of housing. This has an impact on their ability to survive. Most of them are on benefits or if they cannot produce suitable forms of identification, they are living in severe poverty and obviously are more likely to be tempted to commit crimes, particularly property crimes, theft and other break and enter type crimes. Their poverty and homelessness have a direct impact on whether or not they choose to commit crime.

A lot of our clients also suffer from mental illness. Regardless of that, they are still unable to be housed. There are not sufficient housing programs for people with mental illness to accommodate our clients so their mental illnesses also have any impact on the likelihood of them committing crime, as well as drug and alcohol issues. A great many of our clients have drug and alcohol problems. Due to the lack of services for them, they also are in a position where they are more likely to be tempted to commit crimes.

CHAIR: Would you like your submission to be taken as part of your formal evidence?

Ms POWER: Yes.

CHAIR: Your submission states that women who have experienced incarceration make up a large proportion of clients who are chronically homeless. Why do you think that there is such a high rate of homelessness among women who have been incarcerated?

Ms POWER: There are several issues there. There is a lack of outreach and support services for women who have left custody. There is also a lack of basic accommodation services so women who are leaving prison often find they are starting out homeless again. They are also labouring under the stigma of having been incarcerated. Institutionalisation plays a very big part. In particular, women who have served long sentences are not being given the services in prison to help them adjust to independent living in the outside world. Many of them have become institutionalised and do not have the living skills to be able to live independently. Without outreach and support services they find they are not able to maintain their housing and even if they are able to find housing, they often lose it very quickly.

There is a stigma and a lot of women who have entered prison with mental health issues may not have been given treatment. The mental health condition of many of our clients is not even identified while they are in prison and it was never taken into consideration in sentencing. They went into prison with a mental health issue, they received no treatment or services and when they came out they still had the mental health issue that was related to the crime they committed in the first place. They are trying to live on the streets independently with an undiagnosed mental health issue.

Women with drug and alcohol problems also may either have not received treatment in prison or may have difficulty in maintaining abstinence or methadone once they get out. Because there is not the outreach service to support them and there is a lack of places within drug and alcohol treatment programs in the mainstream they quickly become homeless again.

CHAIR: Clients who contributed to your submission stated that overcrowding and substandard conditions in Mulawa need to be addressed in some way. They described having to share cells with up to four women in squalid conditions. In light of these comments, do you consider the construction of a new women's prison to be the only practical alternative to the increasing number of women in prison?

Ms POWER: No, I do not, to be honest. I actually think that diversionary programs would be an alternative to increasing the number. One of our concerns is that by building the new prison and increasing the number of beds the State is locking itself into a policy of incarceration and not putting the research and funding into other sorts of programs that particularly with our client group would be much more effective.

CHAIR: How does a person who is homeless become the beneficiary of a diversionary program such as community services?

Ms POWER: There is the possibility of other sorts of programs. I know that programs exist in America where people can do types of home detention in houses that are like supported hostels in which people are required to take part in certain activities but they are also housed and diverted into treatment programs. It addresses their homelessness and the requirements of their conditions.

CHAIR: Do you have clients who find themselves before the courts charged with some offence and then find themselves released on recognisance?

Ms POWER: No, very seldom because they are considered to be a poor risk.

CHAIR: One of the points made against the idea of a bail hostel was that the net widens. I would have thought that for your clients that might have been a risk, given that they arrive in court without a home and the magistrate then has to choose between returning them to the streets or gaol and if he or she had to choose between returning them to the streets, gaol or put them in a nice cosy bail hostel for a while, the magistrate may choose the bail hostel as a compassionate means of ensuring that they have a roof over their head, thus having a net-widening impact. Is that something that would be of concern to you if the State were to have bail hostels?

Ms POWER: That was a very long question and I have actually lost the thread of it, I am sorry. I understand what you mean by a bail hostel.

CHAIR: A bail hostel might be seen by the criminal justice system as just what your homeless clients need, so instead of being discharged from the court, they will be given access to a bail hostel as a rather bizarre social welfare response.

Ms POWER: I understand what you are saying.

CHAIR: So if Corrective Services had to choose to reduce the prison population and have bail hostels, it may be that the people who find themselves in there are your clients?

Ms POWER: I cannot answer that because that is projecting into the future. I think you raise a good point but I cannot answer one way or the other.

CHAIR: From your experience can you comment on the adequacy or otherwise, of support services for women within prison and particularly post-release services such as access to drug and alcohol programs, mental health services and accommodation? The Committee would like you to give concrete examples of clients who have had difficulty accessing post-release programs which would have been beneficial had they been available, without necessarily naming the clients.

Ms POWER: The first part of the question relates to in prison and certainly all of the women we spoke to when we were writing the submission highlighted the inadequacy of the programs within prison, particularly Mulawa but also within the Mum Shirl Unit as well. There is an absence of opportunities to participate in meaningful activities within prison. That includes recreational and educational facilities as well as therapeutic programs. There were no facilities to provide counselling to the women identified as survivors of violence and childhood sexual assault and no therapeutic groups running within the gaols. All of them were identified as having drug and alcohol problems. They also found it very difficult to access adequate services for those problems and, as I illustrated before, we do have clients with mental health who not only did not receive treatment, their mental health conditions were not identified while they were in custody. We are talking about people with quite serious conditions. One client had quite serious schizophrenia and for whatever reason her condition was never picked up by the prison system and no treatment was offered to her. She was not given treatment until she had left prison.

CHAIR: For how long were those clients in prison?

Ms POWER: Six months.

CHAIR: Might the fact that they were in prison for such a short period—I do not imagine that any period of time in prison is short—have contributed to the fact that their condition had been missed?

Ms POWER: This client's behaviours were of the nature that even inexperienced workers in my service could identify that the client was suffering from psychosis. I think that anyone who had spent even a minimal amount of time with this client would have identified that there were issues.

CHAIR: How are you able to determine that that client did not receive any services while in prison?

Ms POWER: Her testimony to us is that she was never offered treatment and was not given access to it.

The Hon. JAN BURNSWOODS: With someone like that, if corrective services had picked it up, done everything correctly, her sentence had come to an end, in the real world, and perhaps in the ideal world, where would someone with that degree of disturbance go?

Ms POWER: It depends. Schizophrenia is a treatable disease. If her illness had been detected in gaol and she had been stabilised on medication she would have had a much better chance of not becoming homeless again when she left prison.

The Hon. JAN BURNSWOODS: I suppose what I am getting at is what level of accommodation services, et cetera, in the community would be necessary to ensure that a woman such as you described had somewhere to go, assuming that all the things you are talking about had happened correctly in the corrective services system.

Ms POWER: As well as accommodation, this particular client probably would have needed some sort of mental health outreach support worker. Currently, that service does not exist. Other clients with the same disease, provided they are on medication and are regularly attending the community health centre, may well be able to survive in private accommodation, in private rental, once they have stabilised.

The Hon. JAN BURNSWOODS: But they would need services to ensure that they were helped.

Ms POWER: That is right.

The Hon. JAN BURNSWOODS: I am trying to pin down the continual problem that is raised with us that you cannot simply look at what happens within prison.

Ms POWER: Yes. The next part of the question was about post-release programs. There is a very little available, particularly in the way of halfway houses, that address the needs of women re-entering the mainstream, re-entering the community. Guthrie House is the only halfway house that I am aware of that supports the women. Obviously, it is only one service was only a limited number of beds. I think it has six to eight beds. It is a longer term program, six

months at a time, so in no way is it capable of meeting the demand for support services once women leave gaol.

CHAIR: What about housing from the prison? Would you like to comment on the responsiveness of the Department of Housing to the needs of prisoners to find accommodation once they have completed their sentence?

Ms POWER: The department is very responsive. The issue comes back to the fact that homelessness is more complex than just providing a roof over people's heads. The Department of Housing makes a concerted effort to ensure that women are able to access housing when they leave prison. But it comes back to the reason that they were homeless in the first place or the reason that contributed to their criminal behaviour—the lack of outreach services. You can provide them with a roof over their head and a bed but if the other issues that they are trying to deal with are not being supported and they are not being given access to services, those issues will contribute to them becoming homeless again.

For example, if they have an undiagnosed mental health problem the chance is that without support and treatment their behaviour will impact on whether they are able to be housed by the Department of Housing in the long term. When they are in the throes of an episode of mental illness they may voluntarily give up their housing because they are not able to recognise that it is beneficial for them to be housed. If they are still having drug and alcohol problems they may lose their tenancies. It is not simply a matter of providing roofs and beds; it is a matter of providing the sort of outreach services that support people to maintain their housing and to deal with the issues that relate to their housing difficulties.

CHAIR: In regard to people who have an intellectual disability or mental health problem we have focused on corrective services because we are dealing with people who have been sentenced. However, the government department that has the biggest impact on that group of people is the Department Of Health—or perhaps to a lesser extent the Ageing and Disability Department. Are there things that those departments should be doing that might have avoided these people entering the criminal justice system in the first place?

Ms POWER: Without wishing to point the finger, the reality is that those services are underresourced. There is a need for more joint programs that recognise that homelessness is a complex issue. While the Department of Housing may provide the housing, mental health services need to be resourced to provide that outreach because they have the expertise. Their services to people in the community tend to rely on clients coming to them. If you are talking about mental health issues, not all the clients have the capability to access the services when they need them. That is where outreach is really important.

CHAIR: Ann Webb, who runs Guthrie House, indicated that the house frequently turns people away.

Ms POWER: Absolutely.

CHAIR: Have you seen people who would otherwise have been clients of Guthrie House become clients of yours because they have been turned away from Guthrie House? If so, what has happened to them?

Ms POWER: Absolutely. We have tried to refer them to other emergency accommodation services. That depends very much on the vacancies. A lot of the clients who would fit into the criteria of Guthrie House are not able to be housed there so they must fall back on the generic emergency accommodation services, which are hopelessly overstretched and vacancy rates are very low. Many of these women end up sleeping on the streets or spending a few nights in a boarding house, a few nights with friends and a few nights on the streets. In that very unstable circumstance it is likely to lead to them reoffending.

CHAIR: From your experience what are the most likely factors which contribute to women reoffending once they have been released from prison?

Ms POWER: As I said, poverty, homelessness and destitution are big factors in the reasons that people in our client group reoffend, and that is the only prison population I can speak about. The lack of secure housing means that women are more likely to look at the possibility of sleeping on the streets and decide to engage in criminal behaviour based on desperation, poverty and street life. We have touched on it numerous times already that if people are still struggling with drug and alcohol dependency that is more likely to make them reoffend. If they are not getting support with their mental health issues, that will be a factor as well.

CHAIR: With regard to drug and alcohol services, one comment made by the Department of Corrective Services about the reason that some people do not necessarily get a service is that they do not want one and it is not possible to force them to accept a service. Is that a significant contributing factor, and do you think there is any way in which these people can be encouraged to want a service, given that it is in the best interests of everybody that they address those issues?

Ms POWER: It is certainly our experience that there are people within the client group who do not want to change their drug and alcohol behaviours. That is something that changes from time to time throughout the history of their addiction. One of the main problems we find is that when people have decided that they want to address the problem, frequently we refer them to services that have a waiting list of two to three months, so when the motivation hits them to make change there is no way of getting them into a service that will give them treatment so they remain in those behaviours.

In terms of prison itself, that is difficult to answer because one of our experiences—and I am sure people who have worked with prisoners will concur with this—is that the ready availability of drugs of abuse in gaol is a major issue for people who may be thinking about giving up. Also, the ready availability of methadone as opposed to other forms of treatment—there are people who would like to get treatment but do not want to go on methadone. Currently, my understanding is that methadone is one of the easier treatment options that may be available in gaol.

CHAIR: It is certainly the most commonly used. What other forms of treatment might people have access to if they had been available in gaol?

Ms POWER: Other sorts of therapeutic programs. Some women have a very strong feelings about going on methadone. Anecdotally, one concern is that methadone is just swapping one addiction for another. There is no range of programs available in prison. What I am saying is that if people want to go down the methadone route they may be able to access it. If your drug of addiction is not heroin, one issue is that methadone is not a suitable treatment program for other

drugs of addiction. Also, there is no range of treatment available to people in the mainstream community.

Ms LEE RHIANNON: You have just answered the question about people not being willing to go into programs. To come as it slightly differently, do you think that one reason factor they do not get into programs initially is because the word is already around that it could be hard to get into the programs and, therefore, there is not even of the willingness from day one to try to get into them?

Ms POWER: Yes. I think that has an impact. The word does get around very quickly that there are no vacancies or it is difficult to get into a program. It is certainly a disincentive. People give up easily if they find out that there is a two-month waiting list and that is common knowledge among the women who use.

The Hon. JAN BURNSWOODS: It is hard to know how to put this. As you have said, you are dealing with a group of women who are often in great need, from poor backgrounds in terms of material possessions, abuse and drug addiction, and so on. I am trying to get a picture of how difficult it is to urge, encourage, direct the group of women into the kinds of services—whether it is accommodation or drug and alcohol services—which you are fairly sure they need. To what extent is there a difficulty with dealing with a group of women with all their problems, including what we have heard about mental illness or perhaps a mild, undiagnosed intellectual disability. No-one has really talked to us about the problems involved in providing services that work and will keep these women functioning stably, successfully and happily in the community?

Ms POWER: The key to providing services to those women is that the services need to be flexible. For example, if women at the centre are experiencing episodes of severe mental illness we need a service that can come to them, rather than a service that they need to attend. Things like conventional services that are aimed at people in the mainstream that require a certain level of manageability of lifestyle do not work very well with these clients. The services need to be flexible. For example, if the women have been able to obtain housing the services need to be able to visit them in their own home, particularly when we are talking about women with histories of incarceration. The services need to be able to come to the clients, rather than the clients always having to attend the services.

The Hon. JAN BURNSWOODS: Do we need to move further down the road of communal living, a kind of slightly institutionalised arrangement so that the women we are talking about can be held, encouraged and directed towards the services. You are talking about a group that is expected to access a mainstream service, which may mean having money, travel skills, knowledge of how the bureaucratic system works. All of these things are hurdles. It is easy to talk about what might be there, but even when such services are available often they do not seem to solve the problem.

Ms POWER: The earlier part of your question referred to things like group housing, share accommodation services and things like that. It is a really important to note that the reason a lot of the housing breaks down very quickly after release from gaol is related to isolation; it is related to being released, then being offered a bed-sit in the middle of nowhere where they have no network and they no longer have the skills of independent living, particularly after long periods of incarceration. Group services, for example Guthrie, seem to provide the chance for women to make the adjustment from the prison system into the mainstream. That halfway step is really important. The absence of those services really has an impact on the long-term housing of

women released from gaol. It is a big step from living in a prison environment for 10 years to being completely isolated in a one-bedroom flat in the suburbs. It is a big jump.

The Hon. JAN BURNSWOODS: I am also trying to get at it from the prevention end. Can anything be done, similar to Guthrie, for women who may not have been to gaol, but who may obviously be at great risk?

Ms POWER: Some of those services are available, but the problem is there are not enough of them. They are not specialised. Since the abandonment of the group homes scheme for people with mental illness, for example, people with mental illness are mainstreamed and housed in the Department of Housing, whereas once they may have lived in a communal group home setting. There certainly are not enough of those types of options for people who do not manage well, who are not ready for independent living or who do not have the skills. Only one program houses childhood survivors of sexual assault who may have major problems, such as personality disorders, et cetera. It has been shown that a high percentage of women imprisoned have suffered childhood sexual assault, yet there is almost a complete absence of programs for those women in the community, which means that those issues remain addressed. Some women attributed those issues directly to the criminal acts they may have committed.

CHAIR: Is there anything you wanted to raise with the Committee that we have not raised in questions?

Ms POWER: In the question sheet you sent me you asked about the number of clients who have children.

CHAIR: I intended to ask you that question, but I was on another subject. Could you give us some idea of the age range of your clients?

Ms POWER: The majority of our clients are between the ages of 18 and 35. In terms of the question in relation to the number of clients who have children, only about 10 per cent of our clients who identify as having a history of incarceration have children; 100 per cent of those clients have lost custody of their children. The impact of mothers being incarcerated has been huge on those families.

CHAIR: Have they lost custody of their children as a result of their incarceration, or is it as result of their homelessness and other issues?

Ms POWER: Clients who were homeless prior to their incarceration may have already come to the attention of DOCS. Most of our clients are women who identify as single women not in ongoing relationships. The issues for them would be slightly different because there is not another parent to take on the parenting role when the woman is placed in gaol.

Ms LEE RHIANNON: You said the age range is 18 to 35.

Ms POWER: That is the majority of our clients, yes. We have other clients.

Ms LEE RHIANNON: I am interested in the lower end. You referred to your clients as women and girls, so you do have younger clients. How many of them are there? Could you give us some information about them? I am interested in where they end up, in terms of juvenile justice

Ms POWER: We take clients from the age of 16 onwards. The majority of our clients under 20 are 5 per cent. Because of the nature of our service we tend to divert young women to more youth-appropriate services, simply because we recognise that some of our clients are quite entrenched in the street life. If we can divert the young people into a more youth-focused service, then they probably will get a better service than we are able to offer them.

(The witness withdrew)

KIM ELIZBETH ANSON, Executive Director, Policy and Strategy Division, Department of Housing, level 16, Governor Macquarie Tower, 1 Farrer Place, Sydney, affirmed and examined:

CHAIR: Would you briefly outline your experience and qualifications relevant to this inquiry?

Ms ANSON: I have been with the Department of Housing, heading up the policy and strategy division, for about one year. That division is responsible for strategic policy issues across the housing portfolio, as well as recommending future reforms and direction.

CHAIR: Prior to that had you been involved in the interfacing with clients for the Department of Housing?

Ms ANSON: Not for quite some time.

CHAIR: Have you received summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act?

Ms ANSON: Yes, I have.

CHAIR: Are you conversant with the terms of reference for this inquiry?

Ms ANSON: Yes, I am.

CHAIR: If you should consider, at any stage during your evidence, that in the public interest certain evidence or documents you may wish to present should be heard or seen only by the Committee, the Committee will usually agree to your request and resolve itself into private session. I should warn you, however, that the Parliament has the power to override that decision at any time, and may make your evidence public. The Department of Housing has featured in our inquiry largely with regard to post-release matters. What is the current waiting time for Department of Housing accommodation, given the common difficulties faced by released inmates, including prejudice within the private rental market, lack of references and lack of social networks? Are released inmates given any priority in obtaining crisis or long-term housing?

Ms ANSON: The Department of Housing offers a range of housing assistance services. Perhaps I should briefly describe some of those to you and then go into the waiting times and other issues. We provide public and community rental housing, which is long-term, affordable housing. We provide priority housing, which is priority access to long-term public housing for people with an urgent housing need and who will meet particular criteria. We provide temporary accommodation for people in crisis until their needs can be fully assessed and more appropriate options identified. We administer the crisis accommodation program, which provides short-term accommodation in refuges and hostels, and that is usually associated with support services funded by the Department of Community Services under the Supported Accommodation Assistance Program. Another product is Rent Start, which provides financial assistance to start or maintain a tenancy in the private sector by contributing to the establishment costs or, in some instances, meeting rent arrears costs.

We also provide financial assistance to people with disabilities or HIV-AIDS towards the median cost of private rental accommodation in some circumstances—that is our Special Assistance Subsidy Program. Another of our services is long-term supported housing through the Supported Housing Initiatives Program, which leases properties to non-government organisations and allocates them to clients who are in need of specialist support services. Some of those services, such as temporary accommodation and crisis accommodation program services, can be provided almost immediately. Rental subsidies, such as the Rent Start product which is assistance with bonds, establishment costs such as electricity connections and in some cases rental arrears, can be organised within a matter of days. Priority housing, which is priority access to long-term public housing, can take several months; sometimes less, sometimes more, depending on the location and dwelling type. Wait turn public or community housing can take from several weeks to two years or a number of years, depending on the dwelling type and location.

I will now go to the second part of your question, which related to priority access and then access to crisis accommodation. Priority housing is not provided to a particular group per se, but rather to individuals who have high levels of housing need and who cannot resolve that need through their own resources. I will refer specifically to how we allocate priority housing. The person needs to be eligible for public housing and also meet some additional criteria. The person must have an urgent need for housing assistance and be unable to resolve that need by his or her own resources, and the person cannot meet that need in private rental housing. Under each of those categories there are some criteria, which are relevant. For example, a person must be in urgent need of housing assistance, and that could be demonstrated by the person being in unstable or inappropriate housing, by the existence of at-risk factors, a medical condition or a disability. Under the inappropriate or unstable housing category there are criteria. For example, a person may be separated from family members because of current housing arrangements and need alternative housing arrangements to be reunited with family members.

So under the category of "cannot resolve their own need", essentially that involves looking at the clients' access to assets, savings and so on. So initially you are saying they are in urgent need and that they cannot resolve it themselves because they do not have the financial resources to do it. Thirdly, they cannot meet their needs in the private rental market. That is assessed by looking at the availability and cost of suitable private rental accommodation and the ability of the applicant to obtain and maintain a tenancy given the history and circumstances. For example, if they were in urgent need but it could be met through the private rental market with some assistance from us—say in the Rent Start product that I mentioned—they would be provided with that service rather than being considered for priority.

As I said, the department does not allocate priority to a particular group per se but allocates on the basis of housing need. There are a number of categories of housing need that I think are relevant to prisoners and people being released from prison if they are able to demonstrate that they do not have the resources to meet that need, and depending on the availability of resources and the availability of private rental accommodation that may meet that need if some support were provided. But if all those conditions are met the person would be eligible for priority housing. That is priority housing, which is priority access to longer-term housing. In crisis housing, as I mentioned earlier, there are two services that are relevant. One is temporary accommodation and the other is housing under the Crisis Accommodation Program, known as CAP. The latter program is administered by our Office of Community Housing and where properties and bed spaces and so on are provided to non-government organisations, local

government, charitable organisations to provide short- and medium-term housing in refuges and hostels.

The support that is associated with that is funded under the Supported Accommodation Assistance Program through DOCS. Some projects that are funded under CAP target specific needs groups. So some crisis accommodation programs target specific needs groups including ex-prisoners. Temporary accommodation is the final one I wanted to mention. It is offered on an emergency basis. That is where we accommodate someone in a low-cost motel or caravan park or something along those lines until we can assess their needs more fully and arrange more suitable accommodation. They can be assisted in that way for up to a couple of weeks whilst they are perhaps trying to be placed in a crisis accommodation program place or assessed for another form of housing assistance.

CHAIR: I do not imagine that form of crisis accommodation is available to a prisoner who has been released on a weekend. It would be difficult to access Department of Housing resources if you were released on the weekend, would it not?

Ms ANSON: There are several options there. The department funds a service that operates after hours and on the weekend through the Homeless Persons Information Centre. That is operated by Sydney City Council. That service locates beds on the weekend. We also fund what we call a brokerage service to operate on the weekends and in the evenings. So if someone requires housing as well as assessment then one of four non-government organisations is funded to provide that sort of assessment after hours. I guess the other issue there is that there is a significant amount of liaison between the Department of Housing client service teams and major correctional facilities. Where that liaison is working effectively there is often notice that someone is to be released and some arrangements are made prior to the date for some ongoing assistance or some assessment for assistance.

CHAIR: Does a person automatically relinquish their Department of Housing accommodation when sentenced to prison? What arrangements pertain to people who are sentenced to prison if they are a client of the Department of Housing prior to that?

Ms ANSON: If a public tenant who is the leaseholder is imprisoned there are several options. The preferred option is to transfer the tenancy to another person in the household such as a spouse, partner, child or parent so that the household can be maintained. If the tenant goes to prison for up to three months they can apply to have the tenancy retained and to return to the dwelling at the end of their sentence. That would not occur in circumstances where the reason for imprisonment is related to a breach of the tenancy agreement such as fraud or property damage. Cases are considered on their merits. If the tenant is going to receive little or no income during the three-month period then we have arrangements whereby we can charge a nominal rent of $5 a week. Again, we consider each case on its merits. Finally, for absences from a dwelling of longer than three months the tenant is generally required to relinquish the tenancy and on release the department will consider, again on a case-by-case basis, reinstating the tenancy in another dwelling.

CHAIR: Has there been any proposal by the Department of Housing and the Department of Corrective Services to establish bail hostels and/or post-release accommodation services? If so, at what stage is the proposal? If not, is such a proposal feasible to blend resources between two departments?

Ms ANSON: The department has established several post-release services which provide short-term accommodation, usually through community housing organisations. Currently we have four such organisations managing projects which are specifically targeting ex-prisoners and collectively they provide a total of 42 accommodation places in 14 different projects that are primarily located in the inner city and the inner west area. That is short-term post-release transitional accommodation.

CHAIR: So the beds turn over. They are not long-term community tenancies or something of that nature?

Ms ANSON: That is right. They are short term. There are also a number of other housing associations and the community providers in particular areas that have developed links with prisons to assist ex-prisoners. One is in Bowral with links with Goulburn gaol. They accept prerelease housing applications. The number of ex-prisoners housed at any one time fluctuates but it is generally several tenancies across the association's portfolio. They are long-term tenancies. There is another community housing organisation that accepts referrals from several of the gaols—Mulawa and Silverwater. They currently have six tenancies that were initiated in that way.

The Hon. JAN BURNSWOODS: Where is that one?

Ms ANSON: In Hume, accepting referrals from Mulawa and Silverwater. That is western Sydney down to the south a little bit. There is a youth refuge that accepts particular referrals from Juvenile Justice and at any one time it has a policy of having a certain space in the refuge available for that purpose. At the moment there are negotiations, which are almost finalised, between our Office of Community Housing and several community housing organisations—the office is the administrative part of the department—and the Department of Health to operate five houses in south western Sydney as a pilot program. That is for the drug court program. That would be an alternative to a sentencing arrangement under that pilot program. There are to be five properties there. So there have been a series of those sorts of services organised.

CHAIR: The drug court program is getting closer to the idea of using Department of Housing accommodation in tandem with Corrective Services. Do you see any feasible opportunities for using them to establish bail hostels or home detention schemes? One of the problems with home detention is that inmates who do not have suitable accommodation—they may be homeless—do not qualify for the home detention scheme. It could be said that the group of people is prejudiced by not having that community sentencing option. Do you see any possibility of the Department of Housing co-operating more closely with the Department of Corrective Services to give people those options?

Ms ANSON: The two departments have liaised previously about this. Those discussions produced a view from Corrective Services that our Rent Start service, which assists a household with set up costs in the private rental market, was likely to be the service that was most suited to that particular situation. The departments have agreed to co-operate in the provision of that service. Also, the departments are members of the Government's partnership against homelessness, on which the Department of Housing is the lead agency. That is a mechanism to promote co-ordination and strategic thinking across government between departments that deal with such issues. So there is a forum to provide and promote ongoing discussion around the sorts of issues that you raise. Certainly, there have been liaison agreements about how assistance,

the range of services and products that the department normally provides, could assist people in the home detention scheme. As I said, it was particularly the Rent Start product that had been identified as the one that was most likely to be useful and practical in those circumstances.

CHAIR: I am a bit surprised that Rent Start would seem to be practical and useful. If I were a private accommodation provider I would not be wildly excited about the idea of the accommodation I was about to let to somebody being about to become a de facto prison facility. Would it not be more likely that a publicly owned house is more likely to be more easily accommodated as a home detention facility?

Ms ANSON: I think that the Rent Start product had been identified because of its speed and flexibility about where the service can be provided in a very quick timeframe. Certainly, my understanding is that Corrective Services had also identified that it would work with community-based housing providers and churches and charitable organisations as another option to provide that sort of housing that you are referring to.

CHAIR: Is the speed and flexibility that might attach to Rent Start more a case that it is so difficult to get hold of a public house that it was the only conceivable option for finding a house quickly?

Ms ANSON: No, a range of our services are available. Services under the CAP program are designed to turn over and be a form of transitional housing. They have been identified as potentially being suitable in those circumstances. Some of the examples I gave demonstrate their potential.

CHAIR: Evidence has been presented to the Committee that inmates who are released are most readily housed in areas such as Campbelltown, Blacktown and Mount Druitt. I live very close to Campbelltown and I do not wish to be disparaging. A witness stated, "For reasons to do with their former lifestyle many clients do not wish to go back to those areas because they see themselves being very much at risk of slipping into a drug-dependent lifestyle and concomitant crime." Does the Department of Housing make special allowances for its inmates not wishing to be housed in certain areas for those sorts of reasons?

Ms ANSON: Certainly the areas you mentioned have large amounts of public housing so vacancies occur relatively frequently and priority applications are likely to be housed quite quickly. For those sorts of reasons priority housing applicants who do not have specific locational needs may be encouraged to apply in those areas. However, if you are applying for priority housing you are able to nominate your application zone. So if you did not want to nominate one of those zones you would not have to. You could nominate another zone. If you nominated a zone that had very high demand and where vacancies were less frequent a locational means test would be applied. It asks you why you need to live in that area. It looks at a range of things such as access to medical or support services or whatever. Conversely, if an applicant nominates a zone such as one of the three you described, with high turnover, staff are required to consider whether the applicant would be able to sustain a stable tenancy in that zone. So if a high turnover zone is regarded as unsuitable for some of the reasons that you described, that certainly can be taken into account.

Initially, the applicants do not need to nominate; they can nominate for an allocation zone of their choice. If that is an allocation zone that does not have frequent vacancies, and if they are high-priority applicants, then a locational or needs test will be applied to them. But that

does not necessarily result in their having to nominate a zone that is a problem for them. As I said, the converse also is true. If they are to be allocated a zone in which many vacancies occur and turnover is quite high, we would like to be confident that they will be successful in maintaining a tenancy. One of our policies is to look at the capacity of an applicant to successfully maintain a tenancy; so that, if someone is at risk for those sorts of reasons, that would be taken into account. Another aspect of the location or needs test is that if someone needs to move from an at-risk situation, or not go into an at-risk situation, that is a factor that is taken into account.

CHAIRM: The Committee heard that the Penrith office of the Department of Housing has a special arrangement with the Emu Plains correctional centre to help ensure that inmates have suitable housing when they are released. Can you described that arrangement? Do you believe it could be adopted by other correctional centres and Department of Housing offices?

Ms ANSON: The client service teams within the vicinity of each of the major correctional centres in New South Wales do provide assistance to those facilities, and that includes the Penrith office providing services to Emu Plains and John Morony. The services provided differ slightly from one area to another, but overall the services include client service staff visiting the facility on a regular basis, and at other times making visits as needed or on the invitation of the welfare officer. In some other cases support is primarily provided through the prison's welfare officer or social worker.

You raise the specific example of Penrith. The staff there visit Emu Plains and John Morony, and meet with groups of prisoners to provide them with relevant housing information, and they assist individual prisoners with applications. They will generally check the status of prisoners who apply for public housing prior to imprisonment, to ensure that they have not been removed from the waiting list because they have been out of contact with the department. They will check the status of former tenants who had to leave their dwellings as part of being imprisoned, to ensure that they are not on our record as unsatisfactory tenants and to ensure that we are not regarding the property as abandoned, but rather that we understand where those persons are, so that they will not have a poor record with us that could affect their future relationship with us. Staff there also liaise with the social worker at Emu Plains, so that those about to be released have the documentation needed to receive the maximum assistance for which they are eligible.

Regular visits also occur at Long Bay, Silverwater, Bathurst, Kirkconnell, Oberon, St Heliers and Armidale, and similar services are provided. In other prisons, visits are provided on request or, in some cases, our staff record very good working relationships with social workers and welfare offices and report doing business or providing assistance primarily through those people rather than specifically visiting on a regular basis. So Penrith is certainly one example, but many of our client service teams have ongoing liaisons and linkages with major correctional facilities.

CHAIRMAN: The Committee understands that many imprisoned parents must prove to the Department of Community Services that they have secure accommodation before they can be reunited with their children. However, at the same time, ex-prisoners are not given priority housing until they have received the custody of their children. Would you care to comment on this situation and how it might be addressed? It appears to be a chicken and the egg situation; it has been put to the Committee that they have the difficulty that they want their children back but cannot get them back until they have a house.

Ms ANSON: Custody of children is not a prerequisite for priority housing. I went through the criteria for people to be considered for allocation of priority housing. Obviously, they do not need to have custody of their children as a prerequisite: it is determined on a number of other bases. The department recognises the importance of family-related needs and works closely with the Department of Community Services and Corrective Services, including prison staff, to ensure that appropriate allocations can be made where children are involved and to ensure that our policies promote keeping the family unit together.

We feel that our policies mean that that catch 22 situation does not arise. Some of the direct ways in which the policies take family circumstances into account are, for example, a household in which the parent faces losing custody of the child because the present housing is unsuitable, or the parent needs suitable housing to have that custody reinstated. Such parents would be regarded as being at-risk under our priority housing eligibility policy, and therefore they would satisfy that criteria.

As to our dwelling entitlements, if someone applies and does not yet have custody, but has documentation to demonstrate that custody depends on the allocation of appropriate housing, then when we look at their bedroom categories we will take the number of children into account. So that, if they have three children and a letter from the Department of Community Services indicating that the children will be reinstated, we will look at allocating them a property that took the children into account.

If someone does not have full custody of children but has access opportunities, and may subsequently be seeking custody as they sort out their situation, then our policies also allow us to provide a bedroom allocation for children who are on access arrangements. So, again, we can be flexible and allocate them the number of bedrooms that may need for their children while they are on access.

So that the circumstance that you described, we feel, perhaps arises where there is lack of documentation, where someone perhaps has made an assertion but not been able to produce documentation about the custody of the children. But, as I said, the documentation that we will consider is fairly flexible, and our policies also are fairly flexible. Some of our priority housing criteria do relate to the reuniting of a family unit, and so on.

Ms RHIANNON: You have spoken about the situation that confronts people who leave jail. A number of prisoners have spoken to us about their personal experiences. What comes up so often is how hard it is for them when they leave prison; they assert that there is no support for them at all. Are there any figures on how many prisoners are left in the situation of not receiving support, where you are not able to give them assistance? Do you keep any records of prisoners who need assistance—and it seems from what we are hearing that a large number of them would need assistance—but you are not in a position, either because of lack of resources or lack of staff, to provide that assistance?

Ms ANSON: We do not have any figures of the kind that you describe, nor do we keep figures on the number of prisoners who are assisted. There is not such a specific category; rather, they are assisted partly because it is recognised that they have a high housing need. But we do not have any figures.

Ms RHIANNON: You do not have figures on the positive side either?

Ms ANSON: We do not have figures on whether the people we assist are prisoners or ex-prisoners. Of course, we have figures on the number of people whom we assisted, people who are in high housing need and have met priority criteria, and so on, but we do not break down the figures into a prisoner category. I had a conversation with the manager of the Penrith group that liaises at Emu Plains and John Morony. She describes good liaison arrangements and good arrangements regarding assistance, and so on, that work in that area. So I think there are some quite good models out there under which assistance is delivered very successfully.

Ms RHIANNON: But data is not collected?

Ms ANSON: No, we do not collect data about the number of prisoners.

Ms RHIANNON: Just on the Penrith Department of Housing office—because it seems an interesting model—is there any thought that that should be replicated in other areas, or is that happening already?

Ms ANSON: It is actually happening in a number of other areas, so that services very similar to those delivered in Penrith are delivered in a number of other places, such as Long Bay, Silverwater and Bathurst. There are other prisons where the visits are on request. In some instances we will be making visits on a regular basis; in others, the prison may organise a post-release session with prisoners, and we will go in, when that is being organised, on an invitation basis. In other instances where we have had discussions, it is clear that the liaison is principally through welfare officers, so that there may not be a regular visit to the prison. One particular example that I was given is where a number of people to be released applied for housing in the immediate location, where availability is low. Therefore, the need for regular visits is not seen to be very high, but there is good liaison at an officer level between the two departments.

The Hon. Jan BURNSWOODS: Ms Anson, I think you were here in the latter part of Ms Fiona Power's evidence regarding the emergency centre. I asked a number of questions about clients who have particular difficulty in accessing services. I must admit that I did not realise that the Department of Housing has such a variety of different services that would suit prisoners and meet their needs, and I was not aware of the flexibility of those policies. Can you tell us how you go about providing those services to people who, for various reasons, have difficulty in contacting the office, filling in forms and handling the whole procedure? We have asked a number of questions about the minority, but quite large number, of prisoners with intellectual disability, mental elders and so on. Can you tell us anything at all about special provisions for those sorts of people?

Ms ANSON: There are a range of ways in which that happens. Application forms may be completed by departmental staff. I am certainly aware that that is a service that we have provided in certain areas. As to the service that is ultimately provided for the person, if a person needs support—for example, ongoing support with respect to a mental health issue—then the department has a joint guarantee of service with the Department of Health that facilitates service provision to people who need it.

We also have programs such as the Supported Housing Initiatives Program, which provides services for those requiring support for a particular mental health or ongoing drug and alcohol issue. So that those services are available for not only ex-prisoners, but ex-prisoners may fit within that category of persons to whom non-government organisations provide ongoing support.

The department has increased, through a number of its programs, the amount of housing that is allocated to people with support needs. That has been a trend. The department has been trying different innovative methods for negotiating support arrangements from other government or non-government organisations, right through to advertising expressions of interest for supported housing initiatives that provide services for the sorts of people we have been talking about.

(The witness withdrew)

RAY JACKSON, Official Spokesperson, Indigenous Social Justice Association, affirmed and examined:

CHAIR: Would you outline your qualifications and experience as they are relevant to this inquiry?

Mr JACKSON: I am a product of the stolen generation, having been taken from my mother at the age of three. I claim Wiradjuri descent through her. At this point in time I would like to recognise the traditional owners of this land, the Eora people. It is Aboriginal land, always was, and always will be land never ceded.

CHAIR: We join you in that recognition.

Mr JACKSON: I have been involved in indigenous issues since I became the original secretary of the Aboriginal Deaths in Custody Watch Committee in 1987. I virtually worked on a full-time basis, mostly unpaid, since 1992 as the management committee co-ordinator of that watch, until I departed in March 1997. I co-founded be Indigenous Social Justice Association in April 1997, and have worked for that organisation, again unpaid, up until today. I have had entry to all New South Wales gaols from late 1994 until December of 1999. Why that access was taken from me, I have no understanding.

In mid 1997 I was requested by Senior Assistant Commissioner Ron Woodham and Ms Joanne Self of the Indigenous Services Unit—she has since recently resigned—to do statewide research into all gaol segregation cells and the department's segregation policies relative to indigenous inmates. This resulted in a report called *Band-Aids and Barbed Wire*.

I am currently a Sydney region representative of the Aboriginal Justice Advisory Council. In August 1999 I was approached to become the manager of the Aboriginal Deaths in Custody Support Unit, Sydney region, working out of the Aboriginal Legal Service. In the 4½ months I worked there I was not issued with a specific gaol pass and eventually was stopped from visiting gaols. I am currently in my second term as an official visitor at the MRRC.

CHAIR: You said in your evidence that you have stopped having access to prisons, and yet you are an official visitor.

Mr JACKSON: I have access to the MRRC only. I am barred from all other New South Wales gaols.

CHAIR: Did you receive a summons issued under my hand in accordance with the provisions of the Parliamentary Evidence Act?

Mr JACKSON: I did.

CHAIR: Are you conversant with the terms of reference for this inquiry?

Mr JACKSON: I am.

CHAIR: If you should consider at any stage during your evidence that it is in the public interest that certain evidence or documents you may wish to present should be heard or seen only

by the Committee, the Committee would usually agree to your request and resolve into private session. I should warn you, however, that the Parliament has the power to override that decision at any time and make your evidence public.

I take it that the material you supplied to the Committee a few days ago, consisting of some letters, statements, *Hansard* from the Australian Senate, statistics and lists of deaths in custody, and so on, is material which you supplied to the Committee as a submission?

Mr JACKSON: That is correct.

CHAIR: Do you wish to make remarks to the Committee in relation to its terms of reference?

Mr JACKSON:- I would like to speak to the papers that I presented.

CHAIR: Feel free to do so, before members of the Committee ask questions.

Mr JACKSON: Report No. 1 is an extract from the inmates handbook, which is being brought together by the Council for Civil Liberties. I was asked to do the indigenous prisoners special needs section, which I did. I presented that because it sets out clearly what the department sees as being the royal commission recommendations from the Aboriginal Deaths in Custody inquiry as to some of the recommendations that the department sees as being implemented. I have issue with the department's view, and I would like to read the conclusion that I make in this extract:

> It must be recognised that whilst there are some extra rights for indigenous prisoners arising from the royal commission , proper implementation of the recommendations is somewhat scattered , due mainly to be individuals managing the gaol and which particular gaol you are in.
>
> Your classification also plays a large part in how you are treated. Make yourself aware of the gaol recommendations. Proper implementation of the recommendations must be a part of every indigenous inmate. They are your recommendations. It is up to each indigenous inmate to monitor whether the recommendations are implemented properly and recognised by all custodial medical staff. If not, contact the appropriate indigenous organisation, who has a monitoring role on the proper implementation of the recommendations. Stay strong and keep the spirit alive.

My emphasis throughout my presentation will be on the recommendations and the lack of implementation of those recommendations, which leads to increased arrests by police, increased incarceration by the judicial system and a penal system that really does not know what to do with them.

Report No. 2 is a discussion paper on deaths in custody and the need for an independent and indigenous national investigative team looking at all indigenous deaths in custody. Attached to that is a letter to the Minister, Andrew Refshauge, asking for a meeting with him to discuss the setting up of that particular investigative team. I do not need to read from that.

With regard to Report No. 3, the *Aboriginal Law Bulletin* sent me this article and asked me to make comment on it. It sets out to look at the recommendations as far as the coronial recommendations are concerned. It is my understanding that New South Wales was the only State or Territory in this country that had implemented, not in a legislative sense but certainly in a practical sense, the recommendations. Unfortunately, they are now starting to be wound back as well. An example of that is the pathologists at the Glebe morgue not continuing to recognise recommendation 25, which allows the families certain rights, which is attached to the first part of report No. 2. The morgue in fact wishes to pick who will be the family representative. We are fighting that hammer, tooth and nail.

I made answers to that journal extract. The same applies with report No. 4. Senator Aden Ridgeway is trying to raise the issue of deaths in custody at a Federal level. I replied to his Senate speech, and I include that merely to highlight the grievous need to have a Federal or State investigative team set up.

Report No. 5 is an open letter to Minister Bob Debus regarding the respect and humanity for inmates and further pleas for him and his department to do something about the evident hanging points within New South Wales gaols. I received a reply from the Minister's office that the open letter had been received but that they are looking at it. That is as far as it has got at this point in time.

CHAIR: To what extent are hanging points still evident in the prison system?

Mr JACKSON: The first three indigenous deaths for this year were all hanging deaths, from cell bars and from the top of a bunk. One of the hanging deaths was of a 19-year-old man in Cessnock who was allowed to come out of a critical unit cell, apparently at his own request, to go into the main, and within a matter of hours he had hanged himself. It has been my argument for many, many years with the department and the Minister that recommendation 165 was not implemented, and never will be implemented, whilst inmates can so easily access evident hanging points. I agree with the department that you will never have an anti-suicide cell; it would have to be along the lines of a safe cell which is stripped down to the bare floor and walls and you have nothing, but the more evident hanging points can be removed.

CHAIR: You said earlier in your evidence that you had visited a number of gaols.

Mr JACKSON:- I have visited every New South Wales gaol.

CHAIR: You have indicated to the Department of Corrective Services where hanging points need to be addressed with some sort of rectification, is that correct?

Mr JACKSON: I was looking at the segregation cells and the segregation policies, not the evident hanging points. I was not employed to do that.

CHAIR: Are there still hanging points in the gaols?

Mr JACKSON: There are still hanging points in every gaol in this country.

CHAIR: Is that limited to the gaol generally, or segregation cells?

Mr JACKSON: It is for the gaol generally. To give an example, late last year I visited John Morony II, the new gaol at Windsor, which they cannot afford to open yet. There are 25 men to be housed in these huts, two out in a cell of 12 and one out, which would be the sweeper. As soon as you walk in, you have a lovely, big window. Over that lovely, big window there is a lovely, big grille. A four-year-old idiot could fashion a noose, tie it around that grille, and hang himself or herself. In this case, it was "himself". I then tested to see whether that grille would hold a body weight, and it would. Again, the custodial logic of security outweighing the need to keep people safe has proved itself once again. That is the major problem. They have this myopic view that security must be paramount above all, so they still build gaols with hanging points. Later I would like to talk about the new women's prison which has the same sort of thing.

Report 6, *Djadi-Dugarang*, which is the association's newsletter, contains several items including an open letter to Bob Debus and other reports. It also contains "1999 - A real Deadly Year", which is my analysis of the New South Wales gaols system for 1999. I will just briefly read some extracts from that article.

> As of 5 December 1999….Indigenous women numbered 106 or 24.1% of the female gaol population….Indigenous inmates have risen from 610 (567 male, 43 female) in June 1992 to 986 (903 male, 83 female) in June 1998, to the numbers above for 1999, an increase of 63 females and 444 males in 7½ years. This represents an increase in Indigenous males incarcerated of 78.3% since June 1992. For Indigenous females there has been an increase in incarceration of 146.5% since June 1992.
>
> These figures clearly show the failure of the Police and Courts in properly implementing Royal Commission Recommendations 87 and 92, which recommend, inter alia, "arrest as a matter of last resort" and "incarceration as a last resort", respectively.

The third paragraph on page 2 sets out the 1999 increase in indigenous males and females but I do not intend to read that out. Committee members can look at that if they wish. I also examined the classifications in the categories of maximum, medium and minimum.

> As of 5 December 1999 there were 2744 maximum security inmates.
>
> ...
>
> Of these inmates there are 349 Indigenous inmates or 12.7%. When we look only at the Indigenous inmates and ask what percentage of them are on maximum security ratings we find a figure of 31.3%.

So nearly one-third of indigenous inmates are considered to be high-risk prisoners. Of the medium security inmates, there are stated to be 360 Indigenous inmates on this classification, both male and female, which represents approximately 32.3 per cent of the indigenous inmates who are incarcerated. For non-indigenous inmates, the figure is 19.71 per cent.

> The minimum security classification numbers total 2882, both male and female... there are 408 Indigenous inmates, male and female. This number represents about 36.6%.

I went on in the article to look at the minimum classifications, C1, C2 and C3, which appear on page 3. I will not read the whole of that part of the article, except for the following:

> Anecdotally I have been told that C3 involvement for Indigenous males is between 10 to 15 average for 1999 and for Indigenous females - none, or possibly one. But this does not count as 'they' cannot find her 'suitable' work. If this is true then there is certainly something wrong in the System.

That is all I want to highlight of that document. Report 7 is the Department of Corrective Services Statistics on Deaths in Custody from 1980 to 1999 and for 1999 specifically. It sets out the details of death, including where death happens, the date of death and the names. It is a little gold mine of information but it is not too public. I had to obtain that via the back door, so to speak. I asked for it at the front door, only to be told that I would have to issue a submission stating why I wanted it, where I was going to use it, why I was going to use it, et cetera. As far as I am concerned, this is a public document and should be publicly available.

CHAIR: This is the document titled "Table 1999/2000: DEATHS IN N.S.W. CORRECTIONAL CENTRES". Is that the one?

Mr JACKSON: Document 7, yes.

CHAIR: The source is the NSW Department of Corrective Services, Research and Statistics Unit.

Mr JACKSON: Yes. What do deaths in custody statistics and deaths in custody issues have to do with female prison numbers? I would like to explain that by reading the following

quote from Elder Jack Davis from Western Australia who died recently.

> The beginning of the cause of deaths in custody does not occur within the confines of police or prison cells or in the minds of victims. Initially, it starts in the minds of those who allow it to happen.

And we allow it to happen every day—everybody in this room, everybody in the department, every Minister in this place, everybody, because we have done nothing about it. The fact that no woman has died in custody over the last few years and specifically in gaol I believe is more by accident than by design. I wish now to read a letter to Acting Governor Judy Leyshon of Mulawa from me when I was a manager of the Aboriginal Deaths in Custody Support Unit, Sydney region. It clearly highlights the problems of inmates, not only female inmates. It is dated 29 December 1999 and is addressed to Judy Leyshon, Acting Governor, Mulawa gaol.

> I write with much concern at the farcical situation that enveloped me on my visit to Mulawa on Friday 24 December 1999 and I will outline the facts of the matter as I see them.
>
> On Thursday 23 December 1999 I was approached by Ms Sara Hopkins, an ALS solicitor, re inmate Stephanie McKenzie and a problem that had arisen with her. The problem, as you may know, concerned her claim that she miscarried at 4½ months whilst in custody. She further claims that the miscarriage was brought on by an unidentified custodial officer but I have no further information on how this occurred. Further claims were made that other officers were informed of what had happened to Stephanie, but those officers would not believe her and done nothing.
>
> Some two hours elapsed before any assistance was given to Stephanie after this carriage and Stephanie further states "They just picked up my baby and took it away." These are, of course, extremely serious allegations and I, as the manager of this unit, was endeavouring to come to the nub of the problem by visiting Stephanie on that Friday. A further reason to visit Mulawa was to allow me to speak to inmates Rachel Edwards, an inmate that I had been involved with during her time spent at Grafton gaol. I had been requested by her mother, Teresa Spencer of Gympie, Queensland, and by her aunt residing in Sydney to monitor Rachel while she was incarcerated due to her known suicide ideation. The family was concerned that she be transferred to Mulawa as soon as possible after her court dates had been satisfied. It is my understanding that the department recognised the problem of non-treatment at the correct level of expertise for her problem and had transferred her to Mulawa as soon as practicable. The family had also requested that I visit her in an attempt to calm her down.

This is the job I have been doing since 1992.

> I am informed that her last known suicide attempt was made on 16 December 99. I was also asked by Trevor Christian, manager of the Sydney region Aboriginal Legal Service, to visit Rachel as he had become aware of the situation that she was facing and he had concerns for her as well. This request also occurred on Thursday preceding my Friday morning phone call to yourself.
>
> I rang the gaol late on Thursday afternoon and spoke with the Governor's secretary who informed me that I should ring you early on Friday, which I did. I believe that I spoke with you at about half past nine and requested that I be allowed to visit the two abovenamed inmates. We discussed my official capacity to allow the visit to occur whereby I explained to you that I was currently the manager of the Aboriginal Deaths in Custody Support Unit, Sydney region, but as I had only become employed in that role since mid August I had not yet, and would not, be issued with a unit gaol pass. Paul Byrnes, Manager, Operations, Department of Corrective Services, had informed me that no new passes were to be issued to the unit until such time as the new unit began its operations in early January 2000. Paul did take the trouble to stress that the problem was not with me personally; rather, it was an internal restructuring of the issue of gaol passes to non-departmental accredited visitors that was the cause of the problem.
>
> I continued to also inform you that I had a valid gaol pass to allow me entry to all New South Wales gaols up to 1 July 2001. This card was officially signed by Senior Assistant Commissioner Ron Woodham and issued to me as the official spokesperson on behalf of the Indigenous Social Justice Association [ISJA]. You then, after some thought, agreed to my entry and you asked what time would my visit occur. I replied that I would arrive at about 11.30 that morning. This was agreed to by both of us and our phone conversation ceased.
>
> On my arrival at Mulawa I was informed by a very rude and abrupt gate officer, in answer to my request to see you, that you were not available and that you were no longer in the gaol. He further informed me that you were participating in a PRC situation. I answered that I had spoken with you a few hours previously and had been granted consent to visit both the inmates. He then stated that he knew nothing about this arrangement, you were not in the gaol, and is no entry would be given.
>
> I then respectfully requested to see the Deputy Governor and I was then brusquely told to wait. After some 5 to 10 minutes, Deputy Governor Bob Wright approached me and explained that, as I had no current gaol pass representing the unit, I could not be given entry. He went on to say that these instructions had come direct from Operations. I then asked from whom within Operations such information came, but he declined to answer specifically. He did state, however, that Mr Woodham is head of Operations.
>
> I knew that further discussions re the unit pass would lead nowhere so I attempted to reply to his assertion that I was restricted to MRRC only by showing him my gaol access pass as outlined above. He again reiterated the information given to him, that I was

> restricted to the MRRC only, and only as an official visitor. I had no access to any other New South Wales gaol regardless of status or title. Realising that any further discussion or negotiation would be useless, I then thanked him and left the Mulawa premises.
>
> I fully realise that my reports of offensive officers are never proven, merely because all witnesses are fellow officers. But I intend to continue to point out such examples of unprofessional behaviour when they are so blatantly examples. Whether at Mulawa or any other New South Wales gaol, such behaviour countermands and ignores not only the departmental guidelines for acceptable and courteous manners by custodial and other staff but is in itself a clear breach of royal commission recommendation 123, among others.
>
> I find the circumstances as outlined above to be somewhat confusing. I accept that I cannot enter the New South Wales gaol system as the manager of this unit, but I take great exception that my ISJA pass is invalid in all New South Wales gaols, including the MRRC. Since being issued with the ISJA pass in about mid 1999, I have had occasion to use it—and have done so without any trouble. I have received nothing in writing from Minister Debus, Commissioner Kelliher or Operations and especially Senior Assistant Commissioner Ron Woodham of the information emanating from that quarter nor any explanation behind it.
>
> On 31 December 1999 I finish in the role of manager of the unit and my gaol work, especially entry, rests entirely on my ISJA pass and open access to the gaol system. That is for my work on behalf of both male and female indigenous inmates. This pass is the ultimate recognition of my worth in attempting to work with the gaol system, as I virtually have done since 1993-94. I intend to send this letter to Senior Assistant Commissioner Woodham. I am still waiting for a reply.

That illustrates the major problems that communities face in accessing the gaols. Even the new New South Wales Aboriginal Prisoner and Family Support Unit, which was set up on 1 January, does not have passes to enter the gaols. To my knowledge, no indigenous community group is entering the gaols. That state of affairs must be examined. As far as I am concerned, that is an example of the department reneging on recommendation 172, which calls for indigenous peoples and organisations to have the right to see indigenous inmates.

CHAIR: Mr Jackson, can I take you through some of the items that you have submitted to the Committee in writing to ensure that I fully understand why we have been given them? You appear to be making representations about several specific recommendations of the royal commission that you do not believe have been implemented.

Mr JACKSON: I do not believe that any recommendations have been implemented properly.

CHAIR: I will return to that point in a moment. I do not understand why we have been given a page of the *Corrective Services Bulletin* dated 13 January 2000, which outlines an incident involving a couple of officers.

Mr JACKSON: That goes with the open letter to Minister Debus. It is an example of the attitude that Corrective Services personnel take towards an inmate and an inmate's family. On many occasions, inmates assist custodial officers in saving lives and performing other tasks for which they should be praised. However, they are neither thanked nor rewarded merely because to do so would upset the custodials—and we cannot have that; the good order and discipline of the gaol would fall to pieces.

I am arguing that inmates are human. I do not particularly care what their crimes were; that is for them to sort out. My argument is that, while people are in gaol, they have rights. The Department of Corrective Services does not recognise those rights. I do not care whether people are black, white or brindle; those rights must be recognised. Recommendation 122—duty of care—is the most important of all 339 recommendations.

CHAIR: I think I see what you are getting at: this publication highlights the work of a custodial officer.

Mr JACKSON: Two custodial officers.

CHAIR: Although those officers were not successful in saving a life, they intervened in an incident involving an inmate who hanged himself and they were assisted by an inmate who is neither named nor recognised. The officers received a letter of commendation and were recognised at a ceremony at metropolitan headquarters.

Mr JACKSON: I will give another quick example. At St Heliers at Muswellbrook a non-Aboriginal man collapsed and two prisoners performed CPR on him. The clinic people were called but did not respond for more than 10 minutes because they thought it was a false alarm. When they finally arrived, the person had been saved by the actions of the two prisoners who had immediately started CPR. I wrote to Ron Woodham at the time, suggesting that some sort of thanks or acknowledgment should be given to those two inmates. However, to the best of my knowledge, they are still waiting to be thanked—let alone anything else.

The Hon. JAN BURNSWOODS: Mr Chairman, may I point out that what Mr Jackson has just told us is spelled out in the open letter on page 7 of the newsletter.

CHAIR: My copy may be slightly different.

The Hon. JAN BURNSWOODS: The 12-page newsletter, which comes immediately before the article on page 7, spells out the objections to the photograph in the bulletin.

CHAIR: Mr Jackson, I refer you to some of the recommendations of the Royal Commission into Aboriginal Deaths in Custody. You have mentioned recommendation 12, which says that the coroner should investigate quality of care, treatment and supervision of the deceased after a death in custody.

Mr JACKSON: What are you reading?

CHAIR: To be perfectly honest, I am not exactly sure. It is a document with several footnotes.

Mr JACKSON: That is the article from the *Aboriginal Law Bulletin*. The article is not mine; it simply highlights the need that its author saw to legislate nationally for coronial inquiries to ensure proper implementation of the coronial recommendations.

CHAIR: Under the heading "Notification of Family and Aboriginal Community", the document refers to recommendation 20, which says that appropriate Aboriginal legal services should be notified immediately of any Aboriginal death in custody and so on. It goes on to say that only the ACT has implemented recommendation 25, which states:

> the family should have a right to view the body or the scene of death and have an independent medical practitioner present unless the coroner directs otherwise.

Are you aware of any circumstances involving a death in custody where, first, that has not been permitted; and, secondly, the family have some concerns that they were not given quick access to information of that nature?

Mr JACKSON: As I said before, recommendation 25—in fact, all coronial recommendations—were picked up very quickly by the Coroner's Court—by Derrick Hand and

John Abernethy especially. There has never been a problem with the family's designated medical practitioner going in. I used to go in to look after the cultural side: to make sure the body was treated with respect and so on. Recently there has been a move by the Glebe pathologists, such as Dr Christopher Lawrence, to deny entry to the medical expert picked by the family. When we argued about that ruling, Dr Lawrence tried to bar me also. That did not work either.

I have met with the coroners, including the coroner from Westmead, and they say that they do not have a problem. However, it is now up to the pathologists to agree on who can be present at an autopsy. I have attended several autopsies—at least eight or nine—as has Carl Hughes, a forensic expert who works on behalf of Aboriginal families. We had to fight for that right in Western Australia, the Northern Territory and in Queensland, and there are varying levels of success regarding access in those States. We never had a problem in New South Wales until about the middle of last year.

CHAIR: In earlier evidence you outlined your concerns about a death in custody that occurred at Cessnock recently. You have a particular concern about proper notification.

Mr JACKSON: Yes. The notification problem is about identity. The police reports identified the inmate as being Caucasian, but his gaol records identify him as being Aboriginal. I know the family through another person and they are definitely of Aboriginal descent—there are no worries about that. Many people do not identify themselves to the police as being Aboriginal—rightly or wrongly—for obvious reasons. When this person was put into gaol he was a known suicide risk. He was put into the special crisis unit and was seen by the risk intervention team and the risk assessment intervention team—I am not sure whether they are the same thing. He was seen by a psychologist, a psychiatrist, doctors and so-called experts who complete the assessments and screening.

I understand that this man spent some time in the crisis unit, but it is alleged—I cannot put it any stronger than that—that he was returned to the main gaol at his own request. Someone must take responsibility for that decision; someone certainly breached recommendation 122 about duty of care.

CHAIR: What would you expect to happen if an inmate said that he wanted to return to the main prison but that action was thought inappropriate?

Mr JACKSON: On most occasions the inmate would be told in strong terms that he must stay where he is.

CHAIR: Are you concerned about the trend regarding deaths in custody in New South Wales? I note that there have been a number recently.

Mr JACKSON: I am very concerned about that. The last four Aboriginal deaths in custody in this State have been hanging suicides.

I think that really highlights the need of the department, the Minister, this Government and the whole Parliament to do something about removing evident hanging points from the gaols. A new women's gaol is to be built, or so we have been told. I, along with other people representing different community groups, some of whom have appeared here, sat down at several meetings with the Minister, the commissioner, the senior assistant commissioner and all the other people, and we talked about what should be done instead of building a gaol. What

we opted for was 50-bed transitional centres put in places of need. The department pooh-poohed that idea, as did the Minister.

I was asked specifically by Senior Assistant Commissioner Ron Woodham whether I wanted to have a look at the plans of the gaol. He had them right in front of him. I said that I could not at that time; that I had to go back to my association. I had to get either their agreement or their disagreement. I then wrote a later letter stating that the association certainly believed that it had a duty of care to participate in an attempt to try to make a safe gaol. Unfortunately, our input was then denied. We were told, "Don't call us, we'll call you." Whilst they are still building gaols like the Windsor gaol for minimum security males, I pointed out that, if this women's gaol gets built, it will have evident hanging points in it. When they built the MRRC I and others pointed out the evident hanging points of the shower rails.

The Hon. JAN BURNSWOODS: Did you say that you were not willing to look at the plans for the women's prison?

Mr JACKSON: I was, but that offer has now been withdrawn.

The Hon. Dr A. CHESTERFIELD-EVANS: Is that because you did not take it up right away? You had your moment and it was gone?

Mr JACKSON: Yes. I had to go back to my association.

CHAIR: I do not think that the plans for the prison are in existence, other than a footprint.

Mr JACKSON: Oh yes, they are. Ron had this great big roll of plans.

The Hon. Dr A. CHESTERFIELD-EVANS: You are talking about the women's prison and the Chair is talking about the men's prison.

Mr JACKSON: I am talking about the women's gaol.

CHAIR: There are some diagrammatical drawings, but, as I understand it, they do not represent plans.

Mr JACKSON: They are plans, to me anyway,

CHAIR: They might look a bit like that, but they are not plans.

The Hon. JAN BURNSWOODS: We have been informed that detailed plans have not been produced.

Mr JACKSON: Most probably not.

CHAIR: I think some drawings were done in order to calculate sizes and so on, to enable a footprint to be drawn up. I have seen what you are referring to. I understand that they are not plans.

Mr JACKSON: An analysis was done by the association on the hanging deaths and the evident hanging points. That will be an article in our next newsletter. I will make sure that you get it. It points out much of what I have been saying.

CHAIR: We are quickly coming to the end of the time that we have available Mr Jackson. As I said earlier, I noticed in some of the material that you have given us that there appear to have been 12 deaths in custody last year.

Mr JACKSON: There were seven indigenous deaths and one at a police station.

CHAIR: Four of those people are of indigenous origin. How does that compare with previous years?

Mr JACKSON: That is the highest since numbers were kept from 1980.

The Hon. JAN BURNSWOODS: There is a table. Table 5, just before that list at the back of the names, actually spells out all those figures.

CHAIR: This table shows that there have been 25 deaths in custody, of which seven were indigenous deaths. That appears to be the highest number of deaths in custody in New South Wales since 1980.

Mr JACKSON: There are indigenous deaths and there are total deaths.

CHAIR: The total deaths would also be significant.

The Hon. JAN BURNSWOODS: If you go back a few pages there is also a total of cause of deaths, which divides up natural causes, suicides and the yet to be determined.

Mr JACKSON: The trouble with some of these documents is that when they talk about yearly deaths they sometimes use calendar years, and at other times they use financial years. It depends on which one is the lowest.

The Hon. Dr A. CHESTERFIELD-EVANS: Is that why you put in both?

Mr JACKSON: Yes.

CHAIR: Are any statistics kept of suicides or self-harm among female prisoners?

Mr JACKSON: There have not been any for some years.

CHAIR: As in statistics, or there have not been attempts?

Mr JACKSON: No there are statistics, but it is a question of getting them from the unit.

CHAIR: Are you aware of the fact that the department would then keep records of any attempt to suicide?

Mr JACKSON: They keep records of self-harm, suicide attempts, actual suicides and all that sort of stuff. That is very much inside the bunker.

(The witness withdrew)

(The Committee adjourned at 5.36 p.m.)