

REPORT ON PROCEEDINGS BEFORE

MODERN SLAVERY COMMITTEE

**MODERN SLAVERY RISKS FACED BY TEMPORARY MIGRANT
WORKERS IN RURAL AND REGIONAL NEW SOUTH WALES**

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At Gem Hotel, Griffith, on Thursday 19 June 2025

The Committee met at 8:50.

PRESENT

Dr Joe McGirr (Chair)

Legislative Council

The Hon. Dr Sarah Kaine

The Hon. Aileen MacDonald

Legislative Assembly

Mrs Tina Ayyad

Ms Jenny Leong (Deputy Chair)

PRESENT VIA VIDEOCAMERA

Legislative Council

The Hon. Greg Donnelly

Legislative Assembly

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The CHAIR: Welcome to the third hearing of the Modern Slavery Committee inquiry into modern slavery risks faced by temporary migrant workers in rural and regional New South Wales. I acknowledge the Wiradjuri people, the traditional custodians of the lands on which we are meeting today. I pay my respects to Elders, past and present, and celebrate the diversity of Aboriginal peoples and their ongoing cultures and connections to the lands and waters of New South Wales. I also acknowledge and pay my respect to any Aboriginal and Torres Strait Islander people joining us today. My name is Dr Joe McGirr. I am Chair of the Committee.

I ask everyone in the room to turn their mobile phones to silent. Parliamentary privilege applies to witnesses in relation to the evidence they give today. However, it does not apply to what witnesses say outside of the hearing. I urge witnesses to be careful about making comments to the media or to others after completing their evidence. In addition, the Legislative Council has adopted rules to provide procedural fairness for inquiry participants. I encourage Committee members and witnesses to be mindful of these procedures.

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Mr KEN DACHI, Coordinator, Welcoming Australia, on former oath

Mr PAUL MAYTOM, Chairman, Leeton Multicultural Support Group, affirmed and examined

Councillor DOUG CURRAN, Mayor, Griffith City Council, sworn and examined

Mr BRETT STONESTREET, General Manager, Griffith City Council, sworn and examined

The CHAIR: I welcome the witnesses appearing today and thank them for making time to give evidence. Would any of the witnesses like to make a brief opening statement before we begin with questioning?

DOUG CURRAN: No.

The CHAIR: Mr Maytom, would you like to make an opening statement?

PAUL MAYTOM: I am not sure how much you want me to put into it. I will explain that in my role as the president of the Leeton Multicultural Support Group, I have day-to-day and week-to-week interactions with the people who are affected, whom we are representing today. It is important. We are at the coalface. I have some documents that I can present to the Committee at some stage today to back up some of the terrible situations that I am aware of in our community of Leeton, which I am sure will be happening elsewhere. We are aware of it in Leeton because we have the face-to-face discussions with the people going through those circumstances.

The CHAIR: Thank you. Mr Dachi, would you like to make an opening statement?

KEN DACHI: Yes. There is no gainsaying the tremendous value the Pacific Australia Labour Mobility Scheme, also known as the PALM scheme, has brought to our region and to both rural and regional Australia at large. Yet, vulnerabilities caused by disengagement from the PALM scheme pose the greatest threat to our efforts to foster social cohesion in the Riverina. The triggers for PALM disengagement are numerous, and I will not dwell on their legitimacy. What I do know are the heart-wrenching stories of suffering and pain experienced by disengaged PALM workers who are part of our community. Their case studies have been meticulously documented in Leeton's case by Mr Paul Maytom, the president of the Leeton Multicultural Support Group. The time for action is now. We can no longer afford to live in communities whose members are both lawful and unlawful.

New South Wales can do the following: appeal to the Federal Government to grant amnesty to all disengaged PALM workers to allow for them to rejoin the scheme or opt for voluntary repatriation, restoring integrity to previously disengaged workers and the program itself; expand the funding base for Multicultural NSW, whose programming must include participants in the PALM scheme, using a whole-of-community approach which was modelled by Dr David Radford in the Learning from Leeton report; pass legislation to regulate the registration of labour hire agencies across New South Wales; pass legislation to grant the Office of the Anti-slavery Commissioner investigative prosecutorial powers to monitor employer conduct in the State; advocate for Federal Government departmental clarity on the overall responsibility and management of the PALM scheme; and finally, revise the conditions on the 403 international relations PALM visa.

The CHAIR: Thank you, Mr Dachi. Thank you very much for your previous evidence. We have previously heard from the mayor and general manager of Leeton City Council. I will begin with a question for Mr Maytom and Mr Dachi. Could you elaborate on what you refer to in your opening statements in terms of what you are facing in Leeton—the extent of the program and, perhaps, some examples of the problem, so we get your frontline experience of the problem?

PAUL MAYTOM: In my case, I was previously the Mayor of Leeton for many, many years, on Leeton council, so I have a connection with our community—a strong connection, especially with those in the multicultural groups that come to our town. In most cases, of recent years, it's been the disengaged PALM workers that have taken up a lot of the time, if you like, with Ken, myself and others. We're seeing and hearing their story when they arrive in Leeton, and we wonder why it's not, I suppose, being addressed—these issues—before it comes to us. So we're actually getting the tail end of the problem, which is a real issue to us because we can't fix the problem; we only offer advice. But when we have these people sitting in front of us, around a table, and telling their story to us, it is very distressing to believe that we have a scheme like the PALM scheme, that has great intent—we support it 100 per cent—and to see what we're seeing, which is the tail end of the situation where they're in trouble and they don't know where to turn to.

They ring up the PALM grievance line. The experiences that they're giving me tells me that they're not getting adequate answers for their problems. Those that have told their employer that they were going to contact the PALM scheme, they've been threatened to say they'll have no job and they'll be sent back to their country if they complain about anything to do with the PALM scheme. And when we hear this, we're not just reacting to a

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conversation. Ken and I normally get some detail of what the situation is, where we'll ask them for their journey, when they arrived in Australia. We had a situation with eight or so people talking to Ken and I a couple of years ago, who arrived in Australia and headed off to a packing plant up in Cairns, packing mangoes. The poor souls are sitting there telling us their story that they start work at four in the morning, they're working through until eight o'clock at night, sometimes until 10 o'clock at night. But, essentially, then 35 days straight some of these people were working, contrary to all the conditions under the PALM scheme.

This is an organised, structured way that they've been introduced to this opportunity to work in Australia and offer some support for their families back home, on a wonderful scheme that, if it works properly, is so great. We sit there, we listen to that. We really don't know where to go to because, remember, they're disengaged workers. They've been forced out of the system. They don't know where to go to and, in many cases, they're hiding, to a degree, from the authorities because they're concerned that they don't have—well, they're disengaged workers so, in essence, they're undocumented. It is distressing to see.

The pregnant ladies that have presented to me—10 of, in Leeton—some of those are still in Leeton, some have disappeared into the bigger world out there. Some are here in Griffith. But some of those people are in situations that we don't even know where to go to, what advice to give them. I've spoken to DEWR. I've outlined their particular circumstances, but I see nothing happening. I see a situation where a lady presents to me that had her baby two months premature, here in Griffith hospital. They have no health cover. They have no support. The only way that lady, amongst others—but her case was extreme. Her baby was two months premature. She was in Griffith hospital for quite some time. She then came out of hospital. Her accommodation—she had no money because she had no partner. That's her second child, by the way. Both those children are State wards now, by the way. That's an extreme case, but it's there.

The lady wasn't even capable of going to work. It was only because I knew a guy from Pakistan; he was prepared to take her into the house and give her free rent, but on the condition that when she started working she then paid back what was owed. She couldn't start back working again. Her condition didn't allow her to go back to work. So she has now disappeared out there somewhere in the big world. She pleaded with me. She was interviewed at the Griffith hospital, by the welfare people, and she agreed to hand the second baby over, as she did the first baby, not knowing who the father was. In essence, then she's ringing me because, she said, "I didn't know what to do, Paul, because I have no money, so I agreed to it. But I want my babies back." You say to yourself, "That's tough."

The CHAIR: In terms of the people that you've been meeting, supporting, in Leeton, can you give us some estimate of the number of cases that you've been dealing with?

PAUL MAYTOM: Over the years, Ken and I have been very much involved. We could have up to 10 people in a day sometimes, certainly 10 or more in a week depending on the circumstances—on how many come in with that cohort that are coming to our region to pick fruit. They are transient, as you know. They can move in and move out. Ken, you're probably meeting—

KEN DACHI: Yes. Last night, I met 10 disengaged workers in Leeton. Ten—five women, five men. If we go back to 2023, on average it was even up to 15 disengaged workers per week. That's why we were able to do a simple projection of a period of, say, 10 months. Approximately, you'd be talking about 300 disengaged workers in and out of our office for consultation. Would the numbers have shot up? I'd say so confidently because at yesterday's little gathering of disengaged workers there were seven who I hadn't met previously. I've been located in Leeton six years now, and we've been on the issue of disengagement about four years straight.

Ms JENNY LEONG: Thank you all for being here today to bring some light onto these horrific situations. Paul, you mentioned you are the former mayor; Ken, you're connected with community. People that are connected with councils are connected with community. How much is known about where the exploitation is happening? Part of it is this idea of, yes, we know that in theory the PALM scheme can work for people, we know that we have workplace laws, we know we have laws around underpayments, and we know we have tenancy laws. All of these exist, right? There is, obviously, a disconnect somewhere between the workers who are in an exploited situation, and people in-between who understand what the laws are and are choosing not to abide by them and not comply with them, and then the horrific end results that occur where people get disengaged. Where is the breakdown between the different elements that exist that allows this to continue to get to the point where people are disengaged? The disengagement is one thing. But before we get to the disengagement, where is that happening, and where does it need to be—please, Mr Stonestreet, and I'm happy to hear from all of you.

BRETT STONESTREET: Thank you, Deputy Chair. I think the root of the issue here is that when programs are developed—for instance, the PALM scheme is one—but in the local government sector there are a whole lot of programs that are developed at a macro level, whether it's State level or national level. But when those programs actually are implemented, it's not until the localised version of that program has the implications

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for people's lives. Therefore, there needs to be, at the front end of the development of programs—say, the PALM scheme—there needs to be close communication and consultation with service providers, local government and others at the local level who know the implications of the decisions of putting those programs in. The mayor can make comment himself, but I know from my experience in Griffith there is a reluctance of persons to actually shed light on where there might be a specific problem. Mr Maytom made mention of the vulnerability of individuals. They have no power. If they are disengaged, they are likely to be, basically, returned to where they came from.

Ms JENNY LEONG: Can I just pick you up that, Mr Stonestreet. I appreciate that the power imbalance is such that those individuals being exploited don't want to shed light on it but, presumably, those people whose factories they're working in, farms they're working in, have more power. Similarly, the people that know those people also have power—the labour hire companies, whoever. There are people that have more power in these interactions that obviously know that this exploitation is occurring.

BRETT STONESTREET: Yes, I can't speak for individual employers. Individual employers have their own imperative as to why they exist. They are concerned about the welfare of individuals, but they have a whole lot of pressures upon them, of which this is one. But if the framework is not in there behind the whole program, sometimes they don't feel it's their role to actually patch up the program or to make it right. So if they need lots of staff to keep their business running, they see it as, I suppose, some other authority's responsibility to make sure the welfare is in place for these individuals. There's a gap there, and they fall through the gaps.

DOUG CURRAN: As an organisation, councils probably aren't the first port of call for people that are suffering from this exploitation, so we probably don't see it firsthand. But when we hear from Ken and Paul about their experience, and what we see anecdotally in our community, is people that are reluctant to engage with authorities. So when there is an opportunity for them to plead their case, they're not sure where to go and they seek support from groups such as we're represented with today. That's where we feel the disconnect is. We met with Australian Federal government employees only last week for the PALM scheme, and there's no representative closer than Wagga. That's fine, except we know the epicentre for this is in this area and our closest contact person is in Wagga. She's a lovely young lady—absolutely not denigrating her at all—but it makes it very difficult for us. We were given a card that said, "Reach out to this number"—

Ms JENNY LEONG: If there are problems that you hear about.

DOUG CURRAN: —"if there are problems, but make sure you do it during business hours and not on a weekend." I understand there are limitations, but that makes it very, very difficult. If the worker is working full-time, how do they then make those calls, or who do they contact? As was explained earlier, if the call isn't actioned immediately, where do they go? What do they do? Are there then ramifications on that individual? Or do they then abscond, and who knows where they go into the system?

The CHAIR: Are there translation services?

DOUG CURRAN: It was explained to us that there are, absolutely. But again, what's the pathway to that? They ring a number—do they even have access to phones? They would go and visit registered employers, but they were unable to then visit unregistered employers, which is potentially where the exploitation is going to take place. What agency then does that? It doesn't fall on them. The police are probably not being engaged. I know, from a council point of view, we're not being engaged. There just seems to be a lack of that final step, which is engaging that person to try and improve their circumstances. I'm not sure of the answer, but it's certainly that last step that is missing, I believe.

Ms JENNY LEONG: Indeed. To Mr Stonestreet's point, then, there's no risk that you're going to get caught out if there's no oversight. The closest person is in Wagga; they work from nine to five. You're exploiting workers in some area of Leeton or Griffith. The likelihood that you're going to get caught out, for those that are doing the wrong thing, is zero to none.

DOUG CURRAN: It's extremely minimal, absolutely.

PAUL MAYTOM: Can I just add at the start of this that I'm not aware that we have all these people that are being, for want of a better word, ripped off in our Leeton area. In fact, most of the people I talk to—because I do know the people that do employ them, by the way—generally are paying them around about the right money per bin of oranges. Let's say that I'm aware of that. So in that regard they are being looked after adequately, I suppose. But the whole issue is with the accommodation. I'm not going to take anything away from this, either, remembering that accommodation that's not adequate for us is quite acceptable by them. Any accommodation is better than no accommodation.

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I have seen situations with people camping in backyards. I have seen situations with a few bricks and a bit of iron over the top and a fire going to boil the water or whatever it may be. I've seen all that, and I can't accept that. But I can't then go to council and tell them this shouldn't be happening, because otherwise we have people who've got nowhere to go. The whole system is designed—the dots aren't joined. They should be joined in a way that, if you've got 50 people coming into your community, there should be awareness by local government, at least—I'm not saying they have to be responsible, but at least an awareness—that we have that cohort coming into our town, and are they going to be adequately given accommodation that's within reason.

Our council, being an ex-mayor, don't have the ability to get out there and check all those homes that are in our town. But I do think that we need to have an awareness that any accommodation is better than no accommodation. It will never be to the standard that we want but it is acceptable to them. But when you see things that I have seen, where you have minus one degree with a little baby, two months old—I have photographs to go with this, by the way—lying on the floor with blankets over it and nothing else in a little room as big as a laundry with a mother and father, you've got to say to yourself, "It's pretty hard to walk away from that." If you go and report that, you don't know where they're going to go after that.

That is a real issue that we need to address. The dots must be joined to say that an acceptance of the accommodation—because many of those accommodation places are farmhouses. I've been in a lot of those farmhouses. In many cases they've got hot water and general facilities that are within reason; I don't want to be taking that away. But in extreme cases that I've seen, it is quite frightening. How you link local government into it, I'm not real sure. Should they bear responsibility? The responsibility at this point is our small group of Leeton Multicultural Support Group. We only have a small core group that's there. If we're not made aware of these circumstances, we don't know how widespread this is even happening, so it's most important.

One of the bigger issues is, once all these people become disengaged PALM workers, they don't have a right to workers compensation and they don't have a right to medical care. However, they do if you follow a pathway. The pathway is I normally introduce them to the hospital. I will tell them that they don't have any Medicare, and we will generally work something out. I then proceed to fill out what I call a hardship form. We had one guy with \$61,000 with his medical account—\$61,000 from the Solomons. He's now back in the Solomons because we were able to get him back home, but he had a stroke, so that was looked after.

When I say "looked after", I mean through a hardship form. He had \$146 in the bank and he couldn't work because he had a stroke, so that was an extreme case. Another guy had to have his index finger on his right hand taken off. He found it very difficult to pick after he had that happen. Remember, there is no WorkCover for these people. If we have an accident that is extreme and, dare I say it, there was a death, all hell would break loose out there. These people are working, unbeknownst to the employer or the farmers that they don't have cover, because they're just paying the money to the person that's supplying the labour.

Ms JENNY LEONG: Mr Maytom, if you want to table those documents, feel free to do that. Someone from the secretariat will be able to take those documents from you. You can table them so you don't miss out on that opportunity.

The CHAIR: I'm conscious of the time. Ms Ayyad, would you like to ask a question?

Mrs TINA AYYAD: I do. My question is for Councillor Doug Curran, the current mayor, and Mr Brett Stonestreet. Considering budget restraints and funding from Federal and State governments, what role can the local council realistically play in closing this gap that many of you have referred to?

DOUG CURRAN: It's a great question. Everyone's budgets are under constraints at the moment. Certainly from a financial standpoint, I don't feel that it is local government's responsibility. However, in saying that, it is our communities that are economic powerhouses that need workers that are great in terms of agricultural input and output. We need these workers. Our community has responsibilities. But if the system isn't set up properly from the start, as Mr Stonestreet earlier said, it will eventually break down and it will be our communities that are left trying to support disengaged workers, or even the engaged workers.

We see engaged workers waiting outside ATMs and checking the ATMs every five minutes to see when their money goes in. That's not once or twice; we see it all the time. There's never any trouble, but the fact they virtually live in front of an ATM is so disappointing. It denigrates from there, the respect that they should be able to have. It starts to denigrate from community as well. The support that we would do is advocating, making sure that we're engaging groups such as Paul's and Ken's and Rural Australians for Refugees. All of those groups—we support Back Your Neighbour and all of those groups. But in terms of financial, I don't think local government should be left to carry that can. I'm more than happy for the general manager to make comment.

BRETT STONESTREET: Can I say that with the dilemma of the local government financial liability problem, which has been there for decades, the reality or the rubber hits the road when we have inquiries like this

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that need to be set up to investigate disintegration of services at the local level. You'd be well aware that local government funding from the Federal Government has dropped by 50 per cent over the last three decades. There is an artificial rate pegging policy, which all sides of politics have endorsed for several decades. Ultimately, that ends up with a bill shock at the end of the day. That's all it ends up being. It's really unfortunate for our council. When I first started with Griffith City Council 14 years ago, can I say, looking very closely at the financial position of council, my number one priority was to keep our council financially sustainable. And at that time I needed to reduce my staff in order to fit within the envelope of sustainability. Can I say that support services for new citizens to Griffith were one of the areas that we needed to examine very closely unfortunately at that time.

Mrs TINA AYYAD: Would it be sustainable for council to take on a bigger role in this area should the funding be available from the Federal or the State Government?

DOUG CURRAN: I would say absolutely because we are the closest people to our communities. If there were positions funded by the State or Federal Government, then we would have the right people in the right places to have those conversations. However, far too often there is a short-term funding boost, we'll put a staff member on and then two years later we're having a very difficult conversation about, despite all the good work that they've done, the need for us to look for savings. As the GM said, because that funding isn't perpetual, it stops in short periods of time.

Mrs TINA AYYAD: This kind of model, if it was to happen—what would be the scope of these individuals who are then employed by local council but of course funded by the Federal or State Government? What would the scope encounter? Would it go beyond checking accommodation?

DOUG CURRAN: I believe it would. From a council point of view, if we get a complaint that there is accommodation that is taking advantage of individuals, we will investigate that. Far too often we hear that there is some but when we say, "Give us the address", there is nothing forthcoming. It's about engaging with that community, going to groups such as Paul and Ken's, so that we can hear firsthand. They're much more comfortable to go to that group and have those honest conversations than they are to council. It's about having that conduit to get into that group and having somebody then be able to go out and proactively address those concerns as opposed to reactively. We hear of bed hopping, so they'll go and investigate a house and there will be five people in the house but then there are another five people in the house when that shift goes. Then there are another five people in the house because there's so much work, there are so many people in area, and that's only sustainable for a very short period of time. So, absolutely, we just need that conduit.

Ms JENNY LEONG: Mr Dachi, did you want to comment on that?

KEN DACHI: Actually, the comment I wanted to put in is one word discussing gaps—it's just to add to what has been submitted. The issue here is that we need proper oversight on employer conduct and there is a mechanism for that. We need proper oversight on what we call contracted service providers. There is a mechanism for that. If we join all these dots and then position local government far more strongly through a funding base, then we'll be able to address this issue.

The Hon. Dr SARAH KAINE: Mr Dachi, carrying on from what you just said, I'm struggling a bit to put the pieces together, because I hear very clearly that there are systemic issues with the program, but the program is made up of various parties. Some of those parties are complicit in the experience that these workers are having. But what I've heard today is that the responsibility—I'm sensing the responsibility is more settled with the systemic issues. How is it that, in communities which are relatively, I guess, well known to each other, it isn't known which organisations aren't doing the right thing, which farmers aren't doing the right thing? I worry that there's a level of complicity and a shifting of responsibility onto the system—"Oh, that's someone else's to check." Mr Maytom, your example of workers comp—farmers aren't checking whether there's workers comp. Well, that could be checked. There is responsibility for those at the top of the supply chain to check. I wondered if you have any comments about the system. Yes, there are clear issues, but it's made up of people within that system who have legal but also ethical responsibility to make those checks. Do you have some comments on that aspect?

PAUL MAYTOM: It's extremely difficult to try to find a way around this because we don't know exactly how many people are employed in our region that are disengaged PALM workers. When they're employed, they're not employed individually; they're employed as a body through an agency, if you like, or through an employer body. That's all the farmers care about. They want 20 workers; they ring up for 20 workers and out they come. I can't give you anymore information than that outside the fact who does those checks and balances, I don't know. All I know is if you are disengaged, there are no checks and balances in place. The only people that are doing that is us. We are doing the checks and balances.

Ms JENNY LEONG: Can I just jump in and follow up on that, because I guess what we're trying to get at is with the issues, whether they indeed are the employment issues or the accommodation issues, there are issues

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that are causing people to become disengaged. So, yes, leaving aside for a second the very real and serious issue that we need to deal with about the disengaged workers, there are reasons why people are disengaging. To Dr Kaine's point, presumably people know which worksites people are disengaging from because the practices in those worksites or the accommodation supplied as a result of people going to those worksites is not up to standard and so they're choosing to disengage. It's hard for us to comprehend the idea that that's not known to local communities that are connected, that know their local farms, that know the abattoirs, that know the workers, that get together at the pub or at church, or whatever. People presumably know who these people are. So, yes, there is a systemic issue, but there are also bad actors, right?

KEN DACHI: Yes, and we know the bad actors. You'll be given the evidence when these folks come into the office to explain why they disengaged in the first place. But what happens to the bad actors? That's the question. We don't have the power to prosecute, and so one of the recommendations we just read out is that we need to do something about effectively bringing to book those that have been reported to upholding bad practice or poor practice. That is a trigger for this engagement.

Ms JENNY LEONG: Mr Dachi, in that case where you know the bad actors—

KEN DACHI: Yes.

Ms JENNY LEONG: I'm sure you know.

KEN DACHI: I do know.

Ms JENNY LEONG: I'm guessing everyone at the table knows.

KEN DACHI: Yes.

Ms JENNY LEONG: But you particularly have admitted that you know.

KEN DACHI: Yes.

Ms JENNY LEONG: If that's the case, is the issue with not being able to act the fact that the only avenue to act is to get those vulnerable workers to speak out? Surely the council or, indeed, other organisations could take that action to address the bad actors.

KEN DACHI: Absolutely.

Ms JENNY LEONG: Sorry, I jumped in, Dr Kaine, but I feel like we're on the same page.

The CHAIR: I think we're asking the same question.

KEN DACHI: This is why I've added the word "mechanism". The mechanism does exist. When someone presents to our office or any of our spaces and says they've disengaged from the program, they give valid reasons, if you want to call them that. But then how do we move from the validity of those reasons to prosecuting the bad actor?

The Hon. Dr SARAH KAINE: Could I ask a follow-up question, then, probably to council. It's probably a question I should have asked all the councillors we've had, so I'm sorry you're the one sitting in the chair. I wonder, then, on discovering, by being in the local community, where there might have been these bad actors, does council take action or report to anyone or write letters? Perhaps not in that mechanism, but there are known authorities who might have an interest, including the Anti-slavery Commissioner or Fair Work Ombudsman or others.

The CHAIR: Federal police, for example.

The Hon. Dr SARAH KAINE: Yes. Does the council proactively do that?

DOUG CURRAN: I have to say, hand on heart, we don't know who the bad actors are. They're reluctant to tell an organisation such as council. Personally, we don't know. We've had conversations around this. When we had the representatives from the PALM scheme out here two weeks ago, we asked them how many registered PALM workers were in our LGA. They didn't know. We asked them what percentage of those registered PALM workers, give or take, were disengaged. They didn't have those figures. They acknowledge that they don't have very good datasets, and they're working on that, absolutely, so I'm not being critical of that. But if the people that set the scheme up don't know how many workers you have in an area, and local government areas are fairly easy to determine, how can the local government or the community be confident that they're aware? You may get represented by seven people, but how many are in the background that are completely missed? I just want to clarify: I don't believe council has a good handle on who those bad actors are.

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The CHAIR: Those are the authorities responsible for administering the scheme. They weren't able to tell you how many PALM workers they had here locally?

DOUG CURRAN: In any local government area.

The CHAIR: Could they tell you how many registered organisations there are? I presume there are organisations that are registered.

DOUG CURRAN: They said that we could go to their website and get that information if we chose to. Then when we went to the website, it was very difficult to navigate.

Ms JENNY LEONG: I've been there. It's not possible. I tried to put it together and it didn't work.

DOUG CURRAN: Absolutely. You can go through, but you have to identify which organisation is represented in your community, as opposed to going in and typing in "Griffith LGA". There was no search engine that would tell us. It would tell us each group, but we had to individually go through and say, "Yes, that group is represented in our community."

The CHAIR: There are unregistered organisations that are also employing—I use that word loosely—workers. But they must be employing disengaged workers or people not through the scheme, I would imagine.

KEN DACHI: Yes.

Ms JENNY LEONG: And they could be the same ones, or not. We don't know.

KEN DACHI: By "the same ones", do you mean the employer who may have caused the disengagement in the first place?

Ms JENNY LEONG: Yes.

KEN DACHI: Not necessarily. What we do have in New South Wales, which we have been trying to vocalise, is the fact that the regulatory space around labour hire agencies is still absent. It exacerbates a problem that may have been triggered elsewhere. The stories we do receive from disengaged workers go as far—in terms of a trigger—as somewhere in Far North Queensland to all the way down in Tasmania. I usually say that triggers of disengagement could be without our context, but the consequences of disengagement on the arrivals of these people are within our context.

PAUL MAYTOM: Just in relation to those who are disengaged, we are not saying that there are people who are mistreating people in our town. We are saying that those who are working are actually being paid adequately for what they're doing. Most of the people, if not all of the people, that we are seeing are coming from elsewhere. They come to our office to talk with us and tell us what happened to them somewhere else. In essence, remember it is those disengaged workers that we don't have a handle on, because we don't have any checks and balances for them. Checks and balances are in place for PALM workers, who are working very happily in our regions. I speak with those people. The program is working brilliantly for those people. They don't have any reason to disengage. It's only when they are not working so well that they disengage.

The Hon. Dr SARAH KAINE: Why are they ending up in Leeton?

PAUL MAYTOM: They end up in Leeton, in Griffith, in Shepparton, in Gatton and Mildura. These people are transient. They are all over the place. I see some people one week, I go to the caravan park and meet them, and the next week, there are 10 new people there who have come from Gatton or somewhere else. They have heard about Leeton. They have heard about Griffith. They know it's a good opportunity to make some money and they feel they can do better by working in the open workplace—if you like—rather than being controlled, with a whole lot of inductions and other things, as well as mistreatment, in some cases. I am not aware of any employer that is employing people under the PALM scheme in our town who is mistreating these people. There are proper checks and balances done.

The CHAIR: These are registered employers?

PAUL MAYTOM: These are registered employers under the PALM scheme. It is not as easy to do the checks and balances—what we are talking about here today—on those who are disengaged. Only we can do that. I will tell you that they don't trust the system. Status Resolution have come to Griffith and Leeton three times. People have come along to meet with those representatives from Home Affairs. In essence, they are now fearful of meeting any of those people because they are fearful they are just going to be sent back. One of the major recommendations I made to the DEWR when I met with them on 24 October last year—and I will table the document—is, in essence, that we have to have an amnesty. We can't just go out there and grab all these people, like they might in some other country, and take them away. We have to have a managed program where we can get our house in order. The farmers need the workers—in many cases—who are disengaged. They may not be

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legal, but they are there. Let's have an amnesty that essentially gives us an opportunity to see how many we have out there in the regions and see what we can try to do, and not in 28 days—the 28 days on status resolution gives them no work rights whatsoever.

The CHAIR: Mrs MacDonald would like to ask a question. I'm just conscious of time.

The Hon. AILEEN MacDONALD: I have many questions, but I'll stick to one. Mr Dachi, how do we see that the current visa conditions and structural settings contribute to the vulnerability of temporary migrant workers? How do your recommendations—particularly around, say, flexible employment arrangements and mobility—seek to address those with regard to disengaged workers?

KEN DACHI: The 403 international relations visa that's linked to the PALM scheme is very restrictive. You just need to have a glimpse of a copy of that visa to understand just how difficult it is to be a holder of the visa and to have a situation where you necessarily feel either exploited or ill-treated and with the need to do something about your situation. If you look at how that visa is structured, the only option available to someone who feels aggrieved in their employment is to resort to applying for asylum. There has been conversation around why there is a surge in asylum seeker applications from previous PALM scheme visa holders. That is your answer: There isn't recourse to any other option, based on how that visa is structured.

The recommendation being put forward is that all the conditions on that visa need revision, and worker portability is an integral component in that visa that needs to be activated. In situations where we've had community workers reporting disengagement, they would certainly cite economic reasons—so, for example, wage theft and unclear deductions. If someone like that would exercise the right to move to a different employer, you'd reduce the chances of disengagement. So the overall architecture that informs the PALM scheme, from a visa point of view, is in dire need of reform.

The CHAIR: I think we'll have to finish there. The time for the session has ended. I thank all of the witnesses for appearing today. The secretariat will contact you in relation to any questions on notice from the Committee. I presume that you would be happy to answer those subsequently. Thank you very much. Mr Maytom, you've tabled some documents, which we'll circulate to the Committee. They're quite graphic.

(Paul Maytom, Doug Curran and Brett Stonestreet withdrew.)

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Ms CARMEL LA ROCCA, President, Multicultural Council of Griffith, affirmed and examined

Pastor SEREMAIA ROKOSUKA, Wagga Fellowship Inc., sworn and examined

The CHAIR: Let's get moving. Pastor Jerry tells me he is 10 minutes away. Welcome back, Mr Dachi. Welcome, Ms La Rocca. Would you like to make an opening statement?

CARMEL LA ROCCA: The Multicultural Council of Griffith is at the coalface of all the dramas that have been going on with absconders, PALM workers and whatever in the community, and the general migration as well. We are not funded at the moment. We used to be many years ago, but that's another story. If you'd like to hear that one day, I will tell you that. However, because the organisation was weakened to a state where—we weren't involved at the time—it was so weak we had to build it back up and get the confidence of the community back, which took many years to do because we were so badly trashed at the time. So we built it up. We keep harmony in the town by providing volunteer services to anyone—doesn't matter how complex the issues. We set up events that bring the community together, such as the yearly multicultural festival, our yearly street parade we are about to start this year, community markets, whatever. We assist the communities to set up their event as well and encourage them to incorporate so they can represent their own communities. We do all those things and more.

The CHAIR: Thank you. This question is for yourself, Ms La Rocca, and also for Mr Dachi. We've heard this morning about numbers of disengaged workers in very difficult circumstances. There has been a lot of discussion about employers and people in the community who should know the employers that are not doing the right thing and so on, and why is that the case—why are they not doing the right thing. I'm just trying to get it clear in my own mind what's happening here. It seems to me that in both Griffith and Leeton there are a number of people who have disengaged from the PALM scheme, for example, from other parts of New South Wales and Australia and for some reason have come here. Clearly, they are in a very difficult situation because, having disengaged, their visa status is questionable and, if they're going to work, they're going to end up working in a very vulnerable situation, to say the least. That's one group.

I suppose a second group would be people who are registered on the PALM scheme, working for registered workers, who are happy, whose conditions are good. Again, there are issues about health coverage, workers compensation, but that's a group of people that are working as the scheme should operate. So there's those two groups. Is there a group locally of people who are not being treated well by local employers? It sounded as though, from the evidence earlier this morning, that that's actually not generally the case—that local employers in both communities are trying to do the right thing. I just want to try and clarify that. Are either of you able to make a comment on that?

KEN DACHI: Okay, I'll go for it. For the third group—let me begin with the third group. I've heard of one incident this year, so far this year, and that's visibility right across the Leeton LGA—one incident. Procedurally, the necessary steps have been taken—contacting Legal Aid NSW, Fair Work Ombudsman, the necessary wraparound supports around the case in force and in action—so, hopefully, it will be resolved. That's just one case.

The CHAIR: So really the group that we're concerned about here is a group of disengaged workers from across New South Wales and, indeed, Australia who have found their way to this region being supported.

KEN DACHI: Correct.

The CHAIR: Of course, they then are in a very vulnerable position in terms of getting employment and can be exploited—

KEN DACHI: Yes.

The CHAIR: —and do get exploited.

KEN DACHI: Yes.

The CHAIR: And, of course, the people who are exploiting them—that's the question about, surely, we should know who they are in the community.

KEN DACHI: Yes, we should know who they are. Correct.

The CHAIR: But there seems to be a tacit understanding that we don't talk about that or we don't recognise it.

KEN DACHI: The tricky thing with PALM is this. I'll keep re-using the word "mechanism". There are key contracted parties that should ensure, administratively, that when we have incidents with disengagement, we

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can get to the root of the problem by identifying the questionable employer and following due process, whether that involves prosecution or bringing them to book, generally speaking. That exists on paper. If you look at an employer bid—for example, if you look at the work that the Community Connections program is supposed to be doing—on paper it is clearly defined that's the case. But do we see it in our context, where there have been disengagement cases reported? No.

The second group, which you accurately defined, are those still on the program, located in terms of work at approved employer locations right across our geography. The reason why that would be working—and, generally speaking, those workers would be happy; if situations arose, they would get the necessary attention—is that, again, there is a mechanism of support around it. Case in point: One large employer in Leeton has what we call a pastoral coordinator overseeing close to 104 workers who are still on the PALM scheme. But that orienting relationship and ongoing contact on a day-to-day basis has made a huge difference. That person liaising with ourselves, as the wider network of community supports, makes it such a systematic way of providing oversight on their welfare. Now, that's with folks who have employers who are upholding best practice. The opposite holds.

Ms JENNY LEONG: Maybe, Mr Dachi, on notice—

CARMEL LA ROCCA: I have to disagree with you, Ken, sorry.

KEN DACHI: Please proceed.

Ms JENNY LEONG: I was just going to say, on notice, if you can share any more details about that best practice model as a thing, that would be really appreciated.

KEN DACHI: Yes.

The CHAIR: That's very helpful.

The Hon. Dr SARAH KAINE: And also whether that's the employer or whether that's the labour hire company, because when you say "employer"—

KEN DACHI: Yes, that's a very good question. That's a direct employer.

The CHAIR: But that's a very good illustration, actually, of what could happen and perhaps what isn't happening in certain circumstances where people are disengaged. As you say, there is a mechanism on paper, but it doesn't operate for dealing with people who are in a situation where they have no choice but to disengage.

KEN DACHI: That's right.

The CHAIR: There's no mechanism for following up. There's no grievance mechanism that works for those people, hence they wind up in different parts of the country. They are extremely vulnerable because they have to work for cash. They don't have a legal status, and it falls to community organisations to support them. I'm sorry, Ms La Rocca, please continue.

CARMEL LA ROCCA: I have to disagree with Ken. PALM scheme—out here they're everywhere, especially on the big farms; not so much in our own LGA, except for the meatworks and the chicken factory. But they work on larger farms just outside our jurisdiction here—say, Murrumbidgee, Hillston, out that way, and further out. They employ a lot of PALM worker groups on a rotational basis. We've just been alerted by people on those schemes that, no, they're not happy. They tell us that they're not being treated well by their employer, in terms of the approved employer.

Let's face it—the farmer is the one they work for, or the company, but they rely on the approved employer. The approved employer is responsible for the workers—all of their entitlements and things like that. There have been many accidents on the farms that we've heard about lately. That's because of the way that the hours are structured, the breaks and all that, and also the type of work some of them do. They work very long hours—this is what has been told to us. We're helping a few people at the moment. We've helped others outside of Griffith, as well, where they've suffered through their approved employer.

The PALM scheme is a good scheme, but the management of the PALM scheme needs really urgently to be revisited and a mechanism put in place where people go out to the farms and see how the workers are doing and make them understand what their rights are in Australia and who they can contact and how. The liaison officers—I think their new name is community engagement officers—are far and scarce in between. There should be more of them. It's not good enough to have two for the whole State, for example. If you're going to have these people, there must be enough that they are able to visit the sites and talk to the workers and tell them that they can get pastoral care; if they have issues, they can contact them. The pastoral carer should be the first point of call.

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I think the liaison officers are partly pastoral carers as well; I'm not 100 per cent sure on their role. But the thing is, that is not happening.

Ms JENNY LEONG: Ms La Rocca, can you clarify who the liaison officers are in this context? Are you saying the liaison officers through the Federal Government, or are you saying liaison officers through the—

CARMEL LA ROCCA: We only know of one liaison officer in Tasmania for, say, the Tongan community. We know of one from Kiribati, who I think is in Griffith. I met one briefly once or twice; I haven't met him enough times. Now that you've got the community engagement officers, there's one for this area from Sydney.

The CHAIR: Yes, I think that's through Community Connections.

CARMEL LA ROCCA: Yes.

Ms JENNY LEONG: Is that right? And then the liaison officers are sitting within a Federal Government department?

CARMEL LA ROCCA: Yes.

Ms JENNY LEONG: The liaison officers that you mentioned for Kiribati are based in Tasmania—can you clarify who employs them?

CARMEL LA ROCCA: No, the Kiribati one I think is based around here. I'm not sure; he comes and goes. I'm not really clear on that one.

Ms JENNY LEONG: Do you mind taking that on notice and clarifying that? We're trying to get a sense of do roles exist that would be the right way to monitor this, but there's just not enough of them? Or is it the agencies themselves aren't taking that responsibility? If you're happy to take that on notice, it would be great to know who your connection points are that you're seeing with the liaison and who might employ them.

CARMEL LA ROCCA: I would be really happy to do that because it's really important.

The CHAIR: Just to be clear, Ms La Rocca, you're saying you are receiving a large number of people who are on the PALM scheme with a registered organisation who are not happy with the hours of work, conditions of work, the potential for accidents and accommodation, and your point is they've come to you because they don't have another mechanism for raising their concerns?

CARMEL LA ROCCA: Yes. With us, because we're not visible on the street, that is our problem. We need to urgently have a multicultural hub in Griffith where these hundreds of people that access us through word of mouth can just come in any time of the day. At the moment, because we're not visible, they find us and then they call us and we deal with their issues. But we need a multicultural hub in Griffith because there are so many people here that need help.

The CHAIR: Acknowledging that but, to clarify, the people who do approach you have tried other mechanisms for raising their concerns?

CARMEL LA ROCCA: Yes. One guy who got badly hurt last year called me one day out of the blue and said that for months he had been walking around Griffith looking for someone to help him resolve his issues and that he couldn't find anybody. We've been able to resolve pretty much all of his issues; it's just ongoing. But then he told the stories of the others on the PALM scheme and what they're going through. It's not just around here.

The CHAIR: This then links in to the relative lack of liaison officers who are not located locally, so they come to local community organisations. That comes back to your point, Mr Dachi: There is no mechanism for dealing with people who have no choice but to become disengaged from the scheme.

KEN DACHI: Yes.

Ms JENNY LEONG: Ms La Rocca, my electorate is in the centre of Sydney in Newtown so my usual area is not regional New South Wales. But one of things that I would say that we know in Newtown is which restaurants underpay their staff or pay cash in hand and which ones don't—that kind of thing that informally happens. And every so often the Fair Work Ombudsman will do some checks on those. But there's a bit of what you would call local knowledge that exists that people know how these things work and what happens. You, obviously, have strong connections to this community. Is there local knowledge about where the problems are and how they're working and what is stopping people from shining a light on those problem areas?

CARMEL LA ROCCA: Going back to the absconders last year, when we were at the epitome of—all the absconders all came here. I think we had 600 at one stage. Last year from my own office we had a little bit of

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funding to employ someone for a few months between the two of us. We saw 1,700 people. That's over 12 months. The bulk of those were the absconders. They didn't have BVEs, bridging visas. They didn't have anything. They didn't have work rights. So they are the ones that you're talking about.

The CHAIR: Some 1,700 over 12 months?

CARMEL LA ROCCA: Yes, in one year. That includes other people too but the bulk of them were these absconders. They came through Griffith and they only just found us because they just found us and they could just walk into my office. I'm no longer at that office so now we are less visible than before, so people just find us. But those people were the ones that are being exploited because they have no work rights. They're working for contractors out here that pay them or don't pay them—it depends. The ones who don't get paid—they then have to find other means of surviving. It's always been a bugbear with us why you don't give work rights to a person in Australia today, because that's what leads to exploitation. That needs to change. We're better than that.

Ms JENNY LEONG: Moving one step up from the disengaged workers who don't have the appropriate visas to work, leaving aside our views on the fact that they should have work rights, there are people who are making money out of using their labour. Is that known in the community or not?

CARMEL LA ROCCA: They're very clever. It's not easy to find them but they're out there. The approved contractors around here—you know who they are. They're okay. They pay their workers and whatever. But there is another cohort of contractors that employ all the leftovers, I suppose, or the hangers-on or the ones who can't find work with the registered contractors. Those ones are the ones that are exploitable by these other contractors.

Ms JENNY LEONG: Then the businesses, the farms or the meat processing factories or whatever it is that are needing those workers—do you get a sense that they are using both the authorised and the non-authorised workers? Or are we talking about a completely separate industry?

CARMEL LA ROCCA: Completely separate, because the factories will not employ anyone without work rights. If they have work rights, it doesn't matter who they are, they will employ them, because they are always in need of labour and they will pay them correctly. It's the other side, on the agricultural side and other areas that are not so, I suppose, easily visible to authorities, that these disengaged workers—

Ms JENNY LEONG: Can you give us an example of what that might look like?

CARMEL LA ROCCA: For example, on the farms there are people that pay the workers and people who don't.

The CHAIR: I'm just going to interrupt the questioning there because Pastor Jerry has arrived. Welcome, Pastor Jerry. It is good to see you. We've already started some questioning in this session but, with the indulgence of the panel, I'll just start by asking you this. You have had, I think, quite significant involvement with Pacific islander communities, particularly in this region and particularly in Wagga. I wonder if you could just tell us about your experience with people working on the PALM scheme and working from overseas in industries locally.

SEREMAIA ROKOSUKA: Just to start off, first of all, I moved into the Riverina region in the last five years. I've been involved with our PALM scheme workers who come across from Fiji, Papua New Guinea, the Solomon Islands, Kiribati, Tonga and Vanuatu. Back home in Fiji is about the Melanesian Spearhead Group, which we are known as. I thank the Lord that he has brought me to Wagga for the last five years. It was very, very bad, which I can see today. For me, looking after these people of mine, some of them save \$80 a week. For me, having a family, a wife and four children, all that time, myself, alone, is working. My background, I work as an engineer. The majority of my pay I use to look after the Solomon, the Papua New Guinean, the Fijian, the Tongan and the Vanuatuan.

The church that I'm running in Wagga Wagga, as Mr Joe knows well, is an interdenominational church, regardless. The reason I started this ministry is for people to feel like home, first, and, second, not to put the name of Australia down, because everybody who is calling back home, I want them to know that Australia is their real home. But regardless of the situation that they are facing under the agreement that they signed back home, there's something that is always done by the scheme that brings the labour from Tonga, the Solomons and Fiji, and the Pacific islands I already mentioned. These are the countries that I'm looking after until today. It's very sad to share this morning; it is very sad. Some of them I already raised \$90 to have within them. It is not enough. Some of their families back home, they have a house to pay, children, medical, school fees. That is all that I was doing, myself and my family—looking after these families. This is the fifth year, until today.

I've been chatting with the RWM chair. He came across and we had a chat. I flew to Western Australia regarding this matter. I've been travelling around Australia looking at this loophole, and I thank God that this is something that God allows. Me and Mr Joe, we are very best, and we always share all this—and Mr Michael McCormack, our Riverina Minister, and also our mayor from Wagga Wagga. It is very sad. I already mentioned

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to Dr Cockayne, and we had a meeting in the last two months. I mentioned that some of the workers, when they give a call that they are sick—we know the rules here in Australia. But when they are sick, what the company does, they come home, pick them up from home and take them to work. For me, it is modern slavery. There are many stories from the past five years that I can share. Until today, I feed 200 people. If you come to my church, after the church service, everybody will come to my house and I will feed them.

Every day, they come. Every day, I have to listen, of course, to family situations, money or something they are facing at work—when they tell the boss, "I am sick", or when they tell the boss, "This is the situation that I am going through at home." We know that in Australia our right is really important. I say today that we are not doing enough work—if there is something that we can look to. I told some of the reps that represent the company for the past five years that I will continue to fight for the rights our loved ones. I don't want to put the name of Australia down. I count this place as my home. If there is a situation or a point that we can come together to round it off in our conference today just to help them to live a successful life, in order for them to enjoy the country and say, "This is our place", and for them to tell everybody in the world that Australia is the best place to come and live and invest for the future.

The CHAIR: Thank you, Pastor Jerry.

The Hon. AILEEN MacDONALD: Ms La Rocca, in your submission you said that you would like the inquiry to come to Griffith. I envisage it wasn't just to sit around a table. If you were in charge of the agenda, what would you have us do today to show us the dealings that you have had with everyday people? What would you like us to see today?

CARMEL LA ROCCA: We need a multicultural hub. It's really important because it would allow people, such as the absconders or those not happy with the scheme, to be able to contact us so we can put them in touch with people who can help them—or we can further their help. The second thing is that the PALM scheme needs to manage their program in such a way that they are able to come out to the region often and visit the sites to make sure that the people are not scared to speak, because some of them are. They need to find out how to make the scheme better for everyone. They come to Australia, and they are happy to come here and work. Then they want to go back home. That's it. Between the time they arrive and the time they are supposed to be going back home, many things happen that are not the same as what they were told. They are told one thing and then they come to Australia and something else happens. Even if they do understand English, they don't really comprehend the English. Even though there are numbers that they can call, they will not call those numbers because it's too difficult and they can't explain themselves.

The Hon. Dr SARAH KAINE: I have a quick question. Ms La Rocca, thank you for being here and for the work you do. You were talking about the fact that there are large numbers of workers who operate, I guess, in the shadow economy—not with the registered employers. We are struggling to come to grips with what that looks like. I wonder, for example, if you understand whether there are particular subsectors or types of products that fall into that category? Are there characteristics of the work that is done? If we do not know particular employers, do we know which areas are the most susceptible?

CARMEL LA ROCCA: Probably in the agricultural area.

The Hon. Dr SARAH KAINE: But within that?

CARMEL LA ROCCA: It depends on the season because agriculture is seasonal. You might have citrus now, you might have almonds—they are usually picked with machines, but there are still workers. Then there are fruits and vegetables and all those areas.

The Hon. Dr SARAH KAINE: I am just trying to see whether there is a particular product where there is more likely to be—

CARMEL LA ROCCA: It's across the board.

The Hon. Dr SARAH KAINE: So it's a question of each different product, for want of a better term, has better employers who are doing the right thing and are being undercut by these shadow employers, rather than there is a particular subsector that's a problem?

CARMEL LA ROCCA: Because now, or the last many years, contractors have appeared. Contractors pretty much have the labour. So depending how good the contractors are, that's how the workers get treated. When the farmer needs employees, they contact the contractor, or the contractor goes around and tells them that they're available, they've got workers, and they will talk with the contractors, not with the workers.

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The Hon. Dr SARAH KAINE: But the farmers must know which contractors have been around a while and are reputable. They must understand that if there is someone who has just turned up and organises things on a mobile phone, they're not reputable. Wouldn't they have to know that?

CARMEL LA ROCCA: I might have to take that on notice too. But from the little bit that I'm aware of, because I'm not 100 per cent full-time into this, when farmers have to pick something, they just have to pick; they can't wait. So if someone shows up, a contractor, and they've got labour, if the contractor is a good contractor, they usually take those. If they're busy, then they'll go to the next one who goes around the farms and tells them, "I'm a contractor. I've got workers. Do you have work?", all that. So it's a bit like that.

The CHAIR: Pastor Jerry, you've described the work you've done in the past five years with communities, particularly in Wagga, and you've described a situation where people raised concerns with you about their employment, and they talked to you about that. What are you able to do? Are they able to raise their concerns with anyone? Are you able to raise their concerns with anyone in the scheme? Are there any avenues you can use to assist them?

SEREMAIA ROKOSUKA: There is a lot of concern coming from the workers. The issue is they were given a phone number, which they have to call. It's a 24/7 landline number, which they were told if this is the situation, they have to call that number. But for the past five years, nothing ever has happened. We have raised this concern. I have had a meeting with them. We had a Zoom meeting for the last five years, but nothing has taken place. Like I already mentioned, one of the bigger issues for them is looking for a house for rent. That is one of the major problems here—and not only in Wagga. I've been travelling to the Gold Coast, like I already mentioned, to Western Australia, even to those who work near Adelaide in the farms. To say this morning it is very sad, because they have raised concern about—there are plenty of things I want to share this morning about the ways when they sign the contract.

Someone came home the last two weeks and asked me if I can pay their rent—it's \$460—because their leave was not paid. When there is a shutdown at work, in this or in Junee, they have to pay them by their annual leave. The company is not paying them for the five whole days. So, at the moment, the concern which we are trying to work on with the scheme, nothing has taken place. I have been paying rent. I have been paying their medical, going out for the medical. For us, we have Medicare. For the workers, if there is something that we can look at today, it would be very good. Because of the weather, the season is different—some of them are picking fruit, some of them are working in the industry of meat and sheep. All of these industries are different, and bringing them from—some of them come from the villages, no training at all. Because it's Australia, everyone wants to put their hand up, "Let's go. Pack and go."

Training is something that we have to look at, too. For the government of Australia to be named number one we have to look at the training. Someone here in Australia has to go to Fiji, to Samoa and to Papua New Guinea and make the training. This is what Australia is like. We will pay the rent every week. You have to wake up in the morning and go to work. The lifestyle here is different, so before they leave the island they have to adapt to the lifestyle that we adapt to here in Australia. We wake up six o'clock, go to work, come back, have dinner in the afternoon and sleep. Back home on the island it's totally different, so this is something that we have to address. I have already come up with this conversation with the labour hire that the trainer should fly to Fiji, to Samoa, to Papua New Guinea or to Tonga, and stay with them for a month, give them a good training before what they call the pre-departure training.

Ms JENNY LEONG: Thank you so much for the insights you're providing. Can I ask you just to clarify? You were saying that for five years, people have been calling this 24-hour hotline and nothing has happened. Do you mean people don't answer the hotline, or people make complaints and then no action is taken?

SEREMAIA ROKOSUKA: No action has been taking place. People have been calling and no answer at all.

Ms JENNY LEONG: So, basically, you're aware of people ringing the hotline, making complaints about their treatment. So someone will take the complaint but then no follow up or action happens.

SEREMAIA ROKOSUKA: Nothing happens. No follow-up.

Ms JENNY LEONG: Does that result in people not bothering now to make complaints because they know nothing happens?

SEREMAIA ROKOSUKA: That's it. What I can see, that's why plenty of people that come through this labour mobility scheme, which we call the partnership, have left the scheme.

Ms JENNY LEONG: Absolutely.

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SEREMAIA ROKOSUKA: Because they were hurt. They were told, signing the contract for us—we know that signing the contract, we have to abide by what we are saying. But if we are not looking after the people who signed the contract—this is what I told the RWM: If you feed your dog well at home, will he stay or will he leave?

Ms JENNY LEONG: My understanding, Pastor Jerry, is that there are tragic consequences that occur as a result of people not being treated properly at work or being able to access health care. Are there any examples that you could give us of evidence that you know of where it has resulted in tragic circumstances?

SEREMAIA ROKOSUKA: I have people that said that they can come and testify. I have them. They can come in because everybody comes home to me. Mr Joe and them, they know. I have been dealing with one yesterday. He gave me a call that he is sick. They know that he is sick but they have to drive from the work, get him from where he is and take him back to work. In this cold weather, he is sick, approved by the doctor. That is the situation not only in Wagga; this is happening all over Australia. I have been travelling all over Australia reaching out to the Pacific islands people, trying to empower them that this is the place that we have to be—"You have to work, you have family back home", for those who have families and children.

Ms JENNY LEONG: But no-one should be working if they're sick, right?

SEREMAIA ROKOSUKA: That's it. "If Australia allows you to be part of this scheme, then you have to work. You have a wife and children. You have to pay the bills. That's why you are here in Australia." That is what I have been doing for the last five years. So I've come up with the point because everybody everywhere—last Saturday there was a group from Melbourne that they came across at home with this situation. Last Friday, we had a very good conversation with them. I thank Mr Joe, member of the Parliament Mr Michael McCormack, and the mayor for connecting me to the local business that enables to support me in order to meet their needs.

Ms JENNY LEONG: Ms La Rocca, you were nodding in recognition there. Did you want to contribute as well?

CARMEL LA ROCCA: Yes, he's right. There are people on the scheme and things seemed to sort of calm down the last couple of months, three or four months. You don't hear as much unless someone comes to you, which, in my case, they have, and they were saying the exactly the same thing with the group that he was working with and other groups that he's aware of: that the conditions, even though it looks like everything's calm on top, are not ideal like they're supposed to be. I just wanted to add, though, that this exploitation has taken another ugly turn in Griffith, and probably everywhere else. The absconders, or the ones who are disengaged, who have no work rights and have run out of money—now these lenders have appeared on the scene and they're lending money to these vulnerable people. We've heard more and more of this is happening around here, and I'm sure it's happening everywhere else too.

Ms JENNY LEONG: Are these registered lenders or not registered lenders?

CARMEL LA ROCCA: They are just people they know on the street.

The CHAIR: It's a concern. Thank you very much. We've now reached time for this particular session. I thank all of the witnesses who have appeared this morning. I presume you will be happy to answer questions on notice that we forward to you; thank you very much for agreeing to that. At this point we will take a short break for morning tea and return with the next hearing panel.

Ms JENNY LEONG: And thank you, Mr Dachi, for staying.

KEN DACHI: No worries. Thank you.

(The witnesses withdrew.)

(Short adjournment)

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Ms KHADIJA HASSAN, Lead Migration Support Programs, Australian Red Cross, affirmed and examined

Ms MADELEINE ROSSITER, Links For Women Manager, Linking Communities Network Ltd, sworn and examined

Ms KIRRILLY SALVESTRO, Deputy Chief Executive Officer, Linking Communities Network Ltd, sworn and examined

Mrs PATRICIA COX, President, Soroptimist International Griffith, sworn and examined

Mrs ELIZABETH MEAD, Secretary, Soroptimist International Griffith, sworn and examined

The CHAIR: Welcome to our witnesses. My name is Dr Joe McGirr, and I'm the Chair of the Committee. We've done the introductions and acknowledgement to country this morning. I thank all the witnesses for appearing. Would any of the organisations like to make a brief opening statement?

KHADIJA HASSAN: Good morning. I acknowledge the lands of the Wiradjuri people and pay my respects to Elders past and present. On this Refugee Week, the Australian Red Cross is proud to recognise and celebrate the stories, resilience and strength of people seeking asylum and of refugees, as well as their invaluable contributions to our local communities. Australian Red Cross welcomes the opportunity to provide evidence today and recognises the inquiry as an important mechanism to identify and address the risks faced by temporary migrants in rural and regional New South Wales.

Australian Red Cross does have regional offices in Griffith, Leeton and Wagga Wagga. During the last financial year, we have provided individual support to approximately 65 people who have come to us seeking financial, legal and emotional support after experiencing severe exploitation in the community. With your permission, I would like to highlight two points. Temporary migrant workers in rural and regional New South Wales face significant barriers to accessing supports and remedies, either because of their visa status or lack of appropriate and suitable services.

The CHAIR: Ms Hassan, I might get you to move a bit closer to the microphone. I'm sorry to interrupt.

KHADIJA HASSAN: I am recovering from a cold, so I'm sorry. Regional and rural communities, local councils and often under-resourced frontline services then face the challenge and the cost of providing information, protection and support to those temporary migrant workers in need. Our regional staff in the western Riverina region, particularly in Griffith and Leeton, have assisted several migrant workers facing homelessness, food insecurity and serious health issues. Some of these workers have told us they had disengaged from the PALM scheme or left their workplaces because they had been taken advantage of, or exploited by, employers and labour hire companies. People have reported being forced to work excessive hours, paid well below the minimum wage, and threatened by the agent that they could have them arrested and deported if they leave or tell authorities.

The absence of a safety net and ongoing supports—including legal and migration advice to better understand their options and make informed decisions—leaves migrant workers at risk of experiencing further exploitation and destitution and at risk of being deceived by unscrupulous migrant agents and intermediaries that promise access to services and visas that, practically speaking, they are not eligible for. Lastly, I would like to emphasise the need for increased efforts to equip frontline responders to proactively screen for modern slavery indicators and provide safe responses. Australian Red Cross, as auxiliary to the public authorities in the humanitarian field, stands ready to support the Committee in strengthening the New South Wales Government response to modern slavery and welcomes the opportunity to provide evidence today.

KIRRILLY SALVESTRO: I really think that Ms Hassan has summed it up fantastically. I reiterate all that she says in terms of service provision and the lack of responses that are available to migrant workers.

ELIZABETH MEAD: I'd like to give a little bit of context for Soroptimist. It is a worldwide organisation of volunteers who work to educate, enable and empower women through raising awareness of issues, action and advocacy. Our Griffith club has 31 members. Our submission stated that we first started advocating for better conditions for temporary overseas workers in 2018, when we worked with the Salvation Army's Freedom Partnership to End Modern Slavery, hosting a community forum. We actually started a bit before that, as soroptimists around Australia had become concerned about the safety of women backpackers, especially in remote locations. After the forum, we held a series of barbecues for overseas workers to try to provide a safe space where workers, especially women, could voice their concerns.

We have also advocated since 2018 for the licensing of labour hire organisations in New South Wales. Through our work with the Griffith local domestic violence committee and the multicultural agency network, we were made aware of the problems facing workers in the PALM scheme, especially women who were disengaged

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from the scheme and have no work rights and no medical cover, making them very vulnerable to exploitation. Unlike other organisations and individuals who are giving evidence today, we are not involved in frontline support for workers experiencing modern slavery, we have nothing to do with labour hire and we do not have lived experience. But we do live in Griffith and we do hear anecdotal evidence that things are not right in relation to the situation that some of the overseas workers find themselves in, whether it be in relation to living conditions, working conditions or pay.

We note that some of the issues and recommendations in our submission were referred to in a very interesting episode of the ABC's Radio National *Big Ideas* program on 4 June. It was all based on the PALM scheme and it was titled "We asked for workers and got people". We don't have the facts and figures and case studies and, when we were told about this inquiry when we attended a meeting with the UN Special Rapporteur on contemporary forms of slavery in Griffith last November, we indicated to a member of the New South Wales modern slavery commissioner's staff that a submission from us would not hold any weight. He encouraged us to make our submission and, although it was very general in nature, we decided it was the right thing to do. So I guess we're saying we don't have a lot of facts and figures.

The Hon. Dr SARAH KAINE: One of things that I've been interested in and haven't had a chance to ask—but you're on the front lines. You're all experienced in dealing with women in the PALM scheme. I wondered within the community what the reception is to PALM workers, particularly women PALM workers. You're all involved in being there when something happens, but what's the general community response, particularly to women in the PALM scheme and the types of experiences that you're seeing?

KIRRILLY SALVESTRO: I'll probably start. I think the community response to any workers that come into our country is very positive until something happens. I would say that a lot of the community, apart from employers, are unaware of what is happening in our community in terms of—to these women and to men in terms of homelessness—women more so domestic violence that then results in homelessness. But I would say that there is a fantastic community of Griffith that embraces workers that come into our community but are a bit naive about what happens when things go awry.

The Hon. Dr SARAH KAINE: We've been having this discussion—I think some of you have been here for the previous session. You mentioned that employers are aware. So what are employers—and are we talking about the labour hire contractors or are we talking about the farmers who engage them? They're aware. If so, what kind of responses do we see from that layer of the supply chain?

KIRRILLY SALVESTRO: I guess I can only report on the women and men that come to our service. I think it's a sense of both. I have no doubt that there are some dodgy labour hire people, companies around. But certainly the employers that people are employed under, particularly women I'm talking about, aren't very sensitive when domestic violence occurs and it is a woman's responsibility to do something about that or to remove them from the employment because they're causing problems.

The Hon. Dr SARAH KAINE: Is it often that the perpetrator and the victim are in the same workplace?

KIRRILLY SALVESTRO: Yes.

MADELEINE ROSSITER: Usually in the same dwelling, actually.

Ms JENNY LEONG: Sorry, can you just clarify that again?

MADELEINE ROSSITER: Most of the women that we have seen have usually ended up in homelessness because of domestic violence, but usually the farmer has told them that they are required to leave because they're causing problems in the house, so these women are left with no work and nowhere to stay.

The Hon. Dr SARAH KAINE: I'm being picky around this issue. You said the farmer asked them.

MADELEINE ROSSITER: Yes, the employer.

The Hon. Dr SARAH KAINE: So the employer being the actual producer of the goods, not an intermediary?

MADELEINE ROSSITER: Yes.

The Hon. Dr SARAH KAINE: So you've seen cases where the actual employer on the farm has made the decision that has ended up with these women being in the situation of homelessness or something else outside of their control?

MADELEINE ROSSITER: Yes, absolutely.

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The Hon. Dr SARAH KAINE: So we're not talking an intermediary here. We're talking about direct knowledge by the—

MADELEINE ROSSITER: Yes.

Ms JENNY LEONG: Can I just clarify, because I appreciate we're talking about violence against women generally and that you're a domestic violence service. But in this context, are we talking about violence perpetrated by the employer in a domestic context because people are living there, or are we talking about violence demonstrated by a partner that happens to be in accommodation that is also a workplace accommodation? I'm just trying to get a sense of—

MADELEINE ROSSITER: I have seen both, so where the farmer has perpetrated violence and where another worker has also perpetrated violence.

Ms JENNY LEONG: But in that sense, it wouldn't be domestic violence. So I guess what I'm trying to get at here is—and maybe I'll just be really up-front about it—there is a tendency, sadly, in terms of racist approaches to how we look at violence that people say people from other countries are perpetrating violence against women and that it's not actually an "Australian" problem. What I'm trying to get at here is the complexity around the fact that we have workers living in accommodation provided by their bosses, so the violence happens in a domestic setting, but it's not necessarily a domestic partner that is perpetrating that violence. I wonder if you could unpack that a little bit for us. I think it's significant in terms of the perceptions.

MADELEINE ROSSITER: In some cases that I have seen, the farmer is in a domestic relationship. Whether that be 100 per cent consensual is up for debate. But where the farmer is in a relationship, for lack of a better word, with an employee and then violence happens, whether that be by somebody else in the dwelling or by the farmer himself, I've seen—

Ms JENNY LEONG: Okay, thank you. It's an important distinction, and it's really helpful in that context.

The CHAIR: Can I just follow that on a little bit. What you've described is quite distressing. What avenues are available, then, to the woman who has been asked to leave in that circumstance where they've been the victim of domestic violence, perhaps by the employer or perhaps by someone in their accommodation, but in any case asked to leave? What avenues are open to them then, and what happens, in your experience?

KIRRILLY SALVESTRO: We've had several cases. They are referred to our women's crisis accommodation service that has availability. It's a crisis service, so accommodation up to three months. These women then have no access to any income at all. They may get a Red Cross payment, but they have no access to income. Our service is fully financially paying for those victims of domestic violence. Often those women are pregnant, so sometimes they're under the false assumption that if they have a child in Australia that child automatically becomes an Australian citizen, which is not the case. They're under that assumption. Often these women have no choice but to return to employment, because there's no avenue for ongoing financial aid for them, or they will return home.

The CHAIR: Just take us a little bit further, because my understanding is that if they are on the PALM scheme and they leave that employer, they are not then eligible to work. Is that correct? What actually happens then? That's one question. I guess the other question I have in mind is can they report this. Do they report this to the PALM scheme authorities, and what happens? Sorry, two questions there.

KIRRILLY SALVESTRO: Often women are too scared to report it. They want to continue working. They want to remain in Australia, so they will often seek employment elsewhere. What we see happen is that—I'll take you back a bit. In the first three months that they come here, they are required to repay their airfares and their accommodation, which is substandard and is costing them a huge amount per week. Within the first three months or sixteen weeks—whatever it is that they are required to repay that money—they have absolutely nothing to live on. They have nothing to feed themselves, basically. They are coming to services like ours, requesting financial aid and requesting food assistance to get them through the week. Then violence occurs, so they can no longer be under that employ.

In some circumstances—and we don't talk about violence; we just talk about being at risk of being beneath the poverty line—it's raining, so they don't work, so they're not paid. That is a whole other gamut of issues. They want to keep working and they want to stay in the country, so often they will try to seek other employment, whether it be out of town or not. Often, that isn't very forthcoming for them. They are left with very little options, other than to seek some cash work. Therefore the employer is saying that they have abandoned their position or returned to their country, or they just go to ground. They may find someone in their own community who they can live with. We have often heard of women looking after other people's children. They might give them some money or somewhere to live.

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The CHAIR: Just to be clear, they don't report it because they are too scared to report it.

KIRRILLY SALVESTRO: Yes.

The CHAIR: Is there an avenue to report it?

KIRRILLY SALVESTRO: There is an avenue with the department of immigration, I believe.

MADELEINE ROSSITER: I believe there is a component of the PALM scheme where they are able to report such issues. However, in my experience, and in discussions with people from the PALM scheme, they often don't receive those reports until after a critical incident has occurred—I think that's the language they use. There is not a lot of early intervention available for these women in terms of potentially removing them or putting them with another employer prior to them disengaging from the PALM scheme if they are no longer working for that employer.

The Hon. Dr SARAH KAINE: If the circumstance is that one of those critical incidents has occurred and maybe a report is made, and the woman needs to leave the circumstance and that employment, does that mean that they are in breach of their visa if they leave that employment—even if it is a critical incident?

KHADIJA HASSAN: I am not really sure if that's a breach. Generally, what happens is the employment is linked to the visa. The issue is, if they don't have the employment, it might affect their visa. I don't know if that is usually taken up by the employers and then it ends up ending their visa status in the country. Usually, when the employment ends, that's the outcome. That is why a lot of the women are afraid to report. If they lose their employment, they might lose their visa.

The CHAIR: It's not clear what happens to their visa if a critical incident is reported.

Ms JENNY LEONG: I think it's pretty clear that their visa is no longer active.

The CHAIR: It's no longer active if they leave employment. It sounds to me as though the reporting takes place after they leave employment. We actually don't know if there is any mechanism for reporting a critical incident and for handling it.

KIRRILLY SALVESTRO: It's certainly reported—in some cases—to the police, and AVOs are taken out. But in terms of government departments in relation to their employment and visa status—these women are traumatised. They don't want to leave the country. They are often supporting families back home. Why should they have to leave, as victims of violence?

The CHAIR: I agree. There should be a mechanism, if an incident like that takes place, for it to be reported without jeopardising the person's visa, and for them to be able to receive support, counselling and protection. As Ms Rossiter said, there should be the ability to prevent that with early reporting. I am not getting a sense that there is a strong mechanism to do that. I accept that people might be scared to do it, but this is exactly the situation where we need to make it as easy as possible, so people are not scared. We need to be quite proactive—particularly from what you've described this morning, which is, frankly, quite distressing.

The Hon. AILEEN MacDONALD: Mrs Mead, what kinds of State-based emergency supports are most needed for disengaged workers?

ELIZABETH MEAD: As I said before, we're not on the front line, so it's a little bit difficult to say. But just from what we've looked at, it would seem to me, especially with the PALM scheme—it's very difficult when you're looking at backpackers and other people, because you have even less idea about where they are and what they're doing, but some more checks and balances on the ground, with people working with the PALM scheme to actually find out what's going on on the ground, is a good idea. And I think the comments that were made by the Griffith mayor earlier on today about the fact that council doesn't know when a group of people are coming under the PALM scheme and that sort of thing—the more information that a community has, especially at that local government level, the more it can help with everybody because that information should then go to the support groups and everything, so people have a better idea about what's going on. I hope that helps a bit.

The Hon. AILEEN MacDONALD: It does, because, like you say, you can't monitor it if you don't know what's there. What level of site visits or inspections would be effective?

ELIZABETH MEAD: It's very hard for me to say. But I think, from what I've been told by other people, there are four PALM employers in this area, and I would think that maybe those employers should be visited once a month or something. I have no idea, but about that, just so that there's a regular check-up on what's going on—and probably not know about it in advance, just so people know what's really going on.

Ms JENNY LEONG: Can I follow on from that. First of all, Mrs Mead and Mrs Cox, thank you for all of the support that you and the Soroptimists are providing. It's such critical work. I would imagine, from the kinds

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of events you hold and the connections that you have with these workers, that you might have the facts and the figures but you certainly have a knowledge of what the issues are and what problems people are facing. Do you feel like there is or could be some ability for your members, who are in a more stable situation in terms of citizenship and housing, to be able to make reports anonymously that would be different to the vulnerability of the workers?

One of the things we keep hearing through this inquiry is that the vulnerability of the exploited workers is such that they are, for a whole range of reasons, not wanting to report. Also, we're very critically aware that people know where the problems are, but people have pointed to the systemic issues around regulation. Do we need to start thinking about other avenues for things to be reported? I'm thinking of examples like people being able to take things to Fair Trading, people could report to Crime Stoppers. The Fair Work Ombudsman takes complaints to look at underpayment for work. Do you see that there are any roles or avenues that might be able to come into play in terms of the community sharing that information to provide some improvements or protections?

ELIZABETH MEAD: I'm involved in another group called Rural Australians for Refugees. I think it's very much the same sort of thing, where people say, "You just want to help refugees. Help refugees", and I keep saying, "Yes, first we actually have to find our refugees"—which we have done. But do you know what I mean? Can members of the community who aren't involved in help organisations, or people providing services, even know who the people are? It is very, very difficult.

PATRICIA COX: I agree with what Lil has said, that as members of the community we see people in the community that we are concerned about. We don't necessarily know their details. Through a variety of organisations, we know that there are issues, but we can't get information actually from them. We are not in that position to get the details and to take them on. Many people in the community wouldn't be aware that there are any issues because they're not involved. There are some concerns that the issues that come to hand or come to light may show a poor vision of the employers, the farmers, and there are many farmers in the community who are really good, excellent workers.

There's some concern about the hire contractors who don't have the same responsibility in New South Wales to their workers. They don't have to be licensed, so groups of workers—a body can get a group of workers together and pick them up, take them to work and do whatever. That's something that we are not always familiar with and can't do. As a group, we can say, "This is not good." But we don't have the actual information. I know that from the domestic violence committee you hear statistics and think, "That's terrible. Why isn't something being done?" But who's going to do it—coming back to that level.

Ms JENNY LEONG: To build on that, part of what we've heard from some of the councils is the fact that they just have no idea. Indeed, the Federal Government appears to have no idea of how many PALM workers are put into any local government area. For example, if that was communicated, from a Federal level, I guess there are two elements to that. One is the positive community connection and support which, potentially then, the council can inform the Soroptimists, "We've got additional workers coming, do you want to host some more barbecues?"—or whatever is the case. But also, from a crisis point of view, there's an awareness of the resourcing that would then be needed to look at the potential risks that go on. But if none of that is communicated, nobody can be ready to respond.

PATRICIA COX: That's right. We don't know.

Ms JENNY LEONG: Can I just ask one about accommodation, Chair. What I'm curious about is that these are private rental accommodations. People are paying exorbitant rents for uninhabitable accommodation. Does it seem like anyone has any understanding of what the obligations are under the Residential Tenancies Act? Or is it simply that the assumption is, with everybody involved, that because this is accommodation linked to work that it just can be whatever and it doesn't have to comply with any of those requirements? I'm curious about that because we keep getting this accommodation element brought up. We know the state of private rental accommodation is bad across the board but there are regulations and laws that exist around those. I wonder if anyone has any thoughts from the accommodation side of things?

KIRRILLY SALVESTRO: Certainly, that's not highlighted to workers. I think if we're talking about early intervention, let's educate people, not just women and men who are coming on the PALM scheme about what their rights are in Australia, what their responsibilities are in terms of violence and our laws and what happens, but also that they do have rights. They don't just have to put up with substandard accommodation when they get here, and don't have to put up with paying exorbitant rent that doesn't allow them any money for food. Let's pre-educate these people coming into our country, and make the contractors also follow up with education along the way about what happens if—and this is where you can go to if this happens, and this is what violence looks like, and women don't have to put up with that in Australia. Let's do some of that education and stop the

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silos of the people that are coming in to genuinely work and genuinely send money back to their families in their own countries, and have some education around that before they even enter Australia.

The CHAIR: Can I just come in—this is for Ms Hassan at the Red Cross as well. In your submission, Linking Communities, you refer to—this was in January—a dramatic increase in the number of people that you were seeing in the previous eight months. Has that continued?

KIRRILLY SALVESTRO: Yes, it has.

The CHAIR: So people are coming to you. Are the people coming to you from employment locally, or are they coming from other regions outside of the Riverina?

KIRRILLY SALVESTRO: Mostly local, but a smattering of places like Mildura where the work situation has broken down there, and there's violence been there, and they may have contacts in Griffith. Their contacts are saying, "Come here, you can get some work", and then that doesn't eventuate. But mostly from the local area.

The CHAIR: What sort of numbers are we talking about?

MADELEINE ROSSITER: I think in this last financial year we've supported 47 women for a variety of different reasons. Ninety-nine per cent of the time that's domestic violence.

The CHAIR: Sorry, from the temporary migrant workers?

MADELEINE ROSSITER: Yes, from the PALM scheme. The other issues, which I think you've highlighted here, are financial difficulties, uninhabitable accommodation, and people looking for assistance with their visas as well. That's a big task for us as workers. We're not specialists in visas in particular. That's a huge workload for us to add to as well.

The CHAIR: Of course, the situation described is one in which women are incredibly vulnerable—no income, no mobility, not sure about English language skills, concerns around visa. They are vulnerable from the outset, and then you're clearly seeing the effects of that in terms of people having offences, basically, or violence committed against them and you're looking after them. I just confirm that's what we're talking about here. You did mention that in some circumstances AVOs would be taken out. Is that correct?

KIRRILLY SALVESTRO: Yes.

The CHAIR: So that involves local police.

KIRRILLY SALVESTRO: Yes.

The CHAIR: The police therefore are aware, presumably, of what's happened. Does anything follow on from that?

MADELEINE ROSSITER: Yes. That can come with, also, another added layer of complexity, depending on the type of AVO and the conditions it comes with. The woman might be excluded from that dwelling or that workplace not through any fault of her own, even if she is a victim. But the other thing that most women say to us is that they only called the police for the violence to stop, not for anything to follow on from that. I think there's a general understanding that what has happened is not okay, but then, in their own country—we've had a woman, and this might be a bit harsh, but she said, "I just thought the police would come and give him some whippings and then he would stop." There's a quite clear lack of education around police and police responsibility, and the police's duty of care, what they have to follow through with and what that looks like in the court system. But I think what we haven't actually raised here is that we see these women who have had these awful things happen to them, but we haven't talked about what happens to the perpetrator if he is also on the PALM scheme. There is very little repercussion for him as well—and I say "him" because it's mostly men.

The Hon. AILEEN MacDONALD: I don't know where to start. It seemed to me that the PALM scheme was set up with good intentions in terms of "Let's help our neighbours; it's a good form of aid." But then it also seems that, from the get-go, we're talking about working with vulnerable people who have got obligations back home. They don't want to upset the applecart whilst they're here, but they are already exploited before they even get here because of their obligations back home. They want to be able to send money for their families. It seems to me that it starts with the visa setting. That causes the disengagement because they don't want to be seen as troublemakers—and they're not troublemakers; it's just the environment they're put in has already set them up to be exploited and they're already vulnerable. What can we do to change that so that the good intention that it is meant to be is a good intention and a win-win, rather than seeing these disengaged workers that don't have a good story?

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PATRICIA COX: I think that it comes back to right from the beginning with the PALM scheme, where it is advertised and what are the conditions that are on the advertisement. It appears that it's going to be a blessing, that, "I can go to Australia, I can get work in Australia, and I'd be able to support my family." You don't know the conditions that are attached to it: that you'll have to repay your fare; all the work and everything else is conditional upon you doing exactly as someone tells you in the scheme, where to work et cetera; the accommodation is provided on the farm so you don't have any way of getting out of it sometimes, and you're stuck there to work.

I think it goes back to the original conditions: Who was accepted into the PALM scheme? What was their understanding of what they are going to be able to achieve for their families and for themselves? From a local point of view, the PALM scheme seems to be in some ways offered as a remedy for a shortage of workers, and workers could be brought in. For those who are employing the workers, the conditions attached to their employment may not be clear enough as to obligations as to employment, accommodation, rates of pay or sufficient pay to enable them to live. So it's at the beginning, from both points of view—from Australia and from where the workers are coming from. What do we do? Regulation somewhere and more information.

Ms JENNY LEONG: Ms Hassan, I think you wanted to come in on that.

KHADIJA HASSAN: Yes. When travelling to Australia with the visa granted and the process has happened, usually the experience we've had is that people are looking forward to coming and to be able to provide for their families. We see good opportunities for the people that are coming. The challenge is what's on the ground and the supports that are in place on the ground. Linking Communities have talked about women facing domestic violence. Usually what happens is there's a lot of trauma, and that impacts their mental health. That support is not really there, as well. For us, what we are seeing is the need for training of frontline workers—whether this is in an emergency setting like in hospitals—and people being able to identify the indicators that someone is going through exploitation or something like that, rather than having the experience of going there and the first thing you're faced with is, "Do you have Medicare? Can you provide your Medicare?" Some of them are not able to do that.

The other challenge is the language barrier. If you're already going through a challenging situation—you're having probably a mental breakdown, you go into an emergency setting and you're being asked questions that are not really at the top of your priority—someone not using your language makes it even harder for you to be able to go out and seek that support. We do work very closely with Linking Communities, and that's a very good support for us. I work in a program that's focusing on mental health. We are funded by the Ministry of Health in New South Wales, but we're seeing a lot of cases from exploitation that's impacting their wellbeing and mental health in the community—this goes for both men and women. The main important thing is training the services—whether they're the community services or frontline workers like the police and hospital staff—to be able to identify the indicators and support them, whether they're women, children or men, to be able to feel safe.

The other thing I want to mention quickly is when the women—I'll focus on the women here for a moment—are presenting at emergency and there's someone else coming in with them, we've seen a lot of unfortunate cases where people assume that is a safe person for them and that is the person to interpret for them, which is not usually the right thing, in our experience. If the woman isn't given a private space with a proper interpreter—without the person that's walked in or provided the transport, even though they seem like the right person—most of the indicators are usually missed. In our experience the woman would say, "If they gave me a safe space, I would have spoken about it. But I didn't have a chance." Some of the women who have gone through sexual assault or rape in the hospital are unable to bring to that up because maybe the perpetrator is right there with them and is the language support for them.

Ms JENNY LEONG: The soroptimists mentioned that originally you were involved in and connected with people also on working holiday visas and the awareness around that. We've focused very much on a discussion about the PALM scheme, and I wondered whether you or others on the panel had contributions you'd like to make about those potential risks, which are different to the PALM scheme.

ELIZABETH MEAD: Well, they're different in the way that nobody needs to know who has just come into town yesterday looking for a job. There is even less regulation or no regulation. As I said, there had been stories, and we were actually asked by a person who did work for Griffith City Council at that stage to work on these barbeques. It wasn't PALM scheme; it was just people who were coming into town looking for work from overseas. In a way they faced very much the same situations as far as accommodation or whatever. We had one of our soroptimist members who used to come to the barbeques and say, "I can find you some better accommodation if you need it." They weren't tied to particular accommodation providers so they could do that, which is a bit different, again, to the PALM scheme. I think it's the same underlying story. I still think a lot of it goes back to the fact that the labour hire organisations don't have to be licensed, so people, especially when they come into town looking for something quickly, can get into the hands of the wrong people and not have a good

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experience after that. The more remote they are, of course, the harder it is for them to get help and the worse it becomes.

The CHAIR: Thank you very much to all the witnesses. We'll excuse you now. I presume you will be able to take questions on notice from us and reply to them. Thank you for agreeing to that. I realise we have gone over a little bit on our timing, but I appreciate you bearing with us on that because it's quite important that we hear from you.

(The witnesses withdrew.)

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Ms ANITA McRAE, Senior Manager, Priority Populations, Murrumbidgee Primary Health Network, affirmed and examined

Dr TRUDI BECK, General Practitioner and Member, Wagga Wagga Clinical Council, Murrumbidgee Primary Health Network, affirmed and examined

The CHAIR: I welcome our next witnesses. Would either of you like to make a brief opening statement? I'll start with you, Ms McRae.

ANITA McRAE: Firstly, thank you for the opportunity to appear at the hearing today. This is a joint statement on behalf of the Murrumbidgee Primary Health Network, known as MPH N, and today the organisation is represented by myself, Anita McRae, and Dr Trudi Beck. My role at the PHN is senior manager, priority populations, and Dr Beck is a general practitioner in Wagga but is also a member of our Wagga Wagga Clinical Council. Just for context, clinical councils are a very important part of our governance infrastructure and assist in the identification of opportunities to improve primary health care across the Murrumbidgee region.

Late last year at one of our clinical council meetings, Dr Beck alerted MPH N to issues she was experiencing in relation to migrant workers seeking health services not covered under their visa arrangements. Dr Beck is best placed to respond to your questions in relation to these issues. However, we have since received similar feedback from practice nurses, who have reported an increase in presentations from non-Medicare-eligible people from multicultural backgrounds who are seeking advice and support in two key areas, being unintended pregnancies and sexually transmitted infections. One of the roles of the PHNs is to commission primary health services to meet population health needs, with a focus on access and equity. We do this by understanding the health needs of various population groups, and look at ways we can support people within our remit and funding abilities.

Given the anecdotal reports from clinicians in our region, we recently received approval to undertake a comprehensive health needs assessment of the region's multicultural communities. The aim of this work is to better understand the unique health challenges and needs of these groups in the Murrumbidgee region. Whilst work is yet to commence, we can provide a copy of the final report to this Committee once it's available. Additionally, MPH N funds various health and mental health services available for people without a Medicare card. We also provide localised health pathway information to the region's clinicians to help them provide appropriate care to migrant patients within their practices. To close, MPH N acknowledges the issue surrounding migrant health is complex and multilayered and will require a human-centred systems change to ensure adequate health and wellbeing support is available to migrant workers.

The CHAIR: Dr Beck, do you want to make an opening statement?

TRUDI BECK: I guess just briefly to set context that I've been really passionate about this issue for probably three to four years, since I became aware of the issues surrounding this in my local community. I did make a submission to the inquiry; however, at the last moment the MPH N decided not to put that submission in, and that probably gave more context around my specific concerns around this issue. I guess I'd just like to acknowledge my privilege and understand that I hope the evidence that I'll be putting forward today is an adequate reflection of the issues that face the women that I aim to help, but by no means is it an exhaustive understanding of the challenges that they face.

The CHAIR: Can I just clarify with you, Ms McRae, when will the work on the health needs assessment of multicultural communities be completed?

ANITA McRAE: It's about commissioning a consultant to conduct that health needs assessment, and so that will commence from 1 July. Within that activity, there's funding that we've received to conduct the health needs assessment, as well as a small amount of funding to start doing activities that will help address needs that arise.

The CHAIR: I'm just conscious of our Committee's timeline. It would be good if you could share information with us ahead of when your report might be completed, because we're hoping to make recommendations before the end of the year. So I'd just flag that with you.

ANITA McRAE: Before the end of the calendar year?

The CHAIR: Yes.

ANITA McRAE: Sure. We will absolutely have some information that we can share, whether it's the final report or not. We would be happy to share an interim report to meet your deadlines.

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The CHAIR: You indicated that you are able to provide health services to women who are not Medicare eligible.

ANITA McRAE: Yes.

The CHAIR: But obviously if they're women who are going to have a baby, they would need to go to hospital. Does that include antenatal care and hospital care? How does the provision of those services work? Is it ongoing? Is it comprehensive? Is there a limit to the service you can provide?

ANITA McRAE: What I would say on that is that the funding we receive from the Commonwealth Department of Health, Disability and Ageing is for commissioning services into the community. We provide support to general practices—practice health support and whatnot—but practices are their own businesses. That is certainly to the side of our commissioning of services that we receive funding for. There is no requirement that people have Medicare cards to access the services that we commission. They are free services—that is part of the requirements. Some of the issues are around people's awareness and understanding of what is available to them.

The CHAIR: Does that mean that someone who is not Medicare eligible could approach a general practice and receive care? Would they have to know a particular general practice? How does it work?

Ms JENNY LEONG: Can we hear from Dr Beck?

TRUDI BECK: My understanding—I work extensively in this space and I have talked to hospital-based services about this as well—is that there is no consistency across the board in the type of health coverage that migrant visa workers will have. We aren't to know and, often, the patient who is accessing care won't know what their health coverage will and won't cover. I would say that probably comes back to a basic lack of education or understanding around health care literacy. I would say that in Australia the average Australian doesn't have very good health literacy around those things. When you add in a language barrier, it's particularly difficult. My experience has been that from a purely medical perspective—and I think Anita may be referring more to some of the allied health services like mental health services or counselling—around providing reproductive health care, there is no funding. I would say that the rebates that the patients would receive from their private health insurance is highly variable. In my experience, the majority of the costs will be borne by the woman.

Ms JENNY LEONG: In reality, if that woman can't afford it—

TRUDI BECK: The onus would then be on a practice to provide services for free.

Ms JENNY LEONG: So when we are saying that people are getting some level of service, the cost is being covered informally.

TRUDI BECK: My experience in a private practice setting, which I would say is where the majority, if not all, of early pregnancy care occurs, would be that the classic scenario that we have become familiar with—we're providing services to upwards of 500 to 600 pregnant women per year—would be that often a male will call our reception. They often will have limited English. We've now trained our reception staff to understand that we know what that call will likely be in relation to—usually around pregnancy choice. We then ask them what language they speak and we try to, in some way, convey information to them around when an appointment would be available. We have the same issues that some of the previous speakers were talking about in terms of difficulties managing confidentiality and the woman's risk in a consult. We often have to ask males who accompany them to leave. They are often travelling from the Griffith or Leeton areas—or sometimes locally—and have been driven over by someone because, most of the time, they don't drive. We usually ask what language they speak. We allow more time because we have to use the national interpreter service. Thankfully, we do have access to that, regardless of Medicare status.

Basically, the story is the same every time: They have an unplanned, unwanted pregnancy, and they want to talk about pregnancy options. The change to the legislation in 2019 means that we no longer, as clinicians, have to ask questions about the intentions or circumstances around the pregnancy. But because we were seeing this reoccurring theme, I started asking every woman why she was having it, what kind of work she was doing and who was in her social circle. I was interested why we had this reoccurring theme all the time. Basically, the story is the same every single time. They are a Pacific island worker. They are here to support their family. They often already have children at home who are being looked after by other relatives. They are here to earn money to send back to their families. They find themselves pregnant. They know that they will breach their visa requirements to be able to work—either because they're in a physical job in the kinds of positions that they are often working in and then they will either not be able to continue doing that job because it's heavy lifting or, if they keep the baby, they will have to go home because they won't be able to work as per the conditions of their visa.

I would say the majority of the time, even with what we call non-directive pregnancy counselling, where we offer the options around continuing and what that would look like—because I'm now aware of what options

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exist in that space as well, specifically for visa workers, I should say—I would say 95 per cent of the time they would pick a termination, and not because of personal choice, necessarily. Then we have formed relationships with local allied services, like pharmacies, so that we can give them the card of how to get to the pharmacy, because they're usually from out of town.

We pre-alert the pharmacist that someone will be coming, because the pharmacist has requirements around prescription of restricted medications. We financially consent them, because those medications are not covered by PBS, obviously, and they're around the \$500 mark. We try to do basic screening like you would for any Australian Medicare-eligible woman, which is the basics of chlamydia and gonorrhoea screening, because it's extensively prevalent in these communities—chlamydia and gonorrhoea screening, obviously, is not covered by the MBS, so they have to pay for it—also cervical screening, in alignment with Australian guidelines, which they usually haven't had done, and then talk to them about contraception.

Most of the time we're doing contraception for free because they don't have money. A reversible, long-acting contraceptive which is gold standard will cost them upwards of \$500 for the device and insertion. So, essentially, if you wanted to provide a gold-standard appointment to one of these women in this really difficult circumstance, not even taking into account their psychosocial risk factors like their housing, domestic violence or their mental health—excluding all of that, a gold-standard, purely medical consultation would cost them \$1,500. They don't have that money. This is something that I have held deeply difficult personal feelings around, because it's such an ethics and values clash for me, and I gave a Hippocratic oath when I started medicine. It doesn't feel good, and no-one will listen. Sorry.

Ms JENNY LEONG: No, thank you, Dr Beck. Don't be at all sorry. The evidence we're hearing today is grim, and I think all of us are feeling the same level of horror about what is occurring under the current watch and where things are at, so thank you for saying it. It's really powerful for you to be able to put this on the record, because it means that we can also share the burden of what we do about it.

TRUDI BECK: Yes, and there's nothing that an individual can do. I have approached local employers and I've said to them, "We're seeing this. Would you be motivated to work with us?" They say, "No, we're within our requirements for our visa provision. We're not interested." We're like, "We will provide services for your women, specifically", and there's been no goodwill around them co-operating with us in any way. I've spoken to the hospital about it. They will say they have the same problems as us, and they're like, "We provide the service and issue a bill." I've obviously escalated it to my local State member. I've escalated it to my primary health network. But because it's such an unseen population, because they're so scared—I've asked them to go to the media. They're reluctant to do that because they don't want to go on record. It's an unseen population. On a weekly basis we're seeing multiple of these women, and it gets your blood going every time.

Ms JENNY LEONG: Dr Beck, this was in the last session as well, and I feel like we've kind of reverted back to this. We know that people don't "fall pregnant". People are using that language, which to me usually indicates that people are implying that the person did not intend to become pregnant or potentially did not consent to the intercourse that made them pregnant. I feel like there's another complexity here. Are we talking about wide-scale levels of sexual assault that are occurring, or we talking about, as we heard, the misinformation that exists around the potential that becoming pregnant may change visa statuses or provide citizenship or other things? Do you have a sense of what that looks like? In the last session I was concerned about the concept of it being positioned as domestic violence services when in actual fact we were talking about issues that were happening in a workplace, of assault. I just wonder if either of you have any reflections on that?

TRUDI BECK: I think that's an impossible question to answer, because we know that in an Australian-based, English-speaking, relatively health literate population you have an above 50 per cent unplanned pregnancy rate. So it's difficult to know the role coercion or sexual violence plays in the unplanned pregnancies that we see. I certainly think that there's significant cultural challenges around prevention of those pregnancies, be they from unwanted sexual intercourse or not, because a lot of these workers are coming from cultures where, religiously, contraception is not widely accepted. That's one of the real challenges with prevention of recurrent unplanned pregnancies. For many of the women, it goes against their religious beliefs to engage in contraception, which I respect and don't—it's not my job to be engaged in coercion around that.

But I certainly think that, if you look at the basic understanding within an Australian population of where babies come from, there's a gap in the pre-work that we do with people coming to Australia around how to safely access services, local availability of services—which is something we've talked about with the clinical council. Even if there's no reform to visa practices, at least would there be capacity for the primary health network to take a role in making aware to the employers—and we know who they are—how women can access services safely locally? But the kind of work I do only really scratches the surface around the healthcare inequities. Because when you are dealing with a woman who, for her, an unplanned pregnancy is an emergency, there is limited scope,

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because of all the thing we've talked about, about how to go beyond the basics of the healthcare needs right then and there to then a more biopsychosocial model, which is what we would all aspire to, to look at the other factors that are contributing to the situations that they are recurrently finding themselves in.

The CHAIR: Would anyone else like to ask questions?

The Hon. AILEEN MacDONALD: Are you collecting any data that distinguishes the experience of, say, women in temporary migrant worker schemes versus men? And do you think there is a gap in understanding how gender affects their vulnerability to be exploited?

ANITA McRAE: I wouldn't say that we're collecting data that is that specific. What we know is there is a lot that needs to be done to understand multicultural communities as a whole, as well as portions of that community who we're talking about today. So I would say we do not have a good understanding.

TRUDI BECK: Also when you look at this space, because so much of it is pushed into private providers, we already don't have the resources to provide basic levels of care, let alone look to data collection. There's obvious gaps in—for all of the reasons that you've probably already heard about, there's a data desert.

The Hon. AILEEN MacDONALD: To your knowledge, when they present to either GPs or nurses or health outreach, are those teams given guidance to detect that these people could be subject to modern slavery risks? And, if so, what do they do?

ANITA McRAE: I'd say it would vary greatly as to what that looks like and what individual organisations do in that space around screening. There is more that needs to be done there. Certainly around data collection as well there's a multicultural framework that we're looking to implement that includes things like better data collection and looking at having that spread out at least across the services that we come into contact with and commission, who we can have that—we can put that into contracts with them to make sure they do.

The Hon. AILEEN MacDONALD: When patients are presenting, are they disclosing that they were discouraged or prevented by employers or their labour hire providers from seeking medical advice or treatment?

TRUDI BECK: I've never had that experience. I would say that, most of the time, I don't think their employers would be aware of the situation because the majority of the referrals we now get are word of mouth. There are, obviously, major employers, and within those circles the workers talk and they find out about us because of that, not necessarily because they were directed to us by their employer.

The Hon. AILEEN MacDONALD: It's within their own networks rather than a formal relationship.

TRUDI BECK: I would say that 99 per cent of the time it's by word of mouth that they've heard of us from other people who have had the same thing happen.

The Hon. Dr SARAH KAINE: Thank you both so much for being here and for the work you do. I have a couple of questions. One, did you in your introduction say that the network was going to put in a submission and then didn't?

ANITA McRAE: It would be good to clarify that. There was the intention of the local health district and the PHN to put in a joint submission, which Trudi referred to and was going to have involvement in. That didn't eventuate. I am unclear as to why that didn't eventuate. I can seek clarification on that for the group.

The Hon. Dr SARAH KAINE: Obviously not wanting to put anyone on the spot but, Dr Beck, you authored that?

TRUDI BECK: I wrote a submission.

The Hon. Dr SARAH KAINE: Is it a possibility for us to have that as an individual submission from you?

TRUDI BECK: I tried to explore, afterwards, ways to do it, and that wasn't possible. I have forwarded it to a couple of members, but I can do that.

The Hon. Dr SARAH KAINE: That would be great, if that's a possibility. I had a question about the efforts that you've been making in the local community. We've had various discussions this morning about different actors in the scheme. There are systemic issues, but there are lots of actors in the scheme. I'm interested in what sounded at best like indifference and at worst like antipathy towards the women experiencing this. I'm trying to unpick a bit the different narratives we're getting about, particularly, employers and their responsibilities. You've given a sense of the lack of engagement. Are there any exemplars out there that you've seen?

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TRUDI BECK: Again, I think it's difficult to say that. It's a really difficult position to be in, because I don't have a lot of time to pursue this without results.

The Hon. Dr SARAH KAINE: Yes, of course.

TRUDI BECK: My initial attempts were fairly gentle at trying to get major local employers who we were seeing patients from all the time to take some accountability for the fact that they weren't orientating their workers in a way that I felt was probably basic. I have escalated that over time to be more involved with the media and highlight the issues that exist at a larger level. Abortion access in New South Wales is incredibly difficult. When *Roe v Wade* was overturned in the US, they talked about the distances that women had to travel over there and people were outraged. I was like, "You have women travelling that far in New South Wales already. Why are we surprised about this?"

The distances that women are travelling to access our services are just so big that engagement with employers in Griffith, for example, is really difficult when they're not even a part of our health network locally. Hats off to the GPs in Griffith, who are managing this with limited resources, because the other challenge that we're all facing is we have women who are missing the window of opportunity to have medical termination because they can't get into a doctor in Griffith. Then they can't find out who provides these services locally, and then they can't get into an ultrasound service until another week later.

By the time they get to me, they're 12 weeks. They can't have a medical termination. So then we have to have the discussion about the fact that there are not surgical termination services in our area. Then I would say to them, "You can drive 500 kilometres to Sydney. Here's a clinic that I work closely with that will do it." But by the time they get to that point, they're so defeated. I had women who would say, "Do I actually want this baby? I will keep the baby. I will see you for my pregnancy care." Then they'll get on a plane at 34 weeks, go home, have the baby and leave the baby with family to come back to their—they will literally use their annual leave to go home to have a baby and then come back to work.

The CHAIR: Dr Beck, I think you indicated earlier that 95 per cent of cases actually choose termination. I think you said that you sensed it was not a personal choice and that quite distressed you as well.

TRUDI BECK: That's the most distressing part of it. I got involved in what is legal reproductive health care in Australia because there are limited people who want to do that in regional areas. When you go back decades, I don't necessarily see myself as a pro-choice person; I see myself as a doctor who will practise within an ethical framework to give that patient the care that they need. I actually find it really difficult to provide termination services for a woman where that's not her deeply held desire. I think that's the crux of the matter for me. It's around, if this woman was in her home country and had the means to live above the poverty line, she would have this baby. That is just such an ethics and values clash for me. It's what makes me want to reach out to people to say, "Can we make this better?" I just don't think that's a system that we should be engaging in ongoing support for or facilitating that. The system that we have at the moment, that's what it is doing.

The Hon. Dr SARAH KAINE: I want to go back again to where we started on this, which was you admirably trying to reach out to other stakeholders. We were talking about employers and you mentioned that these were larger employers. Often we think that the behaviour we're meant to be concerned about are with those that are under the radar. But what we're hearing is that in terms of an ethical responsibility—let's put aside the legal responsibility—the larger employers are also—

TRUDI BECK: They're big companies that have entire HR departments. I understand that they're paying minimum wage and that they're meeting other Australian employment requirements, but if you're—this is again the whole issue around modern-day slavery. That is, as soon as you have some form of coercion to keep a person in that job and you don't provide them with what would be considered by all of us as basic human rights, then they're breaching ethical codes left, right and centre. Maybe they don't ask the questions and maybe they don't get involved with people at an intimate level about their day-to-day lives, but as humans we have an obligation to each other to have a level of decency that would mean that we would care about these issues.

The Hon. Dr SARAH KAINE: Speaking of coercion, and going back to your previous answer, the fact that women can't make the free choice that they would make in different circumstances is, in essence, a form of systemic coercion.

TRUDI BECK: I believe so.

Ms JENNY LEONG: I just want to follow up on that because we've also have heard the other side of that, Dr Beck. Earlier today in the evidence we heard that women who are in a situation where they give birth but are not in a position to support the child are forced to go back into work and then have lost contact with their children as a result. In terms of all of those possible outcomes and the outcomes that you've talked about—they're

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all horrific and unacceptable—making a simple decision to say that all of these workers could have access to Medicare or access to the health care that they need, would we then alleviate a lot of these problems?

If we could right now take off the pressure that is sitting on you with your day-to-day interactions with these people—leaving aside that you've tried the soft approach of going to employers. It seems, to your point, they're not asking the questions. I think they don't want to ask the questions because they know the answer. We know full well that they could ask the questions but they don't want to know the answer, so they don't ask the question. What, from a medical and care perspective, is the thing that solves it right now? We can't fix the visa scheme. If we can't fix the visa scheme, we can't deal with the level of regulation. From your perspective, for health care for these women, what is the fix?

TRUDI BECK: I've thought about this a lot as well. I think that, firstly, I would like to see some kind of obligation from the employer to orientate workers to local systems. Because I think that, like we've heard before, if you're English second language, you have a different cultural lens on health care or, like someone said before, the police. I think that there needs to be local orientation to services. In an ideal world—again, I've thought about this. The Government doesn't necessarily have an obligation to solve every migrant visa worker's long-term health problems. I accept that and I understand that that is not a cost that needs to be borne by the State Government. But I think that there needs to be an understanding that humans have sex and we're not going to change that, and it is still a woman's right to choose whether or not she has contraception.

I think that there needs to be an understanding or an allowance made in either—I don't know whether it be Medicare and the PBS or whether it be under private health insurance that there needs to be a clearly understood minimum level of health insurance for a woman coming into the country. I think that, for those predictable outcomes that women can find themselves in—because I think, realistically, in those women from 20 to 45, pregnancy and sexually transmitted infections and cervical and breast screening are going to be the core—there needs to be an agreement reached to say that the State Government bears some cost for that. Because we know what those things are. The Government can put a contained boundary around what they're willing to support access to.

Mrs TINA AYYAD: You've spoken about contraception a fair bit—and I do understand the importance and I appreciate you sharing all of that. But what else would be the top priority? These people coming in—what are the medical issues that they're currently dealing with? Other than antenatal care, contraception, what else would be the top priority for the State or Federal government to consider?

TRUDI BECK: Because I work almost exclusively in women's health, and the main reason that women in a reproductive lifespan access health care is for reproductive health, that's still my number one thing. Partly because I believe that the ethics and values clash that a visa creates are—we've created that problem. Whereas most other health conditions are—they're not created by your employment model, if you know what I mean. It's really tricky. In an ideal world you'd like to see migrant visa workers, particularly if they're here for extended periods of time, like some of them are, have access to population-based screening. But, again, I know that that comes down to risk-benefit cost analysis. Even things like immunisations—they're all the basic things that we do in primary care that we don't have the capacity to do any primary care from a medical perspective with this population.

ANITA McRAE: There have been examples, say, with funding that was specific around COVID-19 vaccinations, where there was funding that was specifically for people who didn't have Medicare cards to ensure that there were vaccinations. But that's an exception.

TRUDI BECK: It comes down to then individual practices deciding how far they're willing to push the barrow on what would be called the Medicare pub test in terms of what access we can get to emergency medications through our doctors bags. Do we not vaccinate pregnant women for RSV, which is a very expensive vaccination, because they're non-Medicare eligible? We as a practice have had to decide where our line in the sand is about what things we feel comfortable to push the barrow and to give gold standard level of care within a system that doesn't support that.

Mrs TINA AYYAD: You made reference to STIs that are being transmitted. I'm just curious to know, is there some kind of an awareness campaign that can be funded that can essentially let these individuals know what the risks are? When they come in, do they actually know that this is what they're suffering from?

ANITA McRAE: I think there is certainly a role to play, and PHNs do this, around that awareness. Dr Beck has spoken around that induction and around health services, and it can include health information. There is certainly a role to do that. I think it needs to be targeted and acknowledge that there are some cultural considerations, as well as language barriers and whatnot, to ensure that the information is accessible in every meaning of the word.

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TRUDI BECK: To be blunt, the flu or COVID or gonorrhoea or chlamydia don't respect your visa status, so you're putting your broader population at risk if you have a hotspot of community members who are not screened or prophylactically treated for things. Again, to my knowledge, there is absolutely no education around that when a woman comes in. We know that in certain populations, 25 per cent of the population will have chlamydia or gonorrhoea within a 12-month period, so if you then put that burden into the broader community, you're then going to create epicentres of sexually transmitted infections that surround migrant visa populations, not because they want to be spreading that but because they're not given the opportunity to have free health care for something that affects the entire community.

Mrs TINA AYYAD: I understand. In regard to that, with the health information that is currently provided, what kind of funding is around that? Would better funding assist in that?

ANITA McRAE: Absolutely. Funding that is specific for that and targeted to enable better education—and, like I said, it's not just translating a piece of information that is in English into different languages. It does take funding to be able to do that job properly.

Mrs TINA AYYAD: Other than it being written in black and white and translated, how else would it be enabled?

ANITA McRAE: I think there is a big role in community development and actually people communicating these messages, and it's not a "once and done" kind of thing either. That continuous education, as Dr Beck set out before, just within the broader Australian population, we have some issues with that.

TRUDI BECK: We're already good at doing this within our Aboriginal medical services where we have healthcare workers who have more cultural competence with these groups of people. I would think that in large employers you should have staff members who have specific additional training, who aren't threatening to the populations that they're working with, who have an understanding of local systems, who can allay fears around—there are often lots of rumours around what's going to happen if you present with this. I think that there's an obligation, again, on employers to have well-trained, culturally appropriate staff members that can convey this information. I know sometimes what I talk about gets entirely lost in translation because, even if it's with a translator, it's not done in a way that is meaningful to them. That's where I acknowledge that my ability to advocate for this is limited by my cultural understanding.

Ms JENNY LEONG: Ms McRae, I have a question for you to take on notice. I'm always keen to pull out the positive silver linings to the COVID pandemic. We saw that there were lots of things that governments did to lift people out of poverty and deal with funding health services properly that then stopped. On notice, are you able to share what was rolled out in terms of the examples of the COVID vaccine and the levels of support, which could be used as examples for other types of good primary health care in that area? I think it's useful to take those examples of how it worked as a model for how the State could step in again.

ANITA McRAE: Yes.

The Hon. AILEEN MacDONALD: I also have a question on notice. Dr Beck alluded to epicentres. Do you think there are risks that failing to address those health access issues could perpetuate cycles of vulnerability, not just in the communities here, but for generations when they do go back home?

The CHAIR: I will add a question to that. I'm puzzled that a submission was supposed to be made by the PHN and the LHD but somehow didn't get made. Dr Beck, it sounds like you were substantially involved in helping with that submission.

TRUDI BECK: I put my submission forward, and then when I went to look on the website to find it, it wasn't there. Then I contacted—

The CHAIR: Sorry, because you were putting that in through the PHN and LHD?

TRUDI BECK: Correct.

The CHAIR: It would be important for you to clarify, if you were able to put your own submission forward, given whatever contractual status you have with the LHD—

ANITA McRAE: Absolutely, Dr Beck is able to and I think has already passed it on.

The CHAIR: That is the first question. Connected to that is a concern that the Committee has come across about the preparation or awareness of frontline workers. Dr Beck, with your experience, you are clearly aware. But a concern has been raised—and I think we share that concern—about general knowledge amongst health staff about people who present to emergency departments. The question on notice will relate to levels of awareness in the health worker population about this issue. I'll leave that there. Thank you very much for your evidence.

UNCORRECTED

(The witnesses withdrew.)

The Committee adjourned at 12:05.