

STANDING COMMITTEE ON LEGISLATION

PARENTAL SUPPORT AND RESPONSIBILITY BILL 2005

**TRANSCRIPT OF EVIDENCE TAKEN
AT PERTH
WEDNESDAY, 19 APRIL 2006**

Members
Hon Graham Giffard (Chairman)
Hon Giz Watson (Deputy Chairman)
Hon Ken Baston
Hon Peter Collier
Hon Sally Talbot

Hearing commenced at 2.20 pm.

**COUNCILLOR, MR HENRY,
Chief Executive Officer,
Kimberley Aboriginal Medical Services Council, examined:**

CHAIR: Good afternoon and welcome to the committee. Thank you for attending to assist us with our inquiry into the Parental Support and Responsibility Bill. I will quickly address a few formalities before our discussions commence. You will have signed a document entitled "Information for Witnesses". Have you read and understood that document?

Mr Councillor: Yes.

CHAIR: Today's discussions are public. They are being recorded and a copy of the transcript will be provided to you. Please note that until such time as the transcript of your public evidence is finalised, the transcript should not be made public. I advise you that premature publication of the transcript or inaccurate disclosure of public evidence may constitute contempt of Parliament and may mean that the material published or disclosed is not subject to parliamentary privilege. If you wish to make a confidential statement, you can ask the committee to consider taking your statement in private. If the committee agrees, the public, if in attendance, will be asked to leave the room before we continue. I would invite you, if you want to, to make any opening comments that you would like to make before I proceed with some questions we have prepared for you. Would you like to make an opening statement on the bill?

Mr Councillor: From the information on the bill that I received from David, I have noted some preliminary comments for and against the bill.

CHAIR: If you are happy to proceed with that, we will hear you on that, if you like.

Mr Councillor: My comment, from reading the bill and my understanding of the meaning of the bill, is that my field of expertise is not in looking at this particular area. However, the definition of bill is quite clear. The bill quite obviously adopts a carrot and a stick mentality in its approach. The parenting agreement is the carrot and the parenting order would be the stick for how people proceed. It empowers the authority of the CEOs of the three state government departments of community services, education and justice to say how the application can proceed. I may talk a little later in regard to that, because it does raise a bit of concern from my aspect. In relation to the reporting, the bill highlights that until such time as it is designated or authorised to another department, it will go straight to the Premier's office for providing feedback. Clause 10 spells out the activity for the responsible parenting agreement and clauses 13 and 14 spell out the activities for a parenting order, which is pretty much quite understandable, I suppose, from my perspective. However, I think there is almost a complete overlap between activities covering both the responsible parenting agreement and the responsible parenting order. An interim responsible parenting order is much more limited. Both types of order cease to apply once the child turns 15 years old. That raises concerns when looking at some of the acts, particularly in the education area where the responsibility of parents for support and expenditure for further and higher education, if people want it, ceases when the child reaches the age of 25. I do not know whether there is a difference and why it is 15, when everything is legislated at 18. It raises a gap.

Clause 20 spells out that a \$2 000 fine will be the penalty for a breach of both the family and the parenting responsibility orders. I find that maybe a little harsh, depending on the environment and circumstances that people are living in when the bill is imposed. I apply that particularly to Aboriginal parents in remote Australia where most of the income is from community development

programs and work-for-the-dole strategies. Those sorts of fines would be placing more pressure on that. The impression I got from the bill when I was sitting and thinking about it last night was that I see no provision in the bill for any community or non-government organisation to play any part in the analysis of the decision making at any stage. Also, this exclusion applies equally to Aboriginal and non-Aboriginal organisations, including organisations with specialised programs in personal work, such as in child care, education, family violence and social wellbeing. I think they are an integral part of a child growing up. If they are not able to participate in those areas, how do they get to look at how this bill will have an impact and any meaningful outcome? There is also no provision in the bill for Aboriginal child care, family violence or social wellbeing organisations to be involved in the process of applying the responsible parenting agreement, particularly in an Aboriginal family. In those particular departments there is some exclusion of how people are feeling and Aboriginal cultural sensitivity.

[2.30 pm]

I say that because, particularly Aboriginal families outside the metropolitan area, which is where I have experience, act according to traditional law and traditional ceremony whereby kids and parents are away for certain periods. The bill refers to truancy. This creates an issue for which a CEO may or may not want to apply a family agreement or a parenting order. The implementation of that principle will depend completely upon the officer's understanding, yet I can see no provision in the bill whereby the Department for Community Development and the Departments of Education and Training and of Corrective Services must incorporate the meaning and practice of this principle into their current corporate and cultural ways of operating, particularly regarding Aboriginal families. They do not.

The bill is silent on the implementation of the only constructive development activity that the government offers to Aboriginal families under this bill; namely, both the responsible parenting agreement and the order for various types of personal development through courses or with groups. The bill provides no requirement for counselling or group help or for personal development or activity. Those activities must be approved on the basis of demonstrated compliance with the bill rather than on the basis of cultural and religious sensitivity. From my dealings with the Aboriginal medical service in looking at social and emotional wellbeing, we see that cultural and religious sensitivity is essential criteria in the case management of Aboriginal people, particularly children, given problems such as chronic illness, diabetes A and diabetes C, ADD and a number of other chronic illnesses that affect Aboriginal people. The environment in which people live is the key element in how these things will actually work.

Clause 20 of the bill refers to a \$2 000 penalty. Clause 20(1) provides that if a parent to whom a responsible parenting order or an interim responsible parenting order is directed fails to make reasonable efforts to comply with the order, the parent commits an offence. The government is supposed to be looking at our current situation - I do not know whether the committee has been privileged to some of the information - particularly in Halls Creek, where parents have sent their kids to school but they have not participated in school. It has been hard to police that in one sense; therefore, people have been victimised for not doing the right thing. How do we deal with that? The bill does not deal with that. I do not know whether you want to leave that to the departments to work out a different mechanism. However, I have read and been involved in aspects of the Queensland 1999 Child Protection Act. That act refers to the meeting of all appropriate agencies to deal with cases of suspected child abuse and neglect; therefore, the focus is on strong families, which is more of a voluntary process for bringing people together and holding the departmental heads accountable for doing something rather than forcing people to do something that they may not comply with such as fining them or putting orders on them. It is difficult enough today to get people to fulfil orders of a drunk and disorderly charge under current laws. The statistics across Western Australia indicate that drunk and disorderly charge orders are unfilled or unpaid by about 89 per cent of those charged, which results in either stronger orders or imprisonment.

The bill has been around for a number of years and is now in its final stages. However, by creating more work for the three departmental heads, I cannot see the bill being implemented in a way that will benefit its recipients. The bill will have a lot of impact on Aboriginal families across the state of Western Australia. On the basis of what I have read, I do not support the bill.

CHAIR: Thank you for that. Many of our questions will touch on many of the points you have made so it will be an opportunity to provide further commentary on some of those aspects. Will you tell the committee a little bit about the Kimberley Aboriginal medical service, the service it provides, how it is provided and its structure?

Mr Councillor: The Kimberley Aboriginal Medical Services Council was incorporated in 1986. That incorporation was based on the services provided by the state government through commonwealth funding to Aboriginal communities, particularly in the Kimberley and its remote areas. We believed that the services funded through the state by the commonwealth were not being delivered on the ground. After analysis on how they could be delivered, we believed we could provide a better option for delivering services. The Kimberley Aboriginal Medical Services Council is a body of Aboriginal medical services across the Kimberley region made up of the Broome Regional Aboriginal Medical Service, the Derby Aboriginal Health Service, the Gibb River Road Aboriginal Health Service, the Fitzroy Valley Aboriginal Health Service, the Halls Creek Aboriginal Health Service and the East Kimberley-Kununurra-Ord Valley Aboriginal Health Services.

Part of the role of KAMSC is to provide simple corporate services to ensure accountability and transparency across the region. The total amount of funding provided to the Kimberley Aboriginal medical service and associated Aboriginal medical services is in the vicinity of about \$26 million, including the Medicare bulk-billing intake. That is a substantial amount of money for which we need to show transparent management to the commonwealth government. KAMS also provides medical support, GP services and remote and rural GP training. In our work force there are 12 registered GPs and eight medical students. A total staff of 236 are spread across the Kimberley, 80 per cent of which are Aboriginal. There are 16 fully trained doctors working out of our clinics, four Aboriginal social and emotional wellbeing counsellors and a number of administrative staff. We have also now included the Balgo region as an area for delivery of clinical services. Part of that is to look at how we can provide primary health care and some social and emotional wellbeing support services. However, as in most areas, our services are limited by funding. The Kimberley Area Medical Service focuses on the regional aspects and on regional initiatives that we can introduce across each diverse cultural area.

The medical service is fully community controlled. It has a board of 12 members, elected independently from each district; therefore, it is not solely owned and controlled by one area. It provides advocacy and clinical, financial and corporate services and Aboriginal health worker training. Since its inception in 1986 we have trained well in excess of 250 Aboriginal health workers, the majority of whom are now employed within the state health department and the community-controlled sector. Our aim is to provide as much cultural awareness and primary health care delivery within the remote area as possible, thereby creating access for Aboriginal people. We have also established a joint partnership with the Australian Lions Eye Institute and we do retinal screening in the Kimberley with the aim of increasing specialist treatment. The Kimberley Aboriginal medical service is 99.9 per cent funded by the commonwealth government.

[2.40 pm]

CHAIR: Have you or the Kimberley Aboriginal Medical Services Council had any previous association with the discussion paper that preceded this bill, or with the bill itself?

Mr Councillor: Actually, no.

Hon GIZ WATSON: Were you aware of the discussion paper? One of the issues that has been raised by other witnesses - I think it was about two years ago, in 2004 - is that the only notification

of the discussion paper to the more remote regions, and particularly to indigenous communities, was that a comment that it was available on a web site and emails. Was your organisation, for example, directly approached for input, to your knowledge?

Mr Councillor: No, we were not. I knew that there was development on the bill a few years ago. I used to be the chair of the Western Australian Aboriginal Community Controlled Health Organisation here in Perth. However, the bill did not really create enough interest for me to take up involvement. I was not aware there was a discussion paper on the bill. We knew that it was on the Internet, but Internet access in remote areas is really, really limited.

Hon GIZ WATSON: Perhaps you and your organisation might not have been interested because it was not quite in your area, but do you think remote communities that knew about the discussion paper would have had either the time or the capacity to respond to it?

Mr Councillor: I could probably safely say that for the Kimberley region, no. With information on the Internet, it is only been in the past six months to three years that telecentres have actually been developed in some of these remote communities, where people can access information technology. Unless they had either been informed by Aboriginal resource agencies, or by the organisations that look after those particular communities, they would not have known. I have spoken to my representative at the Palyalatju Balgo health clinic, and no, he has not heard about this particular bill.

CHAIR: The committee has heard evidence that some Aboriginal children are reared in what has been described to us as community parenting environments, rather than in what has been described to us as a more traditional non-Aboriginal dual parenting model. Do you agree with that proposition, and if you do, do you see the use of responsible parenting agreements and orders fitting in with some of the Aboriginal parenting models?

Mr Councillor: Well, I do not exclude them totally; however, I think that the most valuable thing we have learnt with the Department for Community Development is how to actually develop a case management process to allow that to happen. I believe that the placing of a parenting order or a responsibility agreement is something that the people will not actually take seriously enough. Most people feel that they do not actually have anything to lose. If you are in a particular community, such as Ngallagunda, which is along the Gibb River Road, this will mean nothing to you, for the reason that that particular school and community closes down for about six months of the year, due to weather conditions and law time seasons. The relevance really does not apply in those particular areas.

I find that kids in the more remote communities are slightly disadvantaged but also slightly advantaged on the basis that they have their grandparents about, or they have a family member who will look after them. For a kid in a more urban area like Halls Creek, the urban environment would be a trouble spot on the basis of easy access to other social events, particularly those involving alcohol and drugs; access to these is much easier. Parenting orders will not diminish that. I have had case conferences in which we have what we call strong family involvement, where people come and sit at the table. I have always known this to work, and I think that the community corrections department, the Department of Education and Training and the community services department have all been totally in support of that. They believe solutions come about through action rather than by putting people through the courts. One of the other things that emerged from discussions I had this morning was that some of my colleagues felt the parental order process had the potential to create the feeling in the Kimberley that it would result in a second stolen generation, with children being removed from families and sent away because of a court order.

A few years ago there was the Charles Perkins Hostel in the middle of Halls Creek. The reason I talk about Halls Creek is that it is a prime example of that particular area. The Charles Perkins Hostel was run and governed by the department for community services. It was basically set up for kids from remote communities, particularly the surrounding communities, to come in and go to

school at Halls Creek. The parents had access 24 hours a day to their children. Of course, some people - the do-gooders, I believe - saw it as a childminding exercise, but I felt it was beneficial in that kids were going to school, they were getting fed and clothed and they had a safe place to sleep. Part of the process was that homemakers funded by the department for community services would work with the family so that when the kids came home, they would be with the kids, and during the school holidays would provide activities. That worked; I do not know why the hostel closed, but it worked. As you can see, today there is no hostel.

Kids who come to Perth either stay for the first term and then leave and do not come back on the basis of environmental insecurity and homesickness; or, because the standard of accreditation in literacy in some of the schools in the Kimberley is below average, a kid will turn up to school in Perth and be the dumbest kid in the class. Those schools that go through an accreditation process and are delivering the syllabus are sometimes, I believe, far below the average that should be taught. The kids at the back of the class need to be taught, not the kids at the front. That is the problem we have; we are finding that more and more in Perth at the moment. Just as an example for the committee, my wife and I bought a house in Forrestfield; we have seen kids from the Kimberley come, and the ones who go back do so because they feel they cannot meet the standard of the current curriculum level. That is why I raised the issue of why we are looking at the age of 15; why has that particular age come about?

Hon GIZ WATSON: I was interested in your comment about case conferencing or casework -

Mr Councillor: Case management.

Hon GIZ WATSON: Case management, sorry. Could you give a bit more information as to when that is used and what sort of outcomes there are?

Mr Councillor: I will speak from a health perspective, because I am more familiar with that. When a kid is found to have an STI - sexually transmitted infection - it is a reportable case. It is case management that works particularly with the families that surround them, because people get very angry and want to kill somebody if their child has been raped. Those involved include the Department for Community Development, the police, the Department of Health, the KAMS or an associated member of one of the health services, the family or a representative group that the family may wish to bring to the case management process and social workers. We try to work out the best way to go forward with a particular issue. First, it is a reportable case, therefore it is reported; secondly, an investigation has to be implemented; thirdly, support needs to be provided, particularly for the child, the mother and the grandmother; fourthly, we need to look at how to deal with an angry father. Normally we would bring in a men's group to deal with that, to try to ease him down and to secure a prosecution, if it needs to happen. That is a case process. It is clearly understood; the department and the police explain to the family what needs to happen, and where the support comes from, particularly for social and emotional wellbeing. That continues for a period of time, until the family is at ease and can work through it.

Hon GIZ WATSON: Do you think that a similar model would work for situations in which there is arguably inadequate parenting; that is, when truancy or similar issues are manifest and the child's behaviour is such that parenting is called into question? Could you see that approach working?

[2.50 pm]

Mr Councillor: That is actually happening at the moment with Strong Families involvement. That involves bringing people in and doing the same thing. If a kid is having trouble in school, we try to work out a way we can overcome the problem or develop a pathway so that the kid can stay at school. We might even consider a special one-on-one class to bring that kid up to standard. It is also happening with kids who reoffend by destroying property and theft. The giving of orders and locking kids up is not doing any good; in fact, it is making them much worse. We believe that with a bit of support and guidance in their area of expertise - we believe that every person has some form

of expertise - hopefully we can lay the path and try to assist the child or parent. Homemaking was run by the department and it could be run by an organisation. I think that that would have a lot of impact. One of the classes that the Kimberley Aboriginal Medical Services Council established is what we used to call the binbusters, which is about overweight women who would not go to aerobics classes or public areas, such as swimming pools, getting together. The binbusters class told some fairly overweight ladies what to cook and what to eat and so on. We find that that works quite well. Most Aboriginal people are shy and lack of confidence, particularly when they get to a stage at which they feel that they are being laughed at or talked about.

Hon PETER COLLIER: With regard to what Giz said about the potential use of counselling sessions for truancy etc, you mentioned STIs. What other behavioural patterns would result in similar counselling sessions? Giz mentioned truanting; what else would be included?

Mr Councillor: Most of the cases that the health service would deal with involve traumatic and social and emotional wellbeing issues.

Hon PETER COLLIER: Self-harm?

Mr Councillor: Yes, self-harm. There is one in process at the moment. A young bloke hung himself on the weekend at Fitzroy Crossing, which will have a huge impact. Counselling is mainly involved if there has been a traumatic event. There is a lot around the stolen generation at the moment, in terms of people finding themselves. The kids need to be involved in that process, because if they are not participants, they feel excluded and, therefore, they do not wish to participate in a family gathering. At Christmas I was out at Pandanus Park, which is not far from Fitzroy River. An old bloke by the name of Johnny Watson, who is the traditional leader there, took me around and showed me a few things. He said, "This is what my family used to do every year". It was about teaching people what the survival mechanisms and the art painting was all about. We took a group of doctors out there, put them on the back of some camels and marched them through the scrub. It is about everybody participating. At the end of the day, in Aboriginal families you will find that the male is the leader, the female is the provider and the grandmother is the carer. That is the way it used to work because the grandmother stayed at the camp and looked after the kids while the mother gathered traditional food and the father did the hunting. Many people in the country, including me, have always criticised the churches in terms of what they had done for Aboriginal people and the dispossession of Aboriginal culture. However, most of the churches and Christian groups, particularly the country gospel and people church, the Assembly of God and the Seventh-day Adventists have turned a lot of Aboriginal people around; they are no longer drunks, drug users or smokers. They are responsible parents. They have to go church three times a week, but they are responsible parents. The family is a lot more healthier. In some of the places such as Biliuna, Mulan and Balgo, they bring the church in to the case management process, because the church seems to have an influence as Christianity has been introduced throughout the region. It may not happen in the metropolitan area, but it happens quite strongly in the remote areas of this country.

Hon GIZ WATSON: I refer to the Strong Families initiative. How does the resourcing match the need?

Mr Councillor: It does not. It is about commitment by the departments.

Hon GIZ WATSON: If you are saying that it is working but that it does not meet the need, would that be an obvious -

Mr Councillor: The sad thing about the Strong Families initiative is that it is based on serious cases that need a huge injection. The department does not have the resources or the financial support to run it every day. It is done on a needs basis when a critical and serious issue must be dealt before a kid is sent to lockup for four years of his life.

Hon GIZ WATSON: Perhaps earlier intervention in the less acute cases might be more effective.

Mr Councillor: We believe that is the case, yes. We experienced that in the peninsula area where we pulled about 50 young women together because last year there was an epidemic of young females suiciding. We started three sessions, and that slowed the rate down. It has had a bit of an impact. However, if we do not have the resources for continuity, it dies in the mist. That is the feel we have of the Strong Families initiative.

Hon GIZ WATSON: Is that state or commonwealth funding?

Mr Councillor: It is not funded; it is a gathering of the CEOs who are named in the bill. The justice, education and community development departments are involved. They are the ones who pull it together with the family.

Hon GIZ WATSON: What is needed to expand its operation if it is not funding?

Mr Councillor: I think the state government could better resource the departments to build the capacity around that need.

Hon SALLY TALBOT: I refer to the case management model you described. Can you talk about the interdepartmental cooperation in a situation that involves a child, the parents, the extended family, other carers and maybe even a church group? Can you talk about how, for example, the health, education, justice and community services departments become involved and work collaboratively, or is that a problem?

Mr Councillor: To be truthful, at times it is a problem. However, it is based on individual goodwill, which is good to have. However, we are not always going to have it. It depends on the community. In the Kimberley, people tend to work a lot more closely, particularly in the departmental areas. The departmental intercollaboration has worked quite well. If we look at community control health sectors working with the state Department of Health and the commonwealth, we work well as a tripartite agreement. We tend to speak on particular issues. I have not seen any great problems in the education, justice and community service departments. They tend to work quite well in focusing on their clients. However, there is always the restriction on how far they can go. This creates a bit of a problem, because they can do only what they are allowed to do. This is where the goodwill of the executive officers plays a part and how they can bend the rules to allow things to happen a bit further. Like I said earlier, I do not think a bill will solve that problem.

CHAIR: Who drives that collaboration?

Mr Councillor: It is normally driven by the community corrections department, which is run in the Kimberley. It looks after work orders and court orders. It drives that process. If it is a truancy case, it is normally driven by the education department. If it is a sexual health issue, it is normally driven by the health sector. If it is a family issue, it is normally driven by community services. If it is a court order, it is driven by community corrections. Like I said, it is done on an ad hoc basis, but it works, and that is why people feel that the outcomes outweigh the need for a formal structural gathering.

[3.00 pm]

CHAIR: I refer to the Kimberley Aboriginal Medical Services Council's health promotion unit which, I understand, has designed its resources around educating Aboriginal people on health issues. Can you tell the committee about the use of culturally specific material? In your experience, are the counselling services that are not specifically designed for Aboriginal people effective in the area that you look after?

Mr Councillor: The KAMSC health promotion unit is a regional body that designs a core template of promotional material that can be customised for particular areas. Because of the 48 different language groups in the Kimberley, it is very difficult to have one standard template. However, the

core element of the template can be customised, particularly for the Fitzroy Valley area compared with the Miriung and Gajerrong people who are linked in with the Northern Territory.

Again, I come back to what we had as the My Body program that was designed to deal with child sexual abuse. We felt it should not be identified with and targeted to Aboriginal children; it should be targeted across the board. We live in a multicultural environment, therefore it should be relevant to white, black, brindle, Japanese and Chinese. We have done that and we have also done the second development of My Body and we focused on indigenous and non-indigenous children and even parents.

The services currently provided by the states are limited. The material that is put out could be more enhanced and open to integrate with community control sectors. We are doing that on the ground in support of the sexual assault unit in the Kimberley, which is funded by the Department of Health. However, there are not enough publications or advertisements indicating that we are working together. It is more about us and them. I do not know why that mentality is about, but it is the opinion that because we are funded by the commonwealth we are looking after Aboriginal people. We are funded by the state and people forget that Aboriginal people in the Kimberley are citizens of this state and, therefore, are entitled to the same facilities as anybody else. The material could be enhanced and broadened a bit more and be a little bit more community minded with a bit more community involvement.

We laugh when someone says there is a 1 800 or 1 900 number that you ring if you get raped. If a person on the Gibb River Road is raped, there is no phone for them to ring the 1 900 number. There are no services available on that road. It is a joke at times. We had a problem with the Royal Flying Doctor Service of Australia at Jandakot when we rang for a plane to go out to the tablelands. It was virtually a joke. The operator asked, "Where are the Tablelands?" It is really difficult at times. Services could be a bit more enhanced and a bit more people-friendly, particularly if they are focusing on kids to access those services. In saying that I must admit that particularly in the Broome, Derby and Kununurra areas people are using the reverse calls - mum or dad or home; I am not sure what it is called. It is attractive because they think it is free; therefore they can pick up the phone and dial. However, the cost actually goes on the house phone bill. That has worked in some areas.

I honestly believe that there should be more community cultural training, not just Aboriginal cultural training but community cultural training for section heads and the members of the police force who go to those areas. When they are dealing with child and adult abuse they need to understand the environment from which these people come out of. It is the type of environment in which they have been living for the past 20-odd years.

Before I came here I was talking to a member of the Halls Creek Shire Council. We were talking about the area that is called the garden area - a residential area that is basically dominated by Aboriginal tenants. We were talking about how we could lift that area because it has been let to run down. Homeswest has not done any repairs to a lot of the houses. The toilets are flowing back. A huge injection of resources is needed to maintain them. We are looking at ways to try to lift the morale in the area and tidying it up a bit. The shire has made a commitment to try to do that. By building five units and creating an environment there we might give a form of safe haven to some people.

We find that the reason children walk the streets at all hours of the night is that they are too afraid to go home, they do not have a home to go to or someone is rooting them - that is plain and simple. How do we solve that? I do not know. It is something we are looking at. We think the way to go forward is by involving the victims in the process of trying to do something rather than imposing something upon them. My wife was a state-appointed child sex abuse officer. At one stage I had up to 15 kids in my house because they had nowhere else to go. The house was divided into two. My family was here and the kids were there and that was done on the basis that I did not want my

kids involved. My kids would ask, "Why are the kids here?" I had to try to distance that. I do not know how we can solve that. I suppose the Charlie Perkins Hostel was a good idea. In a small town it had a captured audience. Some of these places do just have a captive audience.

People talk about the tourist boom in the Kimberley. It is just a tourist boom in Broome. People do not stay in the other places. They fuel up and keep going. The tourist dollar is not being spent in Kimberley, apart from the tourist dollar that goes through the front door - Broome.

This morning I rang the senior manager of the community corrections department in the Kimberley and spoke to him about the Strong Families program and asked him how it was going. He said it is going really fine. He feels that the bill will not make any more impact than what it has already; however, it may create more problems through people being issued orders and not complying with them and not having the financial resources or know how to pay them.

Hon GIZ WATSON: One of the core underlying theories of this bill is that there are support services for assisting people to learn how to parent better. What sorts of services are available in the Kimberley and how widespread is the availability of those services?

Mr Councillor: They are very limited. Close to none. The only thing that comes close to people learning is the young women's group, which is not fully funded. It has been established by a group of young women who wanted to teach younger women how to be parents. The problem we have is that parents are getting younger and younger. Kids are having kids and they are not prepared for it. It is becoming an issue. It is an issue of epidemic proportions that we need to take control over. Antenatal classes are not being attended to. Young girls are still being flown out of places like Fitzroy Crossing, Balgo, Halls Creek and the Gibb River Road to stay in Derby or Broome for eight weeks before their child is born. They have no family or family support. At the age of 15 or 16 they do not understand the meaning of life and what they are bringing into the world. It is creating a problem.

The other factor that we need to focus on is the drugs that are being introduced with the alcohol into the Kimberley. The tablelands is something like 360 kilometres north-east of Derby. You can get to some of these places only by helicopter. We landed in an Aboriginal community and they had gunja. How it gets into these communities, God only knows. This is how far it is going. We believe that it is destroying our kids.

[3.10 pm]

I talk to community leaders about trying to not have "widow communities", like in the Northern Territory. Some communities in the Northern Territory are called "widow communities" because the only people left in the community are the women. The men do not come back to the towns because they are in Darwin either drinking or buying and smoking ganga. This creates what are called "long-grass people" and it is starting to impact on communities because young Aboriginal men and women are leaving their communities. I do not know what we will do about young parents. They are getting younger and younger. When I went to school, we had home economics classes that taught us how to cook, sew and make our beds. We also had sexual health classes that talked about communicable diseases and what parenting was about. Most schools do not have those classes these days. Through the medical services we tried to introduce programs into Catholic schools in particular, because that is where the majority of Aboriginal kids go, to teach the children about sexual health. It has been hard to get those programs going because the church is against putting sexual health back onto the school curriculum. I have always felt that that is an essential part of education. It is very wrong that it is not. Schoolkids are having kids. The only way we will change things is to meet the kids not only at home, but also at school where they are under peer pressure to listen.

Hon GIZ WATSON: Are you saying that other than the service for young women, which is inadequate, there are no specific parenting services available in the Kimberley?

Mr Councillor: There are none, other than the dribs and drabs of goodwill provided by the department and other community sectors.

CHAIR: I have a question that is probably a significant proposition for you to accept, particularly in light of the evidence you have given. If the government accepted its responsibility and provided the community with the types of parenting services that Giz talked about a minute ago, should parents ultimately be compelled to make use of the services that are on the ground and provided? Do you think that parents in Aboriginal communities in regional areas will make use of those services? If the problem is that a child's misbehaviour is attributable to the breakdown of parenting, should parents ultimately be compelled to make use of parenting skills and services?

Mr Councillor: If the parenting program was fully funded and supported.

CHAIR: That is the big assumption.

Mr Councillor: I strongly believe Aboriginal people would use it. Most Aboriginal families are looking for help but they know that there is nothing out there. They do not want to ring the 1900 number. They would rather talk to somebody in their house who could see the environment in which they are living.

CHAIR: Would people in Aboriginal communities not be prepared to make use of those services?

Mr Councillor: I think they would be prepared to use them. It is based upon trust, particularly in Aboriginal communities. Some medical practitioners have resided in a town for up to four weeks before people saw them. However, once they gain that trust from the Aboriginal people, it is very difficult to lose. If the Aboriginal parenting programs were fully supported by the state government, people would use the program. Rather than being a superficial program, people need real-life programs such as early childhood programs, antenatal classes and homemaking studies to teach people how to cook, sew, make beds and clean their house. Other departments and other government agencies, including community control sectors that run government agencies, have a responsibility to maintain continuity of care. The overcrowding of houses is the main problem in the Kimberley. The average number of Aboriginal people in a household across the board in the Kimberley is 10. There are about 1 700 fewer houses in the region than are required. It is an unrealistic amount of houses for the government to fund and put on the table. However, there has been very little input about how the government intends to reduce those figures. In Halls Creek alone, only four houses were built for community members in the past 10 years, and in Broome there is a waiting list of up to six years for Homeswest housing. If a fully supported and funded parenting program were put together that involved interagencies and non-government agencies, it would work. People would use it. I am trying to think of a prime example.

CHAIR: If that is the case, would the element of compulsion enter into it?

Mr Councillor: I think it would.

CHAIR: It would not enter into it? Would people use it anyway?

Mr Councillor: People would use it if they had trust. When I talk about trust, I am talking about proper local engagement in the process.

CHAIR: What would happen if the community did not have that trust but people were compelled to go? Would that work?

Mr Councillor: The point I am trying to make is that if I am being provided with CDP and I was told that I had to go on a program, I would not give a damn because I would not have the money to pay the fine for not attending anyway. I would have to go to jail where the government would have to feed me, clothe me, house me and give me a dollar a day. Money is not a concern to people in the Kimberley, particularly in the remote areas. They play a game of cards for \$2 000 in the pot. You and I would not even dream of doing that. The value of the dollar does not make an impact. Going to jail is not an issue for people from the Kimberley. That is the problem. It is a badge of

honour for young boys to go to jail and get a tattoo. That is what we want to keep people away from. This is why we are trying to tread carefully by introducing programs rather than imposing them.

CHAIR: You talked a minute ago about housing being a significant issue in the Kimberley. What other unique issues or needs can you identify in relation to living conditions in the Kimberley?

Mr Councillor: There are a lot of issues. I have talked about education. Many of the kids in the Kimberley are not as educated as they want to be. That has been a huge barrier to them getting further employment and continuing further studies. Having said that, people are doing it. Six years ago a million dollars worth of TAFE centres was built across the Kimberley in Broome, Derby, Halls Creek, Kununurra and Fitzroy Crossing. Only half of them are being used because no incentives have been provided to use them. We submitted a proposal to the commonwealth government about putting kids on CDP and using that as an educational lever so that they could attend TAFE and obtain a qualification. The federal government said that CDP could not be used to train people for further studies because that is what ABSTUDY is for. How can we win? There has been no involvement regarding intergovernmental agencies trying to look at making use of that asset. Employment is a huge problem in the Kimberley. In some areas there is no useful or gainful employment other than CDP top-ups. Someone from Balgo who does not work in the administration has nothing else to do other than work on CDP. I suppose that the value of the dollar does not mean a thing. We are not the only ones having a problem. The Northern Territory is having a worse problem than is Western Australia.

CHAIR: I think that you have already touched on some of these questions, so I apologise if you feel that we are revisiting issues. We are looking for an opportunity to put some of these propositions to you fairly directly. We have touched on the issue of parenting skills. Would you say there is a general lack of parenting skills in the community that you are dealing with?

[3.20 pm]

Mr Councillor: There is a huge lack of parenting skills.

CHAIR: You talked before about the lack of training nowadays. Is there also a general lack of parenting skills?

Mr Councillor: Yes - totally.

CHAIR: The term "responsible parenting" has been bandied around a lot in the context of this bill. Do you have a view about what responsible parenting means?

Mr Councillor: That is an interesting question. Last night I asked myself what do we mean by responsible parenting; what is a responsible parent. I do not know, to tell you the truth, what makes me a responsible parent. Last night I thought about my life, and I thought my wife and son live in Halls Creek, and I live in Broome, because that is where I work, so I see him every fortnight. Is that being a responsible parent? Just because I bring home the money, and I have a nice house and a car, does that make me a responsible parent? I do not know. That is a good question, actually! I was going to ask you that question!

CHAIR: We ask the questions here! One of the issues that has also been raised with us - you have already talked about this - is how a \$2 000 fine might not be inconsequential to some people. One of the issues that has been raised with us is the consequences of that for the children if their behaviour was the cause of their parents being dragged before the court. Do you have a view on whether that might be a significant problem?

Mr Councillor: I think it is a significant problem across the board. Speaking for Aboriginal people, most of the people I associate with do not have \$2 000; and being dragged before the court is not a very meaningful thing to them.

CHAIR: What sorts of consequences might that have for the kids themselves?

Mr Councillor: The kids will go and live with the grandparents, who they probably would be living with anyway if they have a problem parent, like they normally do, or they will roam the streets. The courts will then have to make a decision and work out what it wants to do about the kids.

Hon PETER COLLIER: Can you think of what would be an appropriate punitive action?

Mr Councillor: What Mike West and I have talked about - he is the community development senior manager in the Kimberley - is that this is where a strong family group comes in, and case management, because we have to work out what we are going to do with the kids. If the parents go to court and a fine is imposed and they breach that and they have to go to jail for three months - hypothetically speaking - and they have four kids, we have to work out what we are going to do with the kids. That is where a strong family group comes in. They can bring in the responsible - if you can call them that - uncles and aunties, or the grandparents, and they would look after the children, and they would talk to the social security office and say the grandparents are now taking care of these children, so the money will be redirected to the grandparents. That is the simple logic to that. That is what the group normally does.

CHAIR: It is late in the process, though.

Mr Councillor: It is, but that is what I am talking about. There is no capacity to tackle this at an earlier stage.

Hon GIZ WATSON: This bill does not envisage a jail penalty for non-payment of the fine. It specifically rules that out. It provides the power to take non-essential household items in lieu of the \$2 000 fine. How would that work in the Kimberley community?

Mr Councillor: All I would say is good luck! It depends on who owns the asset that you would want to take. It is funny that this is coming up again. I worked for the department for community services in 1988. We talked at that time about taking essential items, like the car, for a certain period of time, but people would say, "I don't have a car and I don't have a television. You can take the couch, but it's been broken for six years." What will happen if you take things off families is that the kids will not stay at home but will go to someone else's house. However, that opens up an avenue of danger where the child may be molested if he sleeps at someone else's house because he do not have a TV at home and therefore does not want to stay at home. One of the things we used to do was keep the kids at the basketball court long enough in the evening to play basketball so that they would eventually get tired and go home to sleep, but if Billy Joe had a TV, everyone would go over to his house, so it never worked. At the end of the day, the court would have to impose a jail sentence if the person kept breaching the order a multitude of times.

CHAIR: There is a provision within the bill for the courts to order parents to attend residential courses to assist them with their parenting. Do you have a view on the likely success or effectiveness of that kind of order?

Mr Councillor: I was part of the justice department when they looked at anger management processes in regard to the courts ordering parents, or individuals like fathers and mothers, to attend an anger management course for a period of six months. It has its advantages and it has its disadvantages. Of all the people who have gone through the anger management process, we have found that only a small percentage of them have been helped, because people felt that they had to go there because they were told to go to there; they did not go there because they wanted to do something about their anger. They were told to sit there for two and half hours and listen to this person talk about anger, and leave again. I went off that course, because my brother-in-law hung himself after doing a six-month course on anger management. He was ordered by the courts to do it. He said every time I go on the anger management course, my wife goes and gets drunk, and that is why I get angry when I come back. Eventually he hung himself. It is a bit sad. So I kind of stepped away from it and said if the courts are ordering a person to do it, it is not having any

impact. There should be some case management to find out why the person needs to do an anger management course, and the wife needs to support the process so that she does not get punched in the head every Friday or Saturday night or dragged through the hallway. What we have been doing particularly with the courts is providing what we call an Aboriginal liaison visiting scheme officer, who can talk to the courts about a particular individual. It is normally an Aboriginal elder who is pretty well known and respected in the community, and that person will talk for the client. He will talk about David and say that David is normally a pretty good bloke, but this is the problem he is having, so perhaps we can do some counselling with him, and we can see if that helps, and in six months he can come back. They then talk to David about doing this course instead of going to jail or being fined. That is happening, but, again, it needs to be fully supported. It is done on the basis of need. In my honest opinion, the days of ordering people to do things are gone. You would be surprised the way that people in the country know the system. They know how to get from one place to another without even paying for it. It should be about participation, not ordering people. If an order came from the court for a person to participate so that he would not need to come back to the court, then it might open up a small chance that the person would want to participate. Most of the prisoners who go to the Broome prison apply, at some stage, to go to an anger management course. They have to apply to go to the anger management course; they are not actually directed to go to an anger management course. It makes a huge difference.

[3.30 pm]

CHAIR: In your experience dealing with government departments, how much work do you think needs to be done with the cultural awareness of people who are providing government services?

Mr Councillor: I think a lot of work needs to be done. We are in the year 2006, yet no government department or agency has identified or displayed any Aboriginal portfolios. They do not have a policy for their Aboriginal clientele. Every person in this state is a citizen of Western Australia; therefore, they should be treated exactly the same. However, some will employ Aboriginal liaison officers. Take that how you want.

CHAIR: Thank you very much for coming to see us today and for providing us with some very interesting views on a range of things. As I said, you will receive a transcript of your evidence. You will be asked to make any typographical corrections to it before returning it.

Mr Councillor: I want to make one last comment. I do not think that the bill is a bad thing but it needs to allow for customisation for the development of programs and the integration of case management in regard to dealing with families. That is my final point.

CHAIR: Thank you.

Hearing concluded at 3.31 pm
