



Oral submission to the Inquiry into the Decriminalisation of Certain Public Offences, and Health and Welfare Responses

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Mr RCJ Skelton MP

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PUBLIC HEARING—INQUIRY INTO THE DECRIMINALISATION OF CERTAIN PUBLIC OFFENCES AND THE HEALTH AND WELFARE RESPONSES

TRANSCRIPT OF PROCEEDINGS

FRIDAY, 21 OCTOBER 2022

Surfers Paradise

GOLDSWORTHY, Dr Terry, Associate Professor, Criminal Justice and Criminology, Bond University

CHAIR: Associate professor, thank you very much for meeting with us today. Your view of the world as an academic is very much appreciated by not only this committee but also parliament. In the interests of making evidence-based decisions, we believe your contribution will be very valuable. I will ask you to make a brief opening statement after which our committee will have many questions.

Dr Goldsworthy: You would be aware that I did not put in a written submission to the inquiry. I have some concerns about the direction of repealing the laws, and they centre around the use of public spaces and ensuring that the use can continue in a safe environment for members of the public on the Gold Coast. I also have an extensive policing background—28 years with Queensland Police—and some of that was spent walking the beat at Surfers Paradise dealing with these type of offences. My other concern is that are we limiting the ability of the police to deal with the public behaviour that they are going to come across in certain events, and if we do remove these laws, what are we going to do to replace them? Those behaviours are not necessarily going to stop. That is the issue that concerns me.

I read the Queensland Law Society's submission in relation to this where they were referring to deaths in custody. I do have some concerns about that being a primary driver of change in the laws, given that, when you look at the data, I think we had two deaths in custody since 2011 in Queensland—in police custody, that is—yet the police dealt with some 685,000 Indigenous offenders in that period. The proportion of offenders who die in police custody is 0.0002, so I have some concerns about that being a primary driver and whether it is actually relevant. We do not want anyone to die in custody, obviously, but it is the same as driving—we do not want anyone to die driving a car et cetera, but people do die—there is a risk involved. Are we looking at a utopian thought there? That basically summarises where I am coming from and what some of my concerns are.

CHAIR: Thank you, Dr Goldsworthy. I will turn to the deputy chair, the member for Burnett, for his first question.

Mr BENNETT: Thank you and good morning. I am curious as to your thoughts as a criminologist on some of the things the committee has been hearing, if the laws are repealed, about emboldened behaviours and learned behaviours. Just yesterday we were hearing from Youth Justice. I am not throwing them under the bus, but they report that young people are more attuned to their rights under the law than they have ever been before. What are your thoughts on that involvement or behaviours continuing to escalate to the community's detriment?

Dr Goldsworthy: Young people are certainly aware of their rights and duties these days. My seven-year-old daughter certainly recites them to me quite regularly. The knowledge is there. Does it embolden people? If you do not take action against negative behaviours, eventually the people will continue to do it. Other people will see those behaviours proceeding without any kind of outcome and may well be involved to continue with them.

To take the point of the people from the council who appeared before me, in respect of the toilets and would that necessarily stop the behaviour, I drove out of Burleigh Heads three weekends ago and one of the local itinerants was on one of the main roads there, the four-lane road out of Burleigh. There are toilets 100 metres down the road, yet he was urinating in full view at 10 o'clock on a Sunday morning. Having those sorts of things will not necessarily stop the behaviour; that is just the behaviour they are engaging in.

The police are the gatekeepers to the justice system. These offences are very low-impact offences in reality when you look at the punitive outcomes. One of the issues I have flagged is that if you remove these offences, the police will still probably be the ones dealing with them, and they will just resort to high-level offences with a greater penalty. For instance, the offence of public nuisance carries a maximum of \$1,500. I think the offence for urination carries a \$260 maximum penalty unit fine. So you have that problem. If the laws are removed, who responds to the behaviour? It will probably be the police. They use their discretion. I saw the evidence of the former deputy commissioner to the inquiry. They are not used in a wide fashion. In fact, when you look at the figures, public drunkenness in 2021 made up 0.24 per cent of offences; begging 0.01 per cent of offences; and urination 0.15 per cent of offences. These offences all up account for 0.4 per cent of all offences reported in Queensland.

The police use discretion everywhere, every day in their job. Removing these offences is going to remove another tool that they have at their discretion. The operational procedure manuals—the legislation clearly says that if you take someone into custody for being drunk, you should take them to a place of safety if possible. The police are going to do that. They do not want to have people in Surfers Paradise

custody; I can tell you that from being a senior officer, a regional duty officer down here where you are checking the watch houses. They try to get rid of everyone they can out of there. It is not a case that they are actively going out to take people into custody where they have to. It is really a last-resort power, in my mind, to deal with social situations that require the police to do something.

Mr SKELTON: Dr Goldsworthy, are you aware of any data on the impact of decriminalisation of these three offences under consideration in other jurisdictions? As you know, Queensland is the last area.

Dr Goldsworthy: Victoria is moving to decriminalise, but they have had some issues there in terms of what will fill the space after the police are removed from dealing with these issues. They did a good report titled *Seeing the Clear Light of Day*. To summarise some of their findings, without going into detail—I do not have the detail with me—their experience with decriminalisation in other jurisdictions was—

A primary lesson we have learned is that in Australian jurisdictions that have decriminalised public drunkenness the use of police cells for such cases has continued.

I understand that would be one of the primary drivers. They are saying that it has not actually changed it much. The report continues—

Of major concern is the significant over-representation of Aboriginal and Torres Strait Islander people still being held in police cells in jurisdictions that have decriminalised.

...

... the decriminalisation of public intoxication have largely failed to address the risk of death in police custody.

Therefore, I do not know if it has made that much difference in other jurisdictions. That seems to be the reading from that report.

If you look at New South Wales legislation, the Law Enforcement (Powers and Responsibilities) Act 2002, section 206, they still have the power to take someone into detention who is intoxicated; there is just not a charge attached to it. It is really the same thing in nuts and bolts, but there is no charge.

When you look at the charge of public drunkenness in Queensland, it is a simple offence anyway. It is a low-level impact offence. My take on that is if you are going to tie the police up in detaining people for what is now going to be termed a health response, perhaps there should be a negative connotation to the behaviour of that person to justify the use of police time, and perhaps send a message that, 'Yes, you will have a low-level offence of public drunkenness if you want to go out and get drunk.' We have had large campaigns flow through our societies about responsible drinking, and I think the offence of public drunkenness goes hand in hand with those campaigns.

Mr BENNETT: What was the name of that report from Victoria? I just did not pick it up.

Dr Goldsworthy: *Seeing the Clear Light of Day*, and it was page 33 that I was reading from.

Dr ROBINSON: Thank you, Dr Goldsworthy, for your contribution. Following up on the member's question in terms of Victoria and other state jurisdictions, to clarify, what is the situation in Victoria; they have not decriminalised yet or they have?

Dr Goldsworthy: My understanding is that they have put legislation in a bill, the last time I looked at it—I found some media story on it—but they had held off. They put aside \$24 million in funding, I think, to deal with the medicalisation model they were going to use, but there were concerns about being actually able to step into the space that the police would withdraw from. I am talking there about getting calls for a drunk person on the side of the road, whether that service was actually going to meet that need, that call for service. My understanding is that it is in abeyance until they can make sure that they can do that model properly.

I note that the Queensland Law Society actually flagged that they did not think that model would transfer to Queensland. We are different in terms of remote communities and in terms of little towns that will not have access to those types of services, so what happens in those areas would be a question.

Dr ROBINSON: That is very interesting and useful feedback. Are you aware of the circumstances in other states? I have heard varying things that in these three areas they have already moved to decriminalise. Then I have seen other reports that that is not the case. Do you have any clarification around that?

Dr Goldsworthy: I do not have a whole view of the entire country's legislative schemes. I think Queensland and Victoria at the moment are the only ones with public drunkenness offences. As for begging and urination, I could not answer that question.

Mr MARTIN: Thank you, Dr Goldsworthy. Following on from what you said before in relation to the practical effects that are happening in other states, it sounds like the policing is essentially the same; police are still taking people into custody. The only difference is there is no charge.

Dr Goldsworthy: Yes.

Mr MARTIN: That being the case, what is the effect on public safety? It sounds to me like there is no change in terms of public safety; it is really only the after-effect on the individual in that there is no charge.

Dr Goldsworthy: I guess if there is no criminality attached to it, does it really become a policing issue? When do they get involved? That is the issue. Where you have a clear offence, the police will say, 'Okay, that is a call for service for us.' If you put in place a medicalised response or social service response et cetera, the police may very well say, 'That is not an issue for us. You get onto group A and they will look after that.' The police, I would imagine, will be reticent to get involved in something that does not have a clear-cut punitive outcome—I say 'punitive' in terms of a small fine or whatever it is. You run the risk of muddying the waters as to who is actually responsible and then you have the police again getting tied up in terms of resourcing where there is no outcome. They are actually providing some de facto medicalised response by taking the person into custody and looking after them because that response cannot do it.

Mr MARTIN: Do you not think, Dr Goldsworthy, as a criminologist, police can have a very valuable, effective outcome on a situation, on an individual, without a charge?

Dr Goldsworthy: It depends how much of their time you want to devote to those things that are non-policing. Once you medicalise a response, I do not see it as a policing issue, unless there are behaviours that escalate it then to those high-level offences that I talked to. If you are getting called to a drunk person who is misbehaving to a level, the police will then go, 'Well, we are here. There is no offence of drunkenness. We are going to arrest you for public nuisance because we are here and you have tied us up.' The police will only be called where there is no other appropriate response, I would imagine. I would think their discretion would be, 'If we are here and we leave, we will probably have to take some action, or do we then get tied up taking you to a watch house, sitting there for an hour, or going to hospital and sitting for three hours,' and there is actually no outcome for the Police Service. I get your point: yes, the person is safe, but do you need the police there to do that? They become overpaid security guards in reality.

Mr BENNETT: Dr Goldsworthy, I am curious and very interested with regard to a statement that was played on an interview recently about vested interests in decriminalising these offences. For the committee's benefit, could you explain what you meant by those statements?

Dr Goldsworthy: I was referring there to the Queensland Law Society's submission in reality and to the campaign in terms of the deaths in custody inquiry that was had 30 years ago. Many people would not understand the data behind that. That is what I was talking to. They are pushing along on that kind of narrative, but when you look at the data, the narrative is not supported. There is not a pressing concern there. As I said, any death in custody is unfortunate, however, it is not a widespread event by any means.

Mr SKELTON: Dr Goldsworthy, do you have a view on how public messaging on the harm of alcohol and other drugs, including alcohol-related violence, can continue to be reinforced if those offences are decriminalised?

Dr Goldsworthy: I think it may be slightly difficult. If you are going to say, 'We have gotten rid of public drunkenness. We are not going to treat it as a simple offence or an offence anymore,' what messaging does that send to people? Does it get widely advertised or does the offence just go off the books quietly and people do not actually know it has happened? That would be one of the issues in terms of how that affects public attitudes.

As I said, I think you will see a reticence from the police to get involved in those issues where someone may be very drunk. One of the reasons the police arrest people for public intoxication is their own safety, not necessarily the fact that they are behaving badly. If they see it is a medicalised response and no longer an issue for policing as such, will they be involved in that? The members of the public will then see perhaps people in public much more inebriated than they used to be, and the lack of police response to that because the police will say, 'Well, it is a medicalised response now, not ours. We will ring up group A and get them to come out and deal with it.' What kind of messaging does that send? I do not know. It could be problematic.

Mr SKELTON: A mixed message.

Dr ROBINSON: Dr Goldsworthy, in terms of police resourcing, if we decriminalised these laws, is there a potentiality that it could actually end up costing more in terms of policing those areas, or could there be savings to the police budget by doing it differently?

Dr Goldsworthy: I do not know if I could give an accurate answer on that. You would need to analyse the time spent for each arrest for those particular offences. There were 1,756 offences of drunkenness. I did not hear any evidence from the deputy commissioner whether those people were then released or whether they were held in custody. All of those things will determine how much time that crew was off the road, and then time is going to go towards resourcing and towards the cost involved to have two officers sitting up at the hospital or being off the road for three hours, taking a drunk person home to a place of safety. You would need to do some analysis of their job cards to see how long the arrests took to determine that.

Dr ROBINSON: Do you have a gut feeling or a sense of whether it is likely to be cost-neutral or maybe cost more or less?

Dr Goldsworthy: It will depend on how much the police respond. If you decriminalise and medicalise it, and what the level of police involvement in that model might be, who knows, depending on the model adopted, you may see much less police involvement there so maybe there will be a saving for the police because they are not acting on it, or not required to act on it.

Dr ROBINSON: But then you have the resources the other way that obviously have to be spent.

Dr Goldsworthy: Yes. If you stop the policing response and the other group or whatever system in place is dealing with that adequately, then the police will not be going to it.

CHAIR: Dr Goldsworthy, throughout Queensland we heard of the significance and appropriateness of a co-responder model whereby the QPS is supported by a social worker, a nurse or other allied professional. I am interested in your views on that or whether there is any research around the contribution that that model may make in addressing this broader public issue.

Dr Goldsworthy: I am not familiar with any research directly. I suspect that if you have a look at that Victorian report, there would be some touching on those kind of co-response models. The issue I see there is that you are not going to get any gain in reality in terms of resourcing because the police are still going to be involved and then you will have an extra resource involved as well, so it will be more expensive, I would think, logically. Whereas now you have one person or one group responding, you will have two groups responding, so it is going to come down to how much funding you are prepared to put into that kind of model.

Mr BENNETT: Dr Goldsworthy, I asked the same question of the council about the prevalence of safe night precincts across certain party precincts, if you like, and the fear is that decriminalising these acts will affect that as well. Have you looked into that how that will potentially work from a criminologist's perspective? Safe night precincts would have the banning capacity and other move-on components which we are hearing is working quite well. Have you had a look at any of that sort of thing?

Dr Goldsworthy: I have not had a look at it directly, but obviously they would be the peak areas you would be looking at because of the behaviours that we see there. I draw on my experience working at Surfers for many years as to what goes on in the nightclub areas. The problem with this—and I flagged this in an opinion column I wrote—is that the police are really only dealing with the bottom percentile of people who are intoxicated; that is people who have come to their notice or their attention has been drawn by other members of the public. Sometimes I think these models are drawn on the fact that you are coming up to a drunk person who is nice and placid and they are going to do what you ask. That is not reality out on the street. Many of them are belligerent, bordering on becoming violent, and they do not want to listen to instructions.

With respect to the co-responder model, I wonder how someone in uniform next to the other responder in plain clothes may be taken by a person who is drunk because they probably associate anyone responding as then a police officer. If you look at those move-on directions under the PPRA et cetera, do they actually take them on board? What level of comprehension do they have? With respect to a ticketing model, what will happen when you get someone who is really drunk, really obnoxious and does not want to comply with you and you give them a ticket? When you walk around the corner, they are probably going to throw the ticket out and then go back to doing what they were doing. That is where the discretion to remove them physically is useful. Are you prepared to have police do that with no charge attached? They do that anyway, to some extent, under the drunk laws now, but public urination is a terrible behaviour that should not be allowed in society.

I am not sure what model you are contemplating in terms of how you deal with people who urinate in public. I accept there are emergencies—sometimes people have to pull over and something goes on—but where it is just blatant misbehaviour, I think we need to deal with that, especially on the Gold Coast where you are talking about a prime tourist destination. You do not want people coming Surfers Paradise

over here and all they are videoing is people urinating on the side of the street at night because the police cannot do anything about it. Then do the police do something about it by making it a public nuisance offence, in which case you have elevated the punitive outcome.

Mr BENNETT: Can I seek a clarification? You used an acronym of an Act—PPR?

Dr Goldsworthy: Police Powers and Responsibilities Act.

Mr MARTIN: Dr Goldsworthy, you mentioned before that if police are responding and they do not have access to these laws, the charges might be elevated so that they might use public nuisance. Do you have any data or any information from other states where there has been perhaps a spike in public nuisance charges?

Dr Goldsworthy: No, I do not. Your point is relevant. That would be worth researching. The problem is that there is correlation and there is causation. If the public nuisance offences went up, you need to be able to say, 'Is the causative effect of that a change in the laws or was there some other change that happened?' For instance, the public nuisance offences in 2019/20, I would imagine, have decreased majorly because of COVID lockdowns. In three or four years, people will remember that when they look at it and say, 'Oh, that was because of the lockdowns.'

Dr ROBINSON: Dr Goldsworthy, in terms of Schoolies as a major event on the Gold Coast, it is part of the culture down here now. We have a variation of that at Straddie, by the way, in the school holidays. Are there any implications—and I asked the council this—if we were to decriminalise these laws on the effective running of major events like Schoolies?

Dr Goldsworthy: I will state from the outset that I am not a supporter of Schoolies. Having policed it many years here, I saw the effects of it. My resistance to it is actually on the culture of it imprinting on our children. When you see the parents carrying cartons of grog into hotels and things like that, I just think it is the wrong messaging. Putting that aside, would it affect their ability to respond? Again, it comes back to the model that is going to replace it. There are a lot of young people out and about who are drunk during Schoolies and, even more so, they cannot get into nightclubs, so they will prime themselves in the hotel room and then go out in a state of inebriation. They cannot go into a nightclub or anything like that, so they are just milling around outside, and that kind of environment has potential for more serious offences that may happen. If the police cannot intervene and deal with someone who is intoxicated, it may have a negative flow-on effect.

Dr ROBINSON: In terms of, over time, how supporting groups like Red Frogs have evolved in how they work with police—and I have seen a model of that different to the Gold Coast at North Stradbroke Island and found them to be very responsive and work with police to try to tailor their inputs—what is your experience here of groups like Red Frogs and perhaps others that work alongside of police?

Dr Goldsworthy: There are a lot of non-government organisations that are involved with Schoolies. I am on the committee for the Gold Coast Centre Against Sexual Violence. They are heavily involved in Schoolies preparation and also they will have a presence at Schoolies to deal with the sexual assault matters that come out of Schoolies, which do happen. I think they are useful.

The issue is around training. If you are going to go to a medicalised model where those groups get involved, what training do they have to deal with these issues if something should happen? Say a young person is not taken into custody by the police but is dealt with by another group and they died, then their training regimes et cetera will be under the same scrutiny as the police would be in any kind of circumstance where a death may happen as the worst outcome. However, I think they serve a purpose. They are useful. They do assist the police.

With something like Schoolies, it is not necessarily just a policing response. Certainly a major part is the policing response, but there are other groups which can play a role in controlling, to some degree, the young persons' behaviour—putting concerts up on the beach and getting them into the safe areas so that the more senior Schoolies, I was going to say, the Toolies et cetera cannot get access to them and things like that; I think that is a good initiative.

Mr SKELTON: Dr Goldsworthy, you have mentioned that there is the chance that things will be escalated to the public nuisance offence, and earlier you gave an example where you were driving and someone was in the middle of the road urinating within 100 metres of toilets. We have heard from yourself and police that they are very discretionary about utilising that offence. Would you say that that is not the urinating in public of someone who is making an effort to hide it and that that could be not so much public nuisance but wilful exposure, that a charge like that would apply to someone who obviously has no care?

Dr Goldsworthy: It depends on the context. Wilful exposure, in my experience from when I was in the Police Service as a detective, applied to someone who was almost engaging in a sexual act. There is gratification of a sexual nature attached to the exposure. In regards to public urination, as with the example I gave when driving out of Burleigh, the person urinating was just standing on the footpath—he made no effort to move into the bushes just five metres away—so the context is important. Police generally do not go out of their way to arrest people for urination if they have gone off into bush or they are trying to make some effort to hide it. It is where it is quite obvious and quite public that they will take action. There is a perception, too, especially if you are uniformed police and that is happening in front of you and you drive past it, that if the public see that, they will say, 'Why did they not take any action?' The standard you accept and go past will reflect on the service as a whole.

CHAIR: Thank you, Dr Goldsworthy. There being no further questions and no questions taken on notice, we thank you. I appreciate you are a very busy person and we really appreciate the time you have given us this morning, so thank you very much. We wish you a good weekend.

We will now move to an open mic session. Is there anyone from the floor who would like to comment or make some observations of the inquiry?

NAME WITHHELD, Private capacity

Name Withheld: I am a resident here. I just came to observe. I would like to thank the committee for coming today and holding this on the Gold Coast. I will make a couple of comments. I think the fact that there is nobody here indicates nobody knew about it. I would like to say that if you are holding these public hearings, please publicise them. What you are deciding on particularly affects the residents who live here, and I am one of those residents. That is the reason I came to hear. I fully support what Dr Goldsworthy said. He made some excellent comments about the ramifications of decriminalising these behaviours. I have a couple of comments that I would like to pick up on about public toilets and schoolies, being a resident here. The public toilet I think you were referring to is the urinal in Orchid Avenue.

Mr BENNETT: Yes, that is the one.

Name Withheld: There is a big story behind that. That particular urinal did not have privacy screens and there was a huge uproar from the community about public exposure. The reason the council discontinued those public urinals was for that reason, and I fully support the fact that they did not continue. Orchid Avenue is the nightclub area. In my opinion, the nightclubs should provide the toilets for their guests but, as has been commented today, a lot of people, whether there is a toilet there or not, if they are intoxicated probably would not bother using the toilet anyhow. I know that the businesses around that area keep referring to that particular urinal: 'Why is it not available?' Well, that is the reason. There were many stories in the *Gold Coast Bulletin* about this particular public urinal and exposure to families and people walking past. That is the reason.

The other thing about toilets which people are raising is that there was a public toilet in Cavill Avenue, and it was used by the—I don't know—groups that used to hang out there all day, every day, displaying antisocial behaviour. It was closed and moved, on complaints from people in the area. There are public toilets on the esplanade, but that one particularly was closed. I fully support it because I live in that area and I know that every day they were accosting people in the shops and so forth. People used to divert around it, and it was right in the middle of Surfers Paradise. There is a thing about public toilets that people tend to hang around them and display antisocial behaviour. I am not sure what else. As I have been listening to you, I think, 'Yes, that is a good point,' or, 'I must comment on that,' but maybe you would like to ask me something. As I say, I live here.

With regard to the police and the safe night precinct, we depend on our police a lot. We are very sympathetic to the homeless people. There are a lot of homeless people and people begging here. Not too far down the road, you will find there is a Catholic church that gives out lunches. I see the people queued up there every day. There is a lot of sympathy here for people who are homeless and who are begging. We deeply respect our police and what they do for the community. They do go to the nightclubs. We read it regularly in our paper that the police are often called when security cannot handle what is going on at the nightclubs, and we read of our police getting bashed which really distresses the people who live here. That is another thing about this safe night precinct: how safe is it? It certainly is not safe for people who live here. None of us feel safe. We have stabbings here. It is really quite terrifying. Even during the day it is not safe.

I can tell you a story. About a month ago I was in Hungry Jack's getting lunch. Two young guys, all pumped up, came in demanding money, and it was terrifying. They started bashing the staff. It was absolutely frightening. No police came. I assume they had a duress button, but I do not know. Eventually two burly guys—I assumed they were tourists—came in and sorted these kids out. It was absolutely terrifying for all of those who were in Hungry Jack's at the time. Violence happens a lot here. I am concerned that it will escalate these antisocial behaviours that you are talking about. There is enough of it already.

With regard to the schoolies, living in high-rises, as I do, we have to have special security come in, which we pay for, when schoolies is on. They climb between balconies, they throw pot-plants onto the street below—I mean, I have witnessed all of this; I am not exaggerating.

Do you want to ask me anything? I fully support everything that Dr Goldsworthy said; I really do. I think if you decriminalise these behaviours it will exacerbate them. The young people are aware of their rights. It is nothing for them to get on the tram and say, 'What are you looking at, you effing C?' and all of this. Really, it is quite terrifying to live here. However, it has its assets: the beautiful environment, the beaches, the river and the hinterland. It is a lovely place in other ways.

As I say, we do respect our police. They work very hard. There are agencies, but if you decriminalise these behaviours, what will replace the activities? Who will pull up these people? Also, it can escalate to assaults or domestic violence. The police intervene at a lower level. If they are not there to do this, who will intervene? I do not see any agencies walking around. Maybe they do it at Surfers Paradise

night. You were saying that lots of people praise these people walking around. I am aware of the Red Frogs people—you often see them around during schoolies—but during the day, I do not see any support agencies around—none at all.

Mr BENNETT: I am interested in a matter you just raised. You talked a lot about the police, but I have always had a view that this is a health and welfare response as well and we need our police for community safety. You do not see active participation from community groups, churches or volunteers, except for, say, on schoolies?

Name Withheld: You see the Red Frogs around at schoolies time, but you do not see any welfare—well, you do not even see the police during the day, to be quite honest. Even though there is the Surfers Paradise police station, you do not see them walking around. As I say, I have witnessed brutality during the day. It is quite scary. I broke up a fight not far from here. Two young guys started off just pushing and shoving, and it quickly escalated to kickboxing. I was absolutely terrified. I intervened, saying, 'I live here. Please, please! It is distressing,' and they did stop.

Mr BENNETT: Did you kick them back?

Name Withheld: Sorry?

Mr BENNETT: You should probably think about getting in the middle of kickboxers, I think, lately. That is interesting that there is no visible welfare and health response on the street.

Name Withheld: No, there is none. You do not see the police walking around on patrol, either.

Mr BENNETT: We are going to talk with youth. We were out with Street CRED last night from the middle of the afternoon. We went from Coomera all the way down the coast. They were actively engaged with the community. We will speak to them a little bit later. There might be some things of interest going on on the Gold Coast that you might not be aware of as well.

Name Withheld: It is only what I observe, as I say, and I live here. I do not go looking for it, but you see the violence here and you see the reports in the paper of the police getting bashed. That is really terrifying for us who live here. It feels that the community has lost control because the police are getting bashed. The nightclub security are calling the police. Safe night precinct—it is a bit of a joke when the nightclubs cannot control their patrons, in my opinion.

CHAIR: There being no further questions, I thank you very much.

Name Withheld: And thank you for coming, too.

CHAIR: We very much value hearing your point of view as a resident, so thank you. That concludes our open mic session. We will now have a short break and resume our meeting at 11.45 am.

Proceedings suspended from 11.07 am to 11.43 am.

AUFAI, Mr Will, Senior Team Leader, Gold Coast Youth Service

DRISCOLL, Ms Angela, Chill Out Zone Coordinator, Gold Coast Youth Service

LEEBEEK, Mrs Maria, Chief Executive Officer, Gold Coast Youth Service

CHAIR: I welcome representatives from the Gold Coast Youth Service. It is great to have you here this morning. I thank you immensely for looking after my committee last night and making sure they did not get arrested for any inappropriate misdemeanours! We appreciate your support and advice, and we look forward to hearing about your experiences. I invite you to make a brief opening statement. Maria, I assume that as the CEO you will do that.

Mrs Leebeek: I will start and then I have my experts in the room so I will defer to them.

CHAIR: Like every good CEO, there is a whole team of great people around them. I invite you to make a brief opening statement and then the committee will have some questions.

Mrs Leebeek: Firstly, I would like to acknowledge the traditional owners of the land on which we are meeting today, the Yugambah language people, and acknowledge elders past, present and emerging. I thank the committee for the opportunity to speak today. I do not want to spend a lot of time on the youth service. Instead, you could look at our website because I think we are more interested in having the conversation.

Broadly, we are a welfare service that supports vulnerable young people and families. We do the safety and diversion with the Chill Out Zone and we have emergency relief that we run across the whole of the Gold Coast for all population groups. We wanted to give context to our comments in that we are talking from the Gold Coast. We really believe in place-based solutions and we want to acknowledge issues around First Nations in this space as well. We would refer to the ATSILS submission with regard to the discrimination issues and issues of over-representation of First Nations people. We wanted to make that acknowledgement as well to say that that is who we are.

We obviously support decriminalisation. We are a health and welfare based response. It is not really a policing matter, from our perspective. We think it is about good quality service delivery including ambulance, police and the rest. That is our overall position. Talking about ambulances, I think Angela, with her experience at the Chill Out Zone, can talk about that service integration work better than I can so I will pass to Angela.

Ms Driscoll: I coordinate the Chill Out Zone project under the Gold Coast Youth Service. At the moment, that sits under the tackling alcohol fuelled violence legislation as a rest and recovery service for the safe night precinct. We have also sat in the past under the drink safe precinct, the management of intoxication project and various other strategies. In the past we have also run a service in Fortitude Valley and on the beautiful North Stradbroke Island, as I was saying to Dr Robinson, which was our favourite contract by far.

I would acknowledge that, although we might be the last jurisdiction to look at the decriminalisation of public intoxication, we rolled out the first responses to that more than 20 years ago under the public intoxication project. I think that is important to note. When it came to places of safety, diversionary centres and cell visiting, Queensland led the way in Australia in having those services—some of which still exist today—and I think that has somewhat shaped our attitude towards public intoxication.

I was fortunate enough to be invited to Melbourne for the last meeting of the expert panel on their discussions around decriminalisation of public intoxication. That came off the death of Tanya Day, which is referenced in the *Seeing the clear light of day* report. That is a really comprehensive report that they put together about 10 years after they did an incredible research project into public intoxication and night-life spaces.

The Chill Out Zone operates in both Surfers Paradise and Broadbeach. We service around 1,800 to 2,000 clients in the Surfers Paradise precinct each year, operating only on Friday and Saturday nights and for special events—for example, when there is a public holiday the next day, schoolies and New Year's Eve, which is our big one. We service between 200 to 300 clients in the Broadbeach precinct. We heard from the City of Gold Coast this morning. One of the levers that was used to tackle alcohol fuelled violence was looking at the opening and closing times of venues. We did predict at the time that if late-night precincts could only open until 3 am we were going to see issues in other precincts that were not late-night precincts at the moment because they could stay open until 2 am. That is played out across the Gold Coast in places like Nobbies, Broadbeach and Coolangatta, which is not a designated safe night precinct.

We are used as a place of safety for diversion under the Police Powers and Responsibilities Act. They do have the capacity to divert people intoxicated in public places to our service. They make up about 12 per cent of our referrals into the service and they have about a 25 per cent involvement overall in incidents that we see in Surfers. It may be that they are the first on the scene, or we call them for assistance or the incident itself requires a policing response, and we involve them in that.

The City of Gold Coast representatives were speaking this morning about the safety camera network. The Chill Out Zone manages a really extensive radio network. We have over 50 venues and entities on that network that are able to communicate. The base station sits in the council camera monitoring room and they are able to deploy resources, whether that is police or the Chill Out Zone. That is used to try to make the precinct as safe as we can.

We now have I think 13 different safe night precinct support services across the state. The Chill Out Zone is the only one that only employs professional staff of varying backgrounds—it could be health, nursing, mental health or youth work—and I think that is really important. Most services, apart from obviously primary health services, will not deal with intoxicated people. They are erratic, they can be very unpredictable and sometimes they can be very difficult to deal with, so the policy in most community and government agencies is that if someone presents intoxicated they are not allowed entry and not allowed to access services. When we talk about services whose primary cohort for clients is intoxicated persons, we are talking about really highly specialised services to be able to manage those people. Most of the safe night precinct support services have been set up as immediate care, which is making sure that someone is safe and then being able to release them. When we talk about decriminalisation, particularly in regional areas, that safety is obviously really important but we need a through referral process as well—so where will those people go when they have been made safe?

People who are under the effects of alcohol or other drugs, as I said, can be erratic but they can also be really open to change. Any human who gets themselves in a position where they require other people to assist them because of the state they are in is more open to the suggestion that perhaps something needs to change for them. We find that in the Chill Out Zone, and I imagine that would be replicated in sobering-up shelters. It does not mean that 100 per cent of those people will go on to change that behaviour, but it is a window of vulnerability that exists when they are intoxicated that perhaps does not exist at other times.

When it comes to our client base, we had steadily decreasing instances of violence prior to COVID and that is now on an upward trend again, and so are presentations for mental health. That is not just in those services; that is in events services that we run where people post COVID just have been deeply affected and they have had their world view very much shaken.

One of the things I learned from the expert panel in Melbourne which I think is really relevant to us in Queensland is that there is an enormous difference between late-night precincts or urban centres and the needs of regional areas. I could say, yes, we want to keep public drunkenness but our laws apply right across the state and certainly these three particular offences primarily affect our most marginalised citizens. That is obviously something that the committee is taking on board. I could bang on and say the Chill Out Zone is wonderful. I would be quite happy to keep public urination as an offence—who does that and then wants to shake your hand?—because that is a good lever for us in late-night precincts, but it can have a vastly different effect when it is applied in different areas.

As I mentioned before, there are key moments for change when we talk about dealing with intoxicated people. I think the idea of having a health and welfare response terrifies Queensland Health because they think we need them, but really it is a welfare response that takes health into consideration in a much broader sense. We try really hard in the Chill Out Zone to have not only that immediate care but also referral on to other services which includes a knowledge of what those services are. We sit in the Gold Coast Youth Service, so for a particular cohort that is a wonderful referral because, whatever they do need, the youth service is able to work with them around those needs. It may be a referral to mental health support, to their GP or to the Centre Against Sexual Violence so that whatever may have caused that intoxication or contributed to it is actually addressed in their lives. I recognise the really big difference between what we may need in a nightclub precinct compared to what other areas need.

When it comes to any sort of health and welfare response, I think it must be coordinated. It cannot be siloed because we are talking about mental health, homelessness and health in general; it is certainly about alcohol and drugs. If those things are siloed in terms of a service response, it makes it very difficult for vulnerable people to access those systems or navigate those systems without assistance.

We have spoken about schoolies a bit. I wanted to let the previous witness know that amenity of the community is one of our three objectives in the schoolies response. For the last three years we have had a day support service there so that young people who need something during the day are able to access support and referral. It is very nice as it is down on the beach, so we do try to add things each year based on what we might see as a need. I think where Dr Robinson referred to that it was about the great referral pathways that we do have that are at the core of our service response in schoolies. The Chill Out Zone operates five different services during schoolies for about 22 hours across a 24-hour span.

The core of all of our responses from any organisation is those referral pathways—getting those young people from the situation they are in to where they can be most assisted. I think that is a wonderful model when we look at public intoxication. This week we have had the mental health plan for Queensland released, we have had the Housing Summit and we had an AOD plan released. All of those things dovetail together to support the most marginalised Queenslanders and I think that is the most important thing for the committee to take into account—that they are the people who most require support and that they are supportive of any levers we put in place.

I have to say something about when Anna Rainbow left. I did not raise the issue of public toilets; somebody else did. I am very well known by Anna for always talking—

Mr SKELTON: It was the police.

Ms Driscoll: I bet they did. We did have privacy screens in the beginning and you could not see through them. Then they were remodelled so they had slats, and you most certainly can see through them if you are standing near them so you just do not.

CHAIR: Thank you for that bit of commentary. I am glad someone raised the issue of public toilets because it is important to all communities across Queensland. Will, do you want to say a few words and then we will go to questions?

Mr Aufai: I am the senior team leader for the Gold Coast Youth Service. I want to acknowledge the committee members who attended Street CRED last night. It was a pleasure to have you on board. I probably should have warned you about having some comfy shoes. It was great to have you. As I explained to the committee members, Street CRED is a multidisciplinary team. We have members of the Queensland Police Service, Child Safety, Youth Justice, G:link, public space liaison officers, Lives Lived Well, Anglicare, the intensive bail initiative and school-based nurses. Last night was actually our quietest night, which is good.

CHAIR: They heard we were coming.

Mr Aufai: A quiet night is a good night. Generally it is quite busy and we are engaging young people out in their spaces. The whole purpose of this assertive outreach is to engage young people at hotspots where they are gathering and where they are sleeping rough. This initiative has been going for about four years. It is a QPS initiative, and Gold Coast Youth Service facilitates this initiative. In the last financial year we had 717 engagements of young people. Of that there were 273 distinct young people.

CHAIR: Could you elaborate? Is that 273 people?

Mr Aufai: There were 717 engagements of young people. On our outreach we count how many times we engage a young person, but if we are talking about distinct numbers there were 273 of those in the last financial year.

CHAIR: Individuals?

Mr Aufai: Yes, individuals. If we look at statistics, around nine per cent were from Child Safety and 18 per cent were from Youth Justice. A huge number of that cohort, 48 per cent, were from the New Zealand Maori Pacific Islander background. That is pretty much Street CRED in a nutshell. We go out and then the follow-up happens from Monday to Wednesday. We continue to engage these young people. We have spoken about the partners. Angela talked about working collaboratively, not in silos, and with that partnership we can get referrals straight off the bat. Lives Lived Well will pick up anyone for counselling, and Child Safety will pick up a young person who is under 16 and so forth.

Our homelessness team worked with 133 young people in the last quarter who were experiencing homelessness or at risk of homelessness. Before I came here today I looked at QHIP—the Housing Information Platform that all specialist homelessness services have access to—to look for any vacancies for crisis accommodation or emergency accommodation for our young people. There was only one, and I searched through Brisbane, Sunshine Coast, Ipswich, right across the Greater Brisbane area, Logan and Gold Coast. Here on the Gold Coast we continue to have only six crisis beds for young people.

We are seeing the ice epidemic continue on the Gold Coast. It is running through some of our caravan parks. It would be great to have an ADOHS down here on the Gold Coast. The issue we are facing is that we cannot place them into stable accommodation because they still need to address their substance misuse.

We are on an automatic email list with real estate agencies. The cheapest one-bedroom properties that we see are \$480 or \$580. These are real estate agencies that we have really good relationships with. We used to be able to park young people in motels and then refer them on to these real estate agents and they would give them a go. That is no longer viable. The motels that we look at are over \$1,000 a week. We have nowhere to park young people here on the Gold Coast. The best price I found on booking.com was \$620 for a week.

We would need to use emergency relief funds to pay for a young people to stay at a backpackers, provided they have ID. ID is a huge issue when young people are sleeping rough. You heard about passports last night. Some of these guys have been 18 for a long time and have never been to a nightclub before. They are so excited that they have their passport. Nate, here behind me, did a lot of work to get some of these guys their passports. Unfortunately, some of them are still banned from Surfers but hopefully they can go in sometime soon. Those are some of the AOD issues. For the New Zealand young people, there is the trans-Tasman agreement. We talked about it during the break. I am aware it is a federal issue.

CHAIR: For the benefit of Hansard, would you go over that so it is on the record? Then we will move to questions.

Mr Aufai: Because of the trans-Tasman agreement, many of our New Zealand young people are not eligible for social security. This means that they are not eligible for a social housing number, so they are not eligible for housing. We have a youth foyer where we can house up to 40 young people in self-contained units. They are not eligible for that. There is a large cohort of New Zealand young people who are here on the Gold Coast who cannot access transitional housing. They can probably access crisis accommodation but, even then, the barrier is that we need to go to the manager. We need to talk to the manager first or the team leader to see if it is in the budget to have a young person there. Also, some of these guys are on ice. They are not eligible for rehab because they need to be on an income to access rehab. These are some of the issues that have been ongoing for a long time now. HECS is another issue.

A lot of our young people are engaging in opportunistic prostitution, so they are sleeping with people just to have a roof over their head. There are some criminal activities that young people are getting into for survival. They will ask you what you want, they will steal it and then they will sell it to you for a third of the price so that they can buy food. A lot of these guys who are going through courts are getting charged for food stealing or things like that.

Because of what we saw on Street CRED, Maria, our CEO, was kind enough to say, 'Yes, let's have a go with a pilot property just for New Zealand young people.' It has been running for just short of three months. We have three young people in there—two are employed and one is attending a training activity. These guys were sleeping in a campsite for about three months. It is amazing to see, when you look at Maslow's hierarchy of needs, what providing a roof can do. It is self-funded by Gold Coast Youth Service; Anglicare and MI Best Life are also partners. We are still monitoring that opportunity. We need to evaluate where it is headed, but right now it is proving to be successful. Again, I would like to be able to fill it with some of these guys who are on ice but, again—we have already spoken about that issue—we have nowhere to place them.

CHAIR: Our committee could sit and listen to your experiences all day, so thank you. It is really great to hear the details of the work you do.

Mr BENNETT: I understand the decriminalisation, the history, the data and so on, but if we do not have the welfare and health response in place—you would have heard Dr Goldsworthy—who are we going to call? We cannot honestly think that health professionals are going to be the first port of call. If it is still criminalised, at least we can have an expectation that police can keep the community safe. What are your thoughts on that? I have wanted to make it a welfare and health response from day one. It should not be a police issue—I have been saying that for months now—but I think we have to do that first, before we start honestly having a conversation about decriminalisation. The terms of reference in the inquiry do not talk about alternatives or what the health response or co-responder model might look like.

Ms Driscoll: I think that is 100 per cent correct. Unless we have those systems in place and they are robust and available on place-based models, where we are going to use them, the reality is that any social issue will end up with the police or in a hospital because they are a 24-hour response. Surfers Paradise

I think the police are aware of that. Obviously they take advantage of their capacity to divert when they are able to do so. Until we have that response in place, we probably do need this lever or at least say, 'What other options are there?'—even if it is just a trial.

Mr BENNETT: In terms of the Chill Out Zone, we heard that there is capacity for only six. Are those the numbers you have?

Ms Driscoll: No, we take on any clients that come. On New Year's Eve we could do 40 clients.

Mr BENNETT: As long as they are not violent? Is that the only criteria?

Ms Driscoll: Yes, pretty much. Most people calm down when their options are to go with the police or to come with us but they have to calm down. I will say that I have had people choose the police over me, which is a little bit rude. They are intoxicated, though. So that is our only criteria for acceptance of people. We will do outcalls to get people from public spaces or venues. The majority of our clients self-present or their friends present them, which I think is a real testament. We are the only organisation that has that very big component of voluntary presentation.

Mr SKELTON: With regard to the model of integrated services, what role would you see the police playing if these offences were decriminalised?

Ms Driscoll: I think it is very difficult to get away from them being the first line of response, simply because that is what the community sees their role as being. I think there is merit in some of the co-responder models that we have, but the clue is in the name—a responder. What happens after that? We still need a mechanism for police, because they are going to be the primary responder. Unless we fund something that is 24 hours statewide that is an alternative to the police, they are still going to be the primary responder. It is just about what happens after that. We have heard this morning that police usually will try not to take people into custody. Nobody wants a vomiting person in a cell that they probably have to clean later. If other options are available, I am sure they would be taken. If there is another issue, many intoxicated people would end up and it would become a different public order offence.

Mrs Leebeek: I think there are a couple of things. The Summary Offences Act also allows for public nuisance. That provision could take on board some of the issues you are talking about.

Mr BENNETT: It is a higher level of offence, though.

Mrs Leebeek: It is a higher level of offence. How we engage with Street CRED is: even though the police do come on board with us, there is no policing as such in that space. If there is an issue then we do go to youth co-responders as a follow-up and they do that. This enables the police to engage with young people and with us in the Street CRED model where there is a better relationship built, too, between police and us.

The issue is that policing models can change; it is not just one model of service. What Street CRED has demonstrated is the capability of police to change service delivery. A very similar thing occurs in Brisbane with Micah Projects through the Street to Home project. There are other ways of engaging with police, and we do have good relationships with QPS here on the coast. The other thing is: what are the other ways we can work together? That is that integrated response.

I am also the chair of the Gold Coast Homelessness Network. We have commenced Gold Coast Zero. In that process, we work with the QPS with regard to vulnerable people. In terms of begging, do we want New Zealand young people to be criminalised because they do not have income support and they are doing it for survival? For us, it is around the trajectory of young people into the justice system for a very minor offence and due to the pure issue of poverty. We are in the midst of Anti-Poverty Week. It is not the way we think is positive going forward. A simple but expensive New Zealand house, for example, has just demonstrated our capability to do things for people. We are saying, 'You do not have to go begging or break the law. Can we support and come around you and provide you with something else?' On that issue, we do talk to QPS and QPS supports us in case there are issues with that property. We have a number of different ways in which we work with the Queensland Police Service very productively and very positively.

Dr ROBINSON: If you had a wish list of things you could do to expand your own activities or to add other dimensions—some dreams, some areas that you think we could really tackle—what would that be? Secondly, could you tell me more about what you have done on Stradbroke island and what you could do?

Ms Driscoll: I think with what is termed the pre-schoolies period in November, which is primarily, I believe, young people from private schools in the Brisbane area deciding to get in early to celebrate schoolies—I cannot remember the year, but for three years in a row we were asked to go there as support to North Stradbroke Island police and the additional policing resources they brought. Surfers Paradise

in. It was very similar—just to be a diversionary place to try to manage young people whilst they were intoxicated. Certainly in that particular cohort there was no need for further services. They were quite well taken care of, but it was more a lever for the police because they knew that this period was coming. I know that that response continues but, as I said, because we do use professional staff we can be quite an expensive model compared to other models that might offer those services voluntarily.

I think every late-night precinct should have a chill-out zone and every regional centre should have some sort of place of safety that includes an accommodation component, even if it was only a two-bed sobering-up shelter so that not just the immediate needs of safety around that intoxication are taken care of but also the following day there can be warm referrals to services. When I use the term 'warm referrals' I mean a handover: 'You have trusted me with this information. This is Maria and she is fantastic.' It is a referral that builds confidence in that person.

Will touched on, obviously, our incredible dearth of AOD services for young people right across the state but certainly on the coast. It is even the coordination of those and the capacity to engage with young people: you are going to need detox before you go into rehab but you have to wait X amount of time for detox. Anybody who works with people who use drugs knows that there is a window for change. They may indicate that they wish to change but if they have to wait three weeks to get into detox then that window is firmly closed. I know that immediate responses can be expensive, but I think in the long run they are nowhere near as expensive as the costs that the community bears for not having them.

Mr Aufai: From a youth homelessness perspective, stability comes to mind. It is about stable accommodation. We call them 'parking spots'. When I talk to our youth work team I will say to park them at this motel or park them at that motel. But we have nowhere to park young people and then move them through to anywhere else because we just cannot afford it anymore. Those motels are taken up by families in between rentals. That is the reality here on the Gold Coast. When we ring our contacts, they are full—they are constantly full—so we have nowhere to stabilise young people just so that we can transition them through. Even then, as I talked about before, the rental crisis here is just not moving anywhere. We had two young people who left—they moved from a youth accommodation program last quarter—and three from our youth foyer, so there is just not a lot of movement there. I guess it is a bigger issue.

Mrs Leebeek: I wanted to say some things around what we have talked about for a long time, which is some real intervention and support for families and young people. Again, we should fund an additional worker in that space to help families and young people. During COVID that was our biggest pinch point. Street CRED can do the coordination that Angela talked about as well but we are not funded for that. Just so you know, Street CRED gets \$120,000 a year so it is not a big investment at the moment. It punches above its weight. We would love to do some more of that coordination.

Certainly we talked about it at the regional youth and family committee that we have here on the Gold Coast and that are around the state. We talked about that coordination model. It is very similar to the model that YETI has in Cairns but obviously customised to the Gold Coast location as it is a place-based response. The other one we have talked about is housing, housing, housing. What we are seeing is people on the street. People are homeless. We really want to note the critical space we are in at the moment. Public drunkenness and homelessness are just going to go hand in hand, I am afraid. We need to do some early intervention to stop young people leaving home, and some housing and some coordination would be fantastic. They can be done immediately because we are already doing some of that anyway.

Mr MARTIN: Angela, my question is about public toilets. I think you have some expertise in the area with your experience, especially in the safe night precincts. The committee has heard from a number of people, in particular in the safe night precincts. We have heard from police that we need more toilets and the fact that there are not enough leads to public urination. However, we have also heard that public toilets do attract antisocial behaviour. I was wondering if you had a view on that. Is there a way to keep both sides happy? Is there anything you can enlighten the committee on?

Ms Driscoll: One of my favourite topics! We know from research that in late-night precincts any pinch point where there is a gathering—whether it is a transport node, public toilets or multiple venue entrances in the one place—is most likely to attract antisocial behaviour. On the design of the pop-up toilet, I think the city did have a really good look around the world at what there was. There is only one cubicle, which is lit—it is 'female' and it can be opened from the outside, even if it is locked; we needed that capacity—and the urinals are placed around the outside. There is a bit too much visibility sometimes, but there is certainly no capacity for antisocial behaviour because it is very visible. At the time it was put in it was sitting directly outside the entrance to a very busy nightclub, much to the owner's horror.

The toilets on Cavill were only two cubicles but they were automated: you pressed them and they played music at you, you pressed them to let you out again and they were quite confusing to drunk people. Certainly where they were positioned does tend to be right at that corner where we do have a lot of homeless or marginalised people who like to sit in that space. The city did put a provision into development applications that any developer must include the provision of public toilets, but that then gets hazy over the years and those toilets end up getting locked.

When it comes to late-night precincts, we have this belief that people are just going to behave like that anyway so let's not clean the toilets, let's not put in an appropriate number of bins, let's just hose it out when they are all gone. I 100 per cent understand why, because it would be quite intensive. I think the way that we treat a particular area is a huge lever on deciding how people then behave in that area.

The pop-up toilet itself, apart from the fact that it does not pop up, was a very good design. I believe it is an issue with the hydraulics underneath; it was not about exposure. I do think with access to public toilets that the majority of people will use them. I have seen people urinate on the outside of a portaloo so some people do not care that toilets are available to them. However, I think the vast majority do care so the more we can have the better. There is a Surfers Paradise master plan in train at the moment that will look at the redevelopment of areas that have not been developed. The Esplanade is beautiful with some very nice public toilets, but if you are drunk in Orchid Avenue it is a very long walk down to the beachfront if you need to urinate.

Mr BENNETT: Angela, we heard today about nightclubs having some responsibility for turning out patrons and not letting them back in. I guess it always comes back to governments somehow to fund everything.

Ms Driscoll: That is a really difficult one and we have the same argument around aggressive behaviour. The venues are not allowed to have someone unduly intoxicated on their premises. When they want to come back in and use the toilet, the venue would be breaching the law by allowing that person back in. The same goes when there is a fight inside. By law, the venue must eject both those parties so we end up with two people who are angry at each other outside. It is no longer the venue's problem and they followed the law, but it just creates an unintended consequence.

I think with publicly accessible toilets and whether or not that is something that could be built into the built environment when we look at redevelopments, because things are constantly being redeveloped, that might sit near a venue so that security did at least have observation of that. With the demise of the pop-up toilet—I think it was the Forum building—as part of their development application they had to have—

Mr BENNETT: Where is that, Angela?

Ms Driscoll: Just on Orchid Avenue. It is directly across from the police station and a popular spot.

CHAIR: Is that the one that does not work?

Ms Driscoll: No, you would not have seen the one that does not work because it is under the ground. The Forum has a Rubik's cube type public sculpture in a courtyard and then, to the left of that as you go in, there are what are meant to be publicly accessible toilets. By about 10 o'clock at night, depending on who has accessed those toilets, nobody wants to go in there. It is the same with public toilets that are not cleaned regularly. Some people actually see it as preferable to urinate somewhere else rather than walk through what might be on the floor. I think the vast majority of people would try to do the right thing. Probably the question that we get asked the most is, 'Where are the nearest toilets?'—as we are handing out water, which is probably not part of the solution.

Mr BENNETT: Will and Nate, we spoke before with the CEO about the police presence with Street CRED. We have also heard about the engagement and trust, which you guys explained really well. How has that worked over a period? We were talking about the police presence when we walked up to that vacant Ray White place in Labrador. If you wanted to engage with those young people then how would they react to the police officers? Do you know what I am saying? Obviously you do not want to go in there and be unsafe. Could you flesh that out for me? I wondered if they would bolt or if they would feel intimidated by the two police officers.

Mr Aufai: Once young people get to know us they will not bolt. They will bolt initially, but, because they all know us or they know the uniform or we might know one out of the five, they will say, 'Oh yeah, these guys are okay.' Our young people generally know that the officers who are with us are not enforcement; they are not there to enforce. They go up and they ask about their fines or if they have any warrants. Part of our role with Street CRED is to encourage young people to hand themselves in: 'Let's get your legal matter sorted.'

Mr BENNETT: Thank you. That makes a lot of sense.

Mr Aufai: On a good day, young people go up to officers and get themselves checked.

Mr BENNETT: And it is the perfect environment, isn't it?

Mr Aufai: They play table tennis together. They play cards together. That is a good day with the officers. It depends on the officer as well.

Mr BENNETT: Last night I was looking at it from the outside and thinking about how it works in reality. Obviously with the relationships that you have built up, the trust is there.

Mr MARTIN: In relation to the young people you help, have you had any experience with them being charged with public drunkenness or public urination that has then gone on their record and become a problem for them into the future?

Ms Driscoll: Our contact with them would probably be in the moment rather than finding out afterwards. Certainly banning orders are a very effective lever for young people. I do not know that public urination would stay on your record. I am not 100 per cent sure. How embarrassing if it did.

Mr BENNETT: The police said this morning that it does not stay on their record.

Mr SKELTON: And the same with intoxication.

Ms Driscoll: Even though you can be taken into custody for them, my understanding is that they do not form part of your criminal record. In the hours that we are operational, the police would, hands down, bring people to us rather than have to deal with them. From listening to Will speak about the policing response with Street CRED, we have been very fortunate on the coast over many years that work has been put in to proving to the police when they are reluctant. We have wonderful officers on the coast who absolutely understand that there are ways to do things in a cooperative fashion that actually have much better outcomes for everybody involved. I think schoolies is an example of that. With Street CRED and the Chill Out Zone, our police are open to that. The wonderful thing is that there is enough movement that they then will go to other regions and say, 'We've tried this.'

I think because it does not stain their record—I have reported people to the police for public urination. That is how much I hate it, particularly when to them that is not seen as a big deal. I think for most young people any interaction with the police is a real wake-up call. For the cohort of young people who do have a lot of interaction, such as Will and his team deal with, that positive interaction is wonderful. Certainly in the late-night precincts, knowing that you can be banned for a period from ever coming to a nightclub in this precinct is a really effective tool.

Mr MARTIN: So the key thing is that they lead to a banning order?

Ms Driscoll: Yes. That is usually around violence or aggression or just mouthing off and not being cooperative. There would be officers who would happily hand out an infringement for urination, depending on many things, such as the attitude that they were given when they encountered that young person. Banning orders are usually around violence or threats to the police or just not being respectful of the police. One banning order probably affects about 300 young people who think, 'Oh, that could happen to me. I'm not going to do that.' It is very effective.

CHAIR: There being no further questions, we thank you immensely for the time that you have given today. We hate dragging you away from the young people who need you but we really appreciate your time and certainly sharing your knowledge and experiences with us today. On behalf of the committee, I also thank you for the great work that you do for our young people on the coast. They do need you and they need us as adults. You certainly do a great job. Thanks for the care that you provide. Well done to you all. Congratulations on a great job.

Ms Driscoll: Thank you, Ms McMillan. May I also extend an invitation to any member of the committee who would like to come and visit the Chill Out Zone. We have slightly more antisocial hours than Street CRED. We start at 10.30 pm. You would be absolutely welcomed.

CHAIR: The committee will take a short break and we will return at 1.15 pm.

Proceedings suspended from 12.30 pm to 1.15 pm.

BARNS, Mr Greg SC, National Criminal Justice Spokesman, Australian Lawyers Alliance (via teleconference)

CHAIR: Welcome and thank you very much for giving up your time today. We really do appreciate you appearing before our committee. We will hand over to you to talk for a little while and then our committee will have a number of questions.

Mr Barns: Thanks for the opportunity to appear before the committee. As you know, the ALA is a group of lawyers from around Australia. We have a number of members in Queensland who work in the public law space, the criminal law space and the personal injury space. We have written a submission that we put to the inquiry that is fairly comprehensive but I will make a brief opening statement so that we can go to questions.

In essence, we say that there ought to be not only the decriminalisation of what we would call some street offences, particularly public drunkenness, begging et cetera, but also going further and really moving to a health and welfare response. We have set that out at paragraph 29 on page 15 of our submission. In essence, it is moving away from the use of the criminal law in a context where laws are clearly not working, they do not act as a deterrent and they tend to be utilised in a way where you see particularly Indigenous people going in to custody. Of course, that has been problematic with some shocking deaths in custody over many years. We note that removing this offence from the statute books was recommended as far back as 1991 in the Royal Commission into Aboriginal Deaths in Custody. In essence, we say that police cells are not safe or appropriate. That is not a criticism of the police. They are just not made for people who are often living on the streets, might have comorbidities and a plethora of issues in their lives including drug use as well as drunkenness, homelessness et cetera.

What we need to move to is what we would call safe places—in other words, places where people can go and get wraparound services and support, particularly at that acute stage when they are at risk. There is no doubt that, of course, people can be at risk if they are intoxicated in the street. They can be the victims themselves of attacks but also can act in ways that might land themselves in more legal trouble. The essence of what we recommend is pretty consistent with what I think was said in the Victorian inquiry or reference group that looked at this issue in 2020—that is to say, let us get these matters off the statute books, in the sense of them being criminal offences, and then let us deal with them for what they are, which is a public health issue. Let us take a public health approach to public intoxication.

I do a lot of work and live in Tasmania and this has been an issue in Tasmania. I think I am right in saying that the Tasmanian parliament has now passed a law that effectively decriminalises but I think has left in place the capacity for police to use their move-on powers in relation to individuals. We would say that we ought to be going further in that we ought to be moving to a system where, if someone is clearly intoxicated on the street and is a risk to themselves and potentially a risk to others, there is a public health oriented response.

It is not in our submission but I read recently that I think in the United States some police services and forces now are taking social workers and other support workers with them when they do street patrols with a view to, if a person is in a position where they are intoxicated, instead of just putting them in the van and taking them to the station, utilising those services to say, 'Where's a safe place we can take this person and deal with that underlying cause in the longer term?' That is what we think is important.

We are particularly concerned—and it will be of no surprise to any members of this committee—about the way in which this offence has been used against ATSILS people over many years and, of course, has been highly problematic in that sense, as I said earlier. In essence, our public health model approach is set out on pages 15 and 16. That is the approach we would support Queensland taking if this committee were to decide to recommend at least decriminalisation, but we would say effectively removing these offences from the statute books.

Mr BENNETT: Mr Barns, I start by congratulating the ALA on their submission. Not only have you provided solutions, you have nailed, I think, what most of us are thinking about these issues. I have a number of observations. Consistently, people seem to be either for or against this particular proposal. From what we are hearing, councils and police are saying, 'Please don't,' and most of the others are saying, 'It must go'. When we talk about a health response, should we be doing more? You are right: since 1991 we have known these issues have been across the nation. It is going to

take us a while to get to a point where we can have a welfare or health response that will be satisfactory to individual safety and community safety before we remove these offences. Would you like to comment on that?

Mr Barns: I think that is a very good point that you make. Before I came on, I was reading about Oregon in a different context. They have decriminalised small amounts of drugs. One of the issues that they had was that they did not spend the money, at the time when that came in, on setting up the health facilities that were required. That is the problem. If you do not do it hand in hand, you end up with people not in police cells because you have decriminalised it but essentially remaining on the street because there is nothing else there.

We would completely agree with you. If you are going to do this, the recommendation has to be that government immediately gear up to ensure there are staff and facilities in place. It needs to involve local government because, as we know, particularly in the context of Queensland—in fact, I was up at Mission Beach earlier in the year on holidays. It is a beautiful place, by the way. I read in the *Cairns Post* that there was concern by the council there about removing this offence. You have to involve local councils in this as being part of the solution so that they feel as though they can move in the same direction as government and provide support to people, but that does require funding. Simply decriminalising will not resolve the issue. What will resolve the issue is a holistic approach that does involve a re-engineering of the way that government looks at this issue.

Mr BENNETT: Could you help me and maybe the committee understand: throughout your submission and across this whole inquiry, the over-representation of First Nations people continually gets raised, and I get all that. When we travel to the more remote communities, the prevalence of these sorts of behaviours predominantly does involve First Nations people. I guess that is a migration issue, it is a cultural issue and there can be a whole heap of issues. Can you help me understand why we think that is the case? It is a small population but over-represented. What has your experience been with that particular phenomenon?

Mr Barns: As Queensland members of parliament, you will have a much better understanding than I will of the issues in relation to First Nations people in Queensland and over-representation in the criminal justice system. It is really part and parcel of that. With public drunkenness, in my experience as a lawyer over years and that of a lot of our members, it is people who are homeless, people who have mental health problems, people who have drug addiction issues. Of course, we see an over-representation of those issues in Indigenous communities. That is a really long discussion that we could all have about that. We have put some data in there—we do not have the Queensland data—of the number of people involved in youth offending in Australia and the clear over-representation of Indigenous Australians. To go back to your previous question and issue, if you are going to move to a decriminalisation approach then it is critical, of course, to have the resources and support and critical to have the buy-in of Indigenous communities; otherwise, as you say, all you will get is the same number of Indigenous people on the streets.

CHAIR: I note the deputy chair's question around First Nations people and their representation in the data. It was a recommendation of the national royal commission into the incarceration of First Nations people that begging, intoxication and urination be decriminalised. I am interested in the other jurisdictions, and we are the last jurisdiction to decriminalise these offences. Did the other jurisdictions see a drastic decrease in their incarceration rates?

Mr Barns: That is a very good question and I do not know the answer. I do not know if there is an answer. I think that depends on looking at data—let me go back a step. One of the difficulties with getting data on that is: if you have decriminalised, you are no longer getting people coming through the police system, so you are not gathering those stats. I do not know the answer to that. One thing we do know is that the current law is not a deterrent. We have criminal laws and summary offences because we want to deter people from acting in a particular way and keep the community safe. It is not deterring.

One of the issues we see—and this is moving on from your question but I am trying to give you some flavour of it—is that someone might be arrested for public drunkenness and they might then be released. They then go back on to the street, so they are still in a very difficult position. Although there is no link, they may get involved in other criminal offending, particularly low-level offending. That is because the current system simply has them bouncing in and out of police cells without any resolution of the underlying issues. If you are resolving the underlying issues and moving away from the criminal justice system then you will see a decrease. You are also probably going to see a greater opportunity to provide broader services to First Nations people in particular circumstances, which may mean they are less at risk of committing offences or being on the street. I do not have data on it, but that would be a logical progression.

Mr BENNETT: I am curious about your thoughts on the protective custody provision that may be required if we decriminalise those three particular offences. You have put some work into addressing that in your submission. I welcome your thoughts on that prospect of protective custody because I think your concern is that it could be overused. Would that be a correct assumption?

Mr Barns: You were breaking up a little bit. I understand your concern is about—

Mr BENNETT:—protective custody provisions.

Mr Barns: That is right; that is our concern. The problem with protective custody is that, whilst it is well intentioned, using the term 'custody' is still problematic. This is not being soft or hard on crime; this is trying to be smart about it and say, 'What is the best model that is going to reduce the risk to the person and risk to the community and what is the best solution that is going to see a person not just coming in and out?' One of our concerns about protective custody is that it is really still along the lines of detaining a person—the use of the term 'custody'—but what else is being done? That is our concern.

If it was a situation where a person was clearly intoxicated, in a very bad way, and they were then taken into some form of safe space and they consented to stay there, that is well and good. However, I think the use of 'custody' and what that connotes is still problematic because you are not really moving us out of the criminal justice space, even if you are using the term 'protective'.

Mr SKELTON: Thank you for your submission. It is very comprehensive. Obviously we refer to these public order offences collectively, but you do not specifically recommend decriminalisation of the offence of urinating in public. It has been a topic of some interest for some of the other submitters. What are your thoughts there?

Mr Barns: We would agree. It is interesting because I asked the question. A police officer in Victoria said to me a number of years ago, 'If you're homeless and you want to go and take a morning ablution, you're committing an offence if you're living on the street.' It was a very good point that he made. Again, no-one wants to see that and no-one thinks it is appropriate, in the same way that public drunkenness is not appropriate, but what is the best way to deal with it?

Normally, if a person is urinating in public, either they are extremely drunk or, alternatively, there is a correlation between people being homeless and simply having no toilet to go to. In some instances there are public toilets. It is usually looking at a bigger problem. We are all used to, for example, on a Friday night if young people are out they may end up urinating behind a bush. That is one issue, but when you link it in with people who are living on the streets, it is just another hurdle they have to deal with. If you are living on the streets you have a potential offence of begging, a potential offence of public drunkenness and a potential offence of urinating in public. You have to ask, 'Why do we have these offences? What is the impact of them?' The impact really is zero in terms of a reduction of that offending. What is it pointing to if they are doing that and are doing it regularly and they are getting charged with that regularly? Again, we would say that these really do not have a place in the criminal justice system.

Mr MARTIN: On behalf of the Lawyers Alliance, what would be your response to the rationale that has been raised in the committee's public briefing that if police officers do not exercise their discretion to charge a person with public intoxication that person may then may go on to commit a more serious offence such as an assault? Is that something you have experience with or could comment on?

Mr Barns: I do not think that is right. Let me go back a step. A number of police officers have said to me, both in Tasmania and elsewhere, that they wish they did not have to deal with these matters because they just do not think they have the skills. Often people have a mental illness—not always, but often there is a mental illness associated with it. Secondly, that is a gateway argument and I do not think there is any evidence of it. It may be, of course—and I think I said this right at the start—that one of the risk factors is that if a person is constantly intoxicated, for example, or regularly intoxicated and they get into an altercation they end up assaulting someone. That does happen and, as we know, sometimes there is a link, tragically, between alcohol and assaults. I do not think there is any evidence which says there is a link between public drunkenness, offences and then going on to commit more serious offences. I think it is case by case.

In any event, even if you decriminalised them and you then had spaces for people to go to—so you are not just saying, 'Leave them on the street'; you are saying, 'There is an issue here. We need to get you somewhere safe and then work with you'—that is a way of reducing criminal activity, rather than simply arresting them, putting them in the cells at the station, and then they are back on the street, drunk again and then they do something. You are not addressing the root cause in that case.

Mr BENNETT: Have you seen or come across culturally appropriate public health models in other jurisdictions?

Mr Barns: I have. There is some good work going on in other parts of Australia. Whilst there might be a pretty poor story at a macro level, there are certainly some good stories. One of them is in Bourke in New South Wales, the Justice Reinvestment project. I think that has also been established in Moree. Without going into it at length, it is essentially a First Nations community working alongside police and authorities to reduce particularly what is called street offending. It involves Aboriginal elders in dealing particularly with young people, and that includes where there are intoxication issues. That is a place where it is working.

I think you can find that Justice Reinvestment approach in other parts of Australia, but I am certainly aware of Bourke, which has been very successful. It has been funded by successive governments and it was subject to a review a couple of years ago by KPMG which recommended that the government in New South Wales continue to fund it. As I say, I think a similar project has been set up in Moree. It might be worth having a look at those. They are not specifically about street offences, but they have led to a large reduction in offending in First Nations communities. They operate very much at the street level as well as that higher level.

Mr BENNETT: Going forward, that is going to be the issue for us across the nation: finding what programs work.

Mr Barns: Absolutely. I think there are some models overseas, too. I have not had a look at Bourke and Moree for a while, but a colleague of mine was up there recently and was talking about how well they are going. It is probably worth having a look at them.

Mr BENNETT: On a side note, particularly in Western Queensland a lot of the concern from stakeholders was about the effectiveness of federal, local and state government agencies in funding and providing these models that have been going, as you know, since the royal commission into deaths in custody.

Mr Barns: You are absolutely right. Bourke, for example, in New South Wales has a big First Nations population and had some of the worst crime rates in New South Wales including homelessness et cetera. That has been turned around not so much because of government—and that was a place that had a lot of government money spent on it. It is only when they re-engineered it and got heavy involvement from the First Nations community, particularly elders, that it started to turn around. You are absolutely right: it is not just about money; it is about how you do it. Sometimes you can do things with less money but more effectively.

CHAIR: Were there any other questions of Mr Barns?

Mr BENNETT: No, but it was an excellent report.

CHAIR: It was a really great report, Mr Barns. We really do appreciate it. Certainly your understanding of the issues and your analysis of the impact of decriminalisation is very good. There being no other questions, we will not hold you up, Mr Barns. We thank you sincerely for your contribution. Have a really good weekend. Thanks again. You have been a great help.

Mr Barns: Can I say, Madam Chair, we appreciate greatly the Queensland parliament looking at this. If we can help in any way going forward, we would be more than happy to.

CHAIR: Lovely. Thanks, Mr Barns. Have a good weekend. There being no further witnesses today, I thank everyone on our committee for their great work. I also thank our committee secretariat, Lynda and Roylene, for following us all around the state, for organising the whole inquiry and for their great work trying to gather all of the data and the important information that witnesses have contributed. Thank you, Lynda and Roylene. Thank you to Hansard for your great work. We acknowledge the lovely Stella from JP's office. It has been great to have you here, Stella. I thank all of the witnesses who presented today. Thank you, everyone. I declare the public hearing closed.

The committee adjourned at 1.44 pm.