

TRANSCRIPT

LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into Victoria's Criminal Justice System

Wangaratta—Wednesday, 30 June 2021

MEMBERS

Ms Fiona Patten—Chair

Dr Tien Kieu—Deputy Chair

Ms Jane Garrett

Ms Wendy Lovell

Ms Tania Maxwell

Mr Craig Ondarchie

Ms Kaushaliya Vaghela

PARTICIPATING MEMBERS

Dr Matthew Bach

Ms Melina Bath

Mr Rodney Barton

Ms Georgie Crozier

Dr Catherine Cumming

Mr Enver Erdogan

Mr Stuart Grimley

Mr David Limbrick

Mr Edward O'Donohue

Mr Tim Quilty

Dr Samantha Ratnam

Ms Harriet Shing

Mr Lee Tarlamis

Ms Sheena Watt

WITNESSES

Ms Felicity Williams, Chief Executive Officer, and

Ms Kerri Barnes, Program Manager, Finding Strengths, The Centre for Continuing Education.

The CHAIR: I will declare open the Legislative Council Legal and Social Issues Committee's public hearing for the Inquiry into Victoria's Criminal Justice System, and we are very pleased to be welcoming the Centre for Continuing Education: Felicity Williams, the CEO; and Kerri Barnes, the Program Manager for Finding Strengths.

With us today, and I know you are very familiar with a number of us, we have Kaushaliya Vaghela, Deputy Chair Tien Kieu, Tania Maxwell and Sheena Watt.

I know that you have been taken through this before, but just to let you know that all evidence taken today is protected by parliamentary privilege under our *Constitution Act* but also under the standing orders of the Legislative Council. Therefore the information you provide today is protected by law. You are protected against any action for what you say during the hearing, but of course if you were to repeat the same statements outside this place, we cannot assure you of the same protection.

Any deliberately false evidence or misleading of the committee may be considered a contempt of Parliament. As you can see, we have the Hansard team here recording every word that you say. You will receive a proof of that transcript, and I encourage you to have a look at it. Ultimately the transcripts will form part of our report, and the information you provide, I know, will inform our inquiry and our recommendations.

If you would like to make some opening remarks, and then we will open it up for committee discussion. Thank you.

Ms WILLIAMS: Thank you so much, Chair, and thank you, panel, and thank you for inviting us to this inquiry. We are really pleased to be here.

I was driving behind a truck this morning and it was a Mainfreight truck, and it had a little quote above its logo, which was very surprising on a truck, but anyway it was, 'Education is the enemy of poverty'. I thought, 'I need to speak to that CEO'.

The CHAIR: Go, Mainfreight!

Ms WILLIAMS: Go, Mainfreight! We are very proud of our program Finding Strengths, which is a program that works with people who have interacted or are interacting with the justice system through research that indicates that—and this is probably conservative—well over 50 per cent of offenders have a learning difficulty which is associated with neurodiversity, so things like ADHD and dyslexia, and usually more than one condition. And then you throw trauma and the impacts of childhood trauma on brain development and ABIs and mental health and substance abuse into that and you have a perfect storm.

We have been running Finding Strengths now since 2019. We have just managed to get JVES's funding to continue that program, which we are absolutely thrilled about. It is proving to be highly effective through a deep case management approach, clinical assessments and really deep collaboration with the department of justice and in particular community corrections services. We have actually had 125 participants—because of COVID we really ramped up in November—and 30 per cent of them are now employed.

Dr KIEU: Wow!

The CHAIR: Wow!

Ms WILLIAMS: Yes. We are very proud of that. And 27 per cent of them have been involved in formal education. I have provided you with an information pack because I also completed an international fellowship in 2020 and spent some time in the UK exploring best practice there.

A couple of the really key things that I was extremely impressed with were putting special education needs at the heart of every organisation, including education in prisons and corrections agencies, and a consistent assessment model that follows a person through their journey through the system, including with other

agencies. And something that I was really impressed with were programs aimed at valuing the impact of prison officers on educational outcomes in prisons. Prison officers can have huge influence over the prisoners in encouraging them to take up education, and that includes training to help them understand special education needs. Things like 5-minute interactions can be hugely influential. And part of that training that they provide also recognises that prison officers themselves may have low educational attainment, so actually investing in their education and their literacy and numeracy levels has been something that has proven to be highly effective.

A report that is well worth reading is by Dame Sally Coates, which was quite instrumental in changing the approach of the prison system and the justice system in the UK. It is called *Unlocking Potential*. I have put some information in with the report about that. She was quite instrumental in the prison system changing and actually making governors accountable for educational outcomes and employment outcomes through the gate. The other influential project was called *No One Knows*, which was led by Jenny Talbot from the Prison Reform Trust. And that blew the roof open in terms of really understanding the extent of learning difficulties that inmates had and that were unmanaged and unsupported and might be put down to behaviour when there is really something that is sitting behind it that really needs to be addressed.

The CHAIR: Fantastic. Thank you, Felicity. I look forward to reading those. It is kind of a no-brainer, isn't it? If you said that employment was the enemy of recidivism, you would probably be right in finding those pathways to employment. Can I just ask, and it may well be in this document, but have these programs as they have been rolled out been evaluated against recidivism rates, and is there any evidence there?

Ms WILLIAMS: It is a bit early yet. I asked Kerri that question, and it is a little bit early because we were impacted by COVID. We really ramped it up in probably October or November last year, unfortunately, but managed to get some really great outcomes. But that is something that we are intending to measure, the impact on recidivism at a regional level. I would have to say that we would have to be impacting on recidivism because we know that we have turned lives around. Do you want to talk about the Aboriginal young man that you were telling me about on the way here?

Ms BARNES: Yes, there was a young man, and this information only came back yesterday. We developed a program over corona called 'I Am', and he sat his second session of that yesterday. After his first session he raced home with his book and took it to his partner and said, 'Let's implement some of this stuff into our relationship'. Yesterday he came, and he has invited other offenders to come and join in. So what we are finding is what we do with them—I guess giving them a laptop for loan to do the course, maybe sometimes that is the first time they have seen a laptop or had IT or access to resources, so if they are sitting at home in front of their laptop, they are certainly not out offending. So definitely some of the time that they are spending—and what they are saying to us is the more that we can give them to do that keeps them entertained, networking, feeling valued, all of those things—it would definitely have to be impacting that. And I guess this young man, it surprised me. I know him from many years of being in the welfare industry and I have worked with him on different platforms before, so hearing about his journey and knowing some of the background and barriers that he has to be a higher functioning member of society, to hear that is going to be—like, if we can get him turning around a corner, that is going to be a game changer. That will be a very big victory.

The CHAIR: Thinking just, Felicity, back to your study that you did overseas and looking at the work of Talbot—I have forgotten her first name—

Ms WILLIAMS: Jenny.

The CHAIR: Jenny Talbot and Dame Coates, was there any evaluation of that? I mean, have they implemented much of the work over there as well?

Ms WILLIAMS: Jenny Talbot has written quite a few reports and projects that have proven to be watersheds, and the *No One Knows* project, which was done in the early 2000s, is still valued. That has been instrumental particularly in training that has been provided to prison officers around special education needs, but also information and resources that are available for magistrates in the court system. She has written a really great resource specifically for the court system to understand all the different conditions, how they might manifest and how they might present, because often they are hidden. They are hidden disabilities and hidden difficulties. So there are some really great resources that the Prison Reform Trust has produced for the entire system.

Look, I would probably have to double-check on the evaluation, but from my conversation with her she believes that things have changed. There are still things that they are working on; for example, the wish to have a consistent clinical assessment model that is the same throughout the system, that travels with the person throughout the system is a dream, and it is a vision that they are trying to achieve. They have not quite got there yet. But I think the impact of opening the box around special education needs throughout the system is starting to take hold.

Dr KIEU: Thank you, Chair. Thank you for appearing here today and thank you for your very good and necessary work for the community. And congratulations on being able to have 30 per cent employed in recent times. That is a very good record. I am glad to find out about the education. Number one, what kind of education, what types, are you providing for the prisoners or for the people who exit prison? And secondly, how much do you think that because of the education they receive they are now able to be employed and how much is due to the shift in the community and employers to employ them. Also, maybe, do we need to educate the public and the employers more about people who have criminal records but now have some certain skills and are employable?

Ms WILLIAMS: Yes. So we have a model. We have what we call industry liaison officers associated with this program, and their job is to broker those conversations with employers, so to provide a warm introduction. 'We've got this person, this is what's been happening in their life. They want to turn their life around. They've got these learning difficulties that we're now managing. This is how you could make a reasonable adjustment in the workplace in order to make the employment relationship successful and sustainable'. And we are certainly working with employers who are prepared to overlook criminal records, and they are prepared to embrace people who really do want to turn their lives around.

We need to have some confidence, and Kerri might want to say a bit more about this. But I think our philosophy is that we need to have some confidence that the person does want to turn their life around and does want to take advantage of the opportunity. And often they will use language like, 'This is a really great opportunity. It might be my last chance, and I need to make this work'. That is something that you hear quite a lot, isn't it?

Ms BARNES: Yes, it is. Employers that do agree to take, or work with, these people generally understand. And we have the conversations around the barriers that they have. You know, they understand that they may not be, let us say, employment fit. There might be a period of time where they need to only work reduced hours. So we are sort of talking about is a casual pool, and looking at individual needs and being quite flexible on how that looks in a very supported way.

The bit that we need understand, before the employment and before the education, is those psychosocial barriers. So if somebody has come through a system where they have potentially not been able to be nurtured, I guess, and are functioning quite low, those psychosocial barriers are the first thing that you will need to overcome to be able to create confidence enough for them to get through, so the I Am course is their entry point which looks at addressing some of those. Then from there we look at, okay, at the end of I Am we hope that we have built some self-worth, some confidence in them and looked at what their pathway might be so that then we can support them and hold their hand through a journey of further education.

So it is baby, baby steps, and one step at a time. And it does take a long time, because before that you have to build a lot of trust. So even though we are talking about people who have, you know, committed offences, they are probably one of the most vulnerable cohorts in our society. And to be able to work with them you have to get down at their level with them and walk along beside them to empower them to make those changes as they go along. So what we are looking at within our organisation is understanding those needs and looking at some of the things that we can develop and create that do not require some of the more compliance things that—

Ms WILLIAMS: Accredited.

Ms BARNES: accredited courses might have. Because some of them do not even have satisfactory ID. Some of them have not got the ability to even—like, they have just got their name, you know, there is not much going on around them. So to be able to get them through we have to look at even that pre-accredited course stuff, which is the ACFE-funded courses, and we will channel them through those and then take them on that journey and then link them into the employers when they are employment ready, so to speak, and with having those conversations with the employer so that there is a fair understanding.

With the clinical assessment, that information can be given too—the information that the speech pathologist or psych might have. They will create a report on how best to work with this person, so if you are an employer or a trainer or someone, ‘These are the things that they might struggle with; here are the strategies you might need to implement to set up a successful platform for this person to walk down’. And then the case managers are able to implement some of those strategies, I guess, or interventions to support that person.

Dr KIEU: I have some important questions, but I guess I have to wait.

The CHAIR: If you would not mind. Hopefully, I will come back to you. Tania.

Ms MAXWELL: Thank you, Chair. I am just wondering, in regard to the program, what is the referral pathway? My understanding from the reading I have done is that you will have people from 16 years of age, some may not have been engaged in education, some may be coming out—released from prison. We have heard previously about communication first and foremost being a strength in regard to supporting people. How do you take on those referrals? Do you actively look for them? Are they provided to you? And do they all need a referral?

Ms WILLIAMS: With Finding Strengths to date it has been referrals from community corrections primarily. We have just got building safer communities funding for a youth Finding Strengths program, and that will rely also on referrals from youth justice, but we are also going to be working with children in out-of-home care, particularly clients of NESAY, Upper Murray Family Care, Berry Street. But also, with the youth program I think we will definitely be widening the net—having a no wrong door approach basically. If there is an agency who is working with the young person who is at risk—because that is the other cohort that we can work with; it is youth at risk of offending—they can come in through any agency, any door, and we have really wide-ranging relationships, two-way referral relationships with agencies, and that is a critical success factor.

Ms MAXWELL: So this funding that is mentioned in here, does that cover the out-of-home care and the youth cohort?

Ms WILLIAMS: I am not sure what that is. What article was that?

Ms MAXWELL: This is from the *Chronicle*.

Ms WILLIAMS: Oh, about the building safer communities?

Ms MAXWELL: Yes.

Ms WILLIAMS: Yes. That is aimed at youth offenders and youth at risk of offending.

Ms MAXWELL: This talks about the out-of-home care. I sort of wondered how that would all fit together in those processes. If there is no wrong door, they can just come in.

Ms WILLIAMS: Exactly. Thankfully they were pretty open with the youth at risk of offending, so we will definitely be working with the Aboriginal community very strongly and the out-of-home care providers but also community health, housing, all of those, and mental health. Headspace will be a really important partner, and we have a really good working relationship with Headspace.

Ms BARNES: So, sorry, what it will require is, like Felicity said, we have a partnership with the department of justice, and that is where they would just email referrals because we were working very tightly in partnership. This will be networking, so going on more rounds of roadshows to the agencies and letting them know that this is the program, this is the process, this is what is on offer and here is how we can collaborate and making sure that that communication and those partnerships are built through a collaborative practice model that we have. So we have been developing those along the way as well to make sure that those communication lines are all very open and that there are pathways for different agencies, at different levels and for different functioning participants.

Ms MAXWELL: So, Kerri, I am just wondering whether it would be useful for us as a committee to have—obviously that funding would have required a submission on your behalf for it, so you would have had data and information that would have exposed the need for that. I am wondering whether, even if you have to redact certain parts of it, we could access—

Ms WILLIAMS: Yes, happy to provide you with some data. Children in out-of-home care also have a higher proportion of learning difficulties than the general population as well, so we saw that as a significant cohort to be supported.

Ms MAXWELL: Great.

Ms WATT: Thank you. Kerri and Felicity, lovely to see you again. I just had a question about what sort of characteristics you commonly see in the offenders that take part in your program. You spoke a little bit earlier about acquired brain injuries and other learning difficulties. Are there any other characteristics beyond that that you commonly see in the participants in your program?

Ms BARNES: Yes. Psychosocial barriers are a big one, as I mentioned before: so the shame, the guilt, rejection, abandonment, trauma—those kinds of things that a person might carry with that kind of lifestyle. Then along with all of that we might see extended periods of absence in school from a traumatic home environment when they were younger. Behavioural issues at school—you know, often there was a whole generation popped in the corner as the ‘Naughty boy, sit in the corner’, but actually it was an underlying learning difficulty that caused a behavioural issue that was never addressed. So we have got people falling through the gaps there and a whole range of adults who have learning problems that were undiagnosed because of that. And then of course that leads to the expulsion and the suspension and that low self-esteem and everything else that comes with being shoved aside because they were acting up in class. So it just compounds the way they are feeling, and of course they then start acting that out and go on a bit of a pathway. So they are lower functioning. They come from a lower sociodemographic, generally speaking, with not much support in place. We know that they often talk about not feeling valued, not feeling like they are connected or belong. They lack social support and good prosocial connections in the community, so trying to build all of that and address all of that within them then will give them hopefully confidence enough to start making some steps towards a different lifestyle.

Ms WILLIAMS: One of the interesting stats that we had is that 57 per cent of those who have been in this program actually were medicated in childhood for ADHD, which fascinated me. It was the first time I had seen this figure. I actually did have some discussions regarding ADHD and research of best practice in the UK, and one of the things that a professor from King’s College said was that certainly the drug therapy definitely should be part of the treatment, but it should not be the whole treatment. There is a whole lot of stuff that needs to happen around that, including family environment and all the pro-psychosocial stuff: you know, the security and cognitive behavioural therapy and all of that sort of thing. So what that says to me is that, yes, they were given some medication, but there was nothing else. There were no other supports there to help them make the right choices, and they ended up down a very different path, or an unfortunate path, yes.

The CHAIR: Kaushaliya.

Ms VAGHELA: Thanks, Chair. Thanks, Felicity and Kerri, for your submission and for your time today. So following on from Ms Watt’s question regarding the characteristics, those are the characteristics they bring with them when they enter this educational program. How do they feel while they are actually on this program? Because you have shown a high percentage of success rate. So how do these characteristics change while they are on this program? Because for some you mentioned that they feel this is their only chance, so maybe they are the people who are able to complete it, but then there is another big percentage not completing the program. So I want to know what emotions, what sort of feelings, they go through being on this program.

Ms BARNES: Yes. So we look at building their self-esteem and self-efficacy. ‘I am’ is a really positive psychology-based program, so we say to them, ‘Look, guys, we’re not interested in what happened or why you ended up in corrections. What we want to know is: what kind of lifestyle do you want to lead?’. We are very careful about the language that we use. It is completely strength based. I am not wanting to use a negative example for them, but if you are somebody who has been a drug dealer, then you have got some strengths going on there. You have been able to network, you can count money, you have got business skills, you can sell, you can manage several IT devices at one time and there are all sorts of things, so imagine if we channel that in the right direction and say ‘What can you actually do?’ and get them to start identifying that there are some good things. Even though their behaviours have been criminal behaviours and have hurt people, some of the skills that they need to actually commit those crimes can be turned around and used for some good things, so let us identify those strengths and then let us start building on starting to make them feel like they could be valued and contributing members of society—‘What is it that you actually really want to do and what do we need to do to help you to get there?’. A lot of it is just around identifying their strengths coming in from that, so

all of the work that we do and any of the interventions that are delivered come from a very strengths based perspective. It is just to help build them up and build their self-esteem and self-awareness.

We do a lot of work on what is happening on the inside—their inner critic—and things like that where they might be needing some support to overcome old thinking patterns. We explain to them a little bit about that psychology stuff and that they can turn their thinking around. They formed habits that were not so great potentially, so they can form habits that are actually good. We get them to understand choices and different ways of thinking and basically just come in with them at where they are at in a non-judgemental platform so that they can start sharing how they are feeling and to give them some encouragement to move forward, I guess.

Some of the feedback is that they do feel inspired, I guess. They start feeling like there is a sense of hope. Part of that program was based on Gray Poehnell's *Hope-filled Engagement*. He is an Indigenous Canadian man who is working with Indigenous people to engage them. They do not hear words like that very often—you know, 'giving someone some hope' and 'new beginnings bring hope'—so we talk about those kinds of things with them and start instilling that so they can see a bit of a light potentially and that there are options. They then go, 'Oh, okay', the light bulb moment happens, and potentially they might start thinking about other ways to function rather than in a criminal way.

The CHAIR: Interesting.

Ms VAGHELA: And of the ones who were successful, were they wanting to achieve something for themselves or do they want to prove something to their family members or their partners or parents or siblings? What was the driving factor for them to be successful?

Ms WILLIAMS: The motivator.

Ms BARNES: Yes, that is quite individual. For most of them, though, it is just wanting to be loved and accepted for who they are. They owe different people that they want to prove things to, whether it is their kids—for a lot of them it is children. They want to be respected by their children. And respect is a big one, so they will often talk about how they feel like no-one values them, no-one respects them, no-one cares and no-one gives a ... about them. Also there is not disappointing their parents. So disappointment from their parents and being able to be respected by their children and partners are big ones.

Ms VAGHELA: I will come back in the second round. Thank you.

The CHAIR: Tien.

Dr KIEU: Actually, this is a question that is following on from my one earlier. On the one hand you have seen that education can turn people's lives around, but on the other hand, from the records and from the data, we have seen that about 50 per cent of people who have committed crimes and gone into corrections were having difficulty in learning. What should we do in the education system in the first place for people having learning difficulties to prevent them from going into crime in the first place, so that we can train them? Not only is education the enemy of recidivism but education is the enemy of crime. What elements can we put into the system earlier in school for people having difficulties?

Ms WILLIAMS: I was really interested that 50 per cent of these guys have been medicated, because one of the things that really concerns me about children in our school system, and particularly in regional areas, is to get a clinical assessment is extremely difficult, because clinicians, there are not many of them around, so you have to go to Melbourne or Sydney. To get a proper clinical assessment for a learning difficulty costs anywhere from \$3000 upwards. So you have low socio-economic families for whom that is absolutely out of their reach. I have a sister who has two children with ADHD, and she had to fight (a) to get them assessed and diagnosed, and she had to fight every time she met with those teachers in a teacher interview to say, 'Joshua has ADHD'. 'Really?'. It was just like, 'It should be on his file. You should be supporting him. You should all know this'. It just took so much advocacy from her that sort of never really worked. Without that parental advocacy, there is not much hope.

The schools need to really beef up their support and understanding of special education needs, and that actually goes for the VET system as well. There needs to be much better understanding of special education needs throughout the vocational education and training system, because they are certainly coming through to us. My dream would be to have people in schools who understand these conditions and can actually advocate for these

children with their teachers and help their teachers to understand how they should be supported in the classroom and outside the classroom—supported socially in the playground and all of that sort of thing, because ADHD and other learning difficulties can have significant impacts on their ability to socialise and participate in social groups.

There just need to be more clinicians available. I am on the regional partnership, and we are advocating for that. We need more psychologists, speechies on the ground. I have spoken to Bernie Boulton at the department of education, and they are trying to find psychologists who are not yet accredited. They are actually having to use psychologists who are still going through accreditation.

Ms BARNES: Provisional psychologists.

Ms WILLIAMS: Provisional psychs, that is right. And there is just such a shortage of clinicians who are able to provide treatment and therapeutic interventions. I just think it just needs to be really beefed up at school early on. There needs to be early intervention. So it is a really great question.

Ms BARNES: And the other thing to add to that I think is there is a saying that says, ‘Try and teach a fish to climb a tree and it will spend its life thinking it’s stupid’. So everyone has a different—and I think the education system identifies that there are different—learning styles. But there is a theory out there, and it is around multiple intelligences, and it is really quite controversial. However, I believe it is the case, because it is very subjective to the person. If you have got a natural gravitation towards music or something and you have got a real music mind, it is not being nurtured if you are sitting in a maths room. So everybody has something to offer; it is around finding that. I think there needs to be a bit more research done in those areas to have a look at those learning styles and on an individual basis and potentially also those psychological things that need to be implemented early, like mindfulness—some of those techniques—to preserve mental health as young children and instil some of those confidence things or strategies for how they can look after their mental health and help themselves, I guess, a little bit with self-efficacy along that journey so that the resilience and whatnot is there for when those bumps do come along and they do not fall over.

The CHAIR: Thanks. I am conscious we are going over time, but Tania, a quick one, then Sheena and Kaushaliya.

Ms MAXWELL: Given that we want to do a very holistic overview for this justice inquiry, and I know that there is a lot of importance placed on the responsibility of educators, what are your thoughts on when we are looking at vulnerable families and those cohorts? Often the parents do not have that information either. How do you know to take your child to the doctor because you suspect they have got ADHD if you are not even knowledgeable or you have never had those skills to detect that? So I think it needs to go back early so that we are not lumping all this on educators once these children are at school, and I would just be interested in your thoughts on that.

Ms WILLIAMS: I agree, and often the parents will have a learning difficulty. They have ADHD—it is generally hereditary—

Ms BARNES: It is generational.

Ms WILLIAMS: and it is generational and it possibly has not been picked up, so I absolutely agree with you, Tania. I think parents need to be supported as well, but it may take the educator to have that conversation with the parent to recognise that this might be happening and to initiate that conversation with the parent. Relying on educators as professionals—I think the education of teachers needs to be beefed up in terms of special education needs, and that is something that has been recognised in the UK and is being reflected in their tertiary system. They actually have highly skilled teachers who understand special education needs in their community colleges, so in the equivalent of a Learn Local—although they are enormous over there—you would have a university-qualified special education needs teacher available.

Ms BARNES: I think we have a problem that in a child’s development the first three years are said to be where they do the most learning, and we do not see a child generally if they are kept at home until they start primary school at age five. So we have the first five years where they are doing most of their learning at home and that development starts at home, so something potentially needs to be happening pre primary school. There needs to be some intervention there. It is potentially not the maternal health nurse and it is definitely not your prep teacher that should be picking that stuff up, because by the time they have gotten there, there is already

some stuff that is established, so that pre primary school entry needs to be looked at I think. It makes sense that if it is the first three years you are doing most of your development then I do not know why we are not—

The CHAIR: Focusing there.

Ms WATT: I have probably got a different point altogether, which is around your supportive workplace environments and the work of your industry liaison officers. I am wondering if you could speak to the preparation that is done or the work that is done with employers, because as much as it is great to have all the education that is possible as input, if an offender is placed in a workplace that is not supportive and has not got the nourishing environment for them to succeed, I imagine that that can set back the real work quite some way. So I just wonder if you have any commentary on that, and in particular even leading up to having an employer that is willing to take on employees with a criminal background, what are some of the barriers? Are you finding industry liaison officers are having barriers around wanting to take on employees with criminal records, I guess I am saying.

The CHAIR: And can you answer that very quickly?

Ms BARNES: Yes, sure. The working with children check is one of the big barriers that we have. There is lots of work that has to happen. We have developed a profile for our guys because often there is not much that goes on their resume, and the ILO operates as the mediator I guess and discusses with the employer if there are things coming up that the employer needs addressed and potentially offers strategies to overcome that and vice versa, so looking at if the employee is struggling with the placement and what might need to happen there as well. The profile that we give an employer will pretty much tell them exactly what has happened and outlines all of their strengths, their resilience, the things that they aspire to do, the things that they have had to overcome to actually get where they are and the things that they are prepared to undertake in the future. So rather than having a traditional resume or CV, we are making a profile which is a sheet that basically tells them about their character, and then their educational and employment history are sort of second to that because often there are big gaps in that, especially if you have been in prison.

Ms WILLIAMS: But the ILO provides ongoing support.

Ms BARNES: Ongoing support, yes.

Ms WILLIAMS: It is not place and forget—set and forget. There needs to be ongoing support for both the employer and the employee. That is really critical. And JVES is allowing us to do that.

The CHAIR: Terrific. Thank you.

Ms VAGHELA: Just a very quick one.

The CHAIR: Yes.

Ms VAGHELA: Based on your work, do you think that a person's educational background and experience affect how likely they are to commit crimes?

Ms WILLIAMS: I think their whole background.

Ms BARNES: Yes.

Ms WILLIAMS: It is just all those risk factors that we know are there, and our approach is to try and provide protective factors that address those risk factors. That is how we design our programs, and that is our approach. For all of our programs actually that is our approach.

Ms BARNES: If someone is educated and able to get a stable career that they value and feel valued in and can contribute and have all of those things that go on with a career and the positives that come from that, when they are busy with their career they are not going to be—

Ms VAGHELA: Less likely to commit.

Ms BARNES: It is a given. Yes, definitely. If it was not the case, they would not have that as a need in the justice LS/RNR—the risk-need-responsivity tool measures their employment and education background because it identifies that those things contribute to recidivism if they need addressing.

Ms VAGHELA: Thank you.

The CHAIR: Amazing. Thank you both. That was really great. As I said, this is our first day, and we are really pleased to be here.

Ms WILLIAMS: Oh, it is your first day?

The CHAIR: Yes.

Ms WILLIAMS: Wow. Okay.

The CHAIR: Yes, so it is beautiful to set some of these pathways and some of these concepts into our heads as we go forward. Thank you again. As I mentioned, you will receive a transcript of today. You know the drill: read it, let us know if you think there are any changes.

Ms BARNES: Thank you for having us.

The CHAIR: Yes, look, thank you. And congratulations—these are really innovative and interesting programs.

Witnesses withdrew.