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16 December 2020

The Hon. Mark McGowan MLA

Premier of Western Australia
Dumas House
2 Havelock Street
WEST PERTH WA 6005

The Hon. Simone McGurk MLA

Minister for Child Protection; Women's Interests;
Prevention of Family and Domestic Violence; Community Services

The Hon. John Quigley MLA

Attorney General

The Hon. Ben Wyatt MLA

Treasurer; Aboriginal Affairs; Lands

The Hon. Roger Cook MLA

Deputy Premier; Minister for Health; Mental Health

The Hon. Francis Logan MLA

Minister for Corrective Services

The Hon. Alannah MacTiernan MLC

Minister for Regional Development

The Hon. Michelle Roberts MLA

Minister for Police

Dear Premier and Ministers

The Aboriginal Males Healing Centre (AMHC) was incorporated in 2015 to advocate for the development of a long-term behavioural change program for Aboriginal men that use, or are at risk of using, violence in the Pilbara.

It is with great pleasure that we enclose for your comment/feedback our submission to the Australian Government for funding under the Indigenous Advancement Strategy. The submission envisages an intergovernmental and bipartisan program to eliminate family violence in First Nations communities.

As you may know from previous engagements or through parliamentary colleagues and ministerial staff, AMHC has proposed a long-term on country residential program for Aboriginal men that use violence. This program will incorporate best-practice clinical rehabilitation underpinned by Aboriginal culture and lore. AMHC will provide rehabilitation over an extended period giving enough time for the men to develop life skills, a sense of responsibility, meaningful employment, good physical health and emotional and spiritual strength. AMHC is based on the principle of 'self-determination' – we are an Aboriginal Community Controlled Organisation (ACCO) for Aboriginal people.

In 2017 the WA Government provided seed funding through the Pilbara Development Commission. Since then the East Pilbara Shire, major corporations with a presence in the Pilbara and a team of pro bono professionals

have provided valuable support to AMHC. Our patrons are the Hon. Justice Peter Quinlan, Chief Justice of Western Australia and Hon. Wayne Martin AC QC, former Chief Justice of Western Australia. AMHC is governed by a council of Elders comprising Nyiyarparli and Martu leaders. A fly-through of the residential centre design can be viewed here: <https://www.amhc.org.au/design-build>

In addition to our engagement with the WA Government, the Hon. Ken Wyatt AM MP, Minister for Indigenous Australians and the National Indigenous Australians Agency (NIAA) has asked AMHC to develop a submission to explore funding under the Indigenous Advancement Strategy. In 2018 Minister Wyatt was a keynote speaker at 'Our Vision' launch at Arup's corporate office alongside Justice Quinlan.

As you will see in our submission, our team is ready to execute on a well-defined design and plan. We have proposed that important funding for the program come from the Western Australian State Government given the AMHC will redirect state criminal justice and custodial costs to a program that addresses structural causes of offending while holding perpetrators accountable. This is a justice reinvestment with a strong business case supported by actuaries.

We understand that the concept of men's rehabilitation programs in the Pilbara is, after many years of our advocacy, beginning to get traction by way of a *Breathing Space* pilot. AMHC was not engaged to participate in the design or implementation of this program. We warmly welcome all programs that will focus on the elimination of family violence in our First Nations communities and envisage collaborating with and complementing this and all other programs.

AMHC will contribute directly to the WA Government's long-term Family and Domestic Violence Reduction Strategy 2020-30, the National Agreement on Closing the Gap and the National Plan to Reduce Violence against Women and their Children. In terms of global action, AMHC will contribute to the UN Sustainable Development Goals of Gender Equality and Reduced Inequalities¹.

It is exciting to envisage strong intergovernmental and bipartisan support for such an important community issue. We look forward to a healthy and long-term partnership with state and federal governments and the broader community on this ground-breaking and nationally impactful program.

I also look forward to your formal comment/feedback and meeting with you to discuss this partnership in January 2021. I am available any time to meet with you, I bring a sense of urgency and enthusiasm to get started.

My best wishes to you and your families during this special time of the year and may you enjoy a well-earned rest after a demanding and unprecedented year.

Yours faithfully



Devon Cuimara

Founder and Chief Executive Officer
Aboriginal Males Healing Centre

Enc: Aboriginal Males Healing Centre submission to the National Indigenous Australians Agency for funding under the Indigenous Advancement Strategy.

¹These UN goals speak specifically of unacceptably high levels of physical and sexual violence by intimate partners against women:
<https://www.un.org/sustainabledevelopment/>

Strong Spirit, Strong Families, Strong Culture

First submission to explore funding options under the
Australian Government's Indigenous Advancement Strategy

Aboriginal Males Healing Centre

December 2020



www.amhc.org.au

16 December 2020

The Hon. Ken Wyatt AM MP

Minister for Indigenous Australians
Parliament House
Canberra ACT 2600

In copy:

The Hon. Melissa Price MP

Minister for Defence Industry
Division of Durack

Mr. Ray Griggs AO, CSC

Chief Executive Officer
National Indigenous Australians Agency

Mr. Richard Aspinall

Regional Manager, Greater Western Australia
National Indigenous Australians Agency

Mr. Kevin Brahim

Group Manager, West South Group

Dear Minister

It is with great pleasure that I enclose the Aboriginal Males Healing Centre's (AMHC) first submission to explore funding under the Australian Government's Indigenous Advancement Strategy (IAS).

I would like to thank the Hon. Ken Wyatt for his generosity of time for speaking at our AMHC 'Vision' launch in 2018 at Arup's corporate office; alongside the Hon. Justice Peter Quinlan, Chief Justice of Western Australia. Your words were thought-provoking and inspirational, and the event was a watershed moment for AMHC in its relationship with the broader business community. Thank you for your letter on 30 June 2020 encouraging this IAS funding dialogue. I look forward to meeting with you and the NIAA to discuss a partnership between AMHC and the Australian Government.

The AMHC will be a residential centre established to address the structural causes of violence with a central focus on Aboriginal culture and Lore complementing clinical rehabilitation best-practice. The AMHC is an Aboriginal controlled organisation for Aboriginal people. As you will see in our submission, our team is ready to execute on a well-defined design and plan.

The AMCH is set-up to directly further the Australian Government's **Indigenous Advancement Strategy** to inter alia:

"Improve results for Indigenous Australians including in relation to school attendance, employment and community safety, through delivering services and programmes, and through measures that recognise the special place that Indigenous people hold in this Nation."

"Improve mental health and wellbeing outcomes of Indigenous people and ensure Indigenous people [...] are safe in their homes, families and communities."

AMHC will contribute directly to the **National Agreement on Closing the Gap** and the **National Plan to Reduce Violence against Women and their Children**. In terms of global action, AMHC contributes to the **UN Sustainable Development Goals of Gender Equality and Reduced Inequalities**¹.

Since 2017, with seed funding and the generosity of pro bono professionals, we have achieved a great deal. We developed a cultural program in collaboration with Elders and renowned First Nations psychologist Dr. Tracy Westerman. We have developed a business case based on the principles of justice re-investment, supported by independent actuarial analysis. The detailed architectural and engineering designs have been developed by leading architects and global engineering firm Arup and the development approval process is well underway. We also have built a financial case for social business enterprises, developed in conjunction with industry. The Shire of East Pilbara has generously transferred a well-located and culturally significant parcel of land to AMHC and committed \$1.2M to infrastructure funding. A fly-through of the residential centre design can be viewed here: <https://www.amhc.org.au/design-build>

In parallel, since 2018 we have operated a drop-in service at the Parnpajinya Aboriginal Community Reserve for the immediate benefit of the Newman community.

AMHC is based in Newman in the Pilbara Region of Western Australia. As you know, the Pilbara is our country's "mining powerhouse" and makes a significant contribution to national wealth through iron-ore and liquified natural gas. It is base to some of Australia's largest resources companies including BHP, Rio Tinto, Fortescue Metals Group, Hancock Prospecting, Woodside Energy and others.

The Pilbara is home to 31 Aboriginal groups. Newman sits on the traditional lands of the Niyarparli people and the Martu people are the current custodians. In addition to a Board, AMHC is governed by a *Council of Elders* comprising Niyarparli and Martu leaders. The Elders and the community have been central to the development of the cultural aspects of the healing program, the architectural design of the centre and the identification of the land. The site is located on an ancient male ceremonial pathway and old pastoral stockyards.

AMHC has strong links with the Niyarparli people and the Karlka Niyarparli Aboriginal Corporation (KNAC), the Native Title representatives of the Niyarparli people. Niyarparli Elders and Traditional Owners sit on an AMHC Elders Council.

We see AMHC not simply as a local solution (with immediate benefit for the culturally and economically important Pilbara region), but as a globally recognised culturally appropriate residential healing program and a *national blueprint* for breaking the cycle of violence in First Nations communities across Australia.

We look forward to a healthy and long-term partnership with the IAS on this ground-breaking and nationally impactful program.

Yours faithfully



Devon Cuimara
Founder and Chief Executive Officer
Aboriginal Males Healing Centre

¹These UN goals speak specifically of unacceptably high levels of physical and sexual violence by intimate partners against women:
<https://www.un.org/sustainabledevelopment/>

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Key Points

Executive Summary

- AMHC is an alternative to removing women and children from the family home or their community and supports long-term behavioural change in Aboriginal men that use, or are at risk of using, violence.
- AMHC will provide integrated clinical and cultural healing to perpetrators of family violence incorporating best-practice clinical rehabilitation underpinned by Aboriginal culture and lore.

Chapter 2 Needs analysis

- Violence against women and children is a crime and a fundamental breach of human rights.
- First Nations women are at a significantly higher risk of experiencing violence over the course of their life.
- Family violence creates intergenerational cycles. Trauma and a propensity for violence is passed from parent to child.
- Family violence and incarceration comes at an enormous cost to the Australian economy. The impact of family violence on the Australian economy is \$22 billion each year.
- The Pilbara is the “powerhouse” of the Australian economy.
- Yet, family violence is a serious community issue in the Pilbara. Family related assault offences in the Pilbara have increased materially over the last 10 years, well above metropolitan Australia.
- Current intervention programs are not effective. In serious instances of family violence, the courts will, and should, respond with appropriately severe sentences.

Chapter 3 Pathways to change

- The safety of women and children is our paramount concern. It is our vision that all Aboriginal women and children live safe and healthy lives free of family violence.
- AMHC is for Aboriginal men that use, or are at risk of using, violence. AMHC is a 12-month residential early intervention and healing program incorporating clinical rehabilitation best-practice underpinned by Aboriginal culture and lore.
- AMHC will provide rehabilitation over an extended period giving enough time for the men to develop life skills, a sense of responsibility, meaningful employment, good physical health and emotional and spiritual strength.
- The residents will participate in on-site training and development including social enterprise engagement, land rehabilitation, trade qualifications and service industry training.
- Underpinning AMHC model is Aboriginal culture and lore. AMHC is located on Niyaparli and Martu land and is controlled by Aboriginal people. The program has been developed and delivered on country and the residents will reconnect with their culture as part of their healing.
- Since 2018, AMHC has operated a holistic outreach service for First Nations families with a focus on prevention and early intervention. This service complements the residential program.

Chapter 3 A strategic investment – the business case and value for money

- AMHC will serve a critical service to the community with profound positive outcomes for Aboriginal communities.
- In addition, AMHC will generate \$70 million of direct economic benefits over 10 years such as reducing the cost of imprisonment, recidivism and other criminal justice costs, and increasing productivity. These economic benefits have been quantified by independent actuaries.
- AMHC has developed detailed business cases for social enterprise businesses to create opportunities for training and employment for the residents and generate enterprise and employment opportunities for the community.

Chapter 4 A well-defined roadmap

- AMHC team is ready to execute on a well-defined design and plan.
- AMHC will directly and materially contribute to the Australian Government’s Indigenous Advancement Strategy.
- AMHC will contribute directly to the National Agreement on Closing the Gap and the National Plan to Reduce Violence against Women and their Children. In terms of global action, AMHC contributes to the UN Sustainable Development Goals of Gender Equality and Reduced Inequalities.
- AMHC will create a globally recognised *National Blueprint* for long-term residential healing programs for First Nations men and the incorporation of mainstream clinical rehabilitation methods and Aboriginal culture and lore.
- We propose a strong and long-term partnership and funding engagement between AMHC, an Aboriginal controlled organisation, and the Australian Government through the Indigenous Advancement Strategy and the National Indigenous Australians Agency.

1. Executive Summary

The Aboriginal Males Healing Centre (**AMHC**) is an alternative to removing women and children from the family home or their community and supports long-term behavioural change in Aboriginal men that use, or are at risk of using, violence. AMHC will provide integrated clinical and cultural healing to perpetrators of family violence incorporating best-practice clinical rehabilitation underpinned by Aboriginal culture and lore. AMHC is based on the principle of 'self-determination' – AMHC is an Aboriginal-controlled organisation for Aboriginal people based in Newman in the Pilbara Region of Western Australia.

AMHC will be located on Nyiyaparli land the custodians of which are the Martu, incorporating integrated clinical services consisting of:

1. A secure residential healing centre and program (**Residential Centre**).
2. A holistic outreach healing service for prevention and early intervention (**Outreach Services**).
3. Integrated family and other support services (**Integrated Family Services**).

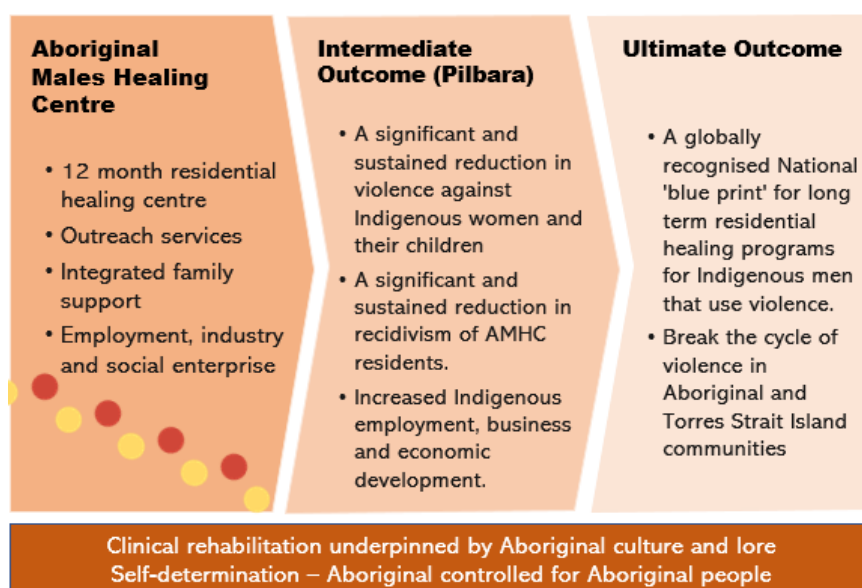
The unique and ground-breaking feature of AMHC is the 12-month residential healing program. The greatest opportunities for rehabilitation exist where offenders participate in the residential program. The program is an evidence-based culturally responsive intervention for perpetrators of family violence. Importantly, the program blends traditional healing with clinical best-practice, with the program designed and delivered by Aboriginal Elders and non-Aboriginal and Aboriginal clinicians and medical practitioners. This approach ensures clinical best practice and specifically tailors the program for the cultural context. The development, design and implementation are underpinned by Aboriginal culture and lore.

The program is delivered on country specifically to allow the perpetrators to reconnect with their culture. An extended program will give the men time to develop life skills, a sense of responsibility, meaningful employment, good physical health and emotional and spiritual strength. The Outreach Service is operational as a drop-in service at the Parnpajinya Aboriginal Community Reserve for the immediate benefit of the Newman community.

AMHC is based in the Pilbara and is a program that has significant potential to directly and materially contribute to the Australian Government objective of Indigenous advancement. AMHC will create a globally recognised 'national blue-print' for long-term residential healing programs for Aboriginal men and the incorporation of mainstream clinical rehabilitation methods and Aboriginal culture and lore.

We recommend and seek a strong and long-term partnership and funding engagement between AMHC, an Aboriginal controlled organisation, and the Australian Government through the Indigenous Advancement Strategy (**IAS**) and the National Indigenous Australians Agency (**NIAA**).

It is our vision that all Aboriginal women and children live safe and healthy lives free of family violence. The safety of women and children is our paramount concern.



1.1 Australian Government objectives and the Indigenous Advancement Strategy

We understand that the Australian Government delivers a range of programs for First Nations Australians. Initially, \$4.8 billion was committed to the IAS over four years from 2014–15; and in the 2019–20 Budget, the Australian Government allocated an additional \$5.2 billion over four years from 2019–20 to 2022–23.

NIAA administers the IAS. NIAA was established as an executive agency within the Prime Minister and Cabinet portfolio on 1 July 2019 and is the lead entity for Commonwealth policy development, program design, implementation and service delivery for First Nations peoples. NIAA is underpinned by the NIAA Corporate Plan.

“Improve results for Indigenous Australians including in relation to school attendance, employment and community safety, through delivering services and programmes, and through measures that recognise the special place that Indigenous people hold in this Nation.”

There are six IAS programs with targeted outcomes and performance criteria. AMHC contributes to all the IAS programs, most significantly to Program 1.3 Safety and Wellbeing.

We have developed a set of defined outcomes and program specific performance indicators to measure outcomes. In summary:

IAS Program	AMHC Outcomes
Program 1.1 Jobs, Land and Economy	- AMHC will increase Indigenous employment, business and economic development. - Employment of Indigenous staff, including mental health and counselling training. - Training and development of the residents in preparation for meaningful employment including trades, services and cultural counselling.

IAS Program	AMHC Outcomes
	- Procurement for the build of the residential centre will focus predominately on Indigenous businesses and people. - AMHC proposes an on-site revenue generating social enterprise business to fund ongoing operations and for training and development. - Decreased violence and stronger communities will contribute to the attractiveness of the Pilbara as a place to live and work benefiting local business and global resources companies. - An independent actuaries report quantifies direct economic benefits.
Program 1.2 Children and Schooling.	- The safety of women and children is our paramount concern. - Reduced violence in the community has a strong and positive impact on early childhood development, supports an educational environment in the community and increases school attendance.
Program 1.3 Safety and Wellbeing	- It is our vision that all Aboriginal women and children live safe and healthy lives free of family violence. Break the cycle of family violence in Newman and the Pilbara. - A significant and sustained reduction in violence against Indigenous women and children. - A significant and sustained reduction in recidivism of AMHC residents. - A Justice Reinvestment to decrease incarceration costs via more effective means of managing offenders and addressing reasons for offending. - Provide an alternative to incarceration and early intervention and outreach. - An alternative to removing women and children from the family home or their community. - Long-term behavioural change in Aboriginal men that use, or are at risk of using, violence. - Reduced substance misuse by residents and a related reduction in anti-social behaviour and improvements in health outcomes. - Increased community engagement around reducing family violence. - Increased focus on mental health and self-harm mitigation.
Program 1.4 Culture and Capability	- Underpinning AMHC is Aboriginal culture and lore. A purposeful re-connection with culture and lore and the preservation of culture in families and communities. - An empowered and effective Aboriginal controlled organisation focussing on Indigenous outcomes (eliminating family violence in Aboriginal families and communities). - Supports leadership in the communities by increasing the number of cultural counsellors and clinical/cultural leaders.
Program 1.5 Remote Australia Strategies	- A direct investment in infrastructure and programs in the Pilbara in Western Australia. - Through the Outreach Service, an effective and valuable use of the Parnpajinya Aboriginal Community Reserve.
Program 1.6 Evaluation and Research	- Design program for replication across other Indigenous communities in Australia. - As part of the 12-month program and post-residency monitoring, methodically record data for continuous improvement and accessible by policymakers and other rehabilitation programs.

As we progress through the funding process, AMHC will further refine these outcomes and performance indicators based on continuous feedback from NIAA, the community, agencies and clinical specialists.

We are familiar with, and understand, Australian Government initiatives that benefit First Nations people. We are confident that AMHC strongly aligns with:

- The National Agreement on Closing the Gap (the National Agreement) – the four Priority Reforms and the national socio-economic targets.
- The National Plan to reduce violence against women and their children 2010-22.
- The National Aboriginal and Torres Strait Islander Health Plan (2013-2023).
- The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing (2017-2023).
- The National Disability Insurance Scheme (NDIS) 'Aboriginal and Torres Strait Islander Engagement Strategy'².
- Other related Indigenous advancement programs across the Australian Government portfolios such as Attorney-General's Department (Justice Services), the Department of Health (Aboriginal and Torres Strait Islander Health), Department of Human Services (Services to the Community – Social Security and Welfare), Department of Social Services (Families and Communities), Department of Jobs and Small Businesses (Employment), and the Department of Industry, Innovation and Science (Growing Business Investment and Improving Business Capability).³

We would also welcome the opportunity to work closely with new and existing agencies, including the proposed Office of Indigenous Policy Evaluation (OIP) and Indigenous Evaluation Council.⁴

Respecting privacy laws and confidential information, we envisage collecting and making accessible valuable data and insights to Australian Government agencies, policymakers, researchers and other rehabilitation programs for the broader benefit of the community.

As the program is based in the Pilbara in Western Australia, AMHC aligns with the WA Government's long-term Family and Domestic Violence Reduction Strategy 2020-30⁵ specifically around prevention and early intervention and the safety for victims and accountability for perpetrators.

From a global perspective, AMHC contributes to the UN Sustainable Development Goals of Gender Equality and Reduced Inequalities⁶. AMHC supports First Nations people's rights under the United Nations Declaration on the Rights of Indigenous Peoples including to self-determination and to actively participate in decision making about matters that affect them; and protection against violence and discrimination⁷.

² <https://www.ndis.gov.au/about-us/strategies/aboriginal-and-torres-strait-islander-strategy>

³ Portfolio Budget Statements 2020-21: <https://www.pmc.gov.au/resource-centre/pmc/portfolio-budget-statements-2020-2021>

⁴ Indigenous Evaluation Strategy, October 2020: <https://www.pc.gov.au/inquiries/completed/indigenous-evaluation/strategy/indigenous-evaluation-strategy.pdf>

⁵ <https://www.communities.wa.gov.au/strategies/family-and-domestic-violence-reduction-strategy/>

⁶ These UN goals speak specifically of unacceptably high levels of physical and sexual violence by intimate partners against women: <https://www.un.org/sustainabledevelopment/>

⁷ United Nations, Department of Economic and Social Affairs Indigenous Peoples:

https://www.un.org/development/desa/indigenouspeoples/wp-content/uploads/sites/19/2018/11/UNDRIP_E_web.pdf

1.2 Background

First Nations women are at a significantly higher risk of experiencing violence over the course of their life.

Violence against women and children is a crime and a fundamental breach of human rights.

It is difficult to measure the full extent of family violence against women as most incidents go unreported, but we know that Indigenous women are much more likely (35 times) to experience family violence than non-Indigenous Australian women⁸. We know that Indigenous people are disproportionately victims and offenders in homicide incidents and that most of these occur between family members.⁹ We also know that there are even greater barriers to reporting violence to authorities in small remote communities than there are in regional area and metropolitan centres.

Family violence creates intergenerational cycles in which trauma and the propensity for violence is passed from parent to child. For families and communities caught up in this cycle, violence becomes normalised and an expected part of family life.

Current intervention programs are not culturally effective (refer section 2.2). In serious instances of family violence, the courts will, and should, respond with appropriately severe sentences. However, in less serious cases the safety of victims is not always improved by a custodial sentence. Incarceration simply removes the men from the community temporarily and returns them without rehabilitation. The violence escalates and the cycle continues.

There are countless devastating ‘qualitative’ impacts on Aboriginal families and communities. Family violence and incarceration comes at an enormous cost to the Australian economy. The impact of family violence on the Australian economy is \$22 billion each year. A further \$1.2 billion may be added because of underreporting by First Nations women. Indigenous incarceration costs the Australian economy \$7.9 billion each year. If nothing is done this will rise to \$19.8 billion by 2040.¹⁰

In Newman, the home to AMHC, eliminating violence is a community priority. According to the Western Australian Police¹¹, between 2010 and 2020 in the Pilbara District, family related assault offences have increased 195% (non-family assaults have remained steady) and family related threatening behaviour offences have increased by 387% (non-family threatened behaviour increased by 34%). This increase is substantially more than metropolitan WA. Government Health data and data captured by community organisations tell the same story.

⁸ The National Plan to Reduce Violence against Women and their Children 2010-2022.

⁹ Cussen T & Bryant W 2015. *Indigenous and non-Indigenous homicide in Australia. Research in practice no. 37*. Canberra: Australian Institute of Criminology. <https://www.aic.gov.au/publications/rip/rip37>

¹⁰ *Indigenous Incarceration: Unlock the Facts*, PWC (2017); and *The Cost of Family Violence in Victoria*, KPMG 2017).

¹¹ <https://www.police.wa.gov.au/Crime/CrimeStatistics#/start> extracted 24 October 2020

The safety of women and children is our paramount concern. It is our vision that all Aboriginal women and children live safe and healthy lives free of family violence.

AMHC will offer a 12-month residential early intervention and healing program incorporating clinical best-practice underpinned by Aboriginal culture and lore.

The program has been developed and will be delivered by respected Elders in collaboration with a clinical team. AMHC will offer a holistic approach to healing over an extended period giving enough time for the men to develop life skills, a sense of responsibility, meaningful employment, good physical health and emotional and spiritual strength. The residents will participate in on-site training and development including social enterprise engagement, land rehabilitation, trade qualifications and service industry training. Throughout the healing process, AMHC will aim to protect the safety of women and children by removing the men from the family home or community to a safe and secure environment.

Men will enter the program mostly on a mandated basis such as being referred by the courts, while small numbers may enter on a voluntary basis. The demand for AMHC is anticipated to be high and, accordingly, residents referred by the courts will be prioritised. We understand that there are several ways in which a program like AMHC can be mandated by the courts such as a condition of bail, a condition of community based orders or intensive supervision orders, or deferring a sentence for a period during which the offender can be subject to conditions.

It is widely accepted that connecting to culture should be a key component of Indigenous programs – this component is ‘significantly associated with non-recidivism’. There is clear recognition of the importance of programs ‘which centre on culturally based forms of identity, belonging, stability and protection which create meaning and connection for Aboriginal peoples. This is viewed as the central element in building resilience, meaning and purpose for First Nations people across the entire community, not solely in the criminal justice system.’¹²

Underpinning the development and implementation of AMHC model is Aboriginal culture and lore. AMHC is located on Nyiyaparli land and is controlled by Aboriginal people. The program has been developed, and will be delivered, by Elders on country, and the residents will reconnect with their culture as part of their healing.

Since 2018, AMHC has operated a holistic outreach service for Indigenous families with a focus on prevention and early intervention. This service complements the residential program.

The original AMHC business proposal ‘Residential and outreach healing program for perpetrators of family and domestic violence’ (2017) is available for review on request.

¹² Shepherd S, Delgado R, Sherwood J, & Paradies Y. *The impact of indigenous cultural identity and cultural engagement on violent offending*; 2017.

https://www.researchgate.net/publication/318672361_The_impact_of_indigenous_cultural_identity_and_cultural_engagement_on_violent_offending

1.3 Financial engagement with IAS

AMHC is a large-scale program with an estimated cost of \$42M for the build of the program and infrastructure (**the Build**) and \$3-4M per year for ongoing operations (**the Run**). We are proposing a partnership with IAS through IAS' funding of the Build as our primary objective; but we are open to a collaborative funding arrangement between multiple parties including IAS, state governments and major corporations.

Our preferred approach here is an intergovernmental one with the preponderance of the Build funding to be through the Commonwealth Government, given the national importance and broad-based nature of the program. A single source funding of the Build will also ensure economies of scale and clear governance and accountability.

We would recommend that the Run is principally funded by the WA Government as AMHC will redirect state criminal justice and custodial costs. Refer to sections 5.1 Return on Investment Analysis and 5.2 Justice Reinvestment.

There are opportunities for funding contributions from resource corporations with a significant presence and operations in the Pilbara such as BHP, Rio Tinto, FMG, Woodside, Hancock Prospecting, and other companies with a strong focus on Indigenous advancement and self-determination.

The Build costs in the following table have been estimated by a Quantity Surveyor (Quantum Phases) based on Architectural Drawings prepared by Matthews McDonald Architects and PM+D Architects. The construction packages with timings has been developed by Allied Projects.

Estimated costs for funding engagement FY21-23

Phase	Activity	FY21	FY22	FY23	Total
Detailed Design	Engineering + Project Management	\$ 2,930,947	\$ 532,899	\$ 266,450	\$ 3,730,296
	Building Approval	\$ 35,000			\$ 35,000
	DD Summary	\$ 2,965,947	\$ 532,899	\$ 266,450	\$ 3,765,296
Construction					
	Project Management	\$ 201,600	\$ 1,152,000	\$ 374,400	\$ 1,728,000
	PM Summary	\$ 201,600	\$ 1,152,000	\$ 374,400	\$ 1,728,000
	WP1	\$ 6,060,912	\$ 9,091,369		\$ 15,152,281
	WP2		\$ 6,702,280	\$ 4,468,187	\$ 11,170,467
	WP3		\$ 978,154	\$ 2,282,358	\$ 3,260,512
	WP4			\$ 3,456,000	\$ 3,456,000
	WP5			\$ 765,242	\$ 765,242
	Package Summary	\$ 6,060,912	\$ 16,771,802	\$ 10,971,787	\$ 33,804,502
	Construction Summary	\$ 6,262,512	\$ 17,923,802	\$ 11,346,187	\$ 35,532,502
Contingency	Contingency	\$ 775,241	\$ 1,679,688	\$ 129,207	\$ 2,584,135
Total Funding	Funding	\$ 10,003,700	\$ 20,136,390	\$ 11,741,844	\$ 41,881,933

The current versions of the **Cost Plan Estimate (Appendix C)**; **Development Construction Packages (Appendix E)** and the **Architects Statement (Appendix F)** are included in this submission as appendices.

It is important to note that nearly 50% of this figure is to install essential engineering infrastructure on the “greenfield” site and to construct the intersection with the Great Northern Highway and the “connector road” to the AMHC site entry point. The East Pilbara Shire has agreed to fund the connector road (\$1.2M) subject to further development funding.

We understand that a robust plan with strict governance would need to be agreed with the NIAA as part of this process and this may include conditional funding based on securing other sources of funds from the WA Government and major Australian and global corporations. We also understand that there will necessarily be a period of due diligence and preparation, including Commonwealth incorporation and the reinforcement of strong and robust corporate governance, to ensure that this partnership is set-up to succeed and the use of funds is optimised (value for money).

For AMHC, additional *potential* funding include:

Source	Type	Purpose	Estimated Contribution
Department of Communities (WA)	Annual	Ongoing Staff Operational Costs over five years	\$1-2M
Department of Corrections (WA)	Annual	Ongoing Facility Operational Cost over five years	\$1-2M
Shire of East Pilbara	Once-off	In Principle Agreement to allocate funding for the connector road	\$1.2M
Shire of East Pilbara	Once-off	The value of the portion of land on Reserve 44774.	>\$750K
Lotterywest	Once-off	AMHC fit out and office equipment such as computers, desks, photocopier etc. and White goods for houses.	\$1.5M
Serco	Once-off	Security	\$500K
Aboriginal Males Healing Centre	Ongoing	Pro-Bono and in-kind support for provision of some clinical staff and infrastructure specialists.	\$2-3M plus

As stated above, it is envisioned by AMHC that the WA Government and interested corporations fund the Run, as AMHC will redirect State criminal justice and custodial costs.

By way of a State Government funding analogy, Victoria is taking a pro-active approach, especially in response to the recent Royal Commission on Family Violence. The 2019/20 State Budget provided \$1.6 million in ongoing funding to support the delivery of perpetrator programmes and interventions, including trials of community-based perpetrator interventions for people using violence from diverse communities.

In addition, the Victorian Government provided \$8.493 million to the Department of Justice and Community Safety (DJCS) over 2 years to evaluate perpetrator interventions in the justice system; and \$6.4 million to DJCS to deliver Men’s Behaviour Change Programs to perpetrators in Corrections Victoria. This funds up to 426 places per year, including placements allocated to Dardi Munwurro for Aboriginal specific men’s healing and behaviour change work. There is also increased funding and

The portfolio of designs/drawings and “fly-through” video is available for review by the NIAA. AMHC fly-through may be viewed by the public at <https://www.amhc.org.au/design-build>. The following diagram demonstrates the magnitude of the build.



AMHC has had considerable national and WA media over the years.

Description	Media / Conferences
<i>‘Alcohol is killing us’: Banned drinkers register on the cards for the North West’</i>	ABC News, 2020
<i>‘Justice reinvestment: building communities not prisons’ panel discussion.</i>	Devon Cuimara, CEO on the Panel Committee for Economic Development of Australia (CEDA). 2019

Description	Media / Conferences
<i>Overcoming Indigenous Family Violence Conference. AMHC led workshop on on-country healing.</i>	Overcoming Indigenous Family Violence Conference, 2019
<i>'Remote program takes wholistic approach to end family violence'</i>	SBS / NITV (TV segment on 'The Point'), 2018
<i>AMHC Film presentation 'Healing Not Incarceration'</i>	Presented by Geoff Barker at International Urban Design Conference, Hobart 2019.
<i>PowerPoint presentation and Paper 'Cross Cultural Engagement – the AMHC, Newman WA'</i>	Presented by Geoff Baker at International Association of Public Participation Conference, Sydney 2019
<i>PowerPoint presentation 'Making a Contribution'.</i>	Presented by Geoff Barker to IAES Curtin University, Perth 2019
<i>PowerPoint presentation and Paper 'Healing Not Incarceration – The Aboriginal Males Healing Centre Newman WA'</i>	Presented by Devon Cuimara and Geoff Barker at Developing North Australia Conference, Karratha 2019
<i>PowerPoint presentation and Paper 'A Collaborative Project Development Approach: Community as Partners in Development'</i>	Presented by Devon Cuimara and Geoff Barker at Developing North Australia Conference, Alice Springs, NT 2018
<i>PowerPoint presentation and Paper 'Collaboration Methodology - A Pathway to Sustainable Projects'.</i>	Presented by Geoff Barker at International Urban Design Conference, Sydney 2018
<i>'Miralarringu – 'It Becomes Visible'. Launch of the Aboriginal Males Healing Centre 'Our Vision' '</i>	Public launch, Arup Offices, 2018
<i>'Women at heart of big week'</i>	Broome Advertiser, 2018
<i>'Unconventional family violence program wins funding in Indigenous communities'</i>	ABC News, 2018
<i>'Devon's anti-violence vision gains ground'</i>	National Indigenous Times, 2018
<i>'WA centre aims to break violence cycle'</i>	National Indigenous Times, 2017
<i>'Elders rally for first family violence rehab centre in Pilbara'</i>	The West Australian, 2017
<i>'City agrees to healing centre site'</i>	North West Telegraph, 2017
<i>'Aboriginal Males Healing Centre'</i>	Newman News, 2017
<i>PowerPoint presentation and paper 'People as Partners in Development – not merely recipients of development'.</i>	Presented by Geoff Barket at International Urban Design Conference, Surfers Paradise, 2017
<i>'Sons and Fathers' Conference. An AMHC initiative.</i>	An AMHC conference run in 2017. A follow-up is planned for 2021.
<i>'Pilbara centre for Indigenous domestic violence perpetrators planned'</i>	ABC News, 2016
<i>'A new service for men'</i>	The Morning Bulletin, 2016

2. Needs analysis

Family violence in First Nations communities is well documented as are the many mainstream approaches that seek to tackle this serious problem. While there is an increasing focus on the need for more services to address the behaviours of perpetrators of family violence in order that they move from abusive to safe and respectful behaviours, there is still some way to go in terms of culturally specific approaches that are effective in working with First Nations men.

Family violence is the customary term for violence between First Nations people as it covers violence in extended family and kinship relationships. Family violence is a critical policy issue, placing a huge burden on communities, especially women and children.

Family violence occurs at higher rates in First Nations communities than in the general population and must be understood as both a cause and an effect of social disadvantage and intergenerational trauma. The Australian Burden of Disease Study found that intimate partner violence contributed 1.6% to the total burden of disease for Indigenous Australians. This was 5 times the disease burden rate for non-Indigenous Australians. National survey data shows that nearly one-quarter of the First Nations population aged over 15 reported they were a victim of threatened or actual violence of any type in the previous year. Indigenous Australians are also more likely to be re-admitted to hospital as a result of interpersonal violence than other Australians.¹³

The experience of family violence in First Nations communities across Australia, particularly in regional and remote areas, regularly captures the attention of the Australian and global¹⁴ media. The nation is familiar with the bruised and battered images of First Nations women and children and, sadly, most Australians know that the occurrence of violence in First Nations communities is disproportionately high compared to the Australian population.

The impact of family violence on children is profound and lifelong. It severely affects both children and their carer, leading to poor physical and mental health, and is a leading cause of homelessness. The effects are particularly severe for Aboriginal children since Aboriginal mothers are much more likely to die from homicide (nearly 17.5 times) and suicide (3.5 times) than non-Aboriginal mothers¹⁵, and are 35 times more likely to be hospitalised due to family violence¹⁶.

Aboriginal mothers play a central role in the cultural and spiritual development of Aboriginal children in addition to being the primary caregiver, and a mother's health and presence in the family are important predictors of her children's health.

For Aboriginal children, maintaining connection to family, community and culture is fundamental to ensuring their wellbeing. Yet, 1 in 18 First Nations children are living in out-of-home care (11 times the rate for non-Indigenous children) and 15% received child protection services (8 times non-Indigenous children). This is on the rise.¹⁷

It is important to note that research suggests there is significant underreporting of sexual and physical assault among Aboriginal women – approximately 88 per cent of violence experienced by Aboriginal women is not disclosed to police¹⁸.

¹³ <https://www.aihw.gov.au/getmedia/c0e5bdde-e9c4-4a1f-808e-256191835cde/ctgc-rs37.pdf.aspx?inline=true>

¹⁴ For example: 'Indigenous mums in Australia face high murder rate', BBC News, 2016: <https://www.bbc.com/news/world-australia-36781287> and 'Through American Eyes', New York Times, 2017: <https://www.abc.net.au/news/2017-06-27/australian-race-relations-through-american-eyes/8650232?nw=0>

¹⁵ Fairthorne, J., Walker, R., de Klerk, N. *et al.* Early mortality from external causes in Aboriginal mothers: a retrospective cohort study. *BMC Public Health* 16, 461 (2016). <https://doi.org/10.1186/s12889-016-3101-2>. The higher homicide and suicide rates are often connected to sexual abuse and intimate partner abuse. A substantially larger proportion of children born to Aboriginal mothers experience maternal loss (5.4%) when compared with other children (1%) and, on average, the children suffer this loss in their formative years of development (under 5). Maternal loss at this age can have a profound impact on the social and emotional well-being of children.

¹⁶ Australia's National Research Organisation for Women's Safety, May 2014, Fast Facts on Indigenous Family Violence.

¹⁷ Australian Institute of Health and Welfare, Australian Government, The Aboriginal and Torres Strait Islander Child Placement Principle Indicators 2018–19

¹⁸ Australian Institute of Criminology 2003, Non-recording and Hidden Recording of Sexual Assault.

2.1 Intergenerational cycles of violence

Although family violence occurs across cultural and socio-economic groups, the data suggests that the impact on Aboriginal Australians is significantly higher than on non-Aboriginal Australians. Intergenerational trauma from dispossession and the injustices of the past has resulted in Aboriginal people being considerably over-represented as users, and victims, of family violence.

The impact of family violence on women and children is profound. Women experience physical and emotional trauma, depression and anxiety, homelessness and poverty. Children suffer from inadequate brain development and learning problems; and are likely to think and act differently to children that have been raised in a safe and secure environment. The long-term impact is dysfunction and disadvantage – poor health, substance abuse, self-harming, suicide, anti-social behaviour, low participation in employment, alcohol and drug abuse and criminal activity. Family and community networks are disrupted; leading to a loss of culture, identity and connection to the land.

Family violence creates intergenerational cycles in which trauma and the propensity for violence is passed from parent to child. For families and communities caught up in this cycle, violence can become normalised and an expected part of family life.

2.2 Current programs not effective

In serious instances of family violence, the courts will, and should, respond with appropriately severe sentences. However, the safety and well-being of victims is paramount, and in less serious cases the safety of victims in the medium to longer term is not always improved by a custodial sentence. Incarceration simply removes the men from the community for a period and returns the men to the community without effective rehabilitation.

The impact of incarceration on individuals, families and communities is enormous. Those who have been incarcerated and their families are at greater risk of poor housing, financial stress, low levels of educational attainment, poor employment prospects and poor health and wellbeing. For Indigenous people, connection to culture serves as a protective factor and helps build resilience and strength in identity. The social exclusion and isolation through incarceration may lead to a loss of connectedness to culture.

Unfortunately, the delivery of culturally aware and responsive programs has been found to be intermittent in prisons. There is a clear need for both cultural strengthening services that help cultivate a strong Indigenous identity and regular opportunities to participate in cultural activities.

There are intervention programs focussed on family violence offered in prisons and in the community. The Department of Justice delivers several programs. The *Stopping Family Violence Program* targets attitudes and beliefs that support abusive behaviour and violence; but is largely delivered in metropolitan areas to non-Aboriginal offenders. *Not Our Way* targets the factors related to family violence offending for Aboriginal men; but is not delivered in the Pilbara. These programs, albeit important, are also not long-term on country residential programs for Aboriginal people.

The concept of residential rehabilitation is not new. In Metropolitan WA there is Breathing Space. Breathing Space provides participants with approximately six months accommodation while they undertake an intensive therapeutic program. Breathing Space is necessary but is not driven by the local community, is not tailored for Aboriginal clients and is not on country. Breathing Space is a WA organisation that we will positively engage with, in an Aboriginal context.

There are also other programs across Australia including *Dardi Munwurro's Ngarra Jarranounith Place* (Victoria); *Tangentyere Council's Marra'ka Mbarintja Men's Behaviour Change Program* (Northern Territory); *Rekindling the Spirit's Tweed Yarn up Group for Aboriginal Men* (NSW), and *Mibbinbah's (Tugan) Be The Best You Can Be Program* (Queensland) among others. Many of these are not long-term residential programs. Given their importance to the community, we will also be engaging with these organisations to build upon their experiences, data and insights.

The overwhelming research and the Commonwealth Government's Family and Domestic Violence Strategy, acknowledges the need to tailor all aspects of family and domestic violence support services to the First Nations communities it seeks to support. This includes tailored information and outreach services, risk identification processes, training and support and healing programs. According to the National Plan:

*The legacy of past failures and the need for new collaborative approaches to preventing violence against Indigenous women and that sustainable change must be built on community participation.*¹⁹

It is of strong interest to AMHC that, in November 2019, the Australian Government announced a new approach to engagement with Indigenous communities. The Government is implementing a policy of co-design to develop an Indigenous voice – a process that is a genuine partnership between government and Indigenous Australians. AMHC is supportive of this engagement and will align with the principles underpinning these policies.

2.3 The Pilbara

Family violence is a major community issue in the Pilbara.

According to the WA Police²⁰, over the last 10 years family related assault offences in the Pilbara have increased 195% (non-family assaults have stayed roughly the same) and family related threatening behaviour offences have increased by 387% (non-family threatened behaviour increased by 34%). This increase is substantially higher than metropolitan WA.

Western Australian Health data²¹ shows that assault related hospitalisations are 198% higher in the Pilbara as compared to all of WA. Although this health data doesn't specify First Nations family violence related hospitalisations, the data strongly shows the high incidence and impact of violence in the Pilbara as compared to all of WA.

¹⁹ Australian Governments, National Plan to Reduce Violence against Women and their Children: *Safe and free from violence* (2011)

²⁰ WA Police: <https://www.police.wa.gov.au/Crime/CrimeStatistics#/start> extracted 24 October 2020. 2019 compared to 2009.

²¹ WA Health Epi Data by District (2009-14): <https://data.gov.au/dataset/ds-dga-cda1f39a-f163-4f6d-91bc-b1ef29234f82/distribution/dist-dga-97200004-e6db-4b2f-a1a8-5c89446e847a/details?q=> extracted 5 December 2020. ASR per 100,000. Average numbers over 2009-14.

The Newman's Women's Shelter shared data with AMHC. Over an 18-month period to 2019, NWS recorded 216 incidences of verbal and emotional abuse, 151 incidences of physical abuse, 140 incidences of financial abuse, 29 incidences of sexual abuse, and multiple incidences of other forms of abuse (elderly, social, stalking, spiritual and image based). The NWS recorded that 73% of victim's children *always* witness the abuse and 26% *sometimes* witness the abuse. 88% of victims indicated that it would be better if the violent partner left the house and mother and children remained in the house. Similarly, 84% indicated it would be better for the children to remain in the home. NWS has provided a letter to support to the AMHC included in the appendices.

The Pilbara Family and Domestic Violence Network (PFDVN) has shared Stakeholder Interviews with the AMHC. The dominant themes in these interviews were a greater need for men's programs and perpetrator programs; community education and awareness; and a whole-of-family wrap around approach to solutions. The PFDVN brings together domestic violence service providers across the region to enable collaboration at a high level. According to PFDVN:

*"The need for place-based programs for men and perpetrators. The Aboriginal Men's Healing Centre in Newman is a good example of what is needed."*²²

The Pilbara is the "powerhouse" of the Australian economy

The Pilbara makes a significant contribution to the national wealth. Pilbara iron ore and liquefied natural gas industries are valued at over \$70 billion, representing more than 70% of mineral and energy production in Western Australia. In addition, the Pilbara attracts tourists through its unique and internationally recognised natural features, as well as a high number of business travellers.

According to the Australian Government Office of the Chief Economist²³, economic activity in the Pilbara is significantly on the rise. Australia's resource and energy exports reached a record \$293 billion in 2019–20. A substantial part of the earnings will come from the Pilbara.

In late April, BHP announced plans to increase its export capacity at Port Hedland from 290 million tonnes a year to 330 million tonnes. These plans reflect a general expectation that Chinese steel production will remain robust, with a peak expected around 2025.

New output is expected from significant projects in the Pilbara region of Western Australia, including BHP's South Flank project (from 2021), Fortescue's Eliwana project (from 2021), and Brockman's Maraillana mine (from 2021). This will expand on existing capacity and substitute for falling output elsewhere in the region, where some existing mines are approaching depletion.

According to Regional Development Australia, the scale of investments in the near and medium term are substantial and will open up business opportunities for small and medium size enterprises as well

²² <https://newmanfutures.com.au/the-pilbara-family-and-domestic-violence-network/> as at 5/12/20

²³ 'Resources and Energy Quarterly', Department of Industry, Science, Energy and Resources, 2020
<https://publications.industry.gov.au/publications/resourcesandenergyquarterlyjune2020/documents/Resources-and-Energy-Quarterly-June-2020.pdf>

as larger organisations. The total commitment is estimated to be some \$16 billion, with possible investments of about \$70 billion over the medium term.²⁴

The large iron ore miners will be spending about \$25 billion on replacement mines that will also expand capacity slightly and will extend the life of their Pilbara iron ore operations, leading to increases in construction and operational work forces. About \$9.5 billion will be spent in the next four years including BHP Billiton Ltd's \$4.7 billion South Flank mine, Fortescue Metals Group's \$1.7 billion Eliwana development and Rio Tinto's planned \$3.5 billion spend on a mine at Koodaideri. South Flank will create about 2,500 construction jobs, Eliwana about 1,900 and Koodaideri about the same number.

There will also be minor extensions to existing mines, spending to improve the capacity and performance of the thousands of kilometres of rail lines that cross the Pilbara, and at least \$3 billion worth of structural, mechanical piping and electrical work needed to keep increasingly sophisticated processing plants running. For example, Rio Tinto will spend \$1.5 billion a year maintaining its iron ore operations over the next four years.

The Pilbara is home to 31 Aboriginal groups

The area around Newman is located on Nyiyaparli Country. Nyiyaparli people have very close cultural and family links with the Martu people from Manyijarra and Kartujarra Country and this has seen these latter language groups be given cultural permission to live in Nyiyaparli Country.

Occupation of Nyiyaparli land by its traditional owners can be verified to at least 41,000 years (the second oldest on record in Australia.) The Native Title representative group Karlka Nyiyaparli Aboriginal Corporation (KNAC) has entered into multiple land use agreements with BHP, Rio Tinto and Fortescue Mining Group.

AMHC has strong links with the Nyiyaparli people and KNAC. Nyiyaparli Elders sit on an AMHC Elders Council.

A lack of programs in the Pilbara for men that use, or are at risk, of using violence

It is well known that there is a lack of services and programs in the Pilbara for Aboriginal men who use or are at risk of using violence. There are currently no services in the Pilbara which assists victims of family violence to remain safely in their homes. It is important to acknowledge that there are important domestic violence services in Newman such as the Newman Women's Shelter and the Pilbara Community Legal Service; but these do not focus on men's rehabilitation.

The only culturally tailored residential treatment centres in the Pilbara are targeted at alcohol and drug addiction. For example: *Turner River Residential Rehabilitation Centre*²⁵ and the *Ngnowar Aewah Aboriginal Corporation*²⁶. Although these are effective and necessary, they do not focus on family violence nor the rehabilitation of male perpetrators. We recently became aware of a *Breathing Space* pilot rehabilitation program.

²⁴ 'The Future Economic Environment Prospects for the Pilbara', Australian Government, <http://www.rdapilbara.org.au/resources/site1/General/Publication%20Reports/The%20Future%20Economic%20Environment%20Prospects%20for%20the%20Pilbara.pdf>

²⁵ <http://www.yaandina.org.au/services/pilbara-drug-and-alcohol-rehabilitation-service/>

²⁶ <http://ngnowar-aerwah.com/>

We will work closely with, collaborate with and provide support to these critical organisations as part of the implementation of AMHC. We will also engage with these organisations to mutually share and understand valuable insights and data.

At the coalface, Senior Sergeant Dean Snashall (formerly of the South Hedland Police) noted to ABC News:

*“There is a clear gap in services for men who are involved in domestic violence, alcohol and drug abuse”.
[In reference to our proposed healing centre] “A facility like this is the light at the end of the tunnel.”²⁷*

Acting Superintendent Ricky Chadwick (formerly of the Pilbara District) said in The West Australian newspaper that domestic violence was a “significant problem” in the region. He said it was a difficult field for police and human services because “the criminal justice system is not the silver bullet” and solutions including a greater focus on perpetrator rehabilitation is required.²⁸

Pilbara region includes the adult custodial facility of Roebourne Prison. We anticipate that many custodial referrals would be from this facility. In 2016, Roebourne Regional Prison had 166 offenders in prison and 140 of those identified as Aboriginal.

The Newman Police and Newman’s Women’s Shelter have both provided a letter of support. These are included here as appendices.

2.4 The economic cost

The implementation of AMHC will require a sizeable capital investment. This cost must be considered against the economic and social cost of family violence and incarceration, and the clear return on investment of AMHC program.

A large volume of work has been undertaken by governments, economists and peak bodies over recent years to document the costs of family violence. Recently commissioned work includes PricewaterhouseCoopers’ (PwC) report A High Price to Pay (2015) and KPMG’s report The Cost of Violence against Women and Children (2016). These highlight the high and increasing cost of violence against women and show the large potential savings and other economic and social benefits to be gained from primary prevention strategies.

The cost of family violence is disturbingly large. According to accounting firms PWC and KPMG, the impact of family violence on the Australian economy is \$22 billion each year. KPMG estimates that a further \$1.2 billion may be added because of underreporting by Aboriginal women. PWC forecasts that if no further action is taken to prevent violence against women, costs will accumulate to \$323.4 billion over 30 years.

²⁷ ‘Pilbara centre for Indigenous domestic violence perpetrators planned’, ABC News, September 2016: <http://www.abc.net.au/news/2016-09-14/centre-for-indigenous-domestic-violence-perpetrators-planned-wa/7843812>

²⁸ ‘Domestic violence on the rise’, The West Australian, 2017: <https://thewest.com.au/news/pilbara-news/domestic-violence-on-the-rise-ng-b88380119z>

First Nations women are at a significantly higher risk of experiencing violence over the course of their life. Underreporting of physical and sexual violence against First Nations women may result in an additional \$1.2 billion in costs.

According to PWC's Indigenous Incarceration report²⁹, one in five Aboriginal children have a parent in prison, and despite representing only three per cent of the Australian population, indigenous Australians account for 27 per cent of the adult prison population. The report found 55 per cent of children and young people in detention are indigenous. This costs the Australian economy \$8 billion a year in direct and indirect costs. Annual savings to the economy of nearly \$19 billion could be achieved by 2040 if the gap between Indigenous and non-Indigenous rates of incarceration were closed.

The potential economic savings to the state, the community and the individuals involved from intervening to prevent family violence and recidivism is enormous.

AMHC commissioned an actuarial report to determine the direct economic benefit of AMHC program. The actuaries estimated that AMHC will bring a total of \$45 million of economic benefits flowing from reducing incarceration, recidivism, reliance on government support, use of hospitals, the number of women seeking refuge and court costs, and increased productivity. This investment analysis is set out further in section 5 (A strategic investment – the business case and value for money).

2.5 Family violence leads directly to offending by women and homelessness

An overwhelming majority of women in prison are victims of family violence, with reports suggesting 70-90% of incarcerated women have been physically, sexually or emotionally abused as children or adults.³⁰

Recent data³¹ shows that the number of women being incarcerated is increasing at a significantly higher rate: 85% over the past 10 years. Indigenous women account for much of that growth. As of June 2018, there were 3,625 women in custody, up 10 per cent in just one year. A third of female prisoners (34%) were First Nations women, despite First Nations women comprising just 2% of the broader female population. 37% of all female prisoners were on remand, or un-sentenced, and almost half (47%) had been incarcerated previously. This is 64% for First Nations women.³²

Family violence is also a massive contributor to women's homelessness and other behavioural issues. These, in turn, lead to offending and incarceration.

"Family violence can also be the factor that sets people on a path towards a range of other behaviours and issues that can contribute to offending: for example, alcohol or other drug abuse — often a way of self-medicating or coping with trauma — mental illness, even gambling, which can be sought as respite from abuse." ³³

²⁹ PWC, Indigenous Incarceration: Unlock the Facts, 2017

³⁰ Wilson M, Jones J, Butler T, et al. Violence in the Lives of Incarcerated Aboriginal Mothers in Western Australia. SAGE Open. January 2017. doi:10.1177/2158244016686814

³¹ <https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4517.0Main+Features12018?OpenDocument>

³² ABC News, 'Women's Prisons Full of Domestic Violence Victims', 2019: <https://www.abc.net.au/news/2018-12-20/womens-prisons-full-of-domestic-violence-victims/10599232?nw=0>

³³ <https://www.abc.net.au/news/2018-12-20/womens-prisons-full-of-domestic-violence-victims/10599232?nw=0>

According to the Australian Housing and Urban Research Institute (AHURI), in 2017–18, First Nations people comprised 25% of Specialist Homelessness Services (SHS) clients. Within that group, family violence was the second most common reason for homelessness (25%) and 22% were children aged under 10 years.³⁴

2.6 First Nations women in rural and remote communities

Another critical dimension for Indigenous women's experiences of violence is geographical remoteness. The proportion of Indigenous clients who sought assistance due to family violence rose with increasing remoteness (from 32% in major cities to 46% in very remote areas). There are several issues that are specific to the experience of violence for women living in rural and remote communities:

- Geographical isolation and communication difficulties. Delayed response times due to distances and limited services.
- A lack of Indigenous specific shelters coupled with reluctance of hotel/motel staff to assist Indigenous women.
- Heightened concerns relating to privacy and confidentiality.
- Lack of services especially culturally appropriate ones.
- The dominance of patriarchal ideologies and colonial mentalities amongst police in regional and remote locations.
- Isolation as a compounding aspect of family violence that may be exploited by perpetrators.
- Higher rates of alcohol consumption.
- Amplification of risk due to the impact of natural disasters, economic downturn, and high rates of unemployment.

Indigenous women in regional towns may experience racism from non-Indigenous people in mainstream services and there may be few culturally secure and appropriate services, further compounding the experience of Indigenous victims.

3. Pathways to change

3.1 Our Vision and Outcomes

It is our vision that all Aboriginal women and children live safe and healthy lives free of family violence.

AMHC will contribute to this vision by providing a service, developed and guided by the Martu peoples and targeted to Aboriginal men perpetrating family violence in the remote Pilbara region of Western Australia. The Martu peoples are the traditional owners of a large part of central Western Australia, extending from the Great Sandy Desert in the North to around Wiluna in the South; they share a common lore, culture and language to the Nyiyaparli on whose land AMHC facility is to be constructed

³⁴ https://www.ahuri.edu.au/_data/assets/pdf_file/0023/45239/PES-320-The-missing-link-housing-and-Indigenous-domestic-and-family-violence.pdf

and, as a result of a formal custodial agreement between the Nyiyaparli and Martu, are the key cultural bosses for AMHC.

AMHC aims to reduce the incidence of family violence in the Pilbara region over the longer term, with an initial focus in the Pilbara town of Newman. AMHC is community-driven and supported, and seeks to work with Aboriginal men perpetrating violence, providing holistic treatment and support that is culturally informed to help stop the violence.

AMHC is an Aboriginal controlled organisation with a broad community-based Board and Elders Council. AMHC will be located on Nyiyaparli land, incorporating integrated clinical services consisting of:

1. A secure residential healing centre and program (**Residential Centre**).
2. A holistic outreach healing service for prevention and early intervention (**Outreach Services**).
3. Integrated family and other support services (**Integrated Family and Support Services**).

This submission provides an overview of the program. Any additional supporting materials required by the NIAA can be made accessible to the NIAA.

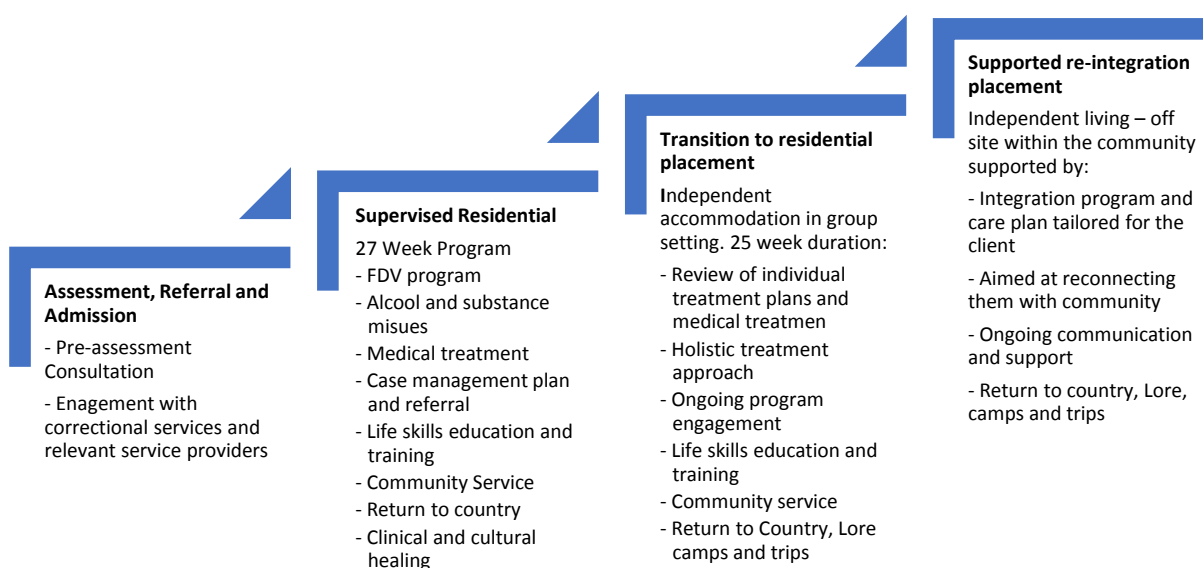
3.2 Residential Centre

AMHC will offer a 12-month residential healing program incorporating clinical care and rehabilitation underpinned by Aboriginal culture and lore. The program will be delivered on country and the perpetrators will reconnect with their culture. An extended program will give the men time to develop life skills, a sense of responsibility, meaningful employment, good physical health and emotional and spiritual strength. The program will, in time, enable the men to reconnect with family and the community.

Although most AMHC participants will be residential and will be referred through criminal justice process, there will be opportunities for Aboriginal men to attend on a voluntary and non-residential basis through related on-site programs and training.

Many residents will have endured periods of incarceration or hospitalisation, and experienced poor living standards and physical and mental trauma. The secure residential centre will provide time away from a custodial or correctional system. These men will need continual monitoring.

Yirna Jukurrpa Treatment Model



During the program, residents will be under the supervision of clinicians (including clinical psychologists) and cultural leaders. The residents will undergo regular health, medical and dental checks and follow-ups. Prior to the end of the program, a comprehensive 'healing pathway' exit plan is tailored to meet the individual's needs with support designed to enable them to remain in control of their anger and their 'controlling ways', remain healthy and sober, and reconnect with their community and families.

The program protects the victims or potential victims during the rehabilitation and reintegration process. The community engagement model underpinned by Aboriginal culture and lore will deliver culturally responsive, community-informed (including victim-informed) intervention. Further, it is envisaged that AMHC will participate as a cultural advisor and stakeholder in broader family violence diversionary strategies in the Pilbara and, in time, nationally.

AMHC will specifically tailor the program for adult Aboriginal men who are perpetrators of family or community violence, or who are at risk of using violence. AMHC will only receive offenders who are professionally assessed as appropriate in terms of risks, needs and responsivity. It is important to note that AMHC, as an Aboriginal Community Controlled Organisation, will not service non-Indigenous perpetrators, female perpetrators or sexual offenders.

The program is intended to interface with the criminal justice and correctional systems and various local service providers at many points. As currently scoped, the operational AMHC model is considered predominately for mandated residents:

- Community sentenced offenders who are eligible for programs for family violence.
- Sentenced offenders who are in through-care and transitioning to the community (but not those who are still in custody).
- Remandees eligible for support and reintegration services.

AMHC has developed policies and procedures (continually evolving) and these will adhere to strict clinical and cultural governance principles. The clinical principles are based on the National Outcomes Standards for Perpetrator Interventions³⁵, and the Western Australian Practice Standards for Perpetrator Intervention³⁶. The Aboriginal cultural governance principles are the Guiding Cultural Principles developed by Dr Tracy Westerman and are set out in the appendix titled Cultural Review of Policies and Procedures, Development of Cultural Guiding Principles authored by Dr. Westerman for AMHC. See also section 6: Accountability, Governance and Risk for more information on AMHC's clinical, cultural and corporate governance.

It is intended that the Western Australian Corrective Services remain responsible for assessment, case management and referrals to service providers regarding participants, consistent with their statutory role.

As an Aboriginal led organisation grounded in Aboriginal culture and lore with expertise in preventing family violence, AMHC will be uniquely placed to provide reintegration and support services to Aboriginal offenders whether in remand or the community. However, the unique and ground-breaking aspect of this is in the residential healing program, and the greatest opportunities for rehabilitation exists where it is possible for offenders to participate in the full 12-month residential program.

AMHC acknowledges that the success of the reintegration and rehabilitation depends on a robust assessment processes (including assessment tools and methodologies) and ongoing evaluation and continuous improvement. AMHC continues to consult key stakeholders in the criminal justice and custodial system to ensure alignment and buy-in. We will also work "lock step" with the Australian Government to ensure the outcomes and performance measures are clear, meaningful and measurable.

3.3 The integration of Aboriginal culture and lore and clinical best-practice

Modernity presents a difficult challenge for many Aboriginal men and their sustaining of Yirna Jukurrapa (men's dreaming). Aboriginal men often find it hard to get non-Aboriginal people to understand and respect their cultural values. Programs that are imposed without the development of community relationships and which are not culturally 'safe' places, prove difficult to develop and sustain.

It is recognised that programs to tackle the devastating impact of family violence in Aboriginal communities are often not effective due to this lack of 'cultural competence'³⁷. Cultural competence means behaviours, attitudes and policies that come together to work effectively in cross-cultural situations.³⁸

³⁵ https://plan4womenssafety.dss.gov.au/wp-content/uploads/2015/04/nospi_coag_paper.pdf

³⁶ <https://www.dcp.wa.gov.au/CrisisAndEmergency/FDV/Documents/2015/PracticeStandardsforPerpetratorIntervention.pdf>

³⁷ Australian Government, Australian Law Reform Commission, Pathways to Justice—An Inquiry into the Incarceration Rate of Aboriginal and Torres Strait Islander Peoples, December 2017

³⁸ Council of Australian Governments, Prison to Work Report (2016)

It is widely accepted that connecting to culture should be a key component of Indigenous programs and is 'significantly associated with non-recidivism'. There is clear recognition of the importance of culturally safe interventions, 'which centre on culturally based forms of identity, belonging, stability and protection which create meaning and connection for Aboriginal peoples. This is viewed as the central element in building resilience, meaning and purpose for First Nations people across the entire community, not solely in the criminal justice system.'³⁹

Underpinning the development and implementation of AMHC model is Aboriginal Culture and Lore as the key healing element. Controlled by Aboriginal people, AMHC will be developed and delivered by Elders and offers an opportunity for Aboriginal men who use violence to remain on country and reconnect with their culture.

In remote areas like the Pilbara, English is often the second language and men may not be familiar with a clinical environment. Accordingly, AMHC:

- Identifies, acknowledges and consults with senior lore men and community male Elders.
- Gains local knowledge from men's groups.
- Plans services with input from local men.
- Involves outreach services in the community.

Aboriginal men can find it hard to open up and discuss personal and sensitive issues, particularly family violence and sexual abuse matters. AMHC will offer a safe, private and comfortable environment that supports open and free dialogue, where more care can be taken in approaching sensitive issues.

3.4 The location of the residential healing centre

The proposed site for AMHC is on a parcel of land on the Great Northern Highway opposite Newman Airport and 10km from Newman town centre. The East Pilbara Shire Council has been a strong supporter and ally of AMHC. After an extensive search for a suitable site by Shire staff and AMHC team, the Shire has generously transferred a parcel of land previously held by the Shire to AMHC. The value of the land is yet to be established by the WA Valuers General, but an initial estimate is >\$750,000.

The Aboriginal residents of Newman generally identify as either Nyiyaparli or Martu and include other First Nations language groups from across Australia. The site is on Nyiyaparli land and was selected for its cultural significance. Aboriginal Elders worked in close collaboration with our architects and engineers to design the residential centre and healing environment that will enable the men to develop a connectedness with the land.

Remarkably, an ancient path for Aboriginal men passes through the site. This path is recognised as a male ceremonial pathway. This was raised as an important cultural connection to respect, recognise and interpret in the design of the centre and the centre's program. Nearby Round Hill is an integral reference point for the program along with other culturally significant sites such as stockyards built by Aboriginal descendants and a nearby important meeting place.

³⁹ The impact of indigenous cultural identity and cultural engagement on violent offending; Stephane M. Shepherd, Rosa Hazel Delgado, Juanita Sherwood, and Yin Paradies; 2017

This informed discussions around the use of artwork, motifs and cultural materials; and influenced the location and layout of the buildings, the form and design of the buildings and the finishes and landscape. The dreaming path passes through the site – beginning near the entry into the centre and continues to where the ancient path changes direction. It is this point that was selected as a gathering space. A pathway will then head in a southerly direction (following the ancient path) to the “exit point” of the centre – through which residents who have completed their program pass back to their families and the community.

There are also more recent historical sites associated with past pastoral station activities where many of the Elders and their family members worked; as well as the remnants of an early government ration depot. The Elders wish to protect, preserve and conserve these sites.

3.5 Outreach Services

In 2018 AMHC established a drop-in counselling and support centre for the immediate benefit of the community. This drop-in centre is located at the Parnpajinya Aboriginal Community Reserve, a town-based reserve in Newman. Parnpajinya is presently characterised by overcrowded and rundown housing. The drop-in centre is one of the first initiatives to revitalise that town reserve.

It is envisaged that this will grow into a community-based, walk-up therapeutic counselling in-reach and outreach service working with men as perpetrators of family violence and, where safe to do so, women and children as victims.

It is proposed that, in line with the opening of AMHC residential program, Parnpajinya town-based reserve could also be a safe, secure and sacred place for women and their families escaping family violence – notably the partners and family of the men undergoing healing at AMHC.

3.6 Integrated Family and Support Services

On site, AMHC clinical and architectural designs include a safe communal and family area designed specifically for use by the residents and their families in a safe, secure and private way.

The program will also offer other family services that complement the Residential Program – holistic services that aim to keep the women and children safe and support the families.

‘Safe Stay’

In addition to the core residential program, AMHC will provide a ‘safe stay’ (safe for the victims) place for men who have perpetrated violence and are subject to police orders e.g. 72-hour Family Violence Restraining Order or FVRO⁴⁰. These short-term orders do not allow contact with victims (in this case the women and children) who have been subject to the violence. The intent is to ensure families can remain safely in their home while the preparator has a place to reside while other justice processes remain ongoing. It is proposed that this service could be run out of the Parnpajinya Aboriginal Community Reserve.

⁴⁰ <https://www.legalaid.wa.gov.au/find-legal-answers/restraining-orders/restraining-orders/police-orders>

If the perpetrator chooses the 'safe stay', police will transport the individual to Parnpajinya. The clinical staff will assess safety (factoring aggression and intoxication) and suitability for the short stay. If the individual is deemed suitable, a wellbeing and needs assessment will be undertaken as part of an 'intake' process. Meals and a room will be provided until the order expires and the process concludes. Violence education and counselling will be provided by AMHC clinical team.

Should the individual decide to leave the short stay while the order is place, centre staff will explore other options such as family and extended networks. Police and the victim will be advised in order to ensure safety and well-being, and to allow time to assess safety in the home and explore other options (supported by AMHC team and other community organisations.)

Women's and Children's Services

A Women's Service will provide safety planning, information, advice and emotional support to women partners and ex-partners of men referred to AMHC Program. The women can participate in a Women's Core Profile Support Group. It will be overseen by dedicated Women's Workers, who aim to reduce the risk to women and their children and improve women's social and emotional wellbeing. In contrast with the men's program, the Women's Service will be voluntary. Women do not have to accept the support offered. In this space, AMHC will work closely with the experts including local community organisations and government agencies.

Similarly, a Children's Service aims to ensure that the needs of the children are respected, and their rights upheld. It is not the aim to necessarily work with children directly; rather we will ensure rights and needs are understood and considered within AMHC program. Again, we will work closely with the experts and comprehensive service providers including local community organisations, government agencies and advocacy groups such as Save the Children. AMHC will deliver the service aimed at perpetrators of family violence and will work in collaboration with these other community sector organisations.

Allied Services

AMHC considers community outreach a key component of effective support services for those impacted by family violence. Clinical staffing is comprised of four members on site. One male support person and night counsellor will be in permanent residence. The outreach team will consist of four volunteers, two women and two men. Highly qualified and culturally educated security staff are integral to the success of the program.

Other proposed allied services and amenities include:

- **Community information and referral service** dedicated to the elimination of family violence in Aboriginal communities in the Pilbara, operated by AMHC.
- **Volunteer phone-in helpline** manned by Aboriginal men who can interpret Niyaparli, Martu and the other language groups of the Pilbara.

- **AMHC Community Hubs** to bring local education, health, community, and corrective services together in a familiar and welcoming environment to make it easier for participants and their families to access the services and assistance they need. The Hub provides families with a sense of belonging and facilitates the development of friendships and support networks.

AMHC will provide a much-needed community service, designed for the use by local Aboriginal people. We will provide the community with the opportunity to improve their self-capacity to seek support and information concerning family violence. AMHC will do this by providing a centrally located and easily accessible focus point for community members to seek information and support on family violence. Our staff will be familiar with community services in the area and skilled to provide services to a diverse range of community members.

AMHC will also provide support to community service providers by focusing on volunteering initiatives, such as creating volunteer information packs and delivering training opportunities to prospective or current volunteers. Programs, events, and training held within the facility will incorporate all aspects of well-being, including social, cultural, physical, mental, and emotional. This is further demonstrated by the variety of training available ranging from clinical options, workshops, self-help sessions, and availability of meeting spaces

The AMHC integrated family support model requires the following approaches to service design and delivery:

Assertive Outreach: Some families eligible to receive the service may not respond to traditional client engagement methods such as letters of invitation to attend an office appointment. A capacity to engage with families through visits to families in their own home or other community-based locations is essential. A key element of assertive outreach is to formulate strategies that will engage difficult and non-responsive families. In some instances, this will include accompanying child protection services workers on home visits to newly referred families experiencing family violence. This element may also be pertinent in enforcing community by-laws and the removal of over-staying guests.

Ongoing Outreach: A significant proportion of referred families may have very limited financial means, and limited access to transport and childcare. For many of these families, traditional appointment-based and prescribed family violence therapeutic models are unlikely to meet their needs or requirements. A significant majority of client contacts must occur in the home (with appropriate safety procedures) and be tailored and highly practical in nature.

3.7 Strengthening future evidence-based programs through data

It is difficult to measure the full extent of family violence against women as most incidents go unreported. We know that rates of family violence are higher in remote Indigenous communities, and that there are even greater barriers to reporting violence to authorities in small remote communities than there are in regional areas and metropolitan centres.

Data relating to the extent, severity and impact of family violence in Indigenous communities is therefore seriously lacking. Notably, there is limited data to reveal the devastating extent of the perpetual cycle of violence in Indigenous communities. While there is data collected on victims of

family violence, there remains a critical need for development of data about perpetrators. There is also limited data to assess the impact of men remaining in, or returning to, the family home or community after an incident.

A lack of data can hinder efforts to reveal the pervasive and cyclical nature of violence. This in turn limits the effectiveness of initiatives to prevent it. Ensuring that violence in all its forms is documented through solid data is a critical step towards its elimination.

As part of the long-term program (the 12-month program and the post-residency monitoring), AMHC will methodically record data. This will be conducted in accordance with all relevant Privacy laws and respecting the resident's confidentiality. AMHC will partner with government agencies and research organisations. This data will be used to continuously improve AMHC outcomes; and subject to appropriate approval processes and terms and conditions of access, is expected to be accessible to policymakers, academics and other rehabilitation programs.

4. A well-defined roadmap

AMHC assembled a team of experienced clinical, operational, cultural and technical professionals acting on a pro bono basis (some for more than 3 years) to advance this important program. Broadly speaking, there are two intersecting roadmaps.

1. Operational, Clinical and Cultural roadmap: activities that contribute to the development of the ongoing operations of AMHC, including clinical procedures, operational plans, financial analysis, outcomes and performance indicators, etc. (**Operational Roadmap**)
2. Technical roadmap: activities required to build the centre including architectural plans, engineering and infrastructure, development plans and approvals, etc. (**Technical Roadmap**)

Each area has a defined plan and considerable progress has been made to get AMHC ready for this major funding request.

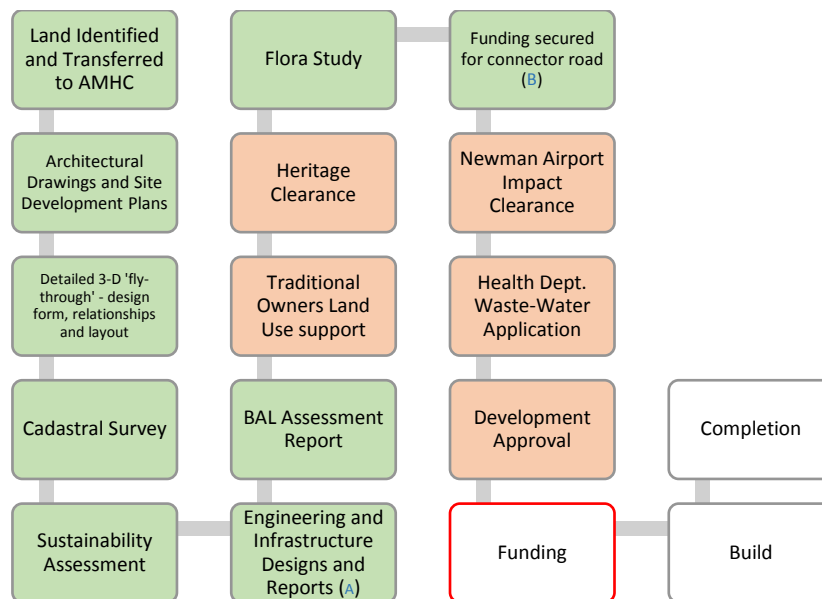
This progress was made possible by the generosity of the pro bono team and supporters. The value of these pro bono services provided to date is, conservatively, \$2.5 – 3m.

4.1 Technical roadmap and status

The Technical Roadmap is a detailed plan that commenced with a first phase design process in collaboration with the community. This design process involves a broad range of stakeholders and was facilitated by the Architects. Central to the design were the traditional owners of the land and AMHC Board and Elders. AMHC has a long-standing relationship with the traditional owners and Elders and maintain significant ongoing engagement and consultation. Other stakeholders included Aboriginal heritage interests, support agencies, local government (Shire of East Pilbara), justice and correctional services, clinical services and industry partners interested in future social business enterprises.

This consultation and collaboration continued through a series of workshops resulting in the formal concept design. The formal concept design formed the basis for the Architectural drawings and models, and the engineering and infrastructure plans.

Since then, AMHC has worked closely with architects and engineers to advance the design to the stage of lodging a Development Application with the Shire of East Pilbara and the WA Planning Commission. The following roadmap shows our progress. The completed activities and deliverables are available for inspection by the NIAA at any time.



A: The Engineering and Infrastructure includes water supply and systems, power/energy supply and systems, wastewater, roads, fire and security, communications, WA Main Roads approval for the Great Northern Hwy intersection, and traffic study. A bore drilling program is being negotiated in order to expedite the confirmation of a viable potable water supply.

B: Funding from the Shire of East Pilbara (\$2.1M), subject to funding being secured for the intersection.

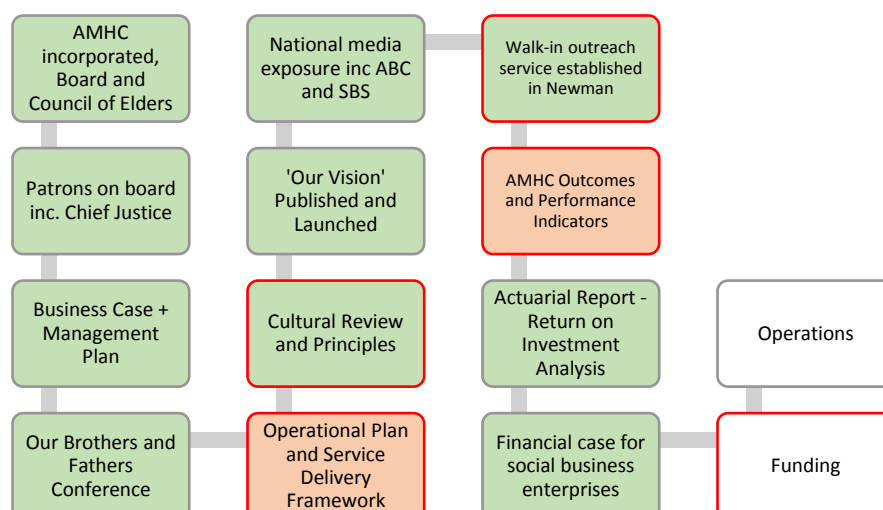
To summarise the current status:

- In general terms, the building and Infrastructure design components are at a preliminary stage with detailed design to commence once progressive funding is secured.
- The major intersection with the Great Northern Highway is already at a procurement stage with all documentation completed, with associated Main Roads WA approvals in place. Once Funding is secured for this component then refinement of documentation can commence with procurement and construction subsequently to proceed.
- The 'connector road' is at preliminary design stage but can be advanced expeditiously to procurement because GHD preliminary documents, prepared for the Shire, already exist.
- As the site is substantial it is anticipated that there will be more than one contractor on site at the same time, enabling a range of works to be implemented concurrently and completion expedited.
- A mixture of contract types is also being considered such as having some works implemented as "factory built", some "site built" and "prefabricated componentry" erected on site.

It is important to note that nearly 50% of the capital cost estimate is to install essential engineering infrastructure on the “greenfield” site and to construct the intersection with the Great Northern Highway and the “connector road” to AMHC site entry point.

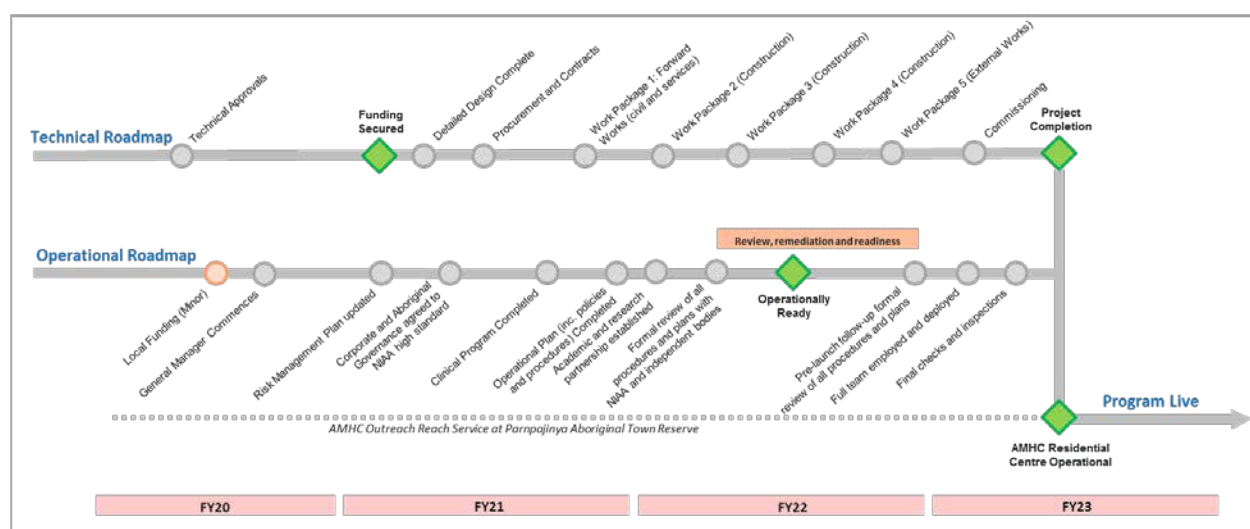
4.2 Operational, clinical and cultural roadmap and status

In parallel to the Technical Roadmap, AMHC team has an Operational Roadmap for the design and set-up of the clinical, cultural and ongoing business operations. These activities and deliverables will form the backbone of the AMHC program.



4.3 Ready to execute on the well-defined plan

The Roadmaps are well progressed and although the teams continue to work hard on finalising roadmap deliverables. The following is a high-level view of major activities (indicative timelines):



We acknowledge that our plan is indicative only and subject to further review, NIAA input and timing.

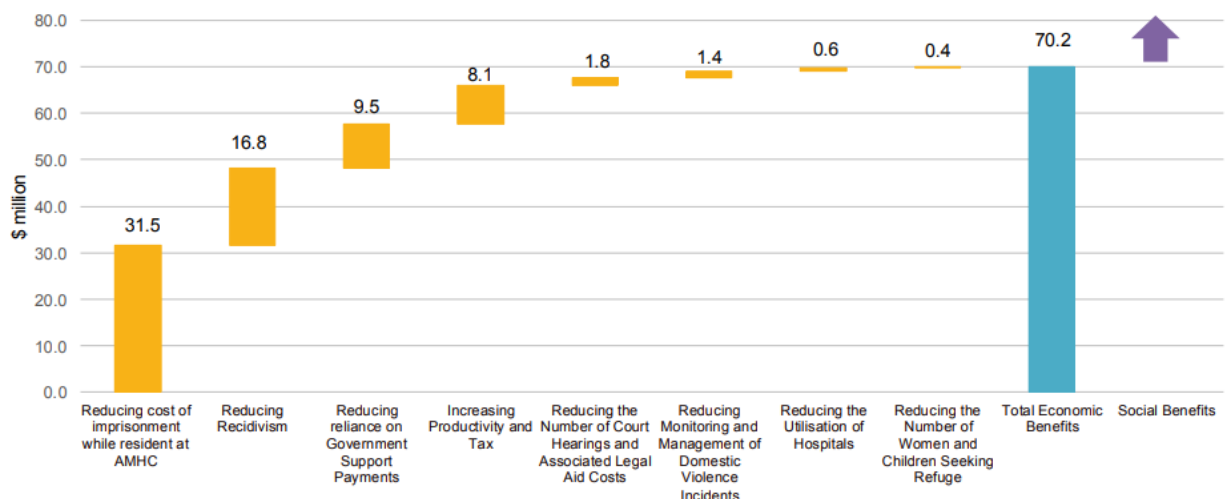
5. A strategic investment – the business case and value for money

AMHC will serve a critical service to the community with profound positive outcomes for Aboriginal communities. AMHC could also have direct economic benefits that achieve value for money outcomes.

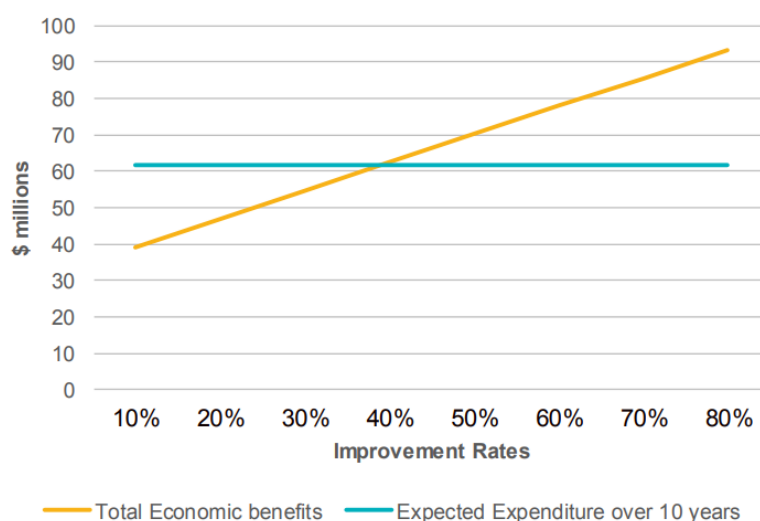
5.1 Return on investment analysis

In addition to the immediate social benefits for the Pilbara community, AMHC has a compelling financial case. It is estimated by independent actuaries that AMHC could generate \$70 million of direct economic benefits over 10 years such as reducing the cost of imprisonment, recidivism and other criminal justice costs, and increasing productivity. This estimate assumes 50% of the program participants do not reoffend. The proposed program is estimated to breakeven should it achieve a 40% improvement rate.

A report by a firm of actuaries (Finity Consulting Pty Ltd.) was prepared for the AMHC. See Appendix A: 'Economic Benefits under the proposed program of the Aboriginal Males Healing Centre'.



The following graph shows the estimated economic benefits based on a range of potential outcomes.



Type of Economic Benefit	Savings over ten years (\$)	Underlying Assumptions
Reducing cost of imprisonment while resident at AMHC	\$31.5 million	- The estimated average cost of imprisonment per person per day in Western Australia is estimated to be \$308 in 2020/21 dollars. - Each resident spends 12 months at the centre rather than in prison.
Reducing Recidivism	\$16.8 million	- Each successful resident is assumed to have one reduced occurrence of recidivism, reducing the amount of time spent in gaol. - The estimated average cost of imprisonment per person per day in Western Australia is estimated to be \$308 in 2020/21 dollars. - The average length of sentence for ATSI assaults is approximately 390 days.
Reducing reliance on Government Support Payments	\$9.5 million	- Each successful resident is assumed to have secured employment, completely removing the need for government support payments to 2032 (the end of the projection period). - We note that some participants may be retrained and employed through AMHC's social enterprises, which will increase their likelihood of ongoing economic participation. - The estimated Centrelink payment is \$511 per fortnight.
Increasing Productivity and Tax	\$8.1 million	- Each successful resident is assumed to have secured employment, contributing income tax and increasing the productivity of the economy to 2032 (the end of the project period). - Based on PwC's estimate, the lost productivity and income tax is assumed to be \$11,344 per annum for every domestic violence offender.
Reducing the Number of Court Hearings and Associated Legal Aid Costs	\$1.8 million	- Each successful resident is assumed to have one reduced occurrence of recidivism, reducing the need for court and legal costs. - Each court finalisation is estimated to cost \$9,128 on average and each case in Western Australia is estimated to cost \$3,787 on average in legal aid.
Reducing Monitoring and Management of Domestic Violence Incidents	\$1.4 million	- Each successful resident is assumed to have one less occurrence of recidivism, reducing monitoring costs from the police. - The average police expenditure is estimated by PwC to be about \$9,900 per offence.
Reducing the Utilisation of Hospitals	\$0.6 million	- We have assumed that on average one person is hospitalised per incident of domestic violence. - The average hospital stay for ATSI in Western Australia costs \$4,500. This is equivalent to approximately 2.2 days in hospital.
Reducing the Number of Women and Children Seeking Refuge	\$0.4 million	- We have assumed that on average one woman seeks refuge per incident of domestic violence. - It costs the Newman Women's Shelter approximately \$2,700 per woman's stay.

The facilities which are proposed to be developed for the program will probably be able to be repurposed if no longer required for that purpose in the longer term. The expected incorporation of community, cultural and training facilities as part of the centre will provide a variety of options for its continued use. These benefits have not been considered in the forecast in the actuaries analysis as they extend beyond 10 years.

This is a preliminary analysis. As part of a NIAA and AMHC partnership we would welcome an analysis to reassess financial and economic benefits.

5.2 Justice Reinvestment

AMHC is presented as a Justice Reinvestment approach to criminal justice reform.

“Justice Reinvestment is the redirection of money from prisons to fund and rebuild human resources and physical infrastructure in areas affected by high levels of incarceration. Justice Reinvestment originated in the United States as a response to an exponential growth in the rate of imprisonment since the 1970s.”⁴¹

Justice Reinvestment aims to reduce incarceration costs and reinvesting the savings in strategies designed to increase public safety and address the structural reasons for the offending while holding offenders accountable. Justice Reinvestment suggests that prisons are sometimes a poor investment and do not always create the best outcome for the community.

AMHC will bring together partners such as the WA Department of Justice to develop and deliver responses that work to address the cycles of sustained offending behaviour and recidivism.

5.3 Employment, industry and social enterprise

As a local Aboriginal Community Controlled Organisation with charity status, AMHC is committed to procuring local goods and services from Indigenous owned businesses wherever possible to support operations.

As a Pilbara-based Aboriginal-controlled organisation it is our commitment to the community that this project will offer immense opportunity for local Aboriginal people and businesses – though the large-scale construction project and the ongoing operations and maintenance. We see immediate opportunity in the construction project and employment and skills development across management, clinical and cultural counselling, building and trades, equipment operations, land care and ranger activities, vehicle maintenance, social services, tourism, etc.

In line with the WA Government ‘Buy Local’ policy, AMHC will adhere to local purchasing and procurement policies for the construction and tendering of the major projects and ongoing services. The WA Government procurement rules speak to Indigenous employment targets and the development of local Indigenous businesses. We will target well above the minimums.

⁴¹ ‘Pathways To Justice—Inquiry Into The Incarceration Rate Of Aboriginal And Torres Strait Islander Peoples’ (ALRC Report 133), Australian Law Reform Commission. <https://www.alrc.gov.au/publication/pathways-to-justice-inquiry-into-the-incarceration-rate-of-aboriginal-and-torres-strait-islander-peoples-alrc-report-133/4-justice-reinvestment/what-is-justice-reinvestment/>

5.4 Social Business Enterprise

Social enterprise plays a key role in delivering social and economic outcomes, helping to deliver inclusive economic growth through creating jobs, improving workforce participation, and boosting productivity.

Social enterprise activity is estimated to make up 2-3% of GDP⁴², with around 20,000 social enterprises operating in Australia⁴³. The sector is growing rapidly and making an increased contribution to employment and workforce participation. More than 50% of social enterprises were established in the last five years⁴⁴, and over a third of social enterprises identify their primary purpose as providing employment opportunities for disadvantaged groups⁴⁵.

AMHC has mapped out an ambitious plan for establishing a range of Social Business Enterprises (**SBE**) built around the residential program. These are set out in AMHC Social Business Enterprise Strategy and individual Business Case. We envisage further refinement of these once the core program is funded and the Build is underway. The latest versions of the Strategy and Business Case are attached (Appendix H).

AMHC proposals include five SBEs for further due diligence. # 1 and #5 are detailed and available for review.

1. Jinyjira Cultural Education Program and Centre.
2. A Cultural Tourism Program.
3. Ninti Marta Nursery.
4. Registered Training Organisation – Professional Training Services.
5. Industrial Laundry, primarily to service the large-scale mining operations and other local businesses and agencies.

First and foremost, these enterprises will create opportunities for training and employment for the Residents. They will also create local employment - building the community's independence from welfare support, and will reduce unemployment, criminal activity, homelessness and dependence on health services. These businesses would also fund or partially fund the ongoing operations of the AMHC and research programs.

Social enterprise can deliver outcomes effectively in remote, rural and disadvantaged areas. As community-driven responses to local issues, they improve the geographic spread of our prosperity across the state, complementing and enhancing the efforts of government. Australia's most disadvantaged receive tangible support through the work of social enterprises, directly addressing issues affecting young people, people with disabilities, the homeless, Aboriginal Australians, recently

⁴² Social Traders estimate using information contained in Productivity Commission (2010), Contribution of the Not-for-Profit Sector, Australian Government, Canberra

⁴³ Barraket, J., Collyer, N., O'Connor, M., & Anderson, H (2010), Finding Australia's Social Enterprise Sector: Final Report. Australian Centre for Philanthropy and Nonprofit Studies, QUT & Social Traders, pp 17-19

⁴⁴ Barraket, J., Mason, C. & Blain, B. (2016), Finding Australia's Social Enterprise Sector: Final Report. Centre for Social Impact, Swinburne & Social Traders, p15

⁴⁵ Ibid., p19

arrived immigrants, and those with lower literacy and numeracy skills. Social enterprises act as a powerful adjunct to government services and do so often without calling on government resources.

The growth of the social enterprise sector improves productivity through innovation, by adapting old business models to meet the needs of the Pilbara's changing economy. AMHC social business enterprise shall maximise the productive use of our human capital through increased workforce participation. Over a third of Australia's social enterprises identify their purpose as developing innovative solutions for economic, social, cultural or environmental problems⁴⁶ and this combination of purpose and innovation is particularly appealing for the new generation of "millennial" entrepreneurs and employees who are now a major productive element within Australia's economy⁴⁷.

Evidence demonstrates a clear correlation between mental health and engagement in employment, and education and training opportunities. Employment provides multiple avenues to wellbeing for those with mental illness and addiction issues. A job creates a sense of social engagement and interaction, one of the most critical elements of mental wellbeing. Work is linked to improved physical wellbeing, community participation, self-confidence, a sense of control, and a socially valued sense of identity. By providing an income, work can provide pathways to independence, financial security, health, and safe environments

The development of social enterprise and enterprising approaches to addressing poverty and disadvantage has led to challenges from within the non-profit sector to find other mechanisms for resourcing social development than those traditionally provided by government grants and corporate philanthropy.

Further, it has led to rethinking the relationship between the sectors and opened opportunities for new forms of partnership and joint venture thinking, particularly in relation to addressing 'wicked' problems. Overseas, and to a growing extent in Australia, there is a recognition of what is termed the 'social economy' – the social and economic power of grass-roots, community based enterprises and non-profits, and the often under recognised 'care' systems – families, households, neighbourhoods. This has led to questions about how to resource the social economy and how the social economy intersects with the market economy, both of which highlight the need for closer scrutiny of purchasing power and the role of procurement in addressing social issues.

AMHC requires financial support, assistance from and collaboration with external stakeholders to get our social business enterprises off the ground. The goal of AMHC social enterprises is to become self-sustaining. AMHC's sustainable operations are vital to our social business enterprise model, with international experience demonstrating the ongoing dividend, which is gained from well-targeted policies to assist sustainability. AMHC's strong social enterprise model will help us build a fairer and stronger Pilbara. It will mean more jobs, opportunity and thriving communities in a state where our fairness, diversity and creativity is a competitive economic strength.

⁴⁶ Ibid

⁴⁷ PwC, Millennials at Work: Reshaping the Workplace (2011)

6. Accountability, governance and risk

AMHC is a well-governed organisation and is set up to provide a critical service to the community. We acknowledge that, given the quantum of the proposed funding and investment and the importance of the program to the community, AMHC will be required to comply with especially strict and robust governance.

We look forward to working with the NIAA to bolster existing governance and too put in place clear governance and control mechanisms to ensure successful outcomes and value for money.

AMHC will operate under three levels of governance:

1. Aboriginal (Cultural) Governance
2. Clinical Governance
3. Corporate Governance

The following key documents are included as appendices:

1. AMHC Governance Structure – developed in consultation with community Elders, this document provides an overview of AMHC’s governance (Appendix G).
2. Cultural Review of Policies and Procedures, Development of Cultural Guiding Principles – prepared by Dr Tracy Westerman, Indigenous Psychological Services (Appendix D).
3. Rules of the Organisation – AMHC Constitution (not included in appendix due to length, available for review)

6.1 Corporate governance

AMHC has already established governance and protocols as an Aboriginal controlled organisation, a Registered Charity (governance standards set by the Australian Charities and Not for Profits Commission) and is incorporated under the *WA Associations Incorporations Act 2015*⁴⁸.

As a WA based organisation in planning mode, it was appropriate to be incorporated under the *WA Act*. However, it is now appropriate for AMHC to be incorporated under the *Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act)*. This process will kick off in parallel to this funding request. To ensure strict compliance, we will be seeking legal and accounting advice. This support from the NIAA and the Office of the Registrar of Indigenous Corporations is welcomed.

AMHC has set up an organisational structure to ensure governance e.g. financial and risk committee reporting on financial and governance matters. AMHC governance is comprised of a Commission of Elders, AMHC Board and CEO. It will include a Clinical Director and Facility Manager. AMHC board meets regularly.

⁴⁸ https://www.commerce.wa.gov.au/sites/default/files/atoms/files/incaguideforincorporatedassociations_0.pdf

AMHC has developed draft policies across the following areas:

1. Corporate (e.g. audit, ethics, delegation of authority, etc.)
2. Financial and Asset (e.g. asset and facilities management, financial management, etc.)
3. Cultural (e.g. confirmation of Aboriginality, cultural safety, informed consent, etc)
4. Human Resources (e.g. family violence workplace policy, clearance check, staff supervision, etc.)
5. Occupational Safety and Health (home visiting, incident hazard, risk management, etc.)
6. Operations (e.g. communication, client priority policy, etc.)
7. Clinical (e.g. client assessment, case planning, service delivery framework, etc.) governance.

These have been developed with Dr Westerman of Indigenous Psychological Services and are set out in our document titled Cultural Review of Policies and Procedures, Development of Cultural Guiding Principles Appendix D.

6.2 Aboriginal (Cultural) Governance

As previously articulated, AMHC is an Aboriginal controlled organisation and, at its core, is the interplay of Aboriginal culture and lore and clinical best-practice. AMHC is for Aboriginal men.

We understand that service provision is most effective in those areas where Aboriginal people feel their culture is valued and that they have direct input into the refinement and coordination of localised service provision. We recognise that there is a need to ensure access to ongoing cultural guidance which ensures that the organisation is constantly developing and moving towards culturally competent practice through service delivery and practice guidelines.

To enable us to drive practice and service development we will further develop clear governance guidelines. An AMHC Service Delivery Framework will seek to ground these standards within culture, people and knowledge from the local Aboriginal community. It is the integration of strong cultural governance, self-determination and Western ways of working that drive the framework. The pillars of capability for the Framework are:

- **People:** strong cultural governance and self-determination, with local community driving service design.
- **Culture:** service design and delivery grounded in local culture and driven by Aboriginal ways of working, values and principles.
- **Knowledge:** safe spaces for healing on Country informed by the local Aboriginal community.

The framework will be underpinned by Dr Westerman's Guiding Cultural Principles:

1. Commitment to staff cultural competence
2. Informed Cultural and Clinical Consent
3. Client Cultural Confidentiality
4. Culturally Secure Record Keeping and Exchange of Information

5. The Use of Cultural Vouching
6. The Use of Cultural Consultants
7. The Use of Standardised (psychological) tests with Aboriginal People
8. Culture Bound Syndromes in Practice
9. Effective Engagement of Aboriginal Clients and Families
10. Cultural Mapping

Dr Westerman undertook a review of policies and procedures and governance with the objective of enabling AMHC to address gaps in best cultural and clinical practice. This review (Appendix D) and recommendations will form the basis of many aspects of our Operational Roadmap.

6.3 Clinical governance

Principles and minimum standards for perpetrator behaviour change programs

According to the National Plan to Reduce Violence against Women and their Children:⁴⁹

“It is not possible to keep women and children safe from violence without a focus on perpetrators”.

AMHC minimum standards are, necessarily, based on the Western Australian Practice Standards for Perpetrator Intervention⁵⁰ and the National Outcomes Standards for Perpetrator Interventions (NOSPI)⁵¹. These minimum standards are applied to all AMHC programs, with Dr Westerman’s Guiding Cultural Principles providing direction around how they are applied within an Aboriginal context.

The minimum standards are underpinned by an explicit stance that all forms of violence are unacceptable and will not be tolerated; and men who use violence are responsible for their behaviour and can choose to not use violence. For Aboriginal men, these standards and principles must be underpinned by a cultural framework and delivered through an Aboriginal-led long-term healing program.

The minimum standards are grouped under the following principles:

1. Safety of women and children must be given the highest priority.
2. Victim safety and perpetrator accountability are best achieved through an integrated system response that ensures that all relevant agencies work together.
3. Challenging family and domestic violence requires a sustained commitment to professional and evidence-based practice.
4. Perpetrators of family and domestic violence must be held accountable for their behaviour.
5. Programs should respond to the diverse needs of the participants and partners.
6. People working in perpetrator intervention systems must be skilled.

⁴⁹ Australian Government, Department of Social Services, The National Plan to Reduce Violence against Women and their Children 2010 – 2022 (Fourth Action Plan).

⁵⁰ WA Government, Practice Standards for Perpetrator Intervention: Engaging and Responding to Men who are Perpetrators of Family and Domestic Violence, 2015.

⁵¹ Australian Government, National Outcomes Standards for Perpetrator Interventions from the Nation Plan to Reduce Violence against Women and their Children.

In addition to these principles, the minimum standards are informed by the following ethics and are considered essential to the safe delivery of programs:

1. An important source of information about risk, safety and behaviour change is the man's current or former intimate partners (safety is paramount and respectful of privacy).
2. The operation of men's behaviour change programs must occur in partnership with agencies and organisations in the community and be open and transparent with those agency partners.
3. Information sharing is critical for assessing, managing and monitoring risk and must be an ongoing feature of men's behaviour change practice.
4. A commitment to evidence-based practice including continual monitoring, review and evaluation is imperative for furthering the safety of women and children.⁵²

An adaptation of the National Outcome Standards for Perpetrator Interventions provides the AMHC with guidance on perpetrator intervention within a culturally secure set of Cultural Guiding Principles.

Therapeutic models

First and foremost, the clinical aspects of AMHC program will be led and supervised by qualified and experienced practitioners. We will be aiming to attract experienced clinical talent to the Pilbara through this program including a Clinical Director and clinical practitioners. We see a strong clinical team as integral to the program.

There are **three key models** that underpin AMHC healing. These will be appropriately reviewed and tailored by the qualified clinical and cultural teams.

1. *Rituals and Ceremonies in Yirna Jukurrpa Treatment Model*

Culture, Lore, Ritual and Ceremonies are a core component of the participants' experience. Ceremonies and rituals augment group counselling. Oil and Ochre, the talking circle and the Yirna Jukurrpa (*Men's Dreaming*) treatment purification ceremony are key to forming the participants connection to their healing/cultural journey.

Every third session in group work will be a cultural activity. All rituals will be either performed within a circle, standing or sitting, incorporating elements of oil and Ochre and a Wangka circle (or sharing circle). This cultural practice is at the centre of AMHC model.

2. *The Duluth Model*

The Duluth model is an internationally recognised program originated in Minnesota in 1970s. The model seeks to shift responsibility for victim safety from the victim to the community and state. It promotes a shared collective mission and strategy regarding intervention and seeks to develop an

⁵² Cultural Review of Policies and Procedures, Development of Cultural Guiding Principles. Indigenous Psychological Services (Dr Tracy Westerman). 2018.

overarching intervention strategy. The model promotes a shared understanding of interventions accountable to victim safety and offender accountability.

Strategies include a shared understanding of how community agency's actions support or undermine collective goals and interventions strategies, shared definitions of safety, family violence, danger, risk, and accountability. A key focus is prioritising the voices and experiences of women who experience family violence in the creation of those policies and procedures. In practice AMHC have removed the blame from the victim and placed accountability for the abuse on the offender.

AMHC's essential belief is that family violence is a pattern of actions used to intentionally control or dominate and seeks to change conditions that support men's use of power and control over women. AMHC goal is for offenders to attend court-ordered education/therapeutic healing within their residential setting, to promote on-going discussions with criminal, justice agencies, community members and victims to close gaps and improve community response to family violence.

3. Core Profile Healing and Wellness Paradigm

This paradigm supports a participant to recall and heal their core pain, which is derived from core painful events experienced throughout life from seven to fifteen years of age. The model refers to 'healing the inner child'. The model takes the individual through a six-step process while dealing specifically with the 'head, heart and gut'. This is a culturally competent way of working that has meaning for Aboriginal people and will be utilised by AMHC.

Core profile is underpinned by key principles and social justice goals including cognitive behavioural therapy, psychodynamic approaches, grief and loss framework, crisis intervention and community development. Core Profile provides participants the opportunity to learn that their cognitive, emotional, and behavioural ways of being are not innate, but are emotional and cognitive imprints that can experience healing and growth.

The Core Profile consists of ten modules, with a minimum duration of two hours per session. In the event cultural and linguistic issues arise, session times will accommodate these challenges and cultural interpreters shall be accessed. The course will be offered in a group setting by staff members who have participated and graduated from the Core Profile programme. The model promotes a spiritual and cultural journey.

6.4 Key risks and mitigations

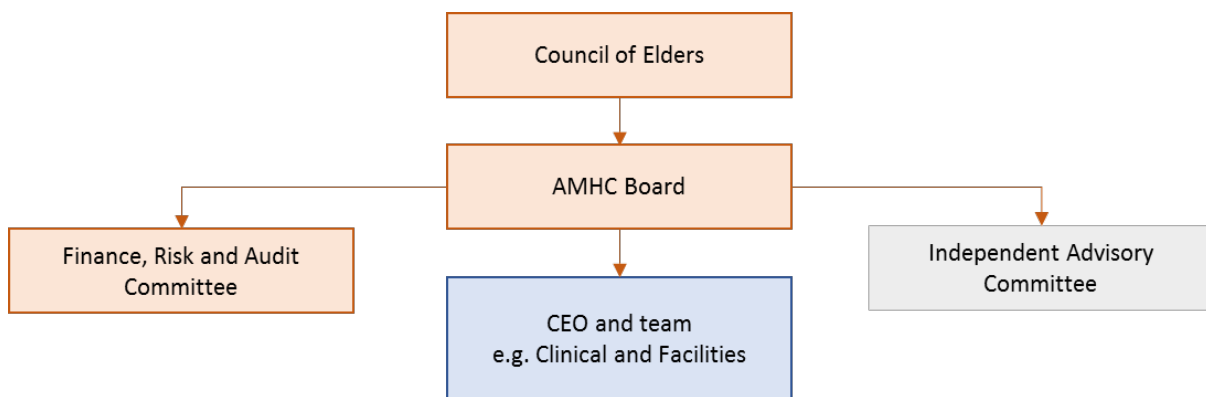
The following are the key identified risks and the proposed actions required to address them. We envisage risk workshops and the development of a detailed risk management plan as part of the funding discussions.

Risk	Rating	Actions to address the risk
Risk One: Inability to attract sufficient support for or	High	• Prepare highly professional and well written documents.

Risk	Rating	Actions to address the risk
interest in the proposed developments.		• Personal contact with potential government, business and philanthropic agencies. • Utilisation of strong links with all key stakeholders and partners.
Risk Two: Inability to attract sufficient finance to proceed with developments.	High	• Preparation of effective documentation. • Prioritised targeting of best options for financial support. • Preparation of strong funding submissions. • Accurate financial forecasting. • Personal contact and follow up with prospective funding bodies. • Advocacy by key supporters.
Risk Three: Overstretching the organisation, both financially and in terms of personnel (burnout).	High	• Prioritising the various social enterprises, in terms of financial viability and organisational capability/capacity. • Ensuring the Founder/CEO is well supported and has appropriate back up staff and resources. • Only proceeding with projects once finance has been fully secured.
Risk Four: Inability to attract and maintain level of staff quality and support.	Medium	• Directors and management to maintain strict standards in recruiting staff. • Ensure high levels of mentoring and supervision for all staff. • Document expected standards for staff performance.
Risk Five: Inability to appropriately manage a facility for a group of former prisoners.	Medium	• Clear identification of skill base required for staff to work with this group of clients. • Strong OH&S and specific risk management procedures in place for working with this group. • Appropriate facilities for undertaking this work.
Risk Six: Lack of management and governance oversight of project development, including finances.	Medium	• Establishment of effective budgets, project plans and timelines for all aspects of construction and implementation of new services and programs. • Appropriate people appointed and processes implemented for reporting to the Board on all stages of the projects.

Risk	Rating	Actions to address the risk
Risk seven: Lack of organisational systems and processes.	Medium	• Ensure greater levels of documentation of all facets of AMHC's operations. • Prepare a clear set of policies and procedures, as an Operational Manual. • Document all Board and management meetings and decisions.
Risk Eight: Lack of Director diversity and competence.	Low	• Undertake a skills analysis of the Board, identifying missing skills for recruitment. • Strengthen documentation re Board meetings and decisions of the Directors. • Conduct an annual governance review session.

6.5 AMHC roles and responsibilities



A draft view of these and other team roles and responsibilities has been developed by the AMHC. Available for review by the NIAA.

Appendices

[Link to AMHC Dropbox containing all appendices](#)

- A. Economic benefits under the proposed program of the Aboriginal Males Healing Centre, Finity Consulting, Actuaries.
- B. Letters of Support
 - a. Newman Police (Senior Sergeant Larry Miller)
 - b. Newman Police (Senior Sergeant Jon Munday)
 - c. Newman Women's Shelter
 - d. Dr. Tracy Westerman, Indigenous Psychological Services
 - e. Minister Melissa Price MP, Federal Member for Durack
 - f. Professor Mick Adams, Australian Indigenous Health InfoNet
 - g. Empowering Communities
- C. Preliminary Cost Plan Estimate for Aboriginal Males Healing Centre in Newman, Quantum Phases Consortium (Quantity Surveyors).
- D. Cultural Review of Policies and Procedures, Development of Cultural Guiding Principles, Dr Tracy Westerman, Indigenous Psychological Services. **[Available on request]**
- E. AMHC Development Construction Packages. **[Available on request]**
- F. AMHC Architects Statement. **[Available on request]**
- G. AMHC Aboriginal Governance Structure. **[Available on request]**
- H. AMHC Social Business Enterprise Strategy. **[Available on request]**
- I. AMHC Kilinpala Industrial Laundry and Dry-Cleaning Services (KLS) Business Case. **[Available on request]**
- J. AMHC Jinyjira Cultural Education Centre SBE Business Case **[Available on request]**
- K. Original AMHC Business Proposal 'Residential and outreach healing program for perpetrators of family and domestic violence' (2017). **[Available on request]**

APPENDICES

APPENDIX

A. Economic benefits under the proposed program of the Aboriginal Males Healing Centre, Finity Consulting, Actuaries.

20 October 2020

Mr Devon Cuimara
Founder and Chief Executive Officer
Aboriginal Male's Healing Centre
PO Box 1142
Newman WA 6753

By email: devoncuimara@outlook.com

Dear Devon,

Economic Benefits under the Proposed Program of the Aboriginal Male's Healing Centre

Aboriginal Male's Healing Centre (AMHC) Strong Spirit Strong Families Strong Culture Incorporated has retained Finity Consulting Pty Limited (Finity) to assess the economic benefits of the proposed Residential and Outreach Healing Program of the Parnpajinya Aboriginal Community Safety (PACS) project.

Background

AMHC is based in Newman in the Pilbara region of Western Australia. AMHC has proposed a Residential and Outreach Healing Program for Aboriginal and Torres Strait Islander (ATSI) males who are perpetrators of family and domestic violence. The aim of the program is to reduce and eliminate family and domestic violence amongst ATSI males and provide support for women and children who are subjected to family and domestic violence. The provision of residential facilities for male perpetrators of domestic violence embodied in the program is consistent with the *Keeping women safe in their homes* programs of the Federal and WA Governments which appear to have developed from recommendations of the Australian Housing and Urban Research Institute.

AMHC has requested an analysis of the potential economic benefits of the proposed program. Finity understands that the purpose for which AMHC require the advice sought is to strengthen the case for funding the construction of permanent residential accommodation and the operating costs of the centre. This letter will be included in the applications of funding from the Northern Australia Infrastructure Facility and the Indigenous Advanced Strategy in the second half of 2020. We provided draft advice to AMHC on potential economic benefits in 2017 when the program was at an earlier stage of development.

In the context of this letter, we have defined economic benefits as the direct cost savings to existing government funded initiatives that link to domestic violence. Social benefits such as those arising from better educational outcomes or reduced crime among the children of domestic violence perpetrators have not been included in our estimates but would be expected to be significant.

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Auckland

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Auckland 1010

Data

We have relied on the following information provided by AMHC:

- “*Investment Proposal for Northern Australia Infrastructure Facility Loan (NAIF)*” dated 17th April 2020,
- the Architect’s Statement Rev 8 dated 18 June 2020 prepared by Geoff Barker and Paul McDonald for the development application,
- the proposal to the WA Department of Communities “*AMHC-PACS 12-month proposal (8)*” seeking support for payment of salaries for the centre for a 12 month trial period prepared in July 2020 and,
- the AMHC “*Specialist Outreach and Engagement Strategic Plan Version 1*”.

In addition, we have relied on multiple sources of publicly available data which are documented in Appendix B.

General Assumptions

When developing the economic benefits analysis of the proposed program, we have assumed the following:

- Construction of the centre will be completed by 2023 and the program will begin on the 1st July 2023.
- The centre will have a maximum capacity of 28 people at any point in time with an average intake of 7 persons per quarter from the commencement date. Each participant will undergo a 12 month program at the centre.
- The program is projected to run for ten years. A total of 280 men are assumed to utilise the residential services of the centre through to 2032.
- The degree of success of a residential program in reducing rates of recidivism relative to the prison system is largely judgemental and for this reason we have shown the sensitivity of the results to the assumption later in the letter. It is assumed that all those who enter the program successfully complete the course, although the rate of recidivism assumed will implicitly allow for any course non-completion.
- The uncertainties underlying our estimates are such that we have assumed all amounts are current dollars and have not inflated or discounted them.
- The analysis reflects an average cost basis rather than a marginal cost basis. Whilst a marginal cost basis may give a better indication of the savings over short time periods, we consider the average cost is more appropriate for decision making over longer term timeframes.

Analysis

The proposed PACS program is estimated to bring a significant amount of direct economic benefits, the level of which is heavily dependent on achieving reduced rates of recidivism and hence reduced family violence. In this context, the improvement rate is defined as the proportion of PACS program participants who would successfully reduce recidivism compared to those entering the prison system. For example, a 50% improvement rate means 14 people (of the 28 participants per annum) would not reoffend after completing the AMHC program, but would have otherwise reoffended after exiting the prison system. We have provided a set of results for a range of improvement rates.

As an example, Table 1 shows the estimated savings and the underlying assumptions for each type of economic benefits, under an improvement rate outcome of 50% (further context is provided following Figure 2 on page 6). The estimated benefits total \$70 million.

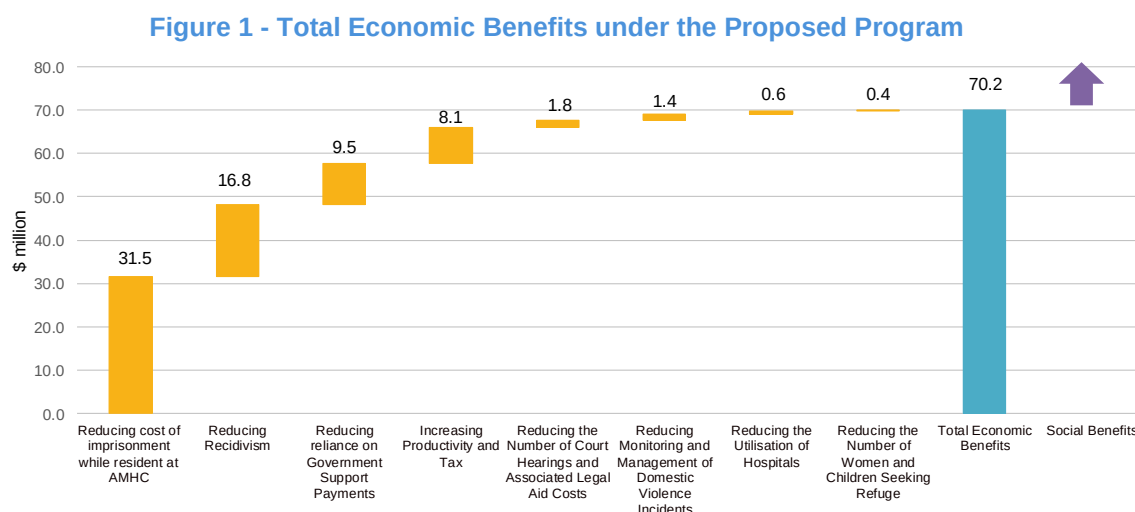
Table 1 – Savings and Assumptions under Various Types of Economic Benefits under the Proposed Program (under an improvement rate of 50%)

Type of Economic Benefit	Savings over ten years (\$)	Underlying Assumptions
Reducing cost of imprisonment while resident at AMHC	\$31.5 million	- The estimated average cost of imprisonment per person per day in Western Australia is estimated to be \$308 in 2020/21 dollars. - Each resident spends 12 months at the centre rather than in prison.
Reducing Recidivism	\$16.8 million	- Each successful resident is assumed to have one reduced occurrence of recidivism, reducing the amount of time spent in gaol. - The estimated average cost of imprisonment per person per day in Western Australia is estimated to be \$308 in 2020/21 dollars. - The average length of sentence for ATSI assaults is approximately 390 days.
Reducing reliance on Government Support Payments	\$9.5 million	- Each successful resident is assumed to have secured employment, completely removing the need for government support payments to 2032 (the end of the projection period). - We note that some participants may be retrained and employed through AMHC's social enterprises, which will increase their likelihood of ongoing economic participation. - The estimated Centrelink payment is \$511 per fortnight.
Increasing Productivity and Tax	\$8.1 million	Each successful resident is assumed to have secured employment, contributing income tax

Type of Economic Benefit	Savings over ten years (\$)	Underlying Assumptions
		and increasing the productivity of the economy to 2032 (the end of the project period). Based on PwC's estimate, the lost productivity and income tax is assumed to be \$11,344 per annum for every domestic violence offender.
Reducing the Number of Court Hearings and Associated Legal Aid Costs	\$1.8 million	- Each successful resident is assumed to have one reduced occurrence of recidivism, reducing the need for court and legal costs. - Each court finalisation is estimated to cost \$9,128 on average and each case in Western Australia is estimated to cost \$3,787 on average in legal aid.
Reducing Monitoring and Management of Domestic Violence Incidents	\$1.4 million	- Each successful resident is assumed to have one less occurrence of recidivism, reducing monitoring costs from the police. - The average police expenditure is estimated by PwC to be about \$9,900 per offence.
Reducing the Utilisation of Hospitals	\$0.6 million	- We have assumed that on average one person is hospitalised per incident of domestic violence. - The average hospital stay for ATSI in Western Australia costs \$4,500. This is equivalent to approximately 2.2 days in hospital.
Reducing the Number of Women and Children Seeking Refuge	\$0.4 million	- We have assumed that on average one woman seeks refuge per incident of domestic violence. - It costs the Newman Women's Shelter approximately \$2,700 per woman's stay.

Results

Figure 1 summarises the various economic benefits if 50% of program participants do not reoffend.



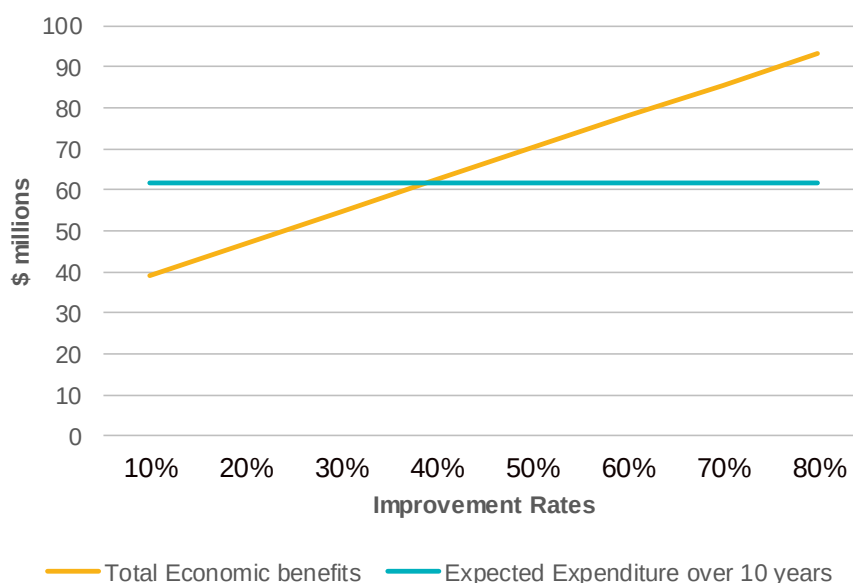
The associated social benefits have not been modelled in this exercise but are expected to increase the total benefits of the proposed program. These would include better educational and developmental outcomes for children from more functional families and observing less domestic violence as they grow up which will potentially benefit multiple future generations and potentially improved lifespans enabling longer economic participation and reduced costs of health services. Studies such as the 2012 Deloitte Access Economics investigation of the socio-economic benefits of investing in the prevention of early school leaving modelled potential benefits of \$12 for every dollar invested in the program, with overall net economic benefits to the individual and the community of the order of half a million dollars per person over their lifetime. The centre being a cultural hub with the availability of elders on site as a resource for both local community, visitors and tourists is likely to improve community participation and so contribute positively to society.

The 2007 report *Little Children are Sacred* undertaken in the NT highlights the extent of cross-generational impact of abusive behaviours from both within community but more particularly inflicted on Aboriginal people as a result of colonisation and dispossession. This cross-generational impact has driven many of the outcomes seen in families, and the report recommended a wide range of initiatives intended to break such cycles. The PACS program appears to us to squarely address the need identified in recommendation 49, “that the government actively pursue the provision of new services, and better resource existing services, for the counselling, healing, education, treatment and short term crisis accommodation of Aboriginal men in regional town centres and remote communities.”

As noted earlier, the amount of economic benefit is ultimately dependent on the overall success of the program in reducing recidivism rates, although even for low rates of success there is a direct benefit of reduced costs to the prison system while men are in the program. Some improvements in outcomes for other families, even if not as extensive as those assumed in Table 1, will also contribute to the economic benefits delivered by the program.

Figure 2 summarises the total economic benefits based on a range of potential outcomes.

Figure 2 - Estimated Total Economic Benefits under Various Improvement Rates



The proposed program is estimated to breakeven should it achieve a 40% improvement rate. This is based on an expected expenditure of \$62 million over 10 years which consists of the following:

- Construction cost of \$42 million estimated by by Adwoa Abban from Quantum Phases Consortium Pty Ltd
- Operational cost of \$2 million per annum as provided by AMHC. No allowance has been made for net income that may be received from the development of enterprises such as an industrial laundry which is proposed to be developed in conjunction with the program

This estimate excludes the construction costs relating to the connector road which the Shire of East Pilbara has conditionally agreed to fund. It also excludes some \$2 million worth of work which has been done pro-bono by architects, engineers, lawyers, members of the community and ourselves.

If the improvement rate is 50%, instead of 40%, the total economic benefits would be \$70 million, generating a total net economic saving of \$8 million. Alternatively, if development or operational costs are higher, the improvement rate outcome would need to be greater than 40% to achieve breakeven.

The facilities which are developed for the PACS program will probably be able to be repurposed following the completion of the expected 10 year term of the program if no longer required for that purpose. The expected incorporation of community, cultural and training facilities as part of the centre will provide a variety of options for its continued use. These benefits have also not been considered in our forecast as they extend beyond the timeframe of the current proposal.

Monitoring outcomes and further research

Given the close community involved, there will be good awareness of both general and particular outcomes from the PACS program, and the four year AMHC Specialist Outreach Assistance Program (SOAP) that continues after the residential 12 month program will assist in maintaining contact with graduates. Finity will be pleased to continue to work with AMHC to develop effective monitoring and reporting arrangements which will contribute to the ongoing research that AMHC is making into a broad spectrum of areas concerning family violence and developing that into programs that can be implemented in the broader Australian and international community.

Reliances and Limitations

Attachment A to this letter contains important reliances and limitations associated with this advice. These should be considered in order to put our findings in their appropriate context.

If you would like to discuss the contents of this letter, or have any questions, please do not hesitate to contact us.

Yours sincerely

Andrew Cohen

Fellows of the Institute of Actuaries of Australia

David Minty

A Reliances and Limitations

Distribution and Use

This report is provided for the sole use of Aboriginal Male's Healing Centre (AMHC) Strong Spirit Strong Families Strong Culture Incorporated for the purposes stated on Page 1. It is not intended, or necessarily suitable, for any other purpose. This report should only be relied on by AMHC for the purpose for which it is intended.

We understand that AMHC will provide a copy of the report to Northern Australia Infrastructure Facility, the Indigenous Advanced Strategy and other potential funders. Permission is hereby granted for such distribution on the condition that the entire report, rather than any excerpt, is included in the material provided to the organisation concerned. No other distribution of the report is allowed, unless we give our approval in writing. Any third party receiving this report should not rely on it, and this report is not a substitute for their own due diligence. We accept no liability to third parties relying on our advice.

Please read the report in full. If you only read part of the report, you may miss something important. If anything in the report is unclear, please contact us. We are always pleased to answer your questions.

Data Provided

We relied on the completeness and accuracy of the information we received. We did not audit or verify the information provided to us, but have reviewed it for general reasonableness and consistence. If the information provided to us is inaccurate or incomplete, please let us know as we may need to change our advice.

Uncertainty

The design of the Parnpajinya Aboriginal Community Safety project continues to evolve although the foundations of the proposed program and related therapeutic interventions have been established since at least 2017 when we undertook our first assessment of the program. Assumptions may be revised over time with updated information and changes in the proposed program. Please contact us if you require this report to be updated to take into account any significant changes to the proposed operation or participant levels of the program.

Many things may change in the future. We have formed our views based on the current environment and what we know today. If future circumstances change, it is possible that our findings may not prove to be correct.

As well as difficulties caused by limitations on the historical information, outcomes remain dependent on future events, including legislative, social and economic forces. It is quite possible that one or more changes to the environment could produce a financial outcome materially different from our estimates.

B References to Publicly Available Information

We have relied on the following publicly available information in preparing the above advice.

- The Annual Report for 2018/19 from the Government of Western Australia Department of Justice
- *“Prison penalties for serious domestic and non-domestic assault”* by the NSW Bureau of Crime Statistics and Research, Issue paper no. 110 dated October 2015.
- *“Recorded Crime – Offenders, 2018-19”* released by the Australian Bureau of Statistics on the 6 February 2020.
- *“Australian Public Hospitals Cost Report 2013-14 Round 18”* published by the Independent Hospital Pricing Authority.
- *“Indigenous incarceration: Unlock the facts”* published by PwC Australia in May 2017.
- Angela Spinney/Australian Housing and Urban Research Institute, Swinburne Research Centre November 2012, *Home and safe? Policy and practice innovations to prevent women and children who have experienced domestic and family violence from becoming homeless*
- *“The socio-economic benefits of investing in the prevention of early school leaving”* published by Deloitte Access Economics in September 2012.
- *Ampe Akelyernemane Meke Mekarle - “Little Children are Sacred”*: Report of the Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse 2007
- Information on JobSeeker Payment from the Services Australia website accessed August 2020.
- Newman Womens Shelter Inc - Financial Statements for the year ended 30 June 2016 and 2019.

We also spoke to Ms Maggie Lewis, manager of the Newman Women’s Shelter in December 2017 to obtain an estimate of the number of people using the shelter. The latest annual report indicates similar activity levels and hence demand and cost for the Shelter’s services. AMHC also supplied a copy of a participant survey conducted by the Shelter for the period July 2017 to December 2019.

APPENDIX

B. Letters of Support

- a. Newman Police (Senior Sergeant Larry Miller)
- b. Newman Police (Senior Sergeant Jon Munday)
- c. Newman Women's Shelter
- d. Dr. Tracy Westerman, Indigenous Psychological Services
- e. Minister Melissa Price MP, Federal Member for Durack
- f. Professor Mick Adams, Australian Indigenous Health InfoNet
- g. Empowering Communities

**WESTERN AUSTRALIA POLICE**

NEWMAN POLICE STATION
48 Mindarra Drive, Newman
WESTERN AUSTRALIA 6753

TELEPHONE; (08) 9175 4000
FACSIMILE; (08) 9175 1245

To whom it may concern,

I have been involved in the consultation relating to the *Aboriginal male's Healing Centre (AMHC) Strong Spirit, Strong Families, Strong Culture* since its inception. I would like to register the Newman Police Station's and my personal support for the proposed service, including the residential facility and outreach program. I believe that our community is in desperate need for such a program.

I understand that the AHMC will be requesting funding for the program, including funds to secure the specialist expertise (including cultural and clinical expertise) that is required to develop, implement and operate this holistic healing program. Securing these funds is crucial in the establishment of this vital Healing Centre, allowing us to move forward in our shared goals of reducing and eliminating family and domestic violence in our community.

Yours sincerely,

Larry Miller
Senior Sergeant 6506
Officer in Charge
Newman Police Station.



**WESTERN AUSTRALIA POLICE FORCE
NEWMAN POLICE STATION
48 Mindarra Drive
NEWMAN
WESTERN AUSTRALIA 6004
TELEPHONE: (08) 91754000**

**Your Ref:
Our Ref:
Inquiries:**

Mr Devon Cuimara
Aboriginal Males Healing Centre
Office 4, Newman House
Iron Ore Parade
NEWMAN WA 6753

To Whom it May Concern

The Aboriginal males Healing Centre (AMHC) looks to provide services in response to family violence within the Newman Community, specifically with a focus on the male perpetrator of that violence and providing counselling and diversion options for those males.

The planned residential facility for the AMHC will be integral to the success of this organization and I fully support this plan as it would benefit those male perpetrators, their families and the wider Newman Community.

At present facilities and options for males involved in family violence are limited in Newman, the ongoing work of the AMHC and its growth is very important in the growth of Newman as a community.

I look forward to the WA Police Force – Newman Police Station working with the AMHC in the future.

Yours sincerely

Jon Munday
Senior Sergeant – Officer in Charge
Newman Police Station

28 April 2020



28 September 2016

To whom it may concern

Subject: Aboriginal Male's Healing Centre – AMHC

Newman Women's Shelter strongly supports the AMHC for a grant to develop a residential Aboriginal Male Healing Centre in Newman. I have been part of the consultation processes and during this time have found it to be strongly supported by mainstream, local stakeholders and local aboriginal people.

The women's shelter's role is to support women and children escaping domestic and family violence. Admission numbers are increasing unfortunately, some of the main causes of domestic violence amongst aboriginal people are alcoholism, drugs, disconnect with culture and country, loss of identity and self-worth.

The AMHC will take a holistic accountable approach with professional integrity to perpetrators of domestic violence in an appropriate environment that will allow an accurate diagnosis of each individual that will enable improved health and self-worth and eventually re-connection to family, culture, country and life in general.

A facility and outreach program such as the AMHC is long overdue, the expectation of many aboriginal men is a continuation of life as they know it, without any change in sight. It is common place within the one family to have several members in Jail, some deceased at a young age from alcohol related diseases/abuse, others on dialysis, grandparents caring for grandchildren and for youth to be heavy drinkers. Alcohol abuse, drug dependence and domestic and family violence amongst aboriginal people is a multi-generational issue, impacting elders through to young children without an end in sight.

Without extensive support such as a residential unit and outreach program focussed and directed at perpetrators of domestic violence, elders, women, men, and children can expect the continuation of a life as they know it now, "without an end in sight".

I ask that you give this program your utmost consideration for the betterment of aboriginal people.

Thank you.

Kind regards

Maggie Lewis
9175 5100

14th December, 2020
August 2018

TO WHOM IT MAY CONCERN

I write to provide a letter of endorsement for the Aboriginal Mens Healing Centre whom I believe are applying to the National Indigenous Australians Agency (NIAA) regarding funding for the purpose-built mandatory male's healing and well-being centre, Puntu Yirna Maparnjula Japiya (Aboriginal Men's Healing Sacred-Place) for First Nations men who use violence.

As the NIAA would be aware interpersonal and male perpetrated violence is significant in our Indigenous communities and arguably one of our greatest national priorities. This escalation of violence is occurring in the context of having very few programs in Australia that fall within the category of 'prevention' and which are also Indigenous community led and supported. The AMHC not only addresses these significant gaps but is also based in the remote region of Newman in the Pilbara in which access to services for high-risk Indigenous communities remains a significant factor in our hopes for a world free of male perpetrated violence and one in which intergenerational trauma and violence are also directly addressed. As a Pilbara woman and psychologist, I am acutely aware of the need from within this community of services such as that being proposed by the AMHC. IN addition to this, I was also directly engaged as a consultant by the AMHC to develop their operational policies, procedures and clinical and cultural governance structures, a body of work that provides a roadmap for the AMHC to operate within best clinical and cultural practice in its delivery of services.

I provide this endorsement for all the above reasons.

Should any further information be required please do not hesitate to contact me on the details provided herein.

Regards



Dr Tracy Westerman
Managing Director PGDipPsych, MPsych, PhD



MELISSA PRICE MP

Federal Member for Durack

Senator the Hon Darren Chester
Acting Minister for Regional Development
PO Box 6100
Senate
Parliament House
Canberra ACT 2600

Dear Minister Chester

BUILDING BETTER REGIONS FUND ROUND 2

It is with pleasure that I write in support of the Aboriginal Male's Healing Centre's (AMHC) application for funding available through the Building Better Regions Fund Round 2 for the construction of a residential healing hub in Newman.

The hub will encompass 2 key components including a residential facility and an outreach program focusing on early intervention and prevention for Aboriginal male perpetrators of family and domestic violence. I understand the funding sought will enable the construction of a 28 bed residential facility offering accommodation, training and a range of healing programs for these men.

I believe, in Newman, for the short period between 1/2/2016 and 31/03/2016, there were twenty nine separate presentations to the Newman Women's Shelter (NWS) by 25 different women. Each of these women (and in many cases their children) were subjected to family and domestic violence perpetrated by men.

In my opinion, construction of the Aboriginal Males' Healing Centre (AMHC) is the critical step towards establishing a residential healing centre for Aboriginal males to reduce and eliminate family and domestic violence. I understand Aboriginal Culture and Lore will underpin the purpose and programs of the AMHC which will be led by respected Elders in collaboration with a clinical team.

Through residential and outreach programs, AMHC participants will develop life skills, sense of responsibility, meaningful employment, physical health and emotional and spiritual strength. Women and children's safety and security and will be protected.

Freecall 1300 301 876

Email Melissa.Price.MP@aph.gov.au

Underpinning the operation and purpose of the AMHC is Aboriginal Culture and Lore as the key healing element and core focus of all programs developed and delivered by respected Elders, in collaboration with a clinical team.

As the Federal Member for Durack, I am strongly of the opinion that we need to encourage and promote any measure that will reduce domestic violence. Through a holistic healing approach and then delivering back to the community, men with life skills, a sense of responsibility, meaningful employment, good physical health and who are emotionally and spiritually strong, I believe we can help save the lives of women and children.

I take this opportunity to wish the AMHC all the best in their effort to secure funding to ensure their vital residential healing hub is realised and proves to be a model on which other communities can base their

Yours sincerely



Melissa Price MP

12 December 2017

8th December 2020

Mr Devon Cuimara
Founder & CEO
Aboriginal Males Healing Centre
House 1, Parnpajinya Aboriginal Community
Newman, Western Australia

Dear Devon

The Australian Indigenous HealthInfoNet based at Edith Cowan University support the Aboriginal Males Healing Centre's application to the National Indigenous Australians Agency (NIAA) to obtain funding for the purpose-built mandatory male's healing and well-being centre, Puntu Yirna Maparnjula Japiya (Aboriginal Men's Healing Sacred-Place) for First Nations men who use violence.

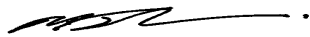
As the Senior Research Fellow with The Australian Indigenous HealthInfoNet, I have had input and contributed towards the AMHC's 'Sons of Father's conference in 2017. I have also advocated for Aboriginal Men's Behaviour Change Programs (AMBCP) and First Nations men's health & wellbeing in general, through research and community participation. I have also been involved with the Australia's National Research Organisation for Women's Safety (ANROWS) and the Healing Foundation to support the reduction of violence against women and their children. I am also the Ambassador for the Safer Families Centre, who's mandate is to address the problem of inadequate identification and response to domestic abuse and family violence in health services.

The Australian Indigenous HealthInfoNet will support knowledge translation and exchange initiatives, therefore visualise that a purpose-built mandatory male's healing and well-being centre will be significant placed to address family violence in the Aboriginal community, provide a service to work effective and culturally with male perpetrators involved in family violence, and importantly provide a safe place for women and children.

The Aboriginal Males Healing Centre's Puntu Yirna Maparnjula Japiya purpose-built mandatory male's healing and well-being centre will help ensure intervention on all levels having a significant impact on decreasing family violence and sexual abuse, therefore, in turn, improve the wellbeing of Aboriginal peoples in Newman and surrounding regional communities.

The Australian Indigenous HealthInfoNet wishes the Aboriginal Males Healing Centre's Puntu Yirna Maparnjula Japiya every success and look forward to working with them in the near future.

Best regards,



Dr Mick Adams

Senior Research Fellow

Australian Indigenous HealthInfoNet

Building 15, Room 320

Edith Cowan University

2 Bradford Street

Mt Lawley WA 6050

Ph: +61 8 9370 6875;

Mobile: +61 409646952

Core funding
is provided by the
Australian Government
Department of Health

The Australian Indigenous HealthInfoNet acknowledges the Traditional Owners of the lands and waters of Australia and the Torres Strait. We respect all Aboriginal and Torres Strait Islander people—their customs and their beliefs. We also pay our respects to Elders past and present, with particular acknowledgement to the Whadjuk people of the Nyooongar nation, the traditional owners of the lands where our offices are located.





21st September 2020

Dear Sir/Madam,

Empowering Communities AU have been collaborating with the Aboriginal Males Healing Centre (AMHC) for over 2 years.

The AMHC know the positive benefits of building an alliance around a person and we are proud to have been involved in running joint workshops with the AMHC in Newman to promote this methodology, multi-agency working and a whole family approach to tackling family violence.

The E-CINS Case Management System is used to manage some of the largest multi-agency programs in the UK including those involving Domestic and Sexual Violence. The use of E-CINS in the Pilbara region will enable the AMHC and their partners to provide their participants with improved outcomes, assess and address their needs in an integrated, collaborative way making more effective use of local services and support networks.

E-CINS will enable the AMHC to improve their data collection for reporting, monitoring and evaluation purposes. Importantly the system will provide participant journey mapping and the ability to export this valuable data for use on other business intelligence tools.

We have absolutely no hesitation in supporting the AMHC and the valuable work that they do.

Yours Sincerely,

Gary Pettengell,
CEO

Sarah Pettengell
Director of Services

15 April 2018

Mr Devon Cuimara
AMHC
PO Box 1142
Newman
WA 6753
Email: amhc@outlook.com

Dear Mr Cuimara

RE: Support for proposals for (i) an Aboriginal Men's Healing Centre and (ii) Community Amalgamation

The Patricia Giles Centre (PGC) has a well-established history in the provision of integrated family and domestic violence (FDV) services in Western Australia. We provide crisis accommodation, refuges, transitional housing, counselling services and outreach support to women and children exposed to FDV. Additionally, we work with corporates to educate and inform the business community of the pervasive and insidious nature of FDV and the need for a whole of community response. We have proud to have launched a social enterprise (Wollstonecraft) for gender equality that aims to empower women through self-determined access to independent income; thereby reducing the likelihood of their return to violent relationships due to low income.

PGCs vision is the *empowerment of women and equality for all*. Our mission is to end FDV by 2038. In this respect our work is very much aligned to that of the Aboriginal Men's Healing Centre (AMHC).

Aboriginal women's experience of FDV is compounded for those living in remote locations. What impresses about AMHCs proposals is its unique solution to an age-old problem that places the community centre stage in solving the problem. The recognition that elderly, as well as women and children need to be safe from FDV speaks to an understanding of current 'trends' in FDV. Provision of services in a safe, secure and sacred environment is critical to supporting recovery. The Safe and Secure Co-operative Housing – Social Enterprise Model is an impressive initiative that has the capability to empower women; it is exciting to see it being used in the FDV sector.

The Patricia Giles Centre congratulated the AMHC on the proposals and offers its support for their intent. Further, should the AMHC require it, we welcome the opportunity to provide support or advice on the operationalisation of the initiatives and any other areas where our expertise might assist.

We wish AMHC the very best in securing funding for the proposals.

Yours sincerely



Tillie Prowse
CEO
Patricia Giles Centre

APPENDIX

C. Preliminary Cost Plan
Estimate for Aboriginal Males
Healing Centre in Newman,
Quantum Phases Consortium
(Quantity Surveyors).



Our ref: QPC/GL/2019/10/28014

28 October 2019

Principal Project Services Manager
Allied Projects Pty Ltd
Unit 5, 6 Douro Place,
West Perth, WA 6005

Attention: Mr. Allan Crow

Dear Mr. Crow

RE: ABORIGINAL MALES HEALING CENTRE -NEWMAN

Enclosed is our final construction cost estimate for this project which includes:

- Buildings and Structures
- Siteworks and Infrastructure
- Infrastructure and Services

Additional notes have been included in the Pricing Document attached

Ms Adwoa Abban, Director of Quantum Phases Consortium Pty Ltd, will be the primary person for correspondence.

Yours Sincerely,

Quantum Phases Consortium Pty Ltd
Principal Consultant/Director

Maximising Value for Best Results

Quantum Phases Consortium Pty Ltd
ABN 59 615 893 779 | ACN 615 893 779

11 Hardy Street | South 6151 | Australia
+61 488 174 780 | www.quantumphases.com.au



PRELIMINARY ESTIMATE ABORIGINAL MALES HEALING CENTRE - NEWMAN -Dated 25 October 2019

Maximising Value for Best Results

Quantum Phases Consortium Pty Ltd
ABN 59 615 893 779 | ACN 615 893 779

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Item	NOTES AND EXCLUSIONS
1.0	Basis of Cost Plan <u>Matthews McDonald Architects Drawings</u>
2.0	GENERAL NOTES This Cost Plan Report was prepared for Aboriginal Men Healing Centre The Cost Plan Report is \$41,881,940.22, see breakdown for details The Building Works This Cost Plan has taken into consideration the low to medium standard finishes. Due to the available information, cost plan have been put together sourcing information from various sources Infrastructure Site Works Other costs have been updated to reflect current costs for this quarter for Infrastructure works Costs for the Connector Road to the Main AMHC site and the "T" Junction Intersection with the Great Northern Highway have been updated. Infrastructure Service Works Costs have been updated to reflect current costs for this quarter for Infrastructure works Professional Fees Allowance have been included for Professional fees for all Consultants on the Project. Building Approval Fees Approximate allowance have been included for Building Approval Fees costs
3.0	Areas Gross Floor area are based on the internal dimensions of the building.
4.0	Additional Notes The following notes have been adopted from the previous estimate LNG bulk tank and bottles will be provided by Kleenheat on a rental basis. This will become a run-ning cost and has not been included as a construction cost. Where water storage tanks are integral to building or structure the cost, of the tanks are included in that building or structure. Micro generator systems are mentioned using a fully encased hydro loop operated by using solar and wind pumps to keep an elevated header tank and a lower ground level tank in generating mo-tion. The system is estimated to cost \$100,000 per dwelling.
5.0	Recommendations As earlier suggested, the cost using modular construction will have immediate benefits as in lower cost setup costs, quicker and easier construction and easy to dismantle. However, if the buildings are required for long term then a more permanent structure would be required.

Item	NOTES AND EXCLUSIONS
6.0	Exclusions - GST - Planning and Building Control fees - Survey costs - Services diversions - Abnormal ground conditions - Archaeological investigations and exploratory works - Refuse bins - Costs associated with rights of light, air rights (crane oversailing) - Party wall fees and costs - Increased costs other than stated above.

GROSS FLOOR AREA OF BUILDINGS

Item	Building	Area
1.01	ENTRY TRANSITION SPACE	83.00
1.02	ADMINISTRATION	235.00
1.03	NURSES STATION	115.00
1.04	COUNSELLING AND CLINICAL SERVICE	307.00
1.05	SECURE RESIDENTIAL UNITS	99.00
2.02- 2.04	SUPERVISED RESIDENTIAL UNITS	283.00
3.01	Common Dining , Living	250.00
3.02	Main Roof Outdoor activity	142.00
4.01	MEDITATION PLACE	120.00
5.01	MEETING PLACE AND RECREATION	113.00
5.01	CENTRAL MEETING PLACE	96.00
6.01-6.05	INDEPENDENT RESIDENTIAL UNITS	633.00
7.01	FAMILY AND CONSULTING	353.00
8.01	WORKSHOP	183.00

DRAWINGS

Planning Concept - Administration and Admission Services Rev G
 Planning Concept - Family and Consulting Services Rev G
 Planning Concept - Secured Residential Unit Rev G
 Planning Concept - Supervised Residential Unit Rev G
 Planning Concept - Counselling and Clinical Services Rev G
 Planning Concept - Residents' Common Living, Meals and Kitchen areas Rev G
 Planning Concept - Meeting Place and Recreation Facilities Rev G
 Planning Concept - Independent Residential Units Rev G
 Planning Concept - Workshop, Storage and Training Areas Rev G
 Planning Concept - Ceremonial Departure Place and Meditation space Rev G
 Planning Concept - PDA_01 location plan 15000 Rev G
 Planning Concept - PDA_02 site plan layout 1000
 Planning Concept - PDA_03 site plan landscape enhancement 1000 copy
 Planning Concept - PDA_04 site developement area plan 750 copy

PRELIMINARY ESTIMATE ABORIGINAL MALES HEALING CENTRE - NEWMAN



Item	Description	Amount
	GRAND SUMMARY	
A	BUILDING WORKS	15,364,629.08
B	SITE INFRASTRUCTURE WORKS	15,517,583.51
C	SERVICES INFRASTRUCTURE WORKS	5,506,431.08
	ADDITIONAL COSTS	
D	PROFESSIONAL FEES	5,458,296.55
E	BUILDING APPROVAL COSTS	35,000.00
	BUILDING WORKS TO SUMMARY	\$ 41,881,940.23

Exclusions

- 1 GST
- 2 Increased costs beyond 3rd Quarter 2019
- 3 See also Notes

Quantum Phase
CONSORTIUM

AMHC Cost Plan 27 October 2019

PRELIMINARY ESTIMATE ABORIGINAL MALES HEALING CENTRE - NEWMAN



Item	Description	Amount
	SITE INFRASTRUCTURE WORKS	
A	Landscaping allowance (excluding continuing maintenance and replacements)	368,918.92
B	Site preparation, clearance and removal of debris	78,000.00
C	Major earthworks to build up part of the site above the 1:100 flood level	1,897,297.30
D	T-intersection with Great Northern Highway and future proposed road - New Great Northern Highway intersection at 1156.58SLK including new roadway up to boundary line of lot 44774, slip road, associated clearing, earthworks, widening to existing carriageway and new pavement areas, drainage, culverts, kerbing, line markings, signage, traffic management and lighting.	5,000,000.00
E	Site connector road description: Lot 44774 internal site connector road including new roadway up to boundary line AMHC site, right hand corner and roadway extending 100mm north to service future transport hub subdivision. Works include associated clearing, earthworks, new pavement areas, drainage, culverts, kerbing, line markings, signage, traffic management and lighting.	3,000,000.00
F	Internal roads, car parking and paving, etc.	396,324.32
G	Palisade fencing including gates, etc.	1,784,513.51
H	Perimeter fence and street lighting	737,837.84
	SUBTOTAL	13,262,891.89
	Preliminaries	\$ 1,326,289.19
	Contingency	\$ 928,402.43
	TOTAL TO SUMMARY	\$ 15,517,583.51

PRELIMINARY ESTIMATE ABORIGINAL MALES HEALING CENTRE - NEWMAN



Item	Description	Amount
	SERVICES INFRASTRUCTURE WORKS	
A	Ground and paving stormwater management incl. soakwells All roads have been profiled to shed rainwater away from road surfaces to landscaped areas. Soakwells have been used where flat paving areas occur. The natural ground levels and major earthworks will provide the run off through the natural tributaries into the Fortescue River.	\$ 384,729.73
B	Roof and building stormwater management incl. tanks and pipework and fittings Roof and stormwater management has been based on the Australian Government Bureau Of Meteorology rainfall statistics available for Newman over the past years. Average annual rainfall rates have been taken into consideration to assess the feasibility of storing the stormwater in storage tanks. It is not clear what this stored water is going to be used for, but we have realised after evaluating the site that connecting downpipes to two separate tanks from all over the site buildings appears to be cumbersome due to the fact that gravity feed pipes will have to run long distances between buildings to feed the tanks (which might need circulating pumps).	\$ 480,648.65
C	Water supply (independent) The water supply includes for two bores (with the boring), filtration system, storage tanks, storage tanks back-ups, pipework, valves and the emergency generator and pumps to be used for the central meeting place structure.	\$ 2,135,513.51
D	Power supply - Option 1 (not available as per your instructions)	
E	Power supply - Option 2 (stand-alone supply system) Power supply option 2 includes for a solar system consisting of solar panels for each building, solar regulators, mounting kits for the solar panels, inverters, wind turbines for each building, battery banks to store the energy and electrical cabling and distribution to each building (not including the cabling within the building as there are no drawings for this)	\$ 1,312,297.30
F	Effluent disposal incl. commercial treatment unit, concrete tanks and reticulation	\$ 235,054.05
G	Communications Communications includes conduiting, telephone data outlets, components (like surge arrestors, electrical boxes and telephones), an approximate Telstra connection fee and cabling	\$ 158,108.11
	SUBTOTAL TO SUMMARY	\$ 4,706,351.35
	Preliminaries	\$ 470,635.14
	Contingency	\$ 329,444.59
	TOTAL TO SUMMARY	\$ 5,506,431.08

APPENDIX

D. Cultural Review of Policies and Procedures, Development of Cultural Guiding Principles, Dr Tracy Westerman, Indigenous Psychological Services. [Available on request]

APPENDIX

E. AMHC Development
Construction Packages.
[Available on request]

APPENDIX

F. AMHC Architects
Statement. [Available on
request]

APPENDIX

G. AMHC Aboriginal
Governance Structure
[Available on request]

APPENDIX

H. AMHC Social Business
Enterprise Strategy [Available
on request]

APPENDIX

I. AMHC Kilinpala Industrial
Laundry and Dry-Cleaning
Services (KLS) Business Case.
[Available on request]

APPENDIX

J. AMHC Jinyjira Cultural
Education Centre SBE Business
Case [Available on request]

APPENDIX

K. Original AMHC Business Proposal 'Residential and outreach healing program for perpetrators of family and domestic violence' (2017).
[Available on request]