

**REMARKS BY THE HONOURABLE PETER UNDERWOOD AC,
GOVERNOR OF TASMANIA OPENING THE 2012
PARAMEDICS AUSTRALASIA CONFERENCE, HOBART,
FRIDAY 2ND NOVEMBER 2012**

It is a great pleasure for me as the Governor of Tasmania to welcome you all to Hobart for the 2012 Paramedics Australasia National Conference. I see that we have paramedics from all parts of Australia and few very distinguished guests from overseas. Rest assured that all our visitors, whether you come from far or near are very welcome here in this beautiful island State.

As you may know in recent weeks Hobart has enjoyed a positive epidemic of medical conferences. There have been the general surgeons, the anaesthetists, the forensic scientists, the emergency nurses, the forensic scientists, the Burns Association and the Council of Ambulance Authorities. Some of those present this morning may have been at the Ambulance Authorities conference although it has been explained to me that the Council of Ambulance Authorities are administrators concerned with the management of ambulance services and policy, and are not the people who actually go out and get the job done.

When I was given this explanation it brought to mind an event that a friend of mine, who actually is an ambulance service administrator, told me. He is also an amateur hot air balloonist and he said that one fine, still morning he was floating high up in the air near Canberra when clouds closed in and he lost his way. So he lowered his balloon until he was just below the cloud cover and as he

did so he saw a man walking across a paddock beneath him. So my friend leaned over the edge of his basket and called out to the man, "excuse me, but can you tell me where I am?" The man looked up and said, "Yes, you're in a hot air balloon, hovering 30 metres above this paddock."

"You must be a paramedic" shouted my friend.

"Well actually I am," replied the man. "How did you know?"

"Well," said my friend in the balloon, "everything you have told me is technically correct, but it's of no use to anyone."

The paramedic shouted back, "Then you must be one of those ambulance administrators."

"Well how on earth did you know that?" replied my friend.

"Well," said the paramedic, "you don't know where you are, or where you're going, but you expect me to be able to help. You're in the same position you were in before we met, but now it's my fault."

And no I didn't tell that story to the Ambulance Authorities conference!!

Every day a paramedic has to deal with urgent and complex medical emergencies. Each one is different and most call for specialised knowledge and the exercise of special skills. Often those emergencies involve dangerous rescues that expose the attending paramedics to grave risk of serious personal injury or even death. Paramedics accept those risks as just part of their job to help others. In result paramedics are generally held in very high esteem by right

thinking members of the community they serve. However, the extraordinary thing is that it is not uncommon for paramedics to be verbally abused and physically attacked even when in the process of providing the abuser or attacker with life-saving medical attention. A 2007 study conducted by the Australian Emergency Medical Journal found that internationally, 60% of paramedics have experienced physical violence in the workplace, and between 21–78% have experienced verbal abuse.

In Australia a questionnaire was developed to explore paramedics' experience six forms of violence: verbal abuse, property damage or theft, intimidation, physical abuse, sexual harassment, and sexual assault. The questionnaire was distributed to 500 rural Victorian paramedics and 430 metropolitan South Australian paramedics.

The responses revealed that;

- 87.5% of paramedics were exposed to workplace violence.
- Verbal abuse was the most prevalent form of workplace violence (82%),
- Verbal abuse with intimidation (55%),
- physical abuse (38%),
- sexual harassment (17%), and
- sexual assault (4%).

Now the real difficulty is how to deal with this problem. This difficulty is compounded by the fact that one never knows which calls will involve a violent patient or by-stander and which ones will not. However, according to a media release by the Victorian Premier¹ that State's response will be the enactment of legislation to provide for tougher penalties: "Under new penalties being introduced by the State Government, anyone found guilty of seriously injuring an emergency service worker - including police, doctors, nurses, paramedics, SES officers, firefighters and lifesavers - will get an extra year of prison on top of their normal sentence. Those who murder an emergency worker will face an additional five years in jail on top of their sentence. Even those whose attacks cause non-serious injuries will face at least an extra six months in jail."

This measure is no doubt based upon the proposition that increased penalties will act as a deterrent to others and prevent them acting in like manner. As a Supreme Court judge in this State for 24 years I have to say that generally there is little evidence that tougher penalties act as a deterrent to others. But in any event there is no doubt that where the victim of the attack is a paramedic, police officer fire officer or other emergency worker the sentencing judge has always taken that into account as an aggravating circumstance attracting a more severe penalty than would otherwise be the case.

As you would all know better than me these attacks are invariably perpetrated by people who are irrational due to illicit drug ingestion or

¹ <http://www.premier.vic.gov.au/media-centre/media-releases/3714-tougher-sentences-on-the-way-for-attacks-on-police-and-emergency-workers.html> accessed 23.10.12

alcohol - often both. Sometimes violent behaviour may be due to brain injury, but whatever the cause it seems unlikely to me that a person who is seriously affected by drugs or alcohol is likely to give pause and rationally recall that if he or she goes ahead with an assault the penalty will be more severe if the victim is an emergency worker. No one would think that the nature of a paramedic's work is such that it is likely to attract violence. The inevitable conclusion is that such an attack is an irrational response invariably fueled by drugs or alcohol. Generally speaking in my respectful view, irrationality does not respond to a reasoned approach and getting tough on offenders by increasing penalties does not act as a general deterrent.

Unfortunately I do not have an answer to the problem. I doubt if it would ever be feasible for all paramedics to be accompanied by a police officer or security guard every time they go out on a job. I was unable to find any studies that looked why these assaults are committed on people who are there to give urgent assistance to another. Maybe such studies would shed some light on the problem of how to reduce the incidence of assault on paramedics, but I wouldn't be at all surprised if most of you thought it is a regrettable consequence of increased drunkenness and illicit drug taking and part of general problem of violence in the community.

However, I shouldn't be opening your conference on a note of gloom for the programme shows that it will be a very busy conference with many interesting and stimulating sessions to attend. So without further ado I open the 2012 Paramedics Australasia National Conference and wish you all an enjoyable time in Hobart.