



Speech By  
**Craig Crawford**


**MEMBER FOR BARRON RIVER**

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**MATTER OF PUBLIC INTEREST**

**Alcohol Fuelled Violence**

 **Mr CRAWFORD** (Barron River—ALP) (11.48 am): I rise today to speak about alcohol fuelled violence and the impact that I have witnessed firsthand over my 15-plus years as a front-line paramedic in various states, various locations and various cities. To put it into perspective, I will run through a small segment of a night that I can recall. It is three o'clock on a Saturday morning. I am on shift in my ambulance with my partner. Much of our night after dark has been taken up with cases resulting from assaults, alcohol and drugs. We are sent from the hospital in Cairns on an emergency dispatch into the city. It is about a five- or six-block drive. Under lights and sirens it is three minutes, give or take. The case as given to us is a male in his 20s, unconscious from an assault lying on the footpath outside a busy nightclub. The perpetrator has apparently left the scene. Police have been dispatched, but we will arrive first given our location. We are advised to approach with caution, but there was a large degree of background noise on the call. Three minutes later I am first confronted on the scene by an intoxicated female in her 20s carrying her heels in her hand, her make-up smeared, and she is yelling at me because I have taken so long to get there. I try to refocus her by saying that we got here as quickly as we could, and asking 'Where is the patient?', but she is having nothing of it. She swings out at me and strikes me to the chest. A friend grabs her. I instruct her friend to do something about her and do it now.

Before arriving at the patient I am further confronted by a male in his 20s, also intoxicated. He tells me that his best friend is the one who has been king-hit. He starts to cry then suddenly grabs me by the shirt front and tells me that if his friend dies he will find me and he will kill me. I have not even got to the patient yet and already I have been assaulted twice, but there is little I can do about it. I think to myself, 'When did it become okay to physically assault paramedics?' I have to brush that aside; I have to find the patient. I push through a wall of people. I find the patient. He is unconscious, bleeding from the face, lying on the ground. First aiders have done a good job. Over the next five minutes we focus on him, working with our back turned to the crowd. There is a crowd controller nearby but he is one and there are many people. The crowd is angry and the space we are working in is getting smaller. I cannot move from left or right or even stand up without having to push through people. At any time I could be struck from behind or struck over the head. I know of paramedics who have had this happen to them. I sit there treating the patient thinking, 'Will tonight be my time?'

In almost a rehearsed move we can hear the distressed screams of a female approaching. I know it will be his girlfriend. I have heard it so many times. She arrives distraught, angry and emotional. She wants answers, 'Who did this? Why did he do it?' She is joined by a group of friends who have been rallied by smartphones coming to help, coming to get payback. By now our patient is awake, confused, concussed, intoxicated and startled. He does not handle the noise, the lights or the questions. The last thing he remembers is being in a fight. His first automated response is to begin where his brain switched off and that is to fight. I am the closest person to him. He reaches out to strike me and misses. I am

expecting it so it is no surprise to me. I spend the next minutes reassuring him that I am a paramedic; I am not the person he had a fight with. He continues to ask me what happened and he continues to forget what my responses are. You see, he is concussed; his short-term memory is struggling to keep up. Each time he asks me what happened, each time I tell him and each time, on cue, he gets upset and angry and wants to find the person who did this to him. He recalls talking to a girl and then walking out of the club. Some guy just came up from out of the blue and hit him.

As we get into our ambulance with him, police are helping with controlling an angry crowd of up to 20 or 30 people. By now word has gone around that the guy who did this was wearing a blue shirt. I can hear vigilante groups beginning to mobilise looking for this man in the blue shirt. We get our patient to the hospital. By now he is very agitated, scared and it is not long before he is involved in a scuffle with a nurse in the emergency department. Despite pleas from medical staff, he walks out of the emergency department into the night, still concussed and still suffering a brain injury, but the staff are unable to reason with him. He is intoxicated, he is angry, he is sore, he does not reason; he just wants to go and get revenge.

Before we have a chance to gather our thoughts, a dispatch for a further case is given to us: a male person assaulted by a group of males in the city. We are to wait for police as the assault is still underway. I comment to my partner, 'I bet it is some random guy in a blue shirt standing in the wrong place at the wrong time.' That is a snapshot of 30 to 40 minutes of one ambulance crew on one Friday or Saturday night. If any members are in doubt as to the authenticity of my words, please take *Hansard* and go ask any paramedic working in Cairns, Townsville, Brisbane or the Gold Coast. We must do something about alcohol fuelled violence.