

Emma-Lisa Eronen, you plead guilty to committing an unlawful act intended to cause grievous bodily harm. In March 2020 you were living alone in a unit in South Launceston. The complainant, a person you knew, had been required to leave a shelter she had been living in and asked whether she could stay with you. You agreed, but very soon, conflict arose. At a time you had both been drinking alcohol and were both substantially affected, she persisted with a suggestion that you visit a male drug dealer to offer sexual favours in return for drugs. In response to that suggestion you became uncomfortable, emotionally insecure and upset. You asked her to leave. She resisted, saying she had nowhere else to go. You put her bags out but still she refused. When she attempted to retrieve her belongings and come back inside you first unsuccessfully tried to push her out. The argument became very heated. You were entitled to use reasonable force to remove her from your home, but what you then did was grossly disproportionate. You took a steak knife and struck her repeatedly with it to the back of her head and body. As she turned towards you, you continued to stab at her striking her eye, chest and arm. Neighbours found her outside the unit. She was injured and bleeding and was taken to hospital by ambulance.

The complainant was found to have injuries to her eye, scalp, neck and arm. She had a full thickness wound to her left upper and lower eyelid, her left eye itself was cut and the floor of her left eye socket was fractured. She had a 5 centimetre full thickness laceration to the back of her scalp, partial thickness lacerations, four and two centimetres respectively behind her right ear, a one centimetre full thickness laceration to the front of her right neck, and a ten centimetre full thickness laceration to her right forearm. There were other smaller wounds to the back of her head and to the left side of her chest. She underwent surgery under general anaesthetic to repair all of her wounds but it was expected that they would heal without long term complications.

You were arrested and interviewed. You admitted arguing with the complainant and punching her, but said that you could not recall stabbing her.

The crime to which you have pleaded guilty is very serious because it involves an admission of violence committed with an intention to cause serious injury. It has been repeated by a number of judges in this State that the crime "ordinarily" carries a penalty of imprisonment within the range of three to seven years. In this case serious injury was caused, and it is only by great good fortune that the complainant was not even more seriously injured or even killed. Any one of the blows you inflicted with the knife to her eye or neck may have caused grave injury. The force of a blow or blows to her eye was sufficient to cause the facial fractures to which I have referred. Whether those fractures were caused by a punch or by a blow while you were holding the knife cannot be determined. The photographs of the injuries you inflicted are confronting. The complainant's victim impact statement describes some important ongoing physical and psychological issues, not surprising given the terrifying nature of the attack, but the only medical evidence provided to the Court is that the injuries were expected to substantially resolve.

I have been asked to make a home detention order. You have been assessed as suitable for such an order. Counsel for the State submits that some crimes are so serious that a home detention order will not result in adequate punishment or deterrence or retribution. That is a submission of some force as it applies to this case. However, notwithstanding the very serious nature of

this crime, I have decided for the reasons I will give in a moment that your personal circumstances warrant an individualised approach to sentencing and that it may be appropriately dealt with by a home detention order, combined with a community correction order. Those orders will include conditions requiring not only home detention but a prolonged period of supervision and your attendance at rehabilitation programs.

You are now aged 33. You come from a background of considerable deprivation, dysfunction and disadvantage. Your childhood was marred by abuse, neglect and domestic violence. Your parents were alcoholics. You had little contact with your biological father. Your mother left home when you were 4, and after a brief period with your maternal grandmother you and your older sister were in and out of various foster homes until you were about 13. You stayed in school until you were in Grade 7 although you were displaying behavioural problems, but from then you have been largely fending for yourself. Your formal education ceased. You were subject to sexual abuse, initially perpetrated by one of your mother's partners. You became pregnant and your first child was born when you were only 14. You were 17 when your second child was born and another child was born two years later. You have four children altogether. The oldest is now 18 and the youngest is 5, but none of them are in your primary care. You lost another child in the course of a pregnancy earlier this year. Since your early teens your life has been characterised by homelessness, and abuse of alcohol and drugs. From about age 15 you used alcohol and cannabis daily. You used methylamphetamine during your 20s. Use of that drug has been recently more intermittent although you used it about two weeks before this crime was committed. During your teenage years and adult life you have been the subject of very serious sexual trauma and abuse and violent relationships. About five years ago there was a period of self-harm in the form of self-laceration, and a suicide attempt, but no formal admission to a psychiatric unit.

In recent years you have been living by yourself. To your credit you have maintained your own residence through Housing Tasmania for the last five years although there have been some difficulties with nuisance and damage to property. If imprisoned you are likely to lose your tenancy. In 2012 you were sentenced by a magistrate to a short wholly suspended term for a number of offences, mostly driving and bail offences, but also one count of common assault. Since then there have been other instances of violence. Part of your response to the sexual and other violence committed against you was to carry a knife for protection. In August 2017 you lunged at a man with a knife in your hand. For that offence a conviction was recorded. In November 2019 you were sentenced to imprisonment for two months, wholly suspended for two years, and an 18 month community corrections order. The offences included a common assault committed on 4 May 2019 in which you attempted to stab a man to his face with a steak knife. The other offences involved breach of bail and possession and use of cannabis. The crime for which you are now to be sentenced breached that suspended sentence and community corrections order. However the suspended sentence has already been activated when, on 7 September 2020, you pleaded guilty to destroying property. You served a total term of two months from 21 March 2020.

I have been given two reports prepared by Dr Michael Jordan respectively dated 1 June 2020 and 30 March 2021. The first primarily concerned your fitness to stand trial. The second report considers matters more relevant to sentence. After referring to your dysfunctional and traumatic background, Dr Jordan concludes that your various psychiatric symptoms, including those of a depressive and anxiety type, combined with sleep disturbance, periods of self-destructive behaviour and a pathological pattern of relationships over which you have little control, are best characterised under the diagnosis of a complex post-traumatic stress disorder.

It is a condition seen in those exposed to sustained and repeated physical or sexual abuse. You also meet the criteria for polysubstance abuse disorder.

Based on the contents of Dr Jordan's reports, the State accepts the existence of a causal connection between the crime and your psychiatric condition, although your intoxication is also a contributing factor. Because of your exposure to past sexual trauma, the persistent suggestion of exchange of sexual favours for drugs contributed to a rekindling and reactivation of previous trauma which was so distressing that you reacted in a way which was so violent and disproportionate. You claimed to the police that you remembered punching the complainant, but had no memory of using a knife, and expressed surprise when you saw the photographs which disclosed the nature and extent of the complainant's injuries. It is a claim which you still maintain, and which is not disputed by the State. Dr Jordan was asked how that may be reconciled with an admission, inherent in your plea, that you intended at the time of the crime to cause serious injury to the complainant. In his opinion, confirmed, I am told, by further information given in conference with your counsel and with counsel for the State during the course of the sentencing proceedings, it is consistent with your reaction at the time leading to a dissociative or similar experience during which you formed the relevant intention, but as a result of which you did not later fully recall your actions. It involved a high degree of emotional dysregulation, so much so that your memory was affected after the event.

I accept that the compound post-traumatic stress disorder which Dr Jordan diagnoses is relevant to sentence in a number of respects beyond those I have already described. I am satisfied that your moral culpability is somewhat reduced because your condition contributed to such a disproportionately violent response to the complainant's suggestions and refusal to leave your unit. I do not lose sight of the contribution also played by your intoxication in circumstances in which you had some knowledge of how excessive consumption of alcohol may lead you to conduct which Dr Jordan called dysregulated, and possibly violence. The contribution respectively resulting from your condition and the consumption of alcohol cannot be separated or apportioned. General deterrence remains an important sentencing factor although its significance is reduced to some extent. Your condition is also relevant to the type of sentence which might be imposed. According to Dr Jordan you are a damaged, volatile and vulnerable person who needs treatment. Prison will do nothing to address the factors which led to this offending and may simply result in further trauma. The treatment and services you so obviously require will not be available in prison. There is a considerable potential benefit to the community if your rehabilitation is given priority in the sentencing process, in terms of both your psychiatric condition and drug and alcohol rehabilitation. Your recent engagement with drug and alcohol counselling services has been encouraging and there has been a referral for a mental health care plan. Specific deterrence remains a sentencing factor. However, it will not, according to Dr Jordan, be achieved by imprisonment. He considers that imprisonment, for a person already with a history of multiple trauma exposure, will not be an effective deterrent and consequently will not reduce the chance of re-offending.

A home detention order will not have the same punitive impact as imprisonment, but will still be a significant restriction on your liberty for a substantial period, and provide some protection for the public, while allowing for measures aimed at your rehabilitation to be progressed. Home detention should be for the maximum period. You have not completed the community service hours ordered in 2018 and I will require that you now comply with that order as a condition of your home detention. I will also make a community correction order requiring supervision for an extended period and referral to rehabilitation programs.

You are convicted on the indictment. I make a home detention order. The operative period of the order is 18 months from today. I specify the premises at which you are to reside during the operational period of the order as [home detention premises]. I order that immediately upon your leaving Court you report to the office of Community Corrections at Highfield House, 114 Bathurst Street, Hobart, for induction into this order, and a further explanation as to its full terms. The order will be subject to all of the core conditions set out in the *Sentencing Act 1997*, s 42AD(1). They will be set out in the order that you will be given, but include that you will submit to electronic monitoring and must, during the operational period of the order, if directed to do so by a police officer, probation officer or prescribed officer, submit to a breath test, urine test, or other test, for the presence of an illicit drug. I specify that you must be at the home detention premises at all times unless for a relevant reason. In short, that means that you must be at those premises unless there is a need for urgent medical treatment, there is a serious risk of death or injury, or you already have the approval of a probation officer to be absent. It will be for the probation officer to determine what to approve so as to allow for treatment or rehabilitation, or for any other purpose. The conditions will include that you not commit another offence punishable by imprisonment and that you comply with all directions given to you by your probation officer. I impose special conditions that:

- while the home detention order is in force you must comply with the conditions of the community corrections order made on 30 April 2018;
- you must submit to the supervision of a Community Corrections officer as required by that officer;
- you must not take any illicit or prohibited substances. Illicit and prohibited substances include any controlled drug as defined by the *Misuse of Drugs Act 2001*, and any medication containing an opiate, benzodiazepine, bupropion, hydrochloride or pseudoephedrine, unless you provide written evidence from your medical professional that you have been prescribed the relevant medication;
- you must not, during the operational period of the order, consume alcohol, and you must, if directed to do so by a police officer or Community Corrections officer, submit to a breath test, urine test, or other tests for the presence of alcohol;
- you must submit to any rehabilitation or treatment program as directed by a probation officer;
- you must submit to a medical, psychological, psychiatric or physical or mental health assessment or treatment as directed by a probation officer;
- you must maintain an active mobile phone service, provide contact details to Community Corrections and be contactable through that device at all times.

This order comes into effect immediately. You must understand that if you do not comply with the conditions, imprisonment is likely. If you breach the order by committing another offence, the order must be cancelled unless there are exceptional circumstances, and in that case imprisonment would be highly likely.

I also make a community corrections order for two years and six months from today. The core conditions of that order will be specified in the order you will be given and include that you not commit an offence punishable by imprisonment, that you report to and comply with the directions of a probation officer, that you must not leave Tasmania without permission, and that you must notify any change of address. I impose special conditions that you must, during

the operational period of the order, submit to the supervision of a probation officer as required by the probation officer, attend and participate in and complete educational and other programs, undergo assessment and treatment for alcohol or drug dependency, submit to testing for alcohol or drug use, and submit to medical, psychological or psychiatric assessment or treatment as directed by a probation officer. You must attend, participate in, and complete the EQUIPS Addiction Program as directed by a probation officer. If you breach any of those conditions you may be brought back to Court and re-sentenced.