

# FINAL TRANSCRIPT

## LEGISLATIVE ASSEMBLY LEGAL AND SOCIAL ISSUES COMMITTEE

### Inquiry into Support for Older Victorians from Migrant and Refugee Backgrounds

Coburg—Tuesday, 1 March 2022

#### MEMBERS

Ms Natalie Suleyman—Chair

Mr Brad Battin—Deputy Chair

Mr Neil Angus

Ms Christine Couzens

Ms Emma Kealy

Ms Michaela Settle

Mr Meng Heang Tak

#### WITNESSES

Ms Elly Gardner, Living and Ageing Well Officer, and

Mr Petr Svoboda, Social Policy Officer, Moreland City Council; and

Mrs Ikbal El-Imam, Moreland resident, and

Mrs Sumaya El Masri, Mrs El-Imam's carer.

**The CHAIR:** Good morning, everyone. Welcome to the public hearing for the Legislative Assembly Legal and Social Issues Committee's Inquiry into Support for Older Victorians from Migrant and Refugee Backgrounds.

I acknowledge the traditional owners of the land on which we are meeting. I pay my respects to their elders past and present and the Aboriginal elders of other communities who may be here today.

My name is Natalie Suleyman. I am the Member for St Albans and the Chair of this committee. I also acknowledge my colleagues participating today. To my right I have Michaela Settle MP, the Member for Buninyong, and to my left I have Meng Heang Tak MP, the Member for Clarinda.

At this point all mobile telephones should be turned to silent, and I will do that myself.

All evidence taken by this committee is protected by parliamentary privilege. Therefore you are protected against any action for what you say here today, but if you go outside and say the same things on social media or in other forums, those comments may not be protected by this privilege.

All evidence given today is being recorded by Hansard. You will be provided with a proof version of the transcript for you to check. Transcripts will be made public and posted on the committee's website.

I invite you to make a brief opening statement to the committee, which will then be followed by some questions from committee members. I invite our first presenters, Ms Elly Gardner, Living and Ageing Well Officer from Moreland City Council, and Mr Petr Svoboda, Social Policy Officer—I presume you two will start and then we will continue.

**Ms GARDNER:** Yes. I will be saying a few words from our submission for about ten minutes, and then I invite Mrs El Masri to talk about their experiences in accessing services.

**The CHAIR:** Sure. And just for the record, I will state Mrs Ikbal El-Imam, Moreland resident, and of course her carer is here as well, who is Mrs Sumaya El Masri. Elly.

**Ms GARDNER:** Thank you, and thank you for being here today and for initiating this important inquiry. We are really pleased to be talking to you today. I have prepared a few words that focus on some of the main points from our submission. We understand that you will be talking to quite a few different organisations today, for example, the elder abuse prevention network, so we have not focused so much on points from that because we know that they will be covering it really thoroughly.

First of all, we wanted to say that Moreland, as I am sure you know, is home to a hugely diverse older community. At our last census in 2016 almost two out of three older people were born overseas and they spoke 68 languages. So, as you can imagine, social justice and inclusion is a major focus for Moreland council in our policies and services and programs. We are also the biggest provider of support services for older people in Moreland.

First, we would like to say, most importantly, that we would like to acknowledge that older people are a vital part of the community and the culture wealth that we all enjoy. Older people want to be part of this community. They have a huge amount to contribute, and we all benefit from their inclusion. However, providing the right services is vital in supporting older people to be part of our community, and meeting the needs of this extremely broad group of people is very challenging.

The pandemic has exacerbated and brought to light pre-existing support gaps, and we feel that these effects will continue to be felt for many years. It is essential that we provide more culturally appropriate, well-resourced and equitable support systems.

In terms of some of the main points that we outlined in our submission, regarding the adequacy of services for this cohort, it is clear to Moreland council that their support needs are not being met. In Moreland older people who speak only English are more likely to access services. So, for example, 60% of older people speak another language compared with only 48% of older people who access services. We know that language and cultural expectations are some of the major reasons that people may not take up services. Many of the services operate in a Western model, so they communicate and they promote in English and a lot of the staff are English-speaking, so they may not understand cultural practices and they may not have cultural training.

When we are talking to the community many older people tell us that they do not know what support is available at all, and if they are aware, they might not understand how it is relevant to them. So, for example, we were talking with an older Chinese migrant recently. When we asked him about services he said that he has not thought much about services—‘But now that you mention it, I would like to stay at home’. The Chinese culture is to stay home with family supporting. He has recently arrived—around maybe five years or so—and when he arrived he was not even aware that services were available.

We have also been told that people might not engage, for example, home services coming into their home because the staff might not understand cultural practices and they might not follow practices such as taking off shoes at the door. Then you can imagine of course if the staff are only English-speaking and the client cannot speak English, there is not a possibility for them to talk about their needs, so it really does put them off.

Older refugees arriving in Australia can face greater settlement needs due to trauma, higher degree of chronic illness and in some cases complex psychosocial adjustment requirements. Caring practices need to be considerate of mental health needs, and it is important that steps are taken to minimise retraumatisation. People may have also had negative experiences with government and other formal organisations, which can discourage the take-up of services. This group needs more services that can connect with them through language and culture, helping them to understand what is available and how it can be beneficial to their lives, and key to this, as I am sure you have heard from many other people, are qualified bicultural and bilingual workers who are from their own community.

We would like to highlight a program that Moreland council has been running during the pandemic which has been trying to broach some of these issues. Petr here has established and been leading a community connector and local partnership program which is funded by DFFH. This is about establishing partnerships with community leaders and multicultural organisations who send out important information through their existing networks, and in turn we hear back very quickly about what the response has been, whether this has been successful, what some of the emerging issues are and ways that we can improve our engagement. For example, we have been working with Patronato INCA, the Italian senior welfare organisation, and we send information out to 1,200 older Italian residents as part of their daily phone calls and mail-outs. We are not really trying to reinvent the wheel, we are tapping into existing networks and relationships, and it is far more effective than if, as a central government agency, we tried to establish these networks ourselves. It has been very cost effective and very successful.

So we would recommend to the Victorian government that one of the things you could focus on is resourcing partnerships such as this to take advantage of existing networks. Multicultural organisations can have more capacity to support older people within their own community, and as a council we can work with the community far more effectively. You could also work directly with community representatives from migrant and refugee communities to inform programs and services of course—that is quite obvious—and appoint local facilitators who represent their communities.

I would also like to point out that a lot of this is about community development. This building of relationships takes time, and we need to allow time and space for these relationships to develop. This group also needs more culturally specific services. At the time we put in the submission we looked on the My Aged Care database and there were only 11 culturally specific services available in Moreland, and eight of these were closed to new clients; they were completely full. So there is very limited capacity for services to support this group of people.

We also want to touch on social isolation as one of the major unique challenges. We know from talking to older people that they get their information and they take on services often through understanding through their networks, and social isolation is a major issue in a community with such a wide range of language, cultural backgrounds and perspectives. Many older people might be only connected with their family and not have wider friendship networks, and this has obviously been heightened during COVID. We are hearing that they are still continuing to feel anxious and isolated. So we would recommend that the Victorian government partner with councils, libraries, neighbourhood houses and settlement services to, for example, build on existing digital inclusion programs, including vitally affordable access—that is essential—and increased digital literacy amongst the non-English-speaking communities. We would also recommend that you prioritise the needs of this group in the COVID-19 recovery, specifically funding flexible programs that help people re-engage with their community in a way that works for them, partnering with local organisations and senior groups to provide

connection opportunities. Lastly, we would also recommend that you support community and volunteer programs that reach out and connect with older people from migrant and refugee backgrounds.

They are a couple of the points that we wanted to just touch on particularly today. I will now pass over to Mrs El Masri to talk about her experience with supporting older people. Thank you.

**Mrs EL MASRI:** You are welcome. First of all, I love helping elderly people and I love helping others, especially elderly people. I started more than ten years ago, a little bit more than ten years, as a support worker helping elderly people from different backgrounds with different companies, like People First, Omni-Care, Let's Get Care—different ones—and through my experiences I have learned from consumers, from elderly people, that they do not like to complain. If they are not happy with the service, they do not complain. They just keep it to themselves. I just used to encourage them, because when they got my service they were happy, and then they told me about other experiences—like some people come and they do not smile; they just do it for the money and they do not do their job from their heart. Then I just used to encourage them: 'Oh, you have to call the office, you have to tell them', and I used to do feedback as well. Through the years there was lots and lots; I could speak all day, but I am just stressed out a bit.

So you get different things, and some people just get to the point where they are in hardship in their home. For example, there was a wife and a husband. The husband used to look after the wife, and then he had a stroke and he went to hospital and everything turned upside down. The house was in very bad shape. It was breaking down; the wood and everything was breaking apart. She was half paralysed, in a wheelchair in the home. Some people, consumers, pass away. It is very hard. It is a hard situation always with people that you love, and then they have to go as well. They are in a bad situation. They do not know about the services—like this couple, they never knew. Only when the husband went to the hospital were they then introduced to My Aged Care. They never knew about it, and they were Australian, Australian born. So I was so shocked and surprised, like, 'What, you didn't know?', and she said, 'No'. Then at the end she had to go to a nursing home. Her husband stayed in the hospital, and they moved him as well.

I met Ikbal I think four years ago, and then I started to look after her. She is a handful. She is very quiet. She is good now, but she can wake you up at two o'clock and say, 'Oh, you need to do the washing', and the washing machine is empty—there is no washing. It was hard to convince her to start with the services. She wanted to be independent. Up to now she likes to be independent as well, but sometimes you have to give up, and sometimes if you like a person you accept it. We introduced home care from the council, and then she straightaway went to level four. But still level four is full-time care. It is not enough. The companies used to say, 'Oh, there's not enough funding, there's not enough funding', because they take more than half of the share and then she—the consumer, the client—is not left with anything. I think there should be more from the government side, more checking up on companies as well—providers.

**The CHAIR:** You are doing really well, Sumaya. That is great. Thank you.

**Mrs EL MASRI:** I live with Ikbal. I sleep there and I live with her, and through my three years—I think; now two years?—I had to give up in one way or another. My marriage broke down. So I have made sacrifices in one way or another. To look after her is a big challenge; it is a big thing. I used to drive forward and back from Epping to Coburg, but then I had to make choices. I love what I am doing. It is not for the money. The money—there is nothing in it. When a person loves what they are doing, they do it from the heart and they do it all 100% correctly. We are all human, we do mistakes, but we do it to the best of our knowledge.

Then I am in between my kids and Ikbal—back and forth, back and forth. It is a hard job where I am at. It is not easy. Nothing is easy. And she would not give up and go to a nursing home. I asked her last week, 'Would you like to go for just two weeks to try?'. She said no. While her brain is good, she stays at home. Okay, she is happy and she stays at home, but it is more and more demanding. Sometimes I go without breakfast, like today. Sometimes I go without dinner; I just drink water and that is it. I eat fruit. I do not know, I tend to forget about myself sometimes. Any questions?

**The CHAIR:** Thank you, Sumaya. That was a beautiful presentation. We might start with questions, and we might start with you, Sumaya. I know you spoke about this, but what more would you like to see the government do to help older people be able to access the service easily, whether they are from a migrant background or not? What can the government do to make it easier?

**Mrs EL MASRI:** I think advertising it on TV. Is there any advertising on TV? No publicity on television? They could advertise—and on the radio as well—about My Aged Care services in different languages.

**The CHAIR:** In different languages.

**Mrs EL MASRI:** And in newspapers. There isn't any, I think. I have not seen any—not on TV, not on radio. I have not heard any. Only pamphlets and flyers, but that is not enough. Not everybody gets their hands on the pamphlets and flyers. These days the elderly do not have mobiles and the internet, so it has to be on either television or radio to advertise more so they know more. If they can go one level up, it would be even better—like level four or level five, introduce a level five. But then the fees are less on the providers so the consumer has more money to spend on themselves, not on the company. They are doing like a big lump on the hourly rate, on the monthly rate, on the telephone rate. All of them, like Merri services, there are big chunks, chunks, chunks going out of the package and nothing is left really for the person to use—and they do not know what they can use it for.

**The CHAIR:** Sure. You spoke about the sacrifice as a carer on your life. What more can the government do to assist carers much more to be able to deliver the services and be able to appropriately support? As a carer, what would you like to see for carers?

**Mrs EL MASRI:** Support for carers?

**The CHAIR:** Yes.

**Mrs EL MASRI:** Maybe they can check on carers, like they would check on the consumer. From time to time the government should do that. I think there should be an office or organisation checking on everybody—carers and the consumer. But they can check on carers and support them in other ways like—

**The CHAIR:** On their welfare? On how you are going? Is that something that you would like to see?

**Mrs EL MASRI:** Yes, like checking on them and maybe do a one day—there used to be a carers day, I am not sure, to give you a break. The actual person will not just accept someone, but if they introduce someone and they help, the actual carer can have a break. I know sometimes there are some days of respite, but still it is not enough. Or the carer will not take it because it is full time. They do not even use the 63 days of respite. As well, where I kbal lives it is one bedroom and one bathroom. Showering her is very hard because it is a big bath and it is a big step—she has to go step on it. I have tried everywhere. I tried public housing; I did an application. I tried government grants to change over the bath, take it off the ground floor, and I did not get any response, any help. I have tried. These said she has to do anything through her package, but the package already does not help with those things, because if you are level four it is only on the service, it is not on the modifications, home modifications. There is another government as well that helps with the wheelchair, a shower seat or something. They do major modifications, but it is still through the package. If the person has a package, it is through the package. Before the package they can do some modification; there is a \$4,000 grant to do major modifications. But not when you are on a package. Yes, so it is hard. I have to break my back or something happens, like an accident—like, where are we going? Where do we go? I do not know.

**The CHAIR:** Yes, that is a very important point. Committee members, are there any further questions? Michaela.

**Ms SETTLE:** Yes, I have got some questions. But first, thank you so much for what you do. It is wonderful to hear that there are people out there with that passion and care for the elderly in our community.

**Mrs EL MASRI:** Yes, there are, and you do not know them. They are not recognised—like, you do not know them, and they are just suffering in their own home.

**Ms SETTLE:** Yes, I really appreciate what you are doing. It is important. I guess I wanted to ask council—Elly, if I may—some questions. I am from regional Victoria, and very sadly a couple of our councils are getting out of in-home care. I understand that from next year you have to tender commercially. Is that right? How do you think that is going to impact what you can provide as services? As I say, very sadly in my region a couple of them are coming out of aged care, and that worries me enormously.

**Ms GARDNER:** If it is okay, can I take that question on notice?

**Ms SETTLE:** Of course.

**Ms GARDNER:** I would prefer someone from the service delivery team to be able to give you a good answer to that, if that is okay. Thank you.

**Ms SETTLE:** Yes, absolutely. All right, I will try another easier one, shall I? Something that I wonder about is the evolving nature of immigration or refugee cohorts. So you talk a bit about cultural training for within council. How do we almost futureproof—how do we keep up with—the shift? I mean, I suspect we will have Ukrainian refugees coming through in the next year. How do we keep up with that in terms of the cultural training?

**Ms GARDNER:** I think it is tricky. It is really fast moving. The thing that comes to mind, I think, for me first of all—and then I will hand over to Petr, because he works a lot in this area—is about maintaining good relationships with the communities and understanding what the changes are there and supporting those communities to support their own people. You know, that point about essential government agencies trying to understand those quickly evolving changes is really tricky, and I think in some ways we are not best placed to do it. So if we can make sure that we support and resource and have those strong relationships, that is one of the best ways is my initial thought. Do you have any additional thoughts?

**Mr SVOBODA:** Yes. As Elly mentioned, we have been working with the Italian and Greek organisations that service the majority of our older population. But there are smaller pockets of elderly populations, especially the Nepalese, who I think are not as well organised. They have got a number of organisations—they have got lots of them. So there is not one organisation we can work with, and we only have a certain amount of money to work with a certain number of organisations. The way we engage with them and send information out and receive feedback back is through contacts, like Elly mentioned, through developing trusted relationships with community members who have those community networks and then can tell us what the situation is in the community. But it is tricky, because the organisations that service that community—there are many. As the community ages, they consolidate and it is potentially easier for a large organisation to deal with one than many. We will continue actually doing the Moreland community connectors program, which will engage those individuals, but the number of individuals we can engage at any one point—we started with seven and now we have 20. Twenty is too many to deal with, and with the number of language groups that we have in Moreland we only can have one or two from any particular language group, so we only reach a certain portion of the community.

But the reason why we invited Alevi and Arabic Welfare, who are our partners in the local partnership program, is because they are the ones who actually service, for example, the Turkish-speaking community. They have proved a really interesting partner with all the other Turkish-speaking organisations, and they will tell you more about that. I really see that as a positive step, and they are really interested in working with us on an ongoing basis beyond their funding agreement.

**Ms SETTLE:** I know that there was a lot of work done in Melbourne, particularly during COVID, around government trying to work with communities to get the COVID messaging out. Do you think that as a consequence we are all a bit more ready to work together? Do you think the groups are—

**Mr SVOBODA:** Definitely, yes.

**Ms GARDNER:** Can I just say one point on that? One of the challenges I think around the state government messaging is that the translators that were used sometimes did not translate exactly to a local interpretation of that language. So we would quite often run translations by our local people, and they would often adjust the wording a little.

**Ms SETTLE:** Yes, I think we heard stories.

**Ms GARDNER:** You heard a bit about that?

**Ms SETTLE:** Yes. Something I wanted to ask around My Aged Care: my parents are 82, but they are very computer literate and all of those things, and they have struggled with going into My Aged Care in terms of the assessment. They were scared that someone would say, 'Right, we're going to cart you off'. Do you think that within CALD communities that fear of that sort of initial assessment is greater?

**Ms GARDNER:** We definitely hear that a lot. We hear from kids who are trying to encourage their parents to get services that once that foot goes in the door immediately they are going to be out to a nursing home and that there is not a good understanding of how services in the home can bolster someone and their family. So I make the assumption I suppose that for people who do not speak the language as well and are not as used to the idea of formal services that that might be heightened.

**Ms SETTLE:** So I suppose it is just more of that messaging, isn't it, to try and get people to understand?

**Ms GARDNER:** Yes, education, I think. The other point, if you do not mind, I just wanted to pick up on before is I think the other access point is settlement programs. As people come into the country I think we very rarely hear from people from migrant communities, older migrant people, that they understand what is possible, and so I think a real push around when people arrive in the country and understanding what is available to them might make a difference.

**Ms SETTLE:** Thank you.

**The CHAIR:** Thank you. Heang.

**Mr TAK:** Thank you, Chair. I have just one question. I think settlement used to be run by federal funding, but in terms of state government and additional assistance from the state government to local government and to local community organisations, what additional assistance do you think would work or assist in this scenario?

**Ms GARDNER:** Sure. Do you have thoughts on that? I am not across the details enough of settlement programs to answer. We could get back to you.

**Mr TAK:** Okay.

**Mr SVOBODA:** Do you mean our local governments? Like, Moreland council runs Moreland multicultural settlement network.

**Mr TAK:** For example, what do you want to see in terms of assistance or additional assistance from state government and local government in this service?

**Mr SVOBODA:** In aged care specifically? I can talk about the settlement provider networks. Settlement networks have happened across the state. I think maybe five years ago they kind of stopped being supported by local settlement organisations. So some local governments have taken it up, like Moreland is running it, and we run it to support our local settlement providers. We provide training, we provide opportunities to meet and opportunities to actually advocate on behalf of these clients. But some local governments just do not have the capacity or interest in running them, so we are quite unique in some ways.

**Ms GARDNER:** So you think some additional support and funding from the state government?

**Mr SVOBODA:** In terms of supporting governments around supporting those service providers—that is all I can say to that.

**Mr TAK:** Okay, thank you. Thank you, Chair.

**The CHAIR:** I just have one more question to the council. Can you expand on the integrated model of care for responding to elder abuse? What are some of the things that are working well? What are some of the things that need improvement?

**Ms GARDNER:** I have to apologise again. I will have to take that one on notice. Other colleagues are more well versed on that, so we will definitely get back to you with an answer. Thank you.

**Mrs EL MASRI:** Can I add one more thing? Ikbal was born in 1925, but she could be two or three years older because they never registered the time. As well, it is her first time after two years coming out of the house—she stayed home. Usually she used to go every week for an outing to a women's group. But then one more thing I found very hard is early dementia. There is no information for people on how to apply for help for early dementia. I have asked the doctor. The doctor even did not know what to do. Then I have to find a doctor

that comes home to visit, and it is very hard. Up until now I could not find someone, a doctor, that comes home to assess her to get that extra little help, support, for early dementia, because she could be all good during the day, but early morning or late evening she is losing it. She does not know where to go, where to come, 'Where are we? Have we eaten breakfast yet?'—'Yes, I did' or something.

**The CHAIR:** Right. Okay.

**Mrs EL MASRI:** And then she tells me, 'If you're lost and I'm lost, who can we ask?'. So there is this thing. It is very hard. I do not know what to do to get that support for early dementia.

**The CHAIR:** That is a very important point. Thank you very much.

**Mrs EL MASRI:** You're welcome.

**Ms SETTLE:** There is a support group, Dementia Alliance, that might be able to—

**Mrs EL MASRI:** Which one?

**Ms SETTLE:** A support group called the Dementia Alliance—

**Mrs EL MASRI:** Dementia Alliance?

**Ms SETTLE:** and they are meant to provide—

**Mrs EL MASRI:** Tell me step by step what to do to get that support and access—

**Ms SETTLE:** I think that is what their role is, yes. I do not know if we can get the details of Dementia Alliance for you.

**Mrs EL MASRI:** Okay. Thank you.

**The CHAIR:** We will get you some contact points for some support groups, but that is a really—

**Mrs EL MASRI:** To advertise it as well—My Aged Care for dementia, yes.

**The CHAIR:** Correct. The rise of dementia and how to access it in particular for migrant communities.

At that point I will conclude if there are no further questions. Can I thank Elly and Petr from Moreland City Council, but in particular I want to thank Mrs Ikbal El-Imam and of course Mrs Sumaya El Masri.

**Mrs EL MASRI:** You are welcome. Thank you.

**The CHAIR:** Thank you so much for what you do. I echo the comments made earlier—your dedication, your commitment in this space in caring for our elderly. I know that you made reference to the fact that this was the first outing after two years of a very challenging period for all of us, so on behalf of the committee I thank you for being brave and presenting to us. You did very, very well. Your remarks and your comments will be part of the committee's final—once we do deliberate—report back to government with some strong recommendations in relation to support services for older Victorians from migrant and refugee backgrounds. Thank you so much again for coming. We wish you all the very best. Thank you.

**Witnesses withdrew.**