FINAL TRANSCRIPT

LEGISLATIVE ASSEMBLY LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into Support for Older Victorians from Migrant and Refugee Backgrounds

Melbourne—Monday, 31 January 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

WITNESS (via videoconference)

Mr Gerard Mansour, Commissioner for Senior Victorians.

The CHAIR: I declare open the Legislative Assembly Legal and Social Issues Committee public hearing for the 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.

I now welcome Gerard Mansour, the Commissioner for Senior Victorians, who is here today. Thank you very much for attending.

I would now like to introduce and acknowledge my colleagues who are participating today: Christine Couzens, the Member for Geelong; Michaela Settle, the Member for Buninyong; Neil Angus, the Member for Forest Hill; and Meng Heang Tak, the Member for Clarinda.

At this point, please ensure mobile phones have been switched to silent and that any background noise is minimised.

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Could I please remind members and witnesses to mute their microphones when not speaking, again to minimise any interference. If you have technical difficulties at any stage, please disconnect and contact committee staff using the contacts you were provided.

I now invite Gerard to make a brief opening statement to the committee, which will be followed by questions.

My apologies. My name is Natalie Suleyman, and I am the Member for St Albans and the Chair of this committee. Thank you very much. You may proceed, Gerard.

Mr MANSOUR: Thank you very much, Chair, and I would like to also acknowledge the traditional owners of the lands that we are on and their elders past, present and emerging.

I would like to thank the committee for the opportunity to provide evidence to this most important inquiry. As Commissioner for Senior Victorians I have the privilege to speak with older Victorians from a wide range of backgrounds and hear their experiences and perspectives. My role is as an advocate and advisor, bringing older people's voices to government to contribute to policy development. I applaud this inquiry for placing the views of older people themselves front and centre in your thinking.

Older people from migrant and refugee backgrounds contribute substantially to the economic and social prosperity of our state. They play significant roles as volunteers, carers and leaders in our community. While their experiences are varied, many face challenges to ageing well and living their lives to the full.

While I canvassed many issues in my submission, I would like to focus on four matters in particular in my opening comments. Firstly, the challenge of ageism. Underpinning many of the challenges faced by older people is ageism—that is, discrimination whereby older people are perceived as less valuable in our community. Ageism can take both structural and internalised forms. Sadly, there are times when older people are reluctant to seek support as they fear it will compromise their independence and result in a loss of control over aspects of their lives. In addition, ageism is a risk factor for elder abuse and can contribute to isolation. In my submission I referred to the value of expanding access to cross-cultural intergenerational strategies, which will have a positive impact on the level of respect given to older people.

Secondly, mental health and health literacy—older people need timely access to culturally safe and relevant services and support and information that empowers them to better manage their health. The government's commitment to implement the recommendations of the mental health royal commission provides an excellent

opportunity to focus on the particular needs of older migrants and refugees. In addition, there will be numerous benefits that result from increasing the level of health self-care literacy among older people.

Thirdly, the digital divide facing many older Victorians—there is clear evidence, as cited in my submission, that older people are among the cohorts most impacted by the digital divide. Language and literacy challenges make this more acute for older migrants and refugees. In an increasingly online-first world there is a great benefit in older people having additional opportunities to improve their access to technology as well as providing alternatives to the online provision of information and services.

Finally, the challenges of elder abuse—older people from culturally diverse communities can face additional challenges to recognising and reporting abuse because of language barriers, cultural norms and expectations. There is an opportunity to expand trials of the integrated approach to elder abuse response and prevention so that all older people can have increased access to elder abuse services and support irrespective of where they live within Victoria. Thank you for the opportunity to provide this opening comment.

The CHAIR: Thank you so much for your presentation. Committee members, shall we proceed to questions? I can see a nod from Michaela, Chris. Michaela.

Ms SETTLE: Thank you. And thank you, Commissioner, for speaking to us today and sharing your insights. I am interested in workforce issues and just wondering if you think there is anything that we should be looking at in our inquiry into workforce issues in the sector but specifically in relation to the issue of CALD clients and communities.

Mr MANSOUR: Excellent question. There are a couple of areas that I would focus my attention on. I think that one of the real challenges for people from migrant and diverse communities is accessing culturally safe programs where the staff who are at the front line of providing that support understand the complexities of the cultural experience. It can be different expectations, it can be cultural norms, it can be the life experience that they had before they came to Australia. So investment in training remains critical. You know, we have made some really good progress in that regard, but it is often focused in a narrow set of programs that are targeting older people. So in broader health services, broader community programs, there is an opportunity to continue to provide culturally diverse programs.

I think there is also a workforce development opportunity. There are a lot of younger people and middle-aged people from migrant and refugee backgrounds who history shows us do exceptionally well if they have an opportunity to work in aged care and community services that focus on older people. And so that is certainly an area for us to look at: how can we provide streamlined pathways that provide support to people no matter where they live? It is clear, for example, that in the future more and more services are going to be provided to older people in their home. It is a clear policy commitment by the Commonwealth, and increasingly all government levels are seeing the value and importance of providing support to people in the context of the home where they live. And of course what that does is bring to the fore that workforce challenge: where do we get that diversity of workforce? So I think there are two sides to it. It is providing access to greater training opportunities for our frontline staff that are interfacing with older people but also looking at opportunities to strengthen training and development within the culturally diverse communities so more of those people can access employment opportunities in the frontline care and support of older people.

Ms SETTLE: Thank you. Could I just ask one extension on that question? You mentioned the move towards services at home. As I understand it, there is a move on foot at the moment for a lot of local councils to withdraw from providing services in the home. Is that correct? And if so, how are we going to cover off the delivery of that?

Mr MANSOUR: Yes, it is true and I get that feedback that a number of councils have and will continue to review whether they are in the frontline delivery of services. For me as Commissioner, the critical issue is less about who the service provider is, because in every community, from a home care service point of view, local government would only be one of many service providers, and so I think the critical thing is to look more broadly. If a council is deciding to remove itself from services, and there are a number of examples where that has occurred, the critical issues from my point of view are they provide pathways for other specialist providers to come into their community, but they also look at how they can continue an appropriate investment to support

older people within their community. And so we see the growth and development of things like positive ageing strategies, ageing well strategies, where local governments articulate that support in a particular way.

I must say as a Commissioner I am less concerned about whether one local government is a provider of home care services; I am much more interested that older people have a range of choices of service providers. Often people from culturally diverse backgrounds actually seek out a specialist ethno-specific provider, and so it is pathways to that type of support as well as the workforce development and councils maintaining a commitment to older people in their municipality that to me are the most critical issues from my role as Commissioner.

Ms SETTLE: Thank you. Sorry, just one more, and Chris will agree with me on this, we are regional MPs so it is something that we always like to really dig into. I guess when you are talking about ethno-specific providers and so forth is that really in a metropolitan situation, and perhaps if you are in a small community like Bacchus Marsh there really is only the one provider and that is the local council. So I am just a bit interested in how this works in regional Victoria.

Mr MANSOUR: Look, that is absolutely one of the most significant planning issues: how we can provide diversity of choices and options on who the home care providers are. That is one of the important recommendations from the aged-care royal commission and previous inquiries: that wherever possible older people should have choice—choice of provider, opportunity to select the best fit for them and to change if they are not particularly happy with a provider. So I think one of the big challenges for the Commonwealth is making sure in all geographic areas there is an opportunity. Now part of that comes from the expanding strength of individual organisations, and so for organisations that may, for example, only provide services in metropolitan areas there is no barrier now for those to expand across. In the previous system you had to win home care packages from a Commonwealth funding round. That is now replaced by a model where any individual older person, no matter where they live, can actually choose the provider of their choice. So we are in that early phase of change where lots of organisations themselves will be looking at how they can expand their services across all areas of Victoria. I am certain that that trend is going to continue as organisations continue to increase in size.

Ms SETTLE: Thank you.

The CHAIR: Thanks, Michaela. We will move on to Chris. Thanks, Chris.

Ms COUZENS: Thanks, Gerard. We really appreciate your time today. You talked about a lot of the challenges. How do you think we can best address some of those issues as a state government?

Mr MANSOUR: Gives me a lot of pathway, doesn't it?

Ms COUZENS: Yes, it does.

Mr MANSOUR: The first thing is to learn from what we do well. I think sometimes there is a temptation in these situations to be drawn to reinvent the wheel. There are some tremendous examples, particularly through the COVID period of time, about how communication strategies and engagement strategies with older people from diverse and cultural backgrounds have absolutely been strengthened by working with community organisations, community leaders, the Victorian Multicultural Commission and others. So I think we have got really good examples of how we have been able to strengthen some of those communication channels and now we can move on to continuing to do that beyond COVID and learn about the value of doing that.

A second critical issue is literacy, and I would like to open up the conversation of the digital divide. I think that is one of the biggest issues that now faces older people more generally. When you look at the data and the trends—and I have provided some of that in my report—older people generally are the ones that are most impacted by the digital divide, and of course within that people from culturally diverse communities are some of the most affected. So I think continuing to look at training opportunities—we do know that older people learn in different ways, and so we are building good curriculum models about how older people themselves can deliver training to older people.

So if I reflect on the last couple of years, neighbourhood houses, local governments, University of the Third Age, Men's Sheds have all moved into the training of older people on things like Zoom and other services in a way that they have not done in the past. But we have still got a lot of older people left behind. So part of it is

about continuing to focus on the digital divide and how we better invest in the digital divide, particularly for people from cultural backgrounds, but it is also about alternatives. There are going to continue to be older people that are locked out of the online world. They are not going to be able to access online shopping, service provision, information in a timely manner. So I think one of the biggest challenges for government is how we balance on the one hand the strengths and advantages of the digital divide.

I can say that some of the most exciting meetings I have been involved with in the last couple of years with older people have been on Zoom. I can remember a couple of times people in their early 80s from culturally diverse backgrounds telling me how excited they are that they have actually learned how to use Zoom, and they are now able to interact with, you know, relatives and friends across different places of Victoria but also interstate and overseas. But not everybody has that opportunity and not everybody, even with training and skills, is going to be able to get there. So I think that is just a couple of high-level things to touch on.

I think the other one I would open up is the service system itself for issues around elder abuse. I think that if I reflect—and I did that when I was preparing my report—you know seven or eight years ago when I first came into this role if I asked older people, and I did in meetings, 'What is elder abuse?', 'Do you understand elder abuse?', I got a very low level of understanding. To give you a sense of numbers, maybe one to two out of 10 had any understanding of having heard of the term 'elder abuse'. Now if I ask that question, it is about five to six out of 10. So we have come a long way with the investment in training programs, advocacy, programs through Respect Victoria and others, the prevention networks, and many people have contributed, as well as me, to that increased understanding. But there is still a long way to go in terms of providing a robust support system, and elder abuse does take a different form in many culturally diverse communities.

We do hit that issue about cultural expectations, and if I could just open up that a little bit. Sometimes older people themselves have a view that it is the family that they want as the front line of their support, but of course there are often limits to what a family can do and what a family can provide. And many families provide amazing support and services for their older loved ones and their older relatives, but often older people themselves are reluctant to access services because they have a fear of a loss of control of life decisions. There is a stigma that they feel at times that can be associated with access to services, and so I think continuing to invest in the expansion of services and support in the elder abuse area is one of the key issues for us moving forward.

And I could talk about a lot of other things, but that is just a few of them that come to mind.

Ms COUZENS: Great. And your submission notes the importance of destigmatising mental health and illness for older people. What do you see as the best way to make improvements in this regard?

Mr MANSOUR: I think there are two sides to that equation. I think part of it is about what I would call community education and educating older people themselves, helping them to understand that supports are available. When I talk to lots of older people it does strike me that people aged over 60 often approach and think about mental health issues in a different way to the younger and the middle-aged community. I think there has been a real progress in our community generally about our willingness to acknowledge mental health issues. Lots of older people do not yet have that mindset. It is regarded as a very personal matter. Sometimes people have this attitude where you just get on with life. And so key issues of, say, anxiety and depression, which can be some of the most significant issues for older people, they will often not disclose, or if they do they might go to their GP and just be prescribed some medication. And so even family members and people that are close in their lives do not necessarily know that they have got mental health issues. So I think we have got to continue that positive investment in older people themselves being able to talk about and name mental health issues. It is not something that they are often easily drawn to.

And on the other side is the strengthening of the service system, and I named this in my report. There is no better opportunity, as we move through this next decade of reform of the mental health system, to look at how we can best support older people. Often mental health issues take a slightly different form, and so we need to think about how service providers have the right training and skilling and staff to do that. And I named a specific initiative in my report, the social prescribing trials, which are very dear to my heart. One of the biggest challenges for older people is isolation and loneliness, and lots of older people do not just want medication for anxiety and depression, they want pathways to re-engage confidently in their community. And so I think there is a really great opportunity to look at how those trials can be targeted for people from diverse backgrounds.

Ms COUZENS: And as a regional member, and as Michaela has highlighted before, we obviously have a strong interest in how we service our regions. You mentioned neighbourhood houses and organisations like that in meeting some of these challenges. Do you see a significant role for, obviously, multicultural organisations but also local government, along with the state government?

Mr MANSOUR: Absolutely. I think one of the things that maybe lots of the community do not understand is the degree to which local government pretty much in every geographic area across Victoria plays some type of support role for participation of older people, whether it is subsidised rental of rooms, whether it is grants to programs, whether it is the ambassador programs, governance training. They are just some of the things that come to mind. Lots of them employ someone like a positive ageing officer to bring ambassador programs together. So I think a lot of those types of investments can continue to be expanded. I think there is also an opportunity to look at how—because if you look at it from an older person's perspective, there are two ways that older people participate in social, community events. There are a significant number of what I call the 'middle to older' older people that are going to continue to want to have ethno-specific engagement, and I go to a lot of those. I can remember not long ago online the Greek community down in Gippsland—there are a significant number of older people that are engaged with an ethno-specific Greek community group.

But there is also the emerging interest of older people in cross-cultural engagement groups, and I think that is the next generation of change that is going to happen. I think we have got to keep those ethno-specific groups alive and governed well for the people that want to engage in that way. But at the same time we have got to be open to newer forms of how older people want to engage and interact, and not everybody does want to be involved in an ethno-specific group. And so I think those are the two sides of the coin: balancing the interest of older people to have culturally specific programs, but the emerging interest of people in cross-culture. And that came up very strongly when I did my consultations around ageing well, when I published that report, *Ageing Well in a Changing World*, people wanting both: the importance of cultural respect across cultures that brings people together in a united way, but also the real value that ethno-specific groups can provide to particular older people as well.

Ms COUZENS: Great, thank you.

The CHAIR: Sorry, Heang. Go ahead, thank you.

Mr TAK: Thank you, Chair. Thank you, Gerard. It is a very informative submission. In terms of the ethnospecific organisations, when you advocate for more training and opportunity pathways in terms of, let us say, interpreting services for specific ethnic organisations, do you think, or would you recommend, that there is also a need for that, or is this part of the pathway that you are talking about?

Mr MANSOUR: Definitely that need is going to continue. I think that with older people there is so much diversity. Sometimes the community falls into the trap of seeing older people as being the same, and of course they are not; there is enormous diversity. It also exists within the diverse communities. For some older people access to interpreter services—I can think of some great initiatives that I mentioned in my report where Australian Unity had brought together a CALD alliance of some of the emerging communities. They were actually interested in collaborative activity, so both things are happening at the same time, so access to interpreter services. I can remember going to a meeting in Werribee about three years ago where I had about 70 older people and five translators at the same time, so I could actually communicate with all of them. And I have got to say, it challenged my skills, but I learned a lot about how we could communicate in that setting. And of course interpreters were absolutely central to that communication.

One of the really positive things that came out of that, and it certainly increased my understanding, is sometimes the thing that they understand the least, and I am referring more to recently arrived people that have come into Australia in the last 10 years, often brought in by their family, someone in middle age who has been here themselves for only 10 or 15 years—they have not been through the experience of growing older in Victoria. In that room on that day there was only one person who knew we actually had a Seniors Card. Now, if I got any 100 people together, 99 of them in Victoria would know we have got a Seniors Card and how to apply for it. So one of the reasons that interpreters and continuing that interaction is critical is to help that basic understanding of what it is like to grow older, what the services are, what the supports are. There is often a big gap between the knowledge of what we have already got and what they understand is available in our community. Does that help answer part of the question?

Mr TAK: Yes. Okay, all right. Thank you, Chair. Thank you for your work, Gerard.

The CHAIR: Thank you, Heang. Neil, did you have a question? Thank you.

Mr ANGUS: Absolutely. Thank you, Chair. I have several questions. Thank you, Mr Mansour, for your evidence today and also for your written submission. Given your longevity in the role you would have potentially seen some trends and that over the time that you have been involved. I was interested particularly: have you seen any trends in relation to the role of the family within the multicultural migrant communities? I would just be very keen to hear any observations you have got on that.

Mr MANSOUR: I think probably the way I would phrase it is my understanding has grown. I do not know whether it is so much that things have changed within the context of the family. Certainly with the generosity of people sharing their stories I have a much better understanding of some of the challenges in the family context. If I could go and expand on something I just mentioned earlier, often for older people themselves there are two really significant barriers to access to support when people need support. Whether it is mental health, whether it is health services, whether it is aged care—really it is across the board—there is what I refer to in my report as internalised ageism. Often people themselves own this stigma of ageism, and they see that to put up their hand and access support and services is about losing things. I can give you a practical example.

So many times if you see an older person with a walker frame and you go up and have a chat to them about that experience of having a walker frame, they will say to you, 'Yeah, look, it was two or three years between when I actually knew I needed one until when I could actually come to terms with the fact that I would use it'. There is a perceived stigma with having a walking frame, and yet look at the massive change in independence that provides. Within families exactly those same challenges exist: often the family members perceive the older people having a need long before the older person is willing to talk about that. But it can be exactly the same thing in reverse. Sometimes older people say to me, 'I'm trying to talk to my family about the challenges I'm having, but they are not open to having those conversations yet'. I think that exists across all older people.

Within diverse communities I think there can be a greater expectation for people to receive support within the family context. Now, that is both a positive and a negative. That is enormously powerful and a strength for our community where informal care and support are available. But of course in lots of families that is not possible, and so access to the service system becomes very, very critical to everybody—both the family and the older person—having a better quality of life. That is the key tension that I see that plays out in a lot of culturally diverse communities. Where the family has significant constraints on their resources, how do you have the conversations to open up the willingness of the family and the older person themselves to reach out to support in a timely manner, noting that one of the biggest strengths of our system is the informal carers and the family support? So it is not about undermining that, it is about supporting and enabling that to continue as best it can.

Mr ANGUS: Sure. Thank you very much. Another question I have got is in relation to your role with elder abuse. You have talked in your written submission about the trial of an integrated model of care, and a response to that is being undertaken through five Victorian health services. What is the timing on that, and when are we likely to see some outcomes from that? Do you know?

Mr MANSOUR: Yes. So the trials continue on till later this year, and there will be a need for decisions to be made about what happens in terms of the elder abuse service system and the supports that are available. There is an evaluation which I have not yet seen, which is near completion, about the work of those organisations. The trials are covering both the response and early intervention and also the prevention end. So those have been going for the last few years.

As Commissioner of course my desire is that we have a service system for everybody in Victoria no matter where they live—so whether you live in a metropolitan area or whether you live in a regional area, that we have access to elder abuse supports. Where are they needed? In multiple ways and multiple places. I have no doubt that a partnership model is going to be the background of what we will need. So, for example, if an older person first discloses abuse, say, in a health service setting, how do we make sure all health services are aware of the specialist supports available—for example, through Seniors Rights Victoria, Eastern Community Legal Service and many others that are involved in the frontline services? But it is also about the mainstream system continuing to focus on older people, so as we roll out the Orange Doors, around family violence and genderbased violence, remembering of course that that impacts older people. And yes, it may take a different form—

older people may be very reluctant to disclose that—but we need to continue that investment and training and development of our workforce to understand that there are some differences that often occur from an elder abuse perspective. I think that is the biggest issue. I think that there are some assumptions about what family violence looks like, but from an older person's perspective we now have sufficient data and evidence to tell us that it is more likely to be adult children, other people in their lives, that are the perpetrators of abuse rather than the partner, or as well as the partner.

So how do we have a service system where those understandings and appropriate responses are built? To me we have got the basis of the platforms: the work of organisations like Better Place about access to family counselling services, family mediation services, Relationships Australia and others. So sometimes it is in that space. Sometimes it is about financial counselling support and the availability of the financial counselling system. I think we have got the bones of the service system, but we have not yet put that together as a state-wide platform.

Mr ANGUS: So just ancillary to that then, Mr Mansour, have you seen or are you aware of any sort of increased incidence or are you aware of any incidents in relation to self-harming amongst older members of the migrant and multicultural communities, particularly as a result of the matters we have just been talking about, the elder abuse, or matters resulting from isolation and other issues to do with COVID? Has any of that come to your attention?

Mr MANSOUR: No, it has not. I have not seen evidence or data. The only evidence that I have seen in relation to elder abuse over the more recent period has been data from Victoria Police that showed an increase of incidents and reports to them in terms of family violence. That is the only data I have seen. I think one of the challenges we have during the COVID period is that with older people being necessarily more confined and all of us more confined in terms of our social interaction I and many others have a lesser understanding at the moment about what is happening in terms of elder abuse. And I think that is something that will be really important in the next year in particular. As older people gradually regain their confidence, we can provide the guidance necessary to start reconnecting groups at a local level. And I do not think that is going to be an easy thing for lots of older people. I think there is a natural hesitancy for many people to go back into face to face, and so it is an area that I will be very closely monitoring in terms of what happens. I think older people are going to be amongst the last. And so monitoring what is happening in terms of referrals to elder abuse helplines is something that is going to be particularly important in the next while.

Mr ANGUS: Great. Thank you.

Mr TAK: Chair, if I may—

The CHAIR: Sure, Heang.

Mr TAK: Okay. It may be outside of the scope of this submission, Gerard, but my office from time to time is seeing older people become victims of scams—you know, romance scams and all of that through digital, either Facebook or sending money—and sometimes they have to sell the family assets or are even in debt because of borrowing money from friends to send overseas to people who they have never met. Do you experience that at all? If so, what sort of service could be provided for that? I do not think it is simply about explaining that it is a scam; sometimes it goes a bit deeper than that.

Mr MANSOUR: Yes. Look, I do. You know, as part of my role obviously I receive a number of public inquiries, and it is one of the topics that older people do raise with me. It goes to the heart of—which I did cover in my report—the strategy to deal with the digital divide. From an older person's perspective, outside of skills, costs and training—which are very significant barriers to the online world, so I am not underestimating those—the fear of scams is a really important issue. And how to have a digital platform or a computer or a smartphone or device or anything that is allowing them to interact digitally—the fear of safety and security and scams is right there. So I think it is one of the elements that we do know. I mentioned earlier what we are learning around training programs, for example, for older people—overtly talking about scams and providing them with guidance and skills—and it is one of the things that is often brought to the table through intergenerational support. Often older people rely on other parts of their family—their children or their grandchildren—to actually provide that guidance and support for them. So yes, a better understanding of how

to deal with that risk—but it is definitely a barrier for many older people in accessing the online world, that fear.

The CHAIR: Thank you. Well, we could go on and on, but our next two witnesses are waiting. Thank you very much, Commissioner, for taking the time and for providing an in-depth submission to this inquiry. It is most valuable. The next steps are that we will continue with our inquiry—we have some regional hearings as well—and then of course the committee members will have the opportunity to put forward some strong recommendations to government, and we are hoping to do that in the next couple of months. Clearly it is a very tight schedule, but we are hoping to be able to submit the report in May this year. Can I take this opportunity to thank you very much for being online on the first day of the live broadcasting of this inquiry. All the very best in all that you are doing. Thank you.

Witness withdrew.