

# **FINAL TRANSCRIPT**

## **LEGISLATIVE ASSEMBLY LEGAL AND SOCIAL ISSUES COMMITTEE**

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

Geelong—Wednesday, 30 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

#### **WITNESS**

Ms Alba Chliakhtine, Executive Officer, ABRISA.

**The CHAIR:** Good afternoon. 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 today, and I pay my respects to both the Elders past and present and any Aboriginal Elders of other communities who may be here today.

My name is Natalie Suleyman. I am the Member for St Albans. To my left is Christine Couzens MP, the Member for Geelong, and also Meng Heang Tak MP, the Member for Clarinda. At this point all mobile phones should be turned to silent.

All evidence taken today is protected by parliamentary privilege. Therefore you are protected against any action for what you say here today, but if you say the same things outside, you may not be protected by this privilege.

Evidence given today is being recorded by Hansard, and you will be provided with a proof version of the transcript for you to check when it is available. All transcripts will be made public and placed on our Committee's website.

I now invite you to make a brief opening statement to the Committee, which will be followed by questions, and if I could just have you state your name for the record, Alba. Thank you.

#### **Visual presentation.**

**Ms CHLIAKHTINE:** Okay. My name is Alba Chliakhtine. I would also like to acknowledge the traditional owners and custodians of the land I speak from, the Wathaurong nation, and pay my respects to elders past and present.

Who am I? My name is Alba Chliakhtine. I am a first-generation Australian who arrived in Melbourne in 1988. In 1993 I made a decision to become an Australian citizen and call Australia home. I become a professional in supply chains for 30 years in the private sector, and I have worked in government for the last four. In 2002 we did not have a Brazilian association here in Victoria. Together with some in my community I support ABRISA, the Brazilian association. In 2010 I also joined another multicultural organisation called Multicultural Women Victoria, trying to understand a little bit more about this landscape. I have also participated in other boards as a volunteer and joined the Monash multicultural network and the City of Port Phillip.

Like many first-generation Australians, we never considered during the transition the many issues we were going to have. There are many different parts of the journey, but the last one is specifically a challenge—it is when you turn over 65. I am speaking to you from a privileged position: first of all, being able to have my family here through the reunion program; being able to establish financial security in my 50s to quit the workforce and become a carer; stumbling—and I emphasise the word stumbling—across bits and pieces of information that could help my parents to have dignified living, in particular towards the end of their lives, my dad with significant physical health issues; and also being close to a great hospital with great support. But even with the great supports, at times I had to advocate for my father, even in situations where I did not particularly agree as a daughter. But I felt it was my obligation to do it—and it is many other people's. Therefore what I call the 'learning journey' is witnessing well before my late years—I hope—the challenges faced by the CALD community in the third age. Last, there is finding people along the way—social workers like Ana Mello. Alex and Tatiane Drigo—they are now doctors that we have lost to Queensland in the migration process. Deborah, Daisy, Robert and Maria Antonia, and seniors like Jaida and Suzana, collaborated on what we have created at the Brazilian association called My Age. The aim was learning to address some of the issues.

It was only in 2015 that my journey of understanding the ageing process here started when there was a stroke in my family. Until then—I would have been in around my 50s—I never thought about it. I was never informed about it. I did not know where to make the connection, and I did not know how to help anybody else in terms of: 'How can I guide my community or other CALD communities in this process?'

So that is my opening statement: that without community support, it is hard. Without understanding what is available, whether it is federal, state or local government areas, it is very difficult for one simple reason—some of the services we have here in Australia do not exist where we come from. So it is the typical situation—we do not know what we do not know.

**The ACTING CHAIR (Ms Couzens):** Thank you. And apologies: the Chair had to step out to take an important phone call. But Meng, did you have any questions, or do you want me to go first?

**Mr TAK:** No, you go first.

**The ACTING CHAIR:** Thank you so much for your time today. We really appreciate it, and the information you have provided is really valuable to us. You talked a lot about the information access and the difficulties there. What sorts of resources do you think are required to at least try to ensure that CALD communities have access to that information?

**Ms CHLIAKHTINE:** Yes. Well, first of all we will start with the engagement process. There are more than 200 CALD communities here in Victoria. They are known to the state. I understand that translation cannot be done for every single piece of information. However, there is vital information from a services perspective that could come in the form of flyers, because not everybody is online—so translated but also translated in simple English. I have had many discussions with seniors that can speak English, and sometimes the information is overwhelming for them. So it is simply translated, and where sometimes you may not be able to reach everybody, talk to us. All CALD communities are happy to support—that is the work we do. We are not for profit and, most importantly, we do know specifically the smaller communities such as ours. We do know our people. We do know who is ageing, and we rely even on some of the people in the middle to come across and say, ‘Hey, you need to help someone. They need access’. It has happened many times since we set up My Age. It is not ‘My Aged Care’, it is just called the My Age project.

**The ACTING CHAIR:** You mentioned printed flyers.

**Ms CHLIAKHTINE:** Yes.

**The ACTING CHAIR:** Do you see any opportunity or have you got any ideas around access to digital information? Obviously we have heard that a lot of older CALD people do not have access to digital information. Do you see any opportunities for that to be developed in Victoria?

**Ms CHLIAKHTINE:** I do. If we start by first establishing what needs to be developed, that is critical information. I see primary health, community health, as critical information to provide to people so they know it does exist. I also see—and I know it is federal government—My Aged Care. It goes back to the access for people to know well in advance. By the way, even the process is so cumbersome. I would suggest if Centrelink pay a pension they should be able to automatically register you, and then you already know you are in the system—you just have to activate it. The biggest issue I see in ageing is access, and I have seen it many times in primary health. In primary health if we have bilingual, bicultural staff, perhaps they might be able to provide this information as well. Many times I have been to primary health and they did not know that it existed. So there is, to me, a disconnect. Also the understanding from primary health even, to be honest with you, of palliative care is something that—perhaps if they could find in point form all of the information. It is hard; it is taboo to talk about it, but we need to talk about it.

**The ACTING CHAIR:** And that leads nicely into my next question around workforce. I mean, obviously we have heard through this inquiry that workforce is a particular issue for multicultural communities. What do you see as being a good direction to go in terms of skilling up multicultural communities to actually take on some of the roles in supporting, in this case, older CALD communities?

**Ms CHLIAKHTINE:** Yes, it makes a big difference. I have many examples in the community of where we have managed to—and that is an international workforce that is here all the time. If they are trained—I am not talking about untrained people—they can be in the temporary space like they are now. I will basically say to you what my luck was: in my family I had two doctors supporting my mum until they were transitioned into work and I had a nurse and many carers that later on filled that void. Now, specifically here in Victoria, we are overlooking the potential of that bicultural workforce to fill in the void. They are here sometimes on a temporary basis, but they bring cultural context in care, and that makes a big difference. It made a big difference in my parents’ lives.

**The ACTING CHAIR:** And what about unskilled migrants—for example, refugees coming into the country? Do you see an opportunity for them to be specifically targeted to be skilled up to work with their communities? Do you see that as being beneficial?

**Ms CHLIAKHTINE:** Absolutely. When it comes to the cultural context of having conversations and support, it is important to understand that it is difficult unless you grew up here from when you were a baby. Unfortunately, even those who spoke English in the past today tell me, ‘Alba, I’m sort of distancing a little bit because I’m home all the time’, and specifically in the last two years. There is no-one else to bring cultural context to their lives, and unfortunately they are going to leave the past. They are going to leave that culture, as opposed to the current one, because they may not have had the opportunity to have a current context in their lives living here in Australia. So having the refugees when we talk about the 200 communities—why not? And working specifically—because I know women are present in this industry—with my other hat it is actually conveying to them there is an opportunity for them to join the sector. And there is a difference they can make, even though their English may not be perfect. Because those who looked after our people, their English was not perfect, but their care and diligence and the happiness they brought every time they walked in and said ‘Hello’ in Portuguese was substantial.

**The ACTING CHAIR:** And have you got any ideas or thoughts around how that might happen and what structure could be put in place to make that happen?

**Ms CHLIAKHTINE:** Yes. I think first of all there is no question that training has to be in between. It is what I call ‘bridging’. We have people that come from a refugee background that have studied English and potentially could do specific training. I have seen their community development; I have not seen the CALD context inserted in that training. I think if we do it, even if it is for a short period of time, with the right organisations they will be ready to support their own community and perhaps grow within the sector in many different areas—specifically women, because most of the bilingual carers I have come across have been women. Occasionally we have men.

**The ACTING CHAIR:** Would you see that as being across mainstream or CALD communities or organisations initiating that training within their own organisation, or a combination of both?

**Ms CHLIAKHTINE:** I would say a combination of both. When it comes to design there are particularities in each culture that I think need to be considered, in particular their relationship carer and the relationship with the family, which is fundamental. How do they navigate that space of the patient, the carer, but also their family? But I would strongly recommend that organisations such as TAFE could create or improve the design of the current community support services—to actually put the CALD lens on that cause.

**The ACTING CHAIR:** Do you think co-design with TAFE and CALD communities would be an ideal sort of scenario?

**Ms CHLIAKHTINE:** Absolutely co-design. And the reason is: I would recommend that there are established communities, there are some in the middle and there are new and emerging communities. My suggestion of where we get into a co-design process is that you take into account the different perspectives. When you are well established, it is quite different. You may have a plethora of services because the community is very large.

**The ACTING CHAIR:** Yes. Okay. Great. Thank you. Heang.

**Mr TAK:** I think that is very good; it covered everything, every point. Thank you for your presentation.

**The ACTING CHAIR:** Did you have anything else you wanted to add?

**Ms CHLIAKHTINE:** I guess one of the concerns I have raised—we talk about the connection, we talk about the design—is I have found that legal rights is a difficult area. It goes back to being more like: what can the state do to actually create support services, not necessarily helplines, but certainly people that can go and talk to them?

**Mr TAK:** Perhaps can you elaborate a little bit more in terms of legal rights?

**Ms CHLIAKHTINE:** I am referring to elder abuse.

**Mr TAK:** Elder abuse, yes.

**Ms CHLIAKHTINE:** Yes. In my discussions with the services it became quite difficult. The elder sometimes is placed in the position where they are the ones that have to make the complaint, and that to me is a concern. I would advocate for a different type of service—at least that is outreach. Most seniors are not going to make a phone call. If they are CALD communities, they are not going to make a phone call. It is a question of having outreach services, where there is a way, in particular with CALD communities, to go and check and talk to them. The regularity, of course, depends on budget, but in the end it is extremely important that they are visited, that they understand and people understand. There is a lot of history there, that sometimes they might feel more comfortable speaking to someone face to face than actually by phone. There are certain things that are quite important to know in terms of powers of attorney, including reversal of powers of attorney, which sometimes becomes very complex when you reach phases such as dementia level 2, and that is the vulnerability, in particular with women with dementia.

**The ACTING CHAIR:** I am interested to know your thoughts on the COVID pandemic period, whether there were some new initiatives or things that happened that had not happened previously, that could be built on, or were they really significant challenges that you felt were not met for the CALD community?

**Ms CHLIAKHTINE:** I guess at the beginning there was a lot of confusion, but there is one positive aspect that came in both communities I work for: a little bit of digital made a difference. WhatsApp was a typical application. Not everybody was familiar with Zoom. Zoom was a cumbersome thing, but the smartphone brought the capability for people to voice—sometimes they cannot type—and to receive videos, for people to call each other. So the digital part of it made a big difference in their lives, because people took the responsibility—‘I’m going to call someone’, ‘I’m going to send a text message’—and eventually they became used to it. So to date that application in particular has made a big difference.

**The ACTING CHAIR:** Do you think there are opportunities to build on that now that it has happened?

**Ms CHLIAKHTINE:** Absolutely. And that includes if I look at the Victorian Government through the multicultural reaction to COVID; we have many communities, and it became so easy for us to just post something and receive immediate feedback. I think that level of connection, of digital connection in particular, for community leaders made a big difference, and we can build on that, including the potential to build applications that might make it easier to publish things in different languages that we can broadcast to our communities. And if we can build on that for other purposes as well, in particular in the area of ageing, that would be fantastic. But there will be a small minority where it is a phone call; they may not look at it.

**The ACTING CHAIR:** Okay.

**Ms CHLIAKHTINE:** On the other hand, I have to say that the face-to-face contact became difficult and also people are still a little bit reluctant, in particular people with ill health, to expose themselves and go out, in particular not only because of mobility but because of risk.

**The ACTING CHAIR:** Yes. Okay. Great. Thank you so much for your contribution today. We really appreciate it. We have another hearing to do in Ballarat tomorrow, and that will be the last of our public hearings. So the aim is to have the report tabled possibly in July–August, depending on how things go, and we will keep you informed of that. If you have any other information or questions, you can contact the secretariat, who are more than happy to have a chat. Thank you so much for your time today.

**Ms CHLIAKHTINE:** Thank you for the opportunity, and I am happy to make a contribution.

**The ACTING CHAIR:** You are welcome. Thank you.

**Witness withdrew.**