

02 September 2016

The Executive Director
Australian Law Reform Commission
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SYDNEY NSW 2001

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Dear Madam / Sir

The Australian Law Reform Commission (ALRC) has been directed to conduct an inquiry into elder abuse and 'specifically consider best practice laws, as well as legal frameworks ... which:

- promote and support older people's ability to participate equally in their community and access services and advice
- protect against misuse or advantage taken of informal and formal supporter or representative roles, including:
 - formal appointment of supporters or representatives
 - informal appointment of support and representative roles (eg family members)
 - prevention of abuse
 - mitigation of abuse
 - o reporting of abuse
 - o remedies for abuse
 - penalties for abuse, and
- provide specific protections against elder abuse.'

We wish to make a submission to this Inquiry.

The ALRC is interested in comment about how elder abuse is defined and about best practice legal responses to elder abuse, including examples from other jurisdictions.

We specifically refer to Questions 1 and 3 in the Issues Paper released by the ALRC on 15 June 2016

Question 1 covers the definition of 'elder abuse'. We submit that a government policy, and how it is implemented, is a form of elder abuse.

Question 3 states: 'The ALRC is interested in hearing examples of elder abuse to provide illustrative case studies.' We submit that what is happening to older residents of Millers Point in New South Wales is an example of systemic elder abuse.

Our submission looks at the impact of the wholesale sell off of public housing and forced relocation of the residents of Millers Point. The process of forced relocation of residents, including older residents, people with disability and those with long links to Millers Point, continues unabated despite what amounts to personal, social and community wide trauma. Our organisation believes what is happening to the older residents of Millers Point amounts to a systemic form of elder abuse.

My organisation is happy to meet with you to discuss our concerns. I may be contacted at

I look forward to your reply.

Yours faithfully



Kelli Haynes Convenor, Friends of Millers Point, 26 Pottinger St Dawes Point NSW 2000

Case study in elder abuse: The forced relocation of older residents of Millers Point

1. Definitions of Abuse

We base our submission on assuming the following definitions of types of abuse :

'Psychological or emotional abuse: Verbal assaults, threats of maltreatment, harassment, humiliation or intimidation, or failure to interact with a person or to acknowledge that person's existence. This may also include denying cultural or religious needs and preferences.

Legal or civil abuse: Denial of access to justice or legal systems that are available to other citizens.

Systemic abuse: Failure to recognise, provide or attempt to provide adequate or appropriate services, including services that are appropriate to that person's age, gender, culture, needs or preferences.

http://www.disabilityhotline.net.au/what-is-abuse-and-neglect/formal-definitions-of-abuse-and-neglect/

The World Health Organisation's definition of elder abuse at: http://www.who.int/ageing/ projects/elder_abuse/en/ and http://www.who.int/ageing/publications/toronto_declaration/ en/ covers the psychological abuse being endured by older tenants of Millers Point.

Elder abuse as defined above is generally seen as occurring between two individuals of unequal power where there is an expectation of trust. However, we submit that the World Health Organisation's definition is too narrow. We believe that it is reasonable to extend this to that that occurs between two parties, between government and individual. Parallel examples come from debates about the role of government in child abuse out of the Commonwealth Government's policy of keeping children in detention centres. In October 2015 hundreds of medical staff and students across the country protested against the policy of keeping children in detention. You may read more at: http://www.abc.net.au/news/2015-10-30/medical-staff-protest-children-in-detention/6899542

Systemic forms of abuse are recognised (http://www.disabilityhotline.net.au/what-is-abuse-and-neglect/ so it is reasonable to extend this to the relationship that exists between government (and it's delegated authorities) and individuals (and groups of individuals) because elder abuse is often part of a systemic problem, perpetrated by government though its policies and actions.

2. One explanation for why abuse occurs

Bagshaw, Wendt, and Zannettino state that 'the causes of abuse of older people are complex and multifaceted, and may encompass physical, psychological, social, medical, legal and environmental factors and multiple systems.

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While it does not apply to every case, abuse is often the result of societal devaluation of particular groups.

In his article 'The Systematic Stripping of Valued Roles from People' Wolf Wolfensberger gives an explanation according to Social Role Valorization (SRV) theory which asserts that people perceived by others as holding positively valued roles are likely to be afforded by them the "good things of life" (Wolfensberger, Thomas & Caruso, 1996), but that these good things tend to be withheld or withdrawn from people seen as holding negatively valued social roles (see Wolfensberger, 1998, 2000).

Even beyond any withholding, outright bad things are apt to be done to people seen in devalued roles. For instance, people in devalued roles are very likely to get rejected, segregated and congregated with other devalued people, made and kept poor, as well as impoverished in experience by being denied the opportunities in life that valued people aspire to, even violated and brutalized. All these and other common "wounds" (18 altogether) of devalued people are detailed in SRV teaching, and in Wolfensberger, 1998, pp. 12-24).'

http://www.socialrolevalorization.com/images/documents/Articles-resources/ Wolfensberger2011stripping of roles.pdf

'The "wounding" process as described in Social Role Valorisation Theory (Wolfensberger, 1995) applies equally to older people. Attaining a particular age (such as the notional age of 65 years in Australia) does not in itself trigger the wounding process but events such as retirement, ill health or the onset of disability can be the first step. Any deviation from the characteristics that society values that is viewed negatively can lead to devaluation, which in turn can lead a group to be treated differently and negatively by society.

There are many aspects of the wounding process that may be experienced by older people living in the community, such as rejection or branding and labelling.'

http://www.socialrolevalorization.com/images/documents/Articles-resources/Schultz--SRV Special Edition Int. Journal of Disability Community Rehabilitation.pdf

The process of devaluation leading to wounds and abuse can occur at the individual, group and even societal level. It can be perpetrated by Government.

Dr. Michael Kendrick states that 'It should not be assumed that older people are essentially equivalent to each other ...Notwithstanding this caveat, people in the aged category may be beset by any number of vulnerabilities normatively affecting all people of all ages, as well as many that are specifically "age-linked" even if not caused by age itself. For instance, age is no insulation from the workings of the general economy, and older people whose income is fixed, may find themselves quite disproportionately vulnerable to phenomena such as inflation that can substantially erode capital.

Additionally, elderly people may face a veritable onslaught of vulnerabilities as they age that, if cumulative in nature, may combine with damaging impacts on their well-being and overall best interests. This is most obvious with people with seemingly catastrophic and life changing illnesses, or with the significant degrees of physical, functional and psychological impairments that may come to some people with age. It also can be seen, even with the relatively healthy aged, in their greater risks of social isolation, segregation from community, increased encounters with stigmatising role perceptions and treatment, decline in social status, comparative poverty and increased frequency of aged abuse in our modern society. This elevated vulnerability, or "at risk" status, is often recognized by governments and other bodies as is seen in their specific development of intentional safeguards designed to counter these risks. Older people are, in the general societal sense, "at risk" even if some older individuals may elude many of these dangers".

https://www.google.com.au/url?

sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CBwQFjAAahUKEwjo5sbojpLJAhUmJa YKHXc0Cg4&url=http%3A%2F%2Fwww.kendrickconsulting.org%2FPublicSite%2FShared %2520Documents%2FAll%2520publications

%2FSafeguardsForOlderPeople.doc&usg=AFQjCNGqC3w0glZKpYYZl2MfUVrg-8O-Sg

It is therefore important that Government is very conscious of it's own actions around environment, how it supports home, family and community function and the language and stories it tells about elders. It needs to bend over backwards to mitigate elders from forces that cause abuse.

3. Examples of systemic abuse occurring in Millers Point

'As a gerontologist I am appalled at the forced removal of elderly people from their homes. This is known to cause untold physical and mental damage to people at a seriously vulnerable time in their lives. It runs contrary to all research outcomes and policy directives regarding quality aged care. It is unjust and unfair... A government that is concerned about the welfare of elderly people would not willingly do this to people.'

In March 2014, after several years of living with uncertainty, the State Government announced it would be selling all of the social housing in Millers Point and evicting all of the tenants, over 60% of whom are elders. This decision contradicted the advice from it's own social, urban and financial planning consultants and their own policy of allowing elderly to age in place. Recently the Government announced that they will keep a very limited selection of social housing in the area but even if some people in Millers Point get to stay, the impact of this decision has been devastating. It has cost individuals their lives and seared trauma on the memories of most of the elderly and vulnerable who have been relocated or still live here. Many are surviving by the skin of their teeth. We also remain concerned about the legacy of this process more broadly, as the government plans to do the same in other areas having just announced its plans for relocation of thousands of residents from the Ivanhoe estate next year and Redfern Waterloo areas later.

Most people believe that the role of Government is to safeguard the well being of the more vulnerable in our society but systemic abuse can occur even at the level of Government, even if unconsciously perpetuated.

The inquiry provides an opportunity to reveal to the public for the first time the financial and human cost, financial waste, increased morbidity, and the loss of lives this decision and the process used to carry it out, has cost individuals, families and the state of NSW. We believe it is vital for the sake of vulnerable people elsewhere in NSW and for the sake of learning, lessening of corruption and increased government transparency.

This inquiry could investigate how systemic abuse often involves widespread, legitimised labelling and demonising a group of people so that bad treatment is more easily accepted by the public. This includes misleading and false information about elders and the possibility of conflicts of interest that has helped fuel this action.

The NSW State Government has stated that it has relocated 3000 tenants "in recent years without any older residents dying or being hospitalised" but this seems highly unlikely given the high death rate and hospitalisation that has occurred in Millers Point with relocating just 490 tenants. Given that the Government has announced it will begin relocating thousands in the Macquarie Fields area this year and from Waterloo Redfern areas later, it is particularly important our highest decision makers reflect on what has happened at Millers Point and learn from the cost elderly people have bourn here.

Without an acknowledgement of the abuse that has occurred here how many others are going to lose their lives and otherwise be harmed?

4. Specific decisions, processes, and actions that come out of systematic devaluation leading to abuse of individuals in Millers Point

A. Impacts: Staggering human costs, abuse of basic human rights and poor outcomes for elders and others

a) Abuse leading to increased morbidity and mortality

Just a few weeks after the announcement, and after having had interactions with a relocations officer, an elderly resident committed suicide. Trained as an Opera singer her voice used to fill the evening air. Although her husband had died and she was more vulnerable, she felt supported by neighbours and was doing well having having lived in the area for over 30 years. She left behind a son who was too traumatised to allow a memorial or funeral to take place.

ied within weeks of the announcement, 21st April 2014

There have been at least one other suicide, at least two hastened deaths, another suspicious death and numerous hospital admissions.

There are examples of an elderly woman seriously injured herself by falling following her move (a common occurrence when elderly are forced into a new environment), early entry into nursing homes for others and numerous incidents of tenants feeling incredible stress from uncertainty and harassment from eviction officers.

In addition residents have had the constant presence of security guards whose roles and action have been highly questionable. Lights have been turned off in communal areas even though residents were still living in the apartment. Sirius has been taken over by

Housing NSW staff to the extent that they shut out residents from common areas and bought their families in for a New Years Eve party with alcohol and unruly behaviour. 88 year old Sirius resident was accosted by security guards and dissuaded from entering her own home recently. Visitors have received similar treatment.

The abuse of human rights and treatment of the elderly here has indeed been raised as high as the United Nations.

Go to: http://tunswblog.blogspot.com.au/2014/08/millers-point-and-united-nations.html

The following are individual stories illustrating how systemic abuse has played out in Millers Point and the impacts. This includes how Housing provision to vulnerable elders as well as the relocations process is making a negative impact.



'After feeling much stress and pressure, my mum, moved away from where she lived - just up the road from the church that is so important to her and our family, and from the community where she felt very connected. She really did not want to go, but the added stress of what was to come and the not knowing what was really going to happen to her neighbourhood was too much.

After meeting the relocations officer, moving seemed promising as it meant she would be living only five minutes from me and my children. Since relocating Mum hasn't been able to go back and attend church on Sundays. She also has missed out on many community events because it's too painful to go back.

This means she misses out twice as she has no social interactions other than her daughter and going to the shops. No conversations with neighbours, no wave hello when you're having a down day on the street from friends.

But on top of what was a trauma to move, Mum now has stresses she did not anticipate. Mum was given a larger house with a much larger yard but she is no longer connected to others.

Public transport is harder to navigate, the bus stop is far away and she has to walk up a hill on the way home. She is in suburbia, which for many people, especially those who don't drive, is an isolated existence. She doesn't have the same freedom and food shopping is more expensive as she only goes to the local centre instead of to Paddy's markets, which she did religiously every weekend for almost 30 years.

She used to travel by public transport all over Sydney and now very rarely leaves the suburb. The house is located in a well to do suburb and Mum feels great pressure to maintain the appearance of the property and is finding that there are more expenses such

as frequent lawn mowing. We have tried to keep on top of mowing but it is not always possible. We paid \$350 to get the front and back lawns mowed. Impossible expense to upkeep. Also at a private cost she has had to install a screen door and fly screens, which she had in Millers Point.

Since relocating there has been three separate rent reviews and increases. Contractors for housing have come and re paved an unstable driveway three times. Not to include the noise, inconvenience and the mess they make and leave behind, each time they have come and re paved they have not fixed her side gate which they just left unlocked. Taking away her security which she always had in Millers Point. We have fixed it privately, at a cost.

Mum has suffered both physically and mentally. Her health has deteriorated and has been unwell since the move. Everyone has noted how much weight she has lost. My mum is also the carer for two young men with disability who live with her. One has significant issues to deal with. Mum doesn't receive much in terms of services and has even less support now by not having a supportive community around them.

In times of crisis over the years, Mum has had to rely on her community neighbors for help and support. They all know our family history and are always on hand to help or give comfort.

Now, just recently she has had to reach out to neighbours, that are strangers, for help which has given her increased anxiety. Mum couldn't run to my house in the middle of the night, it's too far, too dark and she had to act quickly.

Mum and the immediate families mental health has been deteriorating at a rapid rate since the relocation. This leaves her not knowing about services in her area or support networks she can access. This brings confusion and a sense of vulnerability she has not felt in many years.'

https://open.abc.net.au/explore/95440



matter of factly describes what is far from what most would think was an acceptable standard of housing, as well as the valued roles that living in his community has given him. It is clear has contributed much to the people and place which, for decades, was populated by those who battled and struggled to survive.

s now 84 years old with a severe hearing impairment and recovering from a recent stroke. The NSW Government has a policy of allowing the elderly to age in place in line with best practice across the world. It maximises the chances that people will maintain their roles, relationships and contribution to society as well as health and well being.

They stand by this policy, except in Millers Point.	story shows how deeply
embedded he is here, but the NSW Government	is telling him, and others like him, that his
house will be sold and that he has to go.	

'I came from Lithgow to Millers Point in 1954, so I have lived here for over sixty years. I was staying at a cheap place in Surry Hills and working on the fourth floor at the GPO sending telegrams and overseas cables. You had to read Morse code.

At my first St Vincent's meeting back from Canberra in 1975, there was a fellow present to install me as President. So ... and I became close friends. We would get ten to twelve clients a week wanting help paying gas, electricity other bills and needing food vouchers. There was always money from the poor boxes.

ad a violin and I had a guitar but we were both lousy players. One day, me there was a new FM radio (2SER) about to open up 26th floor university of technology Broadway.

In 1979, it commenced transmission and, on Sundays, country requests were from 5am to 9am. They had hundreds of records and, being from Lithgow, a town in the country known for its country music, I rang up and said I am available to assist taking requests over the phone and they took me on.

In 1984, they said it was about time I learned to work the panel. So, from 1984 to 1998, for fourteen years on FM radio from 3am to 7am three times a week, I was the compere after catching a taxi from George St to Broadway.

Now, if I was living any where else, I could not of done it.

As a single man, in my duties at the GPO I used to get some jobs others didn't want. Like the time I spent at the Hilton Hotel with Malcolm Fraser and other prime ministers from

overseas. I worked every night but I was just lucky I wasn't there when that bomb went off.

When asked if I wanted to stay in Millers Point, I say yes because it's the community - the people we got to know through visitations. They look out for me now, keep me company, take messages for me.

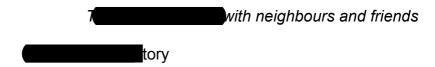
I have someone staying with me now while I get over this stroke. There's the Harry Jensen Community Centre where I eat lunch and read, plus the Abraham Mott hall for meetings.

I attend the oldest Catholic church in Australia, St Brigid's in Kent St, where our first Australian saint visited. The bus terminal is here with a bus shelter and the buses go all the way to Broadway.

It is now 2015. It is now 2015

as really rocked by the death of Malcolm Fraser, who was the same age, and for whom he had that enduring connection. The effect of evicting and those that form his circle of support would be, no doubt, catastrophic. It would strip him of his home, roles, a lifetime of contribution, identity, connection to place and people who form the fabric of his life.

https://open.abc.net.au/explore/95397



'I was born on April 26, 1939 in Saigon, South Vietnam. I live in Millers Point in NSW.

In 1975, I was secretary in the Vietnamese Radio Broadcasting station for The Voice of Freedom and The Voice of the Mother of Vietnam with the United Nations. In 1975, under the Communist regime it became very, very terrible. No freedom. I escaped by boat from Vietnam to Thailand. The boat broke during the crossing but I survived. I lived in the

refugee camp called Panethikhom Chonburi in Thailand for one year. I arrived in Australia in 1989 because my daughter sponsored me.

I usually remember and think 'Thank you very much Australia Government and Australian'. I like to live here because very freedom for the life. Now, I am very old and very sick. I have asthma, cholesterol, high blood pressure, gout and heart conditions. Every day I take a lot of medicine. I have had seven big operations on both my legs in the last couple of years. My husband passed away two years ago from cancer. I am now alone. I love my home. I take care of it well. I have a garden and I can walk to my church and my neighbours are friends. They care about me and I cook for them. I feel safe here.

I am finding it very hard since they told me I have to go. They want to sell my home. I cry a lot. I get sick a lot and sometime my brain no good and I didn't remember. I am scared to ask them to wait until I die before they sell it. Let me stay. I feel I can't live much longer.

People at my church help me. My Catholic name is a lam very scared.'

https://open.abc.net.au/explore/95426

as moved from Millers Point, to what Housing NSW describe as a 'lovely' home but she is isolated, no longer able to attend church and rings her old friend crying.



is 79 years and lived in Millers Point about 15 years with her dog and parrot. She is unable to read and write and has health conditions resulting several times in pneumonia but she preferred to tough it out rather than go to hospital. Bea loved Millers Point and walked around the area even at night when she felt completely safe. People looked out for her and she brought joy to others. She was well known at The Rocks Market and children loved playing with her old dog. She had grown up in the country and worked at St Vincent's hospital for a number of years.

While she loved living in the area, her house was mouldy and had leaks in roof. She had asked for her house to be fixed on numerous occasions but action resulted in additional leakage.

When she first got the letter announcing she was to be moved she was horrified, scared and frightened; she felt really insecure, threatened and confused and overcome with a strong sense of grief because not only her home but her peace, tranquility, and sense of safety was about to be lost. Her advocate, a neighbour says 'That another house cannot replace what her home and community provided. Where she belonged, felt safe, had a sense of self, that she mattered, that she was valued, that she contributed. Where do 79 year olds like her feel valued in community these days?

Although upsetting for many residents who reported that their relocations officer was manipulative, pushy and threatening, officer maintained a positive relationship because of the presence of her advocate.

started to feel threatened by the security men who would come around at night making noises and she would become increasingly frightened as her neighbours started moving with the relocation process. She started to feel lonely and wanted to go in the end because of the cold and the damp and she was afraid of where she would end up such as Redfern or in Western Suburbs. This forced her to decide to go in. This was still described by her as traumatising as she has no family and relied on her neighbours for support. In addition Housing NSW suddenly bought forward her moving date which elt extremely challenging.

Housing NSW also asked her to get a lift in the removal van like she 'was just a piece of furniture'.

She accepted a place where there was another elderly person from Millers Point which helped but the bus service she has to use to access her services and facilities now requires that she go some distance to another suburb or walk a long way. She will be needing a walking frame soon so this is going to be very difficult.



and in other occupations. Oved Millers Point but was also in a property with a leaking roof. She often says that 'Her people's were the first people's of the land' and the process of being moved from where she felt deeply connected as was one of retraumatisation.

ad a relocation officer who got a neighbour to get o look at a property even n she didn't want to go. Her Advocate had to step in to help. She was shown a decrepit and smelly place. Another place had stairs so was also unsuitable. Another place was at bottom of steep hill with bus at top which they thought it was ok to offer her actions like these clearly indicating that her needs were of little concern.

The officer in charge of evicting her, hounded with phone calls, dropping in unannounced, and was very intrusive, until she was made to contact advocate first.

The officer expressed an attitude that the people moved should be grateful rather than understanding the person's needs and circumstances. Her attitude towards others fuelled shame, leading to depression, and anxiety.

She decided to take a place but then they kept postponing the move leading to further uncertainty, anxiety, fear and illness.

2. Segregation and congregation

There have been at least three cases of institutionalisation of elderly people as a result of the process, where staying or returning to their homes would have been easily achieved otherwise. Faced with the stressful challenge of choosing a suitable alternative, a daughter convinced her mother to move from the Sirius building (purpose built and well suited to her) into a nursing home within a few months of the announcement last year. This year, an elder living in High St was hospitalised and instead of returning to her home was admitted by her daughter who lives in Queensland, to a nursing home. Despite being surrounded by caring neighbours, institutionalisation was much easier to contemplate than having her mother return to the uncertain future that exists for residents of Millers Point.

'Institutionalisation is both underpinned by, and perpetuates a negative view of ageing. There is considerable evidence that institutionalisation in its many forms is both damaging and dehumanising for older people.'

http://www.socialrolevalorization.com/images/documents/Articles-resources/Schultz--SRV_Special_Edition_Int._Journal_of_Disability_Community__Rehabilitation.pdf

The process of leaving home and living in congregate institutional settings can result in many more negative consequences for older people. These may include:

- · loss of control
- loss of freedom, independence and individuality institutional routines and dehumanisation
- loss of dignity and privacy
- medicalisation
- Ioneliness and lack of meaningful activity segregation and dispossession
- abuse and exploitation
- lack of secure tenure and fear of reprisal"

http://www.socialrolevalorization.com/images/documents/Articles-resources/Schultz-SRV Special Edition Int. Journal of Disability Community Rehabilitation.pdf



good friend who also lives in Millers Point didn't want to leave and overdosed on sleeping tablets. Ian found him and he was taken to hospital. He was discharged to discover that Housing NSW had already started clearing his house out and he was put in a nursing facility, no longer supported as part of the community. This primately is fearful of having to go to hospital in case the same thing happens to him.

3. Solastalgia

The illness, hospitalization and increase in deaths are part of the significant shock, trauma and grief associated with what is akin to a natural disaster or bomb destroying one's community. This sort of devastation is well recognised in Australia, an area prone to bushfire and floods. The impact has been the same in Millers Point, except the community has been dealt a blow from it's own State Government, implementing a 'metaphorical bomb' stripping the community of it's leaders, people of their friends and neighbours, supports, history and identity. This process and it's impact is now known as 'solastalgia'.

'Solastalgia is the pain or sickness caused by the loss or lack of solace and the sense of desolation connected to the present state of one's home and territory. It is the 'lived experience' of negative environmental change... It is that feeling you have when your sense of place is under attack...

'Solastalgia has its origins in the concepts of nostalgia, solace and desolation. Solace is derived from the Latin verb *solari* (noun *solacium* or *solatium*), with meanings connected to the alleviation or relief of distress or to the provision of comfort or consolation in the face of distressing events. Solace has connections to both psychological and physical contexts. One emphasis refers to the comfort one is given in difficult times (consolation) while

another refers to that which gives comfort or strength. A person or a landscape might give solace, strength or support to other people. Special environments might provide solace in ways that other places cannot. If a person lacks solace then they are distressed and in need of consolation. If a person seeks solace or solitude in a much loved place that is being desolated, then they will suffer distress.

Desolation has its origins in the Latin *solus* (noun *desolare*) with meanings connected to devastation, deprivation of comfort, abandonment and loneliness. It too has meanings that relate to both psychological and physical contexts ... a personal feeling of abandonment (isolation) and to a landscape that has been devastated."

http://healthearth.blogspot.com.au/2008/01/solastalgia-history-and-definition.html

Almost all of the members of this community, especially those living in social housing, have suffered solastalgia in the form of deep shock, distress, trauma, and physical illness in the face of the impending and ongoing devastation of their home and community.

Many had long term leases so the loss of their home took them by complete surprise, and the deep shock felt initially has turned into chronic stress as individuals and families that were valued and respected for what they have contributed to the area, are moved away.

The Government has also placed a tight timeline on the project requiring it be completed in just two years, putting a lot of pressure on and coercing tenants, even those in their 80's and 90's, and people with disability whose inclusion in society is heavily reliant on freely given support and reciprocity networks that existed in the social environment of Millers Point.

The inquiry could investigate:

- How many people have died in Millers Point in the lead up to the decision in March 2014, since that decision was made, and after being moved out of the community?
- How many committed suicide or attempted suicide?
- How many hospitalisations and increased visits to GP's occurred amongst social housing tenants of Millers Point and what was the increase?
- What is the background and training of relocations officers?
- What strategies did they use to evict people from their home?

B. Government decision making, media activity and other processes

Originally the State Government had decided to safeguard what is a housing and community success story in Millers Point by selling off the derelict places but maintaining the apartments and houses built for workers. Indeed they were about to turn the soil on new public housing units specifically to ensure the elderly were able to stay and the community maintained. When Minister Pru Goward took over the ministry and decided, against the best financial and urban planning advice available, including their own Auditor General's and in spite of their impact study warning that eviction was likely to kill and make many very ill, they went ahead with a decision to 'sell it all'.

Go to: http://www.smh.com.au/nsw/battle-for-millers-point-lost-when-pru-goward-took-control-20140322-35a6f.html

The Government promised that their impact statement would be released to the public before a decision was made regarding any sales. This did not occur.

The Government has rationalised that they needed to sell because of the costs of maintenance. However many of the properties are not high maintenance and some have been modified or renovated only recently with the Sirius building complex requires no major maintenance at all.

The State Government commissioned a comprehensive report (with Cred Consulting) into the social impact before making their decision in March last year. The government made the decision before releasing this report and failed to follow most of the recommendations. Through Freedom of Information it was found that they altered the final report to remove the warnings that people were likely to die.

Go to: http://www.smh.com.au/nsw/government-downplayed-death-warning-at-millers-point-20140808-1020pc.html

This is deeply concerning. A hallmark of abusive relationships is secrecy and often lies. The original statement warned that forced relocation of vulnerable people such as the elderly and people with mental health issues was likely to result in ill health and even death, and it has as outlined below in impacts.

As part of the announcement a set of myths about the nature of the people that live in Millers Point including elders, most of whom had strongly valued roles and were contributing members of society operating to support each other and in reciprocal relationships with younger people and more valued residents. The negative myths included ideas that the elders had never worked or contributed to society, that they are feeding off the public purse, that they don't deserve to stay in their own homes, that they don't contribute, that they are burdens. Elder residents report feeling that they are viewed as 'stock', garbage, and having reached their use by date.

Why would a State Government destroy vulnerable people's sense of safety, home, security, contribution and community, resulting in their deaths? Why would Government knowingly persuade the general public that elder and other residents here are burdens and not contributing? What safeguards can be put in place to protect vulnerable elderly from influencers such as short term profit, and possible influence from wealthy developers and private speculators? Is it a form of unconscious devaluation leading to abuse of people who live in social housing and are other forces at play?

Financial mismanagement and misleading information has been given to public about economic benefits. Along with false information perpetuated about maintenance required on properties, the government has only reported what appear to be significant financial gains in terms of sales. We know however that there are many hidden costs and waste of funds. This includes selling the very low maintenance Sirius building which was built only 30 years ago with public investment equivalent to \$40,000,000 today (Tao Gofers, 2015). A number of other properties have only recently being remodelled to suit older tenants or have had refurbishments carried out making them low maintenance and specially redesigned for people with disability. No financial, planning or economic commentator has supported the exercise and indeed an independent report recommends alternative ways forward that would benefit Sydney in the longer term.

Go to: http://www.smh.com.au/nsw/government-used-tea-leaves-on-millers-point-sale-expert-20140822-107ceq.html and

http://www.sgsep.com.au/assets/Millers-Point-Final-Report.pdf

New buyers are being paid considerable amounts in compensation following the sale and signed confidentiality agreements.

In the interests of transparency around a project that has led to systemic abuse elders and others the inquiry could investigate:

- Why detailed justification wasn't given for not following the recommendations in the independent report? Why was this report rejected when it shows ways that are better in the long term for Sydney and the economy?
- How much money was spent on upgrades, renovations, home modifications, and refurbishments before the March 2014 decision?
- How much has been paid out to new owners in compensation or otherwise?
- How many have been required to sign confidentiality agreements following agreements or payments or similar being granted to them?

- Why the impact statement was not released for public scrutiny before the decision was announced?
- Given that social capital and inclusive community is a recognised safeguard for elders, why was the decision to maintain this successful, functioning community overturned within the department and how was this justified?
- Why when the myth affects the public's perception of those that live here, have the Government repeatedly told the public that all of the buildings require extensive maintenance when most do not?
- 4. Dramatic weakening of safeguards for preventing abuse: social capital, associations, relationships, faith and other communities

This successful, well functioning community, rich in social capital & other elements that constitute civil society and safeguards against abuse, is being destroyed. Loss of such capital causes great psychological harm to any resident, especially those who are vulnerable and or who have suffered trauma in the past.

In the Millers Point community, approximately 60% of the population are elders. The way it developed over 200 years led to what was a strong, well functioning and inclusive local community, where they know and support each other, and in reciprocal relationships with wealthier residents, contributing to rather than a drain on the welfare 'grid' because they were expected to be committed to the area and look out for each other as part of the privilege of living here. Many are long term members of Christian congregations and uphold these values. Younger residents got to mix with and learn from these hard working elders and interaction with more well off neighbours with different skills or luckier lives. This is a way of providing social housing that actually works rather than creating ghettos of poverty and welfare dependency on the outskirts of our cities. Forcing elders out of something so important to their identity, wellbeing, value and ongoing contribution to society and forcing them into lives of loneliness, isolation and surrounded by paid services is tantamount to abuse.

They include women like 89!year old who has lived here for over 50 years, worked hard until retirement when she increased her volunteer work and was a carer for a disabled neighbour despite being vision impaired herself. She remains independent because she knows her physical environment so well. Or mentioned earlier. She is a dedicated member of her Church close enough to her beloved home that she can slowly walk to Mass. Despite impairments, both egularly cook for fellow parishioners. There are elderly men like also mentioned earlier, now extremely hard of hearing but awarded for his long leadership role over decades in the local St. Vincent de Paul. His help to the less fortunate is repaid now as his neighbours have him over for

dinner and take him shopping now he has trouble getting around and deaf. Moving them from Sirius and their homes will be the end of their independent lives.

Go to: When a community is destroyed https://open.abc.net.au/explore/95200

The local Catholic church, which has a long and important part of the supportive fabric of Millers Point, has been decimated.

Go to: http://www.smh.com.au/nsw/millers-point-australias-oldest-catholic-place-of-worship-under-threat-worshippers-say-20150107-12k03f.html

There was a young woman with Down Syndrome and appreciated by older members of her community including being an active member of along with her friends, former altar boy and girl, gone. This loss of faith based community and people is an example of the stripping away of roles, relationships and spirituality - a form of indirect abuse to elders.

Moving old and vulnerable people away from freely given and established supports pushes them further onto welfare, medical and aged care. Moving good community members leaches a community of it's leaders. When a community is leached of people like deprived of precious social capital, the social glue and holders of social history that make society function.

Privileged people lose exposure to those less fortunate and become aloof and hardened towards them and miss out on the teachings people of faith and or community living can share. Society loses and abuse flourishes in such circumstances.



s in her 70's. She is well known in the community having lived in the area for over 40 years, caring for older people, volunteering at the school and building relationships with anyone she met as she walked her dogs. She was out walking one day after the announcement was made and came across a neighbour who is a private owner. They used to be on friendly terms but the neighbour seemed greatly influenced by the Government rhetoric and verbally attacked saying loudly what right do you have to live here? She felt very threatened and wary after that.

The inquiry could investigate:

- What are the implications for Australian society of a government destroying functional local communities rich in self reliance and relationships between neighbours that have developed over generations and many decades?
- What is the impact for the vulnerable people who are elderly, have disability or are otherwise marginalised who have been excluded from the area and the implications for those left behind? Does this, as is predicted, increase the likelihood of abuse?

5. Some important strategies for preventing systemic abuse

As well as learning from the situation that has occurred in Millers Point we concur with the Government's own policies and practices elsewhere, such as enabling elders to age in place and promoting their ongoing contribution, inclusion and participation in society.

One of the key ways to do this is to bend over backwards to maintain valued roles and right relationship of all elders, especially those who have additional vulnerabilities and are supported by Government directly. One of the critical safeguards against institutional abuse is for individual's to be embedded in community and surrounded by freely given, close and loving relationships. To be surrounded by and at the whim of paid services such as Housing is a significant factor in institutionalised abuse.

'More recently there have been calls to explore risk factors associated with abuse and ways to respond to it, such as by developing models of practice that address the ageist context in which abuse occurs, minimise the risk of abuse and provide opportunities for older people to take ownership and be empowered in the process (Kinnear & Graycar 1999; Tilse *et al.* 2007; Walsh *et al.* 2007).

https://www.google.com.au/url?

sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CCEQFjAAahUKEwik7tDyrpLJAhWj2q YKHYtODa0&url=http%3A%2F%2Fwww.adfvc.unsw.edu.au%2FRTF%2520Files %2FStakeholderpaper_7.rtf&usg=AFQjCNEIXg40nTgjWHoj_QntlVxWbEplgA&bvm=bv. 107467506,d.dGY

It is this ageist context that abuse in Millers Point has been allowed to happen and it is paramount that Government redress the situation before more elders and other vulnerable are harmed.

As Dr Michael Kendrick states:

"The history of the mistreatment and exploitation of the poor and the powerless is so extensive and unrelenting that the most prudent way we can be reassured that it will not occur again is to bend over backwards to demonstrate that what is now occurring is beyond criticism. The burden of proof should not be on the poor to establish what is true ... Rather, it should rest with the powerful and privileged, (who may orchestrate or cooperate with any apparent dispossession of the poor), to leave no doubt that the poor have been treated honourably. Where persistent questions remain as to the moral meaning of how the poor are being treated, as is the case with the current cleansing of the Miller's Point neighbourhood of its long term poor residents, it is likely that something is amiss and should now be corrected..." February 2015

http://millerspointcommunity.com.au/dr-michael-kendrick-joins-jack-mundey-patron/

Additional information on supporting valued roles as a powerful safeguard to prevent devaluation, negative treatment, and abuse can be found at

www.socialrolevalorisation.com

6. Conclusion

The inquiry has the opportunity to look at the abuse that has occurred in Millers Point resulting in significant physical and mental harm, loss of life and debasement of structures that could prevent it and other forms of abuse occurring in the first place.

If there are recommendations, we ask that the remaining residents of Millers Point be allowed to age in place in their current housing.

Friends of Millers Point

Background Information

The Friends of Millers Point is a growing coalition of public figures, artists, art organisations, business, educators, social scientists, church and community leaders, private residents, local, State and Federal politicians and others that support the community of Millers Point. Our members of over 4000 supporters include the ministers and parishioners from the two oldest Christian congregations in Australia. Our patrons include Anthony Albanese, Eva Cox, Jack Mundey, Reg Mombassa, and Dr Michael Kendrick.

Our goals are to:

- support the community of Millers Point, Dawes Point and The Rocks
- call for the maintenance of public housing in the area
- oppose the forced relocation of public housing tenants and the destruction of the community
- make others aware of the negative impact this has on an individual's identity, belonging and ability to contribute and how it seriously damages 'civil society', diminishing social capital and increasing reliance on welfare, health and other services

Contacts:			
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www.millerspointcommunity.com.au