



# ***EDUCATION, ARTS AND COMMUNITIES COMMITTEE***

**Members present:**

Mr NG Hutton MP—Chair

Ms W Bourne MP

Mr JM Krause MP

Ms CP McMillan MP

Hon. S O'Connor MP

**Staff present:**

Ms L Pretty—Committee Secretary

Dr A Lilley—Assistant Committee Secretary

## **PUBLIC HEARING—INQUIRY INTO ELDER ABUSE IN QUEENSLAND**

### **TRANSCRIPT OF PROCEEDINGS**

**Thursday, 13 February 2025**

**Labrador**

## THURSDAY, 13 FEBRUARY 2025

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### The committee met at 9.24 am

**CHAIR:** I declare open this public hearing for the committee's inquiry into elder abuse in Queensland. I would like to respectfully acknowledge the traditional custodians of the land in the Labrador region and pay our respects to elders past, present and emerging. My name is Nigel Hutton. I am the member for Keppel and chair of the committee. Here with me today are: Ms Corrine McMillan, the deputy chair and member for Mansfield; Ms Wendy Bourne, the member for Ipswich West; and Mr Jon Krause, the member for Scenic Rim. The Hon. Sam O'Connor, the member for Bonney and Minister for Housing and Public Works, is substituting for Ms Ariana Doolan, the member for Pumicestone, who has been unable to attend this morning's session. Mr Nick Dametto, the member for Hinchinbrook, is an apology today. He remains in his electorate up north following the recent devastating events in North Queensland, which I think we can all understand. The Department of Housing and Public Works has provided a written briefing to the committee separately which is available on the committee's webpage.

The purpose of our hearing today is to assist the committee with its inquiry into elder abuse in Queensland. Late last year the Queensland parliament referred the inquiry to the committee. The committee is to report its findings to parliament by 12 December this year.

We know that elder abuse takes many different forms. It can be a single action, a repeated action or a lack of action. It occurs within relationships where there is an expectation of trust. There may be harm or it may simply be causing distress to an older member of our community. We are here today in Labrador to hear your views. Please take this opportunity to share your experiences with us.

This committee is a committee of the Queensland parliament and its hearings are subject to the rules of parliament. These proceedings are being recorded by our wonderful team from Hansard—thank you very much—and will be published on the parliament's website. If you have any concerns around this being published then please speak to our committee secretariat, the wonderful Ms Lynda Pretty. Media may be present and are subject to the committee's media rules and the chair's direction at all times. You may be filmed or photographed during these proceedings and images may also appear on the parliament's website or social media pages. I ask that you please turn your phones off or to silent mode.

The hearing will begin with stakeholders who have preregistered to attend today. We will then open up the hearing to anyone else who wishes to speak. Given the time available, I ask that you keep to the allotted time given by the committee to ensure everyone has an opportunity to have their say. The committee notes that this particular topic does involve emotional and distressing items. If you need to have a break then that is fine and completely understandable. We have tea and coffee available for you. If you or someone you know does need help, contact details for support services are available from the committee secretariat. It is really important that we get help if we need it.

This public hearing is covered by parliamentary privilege, which means that speakers are protected from legal action in respect of evidence they give to the committee. If today you wish to give evidence that reflects adversely on an individual or organisation, it should not be taken as proof of the allegations made. The committee may choose to receive, but not publish, that evidence. As chair, I may ask you to avoid naming individuals or give you the option of talking to the committee in a private hearing at the end of the session.

Our first representative is Ms Di Macleod. Thank you for appearing before our committee today. I invite you to make an opening statement after which committee members may ask you some questions.

### **MACLEOD, Ms Di, Director, Stop Sexual Violence**

**Ms Macleod:** I also would like to acknowledge the traditional owners of the land on which we meet, the Kombumerri people, and pay my respects to their elders past and present.

I have worked in the area of violence against women for over 45 years. I founded the Gold Coast Centre Against Sexual Violence 35 years ago. The service has a specialist sexual violence intervention and prevention program working with women, older women and young women 14 years

of age and over who have experienced sexual violence at any time in their lives. During my working life and in my time at GCCASV, we have responded to many older women who have experienced sexual abuse. GCCASV has been at the forefront of raising awareness of elder sexual abuse. In 2018 the service was awarded a Queensland state grant to build a workforce capacity program through the development of Australia's first trauma-informed two-day training program specifically focused on recognising and responding to elder sexual abuse and to develop information and resources to raise community awareness of this issue.

I am speaking here today not only as a worker but also as an older woman myself, as a grandmother and as someone who has a mother in an aged-care facility. I am here to ensure that sexual violence is included in its own right in this statewide inquiry into elder abuse. Firstly, what is elder sexual abuse? Elder sexual abuse is any kind of non-consensual sexual behaviour, language or activity that makes an older person feel uncomfortable, threatened, frightened or unsafe. Elder sexual abuse occurs in a broad range of settings such as marriage, de facto relationships, family, friendships, aged-care facilities, faith communities, home help and health care. Elder sexual abuse can be a single or repeated act that may include both contact and non-contact behaviour and occurs with or without physical violence. Gender is also an important consideration as older women are six times more likely to be sexually assaulted or sexually abused than older men while the majority of perpetrators are male, although it is recognised that women can also be perpetrators and that men can be victims.

In terms of prevalence and statistics, elder sexual abuse is the least reported and substantiated form of elder abuse. The lack of prevalence data on the sexual abuse of older women further obscures the problem. However, the lack of data does not equal the absence of sexual abuse. As we have said, it can be committed by family members, partners, carers, friends, strangers, neighbours. The abuser is statistically more likely to be known to the victim and, sadly, less than one-quarter of participants in a recent study who experienced sexual abuse—older persons who experienced sexual abuse; less than 24 per cent—reported that they had sought help or advice about their experience. It is covered in a lot of shame, and I will talk about that later.

The royal commission into aged care estimated the number of incidents of unlawful sexual contact in Australian aged care was an average of 50 per week. A number of burglaries of older female victims also involve a sexual assault, and they may not always disclose that. In fact, research has shown that in a break-in the primary offence can often be the sexual assault and the burglary is the opportunistic crime on the way out—'I'll grab the wallet that's there'—and so people focus on what they can see with the burglary and the person is probably more comfortable talking about that.

Sadly, if an older person experiences sexual assault it can have a huge impact on them. There are some very sad statistics that for elderly women—depending on your definition of 'older' and 'elderly'—who are sexually abused the majority of them die within one year of that abuse occurring, so it is really important that we are awake to the fact that this occurs. The other thing that is becoming more and more apparent—and certainly you will realise this given your various roles in parliament—is that the data shows that single older women is the fastest growing cohort to experience homelessness and that the number of women over 55 experiencing homelessness is significantly increasing with the other demographics. Without safe, affordable housing, these older women are vulnerable to sexual victimisation as a consequence of their homelessness.

The other thing we do not often think about is domestic violence growing old and our language around that. Often older people might be in a very long-term relationship and maybe there was abuse right at the start of the relationship and we might call it teen violence or dating violence and then we move on and we use another name such as domestic violence, but suddenly as you get older we are starting to call it elder abuse, so we are masking some of the domestic violence statistics around older women by calling it elder abuse. There is no terminology that we are using across the board, so that is another cause for consideration.

In terms of the contributing factors, it does remain invisible for a whole lot of reasons and some of them are ageism, sexism, mythology. There are many myths that exist about who might be victims of sexual assault and who might not be. You might be thinking, 'Why would a younger man ever sexually abuse an older woman? She's old. She's not sexually attractive.' It is not about sexual attractiveness; it is about power and control acted out in a sexual way. There is that lack of definition and lack of data, but the ageism, sexism and mythology are the barriers to disclosure. The single biggest one for all victims, particularly older people, is the shame—shame and fear about speaking out. If you are going to speak out about who is abusing you and it is actually your partner and carer,

what is going to happen to you as a result of speaking out? Where are you going to end up if you are not able to stay there if you are not safe? Given that shame and fear, older victims are less likely to spontaneously disclose, so we need to be tuned into clues.

I was just talking about something with one of the members here today about something that she had observed in an aged-care centre that was a bit of a red flag—not sexual abuse but a red flag to boundaries. If we are not aware of something, we are not taking it on board. If we do not name it as a problem, we are not looking for solutions to things that are not problems. We have to name it as a problem first. Often the community and government want to dive in and say, 'We're going to go into prevention.' We are not even at a space where we can go to prevention yet. All prevention starts with awareness. We all have to be aware that the issue exists before we can do anything about it.

I will now move on to the issue of credibility. The older you are or those who have dementia, a disability or a cognitive or physical impairment might not be seen as likely victims, but actually they are the most likely victims because of that vulnerability. People target vulnerability. What better person to target than someone who is not verbal? How are they going to tell what has happened to them? Whether they tell or not, they are still sitting with the impact of that abuse which really affects their health and wellbeing.

We have funding silos for domestic violence, sexual violence, older people and seniors. We fund things in silos and we often talk in our own silos. We need to be a lot more collaborative. There is no central crisis line for elder sexual abuse. There is information and referral, but that does not necessarily mean a crisis response to a disclosure of sexual violence which is a specialist service. In terms of contributing factors, there has been more of a focus on aged-care settings in recent times federally and now at a state level, but sometimes the focus on a particular setting can let others fly under the radar, so we need to have that whole level of awareness across the board, and the lack of worker training is really critical.

We have women who are feeling unsafe who are not necessarily speaking out and do not necessarily know where to go. The policy and response kind of recommendations would be that sexual violence and domestic violence services have to do better at reaching out to the cohort of older people and letting them know that those services are for them. Often older people will go to a service that starts with 'elder' or 'older'. That is where they start. I know if Mum was going to find something when she was at home about maintenance she would go to the information that she had for older people, not just go to a general service. If people think domestic violence services and sexual violence services are not for them then that makes it really difficult. What door is the right door? Where do they go to?

In elder abuse the primary focus for many years has been financial. We focus on fraud, on scams, on the family ripping off the older person. The really critical thing for people to understand is that wherever there is one form of abuse there is likely to be another. It is rare for one strand of abuse to be acted out and for it not to infiltrate other areas of the person's life, and sexual violence will often go along with that financial abuse. People go to financial abuse first because it is easily solvable—we have clear legislation and processes to look at that—and the focus on that then silences what goes on underneath it.

We need to recognise elder sexual abuse as an important cross-portfolio issue—health, domestic violence, sexual assault, women, police, justice. We all need to be at the table talking about it. We need education, but that education starts with awareness and I think it is probably time to get into a statewide campaign raising awareness of this type of abuse and not simply see it as a subset of physical violence. If we have a funded and resourced public awareness campaign, that is kind of the first step in really drawing on the knowledge from First Nations and CALD communities to develop an inclusive awareness campaign that will resonate with the various communities. We need to collaborate around training. As I said, we already have a two-day training program specifically on elder sexual abuse. We would be happy to work with the government to look at reinvigorating that and offer that around the state in terms of training.

I might come to the end of my opening statement now. I think the training is really important, because if we do not know about it and we are not recognising it we are not responding to anything. It is a confronting subject. It is confronting personally and it is confronting professionally. Sometimes it is easier to ignore what we are uncomfortable with, but just think: if we are uncomfortable with the subject, what it is like for the victim? In Queensland I think it is time to break the silence on elder sexual abuse, to name the behaviour and to enable older people—older victim-survivors—to identify what it is that is happening to them and to be able to speak out and to create community awareness along with basic responses to support and refer and to train health, welfare, police, justice and support workers to recognise and respond to this crime. Thank you.

**CHAIR:** Thank you very much, Di. I really appreciate not only the breadth of what you have spoken about but also the fact that you have gone to the crux of what we are seeking to achieve here today, which is an understanding of where the community is at and the prevalence of this issue in the community, but then to also work towards the future in terms of the interventions that we as a community and as a parliament can take to work towards managing this scourge. I again really appreciate the depth of what you provided. I only have one question and then I will be passing to the deputy chair. In terms of the community of Labrador, I ask you to please feel free to elaborate on your understanding of your community, hence why we are here to hear from across the state. To what degree do you believe there is an awareness or an education of elder abuse? Do you think it is maybe one in four people, or no-one understands? What is your on-the-ground take? How far are we from having an understanding in the community of what elder abuse is and what it looks like so that we can improve reporting?

**Ms Macleod:** The Gold Coast community is no different, really, from the whole of Queensland. I think we as a state are moving more towards the awareness and understanding of sexual violence as an issue. In recent times there has been quite a focus on child sexual assault and sexual assault generally, but we have not caught up with that in relation to older people. I do not think there is a good awareness of what it is. I think people do find it confronting and it is easier to turn away from confronting issues.

I could not give you a statistic around what I think it might be. I am not seeking to infantilise older women, but if we compare awareness and knowledge of child sexual abuse with elder sexual abuse I think there is a huge gap. We have to work harder. We have got to get more research on it. There is a piece of research that has just come out which I will be quoting in my written submission. As we start to get research we start to build an evidence base. Me coming here and making broad statements, I can link it to research as well. I am talking about our experience largely in the Gold Coast community. I think we are behind the eight ball. I think most people probably do not think it. I often have a conversation with people who say, 'I never thought of that. I never, ever thought of that.' They think about elder abuse but never elder sexual abuse.

**Ms McMILLAN:** Good morning, Di. It is great to see you again. Thank you for all that you have done for the Gold Coast community for close to over 35 years. I know your work and I know that you have been an absolute champion for women over that period so thank you immensely. From your on-the-ground experience, what group would be the greatest perpetrators of sexual violence against the elderly? Secondly, do we have a general code of conduct or processes in place for institutions to be aware of, to be trained and to be responsive to any sort of sexual violence against the elderly? There are two questions, thank you, Di.

**Ms Macleod:** In relation to the first question, in our experience in our service, the most likely perpetrator is a partner or ex-partner or family member. Amongst family members, the highest rate of perpetration in family members is adult sons. People do not want to think about that either. The latest research that came out last year that is looking at who are offenders is saying mostly friends. It is how people define 'friends'. Is it an acquaintance, is it a neighbour, is it a friend who was helping with the housework? Who knows. Certainly it is someone known to them. Family first. All offending starts close to home, so family first and most likely a partner, adult son.

In aged care, it might not be workers in aged care either. Who are the perpetrators in aged care? Resident to resident, which can be sometimes be written off if the perpetrator has got dementia. There are guidelines. I am not able to speak on behalf of aged-care facilities, but we know there are guidelines for reporting. It could be aged-care workers. We have had instances where it is the gardener with ground-floor units, where they are doing the garden and access straight into the unit; where it is maintenance people; where it is visitors for other family members. It is a place where there are a lot of vulnerable people and those seeking to perpetrate abuse will seek out those likely victim-survivors.

**Ms McMILLAN:** There are reporting mechanisms, but not necessarily awareness raising mechanisms when people enter institutions.

**Ms Macleod:** No. It is something that we have talked about. I responded to an incident in aged care just in the last two weeks and fortunately that aged care, for the first time, has said they want some training for their staff, which is so good. We have run that training all over Queensland—from Cairns, Brisbane, Gold Coast—and probably less than one per cent would be aged-care workers attending. Often in aged care they do not want to be associated with the issue so if we offer training they are not that keen because they do not want families or potential residents to think there is an

issue in that facility. It is that ‘guilt by association’, whereas this is a prevention thing: you should all be aware about it because you might be missing a whole lot of cues before it gets to actual abuse. One thing we would really like is to get that education across Queensland, particularly into those places that work specifically with older people and where older people live.

**Ms BOURNE:** What you have spoken about, Di, is very informative. I was going to ask if you thought there was enough being done in aged-care facilities but you have answered that question. You talk about research. How accurate is that research if there is such an underreporting?

**Ms Macleod:** That is it. There is not much research being done in the first place. The research that has been done I think is fairly credible research, but it depends on who is involved. Who the subjects of that research are and what they disclose obviously can change the outcome. I was surprised to see ‘friends’ come up as the most common perpetrators of sexual abuse. I have not had a chance to read that research. It has only just come out in December. I have not had a chance to read it. It is something that, if it is researched, is researched by credible people because not everyone wants to research that subject so they want to get money for credible research. That is the only research we would be citing.

**Ms McMILLAN:** Chair, could I ask that we get the library to do some work around that topic for us?

**CHAIR:** Yes, and grab the reference to the research report. I think that it would be really powerful to have such an up-to-date source.

**Ms McMILLAN:** The other thing that would be really useful would be those police statistics around sexual violence against elderly Queenslanders and what the police stats might tell us. Thank you, Chair.

**CHAIR:** We will now go to the Hon. Sam O’Connor, the member for Bonney. Thank you so much for being with us.

**Mr O’CONNOR:** Thank you for being here, Di. Thanks for always making yourself available to parliamentary inquiries of all shapes and sizes and for always putting in such thoughtful submissions whenever there is some legislation or something of interest. We really appreciate it. From your last data, your organisation had around 12,000 client interactions. Your counsellors talk to five or six people every day. Can you give us an idea of how many of those would fall into this category of elder abuse or how many would be older Gold Coasters whom you are helping?

**Ms Macleod:** The percentage of women coming to our service, older women, is probably—I think it was about eight. It is not very high. It is probably about eight per cent. I am looking at the counselling manager behind me.

**Mr O’CONNOR:** Is that over 65?

**Ms Macleod:** It is how we enter our statistics. In entering our statistics for the government, it is over 55. Oh my God, I have been an older person for a long time! It depends. Ours says over 55 if we are working around the 10 per cent. What further influences the statistics around older women coming to our service is that not all of them will be coming to our service for abuse that has just occurred; more in that age group will be coming to our service for the first time to disclose sexual violence that has occurred in their lifetime. They come often towards the end of life. We often have that from facilities where people are in their last stage of life and they want to break the silence. They do not want to carry that secret to their grave. They want to tell someone. We will have people ring up and say, ‘I need to tell someone for the very first time in my life. I don’t want to carry the secret to the grave.’ Of that cohort that we are talking about, max 10 per cent, there are probably only about three or four per cent who might be talking about a recent experience. Does that make sense?

**Mr O’CONNOR:** You are only getting the tip of the iceberg, really.

**Ms Macleod:** Yes. Those are people who find their way to our service.

**Mr O’CONNOR:** Of those who are disclosing ongoing or current abuse, do you find a higher proportion are from aged-care facilities where people are in those vulnerable categories you talked about where they might be cognitively impaired or they are just in a position where they do not have a voice?

**Ms Macleod:** The women who find their way to our service for counselling and support are usually supported to do that by family. It would be quite rare for an aged-care facility to ask us to provide support to someone who is in aged care, although that did happen in the past two weeks. They do not necessarily want people to know the sexual assault service is coming to their facility because, what is wrong with your facility, then? Certainly we are missing out on responding to a whole

lot of vulnerable people who do not have a pathway. What they are disclosing, who they are disclosing to and where they can go for support—you have to navigate that. The more that you are impacted by mental health issues, by cognitive capacity, by dementia, the less likely you are to find your way.

**Mr O'CONNOR:** It is delving into other services, but who would they be disclosing that to? You are quite a niche service really in this space, but who else would they be going to, if they are at all?

**Ms Macleod:** They might disclose to other people. Often we will get ones from workers who are going into the home. Where workers are going into the home they get a pretty good insight into what is going on in that home. Because they are meeting with the person in their home, it is often quite a supportive relationship and they might disclose to that person. You are only going to disclose to someone you feel safe with and if there is no-one safe in your life then that keeps you quiet. We have had support workers contact us and say, 'I'm really concerned about this person I'm providing support to. It's a studio unit. There's one queen-size bed. The adult son and the woman live there. He does not let me have time alone with the woman. He speaks for her.' So we might brainstorm what that person has the capacity to do there. You see, that's it: if you have someone mediating and a carer who controls access to that person then it is very hard to access that person in any way. Someone has to be a voice for that person.

**Mr O'CONNOR:** You mentioned training that you have provided. Who was that provided to and what is the status of that? Was it something that you were previously funded for that you are not anymore?

**Ms Macleod:** No, we were funded to actually write a two-day training program. There are different resources that come out of that program: what is required each year to update the statistics and to review the research to keep it current, but essentially it is ready to go as a two-day program. It was open to anyone who was interested in recognising and responding to sexual abuse. When we did it on the Gold Coast we had gerontologists, we had doctors, nurses, police, we did have aged-care workers, a range of support workers, domestic violence workers, community workers—across the board. It was a really good mixed audience to share that information. That was reflected across the state, in Cairns and on the Sunshine Coast as well. But the smallest cohort of participants would be aged-care workers from whom we had hoped we would get more buy-in.

**Mr O'CONNOR:** This is from the program?

**Ms Macleod:** That is part of it. That is the community brochure that came out and we called it ELSA, because it is an older person's name and 'elder sexual abuse'. That is what the training program is called. It is available.

**Mr O'CONNOR:** Maybe the committee would want some information on that.

**CHAIR:** Yes, we would love the opportunity, if you would like to provide them, for these to be tabled and then we can actually publish them as part of the inquiry.

**Mr O'CONNOR:** With your submission maybe.

**Ms Macleod:** I will certainly put that in the submission and I will give you that.

**CHAIR:** Wonderful. For the final questions, we will go to Mr Krause.

**Mr KRAUSE:** Di, thank you for your evidence. You touched on abuse in the aged-care and health settings, particularly aged care. You also mentioned child sexual abuse and the greater awareness there. When the blue card system was introduced however many years ago, it led to a lot more awareness as well as a suite of policies that flows out of that system to try to prevent child sexual abuse. There is nothing similar in relation to awareness or preventive measures of a regulatory nature for elder abuse, is there?

**Ms Macleod:** As far as I know, there is no kind of card that would validate you working in that area and having a clean record. In fact, when an abuser is discovered they just move on to another aged-care facility. With the last big court case we had, the person was a relieving manager, and when they did arrest and charge him and he did get a custodial sentence, there had been a whole bunch of allegations made in New South Wales. He then faced court in New South Wales as well and then they obviously looked at other aged-care centres he had provided relief work in. You can get around under the radar. The blue card is not infallible, but it is a filtering mechanism and I think it has worked reasonably well in relation to the protection of children and who works in child care.

**Ms McMILLAN:** Can I follow on from the member for Scenic Rim's question, which was a good one. Do people who work in aged-care facilities undergo a police check as part of their usual employment process?

**Ms Macleod:** I cannot answer that question. A lot of things have changed in aged care over the past few years and I am not able to speak to what the current practice is.

**Ms McMILLAN:** Chair, that might be something for us to look at.

**CHAIR:** We will definitely follow that one up. I would like to thank you, Di, for the time you have given us today and for the awareness you are helping to raise in this space and also the support you are providing to such a vulnerable group in our community. When you talk about the number of people you have coming through your centre for myriad needs, you are doing brilliant work supporting the vulnerable community, so thank you. I appreciate you being our first speaker for our public hearing today.

**Ms Macleod:** Thank you.



**WRIGHT, Ms Karen, Private capacity**

**CHAIR:** Welcome. Thank you for offering your time this morning. Would you like to tell us about the group that has been created to help provide education and understanding?

**Ms Wright:** A number of years ago we became estranged parents and I have created a Facebook group, grandparents of estranged adult children. It was never a place I imagined us in. My daughter has a medical disability, not a physical one. Well, it is physical, like a diabetes type situation. We acquired a carer. An elderly person a lot older than her came into her life and we received a text stating she would never return home.

I did not know anything about this sort of thing. I did not know how to reach out to anyone regarding it. We felt embarrassed that our whole family just fell apart via a text so I created a Facebook group and it is growing. Last night I approved 11 members. We meet now regularly. We had a Christmas luncheon. People are in their 50s, 60s, 70s, 80s. We are all beside ourselves. Most cry all day. We have tried everything. We have had the police involved. We have had friends involved. We have had other members of families involved. We have all tried everything. We cannot get our children back in our lives and we cannot get our grandchildren back in our lives, and we just need this to be recognised as elder abuse.

We do not know where to turn. Some parents have gone to court. They have raised these children, these grandchildren, for up to 10, 12 years, and then their children just walk out and they never hear from them again. They are not allowed to see their grandchildren. They go to court and they spend their life savings on court fees. They do mediation but that does not work. Most of the time the parents say, 'It stresses me. I can't be here,' so then they proceed with legal proceedings. They are spending tens of thousands of dollars in court. Some parents are granted access to see the grandchildren, and then the sons and daughters or whoever gets involved and says, 'Oh, no, sorry, I'm busy today,' and then they still do not get to see them. They then go back to court to get access to these children again, but again nothing happens. They are spending their life savings on it, but the minute there is an inheritance they are back in their life. It is just abuse.

None of us know what to do. The group asked me to come and represent them because we do not know how to change it. Social media is saying, 'Your parents are bad. They're controlling. You can't have them in your life. You have to wipe your parents.' It is taking over this country.

**CHAIR:** Thank you, Karen. When we spoke earlier, you said that you have membership from across Australia. Without going into too much detail, obviously, to protect privacy, would you like to elaborate on that growth which highlights this social isolation?

**Ms Wright:** Every day I am getting applications to join the group. Sometimes I might get two and sometimes I might get 10, but it is just a Facebook group. It is not publicised anywhere. There is another group which I joined originally, and it is all these grandparents fighting for the rights to see their grandchildren, to get their children back into their lives. They know that a lot of these grandchildren are in abusive situations. They know that their sons and daughters are in abusive relationships but nothing is changing the system.

There are a number of groups. I have just recently joined another group and they estimate there are 85 million worldwide and it is in white, civilised countries. In China, for example, apparently there is a law that you must make access to your parents twice a week—whether it is a phone call, a visit or whatever—and if not it is called elder abuse because you did not check in on your parents in China. But we are going years.

**CHAIR:** I appreciate the fact that you are providing not only an opportunity for families to network and understand but also that frontline support to people who are going through this. I want to thank you for being so brave and open and willing to step up on behalf of your group. I appreciate this opportunity for us to get data around this but also to recognise that this is a form of social isolation that is occurring to our seniors in our communities.

**Ms McMILLAN:** Thank you, Karen, for being so brave. This is an issue also in the community that I represent. I thank you immensely for what you are doing in your time of vulnerability to help others. What are your thoughts about the root cause of it? Is it domestic violence in the children's relationships?

**Ms Wright:** Yes.

**Ms McMILLAN:** That a partner is isolating that person from their family?

**Ms Wright:** Yes.

**Ms McMILLAN:** Is it drug use? Could you give us a snapshot of views from other parents around why that is happening?

**Ms Wright:** With one of the ladies in my group, her daughter met a guy from overseas online. He came to Australia, he married her and he has totally isolated her from the parents. She actually drives past her parents' place each day to take the children to the school that she went to because she appreciates what her parents gave her. For 10 years she has not had any access to her daughter because he threatens her, threatens them—'I'll take them overseas. You'll never see them again,' but they are not seeing them anyway.

I am finding that it is a lot of people from foreign countries coming in. From what I am hearing, they are becoming carers and isolating the children from their parents because these people are vulnerable. It is just total isolation. I would like to speak to you privately and then I could express a lot more of what is really happening. I feel quite limited with what I can say publicly.

**CHAIR:** We appreciate that and we will provide an opportunity for that.

**Ms BOURNE:** Karen, I am sorry that you are going through this and sorry that it is happening to so many people. I know there is an experience in my own family with this situation. How can we as a committee or as representatives in government get this intelligence that you are gathering on your Facebook page so we can understand it more? I do not know whether the family law needs to be strengthened. Coercive control is becoming an offence in July. Is there something we can do? All of these people are feeding this information and their stories in there.

**Ms Wright:** If any of you would like to join the group, I am more than happy to approve you as I am the only admin in the group. You can then put your input in there and say, 'Reach out to me. I'd like information about situations' or whatever.

The family law group does have to change. I personally cannot apply under the Family Law Act for access to my grandchildren for my mental health; I actually have to apply for my grandchildren to have access to me—the total reverse of the situation—and say that my grandchildren have the right to know their heritage, to know where their grandparents came from, to know what their grandparents' lives were like and what their parents' lives were like. I cannot apply and say, 'I'm having a bad hair day and I want to see my grandchildren.' I cannot apply for that.

We do not have any rights whatsoever as grandparents. Even if we do win in court then they just turn around and say, 'Having a bad day. Sorry, you stress me too much. I cannot attend.' That is the problem. We actually have to apply on behalf of our grandchildren. A lot of people do not even know their grandchildren's names. They have not met them. They have had other people find them on Facebook and say, 'Hey, that's your grandchild.' It is beyond cruel.

**CHAIR:** We might stop for a cup of tea and give everyone a moment. We will reconvene in 10 minutes. Thank you, everyone. I appreciate your time and your honesty and the rawness of what you have been sharing this morning.

**Proceedings suspended from 10.15 am to 10.32 am.**

**CHAIR:** We will reconvene.

**SAKAI, Ms Tommo, Case Manager, Relationships Australia (Queensland)**

**CHAIR:** Welcome, Ms Sakai. Please feel free to make some opening remarks.

**Ms Sakai:** Good morning, everyone. Thank you very much for this opportunity. My name is Tommo and I am from Relationships Australia (Queensland). Currently, I am the Care Manager, Elder Abuse Prevention and Support Service and Senior Financial Protection Service. Through Senior Relationship Services at Relationships Australia we are trying to support older people in our communities who are the victims of elder abuse.

Relationships Australia is funded by the Queensland government—thank you very much—so we can provide free support services to people. We have a case management service and community education, which is very important in order to increase awareness about elder abuse. Elder abuse obviously forms part of domestic and family violence. However, there is limited awareness and understanding of it. We go almost anywhere on the Gold Coast and provide information, education and support to vulnerable older people and carers.

As a case manager, I spend 1½ or two hours with the client—the vulnerable person—to obtain all the relevant information and try to provide emotional support as well. Based on the issues, I often make a referral to the Gold Coast Community Legal Centre. We have an agreement with them. We make a referral to the Community Legal Centre and these people provide legal support, information and advice. I can also make a referral to the financial counsellor who works for UnitingCare. They can provide financial support.

The community services work together. When people have housing issues, for example, we work with Footprints Community and they try to find accommodation for clients as soon as possible. If people cannot afford to move we have to find the funds for them so we connect with Gold Coast community services to get emergency relief.

Elder abuse is so complex. I believe all different factors are related and creating conflict issues—financial abuse; psychological and emotional abuse; social abuse, which is social isolation and leads to neglect; and, of course, sexual abuse is involved. Thank you very much, Di, for that information. All these different abuses are not able to be separated. Nowadays, so many people are struggling because of their financial situation and housing issues.

Financial abuse might happen, let's say, from the younger generation or the parents' generation. They may be struggling financially with having a family, having three children or four children. They cannot afford things. They might move in with their parents—that means into a grandparents' house. They might say, 'Mum and Dad, we cannot afford this. We cannot do this. Why don't you pay?' or 'Why don't you give me a car? Why don't you transfer the title of the property to us?' Gradually financial abuse starts.

If grandparents cannot afford to do those things then psychological and emotional abuse happens. They might say, 'Oh, if you can't do that, you probably can't see our children'—that means their grandchildren—or 'If you can't do that, we can't support you. You are getting older. You forget. You cannot do these things,' or 'Don't do anything. Just stay there. Give me the bank card.' Financial abuse, emotional abuse and psychological abuse happens. They might say, 'You cannot see your grandchildren,' or 'Mum or Dad, you can't go anywhere. You might get lost. If you catch up with your friends, how can you come home safely? We do worry. We can't do everything for you.' Social isolation happens. If parents want to make their own choices, their children's generation might say, 'If you don't listen to us, we can't support you anymore.' Then neglect might start.

All of these factors are deeply related. I also believe that cultural background is deeply involved. The older generation migrated to Australia 50 or 60 years ago. They still carry their own culture and they have their own beliefs and traditions. Their children's generation, who were born in Australia, do understand their parents' culture; however, they were born and grew up in Australia, so they have completely different values and perspective of the situation that might create dispute in the family. Even with the younger generation, there is a generation gap and they also have a different view. There are three different generations trying to insist on their own perspective and views and that creates conflict and disputes. Of course older people can be vulnerable. If they do not do the right things for the younger generation, elder abuse might happen.

I have statistics here that one in six older Australians report experiencing elder abuse; however, two in three of these people do not want to report or do not want to cause problems. They think, 'We are getting older. We want to do the best for the younger generation. I still love my children. I don't

want to cause any problem. Please do not talk to the police. Please do not make the situation worse. Please do not. I just have to survive.’ Sometimes I see the cases. Within three years one parent lost \$400,000 unfortunately because their son misused their enduring power of attorney. He used most of his parents’ savings, they believe. The parents could not get back any money. We immediately liaised with Services Australia, financial assistance and Community Legal Centres. However, the situation is not that simple.

That is why as community workers we have to work together not only to support vulnerable people but also to educate people including carers. Carers often have lots of pressure on them and they are not aware enough of their role as an EPOA, for example. It is about addressing all of the different generations and supporting these people—not criticising them but supporting them and including them. They can listen to us hopefully and we can provide enough good information to these people.

For example, we started running regular meetings in our office as part of the Savvy Seniors program. For example, one month we talked about finance, retirement and savings. At one meeting we talked about wills, enduring power of attorney and advance health directive. We also talk about changes in the aged-care system. I myself have experience in the aged-care sector. I used to work for home care service providers. I also visit community home care support providers and educate them on how a home care worker can detect any elder abuse and how they can report to their case manager and how their case manager can communicate with management and discuss how they can address those issues.

**CHAIR:** Thank you very much, Tommo. What I really value is that not only have you been able to share your experience but also you have demonstrated how there are very clear pathways with the referral services here on the coast. I think that is obviously a strength for this community, but it tells us that if we can get awareness and education around the challenge we actually have the services here that can help. People report issues to you which then guides you whether to go to legal services or financial counselling. My question to you is: in your experience, who are the people who are identifying elder abuse and bringing it to your attention? Is it the victim themselves or is it someone in their orbit? Where are our touchpoints working versus who is the market that we need to get to to change this?

**Ms Sakai:** Older people who are going through elder abuse report and talk to us. At the same time, their friends and caring family members, as concerned third parties, also make inquiries. We can look after both parties—concerned third parties and older people.

**Ms McMILLAN:** Thank you for the work you do with our most vulnerable and with the elderly. They certainly are a very special group and they need your support. Following on from some of the work that Di mentioned around the research, anecdotally what are the numbers in your sphere that you would deal with here? Is it only locally here on the Gold Coast that you service?

**Ms Sakai:** We do have several offices throughout Queensland. We are based in Robina but our catchment area is the Gold Coast.

**Ms McMILLAN:** How many seniors or elderly people come into your sphere with this issue on a weekly or monthly basis?

**Ms Sakai:** I decided to speak to you just five minutes ago, but our service coordinator Benjamin O’Rourke will present this afternoon at Broadbeach so I will let him know this question.

**Mr O’CONNOR:** Is that the Elder Abuse Prevention and Support Service that you run out of Robina? Is it also run in Rocky, Maroochydore, Mackay, Gladstone and Bundaberg?

**Ms Sakai:** Yes. We do have an office in Morayfield. It is funded by the federal government but they do run the Senior Relationship Mediation Service.

**Mr O’CONNOR:** It would be great to get that data for this afternoon, if you have any figures you could share around the number of people. Eligibility is over 60 but over 50 for First Nations; is that right?

**Ms Sakai:** Correct.

**Ms BOURNE:** Thanks so much for your comments. It shows me it is a very complex issue and early education in this area is absolutely vital. As you have just explained, a lot of elderly people start to feel vulnerable and compromised by their families. The Tech Savvy Seniors program is fantastic. Do you think there is enough of this work being done in communities to educate people before they get to a point where they become quite so vulnerable with their families?

**Ms Sakai:** We are trying so hard to visit different libraries on the Gold Coast. However, I feel there are very limited resources and organisations that can do this type of service. Yes, I can see some people who are interested in finding ways out of elder abuse. Depending on the library, we get no inquiries because people are not really aware of what elder abuse means. If I start talking to people then they try to avoid it because they do not want to know about these scary things. I feel we need to do more activities.

**Ms BOURNE:** It is education and awareness.

**Ms Sakai:** Yes.

**CHAIR:** I have quickly checked in with the gentlemen and they have no questions at this time, but they really appreciate your willingness to speak. This past weekend there was an article that referenced the piggy bank of mum and dad and grandparents who have seemingly been playing a role there. Thank you for taking the time to speak to us. We look forward to hearing from Relationships Australia further this afternoon. We will see if we can get the data to support that.

**ANGUS, Ms Melissa, Coordinator, Labrador Senior Citizens Centre**

**Ms Angus:** I will share some stories that have come back to me from some of my members. I have 600 members now at the senior citizens. Last Thursday I reminded everyone there would be no activities today. There were about 60-odd people here and I encouraged them to come along. They might know someone. One of their friends sitting next to them at their table could be a victim of elder abuse. I feel they did not know what elder abuse was, so I said that it is very much like domestic violence. It can take many forms. We had a bit of a chat about it. Some of them came up to me afterwards and said, 'I reckon so-and-so is a victim of elder abuse. Their kids tell their grandkids, "Go see granny and granddad because they'll pay for it; we can't."' There's those sorts of things.

I have members who are scared to tell their children about things that are happening to them when they fall in case their kids put them into a home. They do not feel they have a voice over whether they go to a home or not. I have another member whose family came over from Melbourne and basically just saw him to get money to go to Dreamworld and Movie World. He waited all weekend for them to come and have dinner with him. They never showed up. Basically, they just came, got the money and off they went. In my eyes that is a bit of elder abuse, but he does not see it as that. I think there needs to be a lot of education put out there about what it is, because a lot of them do not realise it is happening to them.

**CHAIR:** You gave an example where you provided just a snippet of education and then someone said, 'I think so-and-so is being treated that way.' Is there a methodology whereby we can provide information to people to let them know they are potentially being exposed to elder abuse? Is it something as simple as having a postcard? You could have a website where you say 'if you are concerned about someone' but you think they need to be empowered to make that first step then you give them a little bit of information that might be sent to them via postcard. They may choose to ignore it, but at the same time it might be just the trigger for them to think, 'I hadn't really thought about it that way before'.

**Ms Angus:** I think that could be an option. I know the lady they were talking about. She is a very proud lady. You could put it out there, but I think she would be very embarrassed to recognise that it might be happening to her. She might put it under another name like a 'grandparent's duty'. There is a lot of stigma around it as well. People are very embarrassed. You raised your family and I would hate to think that my kids would treat me in such a way in years to come. I would be very embarrassed to admit that. I think that is a lot of what my members feel as well.

**CHAIR:** Thank you for being there for your members. I think that is wonderful.

**Ms McMILLAN:** Thank you for the work you do here. When I walked in today I felt a sense of warmth, so the culture you have built here is really lovely. Is there any provision of social workers or people who are trained support workers for the elderly? There are a whole range of issues when you are navigating the aged-care system. There are a whole range of issues as we age that we need to deal with. Is there any provision of those services here?

**Ms Angus:** Not here, no. We are just basically an activities-based centre. If anyone does have an issue or comes to me then I will look at my directory and pass them over, yes.

**Mr O'CONNOR:** Do you think there is benefit in places like this delivering some of the support services the committee is looking into? We see that with men's sheds. Men's sheds are funded through mental health funding from the federal government. It is a way for older men, who are a notoriously difficult cohort, to get talking about their problems. That is a way they can engage with each other and raise some of these issues. Do you think places like this could be a really important place to deliver some of those services instead of just having a hotline they call or a brochure they read? Could this be that place where you get those interactions?

**Ms Angus:** I would like to say yes, but just from past experience when people come to deliver information—even defibrillator training or whatever we put on—it is really hard to get people to come along.

**Mr O'CONNOR:** Or a parliamentary committee hearing.

**Ms Angus:** Exactly. As I said, of those 60 people I see not one who turned up today.

**Mr O'CONNOR:** You sent it out to all 600 of your members as well.

**Ms Angus:** Yes. I stood here with a microphone telling everyone, 'Come along! There's tea, coffee, biscuits.'

**CHAIR:** It is hard to compete with canasta.

**Ms Angus:** Yes, that is right. Another challenge is getting people to come along to listen and learn. I find it is a big challenge.

**Mr O'CONNOR:** That goes back to the stigma and pride that a lot of these people have; is that part of it?

**Ms Angus:** I think that is part of it. If they do not feel it is affecting them, 'I'm not going to that. I don't need to know about defibrillator training or elder abuse.' I suppose they do not think it happens to them or affects them.

**Mr O'CONNOR:** What would be the most effective way to deliver the information or raise awareness?

**Ms Angus:** I really do not know. I really wish I had an answer to that, but I do not.

**Ms BOURNE:** More than anything, Melissa, you should be congratulated for the work you are doing. There are organisations like this around Queensland. At this time they may be saying it has nothing to do with them, but you are sharing elder abuse information with them and planting the seed and that is so important. Well done you for raising that with our senior citizens.

**STREET, Ms Leigh, Gold Coast Community Legal Centre**

**Ms Street:** I have not prepared anything for today because I did not intend to speak. I am with the Gold Coast Community Legal Centre. We are based in Southport but our catchment area is the whole of the Gold Coast. As Tommo said before, she refers a lot of clients to us in the elder abuse area and we receive a lot of calls from people in these situations who may or may not realise that is what they are experiencing. I am a local resident. We have quite a large older population in this area. A lot of people retire here so we do have a lot of older people.

Listening to other speakers today, I think the biggest thing I have seen in my 3½ years in community legal is that there are barriers that are very difficult for people to get past. A lot of that is shame and stigma. It is extremely difficult for people to admit this is happening to them. Whether it be adult children treating them unfairly—I think that is probably more of what I have heard. I know there is a lot more of the domestic violence side of things and there is sexual abuse as well. What we generally hear from people is that it is more the financial side. A lot of that comes to us. We are more of an advice-based service. I do not think there is anything really there which carries this all the way through for people when they do report it. I have heard people say things like, 'I'm just a silly old lady. I can't believe this has happened to us.' Some of the things that we hear from people include where an adult child has moved back into the home and taken over. The elderly include not only people with physical or mental disabilities but also people who are just retirees.

I also think there are a lot of barriers in our world. Because of the way technology has moved it is very hard for older people to keep up with how things are in our society now. It is difficult to report, to come forward and say, 'This is not right.' There are lots of situations where agreements were not put in place at the right time, money has been loaned and not paid back and then people do not have the finances to fight that legally. From listening to everybody today, it comes down to encouraging people to know this is happening not only to them but to other people as well, taking away that shame and stigma of saying, 'I might have got something wrong'. Abuse is never about getting something wrong; it is about things being done to you that are not correct.

I think we definitely see in the older generation that they are more reluctant to say that there is a problem and that someone has not treated them well. As Tommo said in her address, a lot of the people we speak to who are older find it very difficult to accept that what they are experiencing is abuse. Even when you broach that with them and you suggest that that might be something that is happening for them, they say, 'Oh, no, no, no. It's not like that,' or 'I don't want to take it further,' or 'I don't want to make a fuss,' or 'I don't want to make my life harder,' or 'I don't want to lose access to my grandchildren.' There is a real fear in those people about reporting this.

That is something where I do not have the answers. I do not know how we make that more accessible. I think, for us, we do the best we can with the resources we have, but it is out there and I really do believe that we are only hearing the tip of the iceberg. I do not think people are coming to us at the start of these problems. I think they are coming when they have no money left and they cannot afford to live anymore rather than when it starts to be siphoned or, 'Put all your money into this house that we will buy and we will build you a granny flat,' and the granny flat never gets built, and you have yet another person who is over 65 and homeless. These are things that we are seeing, and it is not once a year and not once a month; it is once a week, once a day, twice a day. It is prevalent in our community, more so than a lot of people realise.

That is really all I wanted to add for today. I do not have the answers. I do not have stats. I do not have things to talk about. Listening to what everyone has said today and the really valuable contributions that have come, this is what we are seeing in Community Legal.

**Ms McMILLAN:** Leigh, thank you. I wondered about your insights about the cause. Is it the cost of living? Is there an element of gambling? Is there an element of drug use? Is it isolation by children's wives or husbands? Could you give us a little bit of an insight into the root cause?

**Ms Street:** Of course. I would say all of the above in different situations. I think there are many people who have adult children who have mental health issues and drug use issues. Cost of living is definitely coming into play increasingly. As I am sure we are all aware, there are pressures through the cost of living at the moment. However, I think it is everything; I think it is all sorts of reasons. In the community legal centre, we do work fairly heavily in the domestic violence space anyway, so we see a lot of that. We see a lot of issues with families along those areas, but I think there is not one root cause of this. It is a lot of parents trying to help out children who are struggling for all sorts of reasons, and it goes wrong. From a financial side, I would think that is probably the pathway to it.



Whether that starts off as someone thinking they will take advantage of a parent—I do not know that that is the case. I think it develops over time. I like to hope that few people set out to do the wrong thing, but circumstances change along the way.

**Ms McMILLAN:** Do you think it starts with minor interference or intervention by the children and then they get away with it and then it is a little bit more and a little bit more?

**Ms Street:** Very possibly. Yes, I do hear those stories when I speak to people, that it started as one thing and became something different. I think as people age—again, we have talked of powers of attorney and things like that—it is elder abuse, but it is not exactly the same. For those people, we tend to find it is a relative who would be calling us first for the younger, fitter, still-at-home retirees that we speak to. It is now more often the victim who is ringing. It is incredibly difficult to listen to a grown man cry about something like that. It is so hard for people to admit that that is happening to them. I think it would be a really great move if we could have that awareness that they are not alone and that this is happening in our society. There is that shame and that stigma and that difficulty speaking about it. If you go to the shops and you buy something and you are charged twice what you were wanting to pay, you are the first one there going, 'Hey, look at my receipt,' but when it is your family and it is the people that you love and that you trust in your life, it is not as easy as that, and it is very hard to admit that it has gone wrong.

**Ms McMILLAN:** Thank you for all you do, Leigh.

**Ms Street:** No problem at all.

**Mr O'CONNOR:** Are you finding that it is primarily financially or property driven? Is it a lot about the kids trying to get access to those things?

**Ms Street:** It is a little bit of everything. It is a little bit of sharing of money where maybe agreements were not written up at the start, and one party says it is a loan and the other party says it was a gift. There are a lot of grey areas.

**Mr O'CONNOR:** They come to you to try to get a framework around it?

**Ms Street:** Quite often that does not seem to come into play until parents are perhaps retired and they no longer have their own income stream and they would quite like to have the money back because they cannot live in their retirement. There are issues with parents trying to help out the younger generation with housing and things like that and then not getting a return on that, or people will not leave. I do not think there is one root cause. I think it is circumstances. I think families try to help each other. Possibly it would be different if I were to speak to one of you and say, 'Right, we will come up with this idea where we will share our wealth and we will do this.' We would have agreements drawn up whereas I think in families that happens far less often, and that is part of the problem.

**CHAIR:** Members, I am very conscious of the time and the fact that we have a—

**Ms Street:** Yes, I am sorry.

**CHAIR:** No, Ms Street, not at all. I really appreciated your willingness to speak and share. Did you have a final question?

**Mr KRAUSE:** Thank you for your submission. It is very interesting. You mentioned how there is a lot of stigma and shame about acknowledging that elder abuse has happened. Then you have also spoken about some legal matters, about property and lending of money and things like that. Apart from there being a lack of awareness and willingness to admit that something has gone wrong, do you think there is also a lack of access to services like yours to try to help with that sort of thing, even if there was the willingness to come forward?

**Ms Street:** I think, yes, that is the case. Part of my role at the community legal centre is to try to get us out there into the community again and start speaking to people, to try to reach those more vulnerable clients and people who have those vulnerabilities who may not have known that help might be available. We are an advice-based centre. We cannot necessarily represent people all the way through a matter, but we can definitely help them to find pathways to getting help and to understanding that there is a problem. I definitely think in the elder abuse area technology is a massive barrier. We can have our websites, our call-back requests and all of those things, but are we reaching those people? I do not know that we are. I am still having people walk into our centre on a regular basis whose phones are not working because 3G has been turned off and they do not have a 4G phone. That is not an uncommon occurrence on the Gold Coast. Once they are not at work and they are not needing that technology, a lot of older people are not necessarily keeping up. Those are barriers that are definitely out there.

**Mr KRAUSE:** We are talking about a fairly specific class of people here in terms of family relationships.

**Ms Street:** Yes.

**Mr KRAUSE:** Do you think there might be some space to make legal arrangements between these parties simpler to enter into, through some sort of legislative intervention, so that there are protections put in place when money changes hands between parties?

**Ms Street:** Possibly. Very possibly.

**Mr KRAUSE:** Rather than having to go through a usual mortgage or loan process?

**Ms Street:** Very possibly. I am not a solicitor myself, but I do think that having pathways to be able to record those transactions would be hugely helpful, as perhaps would be registers of EPIs and registers of wills and up-to-date wills.

**Mr KRAUSE:** I was going to ask you about that, but I have run out of time.

**CHAIR:** That is right. I appreciate very much, Mr Krause, your recognition of that. Ladies and gentlemen, I do want to take the opportunity to thank you all for your time today. I think what we have clearly identified is that knowledge is power, and unfortunately those who probably needed to hear not only the experiences shared but also the resources available in this community are sadly the ones who are not in the room. Part of the learnings that we are taking from today is obviously around the awareness and raising of education in the community, the consequences of the digital divide but also an understanding and acceptance that the domestic violence language and terminology needs to be reflected back into the communities of which we see. Thank you for taking the time. Thank you to the Hansard team as well as the committee secretary and assistant secretary. That officially concludes this public hearing. I declare this hearing closed. Thank you.

**The committee adjourned at 11.10 am.**