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SICMAA REG No. A14201F

Springvale Indochinese Mutual Assistance Association Inc

9 HILLCREST GROVE, SPRINGVALE, VICTORIA 3171, AUSTRALIA.

Monday February 9, 2004



Committee Secretary Standing Committee on Ageing House of Representatives

Dear Committee,

I would like to bring the Committee's attention, a number of issues regarding the aged care situations and aged care needs in the communities that we serve.

Perhaps, I would like to give you an example of SICMAA Vice-President's mother as a means of introduction. A few months ago, our Vice President buried his 82 year-old mother after a number of years of frail health at home. Despite the fact that he was the owner of more than 6 houses and units and a wealthy business man, Mr. Chuong could not find a culturally appropriate nursing home in the South-Eastern region of Melbourne to care for his Vietnamese speaking mother. The situation of Mr.Chuong is not unique to his family. Currently, there is no ethno-specific nursing homes or hostels for the Indo-Chinese communities in the South-Eastern Melbourne, the mainstream hostels/nursing homes are not up to scratch (in our assessment of their standards/service for CALD (Indo-Chinese) clients). There is not just an issue of affordability; it is also an issue of cultural appropriateness. The City of Greater Dandenong has the largest number of Indo-Chinese elderly people in Melbourne and yet there is nothing in terms of infra-structure or culturally appropriate services at the low/high care residential level for them.

SICMAA, out of desperation, has initiated a formal discussion and forming partnership with the Primelife Corp. to see whether it could be possible to set up residential care programs or services specifically managed by community groups such as us in conjunction with an expert like Primelife to meet the needs of the Indo-Chinese community in Victoria and Greater Dandenong. At this stage, a steering committee was set up and meets regularly with a view to complete a feasibility study document and then submissions are made to relevant governments/authorities for land, licenses and funding etc...

In our opinion, the time of totally community set-up residential care facilities for NESB elderly is over due to the cost and the availability of land and the ability of government's financial assistance. What might be a new way to go is to form partnerships between private companies and CALD Not-for Profit community welfare providers to meet specific cultural and linguistic need of specific community's elderly group.

We would recommend the Committee to consider this model and investigate it further. We are more than happy to meet and explain further this initiative of ours to the committee. Sorry for doing our submission on this format. We hope it would be useful to the Committee's deliberation and recommendations.

Thank you for accepting and considering it.

Yours sincerely,

Springvale Indo-Chinese Mutual Assistance Association (SICMAA)

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