## Supplementary Submission Productivity Commission Inquiry Disability Discrimination Act

With the advent of the Hilmer Report, the governments of the day adopted the User Pays Policy and totally or partially privatised the nation's traditional public utilities, and later, introduced the Goods & Services Tax on most produced goods and services, many of which were formally those of the public utilities.

With the advent of the government's decision to 'keep the old people in, their own homes longer' and provide inhome assistance/services towards this end. This has resulted in a new set of life events emerging, not all of which, if these services are available or adequate, are beneficial to the recipients.

The long term effect of these measures have had a profound effect upon those people of the population who can least afford extra living/survival costs. They being, the aged, frail aged, including their ageing spouses/partners, profoundly disabled and disabled of all ages, and the permanent (primary) non-paid 'informal' carers i.e. spouse, mothers - only rarely fathers, other siblings.

Service providers/bureaucrats (secondary) 'formal carers' is a misnomer term as these paid employees are part-time, sessional, casual and have the safety net protections of OH&S workplace standards and conditions. These paid employees do not have to bear the brunt of an endless year in, year out, live-in 24 hour daily situation, emotional long term fatigue and stress and heavy physical loads.

Ageing statistics regard to the population of Inverell's aged is listed in the main submission. Higher than state averages. It has come to my, attention that these aged and frail aged, and especially the over 90 year olds, still at home and alone, can no longer make ends meet. Some are paying out as much as \$35 PER WEEK for hire of 'living aids', e.g. walking frames, bath chairs, sticks, chairs etc. Few can afford outright purchase. Home modifications funding has disappeared in the main, so the cost of ramps, rail etc is another burden, as is basic yard maintenance. It is now impossible for these isolated and lonely people to pay the Council rates and charges, - about \$1,000 per annum; home and contents, worker and public risk insurances, conservately \$800; Homecare visit charges, meals on wheels; phone including banking charges, medical prescriptions, podiatry, taxi fares to doctors surgeries and the remote Inverell Hospital Community Health Services.

Plus the HAAC charges for travel to Armidale \$40 per trip, especially if required on a regular basis to access specialists which are no longer available at Inverell - refer main submission for more exact details on transport aspects. None can afford home maintenance such as painting, and plumbing repairs, replacement fencing.

What is even more traumatic these people is the fact that are prisoners in their own home, sentenced to a life of solitary confinement. Their loneliness is torture. Service provider workers cannot spend time 'chatting' nor can the meal-on-wheels delivery volunteers.

Most have no family in the immediate locality. Their own friends, like themselves, no longer able to get out and about to visit each other or join in other previously mutual social activities, even if they had a few dollars to spare to do so.

This is disability discrimination at its worst, compounded by the fact that they remain behind locked doors and windows for their own safety as society-at-large can no longer contain the criminal element, especially juveniles, not to invade, trespass, break enter and steal from these aged people, as well as causing expensive structural damage.

The Justice System has failed. Reverse discrimination is most profound and noticeable in rural communities. Police are powerless to act on any juvenile under 12 years of age. A state of worsening anarchy already exists.

The purchasing cost of living aids is beyond the financial scope of the people. NEAHS at Inverell Hospital charges more for a set of crutches than do the retail outlet at Armidale. It also requires pre-payment in. full before the patient leaves the hospital.

Several months ago, the hospital had a cleanout and actually disposed of ancillary equipment including crutches (used to loaned/hired temporarily) by ordering them to be sent to the local rubbish depot. Luckily, someone with a bit more nouse, commandeered them and saw to it that St. Vincent's De Paul received them, to be put to good community use through this organisation. Commonsense prevailed unofficially.

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