

TRANSCRIPT

FAMILY AND COMMUNITY DEVELOPMENT COMMITTEE

Inquiry into the adequacy and future directions of public housing in Victoria

Melbourne — 11 February 2010

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Ms E. Emery, Co-chair, and

Sr S. Bradley, Residents Group 3081; and

Dr L. Curran, Director, West Heidelberg Legal Community Service.

The CHAIR — Good afternoon. Welcome to the public hearing. This is not a government inquiry; this is a parliamentary inquiry. All evidence taken at this hearing is protected by parliamentary privilege as provided in the Constitution Act 1975 and further subject to the provisions of the Parliamentary Committees Act 2003, the Defamation Act 2005 and, where applicable, the provisions of reciprocal legislation in other states and territories. Any comments you make outside the hearing will not be afforded such privilege. We are recording the proceedings, and you will be sent a copy of the transcript. You will be able to make minor adjustments to it if necessary. This session will be about 45 minutes. If possible, please restrict your opening remarks to about 25 minutes so that it can be followed by questions from the panel. Before you make your verbal presentation, please introduce yourselves so it can go into the Hansard transcript, with your terms of reference.

Ms EMERY — Good afternoon, I am the co-chair of Residents Group 3081. We are an advocacy group of and for the residents of the 3081 postcode. We started off two years ago as part of neighbourhood renewal, but we are now an independent group. We have at least 20 people who attend our fortnightly meetings. We would like to acknowledge Dr Liz Curran, the director of West Heidelberg Legal Community Service, who is here to support us. It has also submitted its own report. I would also like to welcome members of our Residents Group 3081 and in particular our chairperson, Maxine. I will now introduce you to Sally.

Sr BRADLEY — Thank you. I will also be presenting the report with Eulie. My name is Sally Bradley. I am a Catholic Sister of Mercy. I have been living among and working with the West Heidelberg community for 12 years as part of a live-in community known as the Exodus Community. We have an outreach to over 500 families in the West Heidelberg area. In many of my conversations with residents of West Heidelberg, so many times their struggles come back to public housing.

In our submission today we will follow the terms of reference, share some powerful stories and refer you to the photos and recommendations in our report. We have handed around the photos as an appendix.

In writing this report we held three focus groups over December and January and spoke to over 30 people. Eulie will begin with the first section.

Ms EMERY — I refer you to a story of a young single mother in the submission that we provided. I will just read a paragraph from page 2:

Yeah, I'm number 3 and I've experienced a waiting list of about one and half years but currently last year I was left homeless and living in a caravan for about six months and not knowing where I was going to be next with two children, so it was very hard.

I am talking about waiting lists in this section. I am sorry, I have just jumped straight into that. I will share another story with you.

This is from a Somalian mother:

We live in flat house with a family. I have four children and the oldest one is eight years old and a seven-year-old and two years and four-month old baby. We actually overcrowded, three kids unfortunately sleep in one room together and we live in an upstairs flat So it's a bit hard when you have children. The flat is for single it's not for family. They give us when we are single people. The waiting list we have in that area is a bit hard. They say maybe next five years you're going to be there.

...

Yes, the next five years that's what they told me. I can't see myself in the next even few months but they want five years because I have four kids. The carport is too far from the house. Every time someone is stealing your shopping when you go upstairs because you have to bring the two kids up together, you have to hold them with your hands because I'm living upstairs. Someone stealing your pusher, your shopping bag, your clothes, and you can't leave nothing. The next five years I don't see it. We pay our rent and we are good tenants and we're very clean people but we're not getting the support we need. I got my condition, because my kids have eczema very bad, three of them, and two of them have very bad asthma and the condition we live in is not acceptable for young kids going to school, they're doing their homework and doing everything and there's not enough space.

I will just read another excerpt on waiting lists:

About myself ... I come from a different country and I hope that Australia is a different country ... Australia is a more modern country. Australia can provide everything for us and easy, different about my country.

...

I'm still in private ... yes, and I went to a social worker and he said to me 'if you will be homeless we can provide you one room'. Homeless, me and my son. He is nine years old and I try different place. I went to federal MP ...

...

All the time, I ring for Preston office ... just I take longer time to anyone answer me and every time take time. Maybe just the telephone ring, ring, ring for nothing and after that you're waiting again, more than half an hour to anyone answer me. Until now from 2008 but from then ... more than seven years I got my list ... waiting list and one from the office said to me 'maybe public housing take more than 15 years'. Fifteen years take public housing ... how I afford a private rent and now private renting increase every year and no real estate gave you extension or give you excuse of anything.

With this particular story the person who joined the focus group was not clear, so our interviewer just made a couple of clarifying points, and this is what was said:

... Can I just clarify a couple of points in what you're saying? You're talking about the very serious concern in many houses, including the house you were living in ... and then you were also telling us the story that when the minister came to the public meeting and you had a chance to get up and speak your story, you were within three days offered a ...

... A house.

... Were you offered one or two houses?

... Two.

... Two houses?

... I was offered two.

... Can you tell us where they were? Just locality, not the streets.

... Well, Preston.

... Preston? Both were in Preston?

... Yes.

... And you chose to take one of those houses, so you now have been relocated?

... Yes.

... This is since November last year? So things actually did move for you?

... Yes.

... So it's a success story.

... As soon as I fronted the Minister of Housing, eye to eye, where he could not lie, he could not ignore me.

The interviewer asks again:

... And that house ... can I also clarify what you said? That house was going to be condemned and you were still paying rent on it? Is that right?

... The house was already condemned. The house was already sold, full of asbestos. I was still paying rent. The Minister of Housing, he could not answer the question of why I was still paying rent on a condemned house ... So what do they have to do? They have to move me ASAP ...

Now I will hand over to Sally.

Sr BRADLEY — Thank you. I will just speak about some of the impact on families of waiting. This is the impact on a Somalian family. They say:

The health issues are going a bit harder. We're having a problem, maybe a family crisis, because every time you have a headache you're going after the kids and the husband, and it's a bit hard. The family, the community, is growing more single mothers because the family are breaking up, breaking up, so it's not good for us.

This lady came to a meeting on crutches, and she told us:

... I live in a double-storey house and have been there for just over 10 years. I done my leg eight and a half years ago. Been on the medical priority list since then, have been offered three houses that were unsuitable for me, which they then took me off the medical priority list. I had to fight them to get back on the medical priority list, and they then put me to the bottom of the list. I shower in my kitchen sink. I sleep down on my couch. I cannot get up my stairs.

And she finishes by saying:

It's just bullshit.

This is also a Somalian mother, who says:

They said, go Victoria for health, but we don't have a healthy kids. Kids cannot ride their bikes, they don't have a backyard. They don't eat much fruit because they not using enough energy because they all day sit in the house, so they not eating the veggie and the fruit as much as we want it. There's no healthy activity in the area, because we don't have our own backyard. We have a bicycle, they have a big bicycle. 'You can't take it out, it's a bit hard for you'. 'Mum, can I have my bike?'. 'No, because you can't pick up the whole bike and take it downstairs all day long. If you left it a few seconds, someone will take away from you'.

And another, particularly about the impact of waiting:

... I've also had periods of homelessness, recurring homelessness, and prison and also addiction. Although that was a long time ago, the different periods of waiting time just to get a one-bedroom unit, I had to be homeless for nearly two years, and that was five years ago. Prior to that I'd waited four years on a seg. one, three years on a seg. one, and now that I've got a one-bedroom roof over my head, I now have a child and a carer, and my carer's son is in the custody of someone under Department of Human Services because our home is overcrowded.

We've been approved for a transfer. We chose the shortest possible waiting list, which is in Gippsland, just so we could get out. The last person I spoke to was ... they can do nothing. We've had mould treatments through our house. We've got doctors' certificates from here. My daughter was admitted to hospital two days before Christmas with asthma; she's seven months old. My carer now has asthma and never has had asthma before in his life, and I was hospitalised over six times while I was pregnant with asthma.

Ms EMERY — Now I would like to talk about adequacy and quality, and yet again I will be reading a few examples from the submission. This is the first example I have:

... My complaint is regarding repairs that the maintenance is supposed to be doing, and it's taken them a long time. They put me on a waiting list to do an inspection of what maintenance actually did, and they didn't come out to inspect it. So basically water was leaking from the bathroom onto the wiring, and it's shorting out all the wiring and the switches. The main switches would go off.

I would like at this point to refer you to page 15 of our appendix, which shows a photo of exposed wires, which is what this person is referring to below:

... the electrician left exposed wires coming out from the roof and just left it like that, and that was it. And so they said, 'Yes, we're going to go and have a look at that'. And also there's cracks on the walls; they said that they'd fix those. The toilet is actually falling away from the house. The toilet is actually broken and so is the stove, and maintenance told me that I'm not going to get another stove, so that was it, and they're not going to repair the stove that I've got.

This is example 2:

I live in a two-bedroom flat. I've got a son who's seven and a daughter who's two, and they both share a room, which for a start isn't right. The house is falling down. I've been to consumer affairs about it, court, and they had 60 days ... Housing had 60 days to come out and fix everything up, and they didn't come out and ... yes.

...

They put a bit of plywood over a hole that you can see outside in the kid's room. The kids can't even sleep in their room. They have got to sleep in my room.

With that story there was a person who was also at that focus group and could verify that person's story:

I've actually been in number seven's place with my partner and we've seen the whole roof section of where the child is meant to sleep, coming down, so if you actually put a child in there, the child wouldn't survive ... I've seen through the cracks of the walls; it is at least 2½ inches wide.

Example 3:

I live next door to her and the brickwork actually fall out underneath the windows, so when it rains, the water goes back into her place anyhow, but they don't come out to refix them; they try and just have a bit mortar on it and push it back in. You can't do that with this house ... the ground is so dry that when the water does come, the foundation just keeps pulling the top flat and the bottom flat apart and it's going around the whole lot ... There's bricks that are going to fall down and crack someone on the head, even just a normal person walking in to see another person, bang, you get a brick on the head. Who's going to pay that person's medical bill?

...

I rang up about getting some new blinds because I have mould on my blinds. They told just to wipe it off. I have wiped the walls that many times that it's just ridiculous ...

Sr BRADLEY — This is regarding safety. This woman says:

I have aluminium stairs. They get slippery when they're wet. I've asked them to come out and fix it. They still haven't done it.

The interviewer says:

So these are an outside staircase?

... Yes, outside.

The interviewer says:

So it's not safe?

The person says:

No, that's not safe for my children. I had a caesarean with my four-and-a-half-year-old. They still didn't come out and fix it. I had to climb up and down the stairs by myself. The list goes on. The list goes on and on. I've got cracks in my walls now.

The second example with safety:

We have very bad issues with the safety because some of the neighbours is very bad people, they use a drug and they will chase you. When you're doing your line up the clothes outside sometimes they chase the kids when they playing outside. Also we notice in the last few weeks we have a neighbour they stand in the rubbish bin and they try to climb up to come in the upstairs window.

...

Yes, break in to you, they stealing the shoes, sometimes they throw at you something, very bad ... It's not safe to live because they use also use a drug. The injections are everywhere, you have to clean up before you go outside. So the safety is not actually, they open your car, the boot they took all the shopping away from you.

The third example for safety:

I've got four children: the first, seven, and four, two and three months. Actually I've got worse, because I've got the community laundry outside.

...

I live in two-bedroom house, I have four children, 10 years old, the youngest one is 3 ... The safety of the children. I live upstairs. My oldest one nearly did fell off when she was two years old out of the windows and I really grab her and I asked the housing to put something on my windows, they never put it. Secondly, my last one is now three years. When he was nearly one and a half ... he was nearly to fell off of the window. My daughter was downstairs and she called me down saying, 'Mum, he's falling, he's falling'. I grabbed his legs and I told the housing to put something on the windows. They never put.

...

It was nearly one and half years ago. So I do myself, I took the drill and put nets on the windows. It's 10 years I live there but we didn't have children at that time and it's upstairs. I'm single now but I have children.

Ms EMERY — The last section we would like to talk about is special needs. The first example I have is that this person says:

I just want any house that just ain't got stairs in it which I can get out of bed and go to the toilet instead of falling down the stairs and all that, with the weight that I put on, because get trapped regularly and that can be a build-up of going up and down stairs. I've got to leave my house to have a shower. I can't shower in my own home.

Just a brief background. This lady has health issues. She is living in a place that has stairs and she is looking for a house accommodation because of her condition and that is what that statement is referring to.

I have another example. I must say that this one is of great interest to me because it is actually something that I am going through at the moment, so I would just like to share what I need to share:

I've had issues with wanting air conditioning because of my medical condition. When I first was approved by the ministry I said I have a medical condition, I had doctors' reports. They said, 'Well, the only way you can get one is to purchase one and then get someone to install it', and so I just virtually gave up because I thought, well, I can't afford one, I can't afford a tradie to put one in. I then thought, no, after last year's heatwave and even the heatwave that we've had recently, I re-pursued it and they said 'Well, you

need a specialist's report'. I have a medical condition, but it does not require me to have a specialist to write a report. My logic, my thinking, is I was first told I had to purchase one; that's going to cost about \$400 or \$500 for a decent one. To then employ a tradie would cost another \$400 or \$500 to install it. Then to have to get a specialist report is another \$200 that I would have to pay for out of my pocket, which is money that I don't have for any of those things. So my argument is: if I can afford to buy one, install it with a tradie or get a specialist's report, why am I in public housing?

The CHAIR — Thank you. Is it all right to follow with questions now?

Ms EMERY — Yes.

Mrs POWELL — You have told us about some issues that have happened because of the focus group, so obviously those people felt very comfortable talking to you. Are you aware if there is somewhere for those people to go to give those complaints, and what happens to those complaints? I notice you said that the minister did do some work finding somebody a home, so obviously the best thing is to have an agency that people can go to and be told, if it cannot be fixed then, when it can be fixed. Are you aware of somewhere those people, instead of having a focus group and talking to you, can go to in a formal sense?

Ms EMERY — No, we are not aware of any group, but we are the Residents Group 3081 and people come and share their stories, but as an outside independent group we are not any such —

Dr CURRAN — Can I indicate something on this? We recently used to have a north-east housing worker who used to work, I think, one day a week at the Banyule Community Health Service. There has been a decision to regionalise those services back to Preston and, as we say in the Banyule Community Health Service and the West Heidelberg Community Legal Service submission, that is going to make it even more difficult. It is a complex system; it is difficult to navigate. As the residents have highlighted, there are multiple stories of trying to get maintenance done and a low response rate, and when it does happen, there is inadequate work or people saying they cannot do that bit or this bit. Most of the community tends to just give up. So there is already a problem that has been established and to regionalise it rather than have a local community capacity to respond to community concerns is quite problematic.

Public transport in the West Heidelberg area is very poor and it is often extremely difficult for people to leave West Heidelberg because of disabilities and a whole range of multiple and complex needs. Because of the tightly targeted and segmented waiting lists, the current people in public housing are the most needy people in our community on very low incomes. Rather than expecting them to do the hard work, we would argue that it is better if it is done by the people in the Office of Housing and the housing networks who are actually in the community and physically seeing the living conditions people have, rather than making it even more difficult.

The meeting with the minister on 18 November brought together approximately 80 residents at least. It was organised through neighbourhood renewal and Banyule City Council — it was at the health service — and through our support as well. At that meeting an individual literally confronted the minister and told that story. There were more issues around it involving asbestos and so forth, which is why the house was condemned. He was living there with two children in those conditions, waiting and pestering to be moved, and all of a sudden two houses were found for him. As you know, Preston has one of the significant waiting lists and has the highest transfer list in all of Victoria.

That was a solution that was found in one case because the minister was quite confronted by the story, and even the Office of Housing admitted in front of the minister that the story was correct. But it reflects the fact that there are many more stories out there, as you have heard today, and there needs to be a better response rate. It is about the Office of Housing, as one resident said, getting out of their air-conditioned offices and actually going and seeing the living conditions people have to live in and maybe looking at maintenance in a more holistic way rather than in this piecemeal way; looking at the fact that they subcontract out and it is difficult to monitor what is happening; within the Office of Housing developing some new systems about how to respond to complaints; putting some onus on the department and the housing officers rather than what is currently the case with all of the expectations being placed back on the individuals in society who, as I said earlier, would not be in public housing but for their need and they probably do not have the resilience and often the capacity to navigate an already complicated system.

The CHAIR — How much communication does your group have with their local member of Parliament when you have issues with DHS or other bodies?

Sr BRADLEY — People often go to Craig Langdon — very little happens.

The CHAIR — That would be the correct channel — to go to the minister.

Sr BRADLEY — That is what people will say. We go and nothing happens; it does not go anywhere. I just wanted to say in regard to these 30 stories, we did not know all of these people. They just came because they saw advertisements around the health centre, so it is not as if we knew them all, and there would be hundreds more stories like these.

Mr NOONAN — Could I, firstly, congratulate you on your submission and being here today; I know it is not an easy task. You have not only presented very well and made a very practical submission, but to those you represent today and who are not here, can you please pass on our thanks for the work you have done.

I was interested in the neighbourhood renewal that you have referred to, but working through your submission I have not spotted a lot about that. Are you able to tell us where that is at and what that will mean in a practical sense? I am not sure if you are in the middle of the neighbourhood renewal program — you sound like you are — but could you just tell us what you think the benefits or the deficiencies of that program might be and how engaged the residents are in the neighbourhood renewal program.

Sr BRADLEY — We have both been quite involved. Up to a point it is good. We have another four years; we were told we were only going to get another two, so it is the full eight years now. Quite a lot of people have been engaged and that was how we started the residents group. One of the best things it does is bring people together from agencies, from local people, from all the advocacy groups around West Heidelberg at the health centre. It is very hard to keep a group resident driven and it is supposed to be 50 per cent resident driven. One of my disappointments is that we keep losing good workers. They often do not stay much longer than 12 months, so I have questions around that. I think it is a very difficult job.

Mr NOONAN — What does that mean — 50 per cent driven by residents?

Sr BRADLEY — Every committee is supposed to be 50 per cent driven by the residents, participants, along with agencies, and along with the Neighbourhood Renewal workers. For it to really empower the local people, there should be 50 per cent on any committee. The steering committee, which I sometimes go to, Eulie is involved in it, to a point does that, but budgets do not get tabled so local people do not really have a say over where the money is allocated, I do not believe. Eulie might want to add something.

Ms EMERY — I think you have said it perfectly, Sally.

Mr NOONAN — For the benefit of the committee, I am trying to get a better sense of what outcomes are expected from — did you say eight years — an eight-year program?

Ms EMERY — Basically Neighbourhood Renewal has come to make West Heidelberg a better place, or get community involvement, and it is doing that. Hopefully, groups like Residents Group 3081 — and I am involved in another group called MILEAGE that tackles the stigma of mental health issues around West Heidelberg — are just there to make the community a better place; when that program has finished in another four years time West Heidelberg will be flourishing again. It will have a better reputation.

Mr NOONAN — It will be a better place to live?

Ms EMERY — Yes, it will be a better place to live.

Mrs SHARDEY — Thank you for your presentation today. Obviously there are some very complex problems that you are trying to deal with. There was mention in our hearings yesterday of the Social Housing Advocacy and Support Program — I think it is called SHASP — and I understand this program is to give support to residents and help make representations, and so forth. Have you had any dealings with this program, do you know about it, is it something that you are aware of?

Sr BRADLEY — No, I am not. I have not heard of that in our area.

Mrs SHARDEY — Perhaps it is something that you can contact the Office of Housing and ask about.

Sr BRADLEY — The frustration of so many groups who try to work for housing, such as Liz mentioned, North East Housing Service, is that they have not got the stock. That is the bottom line.

Mrs SHARDEY — That is a message that is coming through very clearly to us.

Sr BRADLEY — There are about 3000 people waiting for housing across just our area, on the website.

Ms CURRAN — I just mention that it is very hard for the housing agencies as well because that issue is that they have got people waiting out the door, they have got no housing, they know that they probably have to push people out of housing, who are at risk of being homeless, to get in people who are homeless, so it replicates that cycle.

As you quite rightly said, it gets back to not having enough stock; and you can imagine on a daily basis, people with high needs who get to the point where they are upset, they are angry, and then a housing worker has nothing for them. We all have some empathy with the housing workers because it is very disempowering for them, but at the end of the day it means that we really need to, as a society — not just government, it is everybody — prioritise the urgency of building more public housing stock.

I heard the St Vincent de Paul submission before this, and I know there are initiatives around co-housing, social housing, but at the end of the day we need to also invest in public housing because that is for the most needy and these are people who cannot afford market rent. We need an overall strategic vision coming from the commonwealth and states.

We can tinker around the edges with the terms of reference but at the end of the day a lot of problems that your terms of reference, and the responses to those indicate, all stem from the fact that there is insufficient housing stock for a high need. We know we have 1700 people moving to Melbourne a week, we need to take this seriously as a society.

The issue about treatment of people — that is another issue that we have not really touched on — that all stems from a lack of training, a lack of engagement of some of the services with the locals and the fact that the locals have so much difficulty understanding who's who in the zoo, and where they need to go to for help. There is no proper independent complaints mechanism.

There needs to be some independent mechanism, and we have suggested some sort of inspectorate in our submission, and I think it comes up in the residents' one in a different format. There needs to be some sort of oversight, because there is no accountability in the system and people just get fobbed off. They ring, they cannot even get a name out of the person on the phone. They are told to ring another number and it is the wrong number. These are people without enough money to sustain a phone bill.

Mrs SHARDEY — Often that is when they come to us and we try to assist.

Sr BRADLEY — Yes, they go to their local MPs, and their local MPs struggle because there is not enough housing, there are waiting lists and so on. Unless we actually work together to perhaps get a national response, it is going to be very difficult, but in the interim there is lots that could be done, as we indicate in both of our submissions, to rectify the problems in the interim.

Mr SCHEFFER — As you would know, there is a massive national response at the moment under the stimulus package and also the considerable dollars — \$500 million — that the state government has put in, in the last budget, and having said that, just to qualify that remark, thank you very much for your submission, it was very powerful what you shared with us.

What I would like to ask you is: the process that you are developing is a very strong one, it seems to me from reading the material and listening to you today, how are you processing that forward? To come to this committee is extremely important, and we value that, but are you planning to put that out in some other way? How are you going to work that through?

Sr BRADLEY — I was anxious when some of these people came, were so vulnerable, and told their story. I wondered whether now they just felt left, but the comments at the end of each group — and Eulie was with me

at the three — was that we feel empowered, we feel like there is some sense of solidarity because we are not on our own. Many people feel isolated.

As a result we had our first residents' group meeting last week, and two of the women who came and gave us their stories, came to that. They know that group is now meeting fortnightly and it is a support group as well. And we will certainly be putting out some information about how this went to today.

Mr SCHEFFER — Those issues that you raised about the maintenance standards are a very powerful document and what I thought was particularly moving was the issue you talked about, of telephone responses and people down the other end of the phone not being empowered to give an answer when an answer is needed, that it needs to be referred back. We all experience that to some extent. Clearly there are very strong stress points there about those things, and also the all-important issue of safety. Will you be parcelling those up and making them into an information package that can go out to other groups that can make a difference?

Ms CURRAN — Can I just comment on that? The residents' group and our legal service do not have the resources to be packaging information. I have to say this document, thank goodness and thanks to the consideration of a reasonably large private law firm, was made possible by their pro bono services to the residents' group. We did try to get some funding to support us and the residents through the process of the discussion groups in the short period of time we had over summer, but there is nothing there.

What I am hoping to work on with the residents' group is — and I note the chair, Maxine, is here today — some skill development training, because we have a little bit of modest funding from Banyule City Council. We have one of the best conflict resolution practitioners and mediators probably in the South Pacific region who is also a Heidelberg High graduate. So she is going to be doing some work there. Then we will be looking at strategic planning. I think there is a strategic planning group coming up for the residents' group as to how to move forward with this.

The health centre and the legal service want to support and work in partnership with the residents. It is really important, in the true spirit and philosophy behind neighbourhood renewal, that the residents be able and permitted to actually have a voice and with the skills they develop, do what they think is appropriate and needed. I think this one of the problems often with government development of policy and that is it needs to not be centralised to such an extent that it loses touch with the grass roots community. It needs to have better processes of engagement.

Neighbourhood renewal is an attempt at that, but neighbourhood renewal processes need to respect that when the residents are empowered and their capacity and confidence is built, they need to be permitted to have the freedom to do what they think is appropriate to meet the needs of their own community. We will be trying to walk side by side with the residents' group to move this forward further into the future. But the first step is to have something documented in writing and so I think that is a significant achievement of the residents who spent most of the summer on hot days facilitating the groups. They ran the discussion groups really well. As you have said, due credit to the residents.

Mr SCHEFFER — Absolutely. It is a phenomenal effort, thank you.

The CHAIR — Thank you very much for your presentation. We really appreciate it.

Witnesses withdrew.