



Learning from the hard lockdown:

Preserving community health, wellbeing and dignity during a public health crisis

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Executive Summary

The purpose of this document is to provide the Victorian Government with recommendations for the implementation of future COVID-19 related crisis measures in Victoria.

[Women's Health West](#) (WHW) is the women's health service for the western metropolitan region of Melbourne. As such, this report and our recommendations are informed by the events of the hard lockdown imposed on nine public housing towers in Flemington and North Melbourne, commencing Saturday 4 July 2020, and our gender and public health expertise. WHW has also collaborated with [Gender Equity Victoria](#) and the [Multicultural Centre for Women's Health](#) to develop this report and its recommendations.

The first section of this report draws on a variety of primary and secondary sources to provide a snapshot of community experiences during the hard lockdown. The bulk of the information provided is taken directly from residents' first-hand accounts, in the form of audio, video and written interviews, articles and media releases. We have also drawn insights and information from an online community meeting, held on Wednesday 8 July 2020. Verified reports from onsite journalists, legal, health and community advocates have also been considered.

A hard lockdown, by its very nature, renders events on the ground opaque to those observing from the outside. It is for this reason that we have centred the voices of those who experienced the hard lockdown and draw on their accounts to inform our recommendations. As the first Victorians to experience a COVID-19 hard lockdown, the communities of the public housing estates in Flemington and North Melbourne are in the best position to offer expertise and

insights to inform future practice and to minimise the harm caused by emergency public health measures.

The second section of this document provides recommendations for the Victorian Government, in the event that the imposition of hard lockdown, or similar public health crises measures, are required in the future.

The Victorian Government and the health and community services that work alongside it are currently engaged in the same complex task of seeking to predict and adequately respond to the course of an unprecedented global pandemic. Each day brings new challenges and dilemmas and the stakes are dauntingly high. Across the health sector, we are united in our aim to improve public health practice and support the health, safety and wellbeing of communities. To this end, the testimony, experiences, critiques and recommendations of community and public health experts are essential.

Summary of recommendations

Women's Health West recommend that the Victorian Government implement the following public health measures, in the event of a future COVID-19 hard lockdown in Victoria, or similar event:

1. Directly and equitably engage women in the planning and implementation of gender responsive COVID-19 public health interventions.
2. Ensure that community leaders and community organisations are central to the planning, implementation, and communication of any extraordinary public health measures introduced in their community.
3. Establish clear public health protocols and partnerships to ensure that that future COVID-19 emergency measures are informed by and jointly implemented with community-based experts and networks and tailored to holistic community health and welfare priorities.

In addition to participating in the Victorian Ombudsman's investigation into the hard lockdown at 33 Alfred Street, North Melbourne, we also recommend that:

4. The Victorian Government commit to an independent review of the July 2020 public housing hard lockdown, in its entirety, and ensure that affected community members are encouraged and adequately supported to document their experiences, feedback and recommendations, to inform guidelines for improved practice.

Section 1: A snapshot of community experiences and perspectives during the hard lockdown

The lead up to and initiation of the hard lockdown

It was reported that many residents found out about the hard lockdown through social media, television, word of mouth, or the arrival of Victoria Police members around their homes.¹

As described by Elhadi Abass, Manager of the Multicultural Sudanese Centre and resident of the Flemington estate:

“Despite my position, I had no warning of what happened... I just opened my eyes and the police were everywhere, and 90% percent of the people on the estate had no idea why they were here. The children were scared. They were saying: ‘Why are the police coming here? Are they coming here to catch criminals?’”²

Mr Abass’ observations capture a range of concerns that are consistently present in community critiques regarding the commencement of the hard lockdown. Countless residents have noted a lack of collaboration, support and health care and have spoken of the distress caused by the sudden appearance of a substantial contingent of police and media personnel around their homes.

It has been reported by community members and advocates, there was “little by way of a graduated public health response aimed at preventing the sudden emergency measures”³. That, from the early stages of the pandemic, residents and community leaders contacted government and health agencies, requesting sanitiser, masks, and the regular cleaning of shared spaces. Repeated requests were also made for health and infection control information and reminders to be posted throughout the estate, in community languages.^{4,5,6} Numerous accounts from residents describe failed attempts to prompt preventative public health measures and to safeguard their community from an outbreak.

¹ Melbourne Activist Legal Support (MALS) *Interim report on public housing detention directions in Flemington and North Melbourne*, July 16 2020. Available: https://melbactivistlegal.org.au/2020/07/16/interim-report-on-public-housing-detention-directions-in-flemington-and-north-melbourne/?fbclid=IwAR1yYgrQmqPrRFjU4GZ1vT_qAHL7Nb_xlo_DPtSS-ZdhM3OEbZuDC7MvMy0

² Abass, E., ‘The government sent 500 police to the towers instead of 500 nurses. We need more testing, not lockdowns’, *The Guardian Australia*, Sunday 5 July 2020. Available: <https://www.theguardian.com/commentisfree/2020/jul/05/the-government-sent-500-police-to-the-towers-instead-of-500-nurses-we-need-more-testing-not-lockdowns>

³ Iser, R., ‘Victoria’s public housing ambush has left residents reeling’, *The Canberra Times*, July 6 2020. Available: <https://www.canberratimes.com.au/story/6819717/victorias-public-housing-ambush-has-left-residents-reeling/#gsc.tab=0>

⁴ *ibid*

⁵ Simons, M., ‘It was paternalism: how government support for Melbourne’s locked down public housing blocks fell short’, *The Guardian Australia*, July 11 2020. Available: <https://www.theguardian.com/australia-news/2020/jul/11/it-was-paternalism-how-government-support-for-melbournes-locked-down-public-housing-blocks-fell-short>

⁶ Inner Melbourne Community Legal Centre (IMLC), Media Release, Sunday 12 July 2020, *No Justification for Paternalistic Police Response on Public Housing Estates*, Statement by IMLC CEO, Damien Stock.

“We knew about COVID and we were taking care, but all the information we were given in the flats was in English, and many of our community might speak a bit of English, but they don’t read or write English. In our building, one lift broke down, so we had just one for the whole tower. My sister contacted the Department of Housing, but nothing was done. There were hand sanitiser dispensers, but they ran out and were not replaced.”⁷

“...for months, I have not seen anyone clean the stairwells. There is no proper cleaning of the foyers, the glass doors at the entrance, the laundries. We had one hand sanitiser dispenser for 20 floors!”⁸

“There was supposed to be cleaning three times a day, of elevators etc, but that did not happen”⁹

For many residents, the lack of response to these requests and subsequent implementation of a hard lockdown, devoid of warning and markedly distinct from the restrictions placed on other Victorians (including those living in similarly high-density private housing) was profoundly harmful.

Instead of being approached as a strong community, with a history of concern and proactive advocacy for the health and wellbeing of their neighbours, residents describe being treated with prejudice and distrust. There appeared to be a lack of official confidence in the communities’ willingness to comply with public health orders, in the absence of an overwhelming police presence. The ‘enforcement first’ implementation of targeted restrictions for public housing residents was widely viewed as discriminatory and stigmatising. As noted by residents:

“We understand that this is a health crisis, however the problem is the way that government went about it...other communities were given two days to prepare themselves...some communities were also given ‘til midnight. The estate was on immediate lockdown, with armed police presence...”¹⁰

“It’s unfortunate to say that I do believe that if this was a predominately white neighbourhood this would not happen...it’s only the estate...not the rest of Flemington...across the road.”¹¹

“It seemed they were scared that we would refuse testing.”¹²

⁷ Shanino, H., ‘We knew about COVID-19 in the towers and were taking care, but instead of support there was only police’, *The Guardian Australia*, Sunday 5 July 2020. Available:

<https://www.theguardian.com/commentisfree/2020/jul/05/we-knew-about-covid-in-the-towers-and-were-taking-care-but-when-we-needed-support-there-were-only-police>

⁸ Abass, E., ‘The government sent 500 police to the towers instead of 500 nurses. We need more testing, not lockdowns’, *The Guardian Australia*, Sunday 5 July 2020, available:

<https://www.theguardian.com/commentisfree/2020/jul/05/the-government-sent-500-police-to-the-towers-instead-of-500-nurses-we-need-more-testing-not-lockdowns>

⁹ Information provided by resident in hard lockdown at online community meeting attended by WHW staff, July 8 2020.

¹⁰ *Guardian Australia*, ‘Full Story Podcast’, July 7 2020, ‘Inside the COVID-19 hard lockdown of Melbourne’s public housing towers’, Presented by Laura Murphy-Oates. Produced by Ellen Leabeater and Joe Koning.

Executive produced by Miles Martignoni and Gabrielle Jackson. Available:

<https://www.theguardian.com/australia-news/audio/2020/jul/07/inside-hard-lockdown-of-melbourne-public-housing-towers>

¹¹ *ibid*

¹² Information provided by resident in hard lockdown at online community meeting attended by WHW staff, July 8 2020.

"I realised as soon as booze buses and cop cars came, because we could not get out, I was angry and confused, and I felt like an alien."¹³

"People are more than happy to stay in their houses, they're more than happy to get the testing done...it's just the way that it was gone about, this is the only issue that we have. We want to be able to get our essentials."¹⁴

"We are happy that the Government has taken action to protect the community, but why are there two different rules?"¹⁵

"Everyone else down the road, for example, they're allowed to leave their house for four reasons. That choice has been taken away from us and I can't really understand why."¹⁶

"You had other suburbs where they had 48 hours warning before they were put in lockdown...How come we are any different? It just feels like we have been singled out."¹⁷

Communication and the provision of healthcare, support and resources.

Over the following hours and days, residents and community advocates reported a lack of clear protocol, communication and support, which exacerbated community distress and confusion.

Many residents reported a lack of appropriate and practical food provisions and information in community languages. Numerous residents observed significant discrepancies in the information and reassurances they were receiving in press conferences and what they were experiencing on the ground. This had a deleterious impact on the trust that residents placed in government communications and services and increased anxiety about accessing the support and provisions they would require over the coming days.

"No one has knocked on the door to explain why this is happening, or why we have police within the estate, or why there's no social workers, nothing. We haven't received anything from government and that is pretty distressing because that is what they have told the wider public and they informed us on national television that that is what they were going to do...They also are using the microphones in the building to practically say, if you don't get tested, this will go longer...No other information has been received, other than that."¹⁸

¹³ *ibid*

¹⁴ Yusuf, M., as cited in, Young, E., Yussuf, A., 'Melbourne public housing residents demand eased restrictions, removal of police amid lockdown confusion', *SBS News* [online], July 07 2020. Available: <https://www.sbs.com.au/news/melbourne-public-housing-residents-demand-eased-restrictions-removal-of-police-amid-lockdown-confusion>

¹⁵ Murray-Atfield, Y., 'Melbourne public housing tower resident says community is being 'treated like criminals' amid coronavirus lockdown, *ABC News* [online], July 5 2020. Available: <https://www.abc.net.au/news/2020-07-05/coronavirus-lockdown-melbourne-public-housing-residents-speak/12423170>

¹⁶ *ibid*

¹⁷ Wahlquist, C., Simons, M., 'Melbourne's 'hard lockdown' orders residents of nine public housing towers to stay home as coronavirus cases surge', *The Guardian Australia*, July 4 2020. Available: <https://www.theguardian.com/world/2020/jul/04/melbournes-hard-lockdown-orders-residents-of-nine-public-housing-towers-to-stay-home-as-coronavirus-cases-surge>

¹⁸ *Guardian Australia*, 'Full Story Podcast', July 7 2020, 'Inside the COVID-19 hard lockdown of Melbourne's public housing towers', Presented by Laura Murphy-Oates. Produced by Ellen Leabeater and Joe Koning. Executive produced by Miles Martignoni and Gabrielle Jackson. Available:

“An elderly woman is worried about her medication; a mother needs baby wipes; another mother has only one day remaining of special baby formula.”¹⁹

“There were people with asthma who had no Ventolin, diabetics without clean needles, mothers of premature babies now isolated from their infants in the nearby Royal Melbourne hospital.”²⁰

“Police concern for security, and DHHS’s concern for infection control, meant the deliveries were frustrated. Food was left in foyers and on steps, attacked by rats overnight.”²¹

“[A resident] needed to go to hospital emergency room for her son, and it took 4 hours to leave the building”²²

“There was a lot of resources when it came to security and having the police stationed around the buildings, but when it came to supplies and support, it didn’t come hand-in-hand.”²³

“Personally, I’ve got young kids in here, I’ve got three kids in here with me at the moment. The only supplies we’ve got are the supplies that we had prior to the lockdown, and they’re running down really fast.”²⁴

It is important to note that some accounts speak to a gradual improvement of communication, support and supply provision over the course of the hard lockdown. In particular, it has been reported that, by Wednesday the community-led Australian Muslim Social Services Agency Youth Connect (AMSSA) was “taken into the heart of the effort...[p]rotocols for community deliveries were established and the authorities began to cooperate with the community”²⁵. The effectiveness of this community-led initiative was subsequently acknowledged by the Victorian Minister for Police and Emergency Services and is to be commended.

<https://www.theguardian.com/australia-news/audio/2020/jul/07/inside-hard-lockdown-of-melbourne-public-housing-towers>

¹⁹ Iser, R., ‘Victoria’s public housing ambush has left residents reeling’, *The Canberra Times*, July 6 2020.

Available: <https://www.canberratimes.com.au/story/6819717/victorias-public-housing-ambush-has-left-residents-reeling/#gsc.tab=0>

²⁰ *ibid*

²¹ Simons, M., ‘It was paternalism: how government support for Melbourne’s locked down public housing blocks fell short’, *The Guardian Australia*, July 11 2020. Available: <https://www.theguardian.com/australia-news/2020/jul/11/it-was-paternalism-how-government-support-for-melbournes-locked-down-public-housing-blocks-fell-short>

²² Information provided by resident in hard lockdown at online community meeting attended by WHW staff, July 8 2020.

²³ Yusuf, M., as cited in, Young, E., Yussuf, A., ‘Melbourne public housing residents demand eased restrictions, removal of police amid lockdown confusion’, *SBS News* [online], July 07 2020. Available:

<https://www.sbs.com.au/news/melbourne-public-housing-residents-demand-eased-restrictions-removal-of-police-amid-lockdown-confusion>

²⁴ *ibid*

²⁵ Simons, M., ‘It was paternalism: how government support for Melbourne’s locked down public housing blocks fell short’, *The Guardian Australia*, July 11 2020. Available: <https://www.theguardian.com/australia-news/2020/jul/11/it-was-paternalism-how-government-support-for-melbournes-locked-down-public-housing-blocks-fell-short>

Public health and policing

A public health crisis is best addressed with a health, welfare and community centred response. This includes immediate presence of health authorities, community health workers and services that already work with and are embedded in the affected community²⁶. Trust, goodwill, and strong two-way communication are vital²⁷. Community members need to be part of the response, the planning, implementation and communication of strategy.²⁸ As noted by the Victorian Council for Social Services “[a] large police presence unnecessarily escalates tensions and complicates the delivery of public health measures”²⁹. From a public health and health promotion perspective, “enforcement first responses to a health issue...take away the residents’ dignity and agency”³⁰. As noted by residents and community advocates:

“What we need is more testing, lots of testing, but not lockdowns. Yesterday they sent 500 police...but no medical help. This is not a police issue. Why didn’t they send us 500 nurses?”³¹

“There needs to be trust between the people and relevant authorities for health initiatives to be effective. You cannot build trust by deploying 500 police officers inside people’s homes...”³²

“[the police] came door knocking yesterday (distributing masks) ... They also gave out paperwork...to say that we are potentially on lockdown until the 18th of July. The language used within that document, was ‘detention’, ‘detention’, ‘detention’, that was all that we were seeing... a lot of the people felt like were not perceived as citizens, but rather as criminals. A lot of the young people...the analogy that they’ve made is that we are in jail...”³³

“You would think that we would have social workers, or medical practitioners, or youth workers, or counsellors, or even volunteers... but it is actually authority... a lot of these people, they come from war torn countries and authorities in these countries are seen as a threat, so this is triggering for a lot of people in our community.”³⁴

²⁶ Voices from the Blocks, Media Release, *Voices from the Blocks speak out, say detention is putting people’s health at risk*, July 7 2020.

²⁷ *ibid*

²⁸ Lemoh, C., ‘Police presence at Melbourne towers was ‘dehumanising’, infectious disease doctor says’, *The Guardian Australia*, August 14 2020. Available: <https://www.theguardian.com/australia-news/2020/aug/14/police-presence-at-melbourne-towers-was-dehumanising-infectious-disease-doctor-says>

²⁹ Victorian Council of Social Services (VCOSS), ‘Doing Hard Lockdowns Better: COVID-19 Issues Alert’, July 13 2020. Available: <https://vcoss.org.au/analysis/hard-lockdowns-things-to-consider/>

³⁰ Inner Melbourne Community Legal Centre (IMLC), Media Release, Sunday 12 July 2020, ‘No Justification for Paternalistic Police Response on Public Housing Estates’, Statement by IMLC CEO, Damien Stock

³¹ Abass, E., ‘The government sent 500 police to the towers instead of 500 nurses. We need more testing, not lock downs’, *The Guardian Australia*, Sunday 5 July 2020: Available: <https://www.theguardian.com/commentisfree/2020/jul/05/the-government-sent-500-police-to-the-towers-instead-of-500-nurses-we-need-more-testing-not-lockdowns>

³² Voices from the Blocks, Media Release, *Voices from the Blocks speak out, say detention is putting people’s health at risk*, July 7 2020.

³³ *Guardian Australia*, ‘Full Story Podcast’, July 7 2020, ‘Inside the COVID-19 hard lockdown of Melbourne’s public housing towers’, Presented by Laura Murphy-Oates. Produced by Ellen Leabeater and Joe Koning. Executive produced by Miles Martignoni and Gabrielle Jackson. Available: <https://www.theguardian.com/australia-news/audio/2020/jul/07/inside-hard-lockdown-of-melbourne-public-housing-towers>

³⁴ *ibid*

“...no social workers or other support services were observed outside the tower blocks in Flemington on Saturday night – only armed police officers wearing gloves and face masks”³⁵

“There were no interpreters, no social workers, no medical workers, just lots of police. It was a very forceful way of handling it. Some single mothers who don’t speak much English were asking “why are they here? What have we done wrong?”³⁶

Section 2: Recommendations in the event of a future COVID-19 hard lockdown in Victoria.

Based on the experience, advice and recommendations of residents who experienced Victoria’s first hard lockdown, we recommend that the Victorian Government implement the following public health measures, in the event of a future COVID-19 hard lockdown in Victoria, or similar event:

1. Directly and equitably engage women in the planning and implementation of gender responsive COVID-19 public health interventions.

COVID-19 presents specific challenges to the health, safety and wellbeing of women. As noted by Gender Equity Victoria, “Victorian women have been hardest hit by the COVID-19 pandemic with higher unemployment rates, less access to JobKeeper, greater responsibility for caring and unpaid work and significantly poorer mental health outcomes”³⁷

Women from migrant and refugee backgrounds are disproportionately impacted by the pandemic, as limited access to timely, accessible and multilingual health information intersects with “increased risk of infection, accentuated social isolation due to the digital divide, significant financial disadvantage and an increased risk of family violence”³⁸. Many newly arrived women and women on temporary visas experience further disadvantage and risk, as a result of their ineligibility for Federal government support.

The restrictions necessitated by COVID-19 have the effect of reducing vital protective factors for women, such as access to support networks, financial independence, and the ability to confidentially access family violence support and essential sexual and reproductive healthcare.

³⁵ Wahlquist, C., Simons, M., ‘Melbourne’s ‘hard lockdown’ orders residents of nine public housing towers to stay home as coronavirus cases surge’, *The Guardian Australia*, July 4 2020. Available:

<https://www.theguardian.com/world/2020/jul/04/melbournes-hard-lockdown-orders-residents-of-nine-public-housing-towers-to-stay-home-as-coronavirus-cases-surge>

³⁶ Shanino, H., ‘We knew about COVID-19 in the towers and were taking care, but instead of support there was only police’, *The Guardian Australia*, Sunday 5 July 2020. Available:

<https://www.theguardian.com/commentisfree/2020/jul/05/we-knew-about-covid-in-the-towers-and-were-taking-care-but-when-we-needed-support-there-were-only-police>

³⁷ Gender Equity Victoria, 2020, *Facts prove COVID19 hurts women more*. Available:

<https://www.genvic.org.au/resources/covid-19-resources/>

³⁸ Multicultural Centre for Women’s Health, July 2020, *Submission to the Public Accounts and Estimates Committee Inquiry into the Victorian Government’s response to the COVID-19 Pandemic*.

This places women at heightened risk of violence, reproductive coercion, and poorer health outcomes more broadly.^{39, 40}

Women are also central to Victoria's frontline response to the pandemic, providing essential services in nursing, disability and mental health care, aged-care, early childhood education, teaching, family violence support, housing and homelessness services and social support.⁴¹ Women also perform the bulk of unpaid care work in Victoria, for children and for people who are unwell, aging, or living with a disability.

As such, women's diverse perspectives and priorities are vital to the design of effective public policy and women's skills, lived expertise and leadership are key to the success of public health initiatives. Women should be regarded as essential partners in this work and must be equitably represented in the planning and implementation of COVID-19 public health interventions, in any community.

2. Ensure that community leaders and community organisations are central to the planning, implementation, and communication of any extraordinary public health measures introduced in their community.

In the context of high-density public housing, where risk of contagion is heightened, consultation and collaboration should include the development of a joint COVID-19 health and wellbeing plan, for preventing and responding to a public health crisis in the community. Sustained collaboration and communication will ensure that:

- Vital preventative public health practices are being implemented.
- Community members have access to the resources and services they need to safeguard their health.
- Health care information provision is appropriate, accessible and effective.

This process should prioritise the establishment of relationships characterised by reciprocal trust, respect, and confidence, between government, health services and community. This will be crucial to the success of any joint health initiatives that might be required.

The community leadership and expertise of women is essential to effective public health policy and practice and must be central to this process. Women leaders from migrant and refugee communities are vital sources of information and instruction, with relation to community priorities and the specific supports and resources that are required, in any crisis. Their leadership is crucial to an effective, community-based, preventative response to the pandemic.⁴²

³⁹ Gender Equity Victoria, 2020, *Gender, Disaster and Resilience: Towards a Gender Equal Recovery. Factsheet: Preventing Violence Against Women*. Available: https://www.genvic.org.au/wp-content/uploads/2020/06/Preventing-violence-against-women_FA-1.pdf

⁴⁰ Gender Equity Victoria, 2020, *Gender, Disaster and Resilience: Towards a Gender Equal Recovery. Factsheet: Sexual and Reproductive Health in the Context of COVID-19*. Available: https://www.genvic.org.au/wp-content/uploads/2020/06/Sexual-and-Reproductive-Health_FA.pdf

⁴¹ Gender Equity Victoria, 2020, *Gender Equity & Women's organisations unite on Covid19 disaster*, Joint Statement. Available: <https://www.genvic.org.au/focus-areas/advocacy/gen-vic-campaigns/gender-equity-womens-organisations-unite-on-covid19-disaster/>

⁴² Multicultural Centre for Women's Health, *It's Time to Listen to Migrant Women: A message from the Multicultural Centre for Women's Health Executive Director*. Available: <https://www.mcwh.com.au/its-time-to-listen-to-migrant-women/>

3. Establish clear public health protocols and partnerships to ensure that that future COVID-19 emergency measures are informed by and jointly implemented with community-based experts and networks and tailored to holistic community health and welfare priorities.

The COVID-19 pandemic is a public health crisis and it requires a public health response. A public health response needs to be implemented by public health authorities, health care workers and community health and support services, in partnership with community.

As demonstrated by the community feedback presented above, the enforcement focused, police-led response to this public health emergency was deleterious to community health, exacerbated fear, and was corrosive to community trust in, and regard for, government and community organisations more broadly. A lack of trust and confidence in government and health authorities during a global pandemic is a significant risk.

Community members and community-led organisations must be central to the planning, management, and communication of public health initiatives in specific locations. However, the below principles are fundamental to any effective public health crisis response:

- The adequate, and accessible provision of healthcare and support personnel is the first and central priority in a health crisis. This must include healthcare workers, social workers, mental health support services, drug and alcohol support services, trained bi-lingual health educators and adequate interpreters.
- Communication is timely, clear, consistent and available in accessible languages and formats.
- Communities receive immediate and direct information regarding the reason for, the nature of, and duration of restrictions.
- Communication includes information regarding the key, trusted community and health organisations that have been engaged to support the health and wellbeing of residents and who can be contacted for support and further information.
- Clear timelines and processes for the provision of supplies, healthcare, medicines, food, and the meeting of day-to-day needs are immediately communicated onsite.
- Information regarding financial support provisions for residents and clear instructions on how and when these can be accessed are immediately communicated onsite.

In order for this essential information to be communicated to residents, protocols, resources and communication processes must be proactively established, to ensure that systems are in place and ready to be effectively implemented, in the event of a future public health emergency.

We also recommend that, in addition to participating in the Victorian Ombudsman's investigation into the hard lockdown at 33 Alfred Street, North Melbourne:

- 4. The Victorian Government commit to an independent review of the July 2020 public housing hard lockdown, in its entirety, and ensure that affected community members are encouraged and adequately supported to document their experiences, feedback and recommendations, to inform guidelines for improved practice.**

The residents of the nine public housing towers subjected to hard lockdown in July are the best source of information we have about what worked well, what did not work and what should occur if the pandemic necessitates the hard lockdown of other communities. As the first community to have experienced a hard lockdown, their perspectives and ideas are vital to informing practice guidelines, to ensure that future COVID-19 crisis measures are evidence based, delivered with regard to local priorities and contexts, and do not imperil the health and wellbeing of affected communities.

For further information:

Women's Health West and our colleagues at Gender Equity Victoria and the Multicultural Centre for Women's Health welcome the opportunity to meet with representatives of Government to discuss this report and its recommendations. Please do not hesitate to contact us.

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