FAMILY AND COMMUNITY DEVELOPMENT COMMITTEE

INQUIRY INTO OPPORTUNITIES FOR PARTICIPATION OF VICTORIAN SENIORS

ORDERED TO BE PRINTED

August 2012
PP No. 157. Session 2010–12
Functions of the Committee

Extract from the Parliamentary Committees Act 2003:

S.11 The functions of the Family and Community Development Committee are, if so required or permitted under this Act, to inquire into, consider and report to the Parliament on:

(a) any proposal, matter or thing concerned with –
   (i) the family or the welfare of the family
   (ii) community development or the welfare of the community
(b) the role of Government in community development and welfare, including the welfare of the family.
Committee Membership

Committee Members

Ms Georgie Crozier, MP (Chair)  Southern Metropolitan
Mr Frank McGuire, MLA (Deputy Chair)  Broadmeadows
Mrs Donna Bauer, MLA  Carrum
Mrs Andrea Coote, MP  Southern Metropolitan
Ms Bronwyn Halfpenny, MLA  Thomastown
Mr Nick Wakeling, MLA  Ferntree Gully

Secretariat

Dr Janine Bush  Executive Officer
Ms Vicky Finn  Research Officer
Ms Stephanie Dodds (until 6 July 2012)  Administration Officer
Ms Natalie Tyler  Administration Officer
Terms of Reference

That under s 33 of the Parliamentary Committees Act 2003, the Family and Community Development Committee is required to inquire into, consider and report no later than 30 June 2012* on opportunities for participation of Victorian seniors, and the Committee is asked to:

a) review national and international literature on preparing for an ageing society;

b) consult with older Victorians and representative bodies and with Victorians planning for ageing well;

c) examine the contribution of, and challenges facing, older members of the Victorian community from diverse cultural and linguistic backgrounds;

d) identify the role of government in supporting older Victorians and the intersection of Federal, State and Local Government service provision and their responsibility to seniors;

e) consider the economic significance of older Victorians in the paid workforce and the voluntary sector and barriers to participation for those Victorian seniors who desire to work in or contribute to the community, and how willing economic and social contributions can be fostered;

f) consider ageing well in terms of quality of life and community participation, including the specific and different issues faced by men and women, older Victorians from different age cohorts, and those living in rural and regional areas;

g) examine the role and interrelationship of active, successful, positive and productive ageing approaches in promoting better health;

h) develop recommendations or strategies for whole of government and community responses to the needs of older Victorians now, and into the future, and incorporate in the recommendations the best international practice in support of ageing well.

* On 07 December 2011 the Legislative Assembly amended the reporting date from 10 February 2012 to 30 June 2012.
Chair’s Foreword

The vitality of the Victorian community and its economy is significantly linked with the extent to which older people’s participation can be fostered and encouraged.

During this Inquiry, the Committee identified that there are individual, community and economic benefits of the diverse participation by people in later life. Barriers to participation experienced by older people mean Victoria does not benefit fully from the potential contributions of older people in the community. This report makes a series of recommendations to foster and enable older people to participate socially, economically and in the community to the extent that they want and choose to.

Increased longevity and population ageing are international trends that are contributing to new thinking about the participation of people in later life. The Committee identified that a key component of changing our views of age and ageing is rethinking how we understand people in later life and their diverse experiences.

To successfully rethink approaches to longevity and achieve an age-friendly Victoria that maximises opportunities for participation by people in later life, the Committee’s report recommends a statewide, whole of government strategy for older people.

The report outlines each element of the proposed strategy for older people. It identifies the importance of empowering senior Victorians and recognising their diversity in how they participate. The Committee’s recommended strategy highlights the importance of challenging perceptions of older people in the broader community and how their participation is viewed.

The Committee emphasises the value in supporting older Victorians to plan for later life. Its proposed strategy suggests the need to plan for age-friendly environments, and critically, to put in place the necessary mechanisms to achieve age-friendly environments.

Central to the proposed strategy is the Committee’s recommendation for a governance framework that ensures the Victorian Government has in place a system for leading and coordinating its responses to people in later life.

The Committee would like to thank the many people who provided oral evidence and written submissions to this Inquiry, and to those who attended as witnesses at the public hearings in Melbourne, Geelong and Bendigo.

The Committee would also like to express its gratitude to the staff of the Family and Community Development Committee – Executive Officer, Janine Bush, Research Officer, Vicky Finn and Administrative Officers, Stephanie Dodds and Natalie Tyler for their dedicated hard work and cooperation.
The Committee also thanks those individuals and organisations who have generously provided expert advice to assist in its thinking about ways forward to improve participation opportunities for people in later life. In particular, in Australia the Committee benefited from the advice and information provided by Commonwealth departments in Canberra, the Productivity Commission, the Ambassador for Ageing and the Age Discrimination Commissioner.

Internationally, the Committee valued the advice provided by the Director of Ageing and Lifecourse at the World Health Organization, Dr John Beard, during his visit to Melbourne. It also appreciated the time, generosity and advice provided by individuals and organisations on its study tour to the United Kingdom and the Netherlands. The report and its recommendations have benefited significantly from the opportunity to hear about developments and approaches to participation by people in later life in these countries.

Finally, I would personally like to thank the Committee Members, Frank McGuire, Donna Bauer, Andrea Coote, Bronwyn Halfpenny and Nick Wakeling for their cooperative approach to this Inquiry.

Georgie Crozier, MP
Chair
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Glossary

Accessibility – the ease with which transport, housing, buildings and outdoor spaces can be accessed by people of diverse needs and capacities.

Active ageing – active ageing challenges the stereotyped views of older people as ill and dependent and focuses on optimising opportunities for health, participation and security in order to enhance quality of life as people age.¹

Affordable housing – a general term used to cover any low cost housing.

Age-friendly communities – communities that encourage active ageing by optimising opportunities for health, participation and security in order to enhance quality of life as people age. An age-friendly community adapts its structures and services to be accessible to and include older people with varying needs and capacities.²

Ageing in place – the ability of older people to maintain functional independence and a connection to community.

Ageism – definitions of ageism vary. Early definitions focused on stereotyping and discrimination by younger generations against people because of old age. Later definitions regard ageism as reflecting beliefs about the impact of biological ageing on people of all ages and that a prejudice against ageing persists throughout the lifecourse. The committee considered that ageism is reflected in society’s attitudes towards older people, can result in age discrimination, and can be amplified when combined with other forms of discrimination or disadvantage.

Autonomy – the perceived ability to control, cope with and make personal decisions about how one lives on a day-to-day basis, according to one's own rules and preferences (World Health Organization Active ageing framework, 2002).


Citizens’ assembly – a group of citizens appointed to engage directly in the deliberation of a policy issue. Membership is generally randomly selected to reflect the diversity of the population.

Civic engagement – civic engagement describes how an active citizen participates in the community in order to improve conditions for others or to help shape the community’s future.³ Also referred to as civic participation.

Civic participation – see civic engagement.

Community housing – rental housing provided for low to moderate income or special needs households. Community housing is generally fully or partly funded by governments, and managed by not-for-profit organisations, and in some cases local governments.

Community participation – includes:

- Volunteering
- Policy, advocacy and civic engagement
- Mentoring and community leadership
- Informal caring.

Council of Australian Governments (COAG) – the peak intergovernmental forum in Australia, comprising the Prime Minister, state premiers, territory chief ministers and the President of the Australian Local Government Association. The Council’s role is to initiate, develop and monitor the implementation of policy reforms that are of national significance and require cooperation by all levels of government.

Data disaggregation – the breaking down of data into smaller parts to allow meaningful analysis. For example, throughout this report, the Committee refers to breaking down data about senior Victorians into smaller age categories.

Direct discrimination – when a person treats, or proposes to treat, a person with a protected personal characteristic unfavourably, because of that personal characteristic. Direct discrimination often happens because people make unfair assumptions about what people with certain personal characteristics can and cannot do. 4

Elder abuse – any act occurring within a relationship where there is an implication of trust, which results in harm to an older person. Abuse can include physical, sexual, financial, psychological and social abuse and/or neglect. 5

Empowerment – a person’s capacity to make informed and effective choices, that is, to make choices and to transform those choices into desired outcomes. It is about people gaining control or greater control over their lives. 6 There are varying personal, environmental, social and political factors that influence the degrees of empowerment that people can have at any point in time.

Independence – commonly understood as the ability to perform functions related to daily living – i.e. the capacity of living independently in the community with no and/or little help from others (WHO Active ageing framework, 2002).

Indigenous – A person of Aboriginal and/or Torres Strait Islander origin who identifies as an Aboriginal and/or Torres Strait Islander. 7

Indirect discrimination – refers to situations where treating everyone the same is unfair. This occurs when an unreasonable requirement, condition or practice that purports to treat everyone the same ends up either actually, or potentially, disadvantaging someone with a personal characteristic protected by the law. 8

Intergenerational relationships – relationships between the generations.

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**Joined-up practice** – refers to a policy approach that features collaboration and partnership between government departments and local governments to achieve policy goals. Also referred to as a whole of government or integrated approach.

**Lifelong learning** – education and learning at all stages of life.

**Life transition points** – a range of transition points are relevant to different stages of the life course. In mid life, some key transitions points include having children, moving house, moving in with a new partner, experiencing a significant health issue, changing employment or considering further study. Important later life transition points include grandparenthood, exploring accommodation needs or ceasing work.

**Older People’s Champions** – a local government role established as part of the Welsh Assembly Government’s Strategy for Older People in Wales. Normally a cabinet minister who has a role to ensure the issues of older people are kept at the forefront of policy and service development.  

**Participation** – for the purposes of this Inquiry, the Committee adopted a definition of participation that focuses on meaningful engagement by senior Victorians, encompassing notions of active ageing and social inclusion. Participation by senior Victorians is varied and overlapping and includes social, community and workforce participation.

**Positive ageing** – similar in meaning to ‘active ageing’, this phrase views ageing and older people in a positive light and recognises the potential of older people.

**Productive ageing** – a phrase popular in the 1980s that emphasises the contribution of older people to the economy and society. While the term has been used extensively in relation to the contribution of older people in the workforce, it has also been used broadly to include non-paid and social contributions of older people.

**Public housing** – public housing is one of a range of social housing options. Public housing generally refers to dwellings or housing stock owned (or leased) and managed by a government housing authority to provide affordable rental accommodation.

**Residential parks** – residential parks involve residents purchasing a prefabricated dwelling which is located on a rented site within a park. As such, they are covered under the *Residential Tenancies Act 1997* (Vic), rather than the *Retirement Villages Act 1986* (Vic). Residential parks are a low cost housing model often targeted to senior residents.

**Rooming houses** – a rooming house is a building with one or more rooms available for rent where the total number of occupants of those rooms is four or more. Rooming house operators must be registered with a local council and meet the standards set out in the Public Health and Wellbeing Regulations 2009.

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Senior Victorians – for the purposes of the report, the Committee generally refers to senior Victorians as those people aged over 60 years, yet at times it has been necessary to adopt a flexible approach, depending on the context and the information available. It also refers to Victorian seniors using a range of terms, and in addition to ‘Victorian seniors’ it uses the terms ‘older people’ and ‘people in later life’ throughout the report.

Service integrated housing – housing options that include support services for people’s changing needs in later life.

Social housing – rental housing that is provided and/or managed by government or non-government organisations. This housing is mainly targeted at people on low incomes who are in greatest need. This includes those who are homeless, living in inappropriate housing, or who have very high rental costs.

In public housing, the majority of tenants pay less than the market rent (that is, 25 per cent or less of their income). In community housing, rent payments range from less than 25 per cent to more than 30 per cent of income. Tenants also receive a range of support services (such as personal support and employment support) and are encouraged to be involved in managing community dwellings.

Social isolation – separation from the community or disconnection from the collective.

Social participation – includes:

• Social involvement with family and friends
• Leisure and recreation (including travel & tourism)
• Participation in clubs, societies, social groups
• Ongoing learning, cultural and sporting activities and events.

Stakeholders – persons, groups or organisations with direct interest, including societies, bodies, parties, associations, institutes, businesses, companies, unions, clubs, corporations, government, customers and future generations.

Successful ageing – a phrase used since the 1960s which suggested that the key to ageing well was activity and financial success, with ’success’ being reliant on people maintaining middle age activity patterns into old age. 13

Systemic discrimination – discrimination can become systemic when entrenched, structural and sometimes institutional patterns of behaviour or actions affect a range of people. These behaviours and actions are often part of organisational culture and are reinforced by policies or procedures. 14

Universal housing design – housing that is designed to meet the changing needs of occupants across their lifetime.

Workforce participation – includes:

• Employment
• Business and enterprise
• Mentoring
• Professional development.


## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AAG</td>
<td>Australian Association of Gerontology</td>
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<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
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<td>ACCV</td>
<td>Aged and Community Care Victoria</td>
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<td>ACLFTA</td>
<td><em>Australian Consumer Law and Fair Trading Act 2012 (Vic)</em></td>
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<td>ACT</td>
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<td>Australian Housing and Urban Research Institute</td>
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<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
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<td>AIR</td>
<td>Association of Independent Retirees</td>
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<td>ASIC</td>
<td>Australian Securities and Investments Commission</td>
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<td>ATM</td>
<td>Automatic teller machine</td>
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<td>BARC</td>
<td>Building Ageing Research Capacity</td>
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<td>BC</td>
<td>British Columbia, Canada</td>
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<td>CA</td>
<td>Citizens’ Assembly</td>
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<td>CAE</td>
<td>Council of Adult Education</td>
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<tr>
<td>CALD</td>
<td>Culturally and linguistically diverse</td>
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<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
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<td>COAG</td>
<td>Council of Australian Governments</td>
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<td>COTA</td>
<td>Council on the Ageing</td>
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<td>GDP</td>
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<td>GLBTI</td>
<td>Gay, Lesbian, Bisexual, Transgender and Intersex</td>
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<td>HAAG</td>
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<td>HACC</td>
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<tr>
<td>ICT</td>
<td>Information and communication technology</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<tr>
<td>ILU</td>
<td>Independent living unit</td>
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<td>IT</td>
<td>Information technology</td>
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<td>LGA</td>
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<td>NHSC</td>
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<td>NHS</td>
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<td>NPAH</td>
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<td>NSW</td>
<td>New South Wales</td>
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<td>OECD</td>
<td>Organisation for Economic Cooperation and Development</td>
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<td>OM:NI</td>
<td>Older Men: New Ideas</td>
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<td>PACE</td>
<td>Peninsula Advisory Committee for Elders</td>
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<td>PBCLI</td>
<td>Pensioner and Beneficiary Cost of Living Index</td>
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<td>RACV</td>
<td>Royal Automobile Club of Victoria</td>
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<td>RVA</td>
<td>Retirement Villages Association</td>
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<td>TAFISA</td>
<td>The Association for International Sport for All</td>
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<td>U3A</td>
<td>University of the Third Age</td>
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<td>UAW</td>
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<td>UN</td>
<td>United Nations</td>
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<td>VAGO</td>
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Executive Summary

Unless our expertise is valued, it is unlikely that we will continue to participate other than with other seniors. This will deprive the whole community of tens of thousands of lifetimes’ experience, accumulated knowledge and expertise. Ours is just one range of perspectives to be digested along with contributions from many other community sectors, but most of us have learned more in our long lifetimes than later generations have yet had the opportunity to replicate.¹

Increased longevity and population ageing are international trends that are contributing to new thinking about the participation of people in later life. This thinking focuses both on what participation means for older people themselves and how broader communities benefit from greater participation by people in their later years.

Population ageing is a global pattern that Victoria is experiencing alongside other states and nations. It relates to a process by which older people become a proportionally larger share of the total population through increased life expectancy and lower birth and migration rates.

People in Victoria are living longer than ever before. In the early twentieth century, people only expected to live till their mid-50s. By the early 1970s, people were likely to live until their mid-70s. In 2012, Victorians can generally expect to live into their mid-80s.

Living longer lives represents a profound change in Victoria’s demographic structure, with social, political and economic implications. Victorians who retire in their early 60s can expect to live in retirement for over 20 years, continuing to engage in the social, economic and community life of Victoria.

The benefits of social, economic and community participation by people in later life are extensive and include:

• individual benefits – such as a sense of connectedness, financial independence, and improved health and wellbeing
• economic benefits – through contributions to the workforce, through caring and volunteering and through reduced reliance on health services
• community benefits – older people’s participation contributes to increased social capital, and stronger and safer communities.

The future vitality of the Victorian community and its economy is interlinked with the extent to which older people’s willingness and desire to participate can be effectively fostered.

Barriers to participation experienced by older people mean Victoria does not benefit fully from the potential contributions of older people in the community. These barriers include, but are not limited to:

• discrimination
• community and media perceptions

¹ Submission 53, Doig, L., p. 9.
• accessibility of services and buildings
• health and wellbeing
• financial insecurity
• caring responsibilities
• elder abuse.

The Committee identified that for people who are vulnerable or disadvantaged, age can exacerbate the barriers they already experience.

The Committee’s report highlights the significant contributions made to the Victorian community by people in later life. It also makes a series of recommendations to foster and effectively enable older people to participate socially, economically and in the community to the extent that they want and choose to.

Rethinking longevity and the life course in Victoria

Internationally, the World Health Organization (WHO) is leading a process of rethinking ageing, longevity and the life course. It has identified the need to reconceptualise the life course and integrate greater flexibility into people’s individual life patterns. Integral to this rethinking is the importance of revising attitudes towards later life and what it means to get older.

In Victoria, this requires new understanding of the value of older people as participants. As Professor Simon Biggs advised the Committee:

> We are in a situation where everybody wants to live a long time but not many people want to grow old. ²

A key component of changing our views of age and ageing is rethinking how we understand people in later life and their diverse experiences.

Victorian seniors reflect the diversity of the Victorian community. People in later life vary greatly in age, capacity and needs. They come from a variety of backgrounds and cultures and live in a wide range of communities, from inner urban to rural and remote.

The Committee recognises that the opportunities and challenges relating to senior Victorians’ participation vary with the diversity of their experience.

Strategising, implementing and monitoring progress

To successfully rethink approaches to longevity and achieve a Victoria for all ages that maximises opportunities for participation by people in later life, the Committee identified a need for a statewide, whole of government strategy for older people.

The development of a strategy for older people would enable the Victorian Government to state where it is now and where it wants to be in the future in regard to the participation of people in later life. The Committee has recommended that such a strategy for older people prioritise the following goals:

² Transcript of evidence 18, Biggs, S., University of Melbourne, Melbourne, 5 October 2011, p. 2.
Executive Summary

- leading and coordinating government responses
- empowering senior Victorians and recognising their diversity
- changing perceptions of older people
- supporting older Victorians to plan for later life
- achieving age-friendly environments
- retaining and improving aged care and support services
- increasing knowledge and understanding of older people.

The Committee also recommended that for the strategy to be effective, it needs to be allocated a funding stream.

A strategy is not an end in itself. Inquiry participants suggested a strategy is important only if it achieves results. In view of the long-term, cultural change required, the Committee identified that a staged implementation plan is essential.

In developing an overarching strategy, the Committee has recommended that the Victorian Government focuses on incorporating an implementation plan and monitoring framework to specify how the goals will be achieved and measured over time.

Leading and coordinating government responses

The Committee identified that to successfully pursue a strategy for older people, the Victorian Government needs to establish a governance framework that provides leadership and the capacity to coordinate whole of government responses to older people.

In doing this, the Committee has recommended that the Victorian Government appoints a lead minister for older people to report annually to the Victorian Parliament on the implementation of the strategic plan.

It has also recommended that a central lead agency in the form of a Commissioner for Older People is established with clear accountabilities. The Committee suggests that the Commissioner reports to the proposed lead minister for older people, and has the authority to:

- oversee activities across agencies and promote joined-up practices and partnership with other levels of government
- assume responsibility for the development and implementation of a whole of government strategy that effectively fosters participation of older people in Victoria.

Empowering senior Victorians and recognising their diversity

Empowerment assists people in later life to make more informed and effective choices relating to important areas in their lives, such as housing, work, retirement and health. The Committee identified that there can be additional limitations on choice even when people have knowledge and resources, such as socio-economic factors. Empowerment is also about transforming these choices into effective planning for later life and achieving desired outcomes in participation.
Positive outcomes of older people’s empowerment include greater feelings of safety, connectedness and independence. They also include seniors feeling informed, valued, respected and financially secure.

The Committee discusses empowerment in three broad contexts. These are:
- home and community life
- labour market
- civic participation.

**Home and community life**

Throughout the report the Committee has made recommendations relating to empowering people in their home and community life. In particular, these relate to:
- improving access to information – through promoting the availability of existing information sources and more effectively coordinating the availability of information
- fostering independence – through enhancing opportunities for older people to live the lives they choose
- encouraging connectedness – through raising awareness of activities and strategies for maintaining connections with family and community
- promoting safety – through addressing financial and physical elder abuse, fraud, physical hazards and building the capacity of older people in responding to these risks
- enabling lifelong learning – through improved systemic approaches to education for people throughout their lives.

**Workforce**

In the context of empowering older people in employment and economic activities, the Committee considered the options for developing and building on existing assets and capabilities of older people. It also considered ways that workplaces can support the role of older people in the labour market.

It heard that people in later life often want to continue contributing to the labour market. Reasons for ongoing participation by older people in the workforce are diverse. Some people have a need to keep working for financial security. Others want to continue contributing, to maintain professional connectedness, and to feel recognised.

The Committee has made recommendations to empower older people in the workplace through:
- changing workplace culture and employer attitudes
- achieving flexible career pathways and opportunities for re-skilling.

**Civic participation**

In assessing the empowerment of people in later life, the Committee considered older people’s capabilities as civic citizens and opportunities for their civic participation. Civic engagement is about how active citizens participate in the
community to improve conditions for others or to help shape the community’s future.\(^3\)

Inquiry participants explained that older people want to feel heard and valued, they want to feel involved in decision making and they want to make a difference to the future.

The Committee has made recommendations to empower older people in their opportunities for civic participation by:

- encouraging people in later life to engage in a community leadership or mentoring role – such as influencing the future and affecting change through the transfer of knowledge and skills
- establishing older people’s champions in local government areas (LGAs) – to promote the contributions of senior in local communities
- introducing a citizens’ assembly (CA) – that is, to provide older people with an opportunity for a direct voice in the political process.

### Changing perceptions of older people and participation

Despite evidence of their vast and diverse contributions, older Victorians face widespread and entrenched ageism in society that manifests in a range of explicit and implicit ways. The Committee determined that to foster people’s participation in later life, changing perceptions of older Victorians is essential.

The Committee determined that the Victorian Government direct a newly appointed Commissioner for Older People to develop and implement a long-term, multi-pronged strategy and monitor its progress. Such a strategy is necessary to achieve cultural change and influence existing social paradigms on ageing.

In exploring current and future strategies, the Committee determined that the following elements of a multi-pronged strategy are critical in tackling ageism and promoting positive attitudes to ageing in Victoria:

- challenging cultural attitudes and media portrayal of ageing through awareness-raising initiatives
- improving intergenerational relationships by adopting an intergenerational strategy, practice and programs
- increasing understanding and encouraging compliance with anti-discrimination legislation.

### Supporting people to plan for continuing participation in later life

The importance of planning for lifelong participation was a strong message in the evidence provided to the Committee. The Committee identified that participation in later years is affected by circumstances, opportunities and decisions made throughout the life course.

The increase in average life expectancy and improvements in the general level of health in later life mean that people can expect their later years to span a longer period of time than past generations, making planning for later life increasingly important. The Committee recognises that planning for later years is a shared responsibility across the community and individuals themselves. It also considered that the government has an important role in encouraging people to plan for later life as part of a broader agenda to foster participation in later life.

The Committee inquired into the value of encouraging Victorians to consider their participation goals in later life and to identify any forward life planning that might contribute to those objectives. It identified three areas in which Victorians can be supported in planning for later life and made recommendations accordingly. These areas are support for:

- maintaining good health for participation in later life and maintaining health in later years
- improving financial security through financial literacy
- planning for long-term retirement goals.

The Committee found that there is value in the Victorian Government focusing on transition points over the life course to promote early planning for later life participation and recommended that critical transition points are identified.

### Achieving age-friendly environments

Countries across the world have committed to creating age-friendly communities in line with the 2007 *Global age-friendly cities guide* developed by the WHO. The Committee identified that some progress has also been made in applying age-friendly concepts in Victoria, particularly in local communities.

While progress has been made in many local areas, the Committee found that there is no ongoing, coordinated or consistent commitment at a state or local level to develop a cohesive, statewide age-friendly strategy. The Committee heard that despite early progress, there is a need to sustain momentum in Victoria. Local councils indicated they are seeking the leadership and support of a statewide age-friendly policy to sustain the effort.

The Committee has recommended that the Victorian Government works towards joining the Global Age-friendly Cities Network and commits to achieving an age-friendly Victoria. The Committee also identified a role for the Victorian Government in supporting LGAs to achieve age-friendly communities in their local area.

To achieve age-friendly environments in Victoria, the Committee recommended improvements to:

- Transport accessibility – through an improved whole of journey approach and increased options for rural and regional areas to help people freely move from one place to another and remain engaged in their community.
- Housing and options for ageing in place – through improved innovation in housing modifications and service integrated housing to enable older people to remain connected to their community.
• Planning for outdoor spaces and buildings – through approaches that promote safety and security and ensure adequate accessibility for older people.

The Committee determined that the government needs to provide more leadership and direction to support the development of age-friendly approaches in Victorian communities.

**Increasing knowledge and understanding**

The Committee determined that any plan to foster the participation of senior Victorians needs to be guided by a sound evidence base. The importance of accessibility to reliable data to inform decision making was highlighted by many participants. Equally, the Committee was informed that research into areas relating to participation and people in later life is critical in assisting policymakers to identify the most appropriate responses.

Over the past 20 years, a growing body of international and Australian literature and research has expanded the evidence base relating to age and ageing. During its Inquiry, the Committee identified a range of Victorian policies, initiatives and programs that have sought to build on this evidence by recognising the importance of participation and the role of societal and environmental factors in ageing well.

The Committee found that there are important gaps in economic and demographic data that currently informs understandings of population ageing in Australia and Victoria. This has implications for determining the most appropriate strategies for increasing participation opportunities for people in later life.

The Committee identified a need to:

• address gaps in data collection, and strengthen the role of quality data in promoting a better understanding of the needs and desires of senior Victorians of different age cohorts and diverse experiences and backgrounds
• support a strategic approach to research that promotes inter-sectoral collaboration and the translation of research into meaningful policy and practice
• support a national research clearinghouse that provides a central location for past, present and upcoming research in relation to ageing and participation.
List of Recommendations by Chapter

Chapter 1: **Who are senior Victorians?**

1.1 The Committee recommends the Victorian Government undertakes a statewide audit of data collection relating to the older population across all departments and develops a coordinated approach to the collection of age disaggregated data.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Victorian Government requests the Commissioner coordinates this task.

1.2 The Committee recommends that the Victorian Government funds a research program that promotes collaboration and encourages practical research.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Commissioner is requested to lead the development of this program.

1.3 The Committee recommends that the Victorian Government works with the Australian Government and other state governments to create a national network of Centres of Excellence in age-friendly community research (as recommended by the Advisory Panel on the Economic Potential of Senior Australians).

Chapter 2: **Participation in later life**

No recommendations.

Chapter 3: **Leadership & coordination – governing approaches to ageing & participation**

3.1 The Committee recommends that the Victorian Government work with the Australian Government to promote the development of a national strategy to achieve an age friendly society that integrates issues relating to support, care, age-friendly environments and participation.

3.2 The Committee recommends that the Victorian Government sets an objective of joining the World Health Organization Global Age-friendly Cities Network, and supports local government authorities to achieve the same goal.

3.3 The Committee recommends that the Victorian Government develops a statewide whole of government strategy for older people that prioritises the following goals and includes a dedicated funding stream:

- leading and coordinating government responses
- empowering senior Victorians and recognising their diversity
- changing perceptions of older people
Recommendations

• supporting older Victorians to plan for later life
• planning for and achieving age-friendly environments
• retaining and improving aged care and support services
• increasing knowledge and understanding of older people.

3.4 The Committee recommends that, as part of the strategic planning process, the Victorian Government incorporates an implementation plan and monitoring framework into the strategy to specify how the goals in the strategy will be achieved, including:

• a staged timeframe outlining the immediate priorities, short-term targets, long term goals and anticipated very long-term outcomes.

3.5 The Committee recommends that the Victorian Government appoints a lead minister for older people to report annually to the Victorian Parliament on the implementation of the strategic plan.

3.6 The Committee recommends that the Victorian Government establishes a central lead agency in the form of a Commissioner for Older People, reporting to the lead minister for older people, and with the authority to:

• oversee activities across agencies and promote joined-up practices and partnership with other levels of government
• assume responsibility for the development and implementation of a whole of government strategy that effectively fosters participation of older people in Victoria.

Chapter 4: Empowering people in later life

4.1 The Committee recommends that the Victorian Government works with the Australian Government and local governments to strengthen and promote existing electronic and written forms of information to support decision making by older people.

4.2 The Committee recommends that, in line with the 2012 Elder abuse guidelines, the Victorian Government:

• works with relevant agencies and industry across the finance, legal and policing sectors to coordinate a multi-sectoral approach to developing protocols for reporting and referring cases of suspected elder abuse
• develops and implements a campaign to raise awareness of elder abuse and how it can be prevented.

4.3 The Committee recommends that the Victorian Government supports evidence-based research and investigation of international best practice for volunteering programmes that ensure maximum participation of older people, and minimise barriers that may prevent volunteering.

4.4 The Committee recommends that the Victorian Government works with stakeholders to develop and implement a workforce strategy for older workers in Victoria that aims to:

• change workforce culture and employer attitudes towards older workers
• achieve flexible vocational pathways for people throughout the life course.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner to monitor the workplace strategy and report to the lead minister for older people.

4.5 The Committee recommends that the Victorian Government works with local government and its representative bodies to provide ongoing opportunities for seniors to be involved in decision-making at the local level through:

• the appointment of ageing well coordinators in all local government areas
• ensuring the ageing well coordinators develop and implement local strategies in line with a Victorian statewide strategy for older people.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the work of coordinators is monitored and reported annually to the Commissioner for Older People.

4.6 The Committee recommends that the Victorian Government works with local governments and their representative bodies to identify Older People’s Champions to take responsibility for promoting issues relating to older people within their municipality.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that Older People’s Champions report annually to the Commissioner for Older People.

4.7 The Committee recommends that the Victorian Government investigates the merits of establishing a Victorian older citizens’ assembly.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner for Older People undertakes this investigation.

Chapter 5: Changing perceptions of older people and participation

5.1 The Committee recommends that the Victorian Government develop and implement an evidence-based, multi-pronged strategy to change perceptions of older people including:

• identifying specific targets
• incorporating an implementation plan
• establishing a monitoring and evaluation framework.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government request the Commissioner to coordinate this strategy.
5.2 The Committee recommends that the Victorian Government develops an evidence-based, targeted awareness campaign to challenge ageist perceptions using a multitude of media and promotion tools in conjunction with other strategies.

5.3 The Committee recommends that as part of an overarching strategy to change perceptions of people in later life, the Victorian Government works with the media industry to reform the portrayal of older people in the media.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner leads this work.

5.4 The Committee recommends that as part of an integrated strategic plan on ageing, the Victorian Government develops an intergenerational strategy that includes:

- collaboration between peak bodies for young people and senior Victorians
- the establishment of an external ‘Centre for Intergenerational Practice’ to progress research and practice in this field.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government request the Commissioner for Older People to coordinate the development of the intergenerational strategy.

5.5 The Committee recommends that the Victorian Government examines employer perceptions about WorkCover premiums in relation to older workers and identifies ways in which these can be addressed.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner undertakes this work.

5.6 The Committee recommends that the Victorian Government collaborates with the Australian Government to educate workplaces and the recruitment industry regarding the benefits of employing older workers, and to encourage the employment of older workers in the recruitment industry.

5.7 The Committee recommends that the Victorian Government works with the insurance industry to remove regulatory and financial barriers for older people in voluntary work.

Chapter 6: Supporting people to plan for continuing participation in later life

6.1 The Committee recommends that the Victorian Government adopts an approach to later life planning that identifies and focuses on key life transition points.

6.2 The Committee recommends that the Victorian Government, as part of its Public health and wellbeing plan, addresses health promotion across
key life transition points that takes into account the age diversity of senior Victorians.

6.3 The Committee recommends that the Victorian Government develops guidelines for concessions to older Victorians to ensure older people are included in strategies to alleviate cost of living pressures for people on low incomes.

6.4 The Committee recommends that the Victorian Government establishes a financial awareness and literacy support program that coordinates with federal programs and supports Victorians to plan for financial security in later life.

6.5 The Committee recommends that the Victorian Government works with stakeholders to:

- develop and implement effective and innovative programs to support workers to plan for and transition to retirement
- review opportunities and identify new pathways to make smoother transitions to retirement for mature aged workers.

Chapter 7: Planning for and achieving age-friendly environments

7.1 The Committee recommends that, in the context of a statewide strategy for older people, the Victorian Government develops and implements an action plan to integrate age-friendly approaches to transport, housing, outdoor spaces and buildings.

7.2 The Committee recommends that the Victorian Government works with the Public Transport Development Authority and consults with older people to develop a strategy to:

- include older people in decision making about transport issues
- assess improvements to safety
- raise awareness of older people's public transport needs, particularly among public transport staff.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner works with the Public Transport Development Authority to develop this strategy.

7.3 The Committee recommends that the Victorian Government requests the Public Transport Development Authority to work in collaboration with relevant government departments and local governments to:

- monitor improvements to transport accessibility
- ensure that interconnected transport services are provided.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner leads the initiative to work with the Public Transport Development Authority.
7.4 The Committee recommends that the Victorian Government:

- conducts a review of community transport models in Victoria to determine a strategic regional approach that encourages community transport availability across council boundaries
- undertakes an audit to identify gaps in the provision of community transport
- promotes innovative solutions to community transport.

7.5 The Committee recommends that, as part of the training for taxi drivers recommended by the Taxi Industry Inquiry, the Government includes training to assist taxi drivers to better respond to the needs of senior Victorians.

7.6 The Committee recommends that the Victorian Government identifies approaches to ensure safety and accessibility associated with scooter use as a mobility aid.

7.7 The Committee recommends that the Victorian Government introduces minimum universal design features in new housing.

7.8 The Committee recommends that the Victorian Government reviews its housing modification scheme to more effectively coordinate services and allow more older people to access housing modification services.

7.9 The Committee recommends that:

- the Victorian Government undertakes a feasibility study of alternative accommodation options such as the Humanitas Apartments for life model and develops a framework to support innovation in service integrated housing for people in later life
- in developing the framework, the Victorian Government works with the Australian Government to ensure a coordinated approach.

7.10 The Committee recommends that, as part of a broader social housing strategy to enable more availability of choice, the Victorian Government develops and implements a plan to promote and monitor innovation in the public and community housing sector to develop age-friendly housing options.

7.11 The Committee recommends that the Victorian Government works with the MAV to develop a Victoria-specific rural and remote age-friendly guide.

7.12 The Committee recommends that the Victorian Government includes sustainable age-friendly planning principles in urban planning legislation that complement existing measures to encourage disability access and healthy environments.
Introduction

International thinking regarding longevity and the life course has informed new policy directions relating to participation and seniors. It involves thinking about seniors in new and different ways, and challenging perceptions of how people participate in society in later life.

In undertaking its Inquiry, the Committee considered the scope of the investigations it needed to undertake and what it means for older people to participate in the Victorian community and its economy.

Inquiry reference

On 10 February 2011, the Parliament of Victoria asked the Family and Community Development Committee to inquire into opportunities for participation of Victorian seniors.

Following its formation in May 2011, the Committee identified that issues relating to population ageing, ageing well and participation by older people have been the subject of a number of reviews, inquiries and consultations over the past two decades.

In 1997, the then Family and Community Development Committee considered the issue of positive ageing in its Inquiry into planning for positive ageing. The Committee’s report was influential in furthering awareness of the diverse needs, interests and concerns of senior Victorians.

The past two decades have also been a time of increased international focus on ageing demographics and the effect on population structures. Since the mid-1990s, the United Nations and the World Health Organization (WHO) have promoted principles for older people and developed new frameworks and guidelines for responding to increased longevity and ageing populations.

Successive Victorian Governments since the mid-1990s have identified that population ageing will continue to have significant implications for Victoria. A range of programs and projects have been undertaken to address issues for older people, including how international guidelines on ageing can be applied in the Victorian context.

The Committee identified that while these projects and programs have been positive, it is timely to revisit the progress made and to identify what future responses are required. Projections of population ageing and greater life expectancy continue to dominate international debate. Furthermore, recent statistics from the Australian Bureau of Statistics (ABS) reveal that Victorians’ life expectancy is high when compared with other states and territories.

The scope for addressing people’s participation in later life is considerable. Periods of retirement are longer than they have ever been, with older people living longer, healthier lives and contributing to society in a multitude of ways.
Opportunities for Participation by Victorian Seniors

Terminology

In considering the participation of people in later life, the Committee identified a need to clarify the terminology that it would be using. These clarifications included a need to:

- identify who ‘senior’ Victorians are – in age and characteristics
- determine what ‘participation’ means – in what ways can seniors participate in Victorian society?

Who are senior Victorians?

The Committee recognises that reaching a definitive explanation of ‘senior Victorians’ is difficult due to the diversity of people in later life. Victorian seniors reflect the diversity of the Victorian community. People in later life vary greatly in age, capacity and needs. They come from a variety of backgrounds and cultures and live in a wide range of communities, from inner urban to rural and remote. Consequently the opportunities and challenges relating to senior Victorians’ participation vary with the diversity of their experience.

Determining the age when a person is considered ‘senior’ or ‘older’ is difficult, particularly when people can be considered senior within an age band that can span a 50 year period. This challenge was touched on by many participants. For example, the Victorian Equal Opportunity and Human Rights Commission (VEOHRC) stated that:

There is no single age that defines the onset of old age. Arbitrary limits of anywhere between 50 and 70 have been used by various programs for various groups of older people. Analysis of patterns of age discrimination at work have tended to refer to people 45 and older. ¹

In the context of government acknowledgement of seniority, people become eligible for a Victorian Seniors Card at 60 years and eligible for the federal Age Pension at 65 years (which will rise to 67 years by 2014). Noting these discrepancies, the Association of Independent Retirees advised that:

It is difficult and perhaps unwise to summarily define ‘seniors’ by age… Many seniors are retiring later or are only partly retiring, choosing to continue in part-time work.

Age is frequently irrelevant to a person’s health, cognitive status, mental health and general wellbeing. ²

The Committee also recognises that the use of terminology to describe people in later life is contested and that terms can be contentious and reinforce negative stereotypes. In his submission Mr Lindsay Doig summarised concerns held about the language that describes seniors:

‘Senior Victorians’ is a convenient term, but it belies the real issue. Deletion of the geographical adjective leaves us with the term ‘seniors’: a mainly pejorative term connoting for many younger people ‘old fuddydudies’ or worse. Other

² Submission 9, Association of Independent Retirees – Southern Cross Division, p. 2.
descriptive terms commonly used include the elderly (simply gross!), pensioners (but most of us aren’t), Baby Boomers (but most of us aren’t), Older Persons (older Victorians), matureaged people (more mature people), Third Agers and perhaps others or variations of these, but all have fundamental problems. 3

Ms Patricia Williams explained to the Committee the challenges in defining senior Victorians:

That’s difficult, you can never please everyone. Perhaps we should have several versions, and people could choose which they preferred. Elders; Golden Oldies; Olders; Oldsters? Older is such a good word – everyone is, everyday. It’s good to remember that. 4

The Committee acknowledges that there are difficulties in defining ‘senior Victorians’ and problems with the language used to describe older people. Yet, to inquire into participation opportunities for people in later life it is necessary to put parameters around the group it is considering.

For the purposes of the report, therefore, the Committee generally refers to senior Victorians as those people aged over 60 years, yet at times it has been necessary to adopt a flexible approach, depending on the context and the information available.

It also refers to Victorian seniors using a range of terms, and in addition to ‘Victorian seniors’ it uses the terms ‘older people’ and ‘people in later life’ throughout the report.

What is participation?

For the purposes of this Inquiry, the Committee considered it important to adopt a definition of participation that focuses on meaningful engagement by senior Victorians, encompassing notions of active ageing and social inclusion.

The Inquiry Terms of Reference refer to participation in three contexts. These are social participation, community participation and economic participation.

The Committee noted the WHO’s definition of participation. It similarly breaks participation into three broad categories:

Social participation refers to the engagement of older people in recreation, socialization, and cultural, educational and spiritual activities. Civic participation and employment addresses opportunities for citizenship, unpaid work and paid work; it is related to both the social environment and to the economic determinants of active ageing. 5

Participation is also influenced by who participates, the level at which they participate and the extent to which they can exercise choice and influence decision making in their participation.

Chapter 2 discusses the participation of Victorian seniors in greater detail.

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3 Submission 53, Doig, p. 5.
Opportunities for Participation by Victorian Seniors

Inquiry process

The Committee undertook a comprehensive research and consultation process to inform its Inquiry, including a study tour to the UK and the Netherlands to identify innovative initiatives in international jurisdictions.

In conducting its Inquiry, the Committee considered the community of older people as a whole rather than focusing on specific groups. The Committee acknowledges that more work needs to be done to address issues for specific groups of senior Victorians.

Background briefings

The Committee invited a range of organisations to participate in briefings to assist in building its understanding of the current issues relating to senior Victorians and their participation opportunities.

These briefings were held on 18 July 2011, 19 July 2011 and 20 July 2011. As a result of the briefings, the Committee increased its understanding of issues relating to the barriers and enablers for participation in later life. It also received background data relating to population ageing and information about international responses to population ageing and creating age-friendly communities.

Submission guide

In view of the broad Terms of Reference informing this Inquiry, the Committee prepared a Submission Guide to assist those who wanted to make a written submission. This was made available on the Committee’s website and was also circulated to those who expressed an interest in submitting to the Inquiry.

The Submission Guide provided an overview of the major issues of relevance to the Committee’s Inquiry. This included a snapshot of how Victoria is ageing and the key barriers to and enablers of participation for people in later life.

It elaborated on the Committee’s Terms of Reference and provided a number of questions that the Committee was interested to hear perspectives on. A copy of the Submission Guide is provided in Appendix 1.

Submissions

A call for submissions was advertised in The Age and the Herald Sun on 2 July 2011. In addition, an advertisement was included in the The Weekly Times on 6 July 2011 seeking regional perspectives.

The Committee extended its invitation for submissions through an extensive database comprising a range of individuals and organisations, such as service providers, advocacy bodies, research institutes and community groups.

The Committee received 93 written submissions from a diverse range of individuals and organisations. These included 35 submissions from individuals and 58 from organisations.
Submitters to this Inquiry included:

- individuals
- service providers
- community service organisations
- advocacy organisations
- local governments
- peak and statutory bodies
- industry groups
- community groups
- academic and research organisations.

In addition to submissions from stakeholders from the greater Melbourne metropolitan area, the Committee received six submissions from stakeholders located in regional and rural areas and a number of submissions from national organisations.

Public hearings

Public hearings were held in Melbourne between September 2011 and December 2011. The Committee heard from a range of organisations, including academics and research groups, industry groups, trade unions, statutory bodies (such as VicHealth and the VEOHRC) and organisations representing the interests of seniors. The Committee also heard from the Department of Health in the Victorian Government.

Regional hearings were held in Bendigo and Geelong in November 2011 to assist the Committee to gain a regional perspective.

In total, 108 witnesses appeared before the Committee, representing 52 organisations.

Additional meetings

The Committee attended a number of additional meetings to further the Committee’s understanding of the relevant issues.

The Committee went to the Australian Capital Territory (ACT) to meet with representatives from the Australian and ACT Governments. The Committee heard information relevant to the Inquiry from the following departments, agencies and individuals:

- Productivity Commission
- Australian Capital Territory Office for Ageing
- Department of Health and Ageing
- Panel on the Economic Potential of Senior Australians
- Office for Ageing Australia
- Department of Education, Employment and Workplace Relations (DEEWR)
- Department of Families, Housing, Community Services, and Indigenous Affairs (FaHCSIA)
- Ms Nolene Brown, Ambassador for Ageing.
The Committee also attended a number of other meetings in Melbourne to further its understanding of the relevant issues for the Inquiry. These were with:

- Dr John Beard, Director of Ageing and the Life Course at the World Health Organization (WHO).
- The Hon Susan Ryan, Age Discrimination Commissioner
- WorkCover, Western Australia (via teleconference).

**Study tour to the United Kingdom and Netherlands**

The Inquiry Terms of Reference ask the Committee to:

Incorporate in the recommendations the best international practice in support of ageing well.

During its deliberations and review of evidence received, in February 2012 the Committee determined that further exploration of international best practice was necessary to validate recommendations it was considering.

The Committee heard from witnesses that initiatives underway in the UK included innovative strategies for addressing ageist attitudes and for effectively engaging older people in decision making processes.

Summary reports produced by the International Federation on Ageing outlined innovative initiatives in both Wales and Scotland, revealing progress in areas including changing attitudes towards older people and whole of government strategies to address population ageing and participation.

The Committee determined that there was considerable value in meeting with officials to discuss the initiatives adopted in these countries and to consider the transferability of the policy approaches.

Many witnesses referred to the *Apartments for life* initiative in the Netherlands.

The Committee identified that this initiative enables older people to remain in their home, regardless of the level of care they require, and that this was particularly relevant to its investigations.

Between 7 May 2012 and 17 May 2012, the Committee travelled to the United Kingdom and the Netherlands to inquire into innovative practices and strategies.

The Committee met with 23 organisations in the following cities:

- Cardiff, Wales
- Edinburgh, Scotland
- London, England
- Amsterdam and Rotterdam in the Netherlands.

This included meetings with the relevant departments in the UK, Welsh and Scottish Governments, the Cross Party Group on Older People, Age and Ageing in Scotland, local governments in Scotland and Wales, local government representative organisations in Wales and England, a number of older people’s advocacy organisations, the Welsh Commissioner for Older People, the UK Equality and Human Rights Commission and research organisations focusing on older people’s issues and intergenerational work.
In Rotterdam and Amsterdam, the Committee undertook site visits to explore innovative approaches to living and care arrangements for seniors that have the potential to improve opportunities for participation of people in later life.

A travel report with greater detail about the Committee’s study tour is available from the Parliament of Victoria.

**Report overview**

The report is structured in seven chapters that seek to address the key themes of the Terms of Reference for this Inquiry. Each of these chapters is briefly outlined below.

**Chapter 1** outlines the increased longevity experienced by Victorians, who senior Victorians are, and their considerable diversity. It also outlines the need for improving knowledge about population ageing in Victoria and Australia through better data collection and the development of strategic and collaborative approaches to research.

**Chapter 2** considers the participation of people in later life, the extensive contribution they make, and the barriers they can experience.

**Chapter 3** explains the policy context, recent international rethinking on longevity and the life course, and a new policy response for the Victorian Government to consider.

**Chapter 4** addresses the importance of empowering senior Victorians to be involved in decision making and to make informed choices about their participation.

**Chapter 5** examines the stigma and perceptions that prevent the full participation of seniors in Victorian society, and strategies for addressing ageism and discrimination.

**Chapter 6** discusses the importance of planning for the future at all stages in the life course, and explores ways that Victorians can be encouraged to plan for later life.

**Chapter 7** outlines the importance of planning for and achieving age friendly environments, based on the framework developed by the WHO.
Chapter One:
Who are senior Victorians?

**FINDINGS:**

That population ageing is leading to a significant social shift in Victoria’s demographic structure, which is part of an international trend.

That older people in Victoria are extremely diverse – including their age, gender, health, cultural background, location, wealth and capacity, and are described in a multitude of ways depending on the data sets used.

That population ageing has implications for Victoria’s future that include increased numbers of people living with a disability, disparity in the spread of older people living in urban and regional areas, and higher demand for health, aged care facilities and home care services.

That population ageing provides a multitude of opportunities, in view of the diverse and considerable contribution of seniors to the Victorian community and economy.

That re-thinking approaches to data collection is essential to ensure that it keeps pace with the changes and improvements to health and longevity.

That while the Australian Bureau of Statistics (ABS) collects data in small age cohorts, nearly all analysis and publication of data collections by government and other bodies relates information in single cohorts of 60-100 or 65-100.

That many Victorian Government departments do not collect age disaggregated data.

That the research on ageing would benefit from a collaborative and strategic approach.

That the translation of research into practice needs to be recognised as an ongoing process to reflect the changing experiences of senior Victorians.
The United Nations states that:

Population ageing – the process by which older individuals become a proportionally larger share of the total population was one of the most distinctive demographic events of the twentieth century...

The shift in age structure associated with population ageing has a profound impact on a broad range of economic, political and social conditions. ¹

Improved health and healthy environments have led to increased life expectancy and longevity in Victoria, nationally and internationally. This increased longevity coupled with lower birth rates is also contributing to population ageing in Victoria. Population ageing is contributing to a significant social shift in Victoria’s demographic structure.

The Committee heard that population ageing presents social and economic opportunities for Victoria. Considering ways to foster the participation of people in later life is a key strategy to take the best advantage of these opportunities.

To understand the changing demographic structure of Victoria’s population, the Committee reviewed the data and evidence received to gain a picture of the population group known as ‘senior Victorians’.

The Committee identified that like all members of the Victorian community, senior Victorians are diverse. They differ in age, gender, health, ethnicity, socio-economic background, living arrangements, family dynamics, location and in a host of other ways.

1.1. Population ageing in Victoria

Population ageing is an international trend, with countries across the world exploring strategies to effectively respond to the changing population structures. Significant achievements in health and longevity have resulted in senior Victorians living longer and healthier lives than ever before.

The rise in life expectancy is a global pattern. Notably, according to United Nations estimates for 2005–2010, Australia’s life expectancy at birth is ranked among the highest in the world. ²

Throughout the twentieth century, reductions in deaths from chronic disease and disability due to medical advances and improved standards of living led to increased life expectancy. ³

While chronic disease continues to be the leading cause of death, there are indications that the death rate from chronic diseases is continuing to decline due to medical advances and screening programs. Risk factors such as smoking,

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excessive alcohol consumption and lack of physical activity and diet, however, continue to contribute to disability and premature death.  

Life expectancy for Victorians has increased dramatically over the last century. As illustrated in Figure 1.1:

- Victorian men can expect to live to an average age of 80.0 years, compared with 55.1 years a century earlier and 68.6 years in 1971.
- Victorian women can expect to live to an average of 84.3 years, compared with 58.5 years a century earlier and 75.2 years in 1971.

Figure 1.1: Life expectancy for Victoria and Australia from 1901 to 2010


According to the March 2011 Australian Bureau of Statistics (ABS) *Social trends*, life expectancy in Victoria is high in comparison with most other states and territories, as illustrated in Figure 1.2.
The data on longevity does not relate to all Victorians. For example, Indigenous people have a lower life expectancy than the general population and the Committee identified that more work is needed to address this.

As shown in Figure 1.3, longevity is projected to have a significant impact on the age profile of Australia over the next several decades. Projections indicate that by 2020, around 22.6 per cent of Australians will be aged 65 or over.  

Similar changes are projected for Victoria. Recent projections by the Department of Planning and Community Development (DPCD) in *Victoria in future 2012* indicate that the proportion of people aged 65 years and older is expected to increase from 13.9 per cent to 22.1 per cent in 2051. The median age of Victoria’s population was estimated to be 37 years in 2011 and is projected to increase to 41 years in 2051.  

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Chapter One: Who are senior Victorians?

FINDING:
That population ageing is leading to a significant social shift in Victoria’s demographic structure, which is part of an international trend.

1.2. Senior Victorians in context

Against this background, the Committee considered what the ageing population may mean for senior Victorians. This section aims to put some context around the experience of senior Victorians in terms of the key events and developments that have shaped their lives. It also aims to illustrate the variability of when a person might be considered ‘senior’.

1.2.1. Generational diversity in ageing

Over the past century, rising standards of living, better access to education and nutrition and significant shifts in medical and technological advances have given rise to vast diversity in successive generations of seniors.

Communication has also changed greatly over the past few decades. For example, while radio and television dominated communication for the oldest generation of seniors, successive generations of seniors are more likely to be familiar with internet, mobile technology and social media.

These diverse experiences have implications for the way in which these different generations experience participation in later life.
1.2.2. When is a person considered ‘senior’?

Clearly there is great variation in the age at which people are considered ‘senior’. Generally people are increasingly considered senior from the age of about 60 years. With many people living beyond 100 years of age, the Committee found that the senior age bracket can span around 40 years. Participants informed the Committee that despite the vast differences in age, older people are frequently considered to belong to the same age group. The implications of this are discussed further in Section 1.14.

Table 1.1 outlines some of the different stages at which people enter new phases of being a senior.

Table 1.1: When is a person considered senior?

<table>
<thead>
<tr>
<th>Age</th>
<th>Determinant</th>
</tr>
</thead>
<tbody>
<tr>
<td>At 50?</td>
<td>Health promotion initiatives tend to focus on those 50 years and over. Membership in seniors organisations tends to be available for those aged 50 and over.</td>
</tr>
<tr>
<td>At 55?</td>
<td>Lenders may require evidence of an exit strategy before approving mortgage applications. Eligibility for a mature age worker tax offset from the age of 55. People can become eligible to withdraw superannuation savings from the age of 55.</td>
</tr>
<tr>
<td>At 60?</td>
<td>The World Health Organization (WHO) Active Aging Policy Framework refers to ‘older people’ as over the age of 60. People over 60 who are fully or partly retired are eligible for a Victorian Seniors Card. People over 60 are eligible to be nominated for the Senior Victorian of the Year award. In 2006, the ABS identified five generations as a framework for analysing census data: the ‘baby boomers’ were identified as those born between 1946 and 1966 (45-65 years of age in 2011).</td>
</tr>
<tr>
<td>At 65?</td>
<td>Many Australian government publications (eg. the Intergenerational report 2010) refers to a cohort of people aged 65 and over, with 65 years currently being the pension eligibility age for men (and for women from 2014), rising gradually to 67 between 2017 and 2024. People of pension age who don’t qualify for the pension may be eligible for a Commonwealth Seniors Health Card. Community and residential aged care services tend to cater to those aged 65 years and over. Free influenza injections are available for those aged 65 years and over. According to the ABS, the Lucky Generation was identified as those born between 1926 and 1946 (65-85 years of age in 2011).</td>
</tr>
<tr>
<td>At 70?</td>
<td>70 is currently the age limit for compulsory employer superannuation contributions, although this threshold will be abolished from 1 July 2013.</td>
</tr>
</tbody>
</table>

Chapter One: Who are senior Victorians?

<table>
<thead>
<tr>
<th>Age</th>
<th>Determinant</th>
</tr>
</thead>
<tbody>
<tr>
<td>At 75?</td>
<td>Medicare funds ‘Over 75 Years Health Assessments’ through general practitioners.&lt;br&gt;Much of the emphasis in aged care assistance and support tends to be geared to those over the age of 75.&lt;br&gt;From 75 years of age or older, VicRoads has the discretion to only grant 3-year licence renewals (instead of the usual 10 year renewal).</td>
</tr>
<tr>
<td>At 80?</td>
<td>People over 80 years old may be required to provide medical declarations for travel insurance.</td>
</tr>
<tr>
<td>At 85?</td>
<td>According to the ABS, the Oldest Generation was identified as those born before 1926 (85+ years of age in 2011).</td>
</tr>
</tbody>
</table>

Source: Family and Community Development Committee

1.3. Diversity of senior Victorians

Senior Victorians reflect the diversity of the Victorian community. People in later life vary greatly in age, capacity and needs. They come from a variety of backgrounds and cultures and live in a wide range of communities, from inner urban to rural and remote. The Committee recognises that the opportunities and challenges relating to senior Victorians’ participation vary with the diversity of their experience.

The Terms of Reference of this Inquiry asked the Committee to:

- Consider the specific and different issues faced by men and women, older Victorians from different age cohorts, and those living in rural and regional areas.
- Examine the contribution of, and challenges facing, older members of the Victorian community from diverse cultural and linguistic backgrounds.

Information the Committee received suggested that diversity for seniors extends beyond gender, cultural and socio-economic background and locality. The Committee also learned that specific and different issues were experienced by seniors of different ages and capacities. Taking a life course approach, it found that the specific and different issues of seniors were determined more by older people’s varying capacity than their ‘age cohort’.

FINDING:

That older people in Victoria are extremely diverse – including their age, gender, health, cultural background, location, wealth and capacity, and are described in a multitude of ways depending on the data sets used.
1.4. **Age**

According to the 2011 Census, there are currently around 761,500 people aged 65 years or over in Victoria, making up 14.2 per cent of Victoria’s population. The age distribution of Victoria’s population is illustrated in Figure 1.4.

![Figure 1.4: Victoria’s population (people aged 65 years and over)](source)

Demographic data shows that senior age cohorts are projected to increase at different rates. For example, according to the 2010 Intergenerational report, by 2050 the number of people between 65 years of age and 85 years of age in Australia is expected to double, while the number of people over 85 years of age is expected to more than quadruple. 10

Victorian population changes mirror national trends. As mentioned, DPCD has indicated that the proportion of people living in Victoria aged 65 years and older is projected to increase from 13.9 per cent to 22.1 per cent in 2051. The greatest proportional change is expected to be seen in the number of Victorians aged over 85 years, which is projected to quadruple by 2051 to an estimated 400,000. 11

The Committee observed that data about senior Victorians is rarely disaggregated, with senior Victorians tending to be treated as a single age group. Disaggregated data that would assist in understanding the participation requirements in different age cohorts is particularly difficult to locate. Section 1.14 considers issues relating to data collection and age in greater detail.

The importance of considering diversity in age was stressed to the Committee. For example, Ms Joan Leslee commented:

> With an age range from (approximately) 55 to 105, seniors are really in two generations, each one with vastly differing needs and abilities. 12

Participants highlighted a range of ways in which this diversity of senior age groups can have an impact. For example:

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12 Submission 60, Leslee, J., p. 1.
• People who are currently in their sixties are more likely to be in good health and be more confident in using technology than older groups. 13 They are more likely to be working, and to have different expectations of retirement and later life than seniors in previous generations. Changing expectations about participation are expected to become more pronounced as the ‘baby boomers’ approach retirement. 14

• People in their nineties are more likely to have experienced bereavement and to have lost friendship networks. 15 Older seniors are also more likely to rely on support services and accessibility design features in the home and the built environment to enable their participation.

Age can affect how older people plan for their future participation. Ways in which people can be supported to plan for their continuing participation in later life are discussed in Chapter 6.

1.5. Gender

Life expectancy for older men and older women differ, with women generally outliving men, as shown in Figure 1.5. In recent decades, however, this gender gap has been narrowing.

Victoria’s total population has a more or less equal gender balance (98.3 males for every 100 females, as at 30 June 2011). In the oldest age groups, however, women represent a larger proportion of that population group. 16

Figure 1.5: Projected Population for Victoria

![Projected Population for Victoria](image)


13 For example, see Transcript of evidence 21, Association of Independent Retirees, Melbourne, 5 October 2011, p. 5.
14 For example, see Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 8.
15 For example, see Transcript of evidence 10, Victorian Health Promotion Foundation (VicHealth), Melbourne, 9 September 2011, p. 8.
The different issues experienced by senior men and women with regard to their participation are discussed in Chapters 2, 5 and 6.

1.5.1. Senior women

According to the 2011 Census, there are 417,041 women over 65 living in Victoria, around 8 per cent of Victoria’s total population. 18

As noted above, Victorian women generally have a higher life expectancy than men. On average, Victorian women can expect to live until the age of 84.1 years, around four years longer than men, and are likely to enjoy better health than men. 19 As can be seen from Figure 1.5 above, women outnumber men in all the senior age cohorts. According to the 2011 Census, the difference is particularly pronounced for people over the age of 85, with Victorian women making up almost double the number of Victorian men in that age group (68,734 women compared with 36,263 men). 20

The research suggests that the gendered roles and expectations of women in our society significantly affect women’s experiences and participation in later life. This includes a greater likelihood of surviving a partner in the older age cohorts and being more likely to live alone in later years.

1.5.2. Senior men

According to the 2011 Census, there are 344,541 men over 65 living in Victoria, around 6.5 per cent of Victoria’s total population. 21 While, the gap is closing, men still have a lower average life expectancy than women (around 80 years, compared with 84.1 for women). 22

The Committee heard that men’s experiences are often different from those of women in later life. For example, men have a greater likelihood of health issues than women in later life. They are also likely to experience higher levels of serious chronic illness, more likely to suffer depression and are at higher risk of suicide. 23

1.6. Changing families and households

The Committee observed that over time the composition of families and households has changed.

Changes in the make-up of families and households have also contributed to an increase in the number of older people living in single person households. According to the 2011 Census, 27.3 per cent of Victorians over the age of 65 years live in lone person households (around 180,000 people). This percentage increases markedly for older age groups, with 48.3 per cent of Victorian seniors aged 85 years and over living in lone person households (around 35,031 people). This is compared with

18 ABS 2011 Census
19 ABS 2011 Census.
21 ABS 2011 Census.
20.3 per cent of those aged between 65 and 74 years and 32.8 per cent of those aged between 75 and 84 years. 24

As shown in Figure 1.6, data from the ABS shows a projected significant increase in the number of older people living alone in Victoria. In 2006, 137,698 older Victorians (over the age of 65 years) were living alone. This is projected to increase to around 340,000 by 2031. Figure 1.6 also highlights that the number of older women living alone is projected to increase at a higher rate than the number of older men living alone.

**Figure 1.6: Projections of number of Victorians living alone, by age**

Greater separation across generations is influencing how and where senior Victorians live. The Committee observed an increased trend in the uptake of age specific accommodation by senior Victorians. Retirement villages in particular have been responding to growing demand for leisure and service based retirement living.

The Committee observed that living arrangements relate to social connectedness and this is discussed further in Chapter 4. Issues regarding housing and accommodation options for senior Victorians are discussed further in Chapter 7.

### 1.7. Locality

While the population of Victoria overall is ageing, the Committee notes that age distributions vary across different localities. Demographics show that the proportion of people aged over 65 is higher in regional Victoria than in...

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Metropolitan Victoria. According to the 2011 Census and DPCD’s recent report *Victoria in future 2012*:

- In the Melbourne Statistical Division:
  - The percentage of people aged 65 years or over was 13.1 per cent in 2011 (around 524,500 people).
  - The percentage of people aged 65 years or over is expected to increase to approximately 17.5 per cent in 2031 (around 947,200 people).
  - 18 of 31 LGAs within the Melbourne Statistical Division are projected to have a higher than average proportion of people aged 65 years and over by 2031.
  - The highest projected proportions are expected in Mornington Peninsula (29 per cent), Knox (23.9 per cent), Manningham (23.8 per cent) and Maroondah (23.5 per cent).  
- In regional Victoria:
  - The percentage of people aged 65 years or over was 17.6 per cent in 2011 (around 236,500 people).
  - The percentage of people aged 65 years or over is expected to increase to approximately 24.5 per cent in 2031 (around 469,000 people).
  - 34 of 50 regional LGAs are projected to have a higher than average proportion of people aged 65 years and over by 2031.
  - The highest projected proportions are expected in Queenscliffe (44.2 per cent), Alpine (36.8 per cent), Yarriambiack (36.6 per cent) and Central Goldfields (36.5 per cent).

### 1.7.1 Senior Victorians living in urban areas

The experience of older people in cities has been the subject of significant attention in Australia and internationally, driven by increasing trends in urbanisation. While cities generally have a younger average demographic than rural and remote regions, the actual number of seniors living in metropolitan areas in Victoria is considerable and on the increase.  
While the actual number of seniors living in metropolitan areas in Victoria is considerable and on the increase, according to the 2011 Census, approximately 524,500 people aged 65 years and over were living in areas within the Melbourne Statistical Division in 2011.

Within metropolitan areas, communities with relatively older population distributions are generally found in established inner suburbs. For example, a 2009 report prepared by the DPCD Spatial Analysis and Research Branch for the Victorian Environmental Assessment Council notes that the proportion of people over the age of 65 years in inner suburban areas is greater than 15 per cent.

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as compared with outer suburban and developing suburbs in which people over 65 years of age can make up 8 per cent or less of the population. The World Health Organization (WHO) Global age-friendly cities guide addresses the participation needs of older people living in urban environments, and is discussed further in Chapters 3 and 7.

1.7.2. Senior Victorians living in rural and regional areas

Rural and regional communities tend to have a greater concentration of older Victorians. As at June 2010, the proportion of people aged 65 years and over in Melbourne was estimated to be around 12.7 per cent, compared with 16.4 per cent in regional Victoria. According to the 2011 Census, approximately 236,500 people aged 65 years and over were living in regional Victoria in 2011.

The Committee was informed that rural communities are more likely to experience higher rates of population ageing due in part to these areas attracting senior Victorians looking for a ‘tree change’ or ‘sea change’, while a proportion of the younger rural and regional residents relocate to urban areas to seek education and employment.

Specific issues experienced by seniors living in rural and regional areas are discussed in more depth in Chapter 7.

1.8. Income and socio-economic background

Senior Victorians represent people from diverse socio-economic backgrounds. Later life represents significant income changes for many people. A 2011 report by the AIHW, Older Australia at a glance, identified that 62.4 per cent of Australians aged between 55 and 64 years report wages, salaries and business income as their principal source of income, dropping to 12.8 per cent for those aged between 65 and 74 years. In contrast, 97.7 per cent of people aged 75 years and over report government pensions and retirement income from superannuation and investments as their principal source of income.


30 Transcript of evidence 22, Professor Wells, Y. & Professor Warburton, J., Australian Institute for Primary Care & Ageing - La Trobe University, Melbourne, 5 October 2011, p. 3. See also Transcript of evidence 44, City of Greater Geelong, Geelong, 4 November 2011, p. 2; Submission 63, Golden Plains Shire & Women’s Health Grampians, p. 3.

Table 1.2 shows the way in which income sources vary among age groups.

Table 1.2: Weekly household income and principal source of household income by age group of reference person, 2005–06, Australia

<table>
<thead>
<tr>
<th>Age of reference person in household (years)</th>
<th>55–64</th>
<th>65–74</th>
<th>75+</th>
<th>All households</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Weekly household income</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean gross weekly household income ($)</td>
<td>1,279</td>
<td>668</td>
<td>526</td>
<td>1,305</td>
</tr>
<tr>
<td>Median gross weekly household income ($)</td>
<td>989</td>
<td>472</td>
<td>421</td>
<td>1,040</td>
</tr>
<tr>
<td>Mean equivalised disposable household income (person-weighted) ($ per week)</td>
<td>708</td>
<td>451</td>
<td>406</td>
<td>644</td>
</tr>
<tr>
<td>Median equivalised disposable household income (person-weighted) ($ per week)</td>
<td>611</td>
<td>362</td>
<td>331</td>
<td>563</td>
</tr>
<tr>
<td><strong>Proportion of households by principal source of household income (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wages/salaries or income from own unincorporated business</td>
<td>62.4</td>
<td>12.8</td>
<td>2.3</td>
<td>65.4</td>
</tr>
<tr>
<td>Government pensions and allowances</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retirement pensions</td>
<td>4.9</td>
<td>60.1</td>
<td>65.3</td>
<td>13.4</td>
</tr>
<tr>
<td>Other pensions</td>
<td>19.6</td>
<td>5.3</td>
<td>11.5</td>
<td>12.7</td>
</tr>
<tr>
<td>Total government pensions and allowances</td>
<td>24.5</td>
<td>65.4</td>
<td>76.8</td>
<td>26.1</td>
</tr>
<tr>
<td>Other income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superannuation or annuities</td>
<td>6.1</td>
<td>14.4</td>
<td>11.3</td>
<td>3.7</td>
</tr>
<tr>
<td>Investments and other income</td>
<td>6.3</td>
<td>7.2</td>
<td>9.6</td>
<td>4.3</td>
</tr>
<tr>
<td>Total other income</td>
<td>12.4</td>
<td>21.6</td>
<td>20.9</td>
<td>8.0</td>
</tr>
<tr>
<td>Zero or negative income</td>
<td>0.8</td>
<td>0.1</td>
<td>0.0</td>
<td>0.5</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>


As shown in Figure 1.7, the spending patterns of older people are significantly affected by income. The 2010 ABS household expenditure survey indicated differences in discretionary spending patterns of those who received an aged pension compared to all Australians aged 65 and over. On average, Australians receiving the aged pension spent just over $70 per week on recreation (including spending on health and fitness, day trips and holidays) and almost $66.50 a week on transport. This compares to almost $109 per week that all Australians aged 65 and over spend on recreation and just over $92 per week that all Australians aged 65 and over spend on transport.
The Committee was informed about a range of issues experienced by senior Victorians from low socio-economic backgrounds, and these are discussed in Chapters 6 and 7.

1.9. Cultural and linguistic diversity

Demographics indicate that more than 30 per cent of Australian seniors 65 years and over are overseas born. Overseas born senior Victorians are a highly diverse group. They may be from English or non-English speaking countries. They may have arrived in Australia earlier in their life and aged here, or they may have come to Australia in advanced age (for example, to reunite with family).

Some non-English speaking communities may be experiencing higher than average numbers of older people due to waves of working age migration from certain countries reaching senior status. For example, Italian and Greek populations are currently the two highest groups of non-English speaking seniors and have the highest numbers of seniors in the older cohorts (80 and over).

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35 National Seniors Australia (2011) The ageing experience of Australians from migrant backgrounds, Canberra, National Seniors Australia, p. 13. Transcript of evidence 22, Professor Wells, Y. & Professor Warburton, J., Australian Institute for Primary Care & Ageing - La Trobe University, Melbourne, 5 October 2011, p. 3.
However, this is changing as the next waves of migration (eg. Vietnamese, Hong Kong, Malaysian) enter older age groups. Figure 1.8 shows the Victorian LGAs with the highest proportion of residents from culturally and linguistically diverse (CALD) backgrounds aged over 65 years.

**Figure 1.8: Proportion of CALD resident aged 65 years and over in Victorian LGAs**


Seniors from some non-English speaking countries are likely to have strong family networks, are more likely to be still married and living with family, and helping to look after grandchildren and older family members. They are also less likely to be living in institutional care than Australian born seniors.

Conversely, language barriers combined with a high dependence on family can result in limited social networks and increase the risk of isolation. The Committee heard that older people from CALD backgrounds can experience specific barriers to participation, particularly those from non-English speaking backgrounds. Issues experienced by CALD seniors are discussed in Chapters 4 and 5.

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36 *Supplementary evidence 30A*, Australian Bureau of Statistics, p. 5.
1.10. Indigenous seniors

The Committee noted that Indigenous seniors face particular participation challenges. According to the 2011 Census, Indigenous people make up 0.2 per cent of Victorians 65 years or over (1,627 out of a total of 761,582 Victorians over the age of 65). This is compared with Indigenous people making up 0.8 per cent of Victorians under the age of 65. 37

ABS estimates for the period 2005 to 2007 indicate that life expectancy for Indigenous Australian men is around 67.2 years, and for Indigenous women around 72.9 years. This is approximately 10 years below that of the total population. 38

The Committee suggests that these demographics be taken into account in future policy development.

1.11. Diverse capacity and needs

The functional capacity of senior Victorians can vary widely and this has significant implications for their participation needs. While overall levels of health and functioning amongst seniors has improved markedly over the past century, many seniors experience a range of physical, psychological or cognitive challenges at some point in their lives. 39

Inquiry participants pointed out that the diversity of physical and cognitive ability amongst seniors has significant implications for access to aged care services. Furthermore, this diversity heightens the need for variety in participation options and the importance of accessibility features in homes and in the built environment for the participation of seniors of all capacities.

Although challenges in health and capacity can occur at different life stages, the Committee was informed that older cohorts of senior Victorians are at higher risk of experiencing a range of physical and cognitive challenges.

As shown in Figure 1.9, levels of disability are significantly higher in older age groups, with around 48 per cent of Australians over 60 reporting a disability, increasing from 36 per cent of people in the 60–64 age bracket to 48 per cent of those aged 70–74 and 88 per cent of those aged 90 and over. Figure 1.9 also indicates that between 2003 and 2009 the percentage rates of disability declined in almost every age group. However, the actual number of people aged over 65 years who experienced disability increased by 160,200 between 2003 and 2009.

37 ABS 2011 Census.
The 2011 Census also shows that the need for assistance for core activities increases markedly in later life. The percentage of people in Victoria needing such assistance increases from 9.0 per cent for those aged between 65 and 74 years, to 21.8 per cent for those aged between 75 and 84 years and 48.0 per cent for those aged 85 years and over.

1.12. Health

Many older people rate their own health as good, very good or excellent. Table 1.3 shows the self-reported health status of Australians aged 55 years and over, as presented in the AIHW’s report Older Australians at a glance. Self-reported health is an indicator of general health and wellbeing.

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41 ABS 2011 Census.
Table 1.3: Self-reported health status of Australians aged 55 years and over

<table>
<thead>
<tr>
<th></th>
<th>55–64</th>
<th>65–74</th>
<th>75+</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Males</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent / very good</td>
<td>46.8%</td>
<td>36.2%</td>
<td>28.7%</td>
<td>33.1%</td>
</tr>
<tr>
<td>Good</td>
<td>27.8%</td>
<td>31.0%</td>
<td>34.7%</td>
<td>32.5%</td>
</tr>
<tr>
<td>Fair/poor</td>
<td>25.4%</td>
<td>32.8%</td>
<td>36.5%</td>
<td>34.3%</td>
</tr>
<tr>
<td><strong>Females</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent / very good</td>
<td>47.7%</td>
<td>41.2%</td>
<td>33.3%</td>
<td>37.5%</td>
</tr>
<tr>
<td>Good</td>
<td>28.8%</td>
<td>30.0%</td>
<td>32.4%</td>
<td>31.1%</td>
</tr>
<tr>
<td>Fair/poor</td>
<td>23.6%</td>
<td>28.7%</td>
<td>34.3%</td>
<td>31.3%</td>
</tr>
<tr>
<td><strong>People</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent / very good</td>
<td>47.2%</td>
<td>38.8%</td>
<td>31.3%</td>
<td>35.5%</td>
</tr>
<tr>
<td>Good</td>
<td>28.3%</td>
<td>30.5%</td>
<td>33.4%</td>
<td>31.8%</td>
</tr>
<tr>
<td>Fair/poor</td>
<td>24.5%</td>
<td>30.7%</td>
<td>35.2%</td>
<td>32.7%</td>
</tr>
</tbody>
</table>


AIHW’s report Older Australians at a glance shows that the most common causes of death for older people relate to chronic illness and disability, such as heart disease, diabetes, cancer and diseases involving strokes. In addition, certain causes of death become more prevalent in older seniors age groups, such as kidney failure, influenza and pneumonia.

The 2012 Australia’s health report published by the AIHW identified that injury resulting from falls accounted for the majority of all hospitalisation among people aged 65 years and over. 43

The report also estimated that mental health and behavioural problems such as depression affect 8 per cent of older people living in the community and has been reported to be 25 per cent amongst older people living in permanent residential aged care. 44

Alzheimer’s Australia highlighted to the Committee the increasing prevalence of dementia in Victoria. 45 A 2011 report prepared by Deloitte Access Economics for Alzheimer’s Australia, Dementia across Australia: 2011–2050 shows there are currently almost 72,000 people living with dementia in Victoria, and that this is expected to increase to approximately 98,000 in 2020 and 246,000 in 2050. 46

Health indicators and the participation of senior Victorians in physical activity are discussed in greater detail in Chapter 6.

45 Transcript of evidence 37, Alzheimer’s Australia – Victoria, Melbourne, 21 October 2011, p. 2.
1.13. **Implications of population ageing in Victoria**

Population ageing has many and far-reaching implications. Increasing numbers of older people have been linked with a rise in the numbers of people living with a disability, higher demand for health services, aged care facilities and home care services. Furthermore, some regions of Victoria are expected to be more strongly affected by ageing demographics than others, particularly rural and regional areas.

The Committee considers that a strategy to encourage continuing participation of older Victorians is critical to the wellbeing of Victoria as a whole. This is discussed in depth in Chapter 2.

**FINDINGS:**

That population ageing has implications for Victoria’s future that include increased numbers of people living with a disability, disparity in the spread of older people living in urban and regional areas, and higher demand for health, aged care facilities and home care services.

That population ageing provides a multitude of opportunities, in view of the diverse and considerable contribution of seniors to the Victorian community and economy.

1.14. **Increasing knowledge and understanding about ageing**

The Committee found that there are important gaps in economic and demographic data collection and reporting that currently informs understandings of population ageing in Australia and Victoria. This has implications for determining the most appropriate strategies for increasing participation opportunities for people in later life.

The Committee heard that data collection approaches have not kept pace with the significant increase in longevity, improvements in health and wellbeing and widespread evidence about the diversity of older people. Therefore there is a need to adjust data collection and dissemination approaches to better take into account the fact that:

- older people are not a homogenous group, but instead represent a broad population with diverse needs, concerns and preferences
- improvements in health and longevity have meant that many older people can expect to live several decades past the age when they are expected to retire from formal work.

Furthermore, the Committee identified the need for a collaborative approach to research in the ageing field, and the need to ensure that research is able to be translated into practice.
1.14.1. Addressing the lack of data disaggregation

The Committee determined that better data disaggregation can be achieved with more detailed analyses of existing Census data and other existing data sources. However, equally important are improvements to data collection processes by government bodies and organisations that deliver services and programs.

The Committee found that analysis and publications of data by government and other bodies generally represent older people as a single group. For example, as noted by the ABS, although Australian Census data can be disaggregated across all age ranges, ABS publications generally combine those aged 65 years and over. This can represent a span of around 30 to 40 years, in stark contrast to data relating to people under the age of 65, which is widely available in much smaller age groups, generally spanning 10 years.

Commenting on this issue, the Victorian Department of Health, Aged Care Division said:

Increasing longevity means that the age spectrum of senior Victorians spans a very wide range – over 40 years. We would like to see greatly improved data collection of differentiated data for people aged over 60, because we really need to differentiate between the characteristics and issues for people aged 62 to 100. That is essential for effective research and needs analysis at the moment. A lot of information might be simply 60 plus or 65 plus, and unfortunately it often varies in where it starts. If we only report on one large aged cohort, that will mask a lot of different issues for people at different ages and will limit the information we have about emerging trends and services and demand. There is a lot of inconsistency in the way that is done. Obviously planning, both across government and the individual service areas, would be significantly improved if we understood more about that. 48

1.14.2. Improving data collection processes

The Committee supports more robust collection and dissemination of data with respect to participation of senior Victorians in a range of settings. While data generally tends to focus on the services provided, the Committee advocates for measures that focus more on engagement and outcomes. This includes exploring the diverse pathways for participation by older people in the community and in aged care settings.

Essential to effective data collection processes is careful design that is able to sustain ongoing data collection. Also important is ensuring that the design of data collection allows meaningful comparison against baseline data indicators, across data sets and over time. Ensuring that data collection mechanisms employ uniform age cohorts and definitions would enable comparison of robust data to better understand how senior Victorians can be supported to participate. The Committee supports the notion of a central repository for aged care data, as recommended by the Productivity Commission. It considered that a statutory state body could play a significant role in coordinating data collection with respect to senior Victorians more broadly and in making it publicly available.

48 Transcript of evidence 52, Department of Health, Melbourne, 5 December 2011, p. 6.
FINDINGS:
That re-thinking approaches to data collection is essential to ensure that it keeps pace with the changes and improvements to health and longevity.

That while the ABS collects data in small age cohorts, nearly all analysis and publication of data collections by government and other bodies relates information in single cohorts of 60-100 or 65-100.

That many Victorian Government departments do not collect age disaggregated data.

RECOMMENDATION 1.1:
The Committee recommends the Victorian Government undertakes a statewide audit of data collection relating to the older population across all departments and develops a coordinated approach to the collection of age disaggregated data.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Victorian Government requests the Commissioner coordinates this task.

1.14.3. Collaborative and strategic approach to research
Participants in the Inquiry called for a collaborative and strategic approach to research. The Committee notes that collaboration has been long recognised as an aspiration in the field of ageing research. For example, the 2003 Framework for an Australian ageing research agenda noted that:

One key development has been the strengthening emphasis by the NHMRC and ARC on collaboration, cross disciplinary work, research networks and capacity building. This strategic direction is clearly articulated in the National Research Priorities and is welcome support for the directions set by the Building Ageing Research Capacity (BARC) Steering Committee in efforts to build Australia’s ageing research capacity. 49

The Australian Association of Gerontology (AAG) also told the Committee about the importance of supporting stakeholders from different sectors to work together:

When it comes to ageing research, particularly in Victoria, how do you bring all the voices together? As you do in any area, you get a lot of competition for research dollars, government funding or evaluation money, but how do you get the medical, the psychosocial and the local council and the playgroup all working together? 50


The Committee considered that ageing research would benefit from a national strategic framework and notes the recent collaboration between the AAG and the National Health and Medical Research Council (NHMRC) to develop a National Ageing Research Agenda.  

**FINDING:**

That the research on ageing would benefit from a collaborative and strategic approach.

### 1.14.4. Translation into practice

The Committee supports a mechanism for the translation of ageing research into practice. Translation of research evidence into policy and practice was central to the WHO Active Ageing Framework, and provided significant impetus for evidence based policy on ageing worldwide. As noted in the Active Ageing Framework:

> Active ageing depends on a variety of influences or ‘determinants’ that surround individuals, families and nations. Understanding the evidence we have about these determinants helps us design policies and programmes that work.  

Inquiry participants advocated for the development of mechanisms to disseminate and translate research findings in ways that ensure increased uptake and application of knowledge by policy makers and practitioners. In addition, the Committee considered that mechanisms to facilitate the communication of research to community and private sectors would also be of benefit in fostering the participation of senior Victorians. Sustaining this dialogue should enable ongoing translation to occur as evidence and policy evolve over time, reflecting the changing experiences of senior Victorians.

The Committee determined that care should be taken to ensure that policy makers have access to a breadth of evidence, spanning social and environmental issues. For example, as noted by Professor Kendig and Professor Browning:

> The usefulness of knowledge about ageing can be enhanced by multidisciplinary efforts and translation of findings into policy, practice applications and public awareness. One priority concerns the psycho-social factor underlying behavioural risk factors and self management of chronic disease. Another is to shed light on the ‘structural’ factors in work, economic resources, and environmental exposures that influence inequalities in health and other life outcomes.

The Committee also considered that communication of research to the broader community is important. This is particularly pertinent to tackling ageist assumptions about the participation of senior Victorians, as dealt with in Chapter 5.

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FINDING:

That the translation of research into practice needs to be recognised as an ongoing process to reflect the changing experiences of senior Victorians.

RECOMMENDATION 1.2:

The Committee recommends that the Victorian Government funds a research program that promotes collaboration and encourages practical research.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Commissioner is requested to lead the development of this program.

1.14.5. Establishing a research clearinghouse

The Committee determined that there would be significant benefit in the Victorian Government supporting the establishment of a national clearinghouse or repository for research on ageing. A well designed and comprehensive online clearinghouse would encourage a cross-disciplinary and collaborative approach to ageing research. It would also assist policy makers to access current evidence to better address the needs of older people.

The Committee identified that the establishment of similar resources have been supported by the Productivity Commission and the Advisory Panel on the Economic Potential of Senior Australians. 54

RECOMMENDATION 1.3:

The Committee recommends that the Victorian Government works with the Australian Government and other state governments to create a national network of Centres of Excellence in age-friendly community research (as recommended by the Advisory Panel on Economic Potential of Senior Australians).

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Chapter Two: Participation in later life

FINDINGS:

That participation has benefits for older people’s connectedness, financial independence, health and wellbeing.

That older people’s participation in the community contributes to social capital and community strength.

That economic participation by older people is essential to Victoria’s economic vitality.

That senior Victorians participate in a multitude of ways that include social, economic and community benefits.

That there are barriers for older people participating and benefiting in later life.
The Inquiry Terms of Reference ask the Committee to investigate opportunities for participation by people in later life. The terms refer to contexts including social, community and workforce participation.

With increased longevity, there is value in fostering rates of participation by people in later life to enhance quality of life, maintain a general sense of connectedness and sustain health and wellbeing. The Committee identified that older people already participate in a multitude of ways that include informal socialising, caring, volunteering and paid work.

The Committee found that participation by people in later life has numerous benefits for society broadly. In addition to the benefits to individual older people, such participation contributes to community strength and social capital and to the Victorian economy.

Based on its findings, the Committee determined that there is a strong basis for supporting policy responses that aim to build the participation of people in later life.

### 2.1. Longevity and quality of life

Many Inquiry participants highlighted the longevity people in Australia now experience. As outlined in Chapter 1, improved health interventions have resulted in longer lives. This longevity has also come at a time when new understandings of ageing are emerging and people’s expectations of how they want to live later in life are changing.

Participants told the Committee that increased longevity is interrelated with quality of life, and that the quantity of years lived by people should not be considered in isolation from quality of life. Critically, expectations of generations about how they will participate in later life can differ. Researchers are anticipating, for example, that the expectations of ‘baby boomers’ in retirement will differ from those of earlier generations. In a research paper in 2004, Judith Healey stated that ‘future generations of older people will have higher expectations of life than previously.’

This is likely to relate to how older people want to live in later life, the extent they want to participate and the range of ways they expect to be involved in society.

Consideration of the opportunities for ongoing participation in later life is therefore important when considering population ageing and longevity. As Chapter 3 outlines, fostering opportunities for participation of seniors is an emerging policy response by governments to population ageing.

Understanding participation is interconnected with concepts relating to quality of ageing. Many different terms have been used to describe quality of ageing, such as successful ageing, healthy ageing, positive ageing and productive ageing. The meaning of the terms varies depending on the context in which they are used. Given the reference to several of these phrases in the Committee’s Terms of Reference, they require definition.

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1 Healy, J. (2004) *The benefits of an ageing population: Discussion paper number 63*. Canberra, The Australia Institute, p. 4. See also *Transcript of evidence 22*, Professor Wells, Y. & Professor Warburton, J., Australian Institute for Primary Care & Ageing – La Trobe University, Melbourne, 5 October 2011, p. 2.
Table 2.1 provides a brief overview of the range of terminology used to describe quality of ageing.

**Table 2.1: Phrases used to describe quality of ageing**

<table>
<thead>
<tr>
<th>Phrase</th>
<th>Definition</th>
</tr>
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</table>
| **Successful ageing** | - A phrase used since the 1960s and popular in the 1980s and 1990s.  
- Suggested that the key to ‘successful ageing’ was activity and financial success, with ‘success’ being reliant on people maintaining middle age activity patterns into old age.  
- In emphasising the maintenance of wellbeing and quality of life of older people, this term focused mainly on the experience of individuals.  
- Concern was expressed that ‘successful ageing’ does not account for the variation in the experience of older people, and the implication that that those who are not able to sustain good functioning are not ‘successful’. Furthermore, the focus on an individual’s capacity does not account for the role of the environment in promoting good functioning of older people.  |
| **Productive ageing** | - In the 1980s, the concept of ‘productive ageing’ gained popularity.  
- Emphasises the contribution of older people to the economy and society, and recognises the need to address ageing both at an individual and society level.  
- Associated with this theory is the growing concern of governments about the implications of an ageing population on workforce participation, combined with advocacy movements for the rights of older people to seek alternatives to retirement.  
- While much of the work on productive ageing focuses on the contribution of older people in the workforce, the term has also been used broadly to include non-paid and social contributions of older people. |

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2.2. Participation and active ageing

The term ‘participation’ has been defined by many – at an academic level, at a policy level (nationally and internationally) and by people in later lives themselves. One participant made the key point that:

It is important to recognise the vital role of older people as active, participatory citizens not simply as passive recipients of services. 10

The 2007 World Health Organization (WHO) Global age–friendly cities guide (Age-friendly cities guide) defines participation as forms of social, civic and employment participation. Specifically, it explains that:

Social participation refers to the engagement of older people in recreation, socialization, and cultural, educational and spiritual activities. Civic participation and employment addresses opportunities for citizenship, unpaid work and paid work; it is related to both the social environment and to the economic determinants of active ageing. 11

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10 Submission 86, VincentCare Victoria, p. 37.
For the purposes of this Inquiry, the Committee considered it important to adopt a definition of participation that focuses on meaningful engagement by senior Victorians, encompassing notions of active ageing and social inclusion.

The concept of ‘participation’ is complex and as a process has two key dimensions. In 2000, researcher Dr Sarah C. White explained these two levels:

The first is the question of who participates. This recognises that ‘the people’ are not homogeneous, and that special mechanisms are needed to bring in relatively disadvantaged groups. The second regards the level of participation. This points out that the involvement of the local people in implementation is not enough. For a fully participatory project, they should also take part in management and decision-making.  

While noting the importance of these two dimensions, White also suggests that they do not go far enough. She states that ‘simply being there does not ensure that those [people] have a real say; and, even if they do, there is no guarantee that they will speak for others in a similar situation.’

For people in later life themselves, participation ‘means different things to different people.’ While older people may experience participation in different ways, as Wesley Mission Victoria told the Committee, generally:

Participation for older people is about participating in meaningful activities, and feeling they have a valued role in the community.

This was reiterated by the Peninsula Advisory Committee for Elders (PACE), which stated:

Participation contributes to a feeling of social connectedness; feeling part of the community and valued; feeling linked in rather than in an older person’s ‘ghetto’.

The Committee heard that this sense of meaning, value and connectedness contributes to seniors feeling able to engage in society in a variety of ways. As National Seniors Australia (NSA) Knox Branch expressed, one key component of participation for older people is about ‘being contributors to society at large in as many ways as possible.’

Inquiry participants emphasised that considering diversity of experience and expectation is critical in understanding the participation of people in later life. As PACE explained to the Committee:

Participation means that others recognize differing needs and wishes of individuals, of young olds vs old olds, not lumping everyone together under one assumption or stereotype.

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15 Submission 81, Wesley Mission Victoria, p. 81.
16 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 9.
17 Submission 34, National Seniors Australia – Knox Branch, p. 3.
18 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 9.
People’s diversity in later life is as complex as in all stages of life. Older people are diverse in their cultural backgrounds, their expectations, their lifestyles, their gender, their ages, their location and their capabilities. In addition, the Committee heard that in the context of participation, these differences are personal. For example, in its submission VincentCare Victoria outlined the outcomes of its consultations with older people and noted the ‘personal and subjective nature of “senior” ’ and that it ‘depends how you feel some days’. 19

In addition to the diversity of experience, there is a variety of ways that people can participate in society. These include participating in the social, community and economic aspects of broader society. As PACE explained to the Committee:

Participation means older people are able to interact with a wide range of community connections e.g. shops, church, clubs, library, neighbourhood houses, mentoring, and providing meaningful input. 20

Similarly, the Association of Independent Retirees Victoria Division referred to the broad range of activities that participation might involve:

- Keeping in touch with family and friends throughout Australia and the world perhaps through the use of Skype.
- Through playing sport. Examples include lawn bowls, croquet, pole walking, life-ball, golf, taking part in master swimming carnivals, bike riding and bush walking.
- By joining organisations and taking part in activities, conversations and contributing content to sessions, even to serving of cups of tea.
- Entertaining at public events for those with musical and singing abilities.
- Remaining in the workforce … or being self-employed. 21

The Committee noted that some forms of participation represent a greater benefit to society than to older people themselves. Women’s Health Victoria, for example, talked about the complexity of the caring role often undertaken by older women, highlighting that while caring can bring personal satisfaction for older people, it can also result in financial costs, isolation from friends and social networks, and poor health:

The consequences of caregiving for women can be considerable and include financial costs, disruption of employment and social activities and poor health. For most, however, the caregiving relationship is complex. Older women caring for their partners or elderly siblings report a sense of intimacy, companionship and satisfaction at being able to care for their loved ones at home. Some also report increasing isolation from friends and social networks. Caring for grandchildren is regarded by many older women as a positive and satisfying task and one that contributes to their social connectedness and wellbeing. 22

19 Submission 86, VincentCare Victoria, p. 15.
20 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 9.
21 Submission 61, Association of Independent Retirees – Victoria Division, p. 3.
22 Submission 18, Women’s Health Victoria, p. 5.
2.3. **Value in fostering participation**

In view of the diversity of experience and expectation, the Committee recognises participation may be considered an individual responsibility and something that is pursued independently by people according to their own choices.

Through its investigations the Committee learned that regardless of the desire to participate there are many barriers to participation for people in later life. These are discussed later in this chapter and throughout the report. Broadly, they relate to attitudes towards older people, financial factors, availability of opportunities and environmental influences.

The consequence of these barriers to participation is that society does not experience the full benefits of participation by people in later life. The Committee found that benefits to Victoria include:

- **Benefits to the individual** – such as improved health and wellbeing and increased quality of life.
- **Social and community benefits** – such as support to families and communities through caring, volunteering and mentoring.
- **Benefits to the economy** – through contributions to the workforce, through caring and volunteering and through reduced reliance on health services.

These benefits are outlined in detail in this section.

The Committee identified that the benefits to individuals, the community and the economy are significant and that fostering the participation of people in later life is critical to enhancing these benefits in Victoria. Chapter 3 discusses the nature of intervention and policy response required to effectively foster opportunities for participation of older people.

In 2002, the WHO Active Ageing Framework identified participation as one of the critical elements of active ageing and outlined the connection between participation and the benefits to society:

> When labour market, employment, education, health and social policies and programmes support their full participation in socioeconomic, cultural and spiritual activities, according to their basic human rights capacities, needs and preferences, people will continue to make a productive contribution to society in both paid and unpaid activities as they age. 23

Inquiry participants reinforced the views of the WHO. The National Ageing Research Institute (NARI), for example, stated in its submission that ‘encouraging and promoting the participation of older people within society has positive ramifications both for the individuals and for the wider community.’ 24 Similarly, Mr Lindsay Doig expressed the view that it is ‘profitable to keep Third Age seniors active and involved for as long as possible – in their own interests as well as the interests of the community (and the economy) at large.’ 25

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24 Submission 54, National Ageing Research Institute, p. 2.
2.3.1. Individual benefits of participation for people in later life

The Committee’s research left little doubt that people in later life benefit greatly from ongoing and meaningful participation in society. These benefits to the individual relate to health and wellbeing, improved quality of life, reduced social isolation and increased independence.

Inquiry participants told the Committee that improved quality of life is a key benefit for older people meaningfully engaging in society. Life Activities Clubs Victoria, for example, informed the Committee that:

There is well-documented evidence that maintaining a healthy mind and body, an active social life and making time for some recreation all contribute to improved quality of life, as well as longevity. 26

Similarly, the Association of Independent Retirees Victoria Division told the Committee that ‘participation can lead to an increased self-worth and attitude and health.’ 27 Along the same lines, the Council on the Ageing (COTA) expressed the view that ‘participation is interrelated with health, wellbeing and security, and addressing disadvantage to ensure a good quality of life.’ 28

The links between participation and health and wellbeing were emphasised by many Inquiry participants. In considering ‘health and wellbeing’, the Committee took into account views on physical health, mental health and a general sense of wellbeing of older people. In its submission, the Older Persons Consultative Committee from the City of Port Phillip indicated that there is ‘evidence that participation itself serves to promote the health and wellbeing of older people.’ 29 beyondblue specifically emphasised the benefits to mental health of meaningful participation, stating:

There is a strong relationship between mental health and social, community and economic participation. Higher levels of social participation and connectedness protect against poor mental health. 30

Participants also referred to the value of participation in preventing cognitive decline. The Victorian Health Promotion Foundation (VicHealth), for example, explained that ‘social contacts, living with others, and participation in social activities have also been found to have a protective effect against declining cognitive function, memory loss and dementia.’ 31

Many Inquiry participants indicated the links between health and wellbeing with volunteering and workforce participation. For example, the Victorian Employers Chamber of Commerce and Industry (VECCI) stated that ‘having meaningful work contributes to the health and wellbeing of older Victorians.’ 32 Similarly in relation

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26 Submission 40, Life Activities Clubs Victoria, p. 1.
27 Submission 61, Association of Independent Retirees – Victoria Division, p. 15.
28 Submission 74, Council on the Ageing (COTA) Victoria, p. 2.
29 Submission 46, Older Persons Consultative Committee – City of Port Phillip, p. 2.
30 Submission 49, beyondblue, p. 2. See also Transcript of evidence 19 beyondblue, Melbourne, 5 October 2011.
31 Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 12.
32 Submission 83, Victorian Employers’ Chamber of Commerce and Industry (VECCI), p. 2. See also Transcript of evidence 11, Victorian Employers’ Chamber of Commerce and Industry (VECCI), Melbourne, 9 September 2011.
to volunteering, beyondblue referred to research that has identified the benefits of volunteering. It indicated that 'older volunteers are likely to receive significant health benefits from volunteering, which include improved life satisfaction, lower rates of depression, a sense of purpose and accomplishment, and stronger social networks, which may reduce stress and decrease disease risk.' 33

VicHealth also emphasised the protective factors associated with participation, noting the links between social isolation, low participation rates and poor health outcomes: ‘social isolation predicts an increase in depression, poor health and wellbeing, morbidity and mortality.’ 34

The Committee heard that a sense of connectedness is a key benefit experienced by people in later life who actively participate in society and that activities such as paid employment and volunteering contribute to that sense of connection and contributing to the community. 35 For example, Mr Graham Stoodley stated that ‘participating in paid work also enhances connection and engagement in the economic life of our communities. There is too much isolation among older Victorians.’ 36 Greatconnections informed the Committee that ‘volunteers are happy. When we are feeling good we are more likely to contribute to society positively. But in reverse, community connection and engagement is important to our sense of wellbeing.’ 37

The Committee determined that senior Victorians can experience social, health and environmental barriers which can make them vulnerable to social isolation. In its 2011 report It’s a wellbeing thing: Understanding how socially isolated older people perceive and contribute to their own wellbeing, Wesley Mission Victoria stated that:

Older age can lead to reduced social activities, due to the death of family members and friends, restricted mobility resulting from ill-health or changed work and financial circumstances. Many of the factors that contribute to the social isolation of older people are beyond the control of individuals. 38

It explained further that:

Social isolation can also happen to people who have been well connected throughout their lives. In Victoria, it has been estimated that 51,000 Victorians aged over 65 years are likely to be socially isolated. This is seven per cent of older Victorians. Without interventions targeting this problem it is estimated this will rise to over 74,000 older people by 2020. 39


34 Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 12.

35 For example, see Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 5; Submission 83, Victorian Employers’ Chamber of Commerce and Industry (VECCI), p. 6; Submission 19, Stoodley, G., p. 2.

36 Submission 19, Stoodley, p. 2.

37 Submission 56, Greatconnections, p. 3.

38 Wesley Mission Victoria (2011) It’s a wellbeing thing: Understanding how socially isolated older people perceive and contribute to their own wellbeing, Melbourne, Wesley Mission Victoria, p. 4.

39 Wesley Mission Victoria (2011) It’s a wellbeing thing: Understanding how socially isolated older people perceive and contribute to their own wellbeing, p. 5.
While the Committee found that fostering participation for people in later life can contribute to improved health and reduced social isolation, it noted that creating opportunities for participation is complex and that people may require support to participate at transitional stages in their life. The value in targeting transitional points in people’s lives is discussed later in the report.

In addition to improved health and reduced isolation, participation in meaningful activities contributes to increased independence. Independence is highly valued by senior Victorians in a range of ways, including financial, physical and social independence. VicHealth suggested to the Committee that ‘social networks are an important determinant of older people’s ability to remain independent in the community with socially isolated older people being more likely to be institutionalised.’  

PACE informed the Committee that financial independence is of key importance to older people and that participating in work provides this independence in addition to the social connections they value:

Increasingly seniors contribute to the workforce:
- to maintain their financial independence or supplement other income
- to keep active, feel useful, to utilize and share their knowledge and experience
- to stay connected with their community.  

In evidence to the Committee, the Australian Bureau of Statistics (ABS) advised that ‘work is an important part of people’s lives. Evidence suggests that work can be beneficial for people’s physical and emotional wellbeing, quite apart from the financial rewards associated with employment. People in paid work tend to rate their health as better than those who are outside the workforce.’

Maintaining social and community connections were identified as important to people in later life. Aged and Community Care Victoria (ACCV) told the Committee that ‘maintaining social and community connections and participation are vital to health and wellbeing.’ As the next section outlines, older people are not the only beneficiaries of sustained social and community connections with people in later life. There are significant benefits to the strength of communities through remaining engaged with older people.

**FINDING:**

That participation has benefits for older people’s connectedness, financial independence, health and wellbeing.

### 2.3.2. Community strength and seniors’ participation

Information the Committee received shows clearly that local communities, family networks and social networks benefit significantly from the participation of older people. The Committee found that older people contribute to strengthening communities. Their participation leads to community benefits that include...
supporting families and communities through caring, volunteering and mentoring. Findings by the Australian Institute of Criminology also reveal that older people contribute to safer communities and lower crime rates.  

The *Indicators of community strength* prepared by the Victorian Department of Planning and Community Development (DPCD) states that ‘an ideal community had good local facilities and services, friendly and helpful people, a pleasant environment, opportunities to participate, and government that was working with communities to build a secure future (safety, jobs, responsive to local needs).’

The Committee was informed that the participation of seniors in communities is a source of great social capital that contributes to community strength. ACCV stated that older people’s contributions ‘add significantly to social capital and stronger intergenerational and cultural relations.’ COTA told the Committee that through volunteering, seniors ‘help to build and strengthen communities and civic institutions.’

Rural communities in particular are reliant on the contributions of older people, as Mr Ian Thomas, a member of the Veteran’s Committee at the Victorian Trades Hall Council, pointed out. He emphasised the critical role of older people in rural communities, explaining that ‘in a small, rural, regional community not only do the elderly people of that community depend on the community but the community depends very much on the inputs that older people can put in.’

The breadth of contributions that older people make to communities was highlighted in evidence received by the Committee. NARI, for example, stated that contributions:

- might include unpaid work such as caring – 454,000 Australian carers are aged 65 and older... – as well as social engagement through friends, family, and neighbourhoods, and community participation through volunteering and community involvement.

Likewise, beyondblue stressed that ‘enhancing the participation of older Victorians in the community and workplace will benefit not only the individual, but also the broader community.’

In 2004, the Australia Institute reported that:

Far from being net receivers of help and support, older people are, in fact, net providers, at least up to the age of 75 years. They provide childcare, financial, practical and emotional assistance to family members including helping people outside the household with the task of daily living.
Similarly, the Australian Institute of Family Studies stated that ‘older people are more likely to be givers of care than receivers of care.’ 52 In its fourth edition of *Older Australians at a glance*, the Australian Institute of Health and Welfare (AIHW) also stated that ‘older people make valuable contributions to their families and communities through unpaid household, volunteer and community work.’ 53

The most regularly considered contributions that older people make to the community are unpaid work in the form of caring and volunteering. As expressed by Ms Helen Jurcevic to the Committee, ‘seniors contribute to the economy and society in the fact that they are called upon to mind grandchildren to allow a dual income family.’ 54 NSA told the Committee that ‘volunteering … contributes to social cohesion and is an important factor to social capital.’ 55 Section 2.4.2 discusses participation rates and the contribution of older people in volunteering and caring.

The Committee also found that older people bring additional benefits to communities through their presence and their connections to their neighbourhoods. NSA remarked on the importance of neighbourhood and community connection, stating that:

> There is a very strong positive relationship between being older and knowing one’s neighbours, level of neighbourhood trust, neighbourhood cooperation and identification with local area. 56

Notably, the Committee learnt that communities with high numbers of older people tend to be safer communities. In 2004, the Australia Institute stated that:

> An older society is … likely to be a more law-abiding society since older people are less inclined to commit crimes against property and people. An Australian Institute of Criminology estimate is that population ageing will result in a fall in homicide rates of around 16 per cent between now and 2050, from 1.82 to 1.53 per 100,000. 57

Indeed, furthering these estimates, in February 2012 the Australian Institute of Criminology undertook a study of crime trends in South Australia in the context of structural ageing. It concluded that ‘analysis of South Australian apprehension trends suggests that structural ageing has reduced, and should continue to reduce, apprehension levels for both males and females.’ 58

**FINDING:**

That older people’s participation in the community contributes to social capital and community strength.

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55 Submission 70, National Seniors Australia, p. 6.

56 Submission 70, National Seniors Australia, p. 3.


2.3.3. Economic benefits of participation

Inquiry participants informed the Committee of the significant economic benefits to Victoria that come from a high rate of participation by seniors. Such economic benefits from seniors’ participation, while often difficult to quantify, are frequently underestimated.

The economic contribution of older people is often considered in the context of their participation in the paid workforce, however the Committee was informed that contributions such as caring and volunteering also result in considerable economic benefits. NARI told the Committee that while paid employment contributions are vital to the economy, ‘it is important to recognise that older people’s participation in society goes beyond the paid workforce.’ 59 Additionally, participants emphasised that reduced reliance on health and community services through improved health and wellbeing of older people is considerable. It was also pointed out that seniors contribute positively to the Victorian economy through being consumers. It is likely that there are even more ways in which senior Victorians positively contribute to the economy, beyond those reflected in the Inquiry evidence.

The Australia Institute noted in 2004 that ‘unpaid caring and voluntary work adds up to a significant proportion of GDP, around seven per cent on some measures.’ 60 In regard to volunteering, the Committee heard of the valuable contribution of older people in Victoria. NSA told the Committee that:

> The contribution people make through volunteering cannot be overestimated, both in economic terms and the social benefits deriving from it. 61

In its research paper, *Still putting in: Measuring the economic and social contributions of senior Australians*, NSA calculated that there was ‘an economic contribution of $2 billion a year by older Australians who were working as volunteers in 2006.’ 62

The economic value of unpaid caring by seniors was also emphasised in evidence received by the Committee. The Country Women’s Association suggested that the caring role of many older people ‘reduces need for services or infrastructure eg grandparents looking after grandchildren reduces places in child care.’ 63 Through its research NSA calculated that Australia would experience ‘a cost to the economy of $911 million a year if 637,962 older Australians providing unpaid childcare were replaced with paid workers.’ 64

The Committee noted that it is well understood that when people in later life remain in good health through active participation the economy benefits from lower health and aged care costs. Participants reiterated this fact, with the Country Women’s Association emphasising, for example, that seniors participating actively

59 Submission 54, National Ageing Research Institute, p. 2.
61 Submission 70, National Seniors Australia, p. 7.
63 Submission 90, The Country Women’s Association of Victoria, p. 16.
in society tend to 'stay healthy longer thus reducing medical costs.' 65 Mr Lindsay Doig made a similar point, commenting that:

The major impact of keeping seniors active and engaged is to … contribute to the economy in positive ways – as well as abbreviating and/or avoiding the negative impacts of high-cost services to support them in their later years. Many of them continue to earn and spend – and many others contribute by volunteering in a host of ways – all activities that generate economic activity and reduce the cost of providing services that would otherwise add to demand on the public (and personal) purse. 66

The participation of older people in the marketplace as consumers also benefits the economy. Trends show that older consumers spend less on luxury goods and more on grandchildren, leisure and recreation. 67

**Economic contribution of mature age workers**

In recent years, considerable attention has been given to the economic contribution of older people in the paid workforce. Governments across Australia have turned their attention to increasing the workforce participation of mature age workers. Chapter 3 outlines in greater detail the complexities of government concerns. Briefly, governments have focused on projections of rising costs of pensions and aged care alongside decreasing tax revenue from an ageing population.

Participants told the Committee that increasing workforce participation by senior Victorians is important for economic vitality. VECCI emphasised this point, noting that ‘it is recognised that it is an economic imperative to lift the rate at which older Victorians remain in or re-enter the workforce.’ 68

Research conducted by NSA found there are considerable costs to the Australian economy by failing to fully engage the mature aged workforce. The research estimates an:

- Economic loss of $10.8 billion a year to the Australian economy for not utilising the skills and experience of older Australians. This comprises:
  - A loss of $8.7 billion a year for not utilising the skills and experience of older Australians who want to work but were not looking for work as at September 2008 (161,800 in total).
  - A loss of $2.1 billion a year for not utilising the skills and experience of 39,331 who were unemployed and looking for full-time work as at March 2009; which doesn’t include the loss for not utilising the skills and experience of 17,073 unemployed older Australians looking for part-time work. 69

The potential benefits to the economy to be achieved by fully engaging the skills and experience of mature age workers can be extrapolated from the extent of the known contribution of older workers. Mature age workers contribute

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65 Submission 90, The Country Women’s Association of Victoria, p. 16.
66 Submission 53, Doig, p. 10.
significantly to the Australian economy, as shown in a research report from NSA that calculated:

An economic contribution of $59.6 billion a year to Australia’s GDP by 1,114,076 older Australians who were working full-time as at March 2009. This does not include the significant contribution made by 617,712 older Australians who were working part-time as at March 2009.  

Figures for Victoria were not readily found, but when looking to the Australian context, the Committee found that 12.8 per cent of people aged between 65 and 74 report income from wages, salaries or business as their principal source of income (and 2.3 per cent of those aged 75 years and over). Section 2.4.3 outlines in greater detail the changing trends regarding how older people participate in work and how they view retirement.

**FINDING:**
That economic participation by older people is essential to Victoria’s economic vitality.

### 2.4. How do people participate in later life?

Having considered the benefits and contribution that older people make through participation in later life, this section outlines the multitude of ways that participation can occur. The diversity in the nature of participation of older people reflects the diversity of older people themselves.  

In determining the scope of its Inquiry, the Committee considered participation in the context of its Terms of Reference, which refer to three different contexts:

- social participation
- community participation
- workforce participation.

The Committee also noted that some older people are not able to continue participating for a range of reasons and that some may choose not to participate. Each form of participation tends to overlap with the other types of participation. For example, when a person participates in the workforce, this often leads to social participation with colleagues. Or when an older person engages in sporting activities as an umpire or coach, they are also involved in a form of community participation. This is similarly the case with informal caring, which is a form of both social and community participation.

While mindful of the overlaps, Table 2.2 provides a general indication of features identified by the Committee across the three forms of participation identified in the Terms of Reference.

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72 For example, see *Transcript of evidence 22*, Professor Wells & Professor Warburton, p. 5.
Table 2.2: Features of social, community and workforce participation

<table>
<thead>
<tr>
<th>Type of participation</th>
<th>Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Participation</td>
<td>Social involvement with family and friends.</td>
</tr>
<tr>
<td></td>
<td>Leisure and recreation (including travel &amp; tourism).</td>
</tr>
<tr>
<td></td>
<td>Participation in clubs, societies, social groups.</td>
</tr>
<tr>
<td></td>
<td>Ongoing learning, cultural and sporting activities and events.</td>
</tr>
<tr>
<td>Community Participation</td>
<td>Volunteering.</td>
</tr>
<tr>
<td></td>
<td>Policy, advocacy and civic engagement.</td>
</tr>
<tr>
<td></td>
<td>Mentoring and community leadership.</td>
</tr>
<tr>
<td></td>
<td>Informal caring.</td>
</tr>
<tr>
<td>Workforce Participation</td>
<td>Employment.</td>
</tr>
<tr>
<td></td>
<td>Business and enterprise.</td>
</tr>
<tr>
<td></td>
<td>Mentoring.</td>
</tr>
<tr>
<td></td>
<td>Professional development.</td>
</tr>
</tbody>
</table>

Source: Family and Community Development Committee

2.4.1. Social Participation

Social participation is a key component to older people’s sense of connectedness. The Committee heard of the importance of family and ‘the things we do with our families.’ In addition to interaction with family and social networks, social participation includes cultural, educational, sporting and recreational activities. The WHO Age-friendly cities guide provides a useful definition of social participation:

Social participation refers to the engagement of older people in recreation, socialization, and cultural, educational and spiritual activities.

Social participation and social support are strongly connected to good health and well-being throughout life. Participating in leisure, social, cultural and spiritual activities in the community, as well as with the family, allows older people to continue to exercise their competence, to enjoy respect and esteem, and to maintain or establish supportive and caring relationships. It fosters social integration and is the key to staying informed.

The WHO reference to social participation is consistent with definitions by national statistical institutions in Australia, such as the AIHW.

The AIHW collects figures relating to ‘social contact and participation’ in its publication Older Australians at a glance. It makes the point that ‘the extent and nature of older people’s involvement in family, community and social life are important influences on their quality of life.’

Contact with family and social networks

According to the ABS 2006 General Social Survey, around 96 per cent of people over 65 years (excluding those in residential aged care) have contact at least once

73 Submission 86, VincentCare Victoria, p. 28.
76 See also Transcript of evidence 22, Professor Wells & Professor Warburton, p. 3.
a week with family or friends living outside the household, and 76 per cent had face to face contact.

In its analysis, the AIHW noted that women (82 per cent) tended to have greater social contact than men (69 per cent). These figures are consistent with evidence heard by the Committee, which indicated that men are at greater risk of isolation than women. OM:NI, for example, commented that:

> Loneliness and isolation in older men in particular can be injurious to mental and physical health. Older men are more likely to experience social isolation the older they become.\(^{78}\)

In *Older Australians at a glance*, the AIHW also states that around 93 per cent of older people living in the community participate in informal social activities, such as meeting with friends.

### Participation in ongoing learning, cultural and sporting activities

The Committee identified that there is minimal data informing understandings of the extent of older people’s participation in ongoing learning. From data analysis by the AIHW, it is evident that relatively small numbers of older people participate in mainstream formal education. While dated, data from 2005 reveals that 4,214 students over 60 were enrolled in higher education courses across Australia, mostly in postgraduate courses.\(^{79}\)

Larger numbers of people in later life participate in publicly funded vocational education and training courses – equating to approximately 31,600 people aged 60–64 and 28,500 aged 65 years and over. The AIHW noted that participation in less formal learning and training activities, such as the University of the Third Age (U3A), was somewhat higher again. In 2005, there were 178 U3A groups providing courses and allied social activities to over 54,000 Australians.\(^{80}\)

Figure 2.1 from a 2008 paper by Tom Karmel illustrates the extent to which tertiary education in Australia is dominated by younger students:

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\(^{78}\) *Submission 42, OM:NL*, p. 1.


Opportunities for Participation by Victorian Seniors

Figure 2.1: Domestic tertiary student numbers by age and sex, Australia, 2005

Tom Karmel shows that, although people over the age of 45 cite personal development as a reason for undertaking additional professional training in comparison with younger people, employment related outcomes remain the main motivation for people over the age of 45 undertaking training. This is illustrated in Table 2.3:

Table 2.3: Reasons for undertaking training, by age, 2006

<table>
<thead>
<tr>
<th>Reasons for undertaking the training:</th>
<th>Graduates</th>
<th>Module completers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment-related outcomes</td>
<td>82.0</td>
<td>74.2</td>
</tr>
<tr>
<td></td>
<td>72.5</td>
<td>60.1</td>
</tr>
<tr>
<td>Further study outcomes</td>
<td>3.3</td>
<td>1.2</td>
</tr>
<tr>
<td></td>
<td>1.7</td>
<td>1.0</td>
</tr>
<tr>
<td>Personal development outcomes</td>
<td>14.6</td>
<td>24.6</td>
</tr>
<tr>
<td></td>
<td>25.7</td>
<td>38.8</td>
</tr>
<tr>
<td>Training was part of an apprenticeship or traineeship</td>
<td>16.2</td>
<td>11.4</td>
</tr>
<tr>
<td></td>
<td>7.4</td>
<td>4.2</td>
</tr>
</tbody>
</table>


In regard to participation in cultural activities, the ABS told the Committee that in a 2009-10 survey on attendance at cultural activities, senior Victorians had been well represented. Those aged 55 to 74 years were:
Chapter Two: Participation in later life

Well represented at many venues when compared to the wider population aged 15 years and over. These included things like art galleries, botanic gardens, classical music concerts, theatre performances, musicals and operas.  

At the Australian level, 2005-06 data showed that ‘almost 1.7 million people aged 65 years and over attended at least one cultural event or venue in the previous 12 months.’  At the Australian level, 2005-06 data showed that ‘almost 1.7 million people aged 65 years and over attended at least one cultural event or venue in the previous 12 months.’  

The data also showed that women participated in cultural activities at slightly higher rates than men, with the AIHW noting that ‘older women were more likely to have attended at least one cultural event or venue in the 12 months before interview than older men (70 per cent and 63 per cent respectively).’  

The most popular activities identified were cinema, libraries and botanic gardens.  

In regard to sporting or physical activities, the Committee heard from the ABS that 16.2 per cent of Victorians aged 55–64 and 16.9 per cent aged 65 years and older were involved in organised sport and physical activities. In addition, the ABS noted that:  

6.5 per cent of Victorians aged 55–64 and 4.5 per cent aged over 65 were involved in non playing roles such as coach, timekeeper, instructor, referee, umpire, committee member or administrator.  

Leisure and recreation  
Older people are active in recreational and leisure activities including games, hobbies, arts and crafts. Reference to leisure and recreation also includes travel and tourism.  

The Committee considered tourism in the context of individual and economic benefits that it brings. The AIHW noted that ‘older people are a significant and growing tourism market, but are not a homogeneous tourism segment.’  

The evidence reveals that older people take fewer trips than the average Australian, but when they do undertake travel they tend to stay away longer. In 2005, travel by those 65 years and over account for 11 per cent of all domestic overnight trips. Older people are more likely to stay with friends and family and to travel for a holiday or to visit family.  

2.4.2. Community participation  
Like social participation, community participation contributes to a sense of connectedness for people in later life. In addition, a key motivator for community participation for older people is making a difference. For example, PACE explained that the forms of community participation older people engage in are:  

Those where they see they can/are making a difference; where they can see outcomes which will improve their and others’ futures.  

Community participation relates to a range of activities that link them to the community. These include unpaid caring, volunteering, civic participation and community mentoring or leadership.

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82 Transcript of evidence 30, Australian Bureau of Statistics, p. 4.  
89 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 11.
The AIHW refers to community participation in its *Older Australiards at a glance*:

Older people make valuable contributions to their families and communities through unpaid household, volunteer and community work... as well as providing care to grandchildren, spouses and relatives with disability. Retired older people remained engaged in productive activities into later life, making a partial substitution of one form of productive engagement for another. 90

**Informal caring**

The role of older people in informal caring is significant. Older people participate in different types of caring, including grand-parenting, caring for a partner with a disability, and caring for other family members with a disability.

The Committee heard that the role of informal caring for people in later life is complex. It is a form of participation but at the same time can hinder participation. It is an activity that older people often want to engage in, but can also find challenging. As noted earlier, Women’s Health Victoria explained that:

> The caregiving relationship is complex. Older women caring for their partners or elderly siblings report a sense of intimacy, companionship and satisfaction at being able to care for their loved ones at home. Some also report increasing isolation from friends and social networks. 91

The organisation went on to explain that ‘the consequences of caregiving for women can be considerable and include financial costs, disruption of employment and social activities and poor health.’ 92 At the same time, Women’s Health Victoria also stated that ‘caring for grandchildren is regarded by many older women as a positive and satisfying task and one that contributes to their social connectedness and wellbeing.’ 93

According to data from the AIHW, in 2005 grandparents provided 60 per cent of all informal care provided in Australia. Approximately 97 per cent of care by grandparents was provided at no cost. 94

The Committee also identified that some grandparents assume responsibility for raising their grandchildren in situations where parents are unable to fulfil their parental responsibility. These circumstances tend to arise when parents’ responsibilities are affected by issues such as substance abuse, relationship breakdown, mental or physical illness or death. In 2003, there were 22,500 grandparent families in Australia, representing 1 per cent of families with children aged 0–17 years.

The Committee’s attention was also drawn to the circumstances of older carers. According to the AIHW, generally this refers to a person who provides ongoing help or supervision to:

- people with disability
- people with a long-term health condition
- people over 60 years. 95

91 Submission 18, Women’s Health Victoria, p. 5.
92 Submission 18, Women’s Health Victoria, p. 5.
93 Submission 18, Women’s Health Victoria, p. 5.
95 Australian Institute of Health and Welfare (2007) *Older Australiards at a glance*, p. 34.
In 2003 there were 2.5 million carers of whom 18 per cent (452,300) were aged 65 or over. Most older carers are caring for a spouse or partner (83 per cent). The length of time people are in caring roles can vary, with over one-third having been in a caring role for over 10 years.  

The Committee heard that senior women are often the providers of care in later life. For example:

- 20 per cent of women in Victoria aged between 65 and 74 care for children who are not their own.  
- 60 per cent of children receiving informal child care are being looked after by grandparents.  
- Women are more likely than men to have cared for a child who is not their own.  
- In the 55 to 74 years age group, Victorian women are twice as likely as men to have cared for a child who was not their own (20.9 per cent compared with 10.4 per cent).

The Committee heard that care giving can both positively and negatively affect participation. While for some senior women it can disrupt employment, social activities and participation in health promoting activity, it can also provide satisfaction, social connectedness and increased wellbeing.

**Volunteering**

The Committee identified a multitude of volunteering activities in which people offer unpaid time, service or skills through an organisation or a group. Broadly these fall into six categories:

- sporting organisations
- religious organisations
- volunteering and emergency services
- age-related organisations
- special interest organisations
- community organisations.

Older people are very active in volunteering roles, with the 27 per cent of older Australians who participated in volunteering activity in 2006 contributing 160 million hours to the community. The AIHW has reported that men and women volunteer at similar rates. It also indicated that older people are more likely than the general population to volunteer for community or welfare organisations.

The Committee was informed that senior Victorians are more likely to volunteer than younger people, and also likely to volunteer more hours. Volunteering...
Victoria provided the following statistics in relation to the volunteering patterns of older Victorians:

- 28.5 per cent of Victorians aged 55-64 volunteer.
- 26 per cent of Victorians aged 65 and over volunteer.
- Every year Australians over the age of 55 give around 290 million hours to their communities as volunteers.
- The older the volunteer, the more hours per week they give on average until the age of 75 years. 104

Recent data collected by the ABS reveals that there is an increasing trend in the rates of volunteering by people 55 years of age and over. Table 2.4 outlines the changes between 2006 and 2010:

**Table 2.4: Rates of volunteering by age**

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Males</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24 years</td>
<td>29.7%</td>
<td>21.3%</td>
</tr>
<tr>
<td>25–34 years</td>
<td>28.3%</td>
<td>28.1%</td>
</tr>
<tr>
<td>35–44 years</td>
<td>37.1%</td>
<td>38.4%</td>
</tr>
<tr>
<td>45–54 years</td>
<td>39.4%</td>
<td>39.1%</td>
</tr>
<tr>
<td>55–64 years</td>
<td>27.2%</td>
<td>46.1%</td>
</tr>
<tr>
<td>65–74 years</td>
<td>29.9%</td>
<td>38.2%</td>
</tr>
<tr>
<td>75–84 years</td>
<td>21.8%</td>
<td>26.7%</td>
</tr>
<tr>
<td>85+ years</td>
<td>25.7%</td>
<td>4.4% *</td>
</tr>
<tr>
<td><strong>Females</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24 years</td>
<td>29.5%</td>
<td>33.2%</td>
</tr>
<tr>
<td>25–34 years</td>
<td>32.8%</td>
<td>31.0%</td>
</tr>
<tr>
<td>35–44 years</td>
<td>48.2%</td>
<td>44.7%</td>
</tr>
<tr>
<td>45–54 years</td>
<td>39.3%</td>
<td>48.1%</td>
</tr>
<tr>
<td>55–64 years</td>
<td>37.6%</td>
<td>39.0%</td>
</tr>
<tr>
<td>65–74 years</td>
<td>35.1%</td>
<td>35.7%</td>
</tr>
<tr>
<td>75–84 years</td>
<td>22.9%</td>
<td>28.5%</td>
</tr>
<tr>
<td>85+ years</td>
<td>7.8% *</td>
<td>17.8% *</td>
</tr>
</tbody>
</table>


* This estimate has a higher than acceptable standard error. The ABS advises to use this data with caution.

104 Submission 50, Volunteering Victoria, p. 1. See also Transcript of evidence 20, Volunteering Victoria, p. 2.
Chapters 4 and 5 discuss barriers to volunteering and the Committee’s recommendations to overcome this.

Civic Participation

Civic participation generally involves engaging in policy and advocacy activity through organisations, groups and government. Some of the specific activities include boycotting, deliberately buying products for political, ethical or environmental reasons, signing a petition, attending a protest march, meeting or rally and writing letters to the editor of a newspaper. It also includes being involved in governance and citizenship groups and community organisations.

For older people, levels of participation in civic activity are generally similar for men and women. The AIHW analysis of 2005-06 ABS data reveals that 37 per cent of older men and 35 per cent of older women were engaged in civic participation in the previous 12 months. 106

In 2009, NSA reported in Still putting in: Measuring the economic and social contributions of older Australians that:

In 2006, there were 844,068 older Australians participating in civic and political groups... They accounted for 29.6% of all people aged 18 years and over who participated in civic and political groups. 107

NSA also provided a table that demonstrated the levels of participation by older people in civic and political groups compared with other age groups. Table 2.5 reveals that participation declines sharply for those aged over 85 years.

Table 2.5: Participation in civic and political groups 108

<table>
<thead>
<tr>
<th>Age</th>
<th>Number</th>
<th>As a percentage of all participants in civil and political groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>55–64</td>
<td>508,253</td>
<td>17.0%</td>
</tr>
<tr>
<td>65–74</td>
<td>214,830</td>
<td>7.5%</td>
</tr>
<tr>
<td>75–84</td>
<td>110,957</td>
<td>3.9%</td>
</tr>
<tr>
<td>85+</td>
<td>10,028</td>
<td>0.4%</td>
</tr>
<tr>
<td>55+</td>
<td>844,068</td>
<td>29.6%</td>
</tr>
<tr>
<td>All Australians</td>
<td>2,847,102</td>
<td>18.6%</td>
</tr>
</tbody>
</table>


The Committee heard from several advocacy groups run by senior Victorians. They discussed the importance of civic participation, such as elder advisory or reference groups for councils. One elder advisory committee, PACE, explained that:

In PACE, our elder resident members provide the Chair and other Executive positions, set meeting agendas, set work priorities and track the impact of the committee's advice, and while Council staff are there to assist and resource the committee, it is the older people themselves who ‘run the show’. 109

Chapter 4 discusses the involvement of older people in civic activity in greater detail.

2.4.3. Workforce participation

Workforce participation by seniors has been the subject of increasing policy attention in Australia and overseas. The Committee heard that many senior Victorians participate in the workforce, and that an increasing number of seniors are choosing to continue working for longer, with a growing preference for gradual phasing into retirement.

Participating in the workforce in later life is motivated by numerous factors. For some financial security is a key reason they remain in the workforce, others want to continue to contribute and to feel valued, and for some workforce participation provides social and professional connectedness.

In its submission, PACE outlined the reasons older people often engage in workforce participation, derived from consultations it undertook for its submission. It stated that older people increasingly contribute to the workforce:

- to maintain their financial independence or supplement other income
- to keep active, feel useful, to utilize and share their knowledge and experience
- to stay connected with their community. 110

Workforce participation by people in later life needs to be considered in the context of the current economic dialogue and the complexity of motivations for older people. As the AIHW noted in 2007, while there is no statutory retirement age in Australia, workforce participation declines sharply between the age groups of 45–54 years and 55–59 years. Alongside this, it also highlighted that ‘there is a strong public policy emphasis on encouraging older workers to remain in paid employment for as long as possible.’ 111

Notably, while there is a decline in the older age groups in workforce participation, the AIHW reported that over the decade 1996 to 2006, participation by people aged 65 and over in the paid workforce increased by 2.7 percentage points to 8.2 per cent. In evidence to the Committee, the ABS explained that in Victoria:

If we look at participation in the labour force … statistics that we collected as part of our monthly labour-force survey showed an increasing trend for those aged 55–64 to be actively involved in the labour force. Between 1990 and 2011, the percentage of Victorians aged 55–64 who were involved in the labour force

109 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 12.
110 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 5.
rose from about 45 per cent to about 63 per cent. You can see similar trends across those aged 65–69 as well – a significant increase in the participation rate over that same period. 112

This is consistent with other evidence indicating that more senior Victorians are choosing to work later in life, or to phase out of work gradually. Demographic trends show that senior Australians are participating to a greater degree in paid employment, with 19 per cent of people over the age of 60 reporting their primary source of income as wages, salary or business income, increasing from 13 per cent in 2003. 113

Figures in Victoria are similar. The 2011 Retirement Intention Survey conducted by the ABS shows that the average age at which Victorians plan to retire is 63.6 for men and 64.7 for women. This is older than the average retirement age for Victorians who are already retired from the workforce (57.8 for men and 49.9 for women). The report also noted that 41 per cent of Australians over the age of 45 years in full-time work intend to transition to part-time work before they retire.

Despite the increasing trend in employment figures, the Committee heard that senior Victorians are likely to experience under-employment for longer than other age groups, and experience greater barriers in gaining employment. 114 Measures to address barriers for senior Victorians who want to engage in workforce participation are discussed in Chapters 4 and 5.

**FINDING:**

That senior Victorians participate in a multitude of ways that include social, economic and community benefits.

### 2.5. Barriers to participation

This Chapter has highlighted the Committee’s findings that older people are often motivated to continue to engage in social, community and workforce participation. It has also outlined the multitude of activities that older people participate in and the diverse ways that this can occur.

The Committee also identified that the benefits of participation by people later in life are immense and can be individual, societal and economic.

Despite the ongoing motivation of older people to participate and remain actively engaged in society, the Committee found there are significant barriers confronting older people that can limit their participation.

The Committee considers that the Victorian Government has a key role in fostering opportunities for participation for older people. Limitations to participation opportunities for people in later life not only affect older people themselves but also influence Victoria’s social fabric, the strength of communities and the economy.

Barriers that affect the participation of senior Victorians can relate to health and income, others relate to societal and community factors, such as environment, transport and housing.

112 Transcript of evidence 30, Australian Bureau of Statistics, p. 3.
Opportunities for Participation by Victorian Seniors

Many barriers and enablers affect all aspects of participation by senior Victorians, while some are specific to certain types of participation. Barriers that can impede older Victorians’ can include, but are not limited to:

- Health and wellbeing – which emphasises the importance of health promotion, prevention and accessible health services.
- Financial security – which can be determined by numerous factors, such as wages, superannuation and pensions.
- Physical environment, including accessible outdoor space, accessible buildings and adequate transportation options.
- Affordable and accessible housing.

Table 2.6 outlines some of the barriers and enablers that were identified in the evidence received by the Committee throughout the Inquiry.

Table 2.6: Barriers to and enablers of participation

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Enabler</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Participation</td>
<td>Discrimination</td>
</tr>
<tr>
<td></td>
<td>Media and community (including self) perceptions</td>
</tr>
<tr>
<td></td>
<td>Lack of accessibility</td>
</tr>
<tr>
<td></td>
<td>Health and wellbeing</td>
</tr>
<tr>
<td></td>
<td>Financial security</td>
</tr>
<tr>
<td></td>
<td>Caring responsibilities</td>
</tr>
<tr>
<td></td>
<td>Technology</td>
</tr>
<tr>
<td></td>
<td>Elder Abuse</td>
</tr>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Participation</td>
<td>Availability of local opportunities for participation</td>
</tr>
<tr>
<td></td>
<td>Living arrangements</td>
</tr>
<tr>
<td>Community Participation</td>
<td>Costs</td>
</tr>
<tr>
<td></td>
<td>Regulatory barriers</td>
</tr>
<tr>
<td></td>
<td>Challenging opportunities</td>
</tr>
<tr>
<td>Workforce Participation</td>
<td>Lack of flexibility</td>
</tr>
<tr>
<td></td>
<td>Skills mismatch</td>
</tr>
<tr>
<td></td>
<td>Accessibility</td>
</tr>
<tr>
<td></td>
<td>Financial disincentives</td>
</tr>
</tbody>
</table>

Source: Family and Community Development Committee

**FINDING:**

That there are barriers for older people participating and benefiting in later life.
Chapter Three:  
Leadership and coordination – governing approaches to ageing and participation

**FINDINGS:**

That the three tiers of government in Australia have overlapping roles and responsibilities in policy areas that affect ageing and the life course.

That internationally, governments are reassessing their policy responses to ageing and longevity, with increasing focus on participation in addition to service provision.

That the policy focus on ageing and the life course needs to move beyond health to a whole of government approach.

That the Victorian Government has a key responsibility in achieving statewide continuity and leading long-term goals to work towards a Victoria for all ages.

That implementing a whole of government approach to ageing, longevity and participation requires cross-departmental coordination within Victoria and partnership across levels of government.
Previous chapters have identified the need for a new policy response to an ageing Victoria. The World Health Organization (WHO) has also stressed that:

The ageing of the population is a global phenomenon that demands international, national, regional and local action... Failure to deal with the demographic imperative and rapid changes in disease patterns in a rational way in any part of the world will have socio-economic and political consequences everywhere. ¹

Increasingly, creating opportunities for participation of older people is a key strategy for responding to population ageing in countries throughout the world. It is supported from several perspectives, including human rights, desires of seniors and economic and social considerations.

This chapter considers the policy response necessary to further opportunities for seniors’ participation in an ageing Victoria, particularly from a whole of government perspective. Later chapters focus on more specific policy responses in areas identified by the Committee.

Having reviewed policy approaches internationally and in other jurisdictions, the Committee identified three key areas for the Victorian Government’s attention:

- Identifying a new policy approach to longevity and the life course that fosters a view of older people as active participants in Victoria.
- Developing a long-term strategy with clear priority areas that provide direction for the Victorian Government to change perceptions, support planning and create age-friendly environments.
- Integrating an implementation plan into the strategy that ensures an appropriate governance structure, clarifies government responsibilities across all levels of government and specifies timeframes.

### 3.1. Role of government in ageing and participation

The role of government in the ageing sphere is complex, particularly due to the broad nature of participation for older people. All three levels of government have responsibilities that affect the lives of older people. Australian, state and local governments influence the opportunities for seniors’ participation through policy development, funding, administration and service provision.

The past decade has seen changes in how governments at Australian, state and local levels have responded to issues affecting people in later life.

In the context of participation by seniors, the responsibilities of governments extend well beyond aged care and community support. In addition to income security, governments are responsible for areas that include employment, discrimination, transport, housing, education and urban planning.

Despite these responsibilities, some participants informed the Committee that the approach towards seniors in the policy context remains heavily focused on the provision of care and support services. Mr Lindsay Doig expressed his view to the Committee that ‘a major problem with the existing structure is that it is exclusively service-oriented.’ ² Mr Tom Potter made the point that for ‘every

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sick, dependent, elderly person in the community, there are hundreds of active, independent, elderly people.”

Inquiry participants called for a reform of the way that policies relating to older people are framed. The Positive Ageing Advisory and Volunteer Committee from the City of Kingston, for example, stated that:

The ‘lens’ through which older people are viewed and their needs planned for by governments can often be too ‘health’ and ‘social security’ focused (viewed as recipients, clients and patients – rather than contributors).

We would like to see older people viewed through a ‘participation model’ whereby the contributions that seniors make or have the potential to make (both paid and unpaid) are encouraged and recognised through strong policy.

In its submission to the Inquiry, National Seniors Australia (NSA) also emphasised the need to move away from a service focus:

Dealing with the ageing of society is no longer a question of helping the old and frail to cope with daily life. Whilst retaining these more traditional services, it is increasingly about enhancing the quality of life of seniors by empowering them to take part in the full range of social, economic and cultural activities in different spheres. This entails a fundamental cultural change.

Through its Inquiry, the Committee identified that policies relating to seniors need to broaden beyond service provision to take into account the changing demographics in Victorian society and the changing needs of people in later life. The Committee heard that ‘communities and governments all have a role in building social participation among seniors.’

When considering areas of government responsibilities that extend beyond the provision of care, it is evident that there is a lack of clarity regarding responsibilities for fostering social, economic and community participation by seniors in Victoria. There is a need for improved coordination, monitoring and accountability of agencies responsible for fostering social, economic and community participation by senior Victorians.

### 3.1.1. Intersections of government responsibilities

The Inquiry Terms of Reference ask the Committee to consider the intersections of the three levels of government and their responsibilities to seniors.

Table 3.1 demonstrates in a simple way, the overlapping responsibilities of the three tiers of government in Australia. Funding, policy development, delivery of services and programs, and the monitoring of trends are amongst the many interventions that influence the participation of older people in the community.

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4 Submission 76, Positive Ageing Advisory and Volunteer Committee – City of Kingston, pp. 1–2.
6 Submission 23, Professor Jeni Warburton, John Richards Initiative – Research into Aged Care in Rural Communities, Faculty of Health Sciences, La Trobe University, p. 2.
The overlaps in roles and responsibilities of the three levels of government are extensive and complex. The Committee determined that a key challenge rests with identifying where the intersections lie and when different levels of government assume responsibility over another.

To some degree, government responsibilities for fostering participation of seniors are fluid. Responses to population ageing and participation are evolving and governments are determining where the boundaries lie in regard to their responsibilities. This presents both opportunities and challenges for governments at all levels.

With the maturing of understandings of the ageing demographic, policy responses will develop and change over time. In view of this transitional period in policy development, it is an ideal time to reflect on where the overlaps across and within governments exist and how to more effectively coordinate responses to achieve a society for all ages, while retaining a local focus.

Strategies for achieving improved coordination and partnerships across levels of government in an environment of policy transition are discussed in Sections 3.2 to 3.4. Firstly, however, it is important to provide a brief overview of each government’s responsibilities.

### 3.1.2. Australian Government responsibilities for an ageing nation

Since the late 1990s, the Australian Government has demonstrated its increased awareness of issues relating to population ageing. It has traditionally held responsibility for funding aged care and support services, health benefits and programs, income support and other benefits.
Over the past decade, however, the opportunities and challenges associated with population ageing have increasingly informed Australian Government policy development. In 1998, a ministerial portfolio for Ageing was established to increase focus on issues related to population ageing and a range of strategies and related policy directions have followed.

In regard to expenditure relating to ageing, the Committee identified that in 2010-11, the Australian Government spent:

- Aged care – $9.7 billion (including $7.4 billion on residential aged care subsidies).  
- Age Pension – $34.7 billion.  
- Prevention, early detection and service improvement (not age specific) – $103.2 million.  
- Productive ageing – $5.1 million ($43.3 million from 2010-11 to 2014-15).  

Since 2000, the Australian Government has introduced a range of initiatives to address population ageing. In addition, it has recently undertaken a series of reviews, inquiries and consultations into population ageing and the impact on services and participation opportunities. Table 3.2 outlines the policy responses to ageing by the Australian Government since 1998.

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Table 3.2: Australian Government policy responses to ageing

<table>
<thead>
<tr>
<th>Year</th>
<th>Policy response</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998</td>
<td>Establishment of a separate Ministry for Ageing</td>
<td>• Recognised the importance of ageing in Australia.</td>
</tr>
<tr>
<td>2000</td>
<td>Commonwealth, State and Territory Strategy on Healthy Ageing</td>
<td>• Outlined a number of key initiatives in seven result areas, based on six universal principles of healthy ageing.</td>
</tr>
<tr>
<td>2000</td>
<td>Establishment of the Office of the Commissioner of Complaints</td>
<td>• Progressed federal aged care reforms, and had oversight of the operation of the Aged Care Complaints Resolution Scheme.</td>
</tr>
<tr>
<td>2002</td>
<td>National Strategy for an Ageing Australia – An Older Australia, Challenges and Opportunities for All</td>
<td>• Identified a range of health and society initiatives inclusive of all ages.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Objectives included a structured monitoring and review process to ensure progress in meeting the Strategy goals, and the continued relevance of the Strategy.</td>
</tr>
<tr>
<td>2004</td>
<td>A New Strategy for Community Care – The Way Forward</td>
<td>• Focused on outcomes for the Home and Community Care (HACC) program.</td>
</tr>
<tr>
<td>2005</td>
<td>National Aged Care Workforce Strategy</td>
<td>• Articulated a strategy for the residential aged care workforce to ensure the availability of an effective and appropriately skilled workforce to deliver quality care to older Australians.</td>
</tr>
<tr>
<td>2007</td>
<td>Social Inclusion Agenda</td>
<td>• Commitment to encourage and support older people to ‘live full, active and independent lives’ through its ageing and aged care programs.</td>
</tr>
<tr>
<td>2008</td>
<td>Ministerial Council on Ageing</td>
<td>• Aimed to facilitate a consistent and coordinated approach to ageing and aged care policy across all levels of government.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Addressed a range of topics including housing arrangements for older people, measures to help reduce social isolation of older people, the HACC program and standards of residential care building.</td>
</tr>
<tr>
<td>2008</td>
<td>Ambassador for Ageing</td>
<td>• Appointed to</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• promote healthy, positive and active ageing messages within the community</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• lead promotional activities to ensure our communities value and respect older people</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• explain Government programs and initiatives to the public including assisting older people to be aware of programs and how to access them.</td>
</tr>
</tbody>
</table>

### Chapter Three: Leadership and coordination—governing approaches to ageing and participation

<table>
<thead>
<tr>
<th>Year</th>
<th>Policy response</th>
<th>Objective</th>
</tr>
</thead>
</table>
| 2011 | Productivity Commission Inquiry into Caring for Older Australians | • Established to examine and develop recommendations to re-design Australia’s aged care system, including:  
  • regulatory and funding options for residential and community aged care  
  • future workforce requirements. |
| 2011 | Age Discrimination Commissioner | • Appointed to  
  • raise awareness of age discrimination  
  • educate the community about the impact of age discrimination  
  • monitor and advocate for the elimination of age discrimination across all areas of public life.  
  • Tackles age based discrimination (both for older and younger Australians) in workplaces and the wider community. |
| 2011 | Advisory Panel on the Economic Potential of Senior Australians | • Established to ensure that the potential of older people is considered in a range of policy debates, with a focus on ways businesses and policy makers can assist older people in their choices to transition from the workforce into other endeavours.  
  • Produces a series of reports to Government in late 2011. |

Source: Family and Community Development Committee

Participants expressed views to the Committee that the Australian Government has a key role in providing guidance around specific areas that include leading a policy response to ageing. Some favoured a national strategy on ageing that can guide state and local governments in key areas relating to population ageing and fostering opportunities for participation.

The Committee supports these views and considers that the Australian Government has an important role in providing national guidance. At the same time, however, it heard a clear message of the value in maintaining flexibility to ensure unique local characteristics are retained. ¹²

#### RECOMMENDATION 3.1:

The Committee recommends that the Victorian Government work with the Australian Government to promote the development of a national strategy to achieve an age-friendly society that integrates issues relating to support, care, age-friendly environments and participation.

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¹² For example, see Transcript of evidence 25, Municipal Association Victoria (MAV), Melbourne, 18 October 2011, p. 3.
3.1.3. Victorian Government responsibilities for ageing regions

The Victorian Government’s approach to population ageing and participation for older people is currently under review with the change in government in 2010. The Committee’s Inquiry has a key place in informing future directions for policy responses in this area.

The Victorian Government has responsibility for policy, funding and delivery of a range of public services for senior Victorians. These include health, mental health, disability and support services, and some residential aged care facilities. 13

The Committee noted that expenditure relating to older people is largely directed towards aged care services over preventative and other measures that promote participation. For example, Uniting Aged Care explained to the Committee that the aged care system:

Assumes that nursing homes are the ‘core’ strategy for aged care. Consequently government subsidies are disproportionately directed at the high care end of ageing. Planning simply extrapolates current ratios (e.g., 87 beds per 1000 people over 70 years, based on current allocations) to future population projections without directing any investment of substance in pro-active preventative or demand management strategies. 14

The Committee identified that in 2011-12, the Victorian Government spent $1.1 billion on ageing and aged and home care with the bulk spent on service provision, including expenditure on activities undertaken by the Senior Victorians Unit in the Department of Health. 15

The Victorian Government also has responsibilities in a range of areas that influence the participation of older people in society, such as housing, transport, urban planning, education and discrimination.

The Committee recognises that over the past 15 years, the Victorian Government has introduced initiatives that influence participation opportunities for seniors in an ageing Victoria with a particular focus on strategies for positive ageing and age-friendly communities. This direction has been a notable shift away from more traditional policy approaches that focus on the perceived burden of an ageing society.

Table 3.3 outlines the Victorian Government policy responses since 1997.


14 Submission 88, Uniting Aged Care, p. 2. See also Transcript of evidence 40, Uniting Aged Care, Melbourne, 21 October 2011, p. 2.

### Table 3.3: Victorian Government policy responses to ageing

<table>
<thead>
<tr>
<th>Year</th>
<th>Policy response</th>
<th>Objective</th>
</tr>
</thead>
</table>
| 1997 | Initiated a Parliamentary Inquiry into Planning for Positive Ageing | • Identify key factors that contribute to individuals remaining confident, independent and in control of their lives.  
• In particular, to consider how a continuing career and life planning approach during working life contributes to a more positive experience of retirement. |
| 1999 | Seniors Information Victoria service | • Introduced in partnership with Council on the Ageing (COTA) as an initiative for the 1999 International Year of Older Persons.  
• Aimed to provide free information on a wide range of issues of interest to older Victorians. |
| 2002 | Office for Senior Victorians | • Established to provide a coordinated whole of government response to issues affecting older people.  
• Key responsibilities for coordinating policy and action across Government to promote the wellbeing and social participation of older Victorians. |
| 2003 | Making this the Age to be in Victoria – a Forward Agenda for Senior Victoria | • Aimed to  
• generate greater job opportunities for older people  
• improve seniors’ access to new technologies,  
• promote positive attitudes and practices towards older people in the workplace and social environments.  
16 |
| 2005 | Positive Ageing – A Strategy for Current and Future Senior Victorians | • Aimed to work towards  
• a more age-inclusive society  
• opportunities for participation  
• access to information  
• a better understanding of the challenges to positive ageing  
• key partners.  
17 |
| 2005 | Positive Ageing in Local Communities Project | • Focused on working in partnership across state and local governments and with COTA to develop positive ageing projects in local government areas. |
| 2010 | Ageing in Victoria – a Plan for an Age Friendly Society | • Aimed to achieve better outcomes for older people through a 10-year ageing strategy in three areas  
• good health and wellbeing  
• age-friendly communities  
• economic and social participation. |

Source: Family and Community Development Committee

16 Minister for Senior Victorians 'Press release: Government plan to support senior Victoria, launching the age to be in Victoria: A forward agenda for senior Victorians', 24 October 2002.  
The Committee found that while there have been positive strategies over the past 15 years that aim to achieve ‘positive ageing’ and a ‘forward agenda for senior Victoria’, there remains a long way to go to succeed in creating a Victoria for all ages. Ms Debra Parnell, Manager of Policy for the Council on the Ageing (COTA), for example, told the Committee that ‘for the last 10 years and longer the responses to ageing have been quite piecemeal.’ 18 Addressing issues relating to participation of a diverse ageing population is complex and challenging for governments worldwide. Importantly, the current Victorian Government can learn from previous interventions to inform the future statewide agenda, including both positive and challenging experiences (for example, the challenges in sustaining the level of continuity necessary to achieve long-term change). There is also scope to build on existing successes, such as those at the local level achieved in the positive ageing projects across local government areas (LGAs). 19

Participants in the Inquiry expressed strong views about the need for greater statewide leadership and coordination to achieve a Victoria for all ages. For example, the Committee heard that positive developments occurring at a local level have struggled to sustain the degree of continuity required to achieve change. Participants suggested that while local government has a key role, the Victorian Government has a critical role in providing the necessary leadership to coordinate responses to achieve a common goal. NSA, for example, suggested that:

The Victorian Government has an important role to play in setting appropriate policy agendas to ensure that all Victorians, especially Victorian seniors, feel valued and have the opportunity to participate fully in our society. 20

The Municipal Association of Victoria (MAV) also expressed the need for the Victorian Government to:

Provide leadership and co-ordination … in a way that best builds on local knowledge and joint State/local government priority setting for actions that require joint responsibilities and funding, or are beyond local government resources alone to address. 21

This view was elaborated on by Professor Simon Biggs, Professor of Gerontology & Social Policy at the University of Melbourne, who told the Committee that:

What struck me, coming from outside of Australia … was that the local authorities have done a lot of policy work in this area – they really have. Many local authorities have taken this whole age friendliness thing very seriously. The problem is that often it is short term. It happens and then they say, ‘Yes, we’ve done that; let’s move on to the next one’. There is an absence of continuity. 22

The Committee determined that the Victorian Government has a key responsibility in achieving statewide continuity and leading long-term goals to work towards a Victoria for all ages.

18 Transcript of evidence 1, Council on the Ageing (COTA) Victoria, Melbourne, 6 September 2011, p. 5.
19 For example, see Submission 37, Cardinia Shire Council, p. 2.
20 Submission 70, National Seniors Australia, p. 2.
22 Transcript of evidence 18, Biggs, S., University of Melbourne, Melbourne, 5 October 2011, p. 19.
The Committee considers there is a need for the introduction of a statewide strategy to clearly outline the Victorian Government’s policy response to participation in an ageing society. The Committee also recommends an implementation plan is interlinked with the strategy.

The Committee’s recommendations for a statewide strategy for older people are outlined in sections 3.4 and 3.5 (Recommendations 3.3 and 3.4).

3.1.4. Local government responsibilities for ageing communities

As noted in the previous section, local government has a significant role in responding to ageing communities. Local council officers are frequently the first point of contact for many people. They also provide critical services for older people and have a role in supporting programs that connect local communities.

Local government authorities are involved in the delivery and management of services for senior Victorians, and provide information and social inclusion pathways for Victorian seniors. They also have a role in the development of positive ageing strategies, delivering community transport, implementing planning policy in urban environments, contributing to safe communities and ensuring the maintenance of public infrastructure such as footpaths and street lighting.

Local government also has a long history of providing services for senior Victorians, including Home and Community Care (HACC) services, seniors’ information and senior citizens’ clubs.

The MAV suggested to the Committee that local government also has a key role in promoting innovation at the local level:

It is very likely that baby boomers will come up with ideas for local projects that we don’t now have, that they will want to contribute their skills and knowledge to – we need some nimbleness around trying out new things and responding to diversity and the opportunities of new technology.

In addition, it emphasised the critical role of local government in developing and implementing strategy at a local level.

In 2005, local government authorities were given greater standing and responsibility in responding to ageing populations with the initiation of the joint state and local government **Positive ageing in local communities project**. Led by the MAV in partnership with the Victorian Government, this project provided the impetus for many local government authorities to establish positive ageing strategies in their local communities.

Table 3.4 outlines recent local government policy responses to ageing communities (both in Victoria and through national representative bodies).

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23 Submission 40, Life Activities Clubs Victoria, p. 2.
24 Submission 71, Municipal Association of Victoria (MAV), p. 15.
Table 3.4: Local government policy responses to ageing communities

<table>
<thead>
<tr>
<th>Year</th>
<th>Policy response</th>
<th>Objective</th>
</tr>
</thead>
</table>
  - Building awareness  
  - Encouraging local government action  
  - Fostering partnerships  
  - Improving information access  
  - Monitoring evaluation. |
| 2005 | Positive ageing in local communities project (Victoria) | • Encouraged communities to:  
  - Plan for the needs of older people  
  - Involve older people in their communities  
  - Create better environments for positive ageing. |

Source: Family and Community Development Committee

The Committee heard that the MAV has provided a valuable leadership role for local government authorities across Victoria in the development of positive ageing strategies and in increasing understanding and knowledge of age-friendly communities. This is discussed further in Section 3.3.

The valuable role that local government provides in service delivery and supporting community programs was emphasised strongly by participants. Many stressed the importance of local government in supporting people to remain in their own homes and communities. Mr Lindsay Doig, for example, expressed the view that:

> No amount of high-level policy formulation and development will help us at all unless it is accompanied by practical programs that are resourced well enough to produce effective results on the ground. 25

The Committee also heard of the significance of local government in the planning process and influencing development of the urban environment. This influence over urban environments included the potential to contribute to changes to the urban landscape in ways that assist older people to participate in the community. Chapter 7 discusses these issues in greater depth.

25 Submission 53, Doig, p. 10.
The message heard by the Committee, however, is that local government cannot achieve goals that promote age-friendly communities in isolation. COTA, for example, advised the Committee of inconsistencies across LGA borders:

Many LGAs have developed Positive Ageing Strategies, but lack of coordination means that there is inconsistency and lack of integration across borders. 26

Similarly, an Australian Housing and Urban Research Institute Research and Policy Bulletin provided by NSA to the Committee at a public hearing stated that:

Some councils and local governments have already adopted age friendly planning, transport and housing strategies – however despite these initiatives there are no consistent national guidelines or standards specifically for age friendly urban environments in Australia. As a consequence, wide variation currently exists in urban design quality and transport provision between different neighbourhoods. 27

The Committee heard that partnerships across LGAs and across levels of government are critical to prioritising and achieving the policy goals for an age-friendly Victoria. Section 3.5.1 discusses the importance of partnership across governments.

**FINDING:**

That the three tiers of government in Australia have overlapping roles and responsibilities in policy areas that affect ageing and the life course.

### 3.2. International call for a new policy response

In 2002, the WHO made a clear statement that:

It is time for a new paradigm, one that views older people as active participants in an age integrated society and as active contributors as well as beneficiaries of development. 28

It based this call to action on the following explanation:

Traditionally, old age has been associated with retirement, illness and dependency. Policies and programmes that are stuck in this out-dated paradigm do not reflect reality. Indeed, most people remain independent into very old age. 29

Determining what a new paradigm should look like is challenging for governments across the world. The Committee heard that solutions lie in rethinking longevity and the life course. This has particular implications for the Australian Government in its policies on employment and income security. For the Victorian Government, changed thinking about the life course will affect its approach to service provision and influence how older people are perceived as active participants in society.

26 Submission 74, Council on the Ageing (COTA) Victoria, p. 28.
27 Judd, B., Olsberg, D., Quinn, J. et al. (2010) AHURI research and policy bulletin 126: How well do older Australians utilise their homes?, Melbourne, Australian Housing and Urban Research Institute, p. 5.
Professor Biggs highlighted to the Committee that there are both opportunities and challenges associated with increased longevity. In particular, he suggests that there is a need for cultural adaptation to this global phenomenon:

When we look at demographic shifts, such as population age, we have … got to really see them as cultural shifts…

There is an assumption still that old age is associated with a burden and that this is a fiscal problem as well as being a problem of social participation.  

One strategy lies in rethinking traditional understandings of life phases that involve education, work and retirement. In considering the Australian context, Professor Biggs explained:

We have moved really from the 19th century view that people worked until they dropped, to one of the 1950s and 1960s when life course was defined pretty much in very fixed, predictable stages around childhood, adolescence, creating a career or a family and then moving on to retirement as a grand summing up of what it all meant. What we have seen in the 1980s and 1990s has been an extension of the latter parts of the adult life course. 

He provided Figure 3.1 to the Committee, which demonstrates the changes in understandings of the life course from the nineteenth century to the late twentieth century. Notably, Professor Biggs identifies a temptation amongst policy makers to encourage people to work longer, which is evident in the ‘active life course’ model in Figure 3.1.

**Figure 3.1: Past approaches to rethinking the life course**

<table>
<thead>
<tr>
<th>19th C (the working life course)</th>
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<tbody>
<tr>
<td>1950s (the staged life course)</td>
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<tr>
<td>1990s (the active life course)</td>
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Source: Prof. S. Biggs, Exhibit from transcript of evidence, Melbourne, 5 October 2011, p3.

During its Inquiry, the Committee met with the Director of Ageing and Lifecourse at the WHO, Dr John Beard. He suggested that a key solution to the challenges associated with longevity is not to extend the latter part of the adult life course and encourage people to work more. Rather the WHO advocates the creation of a new way of thinking about ageing, particularly the life course.

In a conference presentation in 2011, Dr Beard emphasised the need to ‘rethink ageing’ by re-conceptualising the linear pattern of traditional life stages of

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30 Transcript of evidence 18, Biggs, p. 2.
31 Transcript of evidence 18, Biggs, p. 2.
education, employment and retirement. 32 He further elaborated on this in an interview with The Age newspaper, providing information about some American companies that are increasingly offering staff the option to work a 1,000-hour year – equivalent to about 28 working weeks – instead of retiring.

The Age reported that ‘Dr Beard believes this will be the work pattern of the future with traditional life stages such as education, employment then retirement, consigned to the past.’ 33 Dr Beard told The Age that the approach is not confined to older employees and works in the following way:

- You may choose to work two days a week for the whole year, you may choose to work three or four months and then take the rest of the year off or you might mix and match. If they were a senior person during their time at work they might be matched with a junior person to pass on those skills and experience and knowledge so there are productivity gains to be had from that rather than a cost. 34

Achieving greater flexibility in the workplace and in career paths requires significant cultural change that can contribute to new understandings evolving about how employment features in the life course. This is discussed in greater depth in Chapters 4 and 5.

Figure 3.2 illustrates a way to rethink longevity that aims to reconceptualise the life course. It departs from solutions that involve longer working lives. With people in education for longer and people retiring relatively earlier, the traditional life course model is resulting in a ‘shrinking middle’.

Strategies for people to work longer will ultimately result in shorter retirements, which Professor Biggs suggests has the potential for political backlash. 35 The ‘stretched life course’, on the other hand, balances out the various life stages, provides opportunities for flexibility and represents recognition of the cultural shift required to respond to population ageing.

**Figure 3.2: Rethinking longevity – three models**

- **The shrinking middle — ‘steady as she goes’ or ‘downhill all the way’**
- **Producivist ageing — more of the same through lengthening productive years**
- **The stretched life course — stretching each life phase**

Source: Prof. S. Biggs Exhibit from transcript of evidence, Melbourne, 5 October 2011, p4.

Rethinking longevity to achieve a ‘stretched life course’ model, however, requires a clear policy framework to achieve cultural and attitudinal change over a

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33 Stark, J. ‘Prepare to work until you’re 100’, The Age, 25 April 2010.
34 Stark (2010) Prepare to work until you're 100.
35 Transcript of evidence 18, Biggs, p. 3.
timeframe. In particular, the value that people bring to society in later life needs to be acknowledged and taken advantage of. Policies to promote participation and change perceptions of ageing are critical.

A new policy framework requires reconsideration of the meaning of longevity, including:

- The value of quality of life achieved through good health and wellbeing in addition to length of life – highlighting the importance of planning for later life.
- The need to address boundaries that affect participation in employment, community and other aspects of society in later life – including challenging perceptions of what getting older means.
- The importance of ensuring financial security and appropriate housing that supports people in later life and retirement – including the development of age-friendly environments.
- The provision of adequate support and care in later life for older people unable to support themselves.

In 2002, the WHO recommended a policy framework to provide the foundations necessary to forge a new paradigm of ageing and the life course. The policy framework aims to promote action on three basic pillars that remain relevant today. Box 3.1 outlines this framework.

**Box 3.1: WHO Active Ageing: A Policy Framework**

**Health.** When the risk factors (both environmental and behavioural) for chronic diseases and functional decline are kept low while the protective factors are kept high, people will enjoy both a longer quantity and quality of life; they will remain healthy and able to manage their own lives as they grow older; fewer older adults will need costly medical treatment and care services.

For those who do need care, they should have access to the entire range of health and social services that address the needs and rights of women and men as they age.

**Participation.** When labour market, employment, education, health and social policies and programmes support their full participation in socioeconomic, cultural and spiritual activities, according to their basic human rights, capacities, needs and preferences, people will continue to make a productive contribution to society in both paid and unpaid activities as they age.

**Security.** When policies and programmes address the social, financial and physical security needs and rights of people as they age, older people are ensured of protection, dignity and care in the event that they are no longer able to support and protect themselves. Families and communities are supported in efforts to care for their older members.

In addition to these three pillars, the WHO identified two key factors essential in forging a new paradigm and cultural understanding of longevity and the life course:

- Working with media to change perceptions of older people, ageing and later life.
- Improving intergenerational relationships to increase interactions across age groups.  

In 2007, the WHO furthered its work on policy responses to population ageing by developing the *Global age-friendly cities guide (Age-friendly cities guide)*. This has become an internationally recognised approach to addressing issues for older people in the context of ageing.

Canada has developed the *Age-friendly rural and remote communities guide* which focuses on the discussion topics identified by the WHO. The guide identified that rural and remote communities ‘face unique social and environmental challenges that can have an impact on health and healthy ageing different from those facing urban populations.’  

The Canadian guide is very specific to the issues that Canadian rural communities confront (such as snow clearing). However, it also addresses some common themes, such as transport, housing and access to outdoor spaces and buildings.

Table 3.5 briefly outlines the eight discussion topics in the *Age-friendly cities guide* that cover the features of a ‘city’s structures, environment, services and policies that reflect the determinants of active ageing.’

**Table 3.5: WHO Age-friendly cities guide – discussion topics**

<table>
<thead>
<tr>
<th>Discussion topic</th>
<th>Overview</th>
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| Outdoor spaces and public buildings | • The outside environments and public buildings have a major impact on the mobility, independence and quality of life of older people and affect their ability to ‘age in place’.  
   • Recurring themes – quality of life, access and safety.                                                                                     |
| Transportation                    | • Transportation, including accessible and affordable public transport, is a key factor influencing active ageing. In particular, being able to move about the city determines social and civic participation and access to community and health services.  
   • Recurring themes – infrastructure, equipment and services.                                                                                   |
| Housing                           | • Housing is essential to safety and well-being. There is a link between appropriate housing and access to community and social services in influencing the independence and quality of life of older people.  
   • Recurring themes – affordability, design and housing options.                                                                                   |

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<table>
<thead>
<tr>
<th>Discussion topic</th>
<th>Overview</th>
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</table>
| **Social participation**         | • Social participation and social support are strongly connected to good health and well-being throughout life. It allows older people to continue to exercise their competence, to enjoy respect and esteems and to maintain or establish supportive and caring relationships.  
• Recurring themes – affordability, accessibility and support. |
| **Respect and social inclusion** | • Older people report experiencing conflicting types of behaviour and attitudes towards them.  
• This clash is explained in terms of a changing society and behavioural norms, lack of contact between generations, and widespread ignorance about ageing and older people. |
| **Civic participation and employment** | • Older people do not stop contributing to their communities on retirement. Many continue to provide unpaid and voluntary work for their families and communities.  
• In some areas, economic circumstances force older people to take paid employment long after they should have retired. In others many older people would like to continue working.  
• An age-friendly community provides options for older people to continue to contribute to their communities through paid employment or voluntary work if they so choose, and to be engaged in the political process. |
| **Communication and information** | • Staying connected with events and people and getting timely, practical information to manage life and meet personal needs is vital for active ageing.  
• Recurrent themes – need for relevant, accessible information for older people with varying capacities and resources. |
| **Community support and health services** | • Health and support services are vital to maintaining health and independence in the community.  
• Recurrent themes – availability of sufficient good quality, appropriate and accessible care. |


In this report, the Committee proposes the development of a strategy that incorporates the pillars of health, participation and security in addition to the key principles outlined in the WHO Age-friendly cities guide. It also integrates the fundamental factors considered essential in the creation of a new paradigm – that is, working with the media to reform the portrayal of older people and focusing on intergenerational relationships.
The Committee also considered that Victoria would benefit from joining the WHO Global Network of Age-friendly Cities and Communities, which is described in Box 3.2:

**Box 3.2: WHO Global Network of Age-friendly Cities and Communities**

### About the Network

The WHO Global Network of Age-friendly Cities and Communities was established to foster the exchange of experience and mutual learning between cities and communities worldwide. Any city or community that is committed to creating inclusive and accessible urban environments to benefit their ageing populations is welcome to join.

More than 500 cities are part of the network, including New York, Manchester, Geneva and many other cities internationally. In Australia, Melville and Canberra have joined the Network, and recently Victoria’s Boroondara (January 2012).

### WHO activities

With the Network, WHO provides a global platform for information exchange, mutual support through the sharing of experience. Furthermore, WHO provides guidance and promotes the generation of knowledge on how to assess the age-friendliness of a city or community, how to integrate an ageing perspective in urban planning and how to create age-friendly urban environments.

### Requirements for joining

Membership in the Network involves a commitment to the continual improvement of a city’s age-friendliness. In order to join, cities must commit to a five year implementation cycle that includes four stages:

1. Planning (including establishing mechanisms to involve older people, developing a baseline assessment of age-friendliness, developing a three-year action plan and indicators to monitor progress against the plan)
2. Implementation of the action plan
3. Progress evaluation against indicators developed in stage 1
4. Continual improvement, through further implementation cycles.

Source: WHO Global Network of Age-friendly Cities and Communities website and City of Boroondara website. 39

Chapter 7 discusses issues relating to age-friendly environments in greater detail.

**FINDING:**

That internationally, governments are reassessing their policy responses to ageing and longevity, with increasing focus on participation in addition to service provision.

**→ RECOMMENDATION 3.2:**

The Committee recommends that the Victorian Government sets an objective of joining the WHO Global Age-friendly Cities Network, and supports local government authorities to achieve the same goal.

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3.3. **Rethinking longevity and the life course in Victoria**

Traditional government policy relating to older people has focused largely on service needs and social security. The Committee identified that while there is a need to retain and strengthen services for older people unable to care for themselves, there is also a need to invest in other stages of later life.

Patterns of expenditure demonstrate current priorities in responding to older people’s needs. The large proportion of expenditure on ageing is in aged and community care and the provision of pensions. Far less is allocated towards changing perceptions of the ageing experience, improving intergenerational relationships and ensuring adequate planning and retro-fitting to achieve age-friendly environments.

Progressing beyond a service-oriented policy approach remains a challenge for governments across Australia, with attention squarely focused on the frailty of older people and the need to consider how society will cope with the growing burden on the health system. Similarly, concerns are growing about the impact of population ageing on social security with the anticipated number of older people entering retirement into the future.

Governments in Australia have increasingly adopted a two-pronged policy approach to population ageing. On the one hand, there remains a strong focus on pensions and aged care. On the other hand, there is an emerging focus on increasing economic, social and community participation by people in later life. Governments are yet to achieve an integrated policy framework that considers population ageing, aged care and active ageing all in the one policy context.

The Victorian Government’s policy direction in the mid-2000s reflects this two-pronged approach. It retained a commitment to prioritising aged care and support while expanding its focus to incorporate ‘positive ageing’ in Victoria, with an emphasis on health promotion and participation. This new approach demonstrated the desire to move with international directions.

In 2005, the *Positive ageing in local communities project*, a collaboration between local and state governments, was an innovative strategy established to engage local communities in efforts to extend the focus beyond aged care support services and into positive ageing. This included:

- Improving safety and access to public spaces and buildings
- Exploring new models for senior citizens’ centres to keep them relevant into the future
- Creating better ways to use the skills and experience of older people.

In 2009, the MAV committed to considering the applicability of the WHO 2007 *Age-friendly cities guide*. This represented a further step in the direction of change aimed at working towards age-friendly communities.

As previously mentioned, however, the challenge has been in sustaining these efforts through a coherent long-term strategy that promotes continuity, rather than a strategy comprised of short-term projects and a narrow focus on service provision. In addition, the Committee determined that integrating approaches to care and support for older people with broader policy direction on participation and an ageing Victoria is critical.
The rethinking promoted by the WHO supports a new focus on adjusting to the reality of longevity and the need to reconceptualise the life course and integrating greater flexibility in people’s individual life paths. It is also about revising attitudes towards later life and what it means to get older, and creating new understandings of the value of older people as participants in Victoria. As Professor Biggs highlighted to the Committee:

We are in a situation where everybody wants to live a long time but not many people want to grow old.  

For Victoria, this means extending the policy focus beyond health and ageing. A whole of life perspective that ensures a broader policy context is critical. The Committee considers that the Victorian Government needs to promote a changed understanding of later life, one which views this as a period in life to be embraced and planned for. This is discussed in Chapter 6.

3.3.1. Tools for developing a new policy response

Participation in society for all ages is increasingly informing the policy responses of several governments in Australia at national, state and local levels. Achieving the goal of ‘participation’, however, requires a very different policy approach that is not focused specifically on service delivery or programs. The Committee recognises that a profound cultural shift is required to rethink ageing and longevity.

To achieve such a profound shift in policy focus, there is value in re-visiting the tools that inform the policy making process relating to population ageing, longevity and later life.

Policy is a contested term and can mean a range of things in different contexts. For example, it can be considered a course of action, a statement of position or intent, specific programs or activities, rules, or strategic direction. Policy can also take several forms, including the following policy frameworks:

- cost-benefit
- problem-oriented
- political-oriented
- vision-oriented
- futures-oriented.

Frequently, policy takes a problem-oriented approach. As Professors Carol Estes, Simon Biggs and Chris Phillipson identify, social policy has an important symbolic function in how it constructs problems and responses to those problems:

Social policy is often portrayed as simply responding to issues and problems, although they are in fact socially constructed. Importantly it allows the release of resources and gives permission for professional intervention. It also has a symbolic

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40 Transcript of evidence 18, Biggs, p. 2.
function in the creation of social spaces that encourage certain forms of behaviour and sanction others. 43

One of the challenges in addressing issues relating to population ageing, participation in later life and reconfiguring the life course, is in how the ‘policy problem’ is constructed and, in turn, responded to.

A key issue is that the demographic shifts occurring in Victoria are partially a present issue, but are also based on projections and forward assumptions about the future. To address what is seen as a future policy issue requiring current action, policy makers are increasingly turning to futures-oriented policy development.

In an analysis of policy responses to ageing in the Netherlands, Dr Martijin van der Steen noted that politicians and policy makers frequently focused on economic forecasts and forecasts about medical developments to determine how to respond to projected demographic changes. 44

Dr van der Steen suggests that there is value in considering futures or foresight policy approaches. He explains that in the context of responding to population ageing, these policy tools can assist to:

Change or override existing frames that previously offered stability and meaning in a policy domain, and can thus influence current and temporarily fixed political realities. 45

In his 2003 paper, Professor Sohail Inayatullah suggests that there are multiple purposes for forecasting or futures-oriented policy, particularly in the context of population ageing. Box 3.3 outlines these.

**Box 3.3: Futures-oriented policy development**

A futures-oriented policy framework can expand, broaden and deepen the policy process through:

- understanding the implications of current decisions on the future
- anticipating emerging issues and trends before they become problems
- mapping alternative futures
- ensuring costs and benefits include future generations
- embedding flexibility into the vision of the future
- developing processes so that policy remains a living practice.

Some of the advantages of the multiple purposes of the future include:

- developing strategy
- gaining citizen input and gaining participation
- educating about the future, for the future and about alternative futures
- building capacity to negotiate the many challenges brought on by an ageing society
- using the future to move towards a place where system transformation is possible
- using the future to embed new cultural ideas, beliefs or belief systems, or patterns of behaviour through the replication of ideas culturally.


Futures-oriented policy uses practical tools to consider ways of interpreting projections about the future (in spending, etc) and how to respond to demographic trends and patterns in medical and scientific developments.

Two related methods of considering alternative futures include causal layered analysis and scenarios. Causal layered analysis is useful in its emphasis that policy needs to be multi-layered and focused on perspectives and solutions that are

- immediate – responding to current issues
- short-term – responding to issues in current electoral cycle
- long-term – interventions that aim to achieve change over a period extending beyond an electoral cycle
- very long-term – the time frame often required for large infrastructure, cultural and generational changes. 46

Scenarios of the future are helpful for:

- strategic purposes (what should be done)
- educational purposes (to map the future)
- cautionary purposes (what should be avoided). 47

The scenarios demonstrate an alignment with the WHO active ageing framework, discussing the value of a society for all ages. Importantly, the scenarios do not focus entirely on desirable futures but also consider futures to be avoided.

In the context of Victoria, there is value in using a futures-oriented approach to policy making relating to population ageing and participation in later life. These include tools to assist in identifying the type of future the Victorian Government wants to strive to achieve. It also assists in identifying the types of futures to be avoided.

3.4. Reinventing ageing: strategising to achieve a Victoria for all ages

The Committee heard a consistent message that ideally Victoria should be striving to become a society for all ages. There is little argument that Victoria would benefit from being an age-friendly state. The challenge lies in how to achieve such a community. Through its Inquiry, the Committee reached a view that it is critical for the Victorian Government to develop an overarching statewide strategic plan that sets out clear priorities.

Numerous participants told the Committee that a more strategic approach to population ageing is needed in Victoria to effectively develop approaches that can successfully increase opportunities for seniors to participate in society. There was a widely held view that it is not possible to achieve a 'Victoria for all ages’ without a long-term strategy clarifying the objectives and measures of achievement.

Strategic planning is a critical tool in enabling governments to:

Understand more clearly where their state is now and where they would like it to be in the future. Basically, a strategic plan would indicate to state leaders – more

lucidly – what is state government’s (or more particularly an agency’s) overall mission, its goals and objectives, its strategic or programmatic activities, and its resources (people, monies, technologies, facilities, etc.).

In addition to providing clear goals and measures for achievement, the process of developing a strategy provides the path necessary to avoid undesirable future scenarios.

More specifically, developing an overarching statewide strategic plan on population ageing and seniors’ participation will enable the Victorian Government to:

- establish a long-term broad direction relating to participation for seniors.
- be more responsive, and accountable to the current and emerging needs of Victorians.
- identify priorities for resource allocation in an outcomes focused way.
- improve communication among key participants and improve accountability of the policy and funding arrangements relating to older Victorians.
- measure progress towards a Victoria for all ages.

Recommendations were put to the Committee suggesting a range of strategies to achieve action in different areas of participation by seniors in Victoria. These included strategies for transport, housing and elder abuse. The Committee recognises that all policy areas identified by participants as requiring a more strategic approach are important in promoting opportunities for participation by older people.

There is clearly a need for a broad, coordinated approach across all these policy areas that influence participation opportunities for older people. It recommends an overarching statewide strategic plan with clear priorities that will achieve a Victoria for all ages and foster participation for seniors. The Committee also considers the plan should take into consideration the WHO Age-friendly cities guide. It recommends the development of a long-term strategic vision with a staged implementation plan. See Recommendations 3.3 and 3.4.

Groups representing seniors emphasised the importance of strategic direction to achieve results. The Association of Independent Retirees (AIR) Southern Cross Division expressed concern about the lack of strategic direction, stating that ‘there is no cohesive, overarching plan’, which results in ‘different levels of Government tend[ing] to blame each other for lack of funding.’ Similarly, COTA stated that there is a need for:

A commitment and the allocation of dedicated resources to develop cross government processes and collaboration to achieve a strategic plan for the creation of an Age Friendly Victoria for our current and future seniors.

In its submission to the Inquiry, NSA stressed the importance of leadership (including community and business leadership) to achieve change:

The critical aspect of this challenge is leadership. Strong leadership today will be critical in meeting the challenges and realising the opportunities ahead. It requires political,

50 Submission 9, Association of Independent Retirees – Southern Cross Division, p. 5.
51 Submission 74, Council on the Ageing (COTA) Victoria, p. 5.
business and community leadership, acknowledgement of the issue and its impact on the state for decades to come… Action now translates to a better future for everyone.  

In a 2003 paper on strategic planning in the public sector, Mr Richard D. Young refers to an approach used by the state of Minnesota in the United States. It focuses on the importance of strategic planning in effectively achieving outcomes:

- What gets measured tends to get done.
- If you don’t measure results, you can’t tell success from failure.
- If you can’t recognise success, you can’t reward it.
- If you can’t recognise failure, you can’t learn from it.

The Committee is of the view that the Victorian strategy needs to be informed by a set of principles. It considers there is value in basing these on the still relevant Principles for older people adopted by the United Nations General Assembly in 1991. The principles are grouped into five broad categories:

- independence
- participation
- care
- self-fulfilment
- dignity.

In addition, the Committee considered that recognition of diversity is an equally important principle to be factored into the strategic planning process.

In developing a strategy to achieve a Victoria for all ages, the Committee has determined that the Victorian Government focuses on specific areas to foster participation for seniors and to address barriers experienced by older people.

FINDING:

That the policy focus on ageing and the life course needs to move beyond health to a whole of government approach.

RECOMMENDATION 3.3:

The Committee recommends that the Victorian Government develops a statewide whole of government strategy for older people that prioritises the following goals and includes a dedicated funding stream:

- leading and coordinating government responses
- empowering senior Victorians and recognising their diversity
- changing perceptions of older people
- supporting older Victorians to plan for later life
- planning for and achieving age-friendly environments
- retaining and improving aged care and support services
- increasing knowledge and understanding of older people.

52 Submission 70, National Seniors Australia, p. 1.
The priority areas set out in the recommendations form the focus of the Committee’s report. The following chapters in the report focus specifically on the priorities identified by the Committee and the strategies required to progress action on those priorities.

3.5. **Implementing strategy to achieve a Victoria for all ages**

A strategy is not an end in itself. Participants told the Committee that a strategy is important, but only if it achieves results. In view of the long-term, cultural shift required, a staged implementation plan is essential. The Committee considers an implementation plan is a critical component in the development of the strategy.

In a 2011 paper, Dr Dahle Suggett states that a strategy is part of a broader process that involves:

- policy development
- implementation design
- operational stage.  

The likelihood of achieving the goals set out in a strategy is dependent on the implementation design developed as part of the strategic policy plan.

The key message is that implementation should not be an afterthought. In a 2012 paper prepared for the State Services Authority, Professor Kent Weaver suggests that by treating implementation challenges as a ‘centrepiece rather than as an afterthought (or not at all)’, the quality of policy reform proposals can be improved.

Key components for effective implementation include:

- ensuring the right governance model – in particular, the establishment of a lead agency with the authority to lead within government and to partner across levels of government
- ensuring the capacity to deliver – including clarity of roles, the skills to deliver and a commitment to the task.

The Committee heard that while there has been considerable consultation on the issue of an ageing Victoria and participation for older people, concrete action has not resulted from the discussion. Many older participants in the Inquiry told the Committee that the time for specific consultation on strategies had passed. They were firmly of the view that they want to see action and forward direction based on extensive consultations that have been undertaken over recent years.

For example, Ms Janet Wood, President of COTA, stated that:

> There are lots of groups of older people, senior citizens and so forth out there who have been consulted and consulted and consulted… I call it the Eliza Doolittle syndrome – they really want to sing. You know: ‘Don’t talk of love, don’t consult me any more – show me!’ There is a bit of that going on. The consultation has to have a purpose and an outcome so that people then learn that their input had some importance. There is that, but I have also been thinking of what I have called ‘honouring the experience’.  

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54 Suggett, D. (2011) *The implementation challenge: Strategy is only as good as its execution*. Melbourne, Occasional paper for the State Services Authority, p. 3.


The Committee heard that what is needed is action and also meaningful opportunities for participation in the political and policy process rather than additional consultation. Meaningful engagement for older people in the policy decision-making process is discussed in Chapter 4.

The Victorian Government has a key opportunity to develop a strategy with an implementation plan that will enable it to deliver. In developing the overarching strategy, the Committee suggests that the Victorian Government focus on incorporating an implementation plan and monitoring framework into the strategy to specify how the goals will be achieved.

To successfully achieve a society for all ages, the Victorian Government needs to lead a committed strategy over a long-term timeframe with clear stages of implementation that identify immediate priorities, short-term targets, long-term goals and very long-term outcomes.

A staged implementation process will enable the Victorian Government to clearly set out a timeframe and long-term plan to address the varied and interrelated aspects of the strategy. It will provide the milestones to identify progress and the basis for the long-term commitment necessary to bring about cultural shifts and other key changes.

**FINDING:**

That the Victorian Government has a key responsibility in achieving statewide continuity and leading long-term goals to work towards a Victoria for all ages.

**RECOMMENDATION 3.4:**

The Committee recommends that, as part of the strategic planning process, the Victorian Government incorporates an implementation plan and monitoring framework into the strategy to specify how the goals in the strategy will be achieved, including:

- a staged timeframe outlining the immediate priorities, short-term targets, long-term goals and anticipated very long-term outcomes.

**RECOMMENDATION 3.5:**

The Committee recommends that the Victorian Government appoints a lead minister for older people to report annually to the Victorian Parliament on the implementation of the strategic plan.

**3.5.1. The right governance framework**

The importance of establishing a governance framework to effectively deliver goals set out in a strategic plan cannot be underestimated. The Committee identified a clear need for an appropriate central lead agency to be established to lead the development and implementation of a strategy aimed at achieving a Victoria for all ages.

Information the Committee received suggested strongly that to achieve this aim an integrated approach that extends beyond health is essential. This is in line with the WHO, which states that:

An age-friendly city can only result from an integrated approach centred on how older people live. Taking this approach means coordinating actions across
different areas of city policy and services so that they are mutually reinforcing. 57

To achieve such an integrated approach, COTA suggested to the Committee that ‘the location, authority and power of the agency are paramount.’ 58

In determining the appropriate governance framework for delivering on a strategy to achieve a Victoria for all ages, the Committee identified that the lead agency needs the authority to:
- lead and coordinate responses across multiple portfolios in the state government
- promote and achieve partnership across levels of government, Australian and local governments.

The Committee heard a consistent message that the current governance arrangements for overseeing policy, services and programs for older people in Victoria relate to outdated approaches to ageing and are incapable of achieving the outcomes needed in the current context.

Professor John Wanna and colleagues John Butcher and Benoît Freyens, in a book titled Policy in Action: the challenge of service delivery, note that:

The design and roll out of any policy delivery framework, no matter how it is constructed, requires a robust corporate governance framework. This is an essential element of the oversight function or authorising regime and underpins the effective management of business and political risk. 59

Public sector governance is about ‘systems oversight’ and the ‘overall integrity of public sector bodies and their activities.’ According to Wanna and his colleagues, there are three broad themes that inform governance in policy delivery:
- authority and control functions – the oversight of activities by those in positions of authority or power
- the identification of a strategy or authorised set of objectives and then establishing effective structures to manage the implementation of that strategy, including the capacity to deliver policy and service effectively 60
- accountability, integrity and probity – the confidence the community can have in government and the public policy process.

The Committee determined that the identification of an appropriate governance framework through the appointment of a central lead agency is critical in achieving the objectives set out in a strategy for fostering senior Victorians’ participation. Professor Judith Sloan, Chair of NSA, for example, supported such an approach. She told the Committee that:

Internationally, for instance, the responsibility for the administration of things to do with seniors sits in a central agency. 61 In the UK government it used to sit in the cabinet

58 Submission 74, Council on the Ageing (COTA) Victoria, p. 5.
61 Note: A central agency is a department in the centre of government with an overarching focus on the activities of government, such as Department of Premier & Cabinet and Department of Treasury and Finance in Victoria, as opposed to a ‘line’ department, which focuses on implementing specific policy areas of government.
office and they produced quite a notable program called the Better Government for Older People network. The only jurisdiction that I am aware of where the office sits in a central agency is in the Seniors Bureau in Tasmania… The point is that to take this issue seriously it needs to have a proper administrative structure to show that it is going to be taken seriously and to demonstrate to older people that actions will be taken and can be transparent and people can be accountable for those actions. 62

The basis for a whole of government approach to population ageing and participation of older Victorians relates to the need for cross-departmental coordination and the promotion of partnerships across the three levels of government.

During its study tour to the UK and the Netherlands, the Committee met with representatives from the Welsh Government, who shared their experience in creating a whole of government approach to ageing. Box 3.4 outlines the Welsh approach:

**Box 3.4: Welsh whole of government approach to population ageing**

**Strategy for older people in Wales (2003-2008) (Stage 1)**

The Strategy set out a framework for implementation over a decade. An Action Plan and a research, monitoring and evaluation plan were developed as part of the Strategy. The 5 key aims of the Strategy were:

- To reflect the United Nations Principles for Older People to tackle discrimination against older people wherever it occurs, promote positive images of ageing and give older people a stronger voice in society.
- To promote and develop older people’s capacity to continue to work and learn for as long as they want, and to make an active contribution once they retire.
- To promote and improve the health and well-being of older people through integrated planning and service delivery frameworks and more responsive diagnostic and support services.
- To promote the provision of high quality services and support which enable older people to live as independently as possible in a suitable and safe environment and ensure services are organised around and responsive to their needs.
- To implement the Strategy for Older People in Wales with support funding to ensure that it is a catalyst for change and innovation across all sectors, improves services for older people and provides the basis for effective planning for an ageing population.

**Strategy for Older People in Wales: living longer living better (2008-2013) (Stage 2)**

- The second phase of the Strategy for Older People in Wales focuses on the ‘mainstreaming’ of ageing as well as the economic status and the well-being and independence of older people. The Strategy emphasises local authority involvement and the role of partnerships. The Strategy has four key themes:
  - Valuing Older People – Maintaining and Developing Engagement.
  - Changing Society.
  - Well Being and Independence.


62 Transcript of evidence 2, National Seniors Australia, Melbourne, 6 September 2011, p. 6.
Cross-departmental coordination

Inquiry participants told the Committee that to achieve a Victoria for all ages, there is a need for greater cross-departmental coordination and that this cannot be achieved with the lead agency located within the Department of Health. The Committee heard that there are considerable inconsistencies in approaches to achieve participation opportunities for seniors. Many suggested that to minimise these inconsistencies and to effectively coordinate approaches, the state government needs to assume greater responsibility for addressing issues that create barriers for older people to participate in the community.

Currently all issues relating to older people in Victoria are led through the Department of Health, which has responsibility for:

- aged care and support services – including the provision of HACC and high level residential care
- senior Victorians – including concessions, information provision and elder abuse.

Many participants expressed the view that as the current lead agency, the Department of Health cannot achieve the outcomes required for an age-friendly community and there is therefore a need to respond to participation for older people outside of a health and wellbeing framework. For example, in a submission to the Inquiry Ms Joan Leslee stated that ‘by keeping matters relating to seniors under the health umbrella, the message being broadcast is that all seniors <equal> health problems.’  

Others reinforced this message. The Older Persons Consultative Committee from the City of Port Phillip, for example, stated that:

The relocation by the Victorian Government of its Department for Ageing into the Department of Health may be a retrograde step… Health is important, but so is quality of life. The Government’s attention to matters relating to older persons might be better focused through a wider community-related prism. Attention to matters relating to older persons primarily through health can risk missing other matters … and result in larger healthcare costs to the community through the presence of a less healthy older cohort in society. 

It also pointed out that social isolation, for example, can lead to primary health concerns. COTA similarly expressed the views that a whole of government approach is important, yet cannot be achieved through the Department of Health:

The barriers and issues presently confronting older people, which occur either because of system failure, ageism and discrimination, or abuse of older people by families and other trusted people, must be resolved by a whole of government approach. They will not be solved by one lead agency buried in a department with a focus on aged care. 

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63 Submission 60, Leslee, J., p. 4.
64 Submission 46, Older Persons Consultative Committee – City of Port Phillip, p. 4.
65 Submission 74, Council on the Ageing (COTA) Victoria, p. 5.
COTA explained further that ‘ageing is whole of life and across departmental responsibilities.’ 66 The City of Melbourne emphasised the importance of a whole of government approach in a context that looks more broadly to place and community:

The policy directions presented in the Age Friendly Cities program is a major paradigm shift in that it focuses on place and community rather than older people and requires a whole-of-government response rather than a response from health and welfare services alone. 67

In addition to the concerns about locating issues relating to later life in the health portfolio, Inquiry participants expressed a need for greater leadership and coordination across departments. In recommending the need for a lead agency, COTA informed the Committee that:

To date policy development, programs and services for the ageing population in Victoria have been piecemeal, with no one government agency responsible for the growing numbers of older and diverse Victorians. 68

The MAV also advised the Committee that:

At present a range of programs operate from different departments, organisations and funding sources and some are only offered as short term projects or are not available in all locations. 69

In evidence given to the Committee, the Department of Health reinforced the challenges associated with the current governance framework. It identified challenges in leading a whole of government approach across a range of departments with differing priorities:

There is no current mechanism … for formally engaging with other departments across seniors issues. To an extent the Office of Senior Victorians, part of the Department of Health, does try to engage with other departments on particular issues, although it is much wider than that; it is across all areas of our department and other departments. In my experience … it is harder to achieve than it seems. Structures alone do not do it, so we have had many, many interdepartmental committees on many issues, and they are not always very effective. 70

The Department did not consider that establishing an interdepartmental committee would necessarily achieve the degree of whole of government coordination required for change.

Based on the evidence it received and the directions in international practice, the Committee reached the view that a whole of government approach is critical to ensure cross-departmental coordination and the appropriate focus on issues that affect people in later life beyond health concerns. It identified that a new governance framework is needed to effectively implement a whole of government strategy, in particular the appointment of a central lead agency.

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66 Submission 74, Council on the Ageing (COTA) Victoria, p. 5.
67 Submission 78, City of Melbourne, p. 2.
68 Submission 74, Council on the Ageing (COTA) Victoria, p. 5.
69 Submission 71, Municipal Association of Victoria (MAV), pp. 14-5.
70 Transcript of evidence 52, Department of Health, Melbourne, 5 December 2011, p. 11.
Partnership across levels of government

As outlined in Section 3.1.1, responsibilities of different tiers of government are often shared and overlapping in the context of participation by seniors. This is an evolving area of policy and boundaries across levels of government are frequently unclear.

The Committee heard that for many seniors the overlapping responsibilities at different levels of government create inconsistencies in responses and can lead to confusion for members of the community. For example, referring to urban planning the Retirement Villages Association told the Committee that:

Current planning systems are driven by the state and implemented at local level. This system is not conducive to accelerated planning to ensure housing is delivered in an appropriate range of formats for older people and in the locations they wish to live (and age in place). 71

Other participants felt that the shared roles and responsibilities across state and local governments in the context of planning require clarification. 72

The Committee notes that Victoria’s HACC system differs from the model adopted in other areas of Australia due to the significant involvement of local government in service provision. While Inquiry participants generally viewed the Victorian model positively, some participants noted the challenge of coordinating services. For example, NSA told the Committee that:

Victoria has the highest number of people receiving HACC services of any state or territory, with numbers growing in the order of five per cent per year. Local government is the largest public sector provider of HACC services.

Our members report that the type of assistance offered through HACC varies considerably across the State. It appears that not all local councils provide or offer the full range of available services that can be funded and delivered through HACC. The lack of uniformity appears to disadvantage Victorian seniors in localities where they are unable to access the services they need. 73

The need for greater agreement on roles and responsibilities across the levels of government was also raised by participants. Ms Hathalie Phillips, for example, stated that:

The three levels of Government must agree on their various service Provisions and make competent and appropriate decisions based on what matters to each individual’s changing circumstances. 74

In addition, the AIR Southern Cross Division told the Committee that the lack of clarity in responsibilities leads to an outcome where ‘different levels of Government tend to blame each other for lack of funding.’ 75 The MAV stressed to the Committee that if the Victorian Government partnered effectively with local...
government, this would have a ‘big impact on improving support for positive local outcomes for senior Victorians.’

As outlined, working towards age-friendly environments involves responses by departments with a range of overlapping responsibilities. These include transport, planning, housing, employment and education.

The MAV informed the Committee that to achieve outcomes, there needs to be improved coordination across levels of government. MAV stated that the age-friendly cities initiative:

Could have a significant impact on creating better places for older people to live, but requires more than local action and resources in areas where other spheres of government also have responsibilities e.g. housing, transport.

In its submission to the Inquiry, NSA also emphasised the importance of partnership across the tiers of government:

Given that seniors’ issues straddle state and local responsibilities, it is crucial that the various levels of government work collaboratively if initiatives are to be planned, developed and implemented in an effective manner. Failure to respond to this challenge in an integrated way across all levels of government is likely to result in misguided and therefore rejected programs and policies.

There is clearly a need to focus on creating improved integrated responses to assist in fostering opportunities for participation of all Victorians. The Committee believes that this needs to occur through improved partnerships across levels of government and greater coordination across Victorian Government departments.

In its study tour to the UK and the Netherlands, the Committee learnt that there is a cabinet committee and senior executive group in the UK Government that are both charged with the responsibility of furthering policy relating to ageing and older people, with a key focus on ‘joined-up’ approaches and partnership. Similarly, both the Welsh and Scottish Governments emphasised to the Committee the importance of ensuring ministerial involvement and partnership with local councils.

The Committee recommends that a central lead agency needs to take the lead in identifying where the intersections lie across levels of government. In addition, the lead agency needs to take a key role in promoting partnerships and formal agreements in areas that require greater clarity of responsibility.

**FINDING:**

That implementing a whole of government approach to ageing, longevity and participation requires cross-departmental coordination within Victoria and partnership across levels of government.

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77 Submission 71, Municipal Association of Victoria (MAV), p. 7.  
78 Submission 70, National Seniors Australia, p. 14.
RECOMMENDATION 3.6:

The Committee recommends that the Victorian Government establishes a central lead agency in the form of a Commissioner for Older People, reporting to the lead minister for older people, and with the authority to:

- oversee activities across agencies and promote joined-up practices and partnership with other levels of government
- assume responsibility for the development and implementation of a whole of government strategy that effectively fosters participation of older people in Victoria.

3.5.2. Capacity to deliver

In addition to the establishment of an appropriate governance framework, the Committee identified the need to ensure the appointment of an agency with the capacity and capabilities to deliver the outcomes required.

With responsibilities cutting across housing, transport, service delivery and local government, the Committee recognises that the knowledge and expertise of the team delivering the requirements is critical.

To be successful in meeting its objectives, the central lead agency will need not only the right numbers of staff, but also the people with the capabilities required to:

- lead and achieve cross-government coordination
- negotiate with the Australian Government to improve partnership on issues relating to older people
- develop a process for engaging senior Victorians in the political and policy processes
- identify and implement a campaign to change perceptions of older people through reforming media approaches and promoting intergenerational relationships
- strategise effectively to develop cross-departmental approaches to encourage planning for later life – including retirement, health and financial security
- lead and coordinate a plan for achieving outcomes for age-friendly environments in local communities – including partnerships and coordination across local government and key departments with responsibilities for planning, transport and housing
- lead the auditing of data collection and promote a research framework.

Diverse skills and capabilities are required to achieve the multi-pronged strategy outlined in this Chapter, which involves the re-conceptualisation of ageing and a team working towards practical and real outcomes.

Without the right people and right skills, however, the goals will be difficult to achieve.
Chapter Four:
Empowering people in later life

FINDINGS:

That empowerment assists people in later life to make informed and effective choices.

That improving access to information and information technology, fostering independence, encouraging connectedness, promoting safety, and enabling lifelong learning and volunteering are critical to empowering older people in home and community life.

That there is a need to strengthen and promote electronic and written forms of information and to ensure that a range of information pathways are available for senior Victorians from diverse backgrounds.

That social, financial and personal independence is important to older people, and that this can be fostered by supporting older people to retain their health, confidence, skills and financial security, as well as by ensuring that the environment accommodates their varying capacities.

That most older people do not think they are at risk of financial and physical elder abuse and often believe that their family will look after them. Distressingly, when elder abuse occurs, it is often perpetrated by close family members.

That older people who are isolated and dependent are at greater risk of elder abuse (examples are language barriers, remoteness and disability).

That there needs to be a greater strategic focus on lifelong learning in Victoria that encourages participation, broader employment choices in later life and ensures that lifelong learning is accessible to diverse groups of seniors (such as those living in rural and remote areas).

That meaningful voluntary work supports and promotes participation by older Victorians in all aspects of life.

That improving career pathways, providing opportunities for re-skilling and flexibility and changing workplace culture and employer attitudes are essential to empowering people in the labour market in later life.

That people in later life want to participate in civic life, to have their voices heard and the opportunity to be involved in decision making on policies that affect their lives.

That a great deal of consultation has been undertaken over the past 15 years relating to ageing, and that now is the time to act on the lessons gained using a more coordinated approach.

That enabling older people to participate in representative bodies, to engage in community mentoring and leadership, contributes to older people’s civic participation and encourages intergenerational relationships.

That an older citizens’ assembly has the potential to provide older people with an opportunity to have a direct voice in the political process.
Empowerment assists people in later life to make informed and effective choices relating to important areas in their lives, such as housing, work, retirement and health. It is also about transforming these choices into effective planning for later life and achieving desired outcomes in participation.

Positive outcomes of older people’s empowerment include greater feelings of safety, connectedness and independence. They also include seniors feeling informed, valued, respected and financially secure.

The Committee identified that empowerment is achieved through two key factors:

- an older person’s ability to make informed and purposeful choices about their assets (material, financial) and capabilities (human, social, psychological and political)
- the context or environment in which older people aim to transform their choices into action and participation outcomes – that is, the formal and informal structures or institutions that enable or prevent participation (such as workplace culture, discrimination laws or elder abuse).

The Committee also considered the different domains in which empowerment takes place or is achieved:

- the home and community life of older people
- the economic activities of older people, such as their employment
- the spaces in which older people engage in civic participation, such as political activity or policy development.

### 4.1. Understanding empowerment

Empowerment is a term that is used in numerous contexts and has been defined in many ways. The Committee turned to more recent understandings of empowerment that consider how both individuals and their environments influence empowerment.

The Committee considers empowerment to be an older person’s capacity to make informed and effective choices, that is, to make choices and to transform those choices into desired actions and outcomes. Empowerment is about older people gaining control or greater control over their lives. The Committee understands, however, that there are varying personal, environmental, social and political factors that influence the degrees of empowerment that older people can have at any point in time.

The Committee notes that implementing measures to increase the empowerment of people is challenging. To assist with implementation, three components of choice are important – whether it exists, whether it is used and whether it is achieved.

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The following list gives examples of situations in which these components of choice may occur:

- whether an opportunity to make a choice exists – for example, an older person who wants to participate in further education may have no option if there is no tertiary institution within a distance they can travel.
- whether an older person (or older people) actually use the opportunity to choose – for example, the educational institution may be in travelling distance, but the older person cannot afford the fees or their family may pressure him or her to prioritise caring for grandchildren over gaining further educational qualifications.
- whether the choice brings about the desired result – for example, the older person attends university but cannot complete the course because there is a class size limit and younger students are given preference over older students.

Table 4.1 describes how the diversity of senior Victorians’ experience can affect their empowerment across three domains.

**Table 4.1: Domains, diversity and empowerment**

<table>
<thead>
<tr>
<th>Domain</th>
<th>Description</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Home &amp; community life</strong></td>
<td>Where social norms and formal institutions affect the choices available to individuals and social groups.</td>
<td>An older person who experiences mobility constraints may feel less empowered to participate in community life compared with an older person who has greater mobility.</td>
</tr>
<tr>
<td><strong>Economic activities of older people</strong></td>
<td>Differences in control over resources and information, lack of contract enforcement – result in inefficient and unequal outcomes.</td>
<td>Attitudes in the workplace to employing older people can lead to the appointment of young people only, resulting in lack of skills and knowledge that may affect the efficiency of the business and also impact on the employment opportunities of older people.</td>
</tr>
<tr>
<td><strong>Civic participation</strong></td>
<td>Different degrees of empowerment in terms of accessing justice, participating in politics or accessing social services.</td>
<td>Older people from professional, skilled backgrounds will often tend to engage in civic activities (such as older people’s advisory groups) at higher levels than older people from socio-economically disadvantaged backgrounds.</td>
</tr>
</tbody>
</table>

Source: Family and Community Development Committee

The Committee determined that in considering the empowerment of older people in Victoria, there is value in exploring the above three domains.

**FINDING:**

That empowerment assists people in later life to make informed and effective choices.
4.2. **Empowerment in home and community life**

The Committee considered the key factors that build assets and capabilities of older people in the context of their home and community life. It heard that people want to remain independent, to feel safe in their community and their home. Older people also told the Committee they want to feel connected and that they want to feel informed through adequate access to information and technology and opportunities for later life learning.

The Committee also identified the reality of a cultural framework in Victoria in which some older people can perceive their disempowerment to be right and proper. For example, the Council on the Ageing (COTA) talked about the views that older people can have about ageing and capacity:

> Most people think that at 50 they will start to lose memory and they then map their world and their future based on those myths and all the other myths. If you do not think you can learn, you will not start taking on education or necessarily see yourself with new careers or new opportunities in the workforce, so the myths perpetuate and are ingrained in people’s thinking, and then we behave that way. ³

The Committee considered the consequences of this perception of disempowerment, including the responses of older people to actions that can be viewed as disrespect, discrimination and even elder abuse.

In the context of the home and community lives of older people, the Committee identified five important strategies for empowering older people. These are:

- improving access to information – through promoting the availability of existing information sources and more effectively coordinating the availability of information
- fostering independence – through enhancing opportunities for older people to live the lives they choose
- encouraging connectedness – through raising awareness of activities and strategies for maintaining connections with family and community
- promoting safety – through addressing financial and physical elder abuse, fraud, physical hazards and building the capacity of older people to respond to these risks
- enabling lifelong learning and volunteering – through improved systemic approaches to education and volunteering for people throughout their lives.

**FINDING:**

That improving access to information and information technology, fostering independence, encouraging connectedness, promoting safety, and enabling lifelong learning and volunteering are critical to empowering older people in home and community life.

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³ Transcript of evidence 1, Council on the Ageing (COTA) Victoria, Melbourne, 6 September 2011, p. 3.
4.2.1. Improving access to information

It is frequently stated that knowledge is power. Older people who are informed are in a better position to take advantage of opportunities, to access services, exercise their rights, negotiate effectively and hold others accountable. To be useful, information needs to be relevant, timely and presented in ways that are understandable to all older people who access it.

People in later life need information to inform their decision making in a range of areas. This includes information relating to:

- health, financial and legal services
- housing and transport options
- opportunities for participation in work and volunteering
- avenues for social involvement, later life learning and physical, cultural and leisure activities.

Information about consultation processes and opportunities to participate in policy development is also important. During this Inquiry the importance of relevant, timely and accessible information to older people was highlighted. For example, COTA commented that:

An important component of positive ageing is access to free, timely, accurate and relevant information. This access is essential for equipping older people to be engaged and active in their communities, and to identify and act on appropriate options to meet their own goals being able to participate, and make good decisions that will impact our lives – ‘good information makes for good decisions.’ At an older age, recovering from a bad decision is harder financially and physically. Therefore it is crucial that older people can access information easily and readily, and they can be confident that the information is reliable and independent. 4

The Committee determined that improvements need to be made to the way information relevant to people in later life is made available. While a large amount of useful information for senior Victorians exists, much of this is scattered and difficult to locate. In particular, there is a lack of easily available information to inform seniors of their participation options, as the Peninsula Advisory Committee for Elders (PACE) explained:

Knowing where to go, who to speak to or how to access information for health and welfare services is one of the biggest frustrations and needs which seniors have regularly reported. Reliance on websites, print media etc. are often completely inadequate; a wide range of highly visible and accessible mediums need to be used. Information is often ‘invisible’ until there is a sudden or urgent need, and then the urgency creates confusion about how and where to go for information. Also, many information or awareness campaigns are short term or overlapping and confusing; and the plethora of government department outlets, single issue agencies etc. create information ‘silos’, resulting in people feeling they are being pushed from pillar to post, fobbed off or ignored. 5

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4 Submission 74, Council on the Ageing (COTA) Victoria, p. 21. See also Submission 63, Golden Plains Shire & Women’s Health Grampians, p. 13; Submission 64, City of Boroondara, p. 2; Transcript of evidence 48, City of Bendigo, Bendigo, 18 November 2011, p. 5.

5 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 3.
The Committee also observed that senior Victorians are a diverse group and have different information needs and preferences for accessing information. For example, for older people from culturally and linguistically diverse (CALD) backgrounds, accessibility of information can be a major barrier to participation. This often relates to language and other cultural needs, with older people from CALD backgrounds requiring access to information in their own language. The Committee heard considerable evidence about the need for information to be made available in other languages, through ensuring people have better access to interpreters and translation resources.

A number of promising initiatives have sought to improve access to information for seniors. Many of these involve building on existing points of contact for senior Victorians, while others focus on creating new pathways. The following are some examples of initiatives that the Committee heard about throughout the Inquiry:

- In August 2011, the Victorian Government launched Seniors online, a web based information portal that aims to consolidate online information and become the first port of call for Victorian seniors looking for information online.
- The Victorian Government has committed to continue supporting Seniors Information Victoria, a service that provides free information and referral for seniors on the telephone and in person. Familiarity with information technology varies for older people and, while older people are increasingly seeking information via the internet, personal contact remains an important source of information, including face to face and telephone contact.
- Other examples of access points for information include information kiosks, community hubs, libraries and ageing well expos, with local councils taking the lead on many of these initiatives. Participants in the Inquiry expressed support for one stop information hubs that are centrally located and promote interaction between senior Victorians and the community.

The Committee considers that the Victorian Government should work with the Australian Government and local governments to strengthen and promote existing electronic and written sources of information to support decision making by older people. There is also a need to ensure that a range of information pathways is available to enable senior Victorians from diverse backgrounds to access information.

The Committee also considers that targeting life course transition points may be a useful strategy to achieve more effective promotion of information to senior Victorians. As discussed in Chapter 6, people may be more receptive to information about planning for the future at key life transition points.

Furthermore, as described in Section 4.1 above, the Committee identified a need to ensure that older people are aware of and able to use the choices available to

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6 Submission 74, Council on the Ageing (COTA) Victoria, p. 22.
7 For example, see Submission 14, Flemington Chinese Golden Age, p. 3; Transcript of evidence 8, U3A Network Victoria, Melbourne, 6 September 2011, p. 8; Transcript of evidence 12, Elder Rights Advocacy, Melbourne, 9 September 2011, p. 3.
10 For example, see Submission 38, Peninsula Advisory Committee for Elders (PACE), pp. 3, 6.
them. Therefore, older people need to be aware of existing information to enable them to make use of it in their decision making.

**FINDING:**

That there is a need to strengthen and promote electronic and written forms of information and to ensure that a range of information pathways are available for senior Victorians from diverse backgrounds.

**RECOMMENDATION 4.1:**

The Committee recommends that the Victorian Government works with Australian Government and local governments to strengthen and promote existing electronic and written forms of information to support decision making by older people.

**Building people’s capacity to effectively source information**

Inquiry participants informed the Committee that for effective information provision, senior Victorians need personal skills and resources to access relevant information.

The Committee heard evidence supporting the increasingly important role of technology and social media in enabling seniors to be engaged and to participate socially, economically and culturally in the community.

The Committee identified an important and growing role for technology in allowing older people to maintain family and community connectedness. This is particularly important for older people with mobility difficulties or those who live far from family, friends or services (for example, senior Victorians living in rural and regional areas). 11

The Association of Independent Retirees (AIR) Southern Cross Division commented on the increasing use of the internet by seniors:

> It is interesting to note that the internet is gradually becoming more used by senior Australians, although many initially face the situation with some anxiety. Training classes for seniors are helpful. A recent national A.I.R. survey showed that two out of every three members use and depend on the internet as a regular means of communication. For the majority of our members, it is now firmly embedded as a common element in our lifestyle. This is a dramatic change from the 1990’s. 12

Similarly, the National Council of Women noted the willingness of seniors to engage in learning about new technology:

> I have been teaching seniors to use Facebook. Once they learn it, they never put it away. The average age of a Facebook user is now 40, and the young people are leaving it. When the seniors get it, they get it. That is part of that passing on of skills. 13

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11 Submission 61, Association of Independent Retirees – Victoria Division, p. 3; Transcript of evidence 22, Professor Wells, Y. & Professor Warburton, J., Australian Institute for Primary Care & Ageing – La Trobe University, Melbourne, 5 October 2011, p. 9; Transcript of evidence 48, City of Bendigo, p. 4; Submission 70, National Seniors Australia, p. 6.

12 Submission 9, Association of Independent Retirees – Southern Cross Division, p. 2.

13 Transcript of evidence 36, National Council of Women of Victoria, Melbourne, 21 October 2011, p. 5.
Given the increasing role of electronic information, there is clearly an ongoing need to ensure seniors are equipped with the necessary technology and know-how to access electronic information. Banyule City Council, for example, advocated for the need to support affordable internet connectivity for older senior Victorians, commenting that:

Use of technology is going so fast it is hard for many seniors to get on board let alone keep up. Seniors are concerned that everything is being done on the internet, and while broadband and computers can be bought reasonably it can still be too costly for those on a pension. Free basic training is available, however feedback from seniors is that they can’t afford the exorbitant charges if something goes wrong e.g $120 an hour for a pensioner.  

The Committee heard about a range of initiatives to provide training to senior Victorians in the use of technology, including formal and informal education, intergenerational initiatives in which younger people share their knowledge with seniors in a range of settings, and peer training programs.

The Committee supports this dynamic response to the need for seniors to enhance their technological knowledge. It also recognises that many seniors will face linguistic, financial or physical barriers to accessing learning programs. Accordingly, a potential role for the Government is to ensure consistency in the delivery of technology training to senior Victorians across a broad spectrum of the older population.

4.2.2. Fostering independence

Inquiry participants strongly emphasised the value and importance of social, financial and personal independence to people in later life. In his submission, Mr Robert Williams explained his views on the importance of independence:

I am male, 80 years of age, live on my own and have no family or relatives.

I am lucky that I own my own home and have very good neighbours.

My main worry, and I think that it is the same with most older people, is the fear of losing my independence. By that I mean becoming sick or feeble to the point that I am unable to look after my self and possibly have to be put into an Aged Care Home.  

Similarly, in its submission, Banyule City Council stated that ‘our consultations [with older people] show seniors wanted to remain independent, manage their own lives and participate in society.’

The Committee identified that the importance of independence for older people related to key areas including:

• remaining in their home and maintaining independence in daily tasks and activities

• retaining the ability to make decisions and choices in their lives

14 Submission 41, Banyule City Council, p. 8.
15 Submission 13, Williams, R., p. 1.
16 Submission 41, Banyule City Council, p. 2.
17 For example, see Submission 74, Council on the Ageing (COTA) Victoria, p. 39; Submission 70, National Seniors Australia, p. 2; Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 2; Submission 86, VincentCare Victoria, p. 21; Submission 88, Uniting Aged Care, p. 3.
18 For example, see Submission 88, Uniting Aged Care, p. 3; Submission 66, Spectrum Migrant Resource Centre, p. 7; Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 8.
• sustaining mobility – for example, getting about, going places, being able to get to shopping centres, appointments and social activities.\(^\text{19}\)
• retaining individuality – loss of independence can be associated with a loss of identity and being treated the same as everybody else.\(^\text{20}\)

Inquiry participants told the Committee that the risks to independence for older people related to a number of factors that both older people themselves and the community more generally can assist with preventing.

The key risks to independence related to health, finances and perceptions of older people. For example, many Inquiry participants identified that falls can be a significant factor affecting the independence of people in later life. VincentCare explained to the Committee that in its consultations with older people:

General physique and health were cited also amongst concerns, together with the risk or fear of falls, which one group saw as leading to a chain of events whereby a person then would stop going out, experience further loss of mobility and ultimately a loss of their freedom. As one person voiced their concern about older age, ‘the mind of someone younger trapped in the body of somebody older’.\(^\text{21}\)

In a similar vein, concerns about the impact of memory loss on independence were raised. Other factors included economic insecurity, living alone and moving into residential aged care. The Committee also heard that the ‘assumption of dependency and the tendency to do things to or for people [results in] control often taken away from the older person.’\(^\text{22}\)

The Committee determined that strategies for fostering independence relate to both an individual’s assets and capabilities, and to more structural factors. In the context of building a person’s assets and capabilities, the key messages the Committee heard relate to the need to:

• maintain good health – including the importance of balance, strength and physical flexibility to prevent falls and mental acuity to work against memory loss
• support people living alone to build the confidence to live alone well – including learning new skills such as cooking and managing the household budget
• encourage people to plan for financial security in later life, as discussed further in Chapter 6.

In the context of structural factors affecting the independence of people in later life, the Committee identified that the following issues are important:

• providing age-friendly transport options that assist older people to maintain their mobility and independence, as discussed in Chapter 7
• providing age-friendly urban environments that enable people to maintain their independence in safe and accessible environments, as discussed in Chapter 7.

\(^{19}\) For example, Submission 71, Municipal Association of Victoria (MAV), p. 14; Submission 86, VincentCare Victoria, p. 21.

\(^{20}\) For example, see Submission 86, VincentCare Victoria, p. 2; Submission 74, Council on the Ageing (COTA) Victoria, p. 7.

\(^{21}\) Submission 86, VincentCare Victoria, p. 21.

\(^{22}\) Submission 74, Council on the Ageing (COTA) Victoria, p. 3.
FINDING:

That social, financial and personal independence is important to older people, and that this can be fostered by supporting older people to retain their health, confidence, skills and financial security, as well as by ensuring that the environment accommodates their varying capacities.

4.2.3. Encouraging connectedness

Another issue considered important by older people, related to the desire to retain independence, was that of connectedness. The Committee heard that connectedness is critical to the empowerment of older people in home and community life. Connectedness also extends to the labour market and civic participation.

Women’s Health Victoria explained the concept of connectedness in its submission to the Inquiry:

Social connectedness refers to the level of engagement and trust an individual has with others in their community. People can feel part of and valued by their community through the roles they take on, their friendships and participation in different activities. 23

Older people who lose connection with friends, family or their community are at increased risk of social isolation. Benetas told the Committee that ‘the breakdown of community connections and the growth in social isolation experienced by senior Victorians is one of the biggest issues facing our society.’ 24

The Committee was informed of the benefits older people experienced through connectedness, which included:

- reduced risk of social isolation 25
- ability to maintain independence in the community 26
- better health and wellbeing (including emotional wellbeing, mental health and cognitive functioning). 27

There are, however, personal experiences that can negatively affect an older person’s experience of connectedness. These include:

- loss and bereavement – for example, the loss of a partner, the loss of a friend or several friends, reduced interaction with family members with the increasing breakdown of nuclear and extended families
- physical or mental health problems – limited mobility, reduced capacity or willingness to maintain connections
- moving house – loss of community networks when relocating to downsize or into more affordable accommodation

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23 Submission 18, Women’s Health Victoria, p. 4.
24 Submission 20, Benetas, p. 5.
25 For example, see Submission 81, Wesley Mission Victoria, p. 8; Submission 23, Professor Jeni Warburton, John Richards Initiative – Research into Aged Care in Rural Communities, Faculty of Health Sciences, La Trobe University, p. 1; Transcript of evidence 39, Aged & Community Care Victoria, Melbourne, 21 October 2011, p. 3; Submission 70, National Seniors Australia, p. 2.
26 For example, see Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 12.
27 For example, see Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 12.
• caring responsibilities – caring for a partner or family member with a disability or in ill-health, caring for grandchildren
• cultural differences – for example, minimal support and social opportunities for people who identify as GLBTI, and language and cultural barriers experienced by people from CALD backgrounds.
• locality and distance – connectedness is particularly challenging for those living in rural and regional locations with limited transport.

The Committee identified that the number of older people living alone is on the increase (see Chapter 1). Research conducted by David Barker for the Australia Institute, *All the lonely people: Loneliness in Australia, 2001-2009* indicates that people living in lone person households are almost twice as likely to experience loneliness as people living in couple households.

The Committee also heard considerable evidence about the different experiences that men and women have in the context of maintaining social connections. Greater longevity for women means they have a higher likelihood of surviving a partner in older age groups. Women are more likely than men to live alone in later years.

Older men aged 70 to 90 years, on the other hand, are more likely to have participated in work than women of the same age. For many of these men, work was an important source of their social networks and connections and isolation can be experienced following retirement through the loss of these established networks and connections.

In its submission, OM:NI highlighted some social isolation issues faced by senior Victorian men transitioning to retirement:

Loneliness and isolation in older men in particular can be injurious to mental and physical health. Older men are more likely to experience social isolation the older they become. Retirement and unemployment can be significant factors through loss of contacts in the workplace.

The Committee also identified structural barriers that can contribute to a loss of connectedness for people in later life. These include:

• inadequate access to support services – affecting people in rural and regional areas particularly, and people who are not aware of the services available to them.
• inadequate transport options – affecting people who are no longer able to drive, people in rural and regional areas and those with mobility difficulties.

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28 Gay lesbian bisexual and transgender and intersex.
29 For example, see Submission 74, Council on the Ageing (COTA) Victoria, p. 19; Submission 62, Victorian Equal Opportunity and Human Rights Commission, p. 8; Submission 18, Women’s Health Victoria, p. 4; Submission 65, Australian Greek Welfare Society, p. 3; Submission 20, Benetas, p. 6; Submission 66, Spectrum Migrant Resource Centre, p. 3.
30 For example, see Submission 16, Raymond, O., p. 1.
33 For example, see Submission 65, Australian Greek Welfare Society, p. 8; Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 7; Submission 74, Council on the Ageing (COTA) Victoria, p. 7.
34 For example, see Submission 65, Australian Greek Welfare Society, p. 8; Transcript of evidence 39, Aged & Community Care Victoria, p. 2; Submission 20, Benetas; Submission 74, Council on the Ageing (COTA) Victoria, p. 22; Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 4.
In considering ways to encourage greater connectedness for people in later life, the Committee noted that there are many strategies to consider. Some overlap with strategies for fostering independence (outlined in the section 4.2.2). For example, the Committee identified that maintaining good physical and mental health and access to age-friendly transport and environments (as discussed in Chapters 6 and 7) are critical factors in older people retaining their connectedness and independence.

The Committee also determined that some of the strategies and recommendations it considers in the following chapters have the potential to encourage greater connectedness for people in later life. These include:

- providing age-friendly housing options that allow older people to remain connected to their community (Chapter 7)
- promoting intergenerational relationships (Chapter 5)
- ensuring supports and services that contribute to connectedness
- supporting people at transition points in later life, such as retirement or the loss of a partner (Chapter 6)
- ensuring adequate and accessible transport (Chapter 7).

### 4.2.4. Promoting safety

The feeling of physical and financial safety and security is essential to the empowerment of people in later life. The Committee heard that older people can experience concerns for their safety in a range of settings in the home and the community. The consequences of real and perceived threats to an older person’s safety have significant implications for their empowerment and their participation.

In its submission, VincentCare Victoria described the concerns for safety and security expressed during consultations it undertook with older people who use its services:

people discussed their concerns about threats to safety within and external to their home including,  
- ‘attack’,
- ‘the house being robbed’,
- ‘safety in travel’,
- ‘safety; in our own homes – when living alone – we should be able to be safe’ and,
- ‘being attacked by younger people, purse grabs or being pushed over.’

Others told the Committee that issues regarding safety related to the community (such as unsafe walking paths or inadequate lighting) and the potential to be targeted in frauds, scams and online hacking.

For example, Consumer Affairs Victoria, speaking of its work as a member of the Australasian Consumer Fraud Taskforce, explained that:

for seniors we particularly focus on scams around information technology. They are often online and are able to be easily scammed, with examples like the … scam that is going around at the moment where people ring them and say, ‘You’ve got a problem with your computer; tell us about where you are and what your details are

35 Submission 86, VincentCare Victoria, pp. 21-2.
and we’ll get in and help you’, and they take over their computer and get all their
details, their banking details and everything else as a result.’ 36

The public transport system was raised by many Inquiry participants as a cause
for concern in the context of older people’s safety. The Victorian Council of Social
Services (VCOSS), for example, told the Committee that:

We have a number of accidents on the tram system every year that often relate to
older people clambering up those steps and falling … either because they just fall
or because the tram takes off.37

Similar concerns about other forms of transport were raised by other participants.

Public transport is discussed in greater depth in Chapter 7.

VincentCare Victoria elaborated on the effects of personal and safety concerns,
making the point that:

Further related to these concerns, were the more psychological impacts. As one
group saw it, older people are more fragile meaning that they were ‘more sensitive
to crises’, at ‘higher risk’, ‘feeling vulnerable’, at times ‘worrying’, ‘panicking’ or
‘experiencing stress’. 38

These psychological impacts were also raised by other Inquiry participants.

The National Council of Women advised that ‘research has indicated that older
women, and particularly older women on low incomes, have a disproportionate
fear of crime in relation to their actual likelihood of being a victim of crime.’ 39

Safety and elder abuse

When raised in the context of home and community life, most references to
safety related to security risks caused by factors external to the home. Safety risks
that occur in the home, such as fraud and theft, were generally considered in the
context of perpetrators unknown to the older person.

The Committee heard extensively about the issue of elder abuse. The sense of
vulnerability outlined in the previous section was not generally associated with
concerns about elder abuse. Awareness of elder abuse is not widespread, which
has implications for its prevention. Furthermore, as State Trustees explained to
the Committee in the context of financial abuse:

Most old people have a view that it will not happen to them and that, ‘My family
will look after me, and I can trust them with everything’, but it is more often than
not their own family that will perpetrate the financial elder abuse. 40

Elder abuse is defined as:

Any act occurring within a relationship where there is an implication of trust,
which results in harm to an older person. Abuse can include physical, sexual,
financial, psychological and social abuse and/or neglect. 41

36 Transcript of evidence 33, Consumer Affairs Victoria, Melbourne, 21 October 2011, p. 6.
37 Transcript of evidence 3, Victorian Council of Social Service, Melbourne, 6 September 2011, p. 4.
38 Submission 86, VincentCare Victoria, p. 22.
39 Submission 18, Women’s Health Victoria, p. 3.
40 Transcript of evidence 32, State Trustees, Melbourne, 18 October 2011, p. 2.
In its submission to the Inquiry, Senior Rights Victoria explained that:

Elder abuse is typically carried out by someone close to an older person, with whom they have a relationship implying trust. This is typically family members, such as a spouse, adult children, grandchildren, siblings or other family members, friends or carers and may be perpetrated as a result of ignorance, negligence or deliberate intent. 42

State Trustees told the Committee that ‘research also showed that sons are most likely to be the perpetrators, closely followed by daughters and then by others closest to the particular person.’ 43 State Trustees also noted that older people at particular risk of abuse are often isolated or dependent on others as a result of:

- Diminished capacity due to dementia and other related illnesses
- Isolation and dependence on others
- Reliance on others for translation, transactions and services relating to the management of their finances, particularly if they are of a culturally and linguistically diverse background. 44

The Committee heard that elder abuse can have a substantial effect on a senior person’s autonomy, independence and financial security. Elder abuse is caused by and perpetuates the disempowerment of senior Victorians. For those older people experiencing elder abuse, it is a major barrier to participation. It can affect their ability to make choices and decisions about how they want to live their life, as well as the choices they make regarding whether or not they will participate and about the extent to which they will participate. 45

Financial abuse is the most prevalent form of abuse experienced by older people. In its recently released *Elder abuse prevention and response guidelines for action 2012-14* (*Elder abuse guidelines*), the Victorian Government defines financial abuse as:

The illegal use, improper use or mismanagement of a person’s money, property or financial resources by a person with whom they have a relationship implying trust. 46

State Trustees elaborates on this explaining that it involves ‘the taking or misusing of an older person’s money, property or assets by someone in a position of trust. It includes misusing an ATM or credit card; to taking money or property, forcing or forging an older person’s signature, or persuading them to change their Will and contracts or power of attorney through deception or undue influence.’ 47

State Trustees also explained that older people can be particularly vulnerable to financial abuse for a range of reasons, and the abuse can often go undetected:

Due to the hidden nature of financial elder abuse, it is difficult to get a sense of the numbers involved, but the research found that up to 5 per cent of Australians over 65 have experienced it and that older women over the age of 60 are most at risk. 48

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42 Submission 82, Seniors Rights Victoria, p. 2.
43 Transcript of evidence 32, State Trustees, p. 2.
44 Submission 28, State Trustees, p. 2.
45 For example, see Submission 4, Lee, L., p. 1.
47 Submission 28, State Trustees, p. 1.
Different groups of older people also experience elder abuse in diverse ways. For example, the Committee identified that for seniors from CALD backgrounds, the challenges associated with elder abuse can be exacerbated. It heard that impartial interpreting services are important in preventing abuse from going unnoticed, as can happen when family members assist as interpreters. 49

A number of promising responses are in place in Victoria to tackle elder abuse. The Victorian Government has recently released the *Elder abuse guidelines*. These guidelines are designed to increase community awareness of elder abuse, empower older people, actively engage professionals to identify and respond to elder abuse, and ensure coordinated multi-agency support to older people experiencing elder abuse. 50

The *Elder abuse guidelines* include an action plan that emphasises partnership between the Victorian Government, local governments and other organisations within the health, finance and legal sectors (for example, Home And Community Care services, Senior Rights Victoria and State Trustees) to develop strategies to identify and respond to elder abuse. 51

In 2008 Senior Rights Victoria was established to provide legal advice, education, information, referral and advocacy on elder abuse, mistreatment and neglect for seniors living in the community. In addition to individual assistance, this organisation provides agencies, service providers and other organisations with information and education programs to help them identify and respond to elder abuse.

Many participants suggested that the use of media would assist in raising awareness of elder abuse in Victoria. For example, suggestions were made that an awareness campaign combined with community engagement and education would contribute to raising the profile of the issue of elder abuse in the community. 52

The Committee also heard that older people need to be supported to understand and exercise their legal rights and avenues to safeguard their personal and financial security. For example:

- Some older people sign legal and financial documentation without fully understanding the contractual requirements.
- Legal and financial safeguards (such as Enduring Powers of Attorney) may need to be considered to ensure a person’s decisions and interests are taken into account in case of a decline in cognitive or physical function. 53

The empowerment of older people through increased awareness of their legal, financial and societal rights has been identified as a strategic outcome in the Victorian Government’s *Elder abuse guidelines*. 54

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49 Submission 85, Federation of Community Legal Centres Victoria, p. 4.
52 For example, see Submission 85, Federation of Community Legal Centres Victoria, p. 6.
53 Benevolent Society & Legal Aid NSW (2011) *Speaking for myself – planning for later life decision making*. Sydney, Benevolent Society and Legal Aid NSW.
Opportunities for Participation by Victorian Seniors

Inquiry participants also suggested that increased efforts are needed to achieve a coordinated agency and industry approach to preventing elder abuse. The Federation of Community Legal Centres noted that in Western Australia protocols have been developed for reporting and referral in cases of suspected elder abuse. This involved community lawyers and advocacy groups working with the Office of the Public Advocate, the police force and the banking industry to reach agreed protocols. The Federation recommended a similar multi-sectoral approach be pursued in Victoria. 55

The Federation also advocated for education and awareness-raising in the financial industry to enable staff to identify risk factors associated with financial elder abuse, as this type of elder abuse often involves dealings with banking and financial institutions. 56 The Committee identified that this is one of the areas for action identified in the Victorian Government’s Elder abuse guidelines.

FINDINGS

That most older people do not think they are at risk of financial and physical elder abuse and often believe that their family will look after them. Distressingly, when elder abuse occurs, it is often perpetrated by close family members.

That older people who are isolated and dependent are at greater risk of elder abuse (examples include language barriers, remoteness and disability).

→ RECOMMENDATION 4.2:

The Committee recommends that, in line with the 2012 Elder abuse guidelines, the Victorian Government:

• works with relevant agencies and industry across the finance, legal and policing sectors to coordinate a multi-sectoral approach to developing protocols for reporting and referring cases of suspected elder abuse
• develops and implements a campaign to raise awareness of elder abuse and how it can be prevented.

4.2.5. Enabling lifelong learning

The connection between empowerment and access to education and knowledge is widely acknowledged. The Committee identified the importance of education for furthering career opportunities, encouraging broader engagement in society and supporting innovation and productivity. The importance of education at all stages of life has been recognised internationally. The Committee observed that systemic approaches to promoting lifelong learning are emerging worldwide.

55 Submission 85, Federation of Community Legal Centres Victoria, p. 1. See also Transcript of evidence 31, Federation of Community Legal Centres Victoria, Melbourne, 18 October 2011; Submission 17, Trexler, G., p. 1.
56 Submission 85, Federation of Community Legal Centres Victoria, p. 7. See also Transcript of evidence 31, Federation of Community Legal Centres Victoria.
In its 1997 *Inquiry into planning for positive ageing*, the then Family and Community Development Committee identified the importance of lifelong learning, stating that:

> Education and training policies have tended to focus on younger people, and the learning needs of older members of the community have been perceived as secondary. Learning is a life-long process – it is consistent with the right to choice, independence and full participation in society – *and the needs of older learners need to be recognised and accommodated.*

Lifelong learning strategies acknowledge the impacts on society of education focused on the young. The European Union (EU), for example, states that:

> Key competences for lifelong learning are a combination of knowledge, skills and attitudes appropriate to the context. They are particularly necessary for personal fulfilment and development, social inclusion, active citizenship and employment.

> Key competences are essential in a knowledge society and guarantee more flexibility in the labour force, allowing it to adapt more quickly to constant changes in an increasingly interconnected world. They are also a major factor in innovation, productivity and competitiveness, and they contribute to the motivation and satisfaction of workers and the quality of work.

The EU emphasised that lifelong learning involves ensuring that key competencies are acquired by young people (through compulsory education and training) and also by adults throughout their lives (by developing and updating skills for employment and life skills more broadly).

As outlined in Chapter 2, participation by older people in education and lifelong learning is low in comparison with other forms of participation seniors engage in. Their participation is also considerably lower than younger people. In 2005 the Victorian Government outlined that ‘Victorians aged 65 and over (1.7%) were slightly more likely to participate in vocational education and training (VET) courses than were Australians of that age group (1.2%). Less than 1% undertook higher [tertiary] education.’

The Committee also identified that different groups of older people (for example those from CALD backgrounds and those living in rural and remote areas) face specific barriers to engaging in lifelong learning.

### Importance of lifelong learning for older people

The Committee heard that lifelong learning empowers older people in improving their employment prospects, engaging in activities of interest, preserving cognitive and physical wellbeing, learning about new technologies and establishing and maintaining social and community connections.

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A 2010 report by the National Seniors Australia (NSA) Productive Ageing Centre, *Later life learning: Unlocking the potential for productive ageing* outlined the key benefits that lifelong learning has for older people:

- Economic – Acquisition of skills and qualifications to improve employment opportunities and increased financial literacy and knowledge.
- Social – Connecting with individuals with similar interests, creation of social networks outside the workplace.
- Health – Improvements in health knowledge, wellbeing, mental health, cognitive performance and reduced risk of dementia.  

Lifelong learning for older people can take many forms. These include formal education, professional training and informal learning. The 2010 National Seniors report identified the following types of lifelong learning for older people:

- Formal education – Education structured towards a formal certificate or accredited outcome.
- Non-formal education – Non-accredited education, including workplace training, Centre for Adult Education (CAE) and personal development courses (such as U3A).
- Informal learning – Unstructured, non-institutionalised learning activities, including learning from colleagues or friends, reading journals, participating in hobby groups and learning through internet / computer usage.

The Committee also identified that long distance education, particularly in light of continual improvements in technology, has significant promise for lifelong learning for older people.  

In research published in 2008 on the participation of older people in vocational education and training (VET), Tom Karmel notes that qualifications obtained later in life have been shown to improve the workforce engagement of older people. He also identifies that the VET element of the Australian education system is a key factor in providing older people with no previous non-school education with ‘second chance’ at further study.

Motivations to participate in education differ among older people. The Committee heard that people in later life learn for employment, interest, for skills development and for life management. It was informed that there can be barriers to lifelong learning for older people, including costs and fewer opportunities to enter into training. The Committee also heard that people are ineligible for government subsidies if they want to gain a qualification at a lower or equal level to the one

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62 An example is U3A Online, see *Transcript of evidence* 8, U3A Network Victoria, p. 4. See also *Transcript of evidence* 22, Professor Wells & Professor Warburton, p. 5.


64 Karmel (2008) *A peripatetic research perspective on older persons and VET*, p. 4.
they already hold. This can be a deterrent for people seeking a career change. While this barrier affects people of all ages, the Committee identified that it can be particularly limiting for people in later life.

Inquiry participants also pointed out that employers can be reluctant to train mature age workers. The Brotherhood of St Laurence suggested that employers believe older people ‘won’t stay long enough’ to justify the investment in training. 65 This is also discussed in the context of discrimination in Chapter 5.

To remove these barriers, the Brotherhood of St Laurence suggested a review of the eligibility for VET fee subsidies to reduce costs for mature age workers, and increased incentives for workplaces to offer traineeships for older people. Section 4.3.2 further discusses re-skilling and training in the context of the labour market.

**Policy approaches to lifelong learning**

The Committee determined that there is a need for greater focus on lifelong learning in Victoria, including improving opportunities for lifelong learning for older people.

In its 2010 report, *Later life learning: Unlocking the potential for productive ageing*, the NSA Productive Ageing Centre concluded that despite strong calls for investment in lifelong learning over the past 20 years, ‘there have been relatively few initiatives to encourage or invest in lifelong learning in Australia, and no comprehensive national policy on learning in later life.’ 66

Similarly, Associate Professor Elizabeth Brooke from the Business Work and Ageing Research Centre at Swinburne University of Technology explained that:

> Skills development is front-loaded towards youth training places. Institutionally, lifelong learning has had low traction as a policy direction in the higher education and vocational sectors and youth places dominate the sectors. 67

During its study tour to the UK and the Netherlands, the Committee found that internationally there is a greater focus on lifelong learning. It identified that strategies have been developed and are being implemented in many nations with the objective of increasing the benefits from a lifelong learning approach.

The Committee considered that Victoria can learn from the experience of other countries. Some promising strategic approaches adopted overseas are outlined in Table 4.2.

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65 *Transcript of evidence 24*, Brotherhood of St Laurence, Melbourne, 5 October 2011, p. 4.


Table 4.2: International policy approaches to lifelong learning

<table>
<thead>
<tr>
<th>Lead government</th>
<th>Approach</th>
<th>Key Features</th>
</tr>
</thead>
</table>
| Scottish Government    | Life Through Learning: Learning Through Life, Lifelong Learning Strategy for Scotland | • Developed in 2004, this strategy aims to achieve ‘the best possible match between the learning opportunities open to people and the skills, knowledge, attitudes and behaviours which will strengthen Scotland’s economy and society.’  
• The Education and Lifelong Learning Directorate is responsible for the strategy within the Scottish Government.  
68 | |
| European Commission    | Strategic framework for European cooperation in education and training    | • Developed in 2009  
• Strategic framework aimed at making lifelong learning a reality across all life stages  
• Activities are being developed to address priority in different levels of education (early childhood through to adult education). These include:  
  • expanding opportunities for learning mobility  
  • enhancing partnerships between education and training institutions and the broader society  
  • promoting multilingualism, innovation, creativity and adoption of ICT (Information and Communication Technology).  
69 | |
| Japan                  | Lifelong Learning Policy Bureau within the Ministry of Education, Culture, Sports, Science and Technology | Responsible for coordination of Japan’s educational policies to promote lifelong learning. Plans and drafts policy, conducts research, analyses the state of domestic and overseas education and promotes policies on information technology. | |

Source: Family and Community Development Committee

The Committee considered that there is merit in the Scottish and European Commission’s strategic approaches, which recognise that lifelong learning is an important part of education across all life stages.

It is the Committee’s view that the Victorian Government needs to develop a policy framework that ensures lifelong education is established as a feature of broader education policy.


FINDING:

That there needs to be a greater strategic focus on lifelong learning in Victoria that encourages participation, broader employment choices in later life and ensures that lifelong learning is accessible to diverse groups of seniors (such as those living in rural and remote areas).

4.2.6. Enabling volunteering

Throughout the Inquiry, the Committee heard about value of volunteering as a means of supporting and empowering older people to participate. In the words of Mrs Suzanne Fallon:

Volunteering is not only good for the volunteers it’s also good for the community and provides links across generations, cultures and genders that no amount of dollars can estimate. 70

Inquiry participants told the Committee that volunteering can:

• support intergenerational relationships to combat ageism and discrimination
• help reduce social isolation
• maintain and develop skills and knowledge
• improve self-worth
• encourage meaningful contributions to society
• promote active and healthy living. 71

As outlined in Chapter 2, the Committee heard that older people are very active in volunteering activity. However, Inquiry participants also spoke of barriers that can be experienced by some older people who want to volunteer. These include:

• availability of meaningful volunteering opportunities that utilise older people’s skills and knowledge
• regulatory and financial barriers, including age-based limits on insurance (discussed further in Chapter 5)
• competing time demands, including engagement in work and informal caring
• lack of clear pathways into volunteering. 72

Others noted that there is considerable pressure on older people to undertake volunteering work. Mr Lindsay Doig, for example, noted that:

Volunteering is now almost compulsory. Government and community expectations now compel people to devote time to ‘good causes’ or risk being...

71 For example, see Transcript of evidence 20, Volunteering Victoria, Melbourne, 5 October 2011; Submission 56, Greatconnections, p. 2; Submission 60, Leslee, J., p. 1; Submission 31, Trezise, D., p. 1; Submission 52, Phillips, H.M., p. 1; Submission 53, Doig, L., p. 3; Transcript of evidence 22, Professor Wells & Professor Warburton.
72 Transcript of evidence 20, Volunteering Victoria, p. 3; Submission 1, Fallon, p. 2; Submission 53, Doig, p. 3; Submission 43, Union of Australian Women – Darebin Group, p. 4; Submission 63, Golden Plains Shire & Women’s Health Grampians, pp. 3,14; Transcript of evidence 22, Professor Wells & Professor Warburton, p. 4.
regarded as bludgers or spongers, living off the community instead of contributing to it. Volunteering is certainly something to be encouraged, but many people fear engagement because of pressures for it to become all consuming, something almost impossible to escape once one is entrapped. 73

During its study tour to the UK and the Netherlands, the Committee observed the benefit of supporting senior volunteers in meaningful engagement. For example, Professor Hans Becker from Humanitas (founder of the Apartments for life concept discussed further in Chapter 7), spoke about the importance of engaging and supporting older volunteers in the running and maintenance of ‘reminiscence museums’ within the apartment facility.

The Committee considered that well-designed volunteering programs can maximise the participation of older people and minimise the barriers that may prevent volunteering. 74

**FINDING**

That meaningful voluntary work supports and promotes participation by older Victorians in all aspects of life.

**RECOMMENDATION 4.3:**

The Committee recommends that the Victorian Government supports evidence-based research and investigation of international best practice for volunteering programmes that ensure maximum participation of older people, and minimise barriers that may prevent volunteering.

### 4.3. Empowerment in the labour market

The Committee considered the factors that develop and build on existing assets and capabilities of older people in the context of their role in the labour market. It heard that people in later life often want to continue contributing to the labour market. Reasons for ongoing participation by older people in the workforce are diverse. Some people have a need to keep working for financial security. Others want to continue contributing, to maintain professional connectedness, and to feel recognised.

Increasingly, people in later life are intending to stay longer in the workplace. For example, in a pilot study on the retirement intentions of staff in local government, the Municipal Association of Victoria (MAV) identified that ‘large numbers of employees in the target age group are planning to remain in the workforce beyond the generally accepted retirement ages.’ 75 This is consistent with information

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73 Submission 53, Doig, p. 3. See also Submission 56, Greatconnections, p. 2; Submission 60, Leslee, p. 1; Submission 31, Trezise, p. 1; Submission 52, Phillips, p. 1; Submission 50, Volunteering Victoria, p. 8; Transcript of evidence 22, Professor Wells & Professor Warburton, p. 4.

74 For example, see Transcript of evidence 20, Volunteering Victoria, p. 4; Transcript of evidence 44, City of Greater Geelong, Geelong, 4 November 2011, p. 4; Submission 56, Greatconnections, p. 2.

75 Submission 71, Municipal Association of Victoria (MAV), p. 12.
the Committee received from the Australian Bureau of Statistics (ABS), which explained that:

In 2008–09 there were 4.3 million Australians in the labour force who were 45 years and over. Of these, 575,000 – almost 13 per cent – said they never intended to retire. 76

These intentions of workers are consistent with government policy directions. As the Victorian Chamber of Commerce and Industry (VECCI) advised the Committee, ‘it is an economic imperative to lift the rate at which older Victorians remain in or re-enter the workforce.’ 77 VECCI highlighted the points made in the Australian Government’s Intergenerational Reports that have informed the emphasis on increased workforce participation by older workers:

The first Intergenerational Report was released in 2003. The subsequent revisions in 2005 and 2010 have confirmed the importance of the underlying principles of population growth, workforce participation increase and productivity improvement in addressing the impact of an ageing workforce. 78

The Committee also noted that projections in the 2010 Intergenerational report suggest that by raising workforce participation of workers aged 55–64 from 62 per cent to 67 per cent, real GDP would increase by 2.4 per cent in 2049-50. 79

Inquiry participants were aware of the developments in government policy at the national and state levels to account for an ageing population. For example, in its submission the Darebin Branch of the Union of Australian Women (UAW) stated that:

The paradigm of ageing and paid work is now embodied in Government Policy, such as changes to the relationship between Pensions, Superannuation income streams, taxation and how Seniors will pay for their health care.’ 80

Similarly the Victorian Equal Opportunity and Human Rights Commission (VEOHR) stated that ‘there is strong policy alignment at the state and federal level around developing and utilising the skills of older workers to address labour shortages and stimulate economic growth.’ 81

The Committee met with representatives from the Australian Government and discussed the nature of the policy directions relating to seniors and employment. It was informed about a number of initiatives underway to try to promote the participation of older people in the labour market. Box 4.1 outlines the policy initiatives being implemented as part of the Australian Government’s Experience+ program.

76 Transcript of evidence 30, Australian Bureau of Statistics, Melbourne, 18 October 2011, p. 3.
77 Submission 83, Victorian Employers’ Chamber of Commerce and Industry (VECCI), p. 2.
78 Submission 83, Victorian Employers’ Chamber of Commerce and Industry (VECCI), p. 2. See also Transcript of evidence 11, Victorian Employers’ Chamber of Commerce and Industry (VECCI), Melbourne, 9 September 2011.
80 Submission 43, Union of Australian Women – Darebin Group, p. 2.
Opportunities for Participation by Victorian Seniors

Box 4.1: Commonwealth initiatives for employing older people

In 2010, the Australian Government established its Experience+ program to support older job seekers and employers to encourage the employment and retention of mature age job seekers and workers. As part of the Experience+ program, recent initiatives include:

- **Mature age participation – Job seeker assistance program (from 2013)** program will provide eligible job seekers aged 55 years and over with a peer-based environment in which to develop their IT skills, undertake job-specific training and prepare for work.

- **Jobs bonus (2012–present)** is a financial incentive available to employers who recruit an eligible mature age job seeker, aged 50 years or over.

- **Experience+ career advice service (2012–present)** provides professional career counselling and a resume appraisal service to mature age Australians aged 45 years and over.

- **Investing in experience employment charter (2011)** is designed to encourage the recruitment and retention of mature age people. It outlines nine principles for creating fair and productive workplaces for mature age staff, with the aim of strengthening positive age-management practices in workplaces across Australia.

- **Investing in experience toolkit (2011)** is a step-by-step guide for employing people aged 45 years and over. It contains practical advice for employers looking to recruit and retain mature age staff, and to implement positive age management practices.

- **Corporate champions project (2011)** is a program that works with a number of employers who make a public commitment to move toward better practice in employing mature age people. Corporate Champions receive a package of tailored support to help them achieve the better practice standards outlined in the Investing in experience employment charter.

Source: Department of Education, Employment and Workplace Relations (DEEWR), Experience+ website. 82

However, despite the desire to continue participating in the workforce, for some people in later life this becomes increasingly difficult. For example, in her submission Associate Professor Elizabeth Brooke stated that:

In spite of recent government policy, older workers face a multitude of interrelated barriers to workforce re-entry and retention. 83

The Committee identified that the barriers older people experience in employment participation are both structural and individual.

Associate Professor Elizabeth Brooke told the Committee about an innovative project that focused on the structural and individual barriers experienced by older workers. It was undertaken by the Business Work and Ageing Centre for Research at Swinburne University of Technology and funded through a VicHealth Public Health Fellowship. METEOR (Matching Employees to Training to Ensure 82 Department of Education, Employment and Workplace Relations (2011) New incentives and support for mature age job seekers. Accessed on 7 June 2012 from http://www.deewr.gov.au/Employment/Programs/ExpPlus/Pages/supportformatureagejobseekers.aspx.

83 Submission 79, Associate Professor Elizabeth Brooke, p. 1.
Ongoing Recruitment and Retention) was the approach developed, which was derived from the Workability concept developed in Finland.

Associate Professor Brooke explained that ‘Workability refers to the balance between an individual’s capacities and resources and the demands of his/her job.’ 84 Associate Professor Brooke further outlined the concept:

The Workability approach is a multidimensional approach to workforce retention, including health and functional capacities, skills and competence, motivation, values and attitudes (including age awareness) and workplace factors (including leadership, work community and work structures). A person’s resources consist of health and functional abilities, education and competence and values and attitude. Work, on the other hand, covers the work environment and community, as well as the actual contents, demands and organisation of work. 85

The Committee noted that the project had a specific focus on promoting the retention of older workers in aged care employment.

Barriers to the participation of older people in the labour market include employer attitudes to older workers, discrimination, and workplace culture and physical capacity of the worker. Chapter 5 discusses issues relating to discrimination in the workplace, including recruitment and age-related bullying and harassment. In addition, issues for older people relating to re-skilling and unemployment were also raised.

4.3.1. Changing workplace culture and employer attitudes

Many Inquiry participants raised the issue of workplace culture and employer attitudes towards older workers, and physical capacity as key factors influencing the participation rates of seniors in the workplace.

The Committee identified that there can be a mismatch between older people and employers regarding workplace culture. For example, older people often are seeking a specific type of culture in which to work. Professor Biggs, Professor of Gerontology & Social Policy at the University of Melbourne, explained to the Committee that:

What recent research has shown is that while mature adults – so baby boomers, if you like – may have the abilities, the skills and the motivation, if the workplace culture itself is not one that is attractive to them, they will not go back to work, particularly those in the more skilled groups, which are going to be the groups that the economy needs to keep on keeping on. 86

The Brotherhood of St Laurence similarly emphasised the importance of ‘the workplace culture being made inviting enough for an older person.’ 87 It referred to employer attitudes and noted that ‘it is very hard to be an older person in a workplace and have people turn around and say, “You’re too old to do that”. It is about changing attitudes and perhaps even changing some of the tasks.’ 88

84 Submission 79, Associate Professor Elizabeth Brooke, p. 2.
85 Submission 79, Associate Professor Elizabeth Brooke, p. 3.
86 Transcript of evidence 18, Biggs, S., University of Melbourne, Melbourne, 5 October 2011, p. 5.
87 Transcript of evidence 24, Brotherhood of St Laurence, p. 4.
88 Transcript of evidence 24, Brotherhood of St Laurence, p. 4.
One of the key factors discussed about workplace culture related to the need for flexibility in the workplace, without leading to the exploitation of older workers. Banyule City Council, for example, stated that older workers:

Want flexibility of work practices to allow for those seniors who wish to, to work longer … but possibly in different ways. E.g. on a limited project, six months off then six months on, weekends only. 89

In its research about the retirement intentions of council workers, MAV similarly found that ‘mature age respondents indicated that they were keen to have opportunities such as working part-time, flexible working arrangements, extended leave opportunities, retraining to undertake alternate work and opportunities for redeployment when unable to meet current job requirements.’ 90 The research highlighted the need for councils to assist employees in their transition to retirement. MAV indicated that councils are implementing activities such as targeted health and wellbeing programs, increasing the availability of part-time work and more flexible working opportunities.

The Brotherhood of St Laurence also suggested there is a need for workplaces to be more inviting for older people in terms of attitudes and flexibility:

It is about thinking laterally about how things can be done and also possibly changing the physical environment to enable older people to be in an employment situation. 91

The Federation of Community Legal Centres pointed out that there is a precedent in the *Equal Opportunity Act 2010* (Vic) to require employers to ‘accommodate’ the parental or carer needs of employees and to make ‘reasonable adjustment’ for employees with a disability. 92

The Committee identified mixed responses in regard to employers and their attitudes to older workers. It heard that there is a general tendency by employers to value younger workers over mature age workers. In its submission, for example, Uniting Aged Care suggested that:

Workforce culture has created an environment in which the older members are expected to retire and make way for someone younger. Older workers continually exit the workforce with little recognition of the wealth of knowledge and experience that walks out the door with them. 93

Research conducted by the Recruitment and Consulting Services Association (RCSA), found that ‘some clients felt that older workers did not fit the image of a modern workplace culture because they do not fit a young physical image they want to portray or possess the cultural image of the business.’ 94

On the other hand, the Committee was told that employer attitudes are beginning to change. For example, RCSA informed the Committee that employers generally

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89 Submission 41, Banyule City Council, p. 5.
90 Submission 71, Municipal Association of Victoria (MAV), p. 12.
91 Transcript of evidence 24, Brotherhood of St Laurence, p. 4.
92 Submission 85, Federation of Community Legal Centres Victoria, p. 9.
93 Submission 88, Uniting Aged Care, p. 2.
consider mature age workers to be more stable and that they experience less turnover of older workers. Consultations conducted by the RCSA indicated that recruiters hold positive views of older workers:

Recruiters observed that many clients commented favourably about older workers including that they have good life experience to apply to decision making, are good mentors for younger employees and have good skills. They also found older workers to be more stable employees with a lower rate of job turnover. Recruiters felt clients did not believe older workers were more expensive to employ or that they were not worth hiring because they planned to soon leave the workforce. They were … encouraging about older workers having positive attitudes to work.

These views were reinforced by other research literature the Committee reviewed. The Australia Institute outlined the value of older workers to the economy, as shown in Table 4.3:

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Feature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of work</td>
<td>Improves with age</td>
</tr>
<tr>
<td>Corporate memory</td>
<td>Should not be discarded</td>
</tr>
<tr>
<td>Job turnover</td>
<td>Twenty five per cent higher for younger workers</td>
</tr>
<tr>
<td>Recruitment costs</td>
<td>Turnover is reduced</td>
</tr>
<tr>
<td>Training costs</td>
<td>The young are five times more likely to change jobs</td>
</tr>
<tr>
<td>Absenteeism</td>
<td>No observable difference</td>
</tr>
<tr>
<td>Loyalty, work ethic and reliability</td>
<td>Usually higher for mature age workers</td>
</tr>
<tr>
<td>Company structure</td>
<td>Should reflect the customer base</td>
</tr>
</tbody>
</table>


The Australian Industry Group indicated that there is increasing recognition of the value in retaining older people and their skills. Making adjustments to the workplace culture is one way to achieve this:

Some companies have been quite innovative in the way they have retained older workers and maintained those skills. I think that must be part of the discussion you are having: how we can make sure that those skills are retained and better utilised in a workforce, and how people can be encouraged to stay in the workforce.

95 Submission 87, Recruitment and Consulting Services Association, p. 8.
96 Submission 87, Recruitment and Consulting Services Association, p. 8. See also Transcript of evidence 29, Recruitment and Consulting Services Association.
97 Transcript of evidence 28, Australian Industry Group, Melbourne, 18 October 2011, p. 2. See also Transcript of evidence 44, City of Greater Geelong, p. 5.
The RCSA also told the Committee that there is growing support amongst employers for flexible work arrangements for older people:

From an employer’s point of view, I have been hearing constantly, ‘Can we find some other mechanisms that will help that engagement and just recognise that individual’s particular situation, be it that they are caring for a sick partner, be it that they look after their grandkids, be it that they might have various family situations or be it that they might have different financial situations et cetera, so that there is some recognition?’ 98

Other industry bodies have also been working to achieve change in attitudes about employing older workers. The RCSA, for example, determined that ‘the consensus is that the need to develop the mature aged workforce is essential, the challenge is to effect a change in workplace culture.’ To address this, in 2004 at its Productivity Symposium it committed to:

- Educate participants on age management issues
- Explore strategies to improve recruiters’ age management policies and practices
- Explore strategies to influence clients to recruit mature age workers. 99

VECCI also developed the Grey Matters program that ran in 2010-11. It aimed to support the placement of older job-seekers. VECCI identified that, at the conclusion of the program:

The project assisted in placing participants into employment both directly and indirectly in a wide range of sectors from professional services to community services and retail. The strongest employment gains were seen in community services 18.8% and professional services 16.8% followed by education 10% and transport and distribution 10%. 100

The World Health Organization (WHO) also supports flexible employment arrangements across the life course. As discussed in Chapter 3, Dr John Beard, Director of Ageing and the Life Course at the WHO observed that companies are beginning to modify their operations to better accommodate older people. One example provided was an American initiative that has seen companies increasingly offering staff the option to work a flexible 1,000 hour year instead of retiring. 101

During its study tour to the UK and the Netherlands, the Committee heard about emerging practice adopted by the UK Government through A guide to employing older workers on the government’s online resource for businesses, Business Link. This guide raises awareness of age-related legislation and changes to retirement age, outlines strategies for managing, recruiting and training an older workforce and provides guidance and case studies about good practice. 102

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100 Submission 83, Victorian Employers’ Chamber of Commerce and Industry (VECCI), p. 5. See also Transcript of evidence 11, Victorian Employers’ Chamber of Commerce and Industry (VECCI).
4.3.2. Achieving flexible career pathways

The Committee heard there is a need to support older people to develop new skills and to enhance their existing skills to achieve more effective career planning for people through their life course.

In her submission, Associate Professor Elizabeth Brooke advised the Committee of the importance of flexibility to enable adaptable career pathways. She highlighted the importance of such flexibility in meeting demands caused by skill shortages:

Problems in generating skills utilisation of senior Victorians include the location, timeliness and skilling levels and articulation with enterprises. Macro-level planning, how do vocational pathways intersect with age? How can pathways be constructed which connect skills with enterprise demand? 103

The Brotherhood of St Laurence explained that findings from its research into involuntary employment of mature age workers revealed the difficulties older people have when they want to move into a new career:

One of the things that came out of the research, and it is more widely known than our research, is the difficulty a lot of people have in changing careers later in life. If you have been made redundant, for example, because the industry that you have been working in is defunct – there is no call for what it did – and you have been skilled to work in that industry, to actually change and pick up a new career is really difficult. 104

The Australian Industry Group also identified that often older workers ‘want to continue to work, but they need to work in different ways, and these might be ways that are new to the company.’ 105

The Committee found that while more flexible workplaces and career pathways are important, a critical issue relating to achieving a flexible career relates to the need for ongoing training and re-skilling. In relation to re-skilling for older people, the AIR Southern Cross Division told the Committee that:

Much more consideration needs to be put into planning for the re-training of seniors, in terms of re-training where earlier skills are no longer appropriate. This is important, not just from an economic perspective, but for seniors’ wellbeing and the maintenance of self-esteem, providing a sense of meaning and purpose. 106

This was reiterated by Mr Geoff Williams who explained that ‘it needs also to be taken into consideration that in my retailing field... furniture... each day requires lifting and shifting of various items that become harder to undertake with old creaking bodies.’ 107

Research referenced by the Brotherhood of St Laurence indicated that many employers were reluctant to train older people:

They may well find that they do not get too many training opportunities once they reach a certain age, because a lot of employers do not think they are worth training past whenever. 108

103 Submission 79, Associate Professor Elizabeth Brooke, p. 2.
104 Transcript of evidence 24, Brotherhood of St Laurence, p. 4.
105 Transcript of evidence 28, Australian Industry Group, p. 4.
106 Submission 9, Association of Independent Retirees – Southern Cross Division, p. 8.
107 Submission 2, Williams, G., p. 1.
108 Transcript of evidence 24, Brotherhood of St Laurence, p. 3.
The new Federal initiative *Mature age participation – Job seeker assistance program* beginning on 1 January 2013 aims to address the need for job specific training. The Committee determined that there is a role for the Victorian Government to work with business, industry bodies and older workers to create greater opportunities for people in later life to develop new skills and enhance their existing skills. This focus on skills development and enhancement is critical to achieving flexible career paths.

In particular, there is a need to move towards a dialogue of flexible vocational pathways. By providing opportunities for career changes through lifelong learning, professional training opportunities, and flexible workplaces, the Committee considers that Victoria will be better positioned to maximise its productivity, innovation and competitiveness.

**FINDING:**

That improving career pathways, providing opportunities for re-skilling and flexibility and changing workplace culture and employer attitudes are essential to empowering people in the labour market in later life.

**RECOMMENDATION 4.4:**

The Committee recommends that the Victorian Government works with stakeholders to develop and implement a workforce strategy for older workers in Victoria that aims to:

- change workforce culture and employer attitudes towards older workers
- achieve flexible vocational pathways for people throughout the life course.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner to monitor the workplace strategy and report to the lead minister for older people.

### 4.4. Empowerment through civic participation

In assessing the empowerment of people in later life, the Committee considered older people’s capabilities as civic citizens and opportunities for their civic participation.

The Committee defined civic participation or civic engagement as follows:

*Civic engagement describes how an active citizen participates in the community in order to improve conditions for others or to help shape the community’s future.*

In relation to civic participation, the *United Nations principles for older persons* (UN Principles) adopted in 1991 state that:

*Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with younger generations.*

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Chapter Four: Empowering people in later life

Older persons should be able to form movements or associations of older persons.\textsuperscript{110} Research findings emphasise the value of participatory citizenship for older people in retaining a self-perception of being engaged, effective and aware.\textsuperscript{111} Civic engagement can be considered to fall into three broad categories:

- Civic indicators—such as community problem solving, regular volunteering for a non-electoral organisation, fundraising for charity
- Electoral indicators—such as persuading others, campaign contributions, displaying badges, signs, stickers
- Indicators of political voice—such as contacting local member of Parliament, contacting media, protesting, signing petitions, boycotting, canvassing.\textsuperscript{112}

The Committee heard that people in later life want to participate in civic life. They want to have their voices heard and the opportunity to be involved in decision making. The Committee determined that local government authorities are key agents for engaging older people in civic activities.

### 4.4.1. Civic engagement in later life

Inquiry participants told the Committee that older people want to be heard and valued, be involved in decision making, contribute to society in a multitude of ways, and make a difference to the future. In the words of Ms Joan Leslee:

Many seniors, especially those at the younger end of retirement, are very enthusiastic about life... Seniors have the time to explore and develop their understanding of both local and global issues, which enables them to make informed contributions to discussions at a policy level. They are inclined to be vocal about issues, and increasingly seek, through the volume of their numbers, to have their voices heard at the ballot box.\textsuperscript{113}

In its submission, the PACE also commented that older people want to participate in opportunities 'where they see they can/are making a difference; where they can see outcomes which will improve their and others' futures.'\textsuperscript{114}

The Committee heard, however, that the experiences of many older people are different from the aspirations in the UN Principles and the hopes and expectations of seniors themselves. Older people reported that their experiences include feeling invisible, being patronised or ignored, not being respected, feeling irrelevant and being considered 'quaint'.

\begin{itemize}
  \item 110 The United Nations General Assembly (1991) \textit{United Nations principles for older persons}. New York, UN.
  \item 112 Adler & Goggin (2005) \textit{What do we mean by ‘civic engagement’?}, p. 242.
  \item 113 Submission 60, Leslee, p. 1.
  \item 114 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 11.
\end{itemize}
The issue of invisibility was raised by many and, as Ms Anne Scott explained in her submission, ‘seniors, like anyone, want to be valued, want to be needed, want to be appreciated. They do not want to be invisible or patronized or scorned.’ 115

Mr Lindsay Doig told the Committee that:

Seniors are rarely acknowledged outside their own ranks and many of us believe ourselves to be virtually invisible, even in areas where we have great experience or expertise. We are seen as out-of-date/touch, irrelevant, uninfluential and quaint. 116

These negative experiences often result in older people feeling they are not being heard.

In his submission Mr Graham Stoodley emphasised the importance of ‘recognising the value of older people rather than the present situation where older people are ridiculed and/or trivialised as useless and redundant “old” people.’ 117 PACE also emphasised that ‘there needs to be greater uptake of seniors’ advice/experience/knowledge; they need to feel they are actually making a difference, not hitting their head on a brick wall.’ 118

VincentCare Victoria explained that in its consultations for the submission, seniors felt that “voicing” and “being heard” were important dimensions to participation. They equated participation with “being included and not excluded” as well as being “acknowledged.” 119 Banyule City Council stated that it is not enough just to acknowledge the importance of hearing the views of older people. It emphasised that central to participation is also ‘having processes to be heard and listened to.’ 120

Mr Lindsay Doig also stated that what is required is ‘some level of recognition and respect for the views expressed (even if [these] are not ultimately persuasive).’ 121

Clearly seniors want to be involved in decision making, which the next section of the report discusses.

**FINDING:**

That people in later life want to participate in civic life, to have their voices heard and the opportunity to be involved in decision making on policies that affect their lives.

### 4.4.2. Beyond consultation

Victorian seniors told the Committee that they have been consulted extensively over the past 10 to 15 years. The Committee identified that the issues older people were raising in the late 1990s are similar to those raised a decade on in further consultations. Furthermore, the Committee’s Inquiry revealed that the concerns, desires and issues that older people and their representatives spoke about are common in theme to earlier consultations.

The message the Committee heard was that older people want to see action. They are open to the development of new strategies, but only if they are implemented. They

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117 Submission 19, Stoodley, G., p. 2.
118 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 12.
120 Submission 41, Banyule City Council, p. 5.
121 Submission 53, Doig, p. 9.
have welcomed opportunities for consultation, but they want to see the outcomes of those discussions. As Ms Janet Wood, President of COTA, told the Committee:

There are lots of groups of older people, senior citizens and so forth out there who have been consulted and consulted and consulted... The consultation has to have a purpose and an outcome so that people then learn that their input had some importance. There is that, but I have also been thinking of what I have called ‘honouring the experience’. 122

Similarly, Mr Lindsay Doig expressed the view that ‘plans and strategies are great, but only if they translate quite directly into action.’ 123

As noted, the Committee identified some common themes that have been raised by older people during consultations over the past 10 to 15 years. The messages received in the current Inquiry complemented the themes of the 1997 Inquiry into planning for positive ageing conducted by this Committee and the Seniors speak up! report published by the Ministerial Advisory Council of Senior Victorians after community consultations undertaken in 2008. 124 They include the importance of:

- independence
- connectedness and avoiding loneliness
- safety and security
- health and wellbeing
- access to services, transport, housing
- access to information to inform choices and decision making
- cost of living and financial security
- improving perceptions of ageing and older people
- contributing to society through social, community and economic avenues.

Having been consulted and identified these broad and consistent themes, older people want to be involved in the decision making that leads to solutions.

Views inquiry participants expressed to the Committee in regard to the importance of being involved in decision making are reflected in the submission from Benetas. It told the Committee that for older people:

Participation is about control, choice and empowerment. It is linked with notions of autonomy and self-determination and means that senior Victorians are at the centre of discussion and decisions regarding issues affecting their lives. They need to be present when decisions are made and their views need to be given full consideration. They need to be provided with relevant information, education and resources so they can be fully engaged in the decision making process. 125

123 Submission 53, Doig, p. 11.
125 Submission 20, Benetas, p. 7.
Opportunities for Participation by Victorian Seniors

It also explained that:

It is not just about senior Victorians being involved in various activities such as surveys, representation on committees and involvement in projects. It needs to be an integrated and dynamic part of the culture and practice of Government and service organisations. It has to be embedded in the culture so that it permeates all aspects of planning, delivery and review. 126

Engaging older people in local communities

From 2005 to 2009, the MAV in partnership with COTA undertook the Positive ageing in local communities project. The project had a range of goals, but central to these was the commitment to involving older people.

In the 2008 evaluation report prepared by Project Partnerships, it explained that:

All demonstration projects, regardless of their focus, recognised the importance of engaging older people and were able to give voice to older people in expressing their needs and ideas. 127

The evaluation indicated that an estimated 10,784 older people participated in the 31 demonstrations projects. The approach the Project took to engaging older people was broad and ‘a wide range of engagement methods and approaches were used.’ 128 Each project also determined its own method of engaging older people.

The evaluation reported that participants in the local government projects had a generally positive experience. They felt they had been heard and had an opportunity for real input into decision making. They made new connections and enhanced existing friendships. They felt able to contribute their skills and knowledge. The sense of recognition of their experience, knowledge and skills was also highlighted. Participants in the project also indicated that they were more aware of community activities and services and felt a more positive image of ageing had been engendered. 129

In addition to the positive outcomes for older people, the evaluation also reported that local councils were influenced in a number of ways by the projects. Councils gained an increased recognition of the importance of older people’s voices and views in council advisory structures. Service gaps were identified within and outside local government. Councils modelled ‘behaviours to the broader community, especially in relation to the flexible employment of older workers.’ 130

As part of its study tour to the UK and the Netherlands, the Committee had the opportunity to learn about the activities of the Welsh Assembly Government and local government authorities in relation to ageing well programs for older people. One of the keys to the success and the sustainability of the ageing well

126 Submission 20, Benetas, p. 7.
program is the appointment of a Strategy for Older People Coordinator in each local government authority. An outline of the way in which the local government authorities are involved in ageing policy is provided in Box 4.2:

**Box 4.2: Commonwealth initiatives for employing older people**

In Wales, local government plays a lead role in the delivery of the Welsh Assembly Government’s Strategy for Older People in Wales.

Local authorities in Wales have a cabinet-style executive with the dominant political group or coalition making decisions under the scrutiny of the council as a whole. In each area a local action plan for older people is developed which feeds into the local Community Plan and the local Health, Social Care and Well-Being Plan.

**The Strategy for Older People Coordinator** is a role within each local authority in Wales. The Coordinator’s role is to develop new approaches to the development of policy and services in conjunction with other departments and agencies, including Local Health Boards, NHS Trusts, the local voluntary organisations and with older people.


In addition, a local action plan is developed in each area which feeds into the local Community Plan and the local Health, Social Care and Well-Being Plan.

The Committee determined that local government authorities are the key agent for change in Victoria regarding older people. It recommends that local government authorities have an ongoing role in promoting the participation of seniors and ensuring their involvement in decision making in the context of local community activities and services.

**FINDINGS:**

That a great deal of consultation has been undertaken over the past 15 years relating to ageing, and it is now time to act on the lessons gained using a more coordinated approach.

That enabling older people to participate in representative bodies, to engage in community mentoring and leadership, contributes to older people’s civic participation and encourages intergenerational relationships.

**RECOMMENDATION 4.5:**

The Committee recommends that the Victorian Government works with local government and its representative bodies to provide ongoing opportunities for seniors to be involved in decision making at the local level through:

- the appointment of ageing well coordinators in all local government areas
- ensuring ageing well coordinators develop and implement local strategies in line with a Victorian statewide strategy for older people.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the work of coordinators is monitored and reported annually to the Commissioner for Older People.

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4.4.3. Representative bodies for people in later life

The Committee identified that a key way that older people participate in civic activities is through a representative body for seniors. While the Committee did not receive substantial evidence relating to involvement with a representative body, it did hear extensively from people engaged in organisations representing the interests of seniors, such as National Seniors Australia, the Residents of Retirement Villages Victoria and Council on the Ageing.

In a history of civic engagement by older people in the United States, W. Andrew Achenbaum expressed the view that:

Citizens who historically have engaged in civic activism through voluntary associations typically do so out of enlightened self-interest – and they have not come only from the ranks of the young and middle aged... Elders have been leaders in galvanizing voluntary associations. 132

In Australia, older people are equally active in uniting to join forces in voluntary, membership based organisations that represent the interests of seniors.

The Committee recognises the valuable role these bodies perform in advocating to governments and their involvement in important work that promotes the participation of older people. It identified similarities across the general functions of representative bodies, which include:

- providing a voice on issues specific to people in later life and advocating the interests of seniors to governments
- contributing to the policy debate, advocating recommendations on policy development and conducting research
- providing opportunities for members, such as member discount and benefits and opportunities for interaction
- providing information, services, resources and activities.

Research the Committee examined related to motivating people to participate in representative bodies revealed that motivations for participating included a number of ‘commitments’, such as a commitment to ‘place’, a cause or a set of values, or commitment derived from personal experience of difference, disadvantage or oppression. 133

Research findings also revealed that there is a dialogue of the ‘usual suspects’, which needs to be approached cautiously to avoid undermining the legitimacy of the contribution of those who are regularly involved. Bearing this in mind, Barnes and colleagues comment that there is:

A genuine concern that the distribution of ‘opportunities’ for participation is too narrow, that some people are doing too much and others are not getting a look in – because the design of participatory processes or the rules and norms associated with these are exclusive, because people simply do not know what the opportunities

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are or because their personal, social, economic and spatial circumstances make it hard for them to take part. 134

The researchers identified that participation tended to be primarily by people who ‘were at the higher end of the social spectrum in terms of income or previous income and educational background, and that in these senses they were atypical of both the population as a whole and of older people in particular.’ 135

4.4.4. People in later life as mentors, leaders and community champions

The Committee heard that a cultural shift in attitudes towards older people has led to the loss of the dignity, authority and respect formerly associated with old age. With the increasing gap across the generations and the high value placed on ‘youth’ in today’s society, Inquiry participants suggested that the value of seniority in the community has declined.

PACE, for example, expressed its view on the loss of respect for older people:

What has been lost is their role as ‘elder’ – the respect and acknowledgement by the community of the accumulated knowledge and experience which in the past has been used to mentor and advise family and community. Seniors’ ‘wise-ness’ is not actively sought or utilized as well as it might be. 136

To address this change, PACE recommended to the Committee that ‘policies and initiatives need to reinstate and promote seniors’ input as “elders”, affording them the respect and acknowledgement of their accumulated knowledge and experience with which they can mentor and advise their family, their local community and the community at large.’ 137

The Committee considered that lessons could be learnt by exploring the acknowledgement and respect accorded to elders in Indigenous communities. In his article, ‘The social construction of old age as a problem’, Malcolm L. Johnson has suggested that:

Powerful cultural, religious, ideological and historical influences have shaped attitudes to older people and to eldership…

In the great religious and associated ethical literature of the past three millennia, old age holds a place of dignity, authority and respect. It is depicted as a repository of wisdom and the life-stage of accumulated seniority. 138

What Johnson highlights in the context of today’s society is that ‘there is no new global framework as an established response to the radically change demography

136 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 5.
137 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 1.
opportunities for participation by victorian seniors

of the twenty-first century. The place of old age in the lifemap is still under review.¹ 139

The Committee considers that the role of older people as mentors, leaders and champions is critical to the development of a new framework for understanding seniority in the life course. Issues relating to the importance of changing perceptions of ageing and older people are discussed in Chapter 5. Also, while there are overlaps with this section, the relationship across the generations is also considered in greater detail in Chapter 5.

The Committee has explored the role of older people in seniors’ mentoring and community leadership. These roles can contribute to new understandings of ageing and experiences of later life in the broader community:

- Community mentoring – for example, including seniors taking on roles in the community as peer educators and role models, as mentors to support younger people to build knowledge and skills and as participants in advocacy and policy processes.
- Community leadership and champion roles – for example, building community capacity, networks and strengthening communities through promoting the connectedness of older people with local community.

Community mentoring and leadership initiatives

During the Inquiry, the Committee was exposed to a range of initiatives relating to the role of older people in community mentoring roles and as leaders and champions in the community.

For example, SAGES is a community-based mentoring program that taps into the life experiences and knowledge of older New Zealanders to help families and individuals in their community. Through SAGES, people develop their skills in home management, cooking, budgeting and parenting. Non-government organisations are contracted to deliver SAGES. These organisations recruit and train mentors and match them with families.

In the context of community leadership, the Committee heard about the Victorian Inner East Social Inclusion Initiative. This is a program focused on engaging isolated older people in the community. As part of the Community leadership program component of the project, participants were trained and supported in community leadership roles.

Participants were from diverse backgrounds and ranged in age from their twenties to their eighties, with three out of the 20 participants aged over 70. The program generated a number of community projects. An evaluation of the program conducted in 2010 found the projects developed showed promise in improving social inclusion for selected communities, and that the ‘community leadership course was a successful way of developing community leaders who have begun to address the important issue of social inclusion in their communities.’ ¹ 140

The Committee received considerable evidence about a program known as the Experience corps. This is a US program that engages older people to tutor

Melbourne, Australian Institute of Primary Care.
children in basic literacy skills and mentor students. The program commenced in 1995 with five pilot projects across 12 schools in Philadelphia, the South Bronx, Minneapolis, Portland (Oregon) and Port Arthur (Texas) and is now operating in 19 cities across the US, with 2000 older people engaged as tutors and mentors. The program is also an example of promoting intergenerational interaction, which is discussed in Chapter 5.

In addition to intergenerational relationships, Experience Corps provides an example of opportunities for leadership by older people. The *Learning and leadership exchange program* was run by the Experience Corps in 2005 and 2007. This program targeted Experience Corps participants and culminated in the development of a toolkit *Leading with experience: Engaging older adults as community leaders*. As stated in the toolkit:

> Traditional leadership programs target young people at the start of their careers and mid-career professionals looking for a boost on their way up the ladder. Over the past two years, Experience Corps piloted a leadership development program that was far from traditional in many ways.

> The 50 people who participated were all over 50 years old. They had all completed their midlife careers, then joined Experience Corps to help students in urban and under-resourced neighbourhood schools learn to read. They weren't motivated by ambition but by an interest in learning more and doing more to make life better in their communities. The majority were African American women. Many would not have called themselves leaders. 141

The *Learning and leadership exchange program* found that engaging older people in community leadership development allows communities to access untapped strength and talent, builds social capital and cross-generational networks and effectively leverages a modest amount of investment.

Related to leadership programs, the Committee also learnt of the different types of ‘champion’ roles that are being initiated increasingly in different parts of the world. For example, the International Council on Active Aging (ICAA) has launched a campaign to change attitudes towards ageing. As part of this campaign it has established a team of ICAA Champions to take on the role of educator and role model in local communities, targeting organisations, staff and older people.

As part of its study tour to the UK and the Netherlands, the Committee also learnt about the role that Older People Champions are playing in Wales. Part of the Welsh Assembly Government’s Strategy for Older People, the initiative for appointing a local member of every council as an Older People’s Champions is outlined in Box 4.3.

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Box 4.3: Older People’s Champions – Wales

In Wales, local government has been identified as the key agent for change, being the main deliverer of the Welsh Assembly Government’s *Strategy for older people in Wales*, and plays the leading role in taking it forward.

Each local authority has appointed an Older People’s Champion, who is normally a Cabinet Member [equivalent to a councillor in local government in Victoria], who has a role to ensure the issues of older people are kept at the forefront of policy and service development.

Older People’s Champions can help to ensure that whatever the issue, the needs, wishes and preferences of older people are fully taken into account in the planning and implementation of policy and services.

An Older People’s Champion is someone who argues, supports and defends the concerns, issues and needs of older people in the local authority area. The Champion is also a strategic leader for older people across their local authority, raising and promoting older people’s issues.


→ RECOMMENDATION 4.6:

The Committee recommends that the Victorian Government works with local governments and their representative bodies to identify Older People’s Champions to take responsibility for promoting issues relating to older people within their municipality.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that Older People’s Champions report annually to the Commissioner for Older People.

4.4.5. A Victorian citizens’ assembly for people in later life

The Committee identified that there is merit in considering a Victorian citizens’ assembly for people in later life in order to provide older people with an avenue for direct participation in the political process and an opportunity to have their voices heard on key issues that affect their lives.

Through its investigations and consideration of international best practice, the Committee found there are innovative approaches to engaging older people in the policy process and providing them with opportunities to influence decision making. One such innovation of interest to the Committee is the citizens’ assembly, generally conducted on a state or national level.

The Committee considered research findings relating to the recent momentum of citizens’ assemblies. In 2009, researcher Jonathan Rose from Queen’s University in Canada explained that ‘citizens’ assemblies … create social and civic capital, and members gain greater efficacy and awareness of the power of citizens to make change.’ 142 He went on to note that citizens’ assemblies differ from government

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consultation exercises in that ‘their commitment [is] to real engagement – that is, sharing decision making with the public, not selling decisions to them.’

The Committee identified a range of different approaches to assemblies for older people. On its study tour to the UK and the Netherlands, it had the opportunity to meet with representatives from the Scottish Older People’s Assembly. In the Australian Capital Territory (ACT) it also met with the convenors of their Older Person’s Assembly. The features of the two assemblies were notably different, with one being initiated by government and the other being organised by older people for older people. Table 4.4 outlines the two approaches.

Table 4.4: Older People’s Assemblies in the ACT and Scotland

<table>
<thead>
<tr>
<th>Assembly</th>
<th>Overview</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACT Older Persons’ Assembly</td>
<td>• In 2010, the ACT Legislative Assembly passed a resolution to hear and understand the key issues that affect the lives of older people and encourage them to participate in policy development by holding an Older Persons Assembly.</td>
</tr>
<tr>
<td></td>
<td>• All ACT residents aged 55 years and over were invited to nominate and 170 nominations were received.</td>
</tr>
<tr>
<td></td>
<td>• The first Assembly was held in 2011 – 70 Canberrans attended and the Assembly was chaired by the Speaker of the Legislative Assembly.</td>
</tr>
<tr>
<td></td>
<td>• A report was produced with recommendations and a response from the ACT Government.</td>
</tr>
<tr>
<td>Scottish Older People’s Assembly</td>
<td>• In 2009, the first Scottish Older People’s Assembly was held in the Scottish Parliament.</td>
</tr>
<tr>
<td></td>
<td>• It is organised by older people for older people.</td>
</tr>
<tr>
<td></td>
<td>• It is a one day event with around 300 delegates taking part.</td>
</tr>
<tr>
<td></td>
<td>• Outcomes and recommendations from the day are published in a report.</td>
</tr>
<tr>
<td></td>
<td>• Three assemblies have been held, with a fourth planned for 2012.</td>
</tr>
</tbody>
</table>

Source: Scottish Older People’s Assembly website and ACT Older Persons Assembly website.

After examining the different approaches to older people assemblies, the Committee determined that the most suitable approach for a Victorian assembly for older people was the broad approach of an assembly rather than those recently created for older people. Box 4.4 outlines the key features of such a citizens’ assembly.

Opportunities for Participation by Victorian Seniors

Box 4.4: What is a citizens’ assembly (CA)?

Selection
- A CA must be a miniature population with at least 150 people who match a demographic profile (derived from census data) of the Australian population.
- They must be randomly selected from the electoral roll.
- Everyone should have an equal chance of selection and it should be voluntary (but a privilege). This avoids the ‘usual suspects’.
- The government can find out what a cross-section of citizens consider should be done to address a policy problem.

Access to experts
- The Assembly must have access to a range of experts and as much information as its members need.
- All interests, all perspectives should be available to participants.
- The Assembly must have a steering committee.

Facilitation
- Neutral facilitators would be required to work with group to reach its own judgement in an environment that stimulates inquiry and respectful discussion. Consensus is not essential. There’s room for minority views.
- People are encouraged to share stories first to establish their shared values, then they can uncover differences and explore common ground.

Influence
- Finally, and this is the most difficult to achieve, it must have influence, the outcome must matter.
- The CA decision is not the government’s decision. However, the decision maker has to say upfront what will become of the recommendations – they have to take the results seriously.
- For example, the recommendations of the British Columbia (BC) CA went straight to a referendum and people who supported the model at the polling booth said they did so because they trusted the judgment of citizens like themselves who had met over nearly a year of intense learning and deliberation.


The outline of the citizens’ assembly provided by Lyn Carson is similar to the citizens’ assembly conducted in Canada on electoral reform. The Committee considers that there is value in learning from that model and adapting it into a model that suits the Victorian context for older people.

In his research findings on the citizens’ assembly in Canada, Jonathan Rose determined that to enable citizens’ assemblies to create policy, ‘governments need to be confident in the capability of citizens.’ 145 He also cited the views of James Surowiecki, expressed in his book The wisdom of crowds, who holds the theory that ‘if you ask a large enough group of diverse, independent people to make a prediction or estimate a probability, and then average those estimates, the error that each of them makes in coming up with the answer will cancel themselves

Surowiecki suggests that there are four prerequisites to the wisdom of crowds – diversity of opinion, independence of thought, decentralised decision making and a means of aggregating opinion within the group. Rose expressed the view that the citizens’ assembly has each of these qualities of good public deliberation.

The Committee determined that both the Victorian Government and older people would benefit from a government initiated older citizens’ assembly. It considers that, if the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Government should request the Commissioner for Older People to develop a model for a Victorian older citizens’ assembly that draws on best practice from existing citizens’ assemblies in other jurisdictions.

The Committee considered that the assembly would benefit from the following features:

- That the assembly meets to determine a solution to a significant policy issue affecting the lives of older people (as opposed to all issues), with the goal to make recommendations on how to resolve the policy issue.
- That the membership of a Victorian older citizens’ assembly is randomly selected to ensure that members are drawn from all local government areas and represent a diverse range of age groups and backgrounds.
- That a Victorian older citizens’ assembly meets on a regular basis (for example, bi-annually).
- That mechanisms are in place for integrating outcomes from the assembly into the Victorian Government’s policy making process.

**FINDING:**

That an older citizens’ assembly has the potential to provide older people with an opportunity to have a direct voice in the political process.

**RECOMMENDATION 4.7:**

The Committee recommends that the Victorian Government investigates the merits of establishing a Victorian older citizens’ assembly.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner for Older People undertakes this investigation.


Chapter Five: Changing perceptions of older people and participation

FINDINGS:

That perceptions of older people have a significant impact on their capacity to participate in society.

That a well-researched and targeted awareness-raising campaign used in conjunction with other strategies can be effective in promoting positive images of Victoria’s seniors and challenging negative perceptions of older people.

That having a broad range of community education programs is beneficial to challenging negative perceptions of older people.

That the media industry has a critical role in informing portrayals of older people in society.

That intergenerational programs have promise in strengthening relationships across the generations in Victoria, and that successful programs:

- provide opportunities for the development of relationships between generations
- have access to a range of support mechanisms
- provide opportunities for generations to do a range of things together
- take account of program-specific issues, such as gender, culture and language.

That negative attitudes towards older people can manifest in discriminatory behaviour towards older people.

That senior Victorians often do not lodge complaints about discrimination, which makes it difficult to identify and address issues experienced by older people.

That Victoria is well placed to address age discrimination through the Victorian Equal Opportunity and Human Rights Commission’s (VEOHRC) mandate to address systemic discrimination under the Equal Opportunity Act.

That perceptions about WorkCover premiums in relation to older workers persist among employers, which can pose barriers to the employment of senior Victorians.

That older people can experience a range of discriminatory practices in the workplace (including coercion into unsuitable work roles), and that opportunities for flexible employment that respond to the needs of older people need to be significantly strengthened.

That there are regulatory and financial barriers to the participation of older people in voluntary work, such as age limits on insurance.
Senior Victorians contribute in diverse and valuable ways to Victorian society, as outlined in Chapter 2. Yet, despite evidence of their vast and diverse contributions, older Victorians face widespread and entrenched ageism in society that manifests in a range of explicit and implicit ways. The Committee determined that to foster people’s participation in later life, changing perceptions of older Victorians is essential.

The Committee observed that there are ongoing efforts to challenge ageism and negative perceptions of older people through community education, ambassadors and programs. It identified, however, that these efforts are uncoordinated and require a more strategic focus to achieve results. The Committee determined that a long-term, multi-pronged strategy is necessary to achieve cultural change and influence existing social paradigms on ageing. It also considered it necessary to align the strategy to either an existing or a new statutory body to ensure accountability for progress.

In exploring current and future strategies, the Committee found that to tackle ageism and promote positive attitudes to ageing in Victoria it is critical to develop a multi-pronged strategy containing elements that aim to:

• challenge cultural attitudes and media portrayal of ageing through awareness-raising initiatives
• improve intergenerational relationships by adopting an intergenerational strategy, practice and programs
• increase understanding and encourage compliance with anti–discrimination legislation.

5.1. Ageism and participation

The Committee heard that negative perceptions and attitudes towards people in later life are broad, far reaching, and deeply embedded in Victorian society. These attitudes are perpetuated by the idolisation of youthful appearance and vitality, assumptions about the roles and activities that are appropriate for older people and perceptions of older people that are based on stereotypes.

Participants told the Committee that negative perceptions and attitudes frequently manifest in negative actions towards older people such as exclusion, discrimination and abuse. These negative attitudes and behaviours are generally known as ‘ageism’. Ageism may not always be deliberate or intentional, but can be implicit in how people interact with older people.

5.1.1. Defining ageism

Understanding ageism and these negative perceptions of people in later life is critical in determining how to best approach the changes required to address them.

Definitions of ageism are contested in academic circles. Early definitions of ageism were relatively narrow in scope and focused on stereotyping and discrimination by younger generations against people because of old age:

Ageism can be seen as a process of systematic stereotyping of and discrimination against people because they are old, just as racism and sexism accomplish this
for skin colour and gender. Old people are categorized as senile, rigid in thought and manner, old fashioned in morality and skills. … Ageism allows the younger generations to see older people as different from themselves, thus they subtly cease to identify with their elders as human beings.¹

Later definitions of ageism, however, extend beyond the focus on perceptions of younger generations of older people. These definitions regard ageism as reflecting beliefs about the impact of biological ageing on people of all ages and that a prejudice against ageing persists throughout the life course.²

More recently, the concept of ageism has been questioned in academic circles. Some academics argue that ageism should be seen as interactive with other forms of discrimination, and that it manifests itself differently depending on context.³ This critical perspective allows for an examination of the influence of gender, race, class and other inequalities in relation to ageism. It also takes into account the individual experiences of ageing across different social and generational groups.

Drawing on these theories, the Committee found it useful for the purposes of its report to consider ageism as it manifests across three broad levels: the individual and interpersonal level, the structural level and the interactive level.

At the individual and interpersonal level, the Committee observed that ageism manifests in two key ways. As noted, younger generations often tend to see older people as different from themselves. The Committee heard that ageism is reflected not only in society’s attitudes towards older people, but sometimes in an older person’s self–perception. Negative self–perceptions can contribute to limiting the participation of some senior Victorians. In its submission to the Inquiry, the Council on the Ageing (COTA) stated that ‘a lot of older people can be ageist themselves, so it is not any one part of our community that is necessarily more or less ageist.’⁴ National Seniors Australia (NSA) also told the Committee that:

We hear frequently from our members that when you are 60 you start thinking you are becoming invisible, when you are 70 you begin to believe you are becoming invisible and by the time you are 80 you really are invisible.⁵

At the structural level, ageism can result in age discrimination, resulting in the denial of opportunities for people in later life and unfair treatment of people in later life in several contexts. Age discrimination in the workplace tends to receive the greatest attention. Yet discrimination extends beyond the workplace to accessing education, premises, accommodation and services. At this level, responses to ageism tend to entail the promotion of equal treatment and equal

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⁴ *Transcript of evidence 1*, Council on the Ageing (COTA) Victoria, Melbourne, 6 September 2011, p. 3.

⁵ *Transcript of evidence 2*, National Seniors Australia, Melbourne, 6 September 2011, p. 6.
opportunities for participation by Victorian Seniors

Ageism is also interlinked with elder abuse. While elder abuse is a complex issue relating to relationships and power, perceptions of older people are a contributing factor in elder abuse. For example, Senior Rights Victoria explained to the Committee that to address elder abuse, attitudes to ageing also need to be addressed. Ms Jenny Lord, the Service Promotion Officer, stated that ‘there is no quick fix to this. It requires a really sustained effort to address these really pervasive, deeply entrenched attitudes of people in our community.’

Finally, at an interactive level, the Committee found it useful to consider ageism in the context of the diversity of seniors. For example, ageism can be amplified when combined with other forms of discrimination relating to, for example, a person’s gender or cultural background.

5.1.2. Impact of ageism on participation

Throughout its Inquiry, the Committee heard that ageism is an issue that affects the lives of older people and their capacity to participate in the community and, more broadly, to contribute to the economy. The consistent message heard throughout the Inquiry was that in order to foster the participation of older people in Victoria, more must be done to challenge perceptions of ageing in our society.

Inquiry participants explained to the Committee that older people are frequently perceived as frail, slow, dependent and unproductive. The reality, however, is generally the reverse. In its submission, Benetas referred to research it undertook with Deakin University in 2009, noting that ‘certainly the viewpoint of many members of our society, our policy makers, our leaders and our media is that older people [are] unproductive, of little value and to be regarded as a threat to our way of living.’ Similarly, Uniting Aged Care stated that:

Societal attitudes to ageing are still entrenched in an expectation that older people are less with it, less capable, less attractive, less useful, and less desirable.

As people begin to exhibit physical signs of ageing, they are increasingly exposed to general attitudes in the community that reflect the perception of deteriorating capacity. These perceptions are not based on the reality of older people’s capacity, which is as diverse as the general population.

The Committee heard that for people in later life, these attitudes are reflected in behaviours they are exposed to every day. For example, VincentCare Victoria noted that older people:

Felt that they were no longer respected as people or even valued customers by public servants in government departments and services, or in the commercial customer activities of banks, utilities providers and shops.

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6 Transcript of evidence 13, Seniors Rights Victoria, Melbourne, 9 September 2011, p. 6.
8 Submission 20, Benetas, p. 3.
9 Submission 88, Uniting Aged Care, p. 2.
10 Submission 86, VincentCare Victoria, p. 46.
For example, the National Council of Women told the Committee it is not uncommon for older people to:

- [be] spoken to slowly or loudly or both
- [be] offered reassurance disguised as information
- have information or questions repeated numerous times
- [be] asked to relinquish control to persons or institutions who will 'take care of it.' ¹¹

The Committee identified a range of ways in which ageism and discrimination can be addressed in Victoria, as discussed in the following sections.

**FINDING:**

That perceptions of older people have a significant impact on their capacity to participate in society.

### 5.1.3. Ageism and diversity

In its Inquiry, the Committee found there is a general perception that older people in later life are a homogenous group and indistinguishable from each other. In addition to reinforcing ageist attitudes, this illustrates that diversity of older people in Victoria is not recognised. Inquiry participants told the Committee, however, that a key consequence of the vast diversity of older people is that each person's experience of ageism is unique.

COTA explained to the Committee that:

> Older people experience ageism in a variety of ways, in the community, workplaces and in many service delivery situations. ¹²

People's experience of ageism can be amplified by their individual circumstances and background, for example their cultural background, gender or sexual preference.

Inquiry participants highlighted various ways in which older people experience ageism:

- Older people from culturally and linguistically diverse backgrounds can experience particular difficulty in accessing information and services in their own language. These difficulties can be compounded by barriers in accessing interpreter services, which the Committee heard are expensive to provide and often unable to meet demand. ¹³
- Older women can experience ageism in different ways from men due to gendered roles and changing life experiences. Women's Health Victoria noted that as the sexual and reproductive role of women wanes in later life, older women can become 'socially invisible'. ¹⁴

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¹¹ Submission 30, National Council of Women of Victoria, p. 5. See also Submission 57, Adins, C., p. 1; Submission 6, Burns, B., p. 2.

¹² Submission 74, Council on the Ageing (COTA) Victoria, p. 6.

¹³ For example, see Submission 82, Seniors Rights Victoria, p. 5; Submission 14, Flemington Chinese Golden Age, p. 3; Transcript of evidence 8, U3A Network Victoria, Melbourne, 6 September 2011, p. 8; Transcript of evidence 12, Elder Rights Advocacy, Melbourne, 9 September 2011, p. 3.

¹⁴ Submission 18, Women's Health Victoria, p. 6.
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- Living in rural and regional areas is likely to exacerbate a number of barriers for older people. For example, The Federation of Community Legal Centres noted that rural and regional older Victorians at risk of elder abuse are less able to access specialist legal services.\(^{15}\)

- People ageing with a disability can face significant barriers in later life, including those associated with the cost of aids and equipment necessary to maintain participation. In addition, people with disabilities can experience difficulties accessing appropriate services in later life. Margaret Cooper noted that ‘there are very few health professionals who understand the dual fields of disability and ageing.’ \(^{16}\)

- People with specific health conditions, for example diabetes, may experience ageism in accessing services. \(^{17}\)

In considering responses to diversity, therefore, the Committee determined that it is essential to account for the diversity of people in later life and their unique experiences of ageism.

5.2. Changing perceptions

As a key strategy to enhancing opportunities for participation, the Committee determined that perceptions of older people and attitudes towards ageing need to be challenged. The Committee recognises that efforts have been made over the past two decades to achieve such change. The sporadic nature of these efforts, however, has not resulted in a profound shift in attitude.

The Committee concluded that several elements contribute to existing perceptions of people in later life and that these need to be addressed in a multi–pronged, strategic way. These elements include understandings of the ageing process, the way media portrays older people, the relationship across the generations and discriminatory barriers.

There is growing recognition internationally that tackling perceptions of older people requires a multi-pronged strategy. For example, in 2011 the International Council on Ageing (an association operating in Northern America) launched a multi–pronged campaign Changing the way we age. The campaign targets a range of perception challenging initiatives across the media, marketers and individuals. The three objectives of the campaign are to challenge beliefs about ageing held by the public, older people, and youth. \(^{18}\)

The Committee acknowledges that responsibility for challenging perceptions of older people does not rest solely with government. Throughout the progress of the Inquiry, it became clear that in order to achieve a far reaching and sustainable shift, initiatives need to target ageism at multiple levels across a spectrum of organisations, institutions and population groups.

\(^{15}\) Submission 85, Federation of Community Legal Centres Victoria, p. 3.

\(^{16}\) Submission 77, Cooper, M., p. 5.

\(^{17}\) For example, see Transcript of evidence 42, Diabetes Australia – Victoria, Melbourne, 24 October 2011, p. 4.

Chapter Five: Changing perceptions of older people and participation

RECOMMENDATION 5.1:
The Committee recommends that the Victorian Government develop and implement an evidence-based, multi-pronged strategy to change perceptions of older people including:

- identifying specific targets
- incorporating an implementation plan
- establishing a monitoring and evaluation framework.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government request the Commissioner to coordinate this strategy.

5.3. Increasing awareness and education

Many Inquiry participants advised the Committee of their concerns about general negative perceptions of older people in the community. As noted, these perceptions are in contrast to the reality that older people are diverse and contribute in a multitude of ways to the community and the economy.

The Committee identified that education and awareness-raising is essential to changing perceptions of older people and enhancing their opportunities to participate in society. This was a view expressed by numerous Inquiry participants. For example, COTA recommended that ‘there needs to be broad community awareness raising and work with business to combat that ageism.’ 19 VincentCare also noted that those older people they consulted made the suggestion of ‘developing a public awareness campaign to try and turn things around from the negative picture they described [of older people] if we are to broader promote community wide respect for older people.’ 20

The Committee identified a range of general awareness-raising and education strategies for challenging perceptions of older people, and considered a Commissioner for Older People, as outlined in Chapter 3, would be well-suited to assume responsibility for coordinating these strategies.

5.3.1. Community awareness campaigns

Community awareness campaigns are used to raise awareness of a range of issues in society, such as drink-driving and worker safety issues. These campaigns vary significantly, but in general consist of intensive communications using a broad range of media, coupled with targeted communication. The last major coordinated

19 Transcript of evidence 1, Council on the Ageing (COTA) Victoria, p. 4.
20 Submission 86, VincentCare Victoria, p. 33.
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A campaign might include television, radio and newspaper advertisements, as well as posters, public announcements and media releases. Targeted campaigns might also disseminate information to specific groups, such as employers, service providers and individuals. The Committee also noted the success in using social and emerging media formats in awareness-raising campaigns. Increasingly these forms of media are essential to target younger audiences.

The Committee determined that there is considerable scope to use a multitude of tools to effectively campaign to increase awareness and change perceptions. In addition, awareness campaigns need to be used in connection with other strategies and not in isolation. Notably, while there is evidence indicating awareness campaigns in isolation can achieve some change in attitudes, their impact on behaviour change is less certain.

Lessons can be drawn from other jurisdictions. During its study tour to the UK and the Netherlands, the Committee met with the Scottish Government and learnt about its evidence-based anti-ageism campaign. The campaign was undertaken in 2008 and focused on the message ‘see the person, not the age.’ It involved television advertising over a nine-week period, press advertising and public relations activity with local authorities and the voluntary sector. The campaign was run in three rounds, and was coupled with an online presence.

It was followed by a series of national stakeholder events. The momentum was further continued with the running of the Scottish Older People’s Assembly and a consultation exercise.

The Committee also met with the UK Local Government Association during its study tour, which provided a preview of a video currently in development to raise awareness of the contribution of older people in communities, and the issues they experience in participating. The video provides information about how older people’s participation can be fostered in local communities.

The Committee was informed about emerging policy approaches that aim to influence behaviour change. A UK example is MINDSPACE, an approach that provides a framework and checklist to assist policy makers to better understand


the behavioural dimension of policies and consequent actions. MINDSPACE explores how new insights from science and behaviour change can potentially improve outcomes compared with conventional policy tools used to raise awareness. Such an approach may be promising for developing an integrated awareness raising strategy aimed to also achieve behaviour change. 25

The Committee determined that the development of an awareness campaign requires a consultative, well researched approach with a clear objective. It identified that the campaign would benefit from a targeted approach with a strong message about the diversity of older people and their contribution to the community and the economy. The input of relevant expertise to the campaign formation would be essential, alongside the development of a robust methodology.

FINDING:

That a well-researched and targeted awareness-raising campaign used in conjunction with other strategies can be effective in promoting positive images of Victoria’s seniors and challenging negative perceptions of older people.

RECOMMENDATION 5.2:

The Committee recommends that the Victorian Government develops an evidence-based, targeted awareness campaign to challenge ageist perceptions using a multitude of media and promotion tools in conjunction with other strategies.

5.3.2. Community education

In addition to an awareness campaign, the Committee found that community education has a role in changing perceptions of older people. Community education takes many forms, such as community education programs, education roles provided by ‘ambassadors’ for ageing, and festivals such as Seniors Week. Community education is particularly useful in targeting specific audiences on identified issues.

Inquiry participants informed the Committee about community education initiatives in Victoria, ranging from targeted information sessions and workshops to broader focus groups to raise awareness of issues for senior Victorians. 26 Some examples of these initiatives are outlined in Table 5.1.

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26 For example, see Submission 83, Victorian Employers’ Chamber of Commerce and Industry (VECCI), p. 2; Transcript of evidence 16, The Australian Association of Gerontology, Melbourne, 9 September 2011, p. 2; Submission 49, beyondblue, p. 3.
Table 5.1: Examples of community education in Victoria

<table>
<thead>
<tr>
<th>Type of education</th>
<th>Providers</th>
<th>Audience</th>
<th>Targeted outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer education sessions</td>
<td>Senior Rights Victoria 27</td>
<td>Older people and their families, including those with physical or cognitive impairments and their carers. People who are socially isolated and those from diverse and indigenous backgrounds.</td>
<td>Empowering older people and preventing elder abuse.</td>
</tr>
<tr>
<td>Programs and workshops</td>
<td>COTA 28</td>
<td>Older people.</td>
<td>Challenging older people’s attitudes to ageing, promotion of active ageing and managing later life transitions.</td>
</tr>
<tr>
<td>Consumer information sessions, presentations to seniors groups</td>
<td>Consumer Affairs Victoria 29</td>
<td>Consumers, accommodation and service providers. Some sessions specifically designed to deal with issues experienced by older people.</td>
<td>Educating older people to make informed choices and understand their consumer rights. Educating service providers, traders and landlords about consumer issues (eg. information sessions for rooming house operators).</td>
</tr>
</tbody>
</table>

---


### Type of education

<table>
<thead>
<tr>
<th><strong>Providers</strong></th>
<th><strong>Audience</strong></th>
<th><strong>Targeted outcomes</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer education</td>
<td><em>beyondblue</em> and COTA 31</td>
<td>Older people, carers, chronic disease groups, veterans, rural communities.</td>
</tr>
<tr>
<td>Education sessions</td>
<td>State Trustees, Office of the Public Advocate and the Victorian Civil and Administrative Tribunal 32</td>
<td>Service Providers, non-government organisations and the public.</td>
</tr>
<tr>
<td>Public forums and conferences</td>
<td>Range of organisations, including COTA, Housing for the Aged Action Group (HAAG), National Seniors Australia</td>
<td>Community, older people and stakeholders.</td>
</tr>
</tbody>
</table>

Source: Family and Community Development Committee

Although the Committee heard that community education is taking place in a range of ways, it did not identify any coordinated strategy relating to community education on issues affecting older people. It is difficult to assess, therefore, the effectiveness of programs and the extent of their reach. The Committee determined that programs tend to be delivered individually by different agencies and unevenly disseminated across regional areas. The Committee questioned whether there is a need for a more strategic approach to ensure that people requiring information are receiving this information through community education.

The Committee also heard promising evidence about the use of ‘ambassador’ roles to promote positive perceptions of older people. The concept of an ambassador has been used widely to raise awareness of a broad range of issues in communities. The role generally aims to raise the profile and visibility of a particular issue and tends to target particular population or community groups. Often a high profile member of the community is appointed to this type of role.

The Committee met with Australia’s Ambassador for Ageing, Ms Noeline Brown who explained that the role of the Ambassador involves promoting the importance of older people in society and helping people understand that older people are not a burden. This message is conveyed through radio interviews and appearances at ageing expos and other events.

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31 *Submission 49, beyondblue*, p. 8.
32 *Submission 28, State Trustees*, p. 3.
The concept of ambassadors for ageing is increasingly popular as a strategy for promoting positive perceptions of older people. Ambassador roles in this context tend to combine peer education and awareness-raising activities in the wider community. In this way, the roles target older people’s own attitudes about ageing and also challenge perceptions of older people in the broader community. Some examples identified by the Committee are outlined in Table 5.2.

### Table 5.2: Australian and international examples of ambassador and champion roles

<table>
<thead>
<tr>
<th>Government</th>
<th>Role</th>
<th>Key Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australian Government</td>
<td>Ambassador for Ageing</td>
<td>• Established in 2008. • Promotes activities that ensure communities value and respect older people. • Tasks involve leading promotional activities and promoting awareness of government programs and initiatives to seniors. 33</td>
</tr>
<tr>
<td>New South Wales (NSW)</td>
<td>NSW Seniors Week Ambassadors</td>
<td>• High profile seniors appointed as part of Seniors Week to ‘challenge some of society’s stereotypes around ageing and raise awareness of the valuable contribution seniors make to our community.’ • Tasks involve media appearances and attendance at Seniors Week events. 34</td>
</tr>
<tr>
<td>Local Government (Victoria)</td>
<td>City of Casey’s Ageing Positively Champions</td>
<td>• Community volunteers appointed to promote messages about positive ageing, targeting schools and community groups. 35</td>
</tr>
<tr>
<td>International example</td>
<td>International Council on Active Ageing (ICAA) Champions</td>
<td>• Similar approach to the ‘ambassador’ concept used in Changing the way we age initiative. • Aimed to tackle expectations and social participation of older people. • Involved a team of ‘ICAA Champions’ to act as educators and role models in local communities, targeting organisations, staff and older people. 36</td>
</tr>
</tbody>
</table>

Source: Family and Community Development Committee


FINDING:

That having a broad range of community education programs is beneficial to challenging negative perceptions of older people.

5.3.3. Working with media to change portrayal of older people

Participants informed the Committee that working with the media to change the portrayal of older people is critical to changing broader attitudes towards ageing. The media plays a powerful, pervasive role in today’s society. Media reflects and influences society’s perceptions of ageing through a multitude of avenues, including advertising, news and entertainment, and in continuously emerging formats.

It was noted that older people are often stereotyped in the media. The Association of Independent Retirees, for example, pointed out the common practice of news reporters referring to older people as ‘pensioners’ regardless of their income source. 37 The Committee heard that the media often portrays older people negatively, rather than emphasising their participation and contribution. 38

Traditional forms of media include television and radio broadcasting and print media such as newspapers and magazines. These traditional formats generally feature one–way communication by a media outlet or publisher to large audiences. New and emerging media formats challenge the one–way communication of traditional media. The internet, social media and mobile technologies represent a more interactive form of communication. Furthermore, the accessibility of these formats has allowed individuals to communicate information to large–scale audiences that were previously only accessible to a select few broadcasters and publishers.

The Committee determined that there is a great deal of potential in addressing ageism by working with media to reform the portrayal of older people across both traditional and emerging media avenues.

Research has shown that older people are under–represented in the media, that they are often portrayed in a manner that reinforces negative stereotypes, and that the media tends to strongly associate ageing with health, social services and economic burden. 39 The Advisory Panel on the Economic Potential of Senior Australians made the point in its final report that ‘the media reinforces cultural and societal attitudes toward ageing, whether positive or negative.’ 40 Research has also shown that the more television older people watch the more they form negative stereotypes of the ageing process in regard to themselves. 41

38 Submission 20, Benetas, p. 2.
The Committee also heard that ageist media portrayals are normalised to a greater degree than other forms of discrimination such as racism and sexism. In her submission to the Inquiry, Ms Anne Scott stated that:

> Ageism can be as offensive and hurtful as racism. While our society reacts strongly against ‘racial vilification’, there is not the same outrage when ageist remarks are made publicly. There should be!  

This view is also supported by the CEO of COTA, Ms Sue Hendy, who made the following statement in a media interview last year:

> … you only have to look in the newsagency at the birthday cards with jokes about ageing. Imagine substituting the punch lines with race or gender, and half of them wouldn’t be so funny. Says Hendy: ‘It really infuriates me. You can’t tell racist or sexist jokes, but you can about ageing.’

The *Journalist’s toolkit on ageing* developed by Pearson in 2002 stated that ‘ageist content in the media is often accepted as normal, as opposed to sexist and racist content.’ Pearson quoted research by Stacey and Osborne regarding the trend to normalise ageist portrayals of older people in the media:

> The dominant theme in the media is the contrast between the affluent, skilled, young and beautiful, and the poor, inadequate, old and unattractive.

Pearson also observed that the research showed that older people were often portrayed as:

> … lacking in intelligence, life skills and interest as individuals (unless they have an estate desired by younger people). They are also disproportionately presented as sick, infirm, frail; a problem to others and to society at large.

The Committee identified a number of attempts to reform media portrayal of older people in Australia and internationally.

For example, between 2003 and 2008 the Victorian Government undertook a project to reform media portrayal of older people called *Images of age*. The project aim was to ‘challenge the entertainment industry to provide greater roles for seniors with more authentic images of ageing’ and to ‘encourage the entertainment and media industry to value maturity and experience.’ The campaign included the establishment of a media taskforce comprising prominent industry figures. *Images of age* grants were also available through the Department of Planning and Community Development to support the creation of new film, TV and theatre works promoting positive images of ageing and involving seniors.

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44 Pearson, M. (2002) *The journalist’s toolkit on ageing – helping shape media perceptions*. Gold Coast, Faculty of Humanities and Social Sciences, Bond University, p. 3.
Other examples of approaches to reforming media portrayal of older people are outlined in Table 5.3. 48

**Table 5.3: Initiatives to reform media portrayal of older people**

<table>
<thead>
<tr>
<th>Lead agency</th>
<th>Initiative</th>
<th>Key Features</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Scottish Government</strong></td>
<td>Campaign to counteract negative perceptions and media image of older people as part of Scotland’s Ageing Strategy.</td>
<td>Information and communications campaign to counteract negative perceptions and media image of older people. 49</td>
</tr>
</tbody>
</table>
| **International Council on Active Ageing (an organisation operating across Canada and Northern America)** | Media and marketing strategy currently being undertaken as part of the Changing the way we age campaign to address ageist stereotypes. | The objective of this strategy is to ‘rebrand ageing’ through a range of avenues, including:  
  • a public relations campaign to promote the untapped potential of an ageing population  
  • communication guidelines for media and marketers  
  • a clearinghouse for best practice, guidelines, resources, images and references for the media industry  
  • delivery of presentations, best practice examples and research to businesses associations and organisations. 50 |
| **Victorian Government**                   | A guide for the film and television industries titled Who’s watching you tonight – Australia’s new audience and how to capture it. | Developed in 2002 to help people in the film and television industries to portray ageing in a more positive and realistic way. 51 This guide is no longer available online and the Committee is not aware of any follow-up to this initiative. |
| **Bond University Centre for New Media Research and Education (Queensland)** | The journalist’s toolkit on ageing. | Online toolkit for media professionals and journalism students (no longer current) to promote the reporting of ageing issues in a positive and balanced light. 52 |

50 International Council on Active Ageing (2012) Changing the way we are: Campaign overview.  
## Lead agency | Initiative | Key Features
--- | --- | ---
Australian Government | Older People Speak Out Media Awards | Awards (operating nationally since 1998) that recognise positive portrayals of ageing, spanning print, television, radio and online media.  

Source: Family and Community Development Committee

The Committee found little evidence that emerging media formats such as the internet and social media are addressing the portrayal of older people. The positive portrayal of older people in these emerging media formats, however, has significant potential to challenge perceptions of senior Victorians in the broader community, particularly given that these formats are more likely to target a younger audience.

### Box 5.1: Example of the use of emerging media formats to address perceptions of older people

An example of the power of emerging technologies is the experience of YouTube personality Peter Oakley (better known as his pseudonym ‘geriatric 1927’). A pensioner living in Leicester, England, Oakley began posting a series of short autobiographical YouTube videos in 2006 and shortly thereafter became the most subscribed user on YouTube, with over 50,000 subscribers.

Oakley was also involved in the recording of a version of the song ‘My Generation’ with The Zimmers, a group of older people brought together for a UK documentary to highlight the plight of old age pensioners in modern Britain. The single was released in May 2007 to raise money for the charity Age Concern.

Source: Vetere, F. (2011) ‘Technological Innovations that can reduce social isolation’ (Speech delivered at National Roundtable Forum on Social Isolation and Older People: What Works?  

Although attempts have been made to reform the media portrayal of older people, the Committee considered that an ongoing comprehensive strategy to address the portrayal of older people is lacking in Victoria.

The Committee identified two promising initiatives from the fields of domestic violence and mental illness that could serve as models for addressing the reporting and portrayal of older people in the media. Both of these approaches focus on working with media professionals and providing resources and education to reform media portrayal:

- **Mindframe national media initiative** – This is an Australian Government initiative that funds a range of kits, education and resources that aim to influence media coverage of issues related to mental illness and suicide by encouraging responsible, accurate and sensitive portrayals.  

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Family violence in the news: A media toolkit – This resource was published in 2005 and 2011 by Child and Family Services Ballarat and PACT Community Support. This toolkit provides guidance to the media on responsible reporting of family violence and has been supported by the Victorian Government as part of their strategy to combat violence against women.56

The Committee found that a key aspect of these strategies is the comprehensive way in which they address media portrayal. For example, the Mindframe initiative addresses media portrayal from a range of angles, including resources and professional development for professionals, journalism students and stage and screen writers. In addition, it provides guides for police and the courts about working with the media on stories which may involve suicide or mental illness. Mindframe also incorporates approaches to reach culturally and linguistically diverse (CALD) media and includes materials in its resources that reflect the cultural diversity of Australian audiences.

The Committee determined that the Victorian Government needs to work with the media industry to develop a framework to address the negative portrayal of older people by the media.

**FINDING:**

That the media industry has a critical role in informing portrayals of older people in society.

**RECOMMENDATION 5.3:**

The Committee recommends that as part of an overarching strategy to change perceptions of people in later life, the Victorian Government works with the media industry to reform the portrayal of older people in the media.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner leads this work.

### 5.4. Intergenerational relationships

In evidence given to the Inquiry, participants emphasised the need to improve intergenerational relationships. The Committee agrees that encouraging intergenerational practice is essential in enhancing opportunities for older people to participate, as intergenerational relationships can reduce discrimination, abuse and other behaviours resulting from negative attitudes and lack of understanding that restrict people’s participation in later life.

Internationally, there is an increasing focus on improving intergenerational relationships. Momentum for improving relationships across the generations has emerged due to concerns about the deterioration of these relationships and the potential broader consequences for society. Intergenerational relationships are viewed as critical for support across the generations and community strength.

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The Centre for Intergenerational Practice in the United Kingdom outlines the aims of intergenerational practice as follows:

Intergenerational practice aims to bring people together in purposeful, mutually beneficial activities which promote greater understanding and respect between generations and contributes to building more cohesive communities. Intergenerational practice is inclusive, building on the positive resources that the young and old have to offer each other and those around them.  

Activities to promote intergenerational interactions in Victoria have been sporadic and generally the focus of aged and community care services, other community services, schools and researchers. The Committee noted that successive Victorian Governments have given minimal attention to building intergenerational relationships compared with international counterparts.

Given the significance of intergenerational relationships in contributing to the harmony of society and in fostering the participation of people in later life, the Committee determined that a greater focus on building relationships across the generations in a strategic way is needed.

In considering the most effective means to work towards improved intergenerational relationships, the Committee considered models of best practice locally, nationally and internationally. These include:

- intergenerational programs that bring generations together around a common goal (these generally include school based and community based initiatives)
- intergenerational shared sites that provide services to both older and younger people in one facility
- environments that encourage informal intergenerational interaction, such as community hubs and gardens
- intergenerational approaches to awareness–raising initiatives.

It concluded that to achieve the long–term, ongoing cultural change necessary, a strategic approach to improving intergenerational relationships is critical. The Victorian Government has a key leadership role in achieving this change across all Victorian Government departments.

In reviewing strategic approaches to improve relationships across the generations, the Committee looked at relevant international developments.

5.4.1. Intergenerational relationships and attitudes to ageing

Strong intergenerational relationships have been internationally identified as a key factor in achieving positive attitudes to older people, fostering participation throughout the life course and creating a society for all ages.

As outlined in Chapter 3, the World Health Organization (WHO) has called for a new paradigm of ageing and the life course. The WHO Active ageing framework states that:

This paradigm takes an intergenerational approach that recognizes the importance of relationships and support among and between family members and generations…

This approach supports intergenerational solidarity and provides increased security for children, parents and people in their old age.\textsuperscript{58}

The WHO Global age-friendly cities guide also emphasises that 'better integration of generations is seen as a way to counter ageism in society.’\textsuperscript{59} There is growing evidence, however, that intergenerational relationships risk deterioration. The WHO has indicated there is a downward trend in intergenerational interaction worldwide.\textsuperscript{60}

Much of the concern about the importance of intergenerational relationships relates to systems of welfare and the willingness of generations to be responsible for other generations. Some researchers have pointed to a weakening of the ‘intergenerational contract’. The contract is described by Kathrin Komp and Theo van Tillburg as a 'system of behaviours and expectations that regulates transfers across generations.’\textsuperscript{61}

The intergenerational contract ensures middle-aged individuals support the young and old in the expectation that they will in turn be supported in their old age. Researchers note that if such expectations are unsupported, opposition to the intergenerational contract could arise. In this context, fostering relationships between the generations becomes critically important.

Professor Simon Biggs, Professor of Gerontology & Social Policy at the University of Melbourne, also commented that there is a growing concern at the policy level that solidarity between the generations will break down so that ‘younger adults will be unwilling to pay for older adults.’\textsuperscript{62} Professor Biggs suggested that this unwillingness does not appear to be borne out in evidence. On the other hand, however, younger adults appear concerned by the continuity of rights and responsibilities across generations:

If you ask people – younger adults and people in the middle of their working life … What they seem to be concerned about is the fact that they will not get the same benefits themselves that they are paying for the current generation … It is about continuity of rights and responsibilities rather than feeling that you simply have to pay …\textsuperscript{63}

While this indicates that financial responsibility is not such an issue, it does demonstrate that there are pressures on the intergenerational relationship.

The Australian Government has identified the significance of intergenerational relationships and the downward trend in interaction across the generations. In 2006, Judith MacCallum and colleagues published a report based on research conducted for the National Youth Affairs Research Scheme (auspiced by the Ministerial Council on Education, Employment, Training and Youth Affairs). The research consisted of a literature review and the findings of four Australian case studies from Sydney, Western Australia and Tasmania. It found that:

\begin{itemize}
  \item[62] Transcript of evidence 18, Biggs, S., University of Melbourne, Melbourne, 5 October 2011, p. 3.
  \item[63] Transcript of evidence 18, Biggs, p. 3.
\end{itemize}
Decreasing levels of contact between young and older people and the perpetuation of unfavourable stereotypes of older people threaten community capacity to deal with these challenges. Lack of opportunities for intergenerational contact in families – with roles for grandparents becoming limited, increasing numbers of single parent families, geographical separation between grandchildren from their grandparents – together with increasingly age segregated social institutions, and social policies are the principal factors blamed. Increasing generational differences in values and roles brought about by rapid social change means that the gulf between the youngest and oldest generations is wider than ever.  

The report concluded that successful intergenerational exchange programs display four key features:

• They provide opportunities for the development of relationships between generations.
• They have access to a range of support mechanisms.
• They provide opportunities for generations to do a range of things together.
• They take account of program-specific issues, such as gender, culture and language.

Inquiry participants also emphasised the need to address intergenerational relationships, citing the general ‘denigration of respect’ towards older people, a tendency for young people to consider older people ‘past it and not worth listening to’ and concern by older people about being confined to ‘ghettos’ with limited intergenerational opportunities.

In its submission to the Inquiry, the National Ageing Research Institute (NARI) highlighted the impact of demographic and social changes on intergenerational relationships:

Given demographic changes, especially those that relocate older people to retirement villages or resort style environments, the assigned roles for older people are undergoing significant change. When older people become separated from younger generations their role as the embodiment of wisdom, insight, guidance and support is being, perhaps inadvertently, marginalised. It is important to foster relationships between the generations to encourage mutual respect and understanding, and a more cohesive society.

The Committee determined that intergenerational relationships are critical to improving opportunities for participation.

Research has shown that fostering intergenerational relationships has a range of individual, family and societal benefits, and that government has an important leadership role in this area. As noted by Antonucci, Jackson and Biggs:

… intergenerational relations are important at the individual, family, and societal levels. Evidence clearly indicates that individual mental and physical health is
greatly affected by intergenerational relations. Similarly, cross national data indicate that while individual and family characteristics influence the provision and receipt of support, government policies are also critical. 68

The Committee identified that there is considerable evidence revealing the benefits of intergenerational programs. A literature review of intergenerational programs was conducted as part of the 2006 Department of Education, Employment and Workplace Relations (DEEWR) research project. The review summarised the benefits of intergenerational programs, which are outlined in Box 5.2.

<table>
<thead>
<tr>
<th>Box 5.2: Summary of benefits of intergenerational programs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Benefits for older people</strong></td>
</tr>
<tr>
<td>• change in mood, increase in vitality</td>
</tr>
<tr>
<td>• increased ability to deal with mental and physical illness</td>
</tr>
<tr>
<td>• increase in sense of worth</td>
</tr>
<tr>
<td>• opportunities to keep learning</td>
</tr>
<tr>
<td>• relief from isolation</td>
</tr>
<tr>
<td>• renew own appreciation of past life experiences</td>
</tr>
<tr>
<td>• reintegration into family and community life</td>
</tr>
<tr>
<td>• development of friendship with younger people</td>
</tr>
<tr>
<td>• practical assistance with activities such as shopping and transport</td>
</tr>
<tr>
<td><strong>Benefits for younger people</strong></td>
</tr>
<tr>
<td>• increase in self-worth and confidence</td>
</tr>
<tr>
<td>• less loneliness and isolation</td>
</tr>
<tr>
<td>• access to adult support during difficult times</td>
</tr>
<tr>
<td>• increased sense of social responsibility</td>
</tr>
<tr>
<td>• greater positive perception of older adults</td>
</tr>
<tr>
<td>• more knowledge of issues facing seniors</td>
</tr>
<tr>
<td>• provision of practical skills</td>
</tr>
<tr>
<td>• school attendance improvement</td>
</tr>
<tr>
<td>• enhancement of literacy development</td>
</tr>
<tr>
<td>• less involvement in violence and drug misuse</td>
</tr>
<tr>
<td><strong>Benefits for the broader community</strong></td>
</tr>
<tr>
<td>• rebuilds social networks, developing community capacity and a more inclusive society</td>
</tr>
<tr>
<td>• breaking down of barriers and stereotypes</td>
</tr>
<tr>
<td>• building of social cohesion</td>
</tr>
<tr>
<td>• enhancing and building culture</td>
</tr>
<tr>
<td>• alleviates pressure on parents</td>
</tr>
</tbody>
</table>


In view of the benefits of intergenerational programs and their positive impacts on those participating in them, the Committee investigated a range of programs and their differing degrees of success.

FINDING:

That intergenerational programs have promise in strengthening relationships across the generations in Victoria, and that successful programs:

- provide opportunities for the development of relationships between generations
- have access to a range of support mechanisms
- provide opportunities for generations to do a range of things together
- take account of program-specific issues, such as gender, culture and language.

5.4.2. Intergenerational programs

Intergenerational programs are designed to bring together people of different generations with a view to engaging in an activity or achieving a goal that has mutual benefit. The International Consortium for Intergenerational Programs defines intergenerational programs as ‘social vehicles that create purposeful and ongoing exchange of resources and learning among older and younger generations.’ They also contribute to opportunities for increased participation by older people.

Intergenerational programs are varied in their approach, organisation frameworks and settings. An international review of intergenerational literature conducted in 2007 by the Caixa Foundation found that although definitions vary, two of the common features of intergenerational programs are that:

- people from different generations participate in the program.
- participation involves activities aimed at goals which are beneficial for all those people (and hence to the community in which they live).

Intergenerational programs originated in the United States in the 1960s and 1970s as a means of increasing interaction between the generations to tackle adverse perceptions, myths and stereotypes. The last decade has seen a large growth in intergenerational programs worldwide, with programs being used in a more targeted way in social, environmental and education sectors, and as a means of revitalising communities.

Many participants in the Inquiry expressed support for intergenerational programs. For example, in her submission Ms Patricia Williams stated that:

A very effective way of promoting respect for and value of older people is by involving them wherever possible with younger generations – Grandparents’ day at kinder or school, help with ‘homework’ such as reading or spelling. Older students can be encouraged to provide assistance in some suitable areas, gardening or other tasks. Older people are often able to provide ‘information’ for projects about former times; this can be useful and enjoyable for both generations. Older and younger people have more in common than often seems likely.

Similarly, Aged and Community Care commented that:


71 Submission 67, Williams, P., p. 1. See also *Transcript of evidence 51*, Men in Sheds, Bendigo, 18 November 2011, p. 3; *Transcript of evidence 40*, Uniting Aged Care, Melbourne, 21 October 2011, p. 5.
Comprehensive strategies need to be developed to better link schools and child care centres with their residential and community care services. These need to be promoted as successful models of community development aimed at intergenerational engagement. 72

Table 5.4 outlines some of the promising examples of intergenerational programs encountered by the Committee throughout the Inquiry.

<table>
<thead>
<tr>
<th>Lead government</th>
<th>Intergenerational Program</th>
<th>Key Features</th>
</tr>
</thead>
</table>
| United States   | Experience Corps          | • Running since 1995 and operates in 19 Cities, with 2000 volunteers.  
• Older people volunteering to tutor children in basic literacy skills and mentor students in disadvantaged schools. 73  
• Benefits to children and older volunteers supported by evaluations and research. 74  
• Promising model for successful expansion of a community program. 75 |
| Victoria        | The Timehelp Program      | • Founded in 2004 by the Alcoa Foundation and the Charities Aid Foundation Australia in Victoria.  
• Connects retirees with volunteering opportunities in local neighbourhood schools.  
• Timehelp sources, screens, and matches volunteers with schools and provides uniforms, administration, training resources and networking opportunities. 76  
• 2009 evaluation found ‘Timehelp provides ways for volunteers to build social capital, to extend their community connectedness and to raise their levels of civic participation.’ 77  
• Recent expansion to New South Wales and Western Australia. |
| Victoria        | Positive Ageing Digital Storytelling Intergenerational Project | • Run by Uniting Aged Care since 2007.  
• Involves older adults and students from a community rehabilitation centre teaming up with students from Hawthorn Secondary College to produce digital video stories about their lives. |

72 Submission 80, Aged and Community Care Victoria, p. 13. See also Transcript of evidence 39, Aged & Community Care Victoria, Melbourne, 21 October 2011.
<table>
<thead>
<tr>
<th>Lead government</th>
<th>Intergenerational Program</th>
<th>Key Features</th>
</tr>
</thead>
</table>
| Victoria        | Intergenerational Playgroups Project | - Conducted as a pilot project in 2009 and 2010 through a partnership between Playgroup Victoria, the National Ageing Research Institute (NARI) and Barwon Health.  
- Involved the operation of playgroups within an aged care facility to improve social inclusion with aged care residents.  
- Engaged residents with local families by providing a positive environment in a community playgroup setting.  
- 2010 evaluation conducted by NARI indicated that 'the project has had social and community benefits to residents, families and the facility as a whole.'  
78 |
| Victoria        | Count Us In! Program      | - Initiated in 2006 by the Aged Care Branch of the Department of Health.  
- Focuses on connecting older people living in public sector residential aged care services to their local communities to reduce social isolation and improve their quality of life (not specifically an intergenerational program).  
- 2011 evaluation found family and friends indicated that the program had ‘a positive impact on their relationship with the resident.’  
79 |
| Victoria        | L2P – Learner driver mentor program | - Matches young people with fully licensed volunteer mentors in order to help the young people gain the experience required to apply for a probationary licence.  
- Not specifically targeted at senior Victorians.  
80 |
| Victoria        | Technology training courses | - Intergenerational approach to transferring technology skills.  
81 |
| Victoria        | Golden Gurus intergenerational education program | - Pairs up older people from Chinese, Spanish and German backgrounds with high school students who are studying those languages as a second language.  
82 |
| Slovenia        | Intergenerational museum concessions | - Free museum entry offered if a younger person attends with an older person.  
83 |

Source: Family and Community Development Committee

81 Transcript of evidence 36, National Council of Women of Victoria, Melbourne, 21 October 2011, p. 5.
82 Transcript of evidence 14, Browning, P.C. & Feldman, P.S., Healthy Ageing Research Unit – Monash University, Melbourne, 9 September 2011, p. 3.
5.4.3. **Intergenerational shared sites**

In addition to intergenerational programs, the Committee identified intergenerational shared sites as an emerging area of interest. Intergenerational shared sites are facilities designed to provide services to both older and younger people rather than segregate care by age. Examples include adult and child day care centres and schools that host a seniors’ centre.

This sort of intergenerational approach is relatively new. While anecdotally this approach yields benefits of positive intergenerational contact and inclusion, little research has been undertaken in this field. A recent study of two intergenerational day care sites has revealed a number of challenges in establishing intergenerational shared sites, including allocation of site resources, the level of intergenerational equity and autonomy experienced by older people and aspects of the physical environment such as noise and opportunity for interaction. 84

Two examples of intergenerational shared sites are provided in the Table 5.5.

<table>
<thead>
<tr>
<th>Lead government</th>
<th>Intergenerational Program</th>
<th>Key Features</th>
</tr>
</thead>
</table>
| United States   | St. Ann Center for Intergenerational Care, Wisconsin | • Established in 1983.  
• Offers a number of services within the same facility: adult day services, Alzheimer’s and dementia care, child day care, overnight respite care, outpatient rehab and programs activities and community services.  
• Also houses a café and gift shop open to the public. 85 |
| United States   | School program for seniors | • Operated for more than 10 years by the Jefferson County School Board in collaboration with the schools, the county department of human services, and a regional planning agency.  
• Four seniors centres located at public schools in Louisville, Kentucky.  
• One school started with a nutrition program for seniors to eat their meals in the school cafeteria and subsequently expanded in scope to include seniors in tutoring and involvement in school social and sporting events. 86 |

Source: Family and Community Development Committee

The Committee determined that these emerging intergenerational approaches represent innovative practice that is worth further observation and investigation to determine their suitability in the Victorian context.

### 5.4.4. Environments that foster intergenerational interaction

Age–friendly environments are critical to improving intergeneration interaction. Age–friendly communities are discussed in greater detail in Chapters 3 and 7.

The Committee was told about a number of different initiatives that aimed to improve access to environments promoting intergenerational interaction. These environments are designed in ways that encourage people of all generations to use the space, which can give rise to incidental interactions between people of all ages. Commenting on the value of incidental interaction in its evidence to the Inquiry, the Brotherhood of St Laurence explained that:

> We have got what we call enhancing incidental encounters. There are some research papers around which have shown the health and wellbeing positives of incidental encounters in an area. We are talking about spaces that are used by older people where there are shops et cetera. Parks are meeting places. An older person may go walking with their dog. What happens is they see somebody else with their dog and a conversation starts to take place – those kinds of things. They see kids playing in the park. They are involved in sports events, and you have those conversations. They can walk past somebody doing some building on their house, and they will be saying things like, ‘What are you doing?’, and perhaps having a conversation about that. There are spaces where people just meet, and that is another issue, I believe. Yes, in a gated community you are meeting people, but they are generally your regular neighbours who are older people, so things are fairly similar is really what I am trying to say there. There are those places where the interchange is across balconies even. They are next door to somebody; they are having a barbecue next door, so you pop your head over and start having a conversation about those things. 87

Examples of environments that foster intergenerational interaction include community hubs and community gardens.

#### Community hubs

Community hubs are multipurpose locations which integrate services, programs and activities and are designed to cater and appeal to the diversity of the community. Social inclusion is an important goal, and access and transport are key elements.

An example is the Patty O’Donoghue Centre in Noble Park. This intergenerational facility provides childcare as well as education and social opportunities for older residents. The Centre also houses the Council Customer Service Centre and the facilities are used by local community groups for a variety of activities.

The Port Melbourne Community Hub is another example. Its purpose is described as follows:

> The goal for the hub is to create a thriving and busy place where people can come to access the activities and programs of the Port Melbourne Neighbourhood House

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87 Transcript of evidence 24, Brotherhood of St Laurence, Melbourne, 5 October 2011, p. 6.
and the local services of South Port Information & Support Services [SPISS], Homeground Services Housing and Support Services, Daylinks transport service for community groups and for older or frail residents in Port Phillip, Petlinks support to older and frail residents to maintain their pets at home, Bay St Traders Association and the Inner South Community Health Legal Aid Service.  

The website further emphasises the inclusive design of the space:

There is also available multi purpose community space for local groups, clubs and residents to hire. One of the great features of the space is a comfortable drop in lounge with an open fire great for popping in for a visit, checking out what’s on offer or what activities are happening there, chatting with other local people or reading the newspaper on a cold winter’s day.

In reference to community hubs, the Brotherhood of St Laurence commented that there are lessons to be gained through initiatives such as the Humanitas Apartments for life model, which is discussed Chapter 7. It explained that:

We want to build on those learning opportunities as well – all those things – so a hub can be a place which is what I keep on saying is the pizza with the lot. Sometimes that can be hard to achieve. Where we are there is a park opposite, so it is quite accessible by older people, but not a lot of older people are actually going into that park. Our discussions are with local government to say what will make this a place which everybody can enjoy and access, with footpaths et cetera leading into parks.

Community gardens

Community gardens have been long recognised as focal points for communities. As noted by Ms Claire Nettle in a guide on community gardens written for the Government of South Australia, “community gardens are places where people come together to grow food and community.” In its evidence to the Inquiry, the Victorian Health Promotion Foundation (VicHealth) noted the capacity of community gardens to foster social connection.

Community gardens were one of the initiatives run through the Count us in! program. The program website notes that these were very successful in fostering intergenerational interaction and community pride and ownership:

The community garden approach was very successful in implementing sustainable and meaningful community engagement, which also saw the development of new relationships between residents, staff and community members. Projects set up committees with resident representation to assist with the planning, development, design and construction of multifunctional sensory, vegetable, herb, fruit and landscaped gardens on the site of residential aged care services. Community volunteers, members from local community gardening clubs, local businesses, schools, family, friends and staff partnered to share information, skills,
horticultural knowledge and worked together to build the gardens. These projects also instilled a strong sense of community pride and ownership. 92

The Committee considered that these programs demonstrate good initiatives at the local level, and determined that the Victorian Government should support local government to develop environments that foster intergenerational interaction. This could potentially be incorporated into the strategy for developing age-friendly environments, as discussed in Chapter 7.

5.4.5. Achieving improved intergenerational practice through strategy and leadership

The Committee recognised the value in individual programs and shared sites for those participants directly involved. It observed that intergenerational activities, programs and projects tend to originate at a community grassroots level and that formalised government intergenerational policy is not widespread.

The information obtained, however, suggests that due to their specific program focus and their random establishment, existing approaches to intergenerational practice in Victoria have limitations in the extent to which they influence intergenerational relationships at a broader societal level. For example, Dr Ralph Hampson from the Australian Association of Gerontologists stated that:

You can find a program – people will talk about intergenerational stuff, do a choir, that is great and it makes everyone feel good, and maybe it even works in that nursing home…. but it does not change the system. 93

The Committee identified a need for a more strategic approach to improving intergenerational practice to strengthen communities and to foster participation of people in later life.

There is evidence that intergenerational initiatives are ‘evolving beyond the implementation of innovative, but disconnected demonstration projects’ and a growing recognition worldwide of the importance of government strategy in intergenerational practice. 94 Researchers have identified that barriers to implementing intergenerational programs could potentially be resolved by a more strategic approach:

It can still be challenging to do intergenerational work. For the most part, social services, education systems, and community planning mechanisms are still structured to operate in an age segregated manner. … there are many barriers to the systematic growth and development of intergenerational programs, including public and private funding streams that target only one age group, lack of systematic collaboration among funding sources at the local, state, and national levels, lack of integration of programs into existing service systems, and limited mechanisms for identifying and sharing best practices. 95


93 Transcript of evidence 16, The Australian Association of Gerontology, p. 5.


The Committee found that while intergenerational programs are already operating in Victoria, there is a lack of strategic guidance for the development and funding of intergenerational programs that address the wellbeing of older people. It also identified that programs could be better monitored and evaluated.

In 2002, the Alma Unit for Research on Ageing at Victoria University conducted research for the Department of Human Services and identified 70 intergenerational programs around Australia, with approximately 30 of those based in Victoria. Notably, the 2002 report identified that the wellbeing of older people was often a lower priority of these programs than the wellbeing of younger people.\(^96\)

The Committee identified several models of developing strategy and leading at a government level to improve intergenerational relationships and practice. These are outlined in Table 5.6.

**Table 5.6: Examples of strategies for intergenerational practice**

<table>
<thead>
<tr>
<th>Lead government</th>
<th>Intergenerational Program</th>
<th>Key Features</th>
</tr>
</thead>
</table>
| Wales           | Strategy for Intergenerational Practice | • Developed in 2008 as part of the 10–year Strategy for Older People in Wales.\(^97\)  
• Builds on existing knowledge and good practice to ‘establish structures and systems that are models for intergenerational good practice.’\(^98\)  
• Accompanying action plan to integrate and embed intergenerational practice into the government’s whole of government approach.\(^99\) |
| United Kingdom  | The Centre for Intergenerational Practice | • Founded in 2001 by the Beth Johnson Foundation.  
• Supports the development of intergenerational practice throughout the UK and promotes an understanding of the potential of intergenerational practice to address social issues.  
• Supported and guided by an Intergenerational Advisory Group, composed of members from organisations involved in intergenerational work.\(^100\) |

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100 Beth Johnson Foundation (2001) *Definition of intergenerational practice*. 
International governments are making significant progress in intergenerational practice and achieving results in improving intergenerational relationships. The Committee considered that the Victorian Government should pursue similar approaches to support momentum in the development of intergenerational programs in Victoria to strengthen relationships across the generations.

**RECOMMENDATION 5.4:**

The Committee recommends that as part of an integrated strategic plan on ageing, the Victorian Government develops an intergenerational strategy that includes:

- collaboration between peak bodies for young people and senior Victorians
- the establishment of an external ‘Centre for Intergenerational Practice’ to progress research and practice in this field.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government request the Commissioner for Older People to coordinate the development of the intergenerational strategy.

### 5.5. Discrimination and participation

As highlighted, ageist attitudes can result in discriminatory practices and behaviours. The Committee identified discrimination as a key barrier to participation for people in later life. Interconnected with changing attitudes, addressing discrimination needs to be part of any strategy to change perceptions of older people.

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**Source:** Family and Community Development Committee


The Committee observed that there are a number of barriers to the enforcement of age discrimination legislation, including the general reluctance of older people to report incidents, entrenched workplace practices and biased recruitment methods.

While legislation in Victoria is generally sound compared to other jurisdictions, the Committee considered that targeted education is needed to improve compliance with legislation.

To enable greater opportunities for participation of people in later life, the Committee considered that there needs to be targeted education to improve compliance with legislation.

5.5.1. How do older people experience age discrimination?

Age discrimination is the unequal treatment of people based on their age. It can take the form of individual or systemic discrimination. Individual discrimination is the unfavourable treatment of a person based on their age. Systemic discrimination has been defined as ‘practices which are absorbed into the institutions and structures of society and which have a discriminatory effect.’

In the context of age discrimination, this can be understood to mean the ‘broader systems and practices within our community that can lead to age inequality.’

Box 5.3 outlines the types of discrimination that can be experienced by people.

<table>
<thead>
<tr>
<th>Box 5.3: Types of discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct discrimination</strong> is when a person treats, or proposes to treat, a person with a protected personal characteristic unfavourably, because of that personal characteristic. Direct discrimination often happens because people make unfair assumptions about what people with certain personal characteristics can and cannot do.</td>
</tr>
<tr>
<td><strong>Indirect discrimination</strong> is also against the law and refers to situations where treating everyone the same is unfair. This occurs when an unreasonable requirement, condition or practice that purports to treat everyone the same ends up either actually, or potentially, disadvantaging someone with a personal characteristic protected by the law.</td>
</tr>
<tr>
<td>Discrimination can also become <strong>systemic</strong> when entrenched, structural and sometimes institutional patterns of behaviour or actions affect a range of people. These behaviours and actions are often part of organisational culture and are reinforced by policies or procedures. If your organisation receives a lot of complaints about the same or similar issues, it might be a result of systemic discrimination.</td>
</tr>
</tbody>
</table>

The extent of discrimination against senior Victorians is difficult to quantify. The Commission’s 2011 *Annual report* states that it received 160 age related

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discrimination complaints during the year. The Committee heard, however, that the actual prevalence of age discrimination is substantially higher. This is because older people are reluctant to submit formal complaints when they feel they have been discriminated against. The former Commissioner of the Victorian Equal Opportunity and Human Rights Commission, Dr Helen Szoke, told the Committee that:

If something happens where [older people] feel they have been treated unfairly on the basis of age, they do not actually feel emboldened to do something about it.

There is a growing body of research, however, suggesting that older people are greatly affected by discrimination, particularly in the workplace. For example, statistics indicate that people over the age of 50 can experience greater difficulty finding a job than those less than 50 years. Mr Lane Masterton, the Victorian Regional Director of the Australian Bureau of Statistics, stated further that:

In September 2009 there were almost 58,200 older Australians classified as ‘discouraged job seekers’. Around two thirds of these people felt that employers considered them too old, so that is about 64 per cent, while a further 15 per cent said there were no jobs in their locality or line of work.

**FINDINGS:**

That negative attitudes towards older people can manifest in discriminatory behaviour towards older people.

That senior Victorians often do not lodge complaints about discrimination, which makes it difficult to identify and address issues experienced by older people.

### 5.5.2. Existing anti–discrimination mechanisms

Anti–discrimination legislation has been introduced both at the Commonwealth state level to protect older people from discrimination, to respond to incidences of discrimination with penalties and other measures and to prevent discrimination of older people through community education and awareness initiatives.

Box 5.4 outlines the Commonwealth anti–discrimination legislation introduced to protect older people.

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Chapter Five: Changing perceptions of older people and participation

Box 5.4: Commonwealth measures to address age discrimination

The *Age Discrimination Act 2004* (Cth) protects people experiencing direct and indirect discrimination education, access to goods, services and facilities, accommodation, access to premises and the administration of Commonwealth laws and programs. The *Age Discrimination Act* allows one or more individuals to enforce their rights under the Act by making a complaint to the Australian Human Rights Commission and to have their complaint conciliated or, failing conciliation, to be resolved in a court of law.

The *Australian Human Rights Commission Act 1986* (Cth) establishes the Australian Human Rights Commission and provides mechanisms for resolving complaints of unlawful discrimination. The Commission also has responsibility for research, education and policy activities to build awareness of the *Age Discrimination Act* and to tackle the attitudes and stereotypes that can lead to age discrimination.

In 2011, an Australian Age Discrimination Commissioner was established under the *Age Discrimination Act*. The first Commissioner was appointed in August 2011 and has responsibility for raising awareness of age discrimination, educating the community about the impact of age discrimination and monitoring and advocating for the elimination of age discrimination across all areas of public life.

Source: Australian Human Rights Commission website

There is also a process underway to consolidate the Commonwealth anti-discrimination laws (*Racial Discrimination Act 1975* (Cth), *Sex Discrimination Act 1984* (Cth), *Disability Discrimination Act 1992* (Cth), *Age Discrimination Act* (Cth) and the *Australian Human Rights Commission Act* (Cth). Draft legislation is expected to be released during 2012. This is anticipated to have the effect of putting age discrimination on par with other discrimination laws.

In 2009 the *Age Discrimination Act* was strengthened by the removal of the ‘dominant reason’ test to bring it into line with other discrimination legislation. This test required that a person’s age must be the dominant reason for something to constitute discrimination under the Act. Its removal ensures that a person only needs to show that age was a reason for the less favourable treatment they received in order to substantiate a complaint.

New discrimination legislation was introduced in Victoria in 2010. This is outlined in Box 5.5.

108 Direct discrimination under the *Age Discrimination Act* means a person treating another person less favourably than they would treat person of a different age. Indirect discrimination refers to discrimination that happens because of a condition, practice or requirement that has the effect of disadvantaging a person because of their age, provided that the condition is unreasonable.


111 *The Disability Discrimination and Other Human Rights Legislation Amendment Act 2009* (Cth) received Royal Assent on July 8 2009.
Opportunities for Participation by Victorian Seniors

Box 5.5: State measures to address age discrimination

The objectives of the Equal Opportunity Act 2010 (Vic) (EO Act) are to eliminate discrimination, sexual harassment and victimisation, to the greatest possible extent. The EO Act also aims to further promote and protect the right to equality set out in the Charter of Human Rights and Responsibilities.

The EO Act covers discrimination in employment, education, accommodation, clubs, sport, goods and services, land sales and transfers, and local government. It also has a role in encouraging the identification and elimination of systemic causes of discrimination, sexual harassment and victimisation.

The Act seeks to enable the VEOHRC to encourage best practice and facilitate compliance with this Act by undertaking research, education and enforcement functions.

The legislation also enables the Commissioner of the VEOHRC to resolve disputes about discrimination, sexual harassment and victimisation in a timely and effective manner, and to also provide direct access to the Victorian Civil and Administrative Tribunal (VCAT) for resolution of such disputes.


The Equal Opportunity Act 2010 (Vic) (EO Act) replaces the Equal Opportunity Act 1995 (Vic). The legislation goes further than the Commonwealth legislation by authorising the VEOHRC to investigate breaches of the EO Act in the absence of a complaint in certain circumstances. The Committee heard that this has significant potential for addressing systemic discrimination against senior Victorians.

In addition, the recent legislative changes have strengthened the VEOHRC’s role in promoting proactive and preventative measures to address systemic discrimination. Most notably, the recent changes have:

- made explicit a positive duty on employers and service providers to take reasonable and proportionate measures to eliminate discrimination and victimisation.
- empowered the VEOHRC to investigate, identify and eliminate causes of systemic discrimination in the absence of an individual complaint. 112

The VEOHRC has a very broad education focus and research function. This role has recently been expanded to assist organisations comply with the positive duty to eliminate discrimination under the EO Act. 113 The Commission’s website indicates that this will be achieved through:

- promoting awareness about the law and good practice through publishing practice guidelines (resources for employers on preventing discrimination against older workers and volunteers is currently being developed)
- guidelines on developing action plans which can be adapted by organisations
- reviewing organisational policies and practices to provide guidance
- providing education and training. 114

The VEOHRC recently turned its attention to issues contributing to age discrimination and the rights of older people. It conducted a consultation with older people in late 2011 to discuss key issues relating to the rights of older people in areas including housing, employment and age-friendly environments.

The VEOHRC published a report based on these consultations in 2012, *Rights in focus: Rights of older Victorians*. The report reflects the diverse views of older people and highlights the limited options available to older people to enforce their rights. The report concludes that a paradigm shift is needed from the out-dated ‘ageist’ and welfare-based approach to older people towards a ‘rights-based’ approach.\(^\text{115}\)

The VEOHRC has also published a guide in May 2012 titled *Mature-age workers and the Equal Opportunity Act: Know your rights*, which outlines the way in which the law in Victoria can protect the rights of older people in recruitment and work, including the rights of older people to request flexible arrangements.\(^\text{116}\)

The Committee observed that Victoria is well placed to address these issues with the recent expansion of VEOHRC’s mandate to deal with systemic discrimination under the new EO Act.

**FINDING:**

That Victoria is well placed to address age discrimination through the VEOHRC’s mandate to address systemic discrimination under the Equal Opportunity Act.

**5.5.3. Discrimination in the workplace in later life**

Evidence provided to the Committee consistently showed that discrimination against older people in the workplace was raised. For example, COTA noted that while there is a belief that attitudes towards workforce participation by older people are changing, the reality is that people continue to experience discrimination.\(^\text{117}\) Workforce participation by senior Victorians is also discussed in Chapters 2 and 4.

In 2010, the then Victorian Equal Opportunity and Human Rights Commissioner Dr Helen Szoke stated that age related discrimination in the workplace had doubled during the year from 50 complaints to 107 complaints (in 2011, there were 108 age related employment discrimination complaints reported, out of a total of 160 age related discrimination complaints).\(^\text{118}\)

Similarly, the Federation of Community Legal Services noted that ‘age discrimination is a growing problem in the Victorian workforce. Over the last three financial years, from 1 July 2008 to 30 June 2011, approximately 28% of callers to the JobWatch Telephone Information Service were people aged 45 and over.’\(^\text{119}\)


117 Transcript of evidence 1, Council on the Ageing (COTA) Victoria, p. 4.


119 Submission 85, Federation of Community Legal Centres Victoria, p. 9.
Evidence to the Inquiry reflected the impact of discrimination on opportunities for older people to participate in the workplace. For example, Associate Professor Elizabeth Brooke spoke about the ‘invisibility’ of age discrimination and the need for working with processes within organisations:

Age discrimination is very different from gender discrimination in that it can be invisible and nuanced and occur through processes that are often not obvious. It is a question very much about identifying those processes in organisations and setting up … new indicators of change. 120

Many Inquiry participants indicated that while policy has a focus on the need to engage older people in employment, the opportunities for participation are often limited. Mr Ken McAvoy expressed a view held by many participants:

It’s frustrating to be told by politicians we should work longer, even when we want to my answer is show me the jobs there are none out there. 121

The following comment from Mr Graham Stoodley is indicative of views expressed to the Committee regarding discrimination and its impact on senior Victorians:

Age discrimination and ageist attitudes toward seniors are frequently encountered and most distressing. Such attitudes and behaviour excludes seniors and leads to social isolation.

Friends have missed out on jobs because of their age and we have all overheard others and experienced being told for example ‘what would you know’, ‘don’t bother you’re past it’ or ‘give it to me you’re too slow.’ The older you get the more this happens. 122

A recent report by the Australian Human Rights Commission (AHRC) released in June 2012, Working past our 60s: Reforming laws and policies for the older worker, identified that while many older workers wish to remain in employment, working for longer is subject to a number of barriers for older Australians. The report highlights the ways in which age-based limits on workforce participation can be reformed across Australia in the areas of workers compensation, income protection insurance, licensing requirements for professional drivers and superannuation. 123

In a 2010 report, Age discrimination – exposing the hidden barrier for mature age workers, the AHRC identified a number of ways that older workers can experience discrimination in the workplace. 124 In analysing the evidence received throughout the Inquiry, the Committee focused specifically on a number of these areas:

• discriminatory recruitment practices
• insecure/uncertain employment arrangements
• pressure to accept redundancies and being targeted through restructure practices
• age-based bullying and harassment.

120 Transcript of evidence 6, Associate Professor Elizabeth Brooke, Business Work & Ageing Centre for Research – Swinburne University of Technology, Melbourne, 6 September 2011, p. 9.
121 Submission 5, McAvoy, K., p. 2.
Chapter 4 discussed the need to change workforce culture and employer attitudes to older people, in addition to the need to empower older people in the labour market.

**Discriminatory recruitment practices**

The Committee heard that discrimination manifests in a significant way in recruitment practices and considers it critical to address the stereotypical and ageist perceptions of employers and the recruitment industry.

As noted by the AHRC in their 2010 report:

Research and consultations show that a number of people over 45 years of age feel they are pre judged and rejected for reasons such as not ‘fitting into the environment’ or for being ‘too qualified’. This can be made worse by what some describe as the general tendency of people to recruit people from their own age group. Some managers may prefer to hire younger workers to make sure that their own power or authority lines are kept clear.  

The Victorian Employers Chamber of Commerce and Industry (VECCI) noted that older people experience significant discrimination in accessing labour market opportunities, and identified the main barriers as:

- Recruitment agency bias, with recruitment agency staff perceived to be young and lacking in knowledge regarding transferrable skills sets of older people.
- The reluctance of employers to recruit a higher level mature age candidate in a lower level position.
- Lack of appropriate part time and job share employment opportunities at a higher level.  

The Committee heard that some recruitment agencies play a significant role in perpetuating ageist employment practices. Furthermore, the Committee observed that these practices reflect the pervasive systemic discrimination of senior Victorians and their participation in the workforce.

For example, research conducted by the Recruitment and Consulting Services Association (RCSA) in 2005 identified a perception by recruiters that older workers have more health concerns, lack flexibility and have outdated skills:

Some recruiters identified that older workers have relatively more health concerns and also request greater levels of work flexibility, including reduced hours or part time work. Some found older workers were slower than younger workers and had different expectations of their career progression, often being happy to stay at the level they have reached during their work life. Further, some older workers possess outdated skills and were identified as needing to actively improve their work skills—particularly IT—to improve their potential for job placement.  

The Committee was also made aware of a perception that older people present a higher health risk to employers, and that uncertainty about WorkCover can impact on their willingness to hire older workers.

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Although age-based limits do not feature in Victorian WorkCover legislation, and premiums are not based on individual claims, the Committee observed that inaccurate perceptions about premiums continue to inform employer attitudes. For example, in evidence to the Committee, the Australian Industry Group explained that:

There are also perceptions, anecdotal evidence and discussions in companies regarding taking on mature age workers, and the anecdotes probably go beyond what the facts are, but it does not matter; you still have the concern of taking on residual injuries. If you are employing a 55 or 60 year old person, particularly if they have been a labourer all of their life, chances are they are going to have some sort of injury that you may or may not know about, and it could very quickly impact upon the use you make of that person and the premiums you might have to pay as a result of them injuring themselves when a younger person might not have. 128

**FINDING:**

That perceptions about WorkCover premiums in relation to older workers persist among employers, which can pose barriers to the employment of senior Victorians.

**RECOMMENDATION 5.5:**

The Committee recommends that the Victorian Government examines employer perceptions about WorkCover premiums in relation to older workers and identifies ways in which these can be addressed.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner undertakes this work.

**Role of the recruitment industry**

The Committee was informed that the recruitment industry potentially has a very important role to play in challenging ageist assumptions and discriminatory practices in the workplace. Evidence was given suggesting that the recruitment industry is starting to recognise the potential of older people in the workplace. For example, 2005 research conducted by RCSA indicated that recruiters recognise the potential of older people in the workforce, including skills, reliability and experience:

Overall, recruiters were positive about older workers and believed that they have an array of positive attributes to offer future employers including good skills, life experience and the capacity to effectively mentor younger employees. They found older workers had positive attributes including being reliable, steady and loyal employees who turned over their jobs relatively infrequently. 129

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128 Transcript of evidence 28, Australian Industry Group, Melbourne, 18 October 2011, p. 3.
129 Submission 87, Recruitment and Consulting Services Association, p. 7. See also Transcript of evidence 29, Recruitment and Consulting Services Association, Melbourne, 18 October 2011.
However, the evidence provided throughout the Inquiry indicated that there is a long way to go to address the systemic discrimination that underlies ageist recruitment practices.

**Insecure/uncertain employment arrangements**

The Committee identified that senior Victorians are more likely to be confined to casual or temporary contract positions, and to experience ‘underemployment’ for longer. 130 While these arrangements may suit some older people seeking flexibility, many senior Victorians prefer to be engaged in more hours of paid work. For example, a consultation by Banyule City Council highlighted concerns about access to opportunities for more hours of paid employment:

> There is an increasing number of [older people] who say they are 'under employed' and would like to have more hours of work. This is an area where more work needs to be done to utilise those seniors seeking more work opportunities in paid employment. 131

In relation to flexible employment, the Committee found that opportunities for this could be significantly strengthened. As indicated by the VEOHRC, access to flexible arrangements in the workplace is an emerging issue:

> We have had a range of issues raised with us. Certainly people want access to it and do not get it as they are getting older because there is a perception among organisations that those flexible arrangements are for women, really; they are not obliged to offer it to people with other attributes or in other circumstances. It is either you are there or you are not there. We also know that there are a lot of people who do not want to leave and want those arrangements in place for some time, but there are presumptions about retirement ages.

Certainly they are trends that we see coming through in the complaints. The way we are positioning that in the information that we provide is that clearly that falls within the notion of indirect discrimination. This requirement that you must work full time, irrespective of the reason why you want those arrangements, would clearly be covered by our type of discrimination law. 132

**Pressure to accept redundancies and being targeted through restructure practices**

The Committee heard that senior Victorians experience discrimination in the form of forced redundancies or restructures aimed at removing older workers in favour of acquiring younger employees. NSA notes that this has resulted in a significant number of hidden unemployed older people who would otherwise have chosen to continue working. 133

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131 Submission 41, Banyule City Council, p. 2.

132 Transcript of evidence 17, Victorian Equal Opportunity and Human Rights Commission, Melbourne, 5 October 2011, p. 7. See also Submission 63, Golden Plains Shire & Women’s Health Grampians, p. 15; Submission 59, Brewer, M.

133 Submission 70, National Seniors Australia, p. 8. See also Submission 85, Federation of Community Legal Centres Victoria, p. 11; Transcript of evidence 23, Benetas, Melbourne, 5 October 2011, p. 3.
The Union of Australian Women (UAW) Darebin group suggested that this trend can affect mature workers from as young as 50 years of age:

Ageism is built on a presumption of declining intellectual ability and physical capacity with increasing age. But this is not applied to people at 80 years of age. It begins to be felt by people in their 50’s and emerges in some industries as people being ‘laid off’ or made redundant in their late 40’s. It is a gross negative stereotype of older people. 134

**Age-based bullying and harassment**

Another form of discrimination faced by senior Victorians is bullying and harassment in the workplace. According to the 2010 AHRC report, this tends to take the form of harassment about retirement and ageist comments and jokes. The Federation of Community Legal Centres provided the following example that highlights this issue:

Noel is 65. He has a permanent full time job in the manufacturing industry. His supervisor, a younger man, recently told him they’re bringing in a new computer system at work and, given Noel’s age, he would probably struggle with it. The supervisor told Noel he thought it was time for Noel to retire. Noel felt insulted and complained in writing to a more senior manager, who reassured him that he would not be forced to retire. Noel’s supervisor then began to micro manage Noel, harassing him and bullying him in what Noel felt was an effort to push him out of the workplace. Noel contacted JobWatch and subsequently lodged an age discrimination and victimisation complaint with the Victorian Equal Opportunity and Human Rights Commission (VEOHRC). He went on stress leave for two months. When he returned to work, a few weeks before his scheduled conciliation date, his supervisor effectively asked him, ‘Who gave you permission to come back?’ He was stood down pending the outcome of the VEOHRC conciliation. The matter did not resolve at conciliation. Noel’s claim has been referred to the Victorian Civil and Administrative Tribunal (VCAT). 135

**FINDING:**

That older people can experience a range of discriminatory practices in the workplace (including coercion into unsuitable work roles), and that opportunities for flexible employment that respond to the needs of older people need to be significantly strengthened.

**RECOMMENDATION 5.6:**

The Committee recommends that the Victorian Government collaborates with the Australian Government to educate workplaces and the recruitment industry regarding the benefits of employing older workers, and to encourage the employment of older workers in the recruitment industry.

134 Submission 43, Union of Australian Women – Darebin Group, p. 5.
135 Submission 85, Federation of Community Legal Centres Victoria, p. 10.
5.5.4. Age discrimination in other areas

The Committee was told that senior Victorians also experience discrimination in the following ways:

- insurance practices related to participation of senior Victorians in volunteering
- attitudes towards senior Victorians with respect to health services and treatment
- barriers to information access as services move information to online sources.

Discrimination in volunteering

Although less evidence was provided to the Inquiry about discrimination experienced by older people in volunteering roles, the Committee heard about increased cases of senior Victorians being asked to cease volunteering from the age of 70 due to difficulties obtaining insurance, as noted by Volunteering Victoria:

Volunteering Victoria recommends VIOs [volunteer involving organisations] get appropriate insurance for their volunteers. However, some insurance policies contain an upper age limit which has the practical result of the organisation not taking on volunteers older than the limit, as they would not be covered by insurance. 136

The Committee notes that regulation and risk management, including insurance requirements is one of the focus areas to be addressed as part of the Australian Government’s ten year National volunteer strategy, released in November 2011. It also acknowledges the need to engage older Australians in volunteering. However, the Committee considers that the barriers to accessing insurance for older volunteers in Victoria need to be separately addressed. 137

FINDING:

That there are regulatory and financial barriers to the participation of older people in voluntary work, such as age limits on insurance.

RECOMMENDATION 5.7:

The Committee recommends that the Victorian Government works with the insurance industry to remove regulatory and financial barriers for older people in voluntary work.

Discrimination in health services and treatment

The Committee also heard that discrimination manifests in ageist attitudes of some health service providers in the provision of treatment. For example, Benetas

136 Submission 50, Volunteering Victoria, p. 3. See also Transcript of evidence 20, Volunteering Victoria, Melbourne, 5 October 2011, p. 4.

noted that ageist assumptions and attitudes, particularly in residential aged care facilities, tend to mask and prevent diagnosis of illnesses and disorders:

We have examples of staff recognising, for example, symptoms of depression, early stages of dementia, delirium and other disorders and illnesses which have been brought to the attention of medical practitioners who have just put it down to being old. They say, ‘Don’t worry about it. That person’s old, so you’ve got to expect that sort of behaviour’. The treatment is not picked up and nothing is done because that person is old. In essence what is being put forward is that age is the illness, not the depression or dementia, and that it is the ageing that is the illness, which you really cannot do anything about. There is real discrimination coming through. We witness it in our industry, and no doubt it is in others too. 138

Access to information

The Committee considered that advances in technology can also create situations in which senior Victorians are likely to experience disadvantage and discrimination. For example, as more and more services move to providing information online, increasing numbers of seniors will be alienated from information and unable to access relevant services if they are not provided with the infrastructure and know–how for using new technology. As noted by the NARI:

there will be quite a degree of discrimination and disadvantage even now if people cannot use the internet. They are certainly prohibited from using some of its functions which a lot of people take for granted. That is really important. 139

Access to information is discussed in greater depth in Chapter 4.

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138 Transcript of evidence 23, Benetas, p. 3.
139 Transcript of evidence 15, National Ageing Research Institute, Melbourne, 9 September 2011, p. 6.
Chapter Six:
Supporting people to plan for continuing participation in later life

FINDINGS:
That people are often reluctant to consider and plan for their ongoing participation in later life and are more receptive to considering their future at transition points in the life course, such as having children, moving house, a major health event or becoming a grandparent.

That there is increasing recognition at all levels of government that health promotion across all life stages is critical to ongoing participation in later life.

That encouraging people to consider strategies to ensure financial security in later life is a key strategy for fostering participation.

That cost of living pressures are a significant barrier to participation of senior Victorians.

That there needs to be a focus in Victoria on addressing inequalities in financial literacy and delivering financial literacy messages with a focus on life transitions.

That supporting smoother transitions to retirement and planning for retirement are important in assisting people to adjust to a new stage in their lives and consider what their participation will look like.
The importance of planning for lifelong participation was a strong message in the evidence provided to the Committee. The Committee identified that participation in later years is affected by circumstances, opportunities and decisions made throughout the life course.

The increase in average life expectancy and improvements in the general level of health in later life mean that people can expect their later years to span a longer period of time than past generations, making planning for later life increasingly important.

The Committee recognises that planning for later years is a shared responsibility across the community and individuals themselves. It also considered that the government has an important role in encouraging people to plan for later life as part of a broader agenda to foster participation in later life.

This chapter explores the value of encouraging Victorians to consider their participation goals in later life and to identify any forward life planning that might contribute to those objectives. It also considers the challenges in planning for later life participation. The Committee identified three areas in which Victorians can be supported in planning for later life:

- health
- financial security
- planning for long-term retirement goals.

The Committee found that there is value in the Victorian Government focusing on transition points over the life course to promote early planning for later life participation.

### 6.1. Why is planning for later life important?

Participants in the Inquiry told the Committee that participation in later life is strongly connected with people reaching later years in good health, with sound financial security and a plan for retirement.

The Committee heard that senior Victorians recognise that many health and financial challenges experienced in later life can be minimised or avoided by planning in earlier years. For example, in a consultation conducted by VincentCare Victoria, one of the participants commented on the importance of ‘looking after one’s own health sufficiently so as to be able to remain active.’

Similarly, Dr Michael Moynihan, President of the Rural Doctors Association of Victoria told the Committee that:

> The first thing that jumped out at me was the question of getting people to the point of retirement fit enough to enjoy it.

Research evidence supports the link between planning and better outcomes in later life. Notably, research studies are particularly focused on retirement and financial planning. What the findings reveal, however, is that life planning leads to better health and greater satisfaction in later life.

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2. Transcript of evidence 5, Rural Doctors Association of Victoria, 6 September 2011, p. 2.
Chapter Six: Supporting people to plan for continuing participation in later life

The Committee heard from a range of Inquiry Participants about the importance of planning for later life. For example, the Older Persons Consultative Committee from the City of Port Phillip noted that older people are likely to need ‘new life management skills and strategies to support them in maintaining a 21st century lifestyle.’ 4 The Peninsula Advisory Committee for Elders (PACE) also informed the Committee that there needs to be ‘more emphasis on pre-65 forward planning, pre-retirement, and transition to retirement programs.’ 5

6.1.1. Resistance to planning

The Committee found that despite widespread recognition of the value in planning for later life, people are often reluctant to consider their later years.

The Committee identified that negative perceptions of ageing in our society (as discussed in Chapter 5) contribute to people’s reluctance to accept the process of ageing. This tends to prevent people from focusing on their later years and what participation might involve. Unlike a teenager who is actively encouraged to consider their future career and other pursuits beyond their teens, people are not encouraged to plan for their later years.

Professor Simon Biggs, Professor of Gerontology & Social Policy at the University of Melbourne, told the Committee that as a generation, the ‘baby boomers’ will potentially find it confronting to acknowledge the ageing process. He stated that:

There is an expectation that somehow they will change what is happening in later life, but there is a contradiction in that because a lot of the culture which is associated with baby boomers in the 1960s and 1970s was in fact anti-old. The line from The Who song, for example, is typical: ‘I hope I die before I get old’. There is a question there about how boomers will respond to growing older. The main question is not one about whether they will continue to be active but how they will continue to be active if they are denying the fact that they are growing older, which has all sorts of implications in terms of planning. 6

The Committee determined that the link between attitudes towards ageing and planning for later life are therefore strongly interconnected.

There is an obvious degree of uncertainty in forward personal planning. The variable economy, rapid advances in technology, shifting government ageing policies, the changing nature of family and social dynamics all contribute to this uncertainty.

The Committee observed that approaches to promote personal planning tend to be targeted towards specific age groups. For example, while there is significant literature on the benefits of financial planning by people leading up to retirement, planning for retirement by younger cohorts has received little attention. 7 In contrast, health promotion messages have traditionally been targeted at younger people, with messages for health promotion in later life being less widespread.

The Committee determined that changing society’s perceptions of ageing and senior Victorians as discussed in Chapter 5 is critical in encouraging people to take steps early to enable their participation in later life.

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4 Submission 46, Older Persons Consultative Committee - City of Port Phillip, p. 5.
6 Transcript of evidence 18, Biggs, S., University of Melbourne, Melbourne, 5 October 2011, p. 6.
It also observed that delivering planning messages to people in periods of transition during the life course may be a promising approach.

**Life transition points and planning**

The Committee found that people tend to be more receptive to considering later life planning at times of transition throughout the life course. For example, one researcher noted that ‘most people who seek the advice of financial planners do so when they experience some life transition.’ 8 A range of transition points are relevant at different stages of the life course. Research suggests that planning for later life should begin as early as possible. 9 As people get older, however, their receptiveness to prepare for later life increases and targeting later life transition points can be particularly valuable. 10

In mid-life, some key transitions points include having children, moving house, moving in with a new partner, experiencing a significant health issue, changing employment or considering further study. Important later life transition points include grandparenthood, exploring accommodation needs or ceasing work. The importance of transition points was expressed by the Council on the Ageing (COTA):

COTA believes a life course approach is required to address health inequalities and prevention of illness. Recognition needs to be given to the importance of addressing health issues from early to later life, and at the significant transition points throughout the life course. 11

**FINDING:**

That people are often reluctant to consider and plan for their ongoing participation in later life and are more receptive to considering their future at transition points in the life course, such as having children, moving house, a major health event or becoming a grandparent.

**RECOMMENDATION 6.1:**

The Committee recommends that the Victorian Government adopts an approach to later life planning that identifies and focuses on key life transition points.

**6.2. Diversity in planning for later life**

Factors that influence life planning vary and include geography, cultural background and gender, as well as diversity in health and personal interests.

The Committee observed that life planning can be difficult for people experiencing socio-economic disadvantage. People with financial difficulties are often restricted in their capacity to plan for financial security. In addition, data suggests that physical

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11 Submission 74, Council on the Ageing (COTA) Victoria, p. 28.
activity levels and obesity can be influenced by socio-economic factors. It is also well-known that people living with high levels of disadvantage and people with low educational qualifications are least likely to meet the recommended physical activity guidelines.  

Viewed in aggregate, Victorians typically enjoy excellent health. However, the burden of disease is disproportionately shared across our population, with certain groups and regions in Victoria having significantly worse health outcomes than others. In some instances, serious differences persist or are worsening. It is important to note that although population health and life expectancy have improved overall, the gap between the least and the most disadvantaged people has not narrowed.

The Committee also heard that people ageing with a lifelong disability may face significant challenges such as poor health outcomes, early onset dementia, limited financial resources due to low rates of participation in employment and a lifetime of reliance on the disability support pension. Furthermore, as Carers Victoria explained to the Committee, older carers of people with a disability experience considerable challenges in planning for the future.

In 2011, the Senate Community Affairs References Committee conducted an Inquiry titled Disability and ageing: Lifelong planning for a better future?, which addressed the particular issues for people ageing with a disability. The Senate Committee identified that:

- People affected by certain conditions (for example, cerebral palsy or post-polio syndrome) can experience early-onset ageing, including osteoporosis and muscular-skeletal problems.
- People with lifelong disabilities (including those living with intellectual disabilities and those with early-onset dementia) can have degenerative conditions that require them to access specialist aged services.
- People with intellectual disabilities are one of the largest groups of people who will have early-onset dementia because of the connection between Down syndrome and dementia.

Professor Christine Bigby, a researcher in the area of ageing and disability, provided the following comment to the Senate Committee, highlighting the different experience of people ageing with a lifelong disability:

I think that one of the issues is that this is a unique group of people who are ageing with a lifelong disability. They have very different characteristics from a lot of older
people, they are a very small minority potentially within the aged-care system, and at the moment there is a policy vacuum because nobody wants to take the responsibility for this group of people.  

In the context of gender diversity, women’s experience of planning for later life can be different from men’s. This relates particularly to different workforce participation over the working years and the impacts on financial security. The Committee heard that these differences are the consequences of women receiving lower salaries, spending more time in unpaid caring roles and the resulting lower accumulation of superannuation. While women’s workforce participation is changing, women are still more likely to experience financial insecurity in later life. A 2005 report by the Victorian Government *Paving the way for older women in the workforce 2025* noted that:

The greatest benefits from savings for retirement accrue if they are made early in a person’s working life. Thus, even if participation rates among older women increased to 100 per cent from 2005 onwards, a substantial gender gap in retirement incomes is likely to persist. This finding implies that there is a need for a broad range of policies that address such issues as access to a decent retirement income for women who have ‘invested’ in the care of their families and communities; access to employment for women of all ages; and access to suitable information on how to save for retirement.

The Committee identified that different population cohorts also are likely to vary in their attitudes to and their experience of ageing. The ageing ‘baby boomer’ generation has been the source of considerable media attention and academic interest. Speculations are being made about ‘baby boomers’ and their retirement intentions, noting the effects of rising education levels, familiarity with technology, access to superannuation, housing preferences and the impact of the Global Financial Crisis.

### 6.3. Responsibility for planning for later life

Planning for later life is a shared responsibility:

- Individuals and families are largely responsible for undertaking later life planning.

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18 For example, see *Transcript of evidence 24*, Brotherhood of St Laurence, Melbourne, 5 October 2011, p. 2.
• Institutions and workplaces are playing a growing role in supporting people to plan for later life, particularly in relation to retirement and financial planning.
• Australian and state governments have responsibilities in areas that relate to planning for later life, such as health promotion, financial counselling and legislation.

A strong focus of many Inquiry participants related to financial security. As outlined in Chapter 3, the policy and funding levers relating to financial security for older people are largely controlled by the Australian Government. For example, while superannuation and taxation measures affect plans for financial security, the Committee recognises that the Victorian Government is not positioned to authorise reform in these areas.

However, as outlined in the following sections, the Committee did identify that the Victorian Government has an important role in promoting planning for later life through supporting more people to maintain good health at all life stages, and increasing financial literacy.

The Committee also considered that addressing society’s negative perceptions of ageing would assist in overcoming people’s general reluctance to plan for later life. Measures to address society’s perceptions of ageing are discussed in Chapter 5.

6.4. Maintaining good health for participation in later life

There is strong research evidence that highlights the importance of health as a critical determinant of ageing well and participation in later life. Participation is affected by health issues, including preventable chronic disease, such as diabetes and heart disease.

A consistent message from stakeholders during the Inquiry was that active living throughout life leads to better physical health and mental capacity for participation in later life. For example, in its submission the Retirement Village Association explained that:

A significant aspect of active ageing is the need to ensure the health and wellbeing of older people to allow them to participate to their full capacity for longer. 21

The Committee considered that there is a high level of awareness in Victoria about the importance of healthy and active living. Health policies at all levels of government in Australia have a preventative element and include initiatives to promote the benefits of maintaining good diet and an active lifestyle. Health promotion messages are widely disseminated through a range of awareness raising campaigns and feature prominently in popular media. 22

Mr Brian Dixon from the Association for International Sport for All (TAFISA) spoke to the Committee about an international initiative to encourage active

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21 Submission 75, Retirement Village Association, p. 9. See also Transcript of evidence 4, Retirement Village Association, Melbourne, 6 September 2011; Submission 26, Rubenstein, S., p. 1; Submission 24, Crosby, L., p. 1; Submission 33, Lammus, F., p. 1; Submission 14, Flemington Chinese Golden Age, p. 3; Transcript of evidence 51, Men in Sheds, Bendigo, 18 November 2011, p. 4.

22 An example is the Australian ‘Life. Be in it.’ awareness raising campaign of the 1970s and 1980s.
communities. TAFISA promotes the Triple AC (Active Cities, Active Communities and Active Citizens) program internationally.

Mr Dixon explained that programs such as Active Liverpool, Active Launceston and Active Mansfield, for example, aim to raise the physical activity levels of communities. He also spoke about TAFISA’s work in promoting an international alliance so that ‘physical education is put back in its proper place in universities, schools and the community and so that there is a general understanding through the Triple AC of the importance of physical activity.’ 23

Despite such efforts, there remain concerning health trends for older people. This indicates a need for more targeted health promotion relating to the impact of health decisions on later life participation. The Committee considers the recent government focus on prevention and health promotion to be a positive step. The Victorian public health and wellbeing plan 2011–15 and the announced initiative to build the Victorian prevention system are discussed in Section 6.4.3. The Committee determined that specific initiatives are also needed to address health promotion for senior Victorians.

6.4.1. Health and participation

The importance of maintaining good health for later life participation is supported by the World Health Organization (WHO) Active ageing framework. The framework emphasises health and wellbeing as a key enabler of participation in later life. The framework states:

The adoption of healthy lifestyles and actively participating in one’s own care are important at all stages of the life course. One of the myths of ageing is that it is too late to adopt such lifestyles in the later years. On the contrary, engaging in appropriate physical activity, healthy eating, not smoking and using alcohol and medications wisely in older age can prevent disease and functional decline, extend longevity and enhance one’s quality of life. 24

The Committee heard that people who maintain a healthy diet and an active lifestyle throughout their lives are at a lower risk of developing debilitating chronic diseases that can hamper participation, and are more resilient to risks associated with falls and accidents. For example, VicHealth told the Committee that:

Maintenance of adequate nutritional status is an important dimension of health promotion in older people… there is an increased risk of malnutrition and deficiencies with age that can impact on functional and mental ability. Nutrition plays a role in immune system function and the development of chronic disease in older people …

Increased physical activity is associated with a reduced incidence of all-cause mortality, a number of chronic diet related diseases and depression and anxiety. It also increases bone mineral content and reduces the risk of osteoporotic fractures, as well as helps to maintain appropriate body weight, and increases

23 Transcript of evidence 49, The Association for International Sport for All, Bendigo, 18 November 2011, p. 4.
Progressive resistance strength training can improve muscle strength and functional ability in older people. 25 Positive mental health is also strongly related to participation. As highlighted in Chapter 2, the Committee heard that older people identify the importance of staying connected to family, friends and the community as a way to maintain and enhance mental health. 26 The Committee was also told that there is growing awareness of the impact of depression in later life. beyondblue cited research suggesting that 10-15 per cent of older people living in the community and 31-41 per cent of aged care residents experience depression or anxiety. 27 There is also a growing body of evidence that preventative health strategies usually associated with reducing cardiovascular disease (such as physical exercise, nutrition and managing cholesterol, blood pressure and blood glucose levels) are also effective in reducing the risk of cognitive decline and dementia. 28

6.4.2. Health indicators

Significant gains in longevity and later life health have been made in Victoria over the last century. VicHealth, for example, noted that 78 per cent of those aged 65 and over rate their health as excellent, very good or good. 29 Evidence to the Committee, however, suggested that more improvement is needed to support people to participate at their desired levels in later life.

Recent decades have seen a decline in physical activity due to the increasingly sedentary nature of work and leisure activities. 30 Data also suggests that obesity rates in Australia have more than doubled over the past 20 years, with experts predicting that these rates will keep rising. 31 Participants in the Inquiry also emphasised the importance of recognising the trends in activity and implications for people in later life. 32 The following indicators suggest that older people are less likely to participate in physical activity:

- The results of the 2009-10 Multipurpose Household Survey persons aged 65 years and over had the lowest participation rate (48 per cent), compared with other age groups surveyed. 33
- 2004-05 Australian Bureau of Statistics (ABS) data indicated that 31.9 per cent of men and 40.5 per cent of women aged 65-74 years and 51.5 per cent of men and 58.6

25 Submission 72, Victorian Health Promotion Foundation (VicHealth), pp. 9-10.
26 Submission 49, beyondblue, p. 2; Transcript of evidence 19 beyondblue, Melbourne, 5 October 2011.
27 Submission 49, beyondblue, p. 1.
32 Transcript of evidence 5, Rural Doctors Association of Victoria, p. 6; Transcript of evidence 49, The Association for International Sport for All, p. 6; Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 10.
per cent of women age 75 years and over were classified as sedentary. Sedentary behaviour had also increased since 2001, especially in men 75 years and over. ³⁴

- Analysis of the 2000 National Physical Activity Survey by the Australian Institute of Health and Welfare (AIHW) indicates that 56.4 per cent of people aged 60-75 years reported doing ‘insufficient’ physical activity in the previous week (defined as less than 150 minutes of activity or less than five sessions of activity). ³⁵

VicHealth also referred to the following health indicators for people over the age of 65 that illustrate the need for people to engage earlier in health promoting behaviour:

- 60 per cent of males and 47 per cent of females aged 65+ are overweight or obese.
- 92 per cent of males and 88 per cent of females aged 65+ years have inadequate vegetable intake and 53 per cent of males and 41 per cent of females in this age group have inadequate fruit intake (although this is better than younger age groups).
- Approximately 11 per cent of those aged 65+ years do not do any physical activity, while 39 per cent walk for physical activity and only 5 per cent do any vigorous physical activity.
- Only 46 per cent of those aged 65+ spend sufficient time doing physical activity.
- 53 per cent of those aged 65+ have low short-term risks from drinking alcohol and 68 per cent have low long-term risks. ³⁶

These factors all affect the capacity of older people to participate in Victorian society. They also highlight the need for better planning earlier in the life course and the need to encourage positive health and wellbeing in later life.

The Committee considers that a whole of community prevention approach interconnected with targeted initiatives for age cohorts at key life transition points would be an effective strategy in supporting people to work towards positive health and wellbeing in later life. The next section considers some existing initiatives.

6.4.3. Towards a life course view of health promotion

Many Inquiry participants highlighted the value of preventative health strategies early in the life course to ensure that people are best placed in later life to be fit, active and in good physical and mental health. Professor Biggs, for example, spoke to the Committee about the importance of early prevention initiatives:

If we are thinking about, say, 40 years into the future, this would be the time to begin to put in place preventive activities that can help people stay relatively fit and active and therefore capable of making a contribution. If we look abroad at some of the most developed countries, such as Switzerland and some of the Nordic

³⁶ Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 6.
countries and even in some North American corporations now, we see that the way that people are addressing retention within the workforce is to look at health, diet and giving exercise possibilities to people who are part of their workforce because they want to keep them there and they want to keep them in a way that they are fit and healthy and will not choose to go elsewhere. 37

The Committee notes that the new Victorian public health and wellbeing plan 2011–2015 (referred to in Box 6.1) similarly places a strong emphasis on health promotion in the workplace. The Plan identifies the workplace as a priority setting for action and highlights the key outcomes achieved through Victoria’s WorkHealth initiative. 38

National Seniors Australia (NSA) also highlighted the benefits of health promotion and early intervention:

It is important to place an increasing emphasis on active and healthy ageing. This can be achieved by promoting awareness of health issues, disease prevention and the importance of early intervention. There is solid international evidence that primary care, which places an emphasis on multi disciplinary, preventive and well managed care of a patient does more for the health of our community than even the best run and well resourced hospitals. Active and productive ageing not only reduces the burden on health care services, but can also extend the working lives of seniors and increase the number of volunteers in the community. 39

The Committee notes that Alzheimer’s Australia has also recently called for a national prevention strategy for dementia. 40 It is also aware that the Australian House of Representatives Standing Committee on Health and Ageing is currently undertaking an inquiry into early diagnosis and intervention for dementia. The Committee recently announced that it is reviewing a proposal to make dementia a National Health Priority Area. 41

For several decades, health initiatives at all levels of government have had an increasing focus on health promotion. These approaches aim to deliver health promotion initiatives through a range of settings and target the underlying causes of chronic disease. Health promotion initiatives provide a framework to encourage people to establish active and healthy lifestyles throughout life. Box 6.1 provides a summary of initiatives.

37 Transcript of evidence 18, Biggs, p. 6.
39 Submission 70, National Seniors Australia, p. 7.
40 Alzheimer’s Australia (2010) Towards a national dementia preventative health strategy, p. 11. See also Transcript of evidence 37, Alzheimer’s Australia – Victoria, p. 6.
Opportunities for Participation by Victorian Seniors

Box 6.1: Australian health promotion initiatives

National health promotion initiatives
In 2008 the Council of Australian Governments (COAG) signed a National Partnership Agreement on Preventative Health. The Agreement allocates funding over four years to:
- address the rising prevalence of lifestyle related chronic disease by laying the foundations for healthy behaviours in the daily lives of Australians through settings such as communities, early childhood education and care environments, schools and workplaces, supported by national social marketing campaigns. 42

State health promotion initiatives
In 2011, the Victorian Government released the Victorian public health and wellbeing plan 2011-15. The Plan has a strong focus on strengthening the prevention system and preventative healthcare. The Plan emphasises the role of healthy lifestyles and environments in reducing chronic disease and stresses the need to ‘achieve sustained reductions in the growth of preventable diseases, and to create lasting improvements in the health and wellbeing of people and communities.’ 43 It identifies areas of reform and action which:
- aim to ensure that appropriate health improvement opportunities, underpinned by evidence of effectiveness, are provided at all stages of the life course: from the early years of life, through childhood and adolescence, adulthood, and into older age. 44

The Plan has a focus on using partnerships to effectively achieve its goals.

Role of local government
In 2011, the Victorian Government acknowledged the role of local government in promoting health and wellbeing in Victoria with the release of the Municipal public health and wellbeing plan 2011–15. 45

The announced initiative to build the Victorian prevention system focuses on supporting local government authorities and community health agencies to partner via local networks to deliver Municipal public health and wellbeing plans. This approach is known as the Prevention community model. 46 This work is closely aligned with WHO Global age-friendly cities guide, discussed in other chapters of this report.

Source: Family and Community Development Committee.

Evaluation
Evaluation has been widely recognised as an important element of ensuring the effectiveness of health prevention efforts. A key feature of the National Partnership Agreement is the establishment of infrastructure to monitor and evaluate the progress of preventative health initiatives and activities.

In Victoria, the Centre of Excellence in Intervention and Prevention Science has recently been established to support Victoria and local governments in assessing the success of prevention efforts. 47

Focus on life transitions

The Committee considers that the increasing focus on preventative health throughout the life course is a positive step in helping people plan for sustainable strategies to ensure better health and participation in later life.

The Committee determined that in implementing its new initiatives on preventive health, the Victorian Government could develop approaches to effectively target life course transition points. These include returning to work after maternity leave, having children move out of home or taking on a caring role.

The Committee also considered there is scope for the Victorian Government to develop innovative strategies to promote understanding about the effects of ageing from a genetic and lifestyle perspective. An example is the Lifestyle age progression projects being promoted in British schools and the Scottish Government’s Alcohol behaviour change campaign, both of which use digital imaging technology to visually project how individuals may look in the future. The technology aims to raise awareness of the long-term ageing effects of lifestyle choices (such as excessive drinking, smoking, obesity and consumption of junk food). 48

6.4.4. Maintaining health in later years

There is a growing body of evidence that supports the importance of maintaining a healthy, active lifestyle in later years. The importance of health promotion in later life is recognised in the Victorian health and wellbeing plan:

Health promotion is also important for older Victorians. It is never too early nor too late to adopt a healthy lifestyle, the benefits of which can often be seen quickly. 49

Inquiry participants expressed similar views about the importance of health in later life. The Association of Independent Retirees (AIR) Victoria Division, stated that ‘as health is a Senior’s greatest asset, people will need to be proactive in diet, exercise and mental stimulation.’ 50

Developed by the National Ageing Research Institute (NARI) in 2009, the National physical activity recommendations for older Australians urge older Australians to accumulate at least 30 minutes of moderate physical activity a day and aim to raise awareness of special physical activity needs of older people such as balance, mobility and strength training. 51

50 Submission 61, Association of Independent Retirees – Victoria Division, p. 3.
The Committee noted that while few preventative health initiatives have targeted older people, research suggests that as people get older they become more receptive to health promotion messages. It therefore considered that targeting health promotion initiatives at relevant transition points in later life would be of particular benefit. The Committee also recognised the importance of working to challenge older people’s views on physical activity and exercise.

**Targeted health promotion in later life**

Many seniors experience a number of changes and transitions that can affect their participation levels and also their health. These can include taking on responsibility for the care of grandchildren or a spouse, retirement, the loss of friends and loved ones, giving up a driver’s licence, changes to appearance and reduced physical ability and confidence. Providing options and pathways around such transitions points may assist older people to engage in health promoting activities.

COTA emphasised the need for a flexible approach to preventative health intervention for older people:

> There are clearly some health problems that are specific to certain age groups and so need targeted responses, however many conditions/problems can be experienced by people of any age. Accessible, appropriate and responsive health and support services are essential for ensuring good quality of life as people age. 52

The Committee found that targeting health promotion for older people needs to differ from other age population cohorts in its message. It considered that health promotion and preventative strategies targeted at people in later life needs to support older people who have experienced physical setbacks or have developed fears about their capacity to engage in physical activity or exercise.

The Committee heard about a number of programs that challenge common notions of older people as frail and aim to build the confidence of people in later life as active citizens. 53 These programs generally focus on older people building and maintaining fitness, strength or endurance. A number of organisations have established these types of initiatives which include COTA’s *Living longer living stronger* program, YMCA *Pryme movers*, *Lift for life* and cycling programs. Older people have the opportunity to learn about these programs through the Victorian Government’s *Seniors online* website. 54

Dr Michael Moynihan told the Committee that there is a general need to challenge the attitudes of many older people towards participation in sport and physical activity:

> When it comes to looking after health and being fit to enjoy old age, self care is much more important than medical care. The easy way out is to simply rely on doctors to fix the problems, but you are not really preventing them from happening. A culture of self care and a culture of sportiness – people still laugh at you when you gawkily go out for a run or something, because you are not cracking

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52 Submission 74, Council on the Ageing (COTA) Victoria, p. 28.
53 For example, see Submission 26, Rubenstein, p. 1; Submission 24, Crosby, p. 1.
it in the physicality stakes, but people have to feel that they can do that sort of 
thing. People have to feel that they can get into a swimming pool when they are 
30 kilos overweight and don the shorts and T-shirts. There has to be that culture 
of support for them, and there has to be a public perception that it is ‘cool’ to do 
this – that it is ‘cool’ to look awkward and even cooler to actually exercise when 
you are looking awkward. 55

**FINDING:**

That there is increasing recognition at all levels of government that health promotion 
across all life stages is critical to ongoing participation in later life.

**RECOMMENDATION 6.2:**

The Committee recommends that the Victorian Government, as part of its Public 
health and wellbeing plan, addresses health promotion across key life transition points 
that takes into account the age diversity of senior Victorians.

**Integrating health promotion with social participation**

Another promising approach for supporting older people to maintain active 
lifestyles is to integrate health promotion programs with social participation. 
Interviews conducted by Wesley Mission Australia indicated that social and 
community connections were an important aspect of health in later life:

Participants’ understanding of wellbeing shows that physical health is only 
one element that contributes to wellbeing. The interviews also revealed that the 
importance placed on each of these elements can change over time. For example, 
some interviewees were very concerned about their physical health and were 
focusing on improving this. Others were more concerned about maintaining 
connections with their local community, and worried about what would happen 
when they were no longer able to get out of the house independently. A number of 
participants also stressed the positive impact of having a pet, and how important 
this was to their wellbeing. 56

Research suggests that social participation and support have a strong impact on 
the health of older people while social isolation and poor quality social ties have 
been associated with increased morbidity and mortality. 57

Combining health promotion with social participation programs may help target 
certain population groups that are more vulnerable to isolation in later years. For 
example, the Committee heard from a number of sources that women are more 
likely to be living alone in their later years than men. COTA, for example, noted 
that women in later life are ‘often impacted by the grief of losing their spouse,

55 Transcript of evidence 5, Rural Doctors Association of Victoria, p. 3.
56 Submission 81, Wesley Mission Victoria, p. 20. See also Transcript of evidence 51, Men in 
Sheds, p. 5.
among older Victorians. Melbourne, National Ageing Research Institute, p. 3; Greaves, C.J. 
older people: Outcomes from a multi-method observational study’. Perspectives in Public 
siblings, and friends; by the loss of their individual capacity and identity; and also from transitioning into residential care. Designing socially focused health promotion strategies around life transition points (for example, the loss of a spouse) may improve health promotion behaviour and reduce risk of isolation.

As noted earlier in this chapter, mental health is strongly related to participation, with older people identifying the need to stay connected to family, friends and community as a way to maintain and enhance mental health. Therefore, combining social and physical activity programs may create a cumulative benefit.

6.5. Improving financial security through financial literacy

The Committee was informed that the relationship between participation in later life and financial security is particularly significant. Financial security is the basis for financial independence and a key enabler in ongoing participation by senior Victorians. The Committee recognises that financial security rests on the appropriate balance between planning for the future and needing to respond to external challenges (such as increased cost of living and economic pressures). Many Inquiry participants were concerned with issues relating to pension, superannuation and taxation systems. These aspects have a vital role in ensuring that seniors have adequate income in later life. These national issues have recently received a great deal of policy and media attention through the work of the Consultative Forum on Mature Age Participation and the Advisory Panel on the Economic Potential of Senior Australians. The Committee notes that in March 2012, the Australian Law Reform Commission began a review of Commonwealth legislation and policies that create barriers for older people participating in the workforce or other productive work, including government assistance programs. These issues are outside the scope of the Committee’s Inquiry and fall within the responsibility of the Australian Government. The Committee has not therefore addressed issues relating to pensions, superannuation and taxation.

The Committee also received evidence emphasising the importance of empowering senior Victorians to maintain control of their finances and of preventing the incidence of elder abuse. This issue is discussed in Chapter 4.

In this section, the Committee has focused on policy areas that the Victorian Government can influence. In supporting Victorians to achieve financial security in later life, the Committee focused specifically on financial literacy and cost of living pressures.

58 Submission 74, Council on the Ageing (COTA) Victoria, p. 32.
59 Submission 18, Women’s Health Victoria, p. 2.
60 Submission 49, beyondblue, p. 2; Transcript of evidence 19 beyondblue.
61 For example, see Submission 6, Burns, B., p. 1.
6.5.1. **Financial security and participation in later life**

Financial security allows older people to have greater choice about the way in which they participate in later life, including flexibility around retirement and housing decisions, engaging in discretionary spending (for example on lifestyle and leisure activities) and maintaining financial independence.

Financial security means different things to different people. Research indicates that people's expectations about the standard of living in later life are increasing (a trend often identified with regard to the anticipated retirement of the 'baby boomer' generation). However, increasing longevity may lead many to question whether finances accumulated throughout the working life are capable of adequately funding the lengthening post-retirement period. As noted by the National Council of Women:

> The Pension was originally meant to sustain the small proportion of the population who survived past 65, most of whom had no chance of survival without family support or an income. Currently our Seniors live into their 80s and so are dependent on Superannuation payments or the Pension for 20 years. Governments regard this longevity, which our public health system has worked to achieve, in addition to the Baby boomers, as an increasing drain on the public purse. The introduction of compulsory Superannuation was an inventive strategy to address this issue but it has endemic problems.  

The AIR Victoria Division, made the comment that 'Victorians need to over-estimate the amount of money they will need, and not to invest it all in the "one basket"'.

There are a number of forces that influence planning for financial security in later life. External forces outside an individual's control can have a negative impact on financial planning efforts. The Victorian Trades Hall Council, for example, told the Committee that:

> Whilst we look to a nice, graceful, gentle transition to retirement, the harsh reality is that for a significant group of workers the transition to retirement is traumatic and has financial stresses and also psychological stresses.  

Fluctuating economic conditions, volatility in property and investment markets, rising cost of living, and varying capacity of people to accumulate savings throughout their life can significantly alter a person's financial circumstances. In his submission Professor Allan Borowski from the School of Social Work and Social Policy made the following point:

> There are many risks associated with superannuation including the longevity risk (outliving one's savings), the inflation risk (resulting in the erosion in the value of superannuation savings) and 'legislative risk' – the constant tinkering by government with the superannuation rules (including tax treatment of superannuation) which makes financial planning for retirement even more difficult than it already is. (It would be much easier to plan if we knew when we were going to die!) But an enduring risk is investment risk – the risk of poor returns on the investments made by superannuation fund managers.  

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63 Submission 30, National Council of Women of Victoria, p. 9.
64 Submission 61, Association of Independent Retirees – Victoria Division, p. 3.
65 Transcript of evidence 38, Victorian Trades Hall Council, Melbourne, 21 October 2011, p. 3.
66 Submission 8, Professor Borowski, A., School of Social Work and Social Policy – La Trobe University, p. 1.
As noted by the AIR Southern Cross Division, even assuming an adequate savings base is accomplished throughout life, many older people face continuing uncertainties. For example:

Will my savings outlast me? How will investments perform? How can I cope with the rising cost of living, particularly for energy, health and other insurance? How will the carbon tax affect seniors? 67

The Committee determined that those who are supported to think about financial security earlier in life are often better positioned to respond to some of the financial uncertainties they will experience in later life.

**FINDING:**

That encouraging people to consider strategies to ensure financial security in later life is a key strategy for fostering participation.

### Cost of living pressures

Many Inquiry participants identified the rising cost of living as a significant challenge and a barrier to participation in later life. As noted by NSA:

An ongoing decline in the standard of living of seniors as they age is a particular challenge for both the individual concerned and the government at all levels across Australia. Rising cost of living and associated financial pressures experienced by many Victorian seniors, especially those on fixed incomes such as a government pension or an account-based allocated pension, can constitute a significant barrier to both community and workforce participation. 68

The rising costs of basic essentials such as food, fuel, transport, rates and utilities can put considerable financial stress on seniors. Aged and Community Care Victoria (ACCV), for example, commented that there is a:

Continued general upward trend in the price of essential household commodities for pensioners and beneficiaries. For instance, in the year to June 2011, the Pensioner and Beneficiary Cost of Living Index (PBCLI) increased by 4.5 per cent compared with a rise of only 3.6 per cent for the general cost of living index, the Consumer Price Index (CPI). 69

Citing the results of the 2011 Relationships Indicators Survey, ACCV noted that this is in contrast to the belief held by 87 per cent of people aged 79 years and over that their financial situation would remain the same. 70

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67 Submission 9, Association of Independent Retirees – Southern Cross Division, p. 1.
68 Submission 70, National Seniors Australia, p. 5. See also, for example, Submission 15, Wiggill, T. & Wiggill, C., p. 1; Submission 15, Wiggill & Wiggill, p. 1; Submission 5, McAvoy, K., p. 1; Submission 34, National Seniors Australia - Knox Branch, p. 1; Submission 48, Jurcevic, H., p. 1; Submission 41, Banyule City Council, p. 2; Submission 31, Trezise, D., p. 1; Submission 61, Association of Independent Retirees – Victoria Division, p. 2; Submission 58, Jayne, F., p. 1; Submission 71, Municipal Association of Victoria (MAV), p. 11; Submission 77, Cooper, p. 2; Submission 80, Aged and Community Care Victoria, p. 8; Submission 59, Brewer, M; Submission 63, Golden Plains Shire & Women’s Health Grampians; Transcript of evidence 48, City of Bendigo, Bendigo, 18 November 2011.
69 Submission 80, Aged and Community Care Victoria, p. 5. See also Transcript of evidence 39, Aged & Community Care Victoria, Melbourne, 21 October 2011, p. 3.
Participants emphasised to the Committee that many Victorian seniors live on low incomes sourced from investments, government benefits or a combination of both, and that rising costs mean that an increasing proportion of their income is spent on basics such as food and utilities. NSA referred to data indicating that food and energy costs make up around 27 per cent of the disposable income of working people, compared with 42 per cent of the disposable income of retired people relying only on the pension. 71

**FINDING:**

That cost of living pressures are a significant barrier to participation of senior Victorians.

**RECOMMENDATION 6.3:**

The Committee recommends that the Victorian Government develops guidelines for concessions to older Victorians to ensure older people are included in strategies to alleviate cost of living pressures for people on low incomes.

6.5.2. Improving financial literacy

Inquiry participants indicated support for targeted initiatives to improve the financial literacy of older people. For example, the Trustee Corporation Association of Australia stated that:

> In order to prepare for an uncertain future, it is generally wise for people to give early attention to ways in which their financial assets can be managed and protected. Our members strongly support initiatives aimed at raising the general level of financial literacy in the community so that the ageing population is better able to plan the future. 72

Similarly, the AIR highlighted that:

> A lot of seniors are not coping with their capital when they receive it. I think it is fairly clear that they go out and they go on their overseas travel and then they buy a caravan … and then they are getting caught in a failed financial scheme and relocating, and by the time they have done all those things, they are almost broke. 73

Building financial literacy has been increasingly recognised over the past decade as an important issue for Australians of all ages. In 2011, the Australian Securities and Investment Commission released a National Financial Literacy Strategy to provide national direction in this area. 74 This Strategy contains a comprehensive range of initiatives that take into account diverse groups. It recognises the importance of a life cycle approach and the need to consider financial literacy

71 Submission 70, National Seniors Australia, p. 5.
72 Submission 55, Trustee Corporations Association of Australia, p. 2.
73 Transcript of evidence 21, Association of Independent Retirees, Melbourne, 5 October 2011, p. 3.
74 ASIC currently holds the lead role for advancing consumer and financial literacy in Australia, taking over in 2008 from the Financial Literacy Foundation. The Financial Literacy Foundation was established by Federal Government in 2005 to raise awareness of financial literacy.
as part of a ‘lifelong learning continuum’. The initiative is supported by a comprehensive website that provides information targeted at particular life events and life stages, and for specific population groups.

The Committee considered that the Victorian Government also has a significant role to play in coordinating and delivering education strategies that align with the National financial literacy strategy.

Inequalities in financial literacy

A growing body of research suggests there is a pressing need to address the vast inequalities in the basic financial literacy of adults. Differing levels of financial literacy have been linked to gender, cultural background and socio-economic status. These differences are likely to persist throughout the life course and severely affect financial security and participation in later life.

Focus on life transitions

The Committee notes that merely providing financial education may not be enough to support people to make informed and reasoned financial decisions, particularly in disadvantaged and vulnerable populations. The Committee considered that delivering financial literacy messages early in life has significant promise. For example, a promising initiative called the Money for life program is currently being developed by the Smith Family and Citi Foundation to deliver a financial literacy course to disadvantaged children in years 11 and 12 across 16 communities in Victoria and New South Wales.

In addition, an approach that targets life transition points (for example, having a baby, moving house or starting a new relationship) may be more effective in delivering messages in a meaningful way. Later life transitions such as retirement are also important focus points for targeting financial literacy messages.

FINDING:

That there needs to be a focus in Victoria on addressing inequalities in financial literacy and delivering financial literacy messages with a focus on life transitions.

RECOMMENDATION 6.4:

The Committee recommends that the Victorian Government establishes a financial awareness and literacy support program that coordinates with federal programs and supports Victorians to plan for financial security in later life.

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76 The Committee notes that the Victorian Government has already been involved in this area, for example in considering the role of financial literacy in the school education, as noted in the Australian Securities & Investments Commission (2011) National financial literacy strategy.


6.6. Retirement and long-term goals

The Committee identified that the period of retirement is interlinked with participation for people in later life. While many people look forward to a life stage in which they are no longer required to participate in the paid workforce, retirement is a significant life transition and a period of time that differs considerably for retirees. The Committee found that planning for retirement and considering participation intentions is a key strategy for enabling people to maintain their engagement and connectedness.

A significant body of work has recently emerged exploring the benefits of planning for retirement. Phasing out of work life and transitioning to flexible work arrangements are strategies that are gaining momentum internationally and in Australia. Research also suggests that people who plan for retirement have better outcomes than those who do not. 79

Inquiry participants emphasised the importance of planning for the transition to retirement, highlighting it as a key factor in levels of participation for people in later life. As the Brotherhood of St Laurence pointed out, however, people often think little about retirement planning:

It is quite interesting that people tend not to think beyond the first two or three years out of the workforce, when they are going to have a wonderful time and do all the things they wanted to do, if they have enough money. They have not really thought beyond that, so we think that there needs to be some thinking about supporting people to start thinking more about it and being able to have access to some sort of support or information for planning. 80

The Committee identified that retirement expectations are changing, and that the Victorian Government can play an important role in supporting Victorian seniors to transition to retirement in ways that encourage participation.

6.6.1. Changing retirement expectations

Clearly expectations of retirement are changing. While the notion of retirement has become entrenched in our society, the Committee observed that retirement itself is a relatively modern phenomenon. During the nineteenth century, people tended to work as long as they were able. 81 During the twentieth century, attitudes towards retirement shifted significantly, with early retirement gaining popularity as a marker of life achievement. 82

Research suggests that society’s notions of retirement are being challenged. 83 Some suggest that the traditional paradigm of a period of education followed by

80 Transcript of evidence 24, Brotherhood of St Laurence, p. 4. MAV also noted that ‘many older workers have not thought about retirement and have undertaken no planning for it’ Submission 71, Municipal Association of Victoria (MAV), p. 12.
work and ending in retirement is likely to give way to more flexible approaches and alternative ways of thinking. For example, the WHO foreshadows the possibility of people engaging in several cycles of education and work throughout the life course, with periods of disengagement from work not limited to later years.\textsuperscript{84} This is discussed in greater detail in Chapter 3.

Researchers and policy makers anticipate that the expectations of ‘baby boomers’ in retirement are likely to differ from those of earlier generations. For example, as VicHealth commented:

The Baby Boomers will enter older age with vastly different expectations and desires than previous generations – more mobile post retirement, more individualistic, have fewer family and social networks, will be confident in use of technology, may be more affluent, more likely to live alone, and may be more likely to live in areas where services are more difficult to access.\textsuperscript{85}

Evidence gathered by the Committee also reflects the changing attitudes to retirement. A number of participants told the Committee that more people want to continue to work and increasing members of people seek a longer and smoother transition to retirement.\textsuperscript{86} This is supported by the demographic trends, as outlined in Chapter 1.

6.6.2. Participation and retirement

The Committee was made aware that while many people have high expectations of their retirement some are likely to experience personal and financial challenges in the transition to retirement. Research has identified a relationship between pre-retirement planning and health outcomes, positive attitudes and adjustment to retirement, and life satisfaction.\textsuperscript{87}

Although much of the literature focuses on financial aspects of planning for retirement, researchers have indicated a growing recognition of the importance of psychosocial preparedness for retirement. Such preparedness supports people to adapt to ‘changes in identity, gender roles, time allocation, health status, and marital relationships.’\textsuperscript{88} In its submission to the Committee, the Ethnic Communities Council of Victoria (ECCV) stated that:

People in ethnic communities have traditionally held cultural perceptions of family dependency as they grow older. If Victorians from culturally diverse backgrounds have the prospect to work till they are in their 70s and to live 20 years longer, they need to be given the chance to explore what their new identity as actively engaged seniors could be.\textsuperscript{89}

\begin{footnotes}
\item[84] Stark, J. ‘Prepare to work until you’re 100’, \textit{The Age}, 25 April 2010.
\item[85] Submission 72, Victorian Health Promotion Foundation (VicHealth), p. 8.
\item[86] See, for example, Submission 49, \textit{beyondblue}, p. 9; Submission 30, National Council of Women of Victoria, p. 6; Submission 41, Banyule City Council, p. 5.
\item[87] Noone, Stephens, & Alpass (2009) \textit{Preretirement planning and well-being in later life: A prospective study}.
\item[89] Submission 25, Ethnic Communities Council of Victoria, p. 5. See also \textit{Transcript of evidence 27}, Ethnic Communities Council of Victoria, Melbourne, 18 October 2011.
\end{footnotes}
The Committee considers that retirement planning programs require a partnership approach, with the Victorian Government focused on working with employers, industry bodies and unions to provide smoother transitions to retirement and to create pathways for later life participation.

**FINDING:**

That supporting smoother transitions to retirement and planning for retirement are important in assisting people to adjust to a new stage in their lives and consider what their participation will look like.

6.6.3. Awareness raising and information

The Committee was told about a number of information and awareness raising programs that emphasise the importance of retirement planning. Inquiry participants told the Committee that there is a strong interest in programs which assist people to transition to retirement. For example, in its submission, Yarra Ranges Council stated that:

Mature age workers in transition to retirement have a strong interest in programs which provide financial information, information on health and wellbeing, programs which educate on the transition to retirement and provide access to senior’s organisations and support groups. 90

The Australian Association of Gerontology suggested that the use of retirement planning tools can be helpful. It cited the example of a toolkit designed by Spira for use by older people in planning their futures:

In the paper ‘Mapping Your Future–A Proactive Approach to Aging’, Spira describes a tool that older adults can use in planning their futures. Spira mentions that planning for ageing is important as planning can help to offset crises and provide support structures for people to utilize as their position in the community changes. This tool covers health, work/leisure, finances, housing and relationships. This tool aims to encourage people to start conversations about life choices and maintaining a sense of empowerment and well being. The tool also intends to create linkages with resources to assure security and well being. 91

The Committee also heard that a peer approach can be valuable in increasing awareness of the importance of life planning. COTA, for example, suggested that peer led education enables people to ‘question and examine the myths and stereotypes of ageing and productively plan for their lives postwork.’ 92

The Committee considers that the Victorian Government needs to partner with industry groups and unions to develop and implement effective retirement planning programs for workers. A life transition approach could also be adopted in this area to support people in considering retirement goals as part of their ongoing financial planning (for example, to assess the impact of changing to part-time work on superannuation accrual).

90 Submission 36, Yarra Ranges Council, p. 10.
92 Submission 74, Council on the Ageing (COTA) Victoria, p. 21.
6.6.4. Supporting smoother transitions to retirement

There is growing recognition that many older people prefer a gradual transition to retirement. The Committee heard that this can take different forms and can include, for example, transitioning to flexible working arrangements or to different roles in the workplace. The Brotherhood of St Laurence pointed out that in addition to planning for post-retirement life, people approaching retirement are also considering how the workplace can adjust to their changing needs:

In the 45 to 70 age group they are still concerned about their opportunities in employment and their conditions of employment ... They are concerned about education and training opportunities and their caring responsibilities, whether for children or for an older person during that period. Their partner may be ageing. They are planning for their life post work.

The Committee observed, however, that there are no mechanisms to assist people with a smooth transition to retirement. Research suggests that employer roles and organisational practices have been neglected in the consideration of retirement choices and transitions. The Victorian Trades Hall Council supported this view, commenting that:

There should be an encouragement of transition to retirement rather than these blunt weapons, and they are mainly federal, like simply raising the age pension age.

Similarly, the Brotherhood of St Laurence observed that there are attitudes across industries and occupations that pose significant barriers to retirement transitions:

It is about planning for opportunities to transition into retirement before leaving work instead of just bang, finish, out. Lots of people would prefer to be able to gradually reduce their hours, but there are a lot of occupations, a lot of industries and a lot of attitudes that actually undermine the opportunity to do that.

Inquiry participants recommended that workplaces, government and other stakeholders give greater support to people as they disengage from the workforce. For example, the Victorian Trades Hall Council noted that:

There are not the formal structures currently existing at the state level to encourage stakeholders in the workplace – employers, unions, all levels of government and the government as an employer itself – to care for workers as they leave the workforce. This is especially true for injured workers, non English speaking background workers, who may have been made redundant or put on to reduced hours. Whilst we look to a nice, graceful, gentle transition to retirement, the harsh reality is that for a significant group of workers the transition to retirement is traumatic and has financial stresses and also psychological stresses.

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94 Transcript of evidence 24, Brotherhood of St Laurence, p. 2.
96 Transcript of evidence 38, Victorian Trades Hall Council, p. 6.
97 Transcript of evidence 24, Brotherhood of St Laurence, p. 4.
98 Transcript of evidence 38, Victorian Trades Hall Council, p. 3.
Awareness of these issues is growing. For example, the Committee heard that superannuation funds are starting to engage with workplaces around transition to retirement. Furthermore, the Trades Hall Council suggested that some unions are ‘putting on the table as part of their enterprise bargaining ambit list the concept of transition-to-retirement clauses.’

The Australian Industry Group spoke to the Committee about the sensitivities around raising the question of retirement with older workers. It noted that employers are sometimes concerned that their employees could perceive conversations about retirement as a threat to their job security. In discussing strategies to help companies broach the issue of retirement with workers, the Australian Industry Group referred to a Corporate champions project. This project involves a number of companies that are interested in gaining a better understanding of their older workforce, including succession planning and workforce flexibility that can better accommodate older workers.

Current Australian Government initiatives to assist older people with transition to retirement include career advice provided as part of the Experience+ program and retirement information available as part of the Centrelink financial information service, the National Information Centre on Retirement Income and the Money smart website.

On the whole, the Committee found that employee retirement is given little consideration by employers. As the Australian Industry Group noted:

> Very often employees are reluctant to raise their concerns, their issues, their thoughts about leaving with their employers, so we need to help build some confidence about that.

The Victorian Government can provide leadership in engaging industry bodies, unions, workplaces and superannuation funds in partnership to promote best practice in supporting older people to transition to retirement, and ensuring that retirement and work life issues in later life can be openly and honestly discussed in the workplace.

### 6.6.5. Pathways into participation post-retirement

The Committee considers that there is significant scope for developing a work based partnership approach that creates pathways into post-retirement participation. Such an approach would involve connecting people to community and other forms of participation while they are still engaged in work. Life Activities Clubs of Australia told the Committee that transition from work to retirement can leave older people without a network of support:

> The other key thing for older people is that once they leave the workforce and no longer have a network of support – they do not have the same friendship groups – it is quite a terrifying situation for people. It is almost like starting school or starting

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100 Transcript of evidence 28, Australian Industry Group, Melbourne, 18 October 2011, p. 4.
102 Transcript of evidence 28, Australian Industry Group, p. 4.
new in the workforce. You are starting a completely new phase of your life, your career or whatever. Information about what you might do in that new phase of your life is very difficult to find. People do not know what they do not know. They do not even know what questions to ask about what things are available for them. Some form of education for people approaching retirement about planning for their future, where to go for information on the sorts of things that are available, is an issue that came up in these consultations. 103

Engaging in volunteering is one way people beginning the retirement process can begin to link to the community. 104 The Committee heard that matching services such as Greatconnections have been emerging to match professionals with post-retirement roles in the not for profit sector. As noted by Greatconnections:

Access to meaningful volunteer work and the associated learning and social connections will play a crucial role in the vitality of senior Victorians and will enrich the life of the community at the same time. 105

The Committee considered that partnerships between employers and volunteer organisations are another avenue for pathways into post-retirement participation. One such example is the Timehelp program which links Alcoa retirees with volunteer opportunities in local schools.

Other potential avenues include mentoring roles and pathways into ongoing education. The Committee heard about a range of opportunities for post-retirement participation such as U3A, Life Activities Clubs and Men’s Sheds. 106

On the whole, however, the Committee observed that pathways into participation in volunteer and other activities tend to be ad hoc and unreliable. The Committee considered that there is an opportunity for the Victorian Government to support the development of partnerships across businesses and the community in order to ensure older workers have pathways into participation after retiring from the workforce.

→ RECOMMENDATION 6.5:

The Committee recommends that the Victorian Government works with stakeholders to:

• develop and implement effective and innovative programs to support workers to plan for and transition to retirement
• review opportunities and identify new pathways to make smoother transitions to retirement for mature aged workers.

103 Transcript of evidence 26, Life Activities Clubs Victoria, Melbourne, 18 October 2011, p. 5.
104 For example, see Transcript of evidence 20, Volunteering Victoria, Melbourne, 5 October 2011, p. 4.
106 For example, see Transcript of evidence 51, Men in Sheds; Submission 53, Doig, L; Transcript of evidence 8, U3A Network Victoria, Melbourne, 6 September 2011; Submission 40, Life Activities Clubs Victoria; Submission 42, OM:NI; Submission 65, Australian Greek Welfare Society.
Chapter Seven: Achieving age-friendly environments

FINDINGS:

That Victoria’s public transport systems and infrastructure were designed at a time when population ageing was not a consideration for planners and developers. That older people often find public transport unsafe and inaccessible.

That a greater range of reliable community transport options for senior Victorians is needed to supplement the public transport system.

That a regional approach to community transport may assist with transport linkages across Victoria.

That the Taxi Industry Inquiry made recommendations to improve training for taxi drivers, however these recommendations did not refer specifically to improving skills in dealing with older passengers.

That seniors largely prefer to ‘age in place’ in their community and, where possible, in their home.

That more age-friendly accommodation choices are needed, including:
- service integrated models
- accessible age-friendly housing
- increased housing modification support that meets the changing needs of people throughout their lives.

That affordability of housing is a major concern for people in later life.

That age-friendly outdoor spaces and buildings are essential to ensure the safety and participation of older people and that these initiatives will also benefit the broader community.

That achieving age-friendly environments requires effective planning.
Countries across the world have committed to creating age-friendly communities in line with the 2007 *Global age-friendly cities guide* (*Age-friendly cities guide*) developed by the World Health Organization (WHO). The Committee identified that some progress has also been made in applying an age-friendly approach in Victoria, particularly in local communities.

While progress has been made in many local areas, the Committee found there is no ongoing, coordinated or consistent commitment at a state or local level to develop a cohesive, statewide age-friendly strategy. The Committee heard that despite early progress, momentum in Victoria is beginning to wane. Local councils indicated they are seeking the leadership and support of a statewide age-friendly policy to sustain the effort.

The WHO *Age-friendly cities guide* cuts across a multitude of areas such as health and civic participation, which have been addressed in other chapters.

This chapter focuses specifically on those elements of the WHO *Age-friendly cities guide* that strive to foster age-friendly environments and participation.

### 7.1. Age-friendly environments – catering for diversity

Inquiry participants expressed strong views about the need to achieve an age-friendly Victoria. The WHO *Age-friendly cities guide* is a key tool in this effort, and three interlinked components of the guide that relate specifically to the environmental dimensions of achieving an age-friendly city are considered in this chapter. These elements are:

- transport and its role in helping people to remain engaged in community by freely moving from one place to another
- housing and its role in enabling older people to remain connected to community
- outdoor spaces and buildings and their role in creating a sense of safety and security and ensuring adequate accessibility for older people.

Other aspects of the guide are discussed in Chapters 2, 3 and 5. The Committee recognises that the environmental and social elements that contribute to age-friendly communities are equally important, highly inter-related and mutually reinforcing, yet each component needs separate consideration.

The importance of tackling the environment (and factors such as accessibility and mobility) in seeking to promote the participation of older people is well supported in the literature and in the evidence heard by the Committee. The WHO *Age-friendly cities guide* states that:

> The city’s landscape, buildings, transportation system and housing contribute to confident mobility, healthy behaviour, social participation and self determination or, conversely, to fearful isolation, inactivity and social exclusion.

Evidence received by the Committee supports the importance of urban design in ensuring adequate and accessible transport networks, housing that meets the

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needs of older people, and accessible outdoor spaces and buildings. For example, the Council on the Ageing (COTA) highlighted the importance of:

- a mix of housing types, suited to changes in household composition and physical abilities over the life course, within localities
- local services that are accessible without reliance on private car use
- quality conditions and services for getting around locally – from footpaths to public transport to Community Transport (and other ‘para-transit services’)
- services that are culturally appropriate.  

The Committee identified that an age-friendly environment needs to support people of varying ability to participate actively in society. The WHO *Age-friendly cities guide* explains that:

> Design for diversity has emerged as a prime characteristic of an age-friendly city that is repeated often across many topic areas … it should be normal in an age-friendly city for the natural and built environment to anticipate users with different capacities instead of designing for the mythical ‘average’ (i.e. young) person.  

The Committee found that older people have diverse needs and capacities, and that rural and remote communities face particular issues in age-friendly planning. It identified that age-friendly environments need to accommodate the diverse needs and capacities of individuals, while accounting for differences between different communities.

In Victoria, achieving age-friendly environments is hindered by existing infrastructure. While age-friendly principles involve a range of aspects, infrastructure plays a significant role in creating age-friendly environments. Much of Victoria's infrastructure was not designed with an ageing population in mind. Accordingly, significant challenges lie in how existing transport networks, housing and the built environment can be retrospectively re-fitted or supplemented to accommodate the participation needs of senior Victorians.

Furthermore, while local government has been active in incorporating age-friendly planning principles throughout Victoria's municipalities, there has been little in the way of common criteria about what age-friendly communities in Victoria should look like.

Age-friendly planning in Victoria also intersects with a number of other planning frameworks, such as strategies to meet the national disability standards and planning for healthy environments. As identified in Chapter 1, the number of people living with disabilities is projected to increase, making age-friendly planning that caters for diverse abilities increasingly important.

The Committee considered that a statewide strategy to integrate age-friendly approaches to transport, housing, outdoor spaces and buildings is needed to build on Victoria's progress.

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RECOMMENDATION 7.1:
The Committee recommends that, in the context of a statewide strategy for older people, the Victorian Government develops and implements an action plan to integrate age-friendly approaches to transport, housing, outdoor spaces and buildings.

7.2. Achieving age-friendly transport

The WHO Age-friendly cities guide identifies a range of transport attributes that promote the participation of seniors. It points out that the key to fostering participation is providing affordable, safe and accessible transport. Age-friendly transport enables older people to get to destinations that support their participation, be it work places, homes of friends or relations, activity venues, or public spaces. As noted in the guide:

Transportation services and infrastructures must always be linked to opportunities for social, civic and economic participation, as well as access to essential services. 5

The guide identifies several elements of an age-friendly public transport system. A key component is availability and accessibility of public transport to people with diverse capacities. Safety and driver awareness of the needs of older people were also identified as significant concerns. In addition, age-friendly transport includes transport options that supplement public transport systems, such as taxis and community transport.

7.2.1. Participation and age-friendly transport

The Committee consistently heard that transport is of critical importance to the participation of senior Victorians. 6 Adequate and accessible transport can make the difference between independence and dependence for Victorians of varying ages, but this is particularly the case for older people who may increasingly rely on alternatives to driving.

The Committee observed that for senior Victorians, a loss of mobility associated with limited access to safe transport can contribute to a sense of vulnerability, limit access to services and restrict participation in community activities. 7 As noted by Aged and Community Care Victoria (ACCV), the centralisation of health and community services further increases people’s reliance on transportation and limits the ability of senior Victorians to manage the essentials of life:

Often, the most important transport needs are regular and local, pertaining to weekly trips for shopping and banking. The move from local milk bars and grocery stores to supermarkets within large shopping centres means that ‘milk and bread’

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6 For example, see Submission 45, Taylor, P., p. 1; Transcript of evidence 12, Elder Rights Advocacy, Melbourne, 9 September 2011, p. 4; Submission 12, Stacey, H.L., p. 1; Transcript of evidence 22, Professor Wells, Y. & Professor Warburton, J., Australian Institute for Primary Care & Ageing – La Trobe University, Melbourne, 5 October 2011, p. 5; Transcript of evidence 48, City of Bendigo, Bendigo, 18 November 2011, p. 3.
7 Submission 18, Women’s Health Victoria, p. 3; Submission 65, Australian Greek Welfare Society, p. 8; Submission 85, Federation of Community Legal Centres Victoria, p. 3.
shopping are more difficult for older people who do not drive. Accessing health care appointments during the day is also difficult when family or loved ones work, and workplace pressures make it difficult to take temporary leave from work. 

This was also emphasised by the Peninsula Advisory Committee for Elders (PACE), who stated that transport is essential to maintain independence and continuing connections with friends, family and community. 

Research conducted by the Royal Automobile Club of Victoria (RACV) in 2009 showed that the inability of older people to drive can have a significant effect on their wellbeing. The report states that ‘many older people who need to stop driving are unable to take many of the trips they previously took as a driver, and subsequently miss out on important social interactions.’

The following findings from the RACV’s survey of older people conducted as part of the research demonstrate the importance of public transport to the participation of senior Victorians:

- As many as 50 per cent of older non drivers frequently forego social trips like visiting family and friends and attending social events due to a lack of transport.
- Almost one third also reported having difficulties in getting to medical appointments and one in five had difficulty getting to the corner store.
- The most commonly used forms of alternative transport for older non-drivers were taxis and mobility scooters.
- Buses were the most commonly available form of transport, but many older people reported experiencing difficulties when using them.

As illustrated in Figure 7.1, RACV’s research indicated that public transport, especially buses and trains, were under-utilised by those over the age of 65. Older people also told RACV that buses were the most difficult mode of transport to use. The report states that:

The most common problem with buses and trams was boarding and alighting [from] the vehicle … Further, getting a scooter or wheelchair aboard the vehicle was also problematic. In comparison, difficulties associated with using trains was due to the location of the station, with 24 per cent of respondents experiencing difficulty walking to and from the station and one fifth … complaining that the station was too far away.'

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8 Submission 80, Aged and Community Care Victoria, p. 7.
9 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 2.
Figure 7.1: Local transport: awareness* and usage#

<table>
<thead>
<tr>
<th>Transport Option</th>
<th>Aware</th>
<th>Usage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bus</td>
<td>76%</td>
<td></td>
</tr>
<tr>
<td>Taxi</td>
<td>54%</td>
<td>42%</td>
</tr>
<tr>
<td>Train</td>
<td>43%</td>
<td>19%</td>
</tr>
<tr>
<td>Electric Mobility Scooter</td>
<td>17%</td>
<td>13%</td>
</tr>
<tr>
<td>Tram</td>
<td>13%</td>
<td>3%</td>
</tr>
<tr>
<td>Lifts from Family/Friends</td>
<td>22%</td>
<td>18%</td>
</tr>
<tr>
<td>Community (Council) Transport</td>
<td>3%</td>
<td>1%</td>
</tr>
<tr>
<td>A frame or stick for walking</td>
<td></td>
<td>18%</td>
</tr>
<tr>
<td>Wheelchair</td>
<td></td>
<td>8%</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>5%</td>
</tr>
<tr>
<td>Do not know/not aware of any</td>
<td>1%</td>
<td>11%</td>
</tr>
</tbody>
</table>

* Awareness was measured by asking ‘can you tell me what transport options you are aware of in your local area.’

# Usage was measured by asking the question ‘can you tell me do you currently use transport available in the area.’


The RACV research also showed that reliance on lifts from family and friends had reduced significantly between 2002 and 2008, from 85 per cent to just 18 per cent. Although RACV notes that there was a change in the data collection methods used between the two surveys, the research does suggest the shift could reflect changing demographics, ‘with families and adult children being less available to drive older relatives due to work or other commitments or living further away from them geographically.’

Some of the tasks that older people surveyed by RACV found difficult to complete without driving are shown in Table 7.1:

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Table 7.1: Difficulty of older non-drivers completing tasks without driving: Comparing 2002 and 2008

<table>
<thead>
<tr>
<th>Task</th>
<th>Don’t do (%)</th>
<th>Hard to undertake task (%)</th>
<th>Don’t do (%)</th>
<th>Hard to undertake task (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visit friends</td>
<td>17</td>
<td>50</td>
<td>20</td>
<td>48</td>
</tr>
<tr>
<td>Go to the corner store</td>
<td>9</td>
<td>30</td>
<td>18</td>
<td>20</td>
</tr>
<tr>
<td>Visit the doctor</td>
<td>5</td>
<td>31</td>
<td>5</td>
<td>29</td>
</tr>
<tr>
<td>Visit family</td>
<td>15</td>
<td>57</td>
<td>25</td>
<td>51</td>
</tr>
<tr>
<td>Go to the pub/entertainment venues</td>
<td>60</td>
<td>19</td>
<td>41</td>
<td>29</td>
</tr>
<tr>
<td>Go to special events</td>
<td>12</td>
<td>44</td>
<td>17</td>
<td>49</td>
</tr>
<tr>
<td>Go to shopping for groceries</td>
<td>11</td>
<td>35</td>
<td>12</td>
<td>29</td>
</tr>
<tr>
<td>Shopping for non-grocery items</td>
<td>13</td>
<td>35</td>
<td>9</td>
<td>48</td>
</tr>
<tr>
<td>Go to clubs and societies</td>
<td>37</td>
<td>18</td>
<td>35</td>
<td>27</td>
</tr>
<tr>
<td>Do volunteer work</td>
<td>84</td>
<td>7</td>
<td>66</td>
<td>17</td>
</tr>
<tr>
<td>Take part in hobbies</td>
<td>47</td>
<td>16</td>
<td>35</td>
<td>32</td>
</tr>
<tr>
<td>Go to church</td>
<td>56</td>
<td>15</td>
<td>50</td>
<td>19</td>
</tr>
<tr>
<td>Go on holidays</td>
<td>31</td>
<td>32</td>
<td>31</td>
<td>47</td>
</tr>
</tbody>
</table>


7.2.2. Public transport accessibility

Throughout the Inquiry, the Committee heard about the importance of ensuring public transport accessibility to enable the participation of senior Victorians. Victoria’s public transport systems and infrastructure were designed at a time when the ageing of the population was not a consideration for planners and developers.

A recent report by the Victorian Auditor-General’s Office (VAGO) suggests that progress is being made in Victoria to improve public transport accessibility. The Committee heard, however, that more needs to be done to make transport more accessible for Victoria’s diverse populations. For example, the Victorian Equal Opportunity and Human Rights Commission (VEOHR)C told the Committee that:

Despite the positive direction of transport policy, the inaccessibility of public transport remains a key area of concern, and complaints, to the Commission.

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The RACV’s 2009 research (referred to above) noted that easier access to public transport was the most commonly suggested improvement amongst non-drivers with a disability. This is illustrated in Figure 7.2.

Figure 7.2: Suggestions for improvement to transport

<table>
<thead>
<tr>
<th>Suggestion</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>More buses / trains / trams with easy access for wheelchairs / scooters</td>
<td>32%</td>
</tr>
<tr>
<td>More frequent buses / trains / trams / improvements to timetables</td>
<td>12%</td>
</tr>
<tr>
<td>Better training for taxi service drivers</td>
<td>12%</td>
</tr>
<tr>
<td>Provide more disabled taxis / taxis with room for scooters / ramps</td>
<td>14%</td>
</tr>
<tr>
<td>Increased subsidies / cheaper taxis / scooters etc</td>
<td>14%</td>
</tr>
<tr>
<td>More local buses / trains / trams</td>
<td>6%</td>
</tr>
<tr>
<td>Buses / trains / trams to have increased capacity / space for wheelchairs / scooters</td>
<td>10%</td>
</tr>
<tr>
<td>Taxis / maxi cabs / disabled taxis to turn up on time</td>
<td>6%</td>
</tr>
<tr>
<td>Provide more super stops for trams</td>
<td>10%</td>
</tr>
<tr>
<td>Improve footpath conditions for scooters</td>
<td>2%</td>
</tr>
<tr>
<td>No / no suggestions I don’t know</td>
<td>26%</td>
</tr>
</tbody>
</table>


In addition, the Committee identified that transport accessibility concerns the safety aspects of public transport, particularly as older people can be more susceptible to injury from falls. The WHO Age-friendly cities guide, for example, states that older people are afraid of injury from falls because drivers (particularly bus drivers) do not wait for older people to be seated before driving off. 17

As indicated in Chapter 1, the ageing of the population is projected to result in increased levels of disability. Initiatives to address accessibility of public transport for people with disabilities also benefits senior Victorians of varying abilities and diverse needs.

Much of the progress in transport accessibility has been driven by an effort to meet legal obligations under the Federal Disability Discrimination Act 1992 (Cth) and Disability Standards for Accessible Public Transport 2002 (Cth). VEOHRC noted that while the Disability Standards have aided the progress of making the transport system accessible, more must be done:

The five year review of the Disability Standards for Accessible Public Transport revealed that while the Transport Standards have changed the way that governments, public transport operators and providers think about access to public transport for people with disability, much remains to be done to ensure our transport system is accessible. 18

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In its recent report, *Creating accessible journeys*, the Victorian Council of Social Service (VCOSS) has noted that Victoria is unlikely to meet all of its 2012 targets under the Disability Discrimination Act. VCOSS also suggested that in order to meet the 2017 targets, Victoria needs to move from 55 per cent compliance to 90 per cent compliance, which is a large increase and will require a much larger rate of investment.

In its 2012 report *Public transport performance*, VAGO noted that the Victorian Government has recently changed its approach to transport accessibility. The report states that the Government has moved away from a compliance-based approach that has previously characterised its approach to meeting standards set under the Disability Discrimination Act:

> While recognising the role and importance of compliance, [the Victorian Government] now emphasises improvements to accessibility and achieving the outcome of making public transport useable for as many people as possible.

This reorientation to focus on outcomes aligns with VAGO’s 2009 audit conclusions *Making public transport more accessible for people who face mobility challenges*. The department has more actively engaged with a broad range of stakeholders, including people with a disability, to better understand the barriers to accessibility and to incorporate their views in infrastructure and service designs.

In the report, VAGO has urged the Victorian Government to progress plans to monitor performance against accessibility, sustainability and coordination objectives, and develop rigorous plans to better manage these in the future.

**FINDING:**

That Victoria’s public transport systems and infrastructure were designed at a time when population ageing was not a consideration for planners and developers. Older people often find public transport unsafe and inaccessible.

### 7.2.3. What is needed to improve the accessibility of public transport?

The Committee acknowledges that Victoria has taken significant steps over the past two decades to improve the accessibility of the public transport system. The Committee considered that as part of these improvements, some key aspects of public transport need to be addressed in order to meet the diverse needs of Victoria’s seniors. It determined that there is a need for:

- interconnected services
- training for public transport drivers
- increased transport options for senior Victorians living in rural and regional areas

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• increased services to supplement the public transport system, including community transport and taxis.

The Committee considers that the recently introduced Transport Integration Act 2010 (Vic) has significant potential to address these areas. The Transport Integration Act aims to address connections across Victoria’s transportation systems. The Act requires all Victorian transport agencies (including the new Public Transport Development Authority, VicRoads, VicTrack, V/Line and the Linking Melbourne Authority) to work together towards the common goal of an integrated and sustainable transport system. It also requires land use agencies (including the Department of Planning and Community Development, municipal councils, the Growth Areas Authority and Parks Victoria) to take account of the new Act when making decisions that affect the transport system. 23

Establishing the Public Transport Development Authority was a key policy commitment of the current government to improve the coordination of the administration of Victoria’s public transport. Legislation to establish the Authority came into effect on 15 November 2011. The Authority replaces the Director of Public Transport, Metlink and the Transport Ticketing authority, and its responsibilities include the coordination and management of the public transport system, audit and reporting on public transport assets, extension of the public transport network and promotion of public transport. 24

The Committee heard that legislation to reform Victoria’s transport system has been favourably received. For example, the VEOHRC approved of the Transport Integration Act being guided by decision making principles that include ‘equity, stakeholder engagement and community participation’ and considered this to be a positive step in developing a transport system that addresses the needs of senior Victorians. 25

The Committee notes, however, that no specific mechanism exists under the legislation to include senior Victorians in stakeholder engagement and community participation processes. A strategy for including older people in decision making about transport issues is critical to ensure that the transport needs of senior Victorians are met.

The Committee also identified that there are a number of recent initiatives to address public transport, including upgrades and extensions to improve regional transport. 26 As discussed later in this section, the Victorian Government also initiated an Inquiry to address taxi accessibility and to make improvements to the taxi industry. Recommendations to improve accessibility of taxis have been made in the recently released draft report from the Taxi Industry Inquiry conducted by Professor Allan Fels AO, Dean of the Australia and New Zealand School of Government.

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24 Transport Integration Act 2010 (Vic), s79AE.
RECOMMENDATION 7.2:

The Committee recommends that the Victorian Government works with the Public Transport Development Authority and consults with older people to develop a strategy to:

- include older people in decision making about transport issues
- assess improvements to safety
- raise awareness of older people’s public transport needs, particularly among public transport staff.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner works with the Public Transport Development Authority to develop this strategy.

Interconnected services

As noted above, Victoria has been taking steps to improve transport accessibility and compliance with disability standards since 2002. However, participants in the Inquiry suggested that there needs to be a greater emphasis on ensuring accessibility across whole routes for people with diverse needs. For example, in the context of tram journeys, VEOHRC noted:

… while there are more accessible trams, the public transport system does not yet facilitate accessible journeys across most routes by coordinating provision of an accessible tram with accessible tram stops. 27

As already mentioned, the recent VAGO report on public transport found that the Victorian Government has made significant progress in moving from a compliance focused model to an emphasis on achieving actual accessibility of the transport network. Furthermore, the Committee is aware that the Government is in the process of completing a series of independent audits of compliance with the disability standards for the public transport system in Victoria. As noted above, this also benefits senior Victorians of varying abilities and diverse needs. 28

The Committee heard, however, that there is a significant way to go to fully achieve actual transport accessibility for senior Victorians.

The Committee notes that accessibility cannot be fully achieved without the ability of people to successfully connect to and between different modes of transport, and successfully navigate between transport and final destinations. The importance of interconnectivity between transport services has been noted by VAGO in its 2012 report *Public transport performance*. 29

As noted on the Victorian Local Governance Association’s online resource, *Thinking transport*:

Interconnection between transport modes is a key factor of good transport networks. Being able to change easily between rail, bus, car and tram ensures ease of access for all users, and decreases the barriers faced by new parents, young people, older people and others of limited mobility. 30

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In addition, transport needs to link with the broader environment. For example, it is important for people to be able to navigate between walkways and transport stops, to be able to alight safely from transport and to successfully reach a destination and gain access.  

→ **RECOMMENDATION 7.3:**

The Committee recommends that the Victorian Government requests the Public Transport Development Authority to work in collaboration with relevant government departments and local governments to:

- monitor improvements to transport accessibility
- ensure that interconnected transport services are provided.

If the Government appoints a Commissioner for Older People in accordance with Recommendation 3.6, the Committee recommends that the Government requests the Commissioner leads the initiative to work with the Public Transport Development Authority.

**Training for public transport drivers and customer service employees**

The Committee was informed that awareness of the needs of senior Victorians by public transport customer service staff and drivers is variable. The importance of drivers being educated to be aware of the needs of older people was noted in the WHO *Age-friendly cities* guide. As mentioned earlier, the guide identifies concerns of older people with drivers (particularly bus drivers) not waiting for them to be seated before driving off.

**Expansion of transport options for senior Victorians living in rural and regional areas**

The Committee acknowledges that there are significant challenges to achieving transport solutions for senior Victorians living in rural and regional areas. Participants talked about the ‘tyranny of distance’ and the lack of services in general, but also about a lack of consistency in linkages to the transport system. The Committee heard that these transportation challenges contribute to isolation and loneliness of senior Victorians in rural and regional communities. As Scharf and Bartlam highlighted in their 2008 study on social exclusion in rural communities:

> … rural communities may not be such pleasant places in which to age for people who lack transport or who have reduced mobility. The sense of being confined to one’s place of residence was especially pronounced in some rural settlements, where the absence or poor maintenance of footpaths, the lack of street lighting, and fast moving traffic were reported.

31 For example, see Submission 92, Visionary Design Development, p. 3.
VCROSS provided the following example that demonstrates a lack of integration between transport and the built environment:

In a rural area where there is not a curb, the construction of a small concrete space that is technically a curb for that particular space is technically an accessible bus stop, even if it is surrounded by a sea of mud. If the person can get off the bus onto that concrete island, then it is considered accessible, even if they cannot then move onto a footpath or move away from the bus stop. Of course in every practical consideration it is not accessible. 34

By working in partnership with local services and business, however, innovative transport solutions may become evident. For example, some participants advocated for the use of school buses ordinarily idle throughout the day to transport older people. 35 Some communities in Victoria, particularly rural communities, have adopted this practice as part of the Transport connections program, however a 2011 audit of this program by VAGO suggests that there is no consistent approach. 36

The Committee also emphasises that transport must be considered as part of a broader perspective on issues faced by senior Victorians living in rural and regional Victoria. Considering the practicalities of each location is important and may mean that a range of solutions could be considered. The Association of Independent Retirees Victoria Division highlighted that:

People living in rural and regional areas have inadequate public transport, necessary for medical, dental, legal, financial appointments. Most towns have a community car with a driver but this is often insufficient as appointments occur in a random way and may require lengthy trips, e.g. all day to travel to and from. Therefore circumstances may make it more economical to bring the service to the town on a day or half day basis. 37

The Committee noted that the 2012–13 Victorian State Budget included initiatives to extend and improve regional transport, announcing funding to improve and extend country roads and rail networks, including the establishment of a rail link to Avalon airport and a plan to return passenger rail connections between Geelong, Ballarat and Bendigo. The measures are aimed at increasing public transport connections for people living in Ballarat, Bendigo, Castlemaine, Geelong and Maryborough. 38 Improvements to station infrastructure facilities and country level crossings are also planned.

Expansion of services to supplement the public transport system

The Committee identified that services supplementary to the public transport system are needed in order to enable the participation of senior Victorians. In particular, the Committee heard evidence about the important role of community

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34 For example, see Transcript of evidence 3, Victorian Council of Social Service, Melbourne, 6 September 2011, p. 3.
35 Submission 16, Raymond, O., p. 1.
37 Submission 61, Association of Independent Retirees - Victoria Division.
transport and taxis. Inquiry participants also told the Committee that scooters are increasingly being used by senior Victorians and have the potential to link people with public transport.

The Committee considered that alternatives to public transport should be viewed as part of a whole of government approach to coordination and management of the public transport system led by the Department of Transport, working closely with the Public Transport Development Authority.

**Community transport**

Community transport is available in many communities throughout Victoria to supplement public transport services. Participants told the Committee that older people regard this service as very beneficial, particularly in rural and regional areas. Research suggests, however, that demand far exceeds supply.

Community transport is provided in part by local government and in part by the not-for-profit community and health sectors. Services are operated by a combination of paid and volunteer staff. A range of services may be offered including door to door transportation, fixed route services and self drive bus hire for community groups.

Research conducted by the Municipal Association of Victoria (MAV) in 2008 showed that the vast majority of Victorian councils provide community transport, with over $21 million per annum spent by local government on vehicles, staff, coordination, reimbursement of volunteers and support to other community transport organisations. Nevertheless, the research found that the level of services provided does not adequately meet the demand and that some smaller rural councils are unable to provide these much needed services due to a lack of financial capacity.

The Committee heard that there is significant demand for community transport to be provided through the *Home and community care* (HACC) program. The MAV research on community transport found that the majority of councils use HACC funding to provide one-on-one transport assistance to clients.

The Committee was informed, however, that there are difficulties with this model. The MAV report revealed that the extent and uniformity of transport provision through HACC is difficult to assess as community transport is not a funded activity type in the Victorian HACC program. Transport expenditure is categorised as a component of other program activities or capital allocations.

Although a solution could be to develop delivery of community transport through HACC, the Committee heard there are complex considerations associated with this approach, including driver and vehicle safety and reimbursement of costs:

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39 For example, see *Transcript of evidence 35*, Women’s Health Victoria, Melbourne, 21 October 2011, p. 6; *Transcript of evidence 45*, Diversitat, Geelong, 4 November 2011, p. 5; *Transcript of evidence 46*, Country Women’s Association, Geelong, 4 November 2011, p. 10.


There are both risk management processes and cost issues in asking home care workers and volunteers to use their own vehicles to transport clients, not adequately covered in HACC unit prices. Processes are required to adequately assess and ensure the driver’s capability and the safe condition of their vehicles. Reimbursement of petrol costs and/or per kilometre allowances for the distances covered are generally not covered adequately in the average unit costs for an hour of home care. Thus although the transport component of HACC services is broadly recognised, it is not included adequately in funding or reporting, and thus remains at the less visible end of community care. 43

The Committee heard about innovative approaches to community transport that could be explored by the Victorian Government. An example is the ITNAmerica program which operates throughout the United States. This program allows seniors to trade their cars to pay for transportation and enables volunteer drivers to store transportation credits for their own future transportation needs, or the needs of their parents. This program, for example, allows travel credits to be earned by a volunteer in one state of the United States and redeemed by their parent in another state. 44

**FINDINGS:**

That a greater range of reliable community transport options for senior Victorians is needed to supplement the public transport system.

That a regional approach to community transport may assist with transport linkages across Victoria.

→ **RECOMMENDATION 7.4:**

The Committee recommends that the Victorian Government:

- conducts a review of community transport models in Victoria to determine a strategic regional approach that encourages community transport availability across council boundaries
- undertakes an audit to identify gaps in the provision of community transport
- promotes innovative solutions to community transport.

**Taxis**

Some participants noted the use of taxis as a complementary service to public transport. RACV figures indicate that this is a major form of transport for older non-drivers after lifts from family and friends. 45 The VEOHRC commented that:

> Given the inaccessibility of much public transport, taxis play a vital role in enabling older people with a disability to participate in activities that the rest of the community takes for granted, such as getting to work and attending medical appointments. 46

The VEOHRC noted in its 2010 report *Time to Respond – three years on: Realising equality for people with a disability utilising taxi services* that the Victorian Government has made progress in the last few years with regard to taxi accessibility. 47

The Committee notes that in May 2012, further reform was proposed by the independent inquiry conducted by Professor Allan Fels into the Victorian taxi and hire care industry. 48 In its draft report, *Customers first: Service, safety, choice*, the Taxi Industry Inquiry acknowledged the importance of taxis as an alternative to public transport for older people and those with impaired vision and mobility. 49

The Taxi Industry Inquiry identified five problems with the accessibility of taxis:

- Long or unpredictable wait times experienced by people who rely on wheelchair accessible taxis and complaints that the taxi booking system is unreliable.
- Poor driver knowledge and problems assisting or communicating with mobility disadvantaged people.
- Taxi drivers refusing to pick up people who they suspect will only require a short trip.
- Taxi travel is too expensive for some, even with the Multi Purpose Taxi Program subsidy.
- Most taxi vehicles are uncomfortable, inaccessible and inflexible. 50

Draft recommendations made by the Taxi Industry Inquiry that are particularly relevant to senior Victorians include:

- the development of a central booking service for easier access to specialised services
- extension of the Multi-Purpose Taxi Program and fully subsidised travel on public transport for registered members
- changes to licence conditions for wheelchair accessible taxis. 51

Recommendations were also made to improve training for taxi drivers. However, these do not refer specifically to improving skills in dealing with older passengers. 52

**FINDING:**

That the Taxi Industry Inquiry made recommendations to improve training for taxi drivers, however these recommendations did not refer specifically to improving skills in dealing with older passengers.
Chapter Seven: Achieving age-friendly environments

RECOMMENDATION 7.5:

The Committee recommends that, as part of the training for taxi drivers recommended by the Taxi Industry Inquiry, the Government includes training to assist taxi drivers to better respond to the needs of senior Victorians.

Scooters

The Committee heard that senior Victorians are increasingly relying on motorised aids such as scooters to enable their mobility, and that these have significant potential for helping senior Victorians navigate between home and transport and between transport and final destinations. The Physical Disability Council pointed out that for some older people, access to a scooter can be their only access to the local community. 53

Scooters raise specific issues for creating age-friendly communities, such as the need for level footpaths, parking and wide entry ways. The Committee heard that many Victorian municipalities have taken steps to accommodate senior Victorians who use scooters. For example, the scooter RECHARGE Scheme operates in 500 locations across Victoria. This scheme is about encouraging local businesses and organisations to provide a power point to allow people to recharge their scooters or electric wheelchairs. It was first developed in the Shire of Nillumbik and a proposal to expand the scheme nationally is currently being pursued. 54

Some participants called for scooter regulation, on the one hand to assist senior Victorians with purchasing models that are more likely to provide accessibility, and on the other hand to ensure safety and sound insurance practices. PACE outlined some of these issues in their submission:

One result of old policies affecting housing location is the increasing dependence on, and number of users of, motorised scooters and golf buggies as mobility aids. There are significant issues with these, aside from how they are sold or decisions regarding a suitable model. Use of motorised scooters or golf buggies in retirement villages which depend on gazetted streets where road rules apply is an issue, especially should there be an accident and injuries incurred. We also have no real idea of the number of motorised scooters in our community, nor for example is there any means to convey safety information. Queensland currently has a system of compulsory but free annual registration of motorised scooters, and RACQ provides insurance at nominal cost. There are a number of significant benefits that could accrue from adopting such a scheme. We also suggest assessments be made by Occupational Therapists to ensure the most suitable model is recommended for purchase. 55

RECOMMENDATION 7.6:

The Committee recommends that the Victorian Government identifies approaches to ensure safety and accessibility associated with scooter use as a mobility aid.

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53 Submission 47, Physical Disability Council Victoria, p. 5.
55 Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 2.
Opportunities for Participation by Victorian Seniors

7.3. **Achieving age-friendly housing**

The Committee identified that achieving age-friendly housing is not about prescribing particular housing types for senior Victorians. Rather, age-friendly housing ensures a range of appropriate housing is available that meets the diverse needs of older people and promotes their participation, as emphasised by the Productivity Commission in its recent report *Inquiry into caring for older Australians.*

The WHO *Age-friendly cities guide* identifies the following attributes of age-friendly housing:

- affordability
- proximity and access to essential services and amenities
- housing design that supports older people to live comfortably at home
- ability to modify dwellings to enable older people to remain living comfortably at home
- ability of older people to maintain the home
- connection to family and community
- availability of housing options
- location in a safe and secure living environment.

7.3.1. **Participation and age-friendly housing**

Housing is a critical factor in enabling the participation of senior Victorians. Wesley Mission Victoria pointed to the importance of housing in its submission to the Inquiry:

> Secure accommodation provides a sense of safety and belonging to a neighbourhood and a community and is an essential component of an older person’s quality of life and their ability to participate in a way that is meaningful to them.

While recognising that housing in general is important for senior Victorians, the Committee has focused on age-friendly housing specifically. That is, housing that meets the needs of older people and supports them to live in the community for as long as possible.

Age-friendly housing holds many benefits for senior Victorians and for society. One key benefit the Committee heard is that age-friendly housing can assist in avoiding premature entry into residential aged care. For example, COTA referred to research suggesting the provision of appropriate and supported housing can delay older people’s entry into high level residential aged care by an up to six years. The Committee heard, however, that some senior Victorians continue

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58 *Submission 81*, Wesley Mission Victoria, p. 4.
59 *Submission 74*, Council on the Ageing (COTA) Victoria, p. 25., however, the Committee notes that research suggests that provision of care in the home has mixed results, depending on the nature of the intervention and the type of client (Wainwright, T. (2003) *Home care: Thoughts from abroad.* Christchurch, New Zealand Health Technology Assessment).
to live in accommodation that is inappropriate or does not meet their needs and aspirations.

The Committee found that age-friendly housing can be achieved through supporting people to age in place (including continuing living in their own home and community) and ensuring that housing is available that caters to the changing needs of older people.

### 7.3.2. Demographics

The Committee heard about changing housing trends that are likely to significantly hamper opportunities for the participation of senior Victorians. Projections suggest that the current high rates of home ownership among senior Victorians will gradually decline and that this will have increasing implications for access to affordable age-friendly housing by subsequent generations of senior Victorians.

#### Changing patterns of home ownership

The 2011 National Housing Supply Council’s (NHSC) second State of supply report identified that the ageing of the population will have significant implications for the housing sector. The report made the following projections:

Underlying demand for private rental from older households is projected to rise from 146,200 in 2008 to 321,400 by 2028, and public rental demand is projected to rise from 86,500 in 2008 to 189,800 in 2028.

Underlying demand in the dominant owner occupier sector is projected to grow from 1.3 to 2.6 million older households over the projection period.

Lone person households are projected to increase from 47.6 per cent of all older households in 2008 to 51.7 per cent in 2028. As lone person older households grow in numbers, they may increasingly seek smaller dwellings.

While older Australians live in a diverse range of housing types, they tend to have relatively high rates of home ownership. As described in the NHSC’s 2011 report:

In 2007-08, home ownership among older households [reference person aged 65 or over] was over 80 per cent while it was under 50 per cent for households with the reference person aged 25-34 years.

Compared with other households, older households had the highest proportion of home owners without a mortgage, the lowest proportion of private renters and the highest proportion of public renters.

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61 ‘Household reference person’ is defined as the household member whose relationship with all other members of the household identifies the composition of the household in a way that is relevant to family formation. Department of Sustainability Environment Water Population and Communities (2010) National Housing Supply Council: Key findings of the 2011 State of supply report, p. 137.

The report also notes that rates of home ownership among younger people (particularly under 35 years of age) are declining, and suggests that this trend is likely to have a flow on effect for home ownership in later life for successive generations. As a result, significant increases in older people living in the private or social rented sector are expected over the next 20 years.

These observations were supported by evidence heard by the Committee, as illustrated by the following comment from Benetas:

Home ownership by older people is expected to decrease in future years, particularly as many of the so called Baby Boomer generation have been unable to save enough to purchase a house. In particular this applies to many single women who have not had access to superannuation, until relatively recently, and have often relied upon poorly paid work.  

**Trends in residential aged care**

The Committee heard that despite widespread assumptions to the contrary, only a relatively small percentage of older people live in residential aged care. In its 2009 report, the Australian Institute of Health and Welfare (AIHW) revealed that the majority of older people live in private dwellings:

Despite a common myth that most older people live in some type of cared accommodation, the majority of older Australians (in 2006 92%) lived in private dwellings as members of family, group or lone person households. Only 8% were usual residents in non private dwellings, which include hotels, motels, guest houses, and cared accommodation such as hospitals, aged care homes and supported accommodation offered by some retirement villages. Although the proportion of older people living in non private dwellings increased with age, most people in each age group – 65-74 years, 75-84 years and 85 years and over – lived in private dwellings.  

The Committee heard that women are more likely to access residential aged care services during their life. The 2008 Department of Health and Ageing report *Ageing and aged care in Australia* identified that in 2007, 71.2 per cent of residential aged care residents were women. Women’s Health Victoria told the Committee that this is due to women living longer and having less access to informal care.  

Another trend that has informed this Inquiry is an increasing tendency for older people to choose to ‘age in place’ rather than to spend long periods in specialist aged accommodation. The Committee considered that this trend is likely to give rise to changing patterns of care for senior Victorians. As noted by researchers Beer, Faulkner and colleagues in their study on housing transitions throughout the life course:

While staying within the community presents new opportunities for successful ageing, it also brings with it previously unknown challenges as older persons may

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63 Submission 20, Benetas, p. 4.
66 Submission 18, Women’s Health Victoria.
enter and leave specialised accommodation several times and may need to draw upon – and pay for – a range of services to maintain them in their home. 68

7.3.3. Ageing in place

Based on the evidence and research, the Committee concluded that ageing in place is an important aspect of ensuring age-friendly housing and enabling older people to participate in the community. In a report by the Australian Housing and Urban Research Institute (AHURI) in 2011, the researchers stated that:

Ageing in place is accepted as being both in the interests of older people’s independence, health and wellbeing as well as reducing the economic burden on government of the ageing society through the provision of institutionalised aged care. 69

For the purposes of this report, based on research and evidence received, the Committee adopted a broad definition of ‘ageing in place’ that goes beyond attachment to a particular dwelling and emphasises support for older people to maintain functional independence and a connection to community. 70

Notably, ‘ageing in place’ is a term that is used in different ways in policy and service settings. The term has gained popularity over the last 20 years. Generally, it is used to refer to programs that support people to remain in their own home as they age. As outlined in Box 7.1, it has also been used in aged care reforms allowing residents to stay in low care residential settings and, more recently, with respect to retirement villages. In Australian aged care policy, ‘ageing in place’ tends to emphasise the attachment of older people to a particular dwelling. The consequence is that policy rarely addresses how older people can be supported to stay connected to the broader community. 71

Researchers have increasingly recognised that remaining connected to the locality and community better reflects older people’s own view of what ‘ageing in place’ means. 72 For example, in 2005 AHURI research highlighted older people’s changing attitudes to place. This research showed that although older people want to age in place, their attachment was not necessarily to the home, but rather to the local area. 73 Box 7.1 provides an overview of ageing in place in Australian

68 Beer, Faulkner, Paris et al. (2011) Housing transitions through the life course: Aspirations, needs and policy, p. 18.
70 This definition is supported by the view taken by the Advisory Panel on the Economic Potential of Senior Australians, which noted that ageing in place should support older people to age on their own terms and encourage functional independence and community connection and provide an alternative to residential aged care. Advisory Panel on the Economic Potential of Senior Australians (2011) Realising the economic potential of senior Australians: Enabling opportunity. Canberra, Commonwealth of Australia, p. 20.
policy. Furthermore, the ‘baby boomer’ generation expressed the lowest desire to age in a particular dwelling, which was seen by them as representing ‘immobility and old age’, suggesting that older people’s choices of how and where they live is likely to change significantly over the next 20 years.  

**Box 7.1: Ageing in place – its use in Australian policy**

- In Australia, policy to encourage ageing in place has mainly focused on helping people remain in their own home. Predominantly, this has been addressed by the provision of HACC and Community Aged Care Packages. A growing focus, however, has been on the ability of housing to be modified according to older people’s changing needs, including the desirability of universal housing design (as discussed in Section 7.3.4).
- Ageing in place has also been associated with the 1997 reform of the Australian Government aged care system which allowed residents to stay in a low care service if their dependency increased. However, as noted in a paper by the AIHW in 2002, the uptake in Victoria of ageing in place in residential aged care settings has been relatively weak, with relatively few services offering low and high care in the one facility.  
- The Retirement Villages – Ageing in Place initiative undertaken by the Australian Government in 2006 encouraged retirement villages to apply for allocation of Community Aged Care Package places and the related provider status.

Source: Family and Community Development Committee.

The Committee identified that the ability of older people to exercise choice in how and where they prefer to live in later life is fundamental for supporting senior Victorians’ participation. Drawing on a growing body of evidence about the importance of choice in ageing in place, the Committee considers that older people can be more effectively supported to age in place in a range of settings, whether they choose to remain in their own home, to access affordable housing options, to opt for formal aged care or pursue other housing solutions that cater to their changing needs. The recently released Australian Government aged care package also has a strong emphasis on ageing in place, with increased funding for services that support people to do so.

**FINDING:** That seniors largely prefer to ‘age in place’ in their community and, where possible, in their home.

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74 Respondents between 50–59 years of age.
77 Wiles, Leibing, Guberman et al. (2011) The meaning of “ageing in place” to older people, p. 4.
7.3.4. Supporting older people who want to remain in their own home

The Committee identified a range of ways that people can be supported to ‘age in place’ and stay connected with their community, and thereby to continue participating in society. Many participants indicated that older people prefer to stay in their own home as long as possible. Committee evidence and research literature suggest that continuing to live in the home is older people’s overwhelming preference. 79 The Committee heard that housing design, housing modification and external support and assistance are the key factors that enable older people to live in their own home.

Remaining in the home can have a number of benefits that enable participation, including familiarity with the neighbourhood and local services, proximity to friends and family and satisfaction with the current dwelling. 80 In addition, a relatively high proportion of senior Victorians are home owners, and the Committee heard that home ownership is a ‘cornerstone’ for many older people. 81 As well as having an emotional connection to the home, older people can derive significant benefits from home ownership, including security of tenure, a reduction in housing costs over time, autonomy regarding the use or modification of the property and the ability to access funds based on the equity in the home. 82

Supporting older people to stay in their own home can also help avoid the significant difficulties associated with moving, as National Seniors Australia noted:

… if people have been living in the family home for an extended period of time and are well connected within their community, having to move to a different suburb or city as a result of downsizing can be a difficult and frightening prospect with serious implications for people’s ability and willingness to participate in the community. Making new friends and adjusting to different surroundings can be difficult in later life stage and can increase the risk of social exclusion. 83

For many senior Victorians, however, continuing to live in the home poses increasing challenges in later life, particularly for those over the age of 75. In a 2009 report, the National Seniors Australia Productive Ageing Centre identified difficulties with maintenance of housing and health concerns to be in the top five reasons given by older people for moving house. The following reasons featured in the top five for the oldest group (aged 75 and over):

• consideration about where to live for the rest of their life
• upkeep/maintenance difficulties
• garden too big
• decline/change in own/partner’s health

79 For example, see Submission 63, Golden Plains Shire & Women’s Health Grampians, p. 12; Transcript of evidence 48, City of Bendigo, p. 5.
80 Judd, Olsberg, Quinn et al. (2010) Dwelling, land and neighbourhood use by older home owners, p. 18.
81 Transcript of evidence 41, Australian Housing and Urban Research Institute, Melbourne, 24 October 2011, p. 2.
82 Transcript of evidence 41, Australian Housing and Urban Research Institute, p. 2.
83 Submission 70, National Seniors Australia, p. 3.
Opportunities for Participation by Victorian Seniors

- ability to look after self/house. 84

In its submission, COTA noted that a lack of appropriate housing contributes significantly to loss of independence, social isolation and reliance on services. The submission pointed to a number of relevant statistics showing the impact on senior Victorians of inappropriate housing:

- About 860,000 Victorians experience some degree of restriction to the core activities of mobility, self care or communication. This figure is projected to increase by 70,520 over the next 12 months; and with core activity restriction strongly correlated to age, it can be anticipated that this figure will continue to increase significantly.

- Approximately 24 per cent of Australians living in private housing have made modifications to their home to accommodate activity restriction. In 2003, about 79,000 Victorians made modifications to their homes. However available data on modifications and people accessing the Victorian Aids and Equipment Program can not be considered to be a true reflection of the numbers needing home modifications or the extent of modifications needed.

- A study by the Australian Housing and Urban Research Institute (AHURI), found that almost 20 per cent of people over 75 felt that changes to their home, including structural modifications, would make their home easier to live in or increase their independence.

- Work undertaken by the Department of Planning and Community Development estimates that 96 per cent of new homes still lack basic accessibility features. 85

The Committee heard that many of these concerns can be addressed to some degree through home-based care services and age-friendly-housing features, including home modification and universal housing design.

Home and Community Care (HACC)

The Committee heard that the HACC program plays an important role in supporting older people to continue living in their own homes.

The Victorian system is unique in that local government has significant involvement in HACC services compared with other states and territories, where HACC services have traditionally been administered by the state government. The Committee found that Inquiry participants generally favoured retaining the current Victorian model, despite recent changes to HACC funding in other states. 86 During its study tour to the UK and the Netherlands, the Committee heard that a similar, locally focused approach adopted in Wales has been successful.

In Victoria, the HACC program funds approximately 500 agencies to provide services in the community and in people’s homes for older people (and their carers) who wish to continue living at home and need some support in managing daily tasks. 87 Agencies tend to be locally based and include councils, hospitals, community health centres and specialist agencies. Through the HACC program,

85 Submission 74, Council on the Ageing (COTA) Victoria, p. 24. See also Transcript of evidence 48, City of Bendigo, p. 2.
86 For example, see Transcript of evidence 48, City of Bendigo, p. 9.
agencies provide planned activity programs, respite services and volunteer care, transport and support services. 88

In 2008, Victoria adopted an Active Service Model within HACC. This approach uses Home Assessments and a strength-based partnership approach across health and community services to develop individual solutions to optimise the health and wellbeing of older people. The HACC system has also been revised to better recognise diversity and use culturally acceptable practice. 89

The Committee heard that HACC services are valued by older people. For example, Banyule City Council consulted with older people in the municipality, and noted that older people:

Greatly appreciate the HACC services they receive and look to them continuing and expanding, in particular they identify home maintenance as an increasing issue as well as gardening. 90

Research shows that HACC services have been successful in improving the standard of living of older people wishing to remain in the home and to delay admission to long-term care. 91

Participants in the Inquiry also told the Committee that HACC could be used to create pathways for people experiencing isolation or at risk of homelessness. For example, the Housing for the Aged Action Group commented that HACC providers generally have little knowledge of housing services that can assist a client in need. The organisation stated that ‘the home care worker is in a critical position to identify if their client has a housing problem but currently is not given the information that could enable them to help their client if they have a housing problem.’ 92

**Universal housing design**

The Committee heard that housing design can support participation by allowing older people with mobility and other support needs to remain in their own home and therefore to stay connected to their community and networks. Several Inquiry participants recommended the need to introduce standards of universal housing design for all new housing as a key factor in ensuring older people can remain independent in their own homes for as long as possible. 93

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88 HDG Consulting Group in conjunction with the Department of Human Services, Aged Care Branch (2007) Consultation to inform the scope of the HACC social support and respite review. Victorian Department of Human Services, p. 8.

89 Haralambous, B., Moore, K., & Tate, R. (2007) HACC social support for people from culturally and linguistically diverse (CALD) backgrounds. National Ageing Research Institute, p. vi. See also Transcript of evidence 40, Uniting Aged Care, Melbourne, 21 October 2011, p. 5; Transcript of evidence 22, Professor Wells & Professor Warburton, p. 9. For examples of the experiences of people from culturally and linguistically diverse backgrounds with respect to support services, see Submission 14, Flemington Chinese Golden Age, p. 3.

90 Submission 41, Banyule City Council, p. 4. See also Submission 63, Golden Plains Shire & Women’s Health Grampians, p. 11.


92 Submission 69, Housing for the Aged Action Group, p. 17.

93 For example, see Submission 71, Municipal Association of Victoria (MAV), p. 9; Submission 74, Council on the Ageing (COTA) Victoria, p. 26; Transcript of evidence 3, Victorian Council of Social Service, p. 4.
The Committee heard that in addition to benefits for older people, there are also economic benefits of universal housing design. The following statement from the Council to Homeless Persons highlights the economic cost of poorly designed housing:

Poorly designed housing results in significant costs associated with increased hospital admissions, home care, early aged care services and home modifications. Increasing universal housing stock in Victoria could save the state Government over $70 million each year because of savings based solely on the ageing population. 94

In its Report into caring for older Australians, the Productivity Commission reached a cautious conclusion regarding the cost of universal housing design. It stated that:

In assessing the benefits compared to the costs, these developments suggest that, from the perspective of older Australians alone, mandatory application of universal design standards for all new housing is not warranted given the community wide costs. Nevertheless, voluntary adoption should continue to be encouraged. 95

Universal housing design is a national initiative promoted through the National Dialogue on Universal Housing Design, which describes universal housing as a policy aimed at encouraging Australian homes to be designed to meet the changing needs of occupants across their lifetime. 96 According to the Strategic Plan released in 2010 by the National Dialogue on Universal Housing Design, a universally designed home should be:

- easy to enter
- easy to move in and around
- capable of easy and cost effective adaptation
- designed to anticipate and respond to the changing needs of home occupants. 97

The Strategic Plan established a target that all new homes would be of Universal Housing Design standard by 2020. However, the Committee heard that meeting this target through a voluntary market driven approach is particularly challenging. VCOSS, for example, noted that currently about 96 per cent of new housing does not include accessibility features. 98

The Committee heard that considerable work has been undertaken in Victoria to introduce minimum universal design features in new housing. In its 2009 Regulatory impact statement on visitable and adaptable features in housing, the Department of Planning and Community Development (DPCD) recommended a Victoria specific amendment to the Building Code of Australia to include the following four accessibility features:

- a clear path from the street (or car setdown/park) to a level entry
- wider doorways and passages
- a toilet suitable for people with limited mobility on the entry level

94 Submission 39, Council to Homeless Persons, p. 11.
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- reinforced bathroom walls to allow grab rails to be fitted inexpensively if they are needed later.  

Notably, the Regulatory Impact Statement identified that including these features at the design stage is very cost effective. The direct cost was quantified at ‘less than a third of one per cent of the cost of a new home’ and ‘less than one twentieth of the cost of retrofitting the features in an existing home.’

The Committee is also aware of the decision of Australian Building Codes Board released in 2011 to revise the Building Code of Australia to reduce the risk of slips, trips and falls in buildings and supports this recommendation.

**RECOMMENDATION 7.7:**

The Committee recommends that the Victorian Government introduces minimum universal design features in new housing.

**Housing modification**

Most homes in Victoria are not built according to universal housing design principles. In situations where people lose capacity or mobility due to illness or disease, their ability to stay in the home independently can be significantly compromised. In these cases, home modification is an important factor in supporting older people to retain functional independence and to continue living in their home.

Home modification can include:
- structural modifications – this involves changes to the fabric of the home such as remodelling bathrooms and kitchens and widening doorways
- non-structural modifications – this involves installing fittings fixtures such as rails, ramps, alarms and other safety and mobility aids.

The Committee heard that older people living in public housing are more likely to have access to home modifications than those in private or community housing, as this is incorporated into the public housing system. The Housing for the Aged Action Group explained to the Committee:

> Older persons' public housing is the most secure form of public housing. Its modifications are already set in place – they have the grab rail and modified bathrooms … so that they can be maintained living in the community and prevent early admission to hostels or a nursing home.


100 State Government of Victoria Department of Planning and Community Development (2009) *Visitable and adaptable features in housing*, p. 6.


103 *Transcript of evidence 34, Housing for the Aged Action Group, Melbourne, 21 October 2011*, p. 3.
Outside the public housing system, the Committee found that Victorian government funding for home modification is largely limited to the provision of free home inspections and home renovation loans to eligible home owners.  

Research conducted by AHURI on the 'home maintenance and modification services' component of the HACC program nationally identified that:

… a key objective of the service was to adapt/modify people’s homes when their capacities or needs change through frailty, increasing disability, cognitive decline, health issues, accidents, or changed circumstances.  

The research found that these services have a positive influence on enabling older people to continue living in their homes, and delay the need to seek alternate housing arrangements.

AHURI told the Committee the figures indicate that a small investment in home modification is required to achieve 'quite significant outcomes in terms of supporting ageing in place and other health benefits as well.' The report also found the provision of home maintenance and modification services needs to be better coordinated.

The Productivity Commission’s Inquiry report into caring for older Australians recommended the coordination and benchmarking of these services. There may be scope for expanding the Victorian housing modification scheme to accommodate more services to keep in line with national benchmarks.

**FINDING:**

That more age-friendly accommodation choices are needed, including:

- service integrated models
- accessible age-friendly housing
- increased housing modification support that meets the changing needs of people throughout their lives.

**RECOMMENDATION 7.8:**

The Committee recommends that the Victorian Government reviews its housing modification scheme to more effectively coordinate services and allow more older people to access housing modification services.

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107 Transcript of evidence 41, Australian Housing and Urban Research Institute, p. 4.

108 See also Transcript of evidence 44, City of Greater Geelong, p. 3; Transcript of evidence 48, City of Bendigo, p. 5.
7.3.5. Housing that caters for changing needs

The Committee heard that senior Victorians seek alternative housing options for a range of reasons. These reflect changing capacities, needs and aspirations in later life. For example, some older people may experience diminishing capacity to undertake routine tasks or maintenance, decreasing mobility or the need to accommodate mobility aids. Others may be looking to downsize their dwelling, or be seeking accommodation for an ailing spouse. Still others may find appeal in the lifestyle afforded by a retirement community.\(^\text{109}\)

PACE told the Committee that planning and housing regulations need to be more open to innovative housing options which reduce isolation while maintaining independence.\(^\text{110}\)

Although research suggests that older people are reluctant to move to more appropriate housing in later life, the Committee recognises that housing transitions through the life course have changed significantly in recent decades. Beer and Faulkner note that one of the key developments is ‘greater mobility within the housing stock, with people shifting tenure and location more frequently than in the past.’\(^\text{111}\) This trend may suggest that subsequent generations of older people may be more amenable to changing dwellings later in life to better meet their changing needs.

The Committee notes that changes to stamp duty on property purchases by seniors in Victoria, which come into effect on 1 July 2012, increase options for older people who want or need to make alternative housing choices.\(^\text{112}\)

Current housing and residential options

The Committee heard that a range of housing and residential options are provided by government, private and not-for-profit sectors. The majority of government funded accommodation that caters for older people has been within the aged care system. Alternative government funded housing initiatives for older people such as independent living units (ILUs) ceased to be funded in the 1980s. While organisations continue to house older people in the existing ILU accommodation, waiting times for these are significant and the Committee heard that facilities tend to be run down due to a lack of funding.\(^\text{113}\) Therefore, the Committee heard that over the past few decades, lifestyle and social housing development has increasingly being driven by private and not-for-profit sectors.

Table 7.2 provides an indication of the range of available housing and residential options for senior Victorians.

\(^{109}\) Submission 80, Aged and Community Care Victoria, p. 11; Submission 75, Retirement Village Association, p. 11.

\(^{110}\) Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 2.

\(^{111}\) Beer, Faulkner, Paris et al. (2011) Housing transitions through the life course: Aspirations, needs and policy, p. 17.


\(^{113}\) Submission 69, Housing for the Aged Action Group, p. 10.
### Table 7.2: Current housing and residential options

<table>
<thead>
<tr>
<th>Type of residence</th>
<th>Target group</th>
<th>What it offers senior Victorians</th>
</tr>
</thead>
</table>
| Retirement villages | Older people who may not need high levels of care, but are seeking secure and manageable housing. | • Type of accommodation provided varies.  
• Most aim to provide a supportive and secure environment for older people.  
• Many focus on recreational activities.  
• An increasing number are catering for older people requiring care as well as support, and some offer serviced apartments and assisted living facilities. |
| Residential parks and rooming houses 114 | People seeking affordable housing. | • Affordable accommodation for older people.  
• These options can have problems associated with:  
  • security of tenure  
  • maintenance of living standards.  
• They are also less likely to provide social and care supports. |
| Independent living units | Older people who may not need high levels of care, but are seeking secure and manageable housing. | • Affordable housing, often located in inner suburbs. Many units are old and poorly designed for adaptability as people age. 115 |
| Supported residential services | People who cannot live independently at home, and those with complex needs. | • Provide accommodation and personal care at pension and above pension rates. |
| Residential aged care | Older people needing accommodation that provides higher levels of care. | • High levels of care. |

114 Residential parks involve residents purchasing a prefabricated dwelling which is located on a rented site within a park. As such, they are covered under the *Residential Tenancies Act 1997* (Vic), rather than the *Retirement Villages Act 1986* (Vic). Residential parks are a low cost housing model often targeted to senior residents. Changes to the Residential Tenancies Act came into effect in September 2011 to give greater protection to residential park residents. A rooming house is a building with one or more rooms available for rent where the total number of occupants of those rooms is four or more. Rooming house operators must be registered with a local council and meet the standards set out in the *Public Health and Wellbeing Regulations 2009*. From 31 March 2013, rooming house operators will have to comply with minimum standards set out in the *Residential Tenancies (Rooming House Standards) Regulations 2012*. This information is sourced from the Consumer Affairs Victoria Website: Consumer Affairs Victoria (2012) *Types of rental agreements*. Accessed on 28 June 2012 from [http://www.consumer.vic.gov.au/housing-and-accommodation/renting/types-of-rental-agreements](http://www.consumer.vic.gov.au/housing-and-accommodation/renting/types-of-rental-agreements).

115 Submission 69, Housing for the Aged Action Group, p. 10.
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<table>
<thead>
<tr>
<th>Type of residence</th>
<th>Target group</th>
<th>What it offers senior Victorians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community housing</td>
<td>Older people who are asset poor or experiencing disadvantage.</td>
<td>• Affordable housing, some with co-located facilities, allowing a move to a more appropriate setting as the needs of older persons change.</td>
</tr>
</tbody>
</table>
| Public housing    | People who are asset poor or experiencing disadvantage. | • Public housing tends to accommodate accessibility modifications as needed.  
 • Some older tenants can access supports through the Department of Human Services (e.g. Older persons’ high rise support program, Housing and support for the aged).  
 • The construction and re-development of public and community housing is subject to construction standards that include accessibility provisions. |

Source: Family and Community Development Committee

The Committee recognises that existing housing policy and demand has led to the development of diverse housing and support options for senior Victorians. Yet these diverse options do not always represent age-friendly housing options for people in later life.

For example, an emerging trend observed by the Committee is an increase in service integration across the different housing types. During its study tour to the UK and the Netherlands, the Committee heard that Europe is leading the way in developing innovative approaches to service integrated housing, in particular the Humanitas Apartments for life model, discussed below.

Service integrated housing

Inquiry participants told the Committee about a range of housing options for senior Victorians that cater to diverse needs and requirements. The Committee observed that, over the last two decades, demand has driven considerable and diverse growth in housing options catering to people in later life. This growth has been more organic than systemic.

Research and evidence received by the Committee suggests that service integration and continuity of care is increasingly becoming a feature of age-friendly housing and support options that cater to the needs of seniors. Inquiry participants identified that integrated housing solutions hold considerable promise in supporting senior Victorians to age in place by catering to their changing needs. During its study tour to the UK and the Netherlands, the Committee conducted a site visit of the Humanitas Apartments for life project in the Netherlands (outlined in Box 7.2). The Committee considered this to be an innovative model for integrated housing.

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117 For example, see Transcript of evidence 24, Brotherhood of St Laurence, Melbourne, 5 October 2011; Submission 22, Lord, J.
Many participants referred to the Netherlands Humanitas Apartments for life initiative as a best practice model for integrating retirement living with continuity of care. This program aims to provide low cost dwellings in an apartment complex, which includes shared community facilities and is able to support most resident’s increasing care requirements via built design elements, an employed care advisor and access to community services and family support. The program philosophy emphasises individual choice and flexible activities and linkages with families and the local community.


In 2010, AHURI reported on a research project into service integrated housing. The research suggested that integration of aged care services with lifestyle accommodation has evolved organically in Australia over the last decade in response to market demand. The research noted that the most prominent model was the inclusion of care services in residential village settings. The researchers observed that in some villages, integrated services are achieved by using external services such as HACC, while other villages provide in-house support services.

The AHURI research found that significant growth in service integrated housing has come about with limited government policy intervention. AHURI, however, suggests that a clearer policy framework could consolidate existing trends, reduce uncertainties and encourage development and further innovation. Other areas the research identified for government involvement include:

- Developing policy that encourages service integrated housing being made available for low-income, low-asset older people (the needs of this group are not addressed in existing arrangements).
- Ensuring adequate geographic distribution of innovation in service integrated housing, with a particular focus on enabling older people to ‘adjust their housing while remaining in their familiar local neighbourhood and maintaining their local social networks.’
- Developing guidelines and principles to improve practices in the retirement village sector, favouring practice standards and guides above over-prescriptive regulation. This includes housing accessibility and universal housing design standards.
- Expanding the evidence base on integrated service housing. This includes:
  - research into the state of supply
  - information on new and emerging types of accommodation
  - estimates of demand, and mapping of geographic distribution
  - characteristics of residents in various forms of service integrated housing
  - the ‘push and pull’ factors associated with moving into retirement villages
  - case studies and evaluations of a range of types of service integrated housing.

While housing is generally the domain of the Victorian Government, there are many overlaps with federally funded aged care supports. The Committee determined that senior Victorians would benefit from a strategic focus at the Victorian level. The Committee suggests that the Victorian Government needs to develop a framework to support Victorian trends and innovation in housing for senior Victorians. The Victorian framework should encourage service integrated housing options to be located, developed and adapted in such a way that promotes the ongoing connection of senior Victorians with the community.

**RECOMMENDATION 7.9:**

The Committee recommends that:

- the Victorian Government undertakes a feasibility study of alternative accommodation options such as the Humanitas Apartments for life model and develops a framework to support innovation in service integrated housing for people in later life
- in developing the framework, the Victorian Government works with the Australian Government to ensure a coordinated approach.

**Retirement villages**

Many retirement villages offer features that address the needs of older people. The Residents of Retirement Villages Victoria (RRVV) told the Committee that there are currently around 30,000 people residing in retirement villages, and this number is growing. In addition to housing, facilities and amenities, many retirement villages offer social activities such as exercise classes, games, craft groups and outings.

However, varying management approaches and governance structures mean that opportunities for participation are limited for some village residents. For example, RRVV told the Committee that:

> The challenge for us is to be able to ensure that no residents of a retirement village feel under pressure from the manager or other residents for just being themselves.

> We know that Consumer Affairs Victoria are working very hard on this and they have laid down quite a bit of very good documentation for people to see, to learn from and to guide them in their approach to taking on residence in a retirement village, but whilst that is there, it is not always looked at.

Although the Retirement Villages Act 1986 (Vic) provides some governance of requirements that support the participation of residents, the Committee heard that more can be done to increase senior Victorians’ awareness in regard to their rights and obligations, the role of the independent residents association and the right to request disclosure of financial accounts. Inquiry participants also emphasised the need to ensure that the rights of residents are respected by management.

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120 Transcript of evidence 9, Residents of Retirement Villages Victoria, Melbourne, 9 September 2011, p. 2.
121 Transcript of evidence 9, Residents of Retirement Villages Victoria, p. 2.
122 Transcript of evidence 33, Consumer Affairs Victoria, Melbourne, 21 October 2011, p. 5; Transcript of evidence 9, Residents of Retirement Villages Victoria, p. 3; Transcript of evidence 12, Elder Rights Advocacy, pp. 7-10; Submission 84, Consumer Action Law Centre, p. 2; Submission 12, Stacey, p. 1.
Committee notes that consumer protection laws in the recently enacted *Australian Consumer Law and Fair Trading Act 2012 (Vic)* (ACLFTA) extend to the *Retirement Villages Act 1986 (Vic)*. This ensures that the new ACLFTA applies to goods and services provided under a retirement village residence contract.

An inherent risk of a self-contained village is that residents can become isolated from the broader community. The Committee considered that more can be done to ensure residents of retirement villages are supported to participate outside the village community. Some promising examples include arrangements for village facilities to be used by the wider community, as noted by the Retirement Village Association (RVA):

Some villages offer facilities and services that are not only open to residents but can also be accessible to the broader community (e.g. Village Baxter in Victoria). These not only enrich the quality of life of residents and local people, but they can also reduce the drain on other public infrastructure in the community. Such amenities may include:

- Community centres
- Cinema
- Aquatic facilities
- Library
- Gymnasia / health facilities / recreational facilities etc. ¹²³

The RVA also suggested that the retirement village sector is responding to market demands for greater levels of care and support, and may therefore be an avenue for innovation in service integrated housing:

> The retirement village industry has … already begun to embrace a consumer directed, service driven approach to retirement village housing. Customers are increasingly demanding greater levels of care and support and they want clearly identified accommodation and service pathways as their care needs develop. ¹²⁴

### 7.3.6. Affordable age-friendly housing for senior Victorians

The Committee heard that senior Victorians’ housing choices are affected significantly by housing affordability. This is particularly so in the case of economically disadvantaged older people and age-friendly housing options. Inquiry participants informed the Committee that affordability of housing is a major concern for people in later life. ¹²⁵ Furthermore, the 2011 National Housing Supply Council’s second *State of supply report* has projected that demand for

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¹²³ Submission 75, Retirement Village Association, p. 19. See also Transcript of evidence 4, Retirement Village Association, Melbourne, 6 September 2011.
¹²⁴ Submission 75, Retirement Village Association, p. 21.
¹²⁵ Submission 39, Council to Homeless Persons, p. 6; Municipal Association of Victoria, Council on the Ageing (Victoria), & Community Planning (2008) MAV COTA Positive Ageing in Local Communities Project Evaluation December 2008. Melbourne, Project Partnerships, p. 11; Submission 35, Jeffs, M., p. 1; Submission 30, National Council of Women of Victoria, p. 7; Submission 20, Benetas, p. 4; Submission 21, Financial Care Services, p. 2; Submission 44, Hobsons Bay City Council, p. 1; Submission 46, Older Persons Consultative Committee - City of Port Phillip, p. 4; Submission 34, National Seniors Australia - Knox Branch, p. 2; Transcript of evidence 48, City of Bendigo, p. 3.
affordable housing by older people is likely to increase with declining rates of home ownership. 126

In Australia, housing affordability has received significant policy attention at all levels of government. The Council of Australian Governments (COAG) National Affordable Housing Agreement commenced on 1 January 2009. The agreement establishes housing affordability as a shared Australian, state and local government responsibility. 127

While affordable housing is a national concern, the Committee identified that the Victorian Government is engaged in a range of ways with local government, registered housing agencies and the not-for-profit sector to increase affordable housing options in Victoria. In 2011, the Victorian Government established a new Housing Affordability Unit within the DPCD. The Victorian Government has stated that this Unit will provide a whole of government overview to the Planning Minister about state and local government policies, legislation or regulations that could be modified to advance housing affordability. 128

Victorian Government initiatives also include addressing the quality of and promoting investment in affordable rental housing, reforms to supported residential services, boarding houses and caravan parks and improving accessibility. 129

These initiatives are complemented by homelessness strategies, such as the Victorian homelessness action plan 2011–15 and COAG’s 2008 National Partnership Agreement on Homelessness (NPAH) and National Partnership Agreement on Social Housing. The Australian Government’s allocation of spending on Victorian Homelessness innovation action projects under the NPAH includes specific funding for programs to address homelessness experienced by older people. 130

In line with the Committee’s broader definition of ageing in place, age-friendly affordable housing should enable continuing connection of senior Victorians to their community. This includes ensuring that older people can access affordable housing in the local area rather than relocating. Relocation often results in the loss of established supports, services and social networks. As explained by VincentCare, urban renewal programs such as ‘brown field’ and ‘grey field’ redevelopment provide important opportunities to develop housing that can accommodate senior Victorians in existing communities. 131

The Committee heard there is a range of housing options for senior Victorians with low income and low assets. These include private rental, social housing (including public and community housing), independent living units, rooming

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131 Submission 86, VincentCare Victoria, p. 47.
houses and residential parks. Nevertheless, housing affordability was clearly still of major concern to senior Victorians due to increases in living and rental costs that are not matched with increases in pension and other retirement income. Furthermore, the Committee was informed that living conditions in affordable housing can vary significantly.

The Committee learned that work has been undertaken by Community Affairs Victoria in upholding the rights of senior Victorians in housing such as retirement villages, boarding houses and residential parks. This includes a range of legislative and non-legislative initiatives. For example, a program of registration has been undertaken to assist in improving standards of living in boarding houses. Work has also been undertaken to amend legislation and promote awareness to address security of tenure in residential parks. Changes to the Residential Tenancies Act 1997 (Vic) came into effect in September 2011 to give greater protection to residential park residents.

Nevertheless, Inquiry participants told the Committee of continuing challenges associated with many forms of affordable housing in terms of availability, security of tenure, minimum housing standards, and adaptability of housing as people age.

The Committee also heard that initiatives in the community housing sector have made progress in providing affordable age-friendly housing options for senior Victorians. Some of these offer service integration and continuity of care (for example, housing developed by Wintringham). The Committee determined, however, that as part of a broader social housing strategy, the Victorian Government needs to provide leadership and direction to promote innovation in the community housing sector. Such a strategy needs to address the availability of age-friendly affordable housing for senior Victorians.

The Committee notes that issues relating to affordability and challenges for housing associations are explored in the 2010 Inquiry report of the Family and Community Development Committee of the Parliament of Victoria, titled Inquiry into adequacy and future directions of public housing in Victoria. The 2010 VAGO audit on Access to social housing also discussed issues relating to community and housing association housing.

**FINDING:**
That affordability of housing is a major concern for people in later life.

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132 Transcript of evidence 33, Consumer Affairs Victoria, pp. 7-8.
134 For example, see Submission 69, Housing for the Aged Action Group. See also Transcript of evidence 34, Housing for the Aged Action Group.
Chapter Seven: Achieving age-friendly environments

**RECOMMENDATION 7.10:**

The Committee recommends that, as part of a broader social housing strategy to enable more availability of choice, the Victorian Government develops and implements a plan to promote and monitor innovation in the public and community housing sector to develop age-friendly housing options.

### 7.4. Achieving age-friendly outdoor spaces and buildings

Age-friendly outdoor planning aims to ensure that outdoor spaces and buildings are accessible and safe for a diverse range of seniors. The varying capacities, needs and preferences of older people are taken into account in age-friendly approaches to outdoor environments. The WHO *Age-friendly cities guide* identifies the following attributes of age-friendly outdoor spaces and buildings:

- pleasant and clean environment
- well maintained and accessible green spaces
- availability of outdoor seating
- well maintained and even pavements
- safe pedestrian crossings
- safe walkways and appropriately placed cycle paths
- a safe and secure environment
- accessible and age-friendly services
- age-friendly buildings
- adequate public toilets. 137

Inquiry participants told the committee that these age-friendly elements were important in planning for environments that cater to people's needs in later life. 138

The Committee notes that the WHO *Age-friendly cities guide* is intended as a starting point for community development and research activity. This point was made clearly in the work undertaken in 2009 by the MAV. It assessed how the WHO *Age-friendly cities guide* has been used across Victoria's municipalities. The MAV found that, for the framework to be used effectively, local issues need to inform the assessment of a community’s age-friendliness against the criteria set out in the guide. 139


138 For example, see *Submission 86*, VincentCare Victoria, p. 25; *Submission 43*, Union of Australian Women - Darebin Group, p. 8; *Submission 41*, Banyule City Council, p. 4; *Submission 38*, Peninsula Advisory Committee for Elders (PACE), p. 7; *Submission 19*, Stoodley, G., p. 2; *Submission 46*, Older Persons Consultative Committee - City of Port Phillip, p. 5; *Submission 14*, Flemington Chinese Golden Age, p. 3; *Supplementary evidence 41A*, Australian Housing and Urban Research Institute.

7.4.1. Participation and age-friendly outdoor spaces and buildings

The Committee consistently heard that age-friendly outdoor spaces are important in enabling senior Victorians to lead healthy, active lives and to continue participating in the community. Age-friendly spaces include consideration of safety, convenience and accessibility. In addition, such spaces often promote inter-generational relationships and connections.

The following comments in the submission from Benetas encapsulate many of the views heard throughout the Inquiry:

So much of our existing infrastructure was built with only active younger people in mind. However senior Victorians need to live in an age-friendly environment. They need streetscapes and parks with benches to rest on; footpaths with no holes or bumps; adequate street and path lighting and crossings and ramps over gutters. They need buildings level with the street, lifts or escalators where there are steps, wide passages, wide doorways, bright lighting and large writing on signs which are at eye level and universal design precepts put into all building codes.

The Committee heard that age-friendly outdoor spaces and buildings assist people in later life to engage in activities outside their home and to access services in the community. For example, COTA emphasised the importance of the environment to senior Victorians, commenting that older people want a community in which:

- they can feel safe
- they feel part of a network of friends, neighbours and family, with all the benefits and responsibilities that entails
- the details of urban design (pavement services, pedestrian crossings, the provision of physical facilities and so on) take account of their needs and limitations and
- the environment is friendly and benign.

Research has connected adverse environmental factors with the risk of functional decline in older people, negative perceptions of the social support available and increased levels of psychological distress. Factors include heavy traffic, excessive noise, crime, litter, poor lighting and deterioration or poor maintenance of the built environment.

VicHealth also provided evidence to the Committee that good environmental design has been linked to the levels of physical activity undertaken by older people. It cited a 2006 review which found that activity among older adults is

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140 For example, see Submission 41, Banyule City Council, p. 4; Submission 38, Peninsula Advisory Committee for Elders (PACE), p. 7; Submission 19, Stoodley, p. 2; Submission 46, Older Persons Consultative Committee - City of Port Phillip, p. 5.
141 Submission 20, Benetas, p. 5.
142 Submission 74, Council on the Ageing (COTA) Victoria, p. 34.
Chapter Seven: Achieving age-friendly environments

influenced by factors such as local shopping and services, traffic and pedestrian infrastructure, neighbourhood attractiveness, and public transportation. Age-friendly outdoor spaces and buildings encourage the participation of diverse groups of people. This provides a unique opportunity to explore different facets of the environment that might be important to different population groups and to people of different capacity. For example, the safety of outdoor spaces is particularly relevant to facilitating social connectedness for older women. In its submission, Women’s Health Victoria pointed out that older women are more likely to experience vulnerability and fear, thereby increasing their risk of isolation.

The Committee also heard that environments that are friendly for all ages can promote intergenerational relationships (discussed in detail in Chapter 5). For example, the National Aging Research Institute (NARI) noted the role of environments in fostering intergenerational relationships:

In order to foster intergenerational relationships, it is important that people of all ages can meet and engage with each other.

Professor Simon Biggs, Professor of Gerontology & Social Policy at the University of Melbourne, suggested that it may be necessary to challenge assumptions about the way in which older people want to use open space and buildings in order to create spaces for all ages:

A lot of older people want to interact with younger adults when they do their exercise. We tend to assume that people do not want to do that, but it depends on who you ask and where you look. If we are looking to build a more cohesive society where people feel responsible for one another, then I think one of the key things is to get people to interact together. When we look at our public spaces – our parks and our buildings – are they friendly for all ages and so on?

The Committee acknowledges that outdoor spaces and buildings contribute to the wellbeing and participation of people of all ages. Health and wellbeing is becoming increasingly influential in urban planning. The following section seeks to put the WHO Age-friendly cities guide within the context of other urban planning frameworks that focus on environmental factors.

**FINDING:**

That age-friendly outdoor spaces and buildings are essential to ensure the safety and participation of older people and that these initiatives will also benefit the broader community.

**7.4.2. How to achieve age-friendly outdoor environments?**

Like other aspects of Victoria’s environment, much of Victoria’s outdoor and building infrastructure was not built with the needs of a diverse ageing population in mind.

145 Submission 18, Women’s Health Victoria, p. 3.
146 Submission 54, National Ageing Research Institute, p. 3.
147 Transcript of evidence 18, Biggs, S., University of Melbourne, Melbourne, 5 October 2011, p. 7.
The Committee determined that an important aspect of planning for age-friendly open spaces and buildings is to link local communities into Victoria's statewide planning frameworks. The Committee found that the WHO *Age-friendly cities guide* is compatible with the application of age-friendly principles at different levels of government. It also recognises that this application of principles is most effective when targeted at local area action. For example, one of the objectives of the Global Network of Age-friendly Cities is to 'link cities and communities to the WHO and to each other.'

The MAV emphasised that an effective approach to creating age-friendly environments should build on local knowledge and ensure joint state and local government priority setting, funding and responsibility. The MAV noted that there are many areas of overlap between spheres of government (citing roads, pedestrian crossings, traffic, safety and taxis as examples), and stated that:

… there would be value if the same framework was used for framing and reporting on the separate and joint actions and priorities.

At the local government level, momentum has been gained through the MAV and *COTA Positive ageing in local communities project*. This project was funded by the Office for Senior Victorians between 2005 and 2008. In its 2009 report about the use of the WHO *Age-friendly cities guide* and checklist by local councils, the MAV found that 73 of the 79 Victorian councils had completed a positive ageing strategy.

The Committee heard of ongoing benefits from this project, with COTA indicating that councils have remained connected through the Positive Ageing Network. However, as discussed in Chapter 3, sustaining momentum and implementing these plans is a key challenge.

The Committee considered that the Victorian Government is well positioned to work with MAV to provide leadership to achieve a coordinated approach to prioritising, implementing and reporting on age-friendly objectives.

**7.4.3. Age-friendly outdoor spaces and buildings in rural and regional communities**

There is a strong case for a specific rural and regional focus to age-friendly planning for outdoor spaces and buildings. As noted in Chapter 1, there are disproportionate numbers of senior Victorians living in rural areas. This is partly due to younger people moving out of these communities and some older people choosing to move to rural and regional communities (including those in coastal areas) in later life. Furthermore, Inquiry participants told the Committee that

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152 Transcript of evidence 1, Council on the Ageing (COTA) Victoria, Melbourne, 6 September 2011, p. 6.
age-friendly planning in these areas may need to address challenges that are quite different from challenges in urban areas.153

The Committee determined that an age-friendly framework for outdoor spaces and buildings in Victoria’s rural and regional communities would need to address specific issues associated with size, dispersion and proximity and access to resources. Rural and regional communities may also experience high costs of maintenance and declining infrastructure, making it difficult for their local government areas (LGAs) that often have limited financial resources to address these issues.

The specific issues experienced by Victoria’s rural and regional communities have been highlighted by the MAV. In 2009, the MAV released a report on the use of the WHO Age-friendly cities guide by Victoria’s municipalities. It noted that a number of Victorian municipalities are made up of ‘dispersed towns, often with different physical characteristics, various transport options and different services available locally.’154 It concluded that in these municipalities ‘assessment of age friendliness is likely to be far more useful if undertaken for each town, rather than for the municipality as a whole.’155 The report highlighted the importance of locally tailored solutions in rural and regional areas:

... in some areas of a municipality the topography and dispersed nature of the population may mean that very localised transport solutions need to be found or provision of footpaths may not be feasible. In some areas there would be strong opposition to footpaths because of the desire to maintain the local rural character. These local issues need to inform the assessment of a community’s age friendliness (possibly requiring adjustments to the issues being assessed) as well as the solutions proposed for making a particular community more age-friendly.156

As indicated earlier, the MAV found that there has been minimal use of the Canadian Age-friendly rural and remote communities guide by Victorian communities.157 The Committee identified limitations in the applicability of the guide in the Victorian context. It determined that a targeted approach is needed to address Victoria’s rural and regional communities.

The Committee also heard that more can be done to achieve consistency in age-friendly planning across rural and regional Victoria. In its submission, the MAV stated that while larger councils have had the ability to utilise full-time or part-time staff to implement positive ageing strategies, smaller rural councils often do not have the same capacity.158

153 For example, see Submission 61, Association of Independent Retirees - Victoria Division, p. 3; Transcript of evidence 5, Rural Doctors Association of Victoria, 6 September 2011, pp. 5,7; Transcript of evidence 50, Royal District Nursing Service, Bendigo, 18 November 2011, pp. 5,8; Transcript of evidence 48, City of Bendigo, p. 7.
The Committee identified that some progress is underway to redress this imbalance. The Victorian Government has funded 12 small rural councils to undertake planning and implementation as part of the Improved liveability for older people project. Nevertheless, the Committee determined that a Victorian Government strategy is needed to promote a coordinated and sustained approach.

**RECOMMENDATION 7.11:**
The Committee recommends that the Victorian Government works with the MAV to develop a Victoria-specific rural and remote age-friendly guide.

### 7.4.4. Age-friendly planning for new developments and urban renewal

The Committee determined that there is considerable scope to apply age-friendly planning principles to the design of open spaces and buildings for new developments and urban renewal sites. These projects present an opportunity to integrate transport, housing and outdoor spaces and buildings at the outset to create forward looking, accessible design that enhances the ongoing participation of people throughout their life course.

Although there has been a lot of policy work in age-friendly planning in Victoria, the Committee heard that more emphasis is needed to ensure that planning processes foster a continuing focus on age-friendly principles. Commenting on his work with the Department of Health on growth corridors in Victoria, Professor Biggs told the Committee that LGAs have not tended to approach age-friendly planning as a long-term, ongoing process. He expressed the view that to ensure continuity, planning mechanisms must be in place to require new developments to adopt age-friendly planning. 159

The Victorian Government released the Victorian Planning System Ministerial Advisory Committee initial report on 11 May 2012. The report makes wide-ranging recommendations relating to Victoria’s planning system. While the report does not specifically address planning issues for older people, the report highlights the need for the DPCD to show greater leadership in the management of the planning system, and recommends that the government ‘give more emphasis to the council’s primary role in strategic planning.’ This could include the role of LGAs in developing age-friendly environments. 160

### 7.4.5. Interaction with other planning frameworks

Age-friendly planning is just one objective amongst a number of overlapping planning frameworks that highlight the important role of the environment on the wellbeing of individuals and communities. A range of relevant frameworks is outlined in the Box 7.3.

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159 Transcript of evidence 18, Biggs, p. 9.
Chapter Seven: Achieving age-friendly environments

Box 7.3: Planning in Victoria

In Victoria, urban planning is broadly governed by the Planning and Environment Act 1987 (Vic). The Act recognises the importance of integrating land use and planning and policy with ‘environmental, social, economic, conservation and resource management policies at State, regional and municipal levels.’

Health frameworks such as the WHO Healthy cities and the Victorian Government Environments for health municipal public health planning framework emphasise the role of the environment on health and wellbeing and are supported in Victoria by the Public Health and Wellbeing Act 2008 (Vic). 161

Environmental planning is also accounted for in the Transport Integration Act 2010 (Vic). The Act’s objectives specifically include social and economic inclusion and environmental sustainability.

As noted in Chapter 1, the ageing of the population is projected to increase the incidence of disability. Therefore, state and local government initiatives that improve the accessibility of buildings and physical infrastructure in line with the State Disability Plan 2002–2012 162 and Disability Act 2006 will also benefit older people with varying abilities and diverse needs. This is further supported by the 2010–2020 National disability strategy endorsed by COAG in 2011. One of the objectives of the Strategy is the development of accessible and well designed communities with opportunity for full inclusion of people with disabilities in social, economic, sporting and cultural life. 163

At a local government level, council planning, municipal public health planning and disability action planning all contain environmental dimensions which intersect with age-friendly planning objectives.

Source: Family and Community Development Committee. 161 162 163

The breadth and interrelationship of planning frameworks in Victoria has recently been the subject of the Inquiry into the Environmental Design and Public Health by the Victorian Legislative Council Environment and Planning References Committee, tabled in May 2012. While the terms of that Inquiry do not specifically address older people, they do address many planning aspects that intersect with planning for age-friendly environments, including:

- the effectiveness of the Environments for health municipal public health planning framework
- the State Public Health and Wellbeing Act 2008 (Vic), the Transport Integration Act (Vic) and the Planning and Environment Act 1987 (Vic)
- the WHO Healthy cities initiative
- the role of public open space in promoting health. 164


The Committee observed that many of the recommendations made in that report are relevant to the participation of senior Victorians, particularly the following:

- That the Victorian Government supports the introduction of design standards for new housing to ensure access for seniors and people with limited mobility.
- That the Victorian Government works with local government, developers, the building industry and community groups to ensure that universal design principles that improve accessibility are applied to all aspects of the built environment, including the maintenance and retrofitting of existing building stock, roadways, cycling and pedestrian paths, and public transport infrastructure. The Committee further recommends that the DPCD assesses progress and reports back to the Parliament annually on measures taken to improve the accessibility of the built environment in Victoria.
- That the Victorian Government recognises that public transport is a key component of a healthy community, and
  - audits current public transport provision, with an emphasis on outer suburban and regional areas
  - establishes minimum standards and targets for public transport in new outer suburban residential developments, linking important destinations such as schools, shops, places of work, community facilities, and green and open public spaces
  - commits to a program of long-term investment to improve public transport infrastructure for Melbourne’s outer suburbs and regional metropolitan areas.

Given the range of existing planning frameworks in Victoria that address environmental factors, the question for this Committee was whether there is a justification of the inclusion of age-friendly planning in the mix, and, if there is, how should this be integrated with existing frameworks?

The Committee considered that an ageing perspective can help to connect planning objectives by focusing on creating an environment that is inclusive and promotes active and healthy participation for Victorians of all ages and capacities.

**FINDING:**

That achieving age-friendly environments requires effective planning.

**RECOMMENDATION 7.12:**

The Committee recommends that the Victorian Government includes sustainable age-friendly planning principles in urban planning legislation that complement existing measures to encourage disability access and healthy environments.
Appendix 1: Submission Guide

INQUIRY INTO THE OPPORTUNITIES FOR PARTICIPATION OF VICTORIAN SENIORS

SUBMISSION GUIDE

TERMS OF REFERENCE

The Family and Community Development Committee has been asked by the Legislative Assembly to inquire into the opportunities for participation of Victorian seniors. The Committee is asked to:

a) review national and international literature on preparing for an ageing society;

b) consult with older Victorians and representative bodies and with Victorians planning for ageing well;

c) examine the contribution of, and challenges facing, older members of the Victorian community from diverse cultural and linguistic backgrounds;

d) identify the role of government in supporting older Victorians and the intersection of Federal, State and Local Government service provision and their responsibility to seniors;

e) consider the economic significance of older Victorians in the paid workforce and the voluntary sector and barriers to participation for those Victorian seniors who desire to work in or contribute to the community, and how willing economic and social contributions can be fostered;

f) consider ageing well in terms of quality of life and community participation, including the specific and different issues faced by men and women, older Victorians from different age cohorts, and those living in rural and regional areas;

g) examine the role and interrelationship of active, successful, positive and productive ageing approaches in promoting better health;

h) develop recommendations or strategies for whole of government and community responses to the needs of older Victorians now, and into the future, and incorporate in the recommendations the best international practice in support of ageing well.

This Guide is intended to assist organisations and individuals who wish to make a written submission and/or who would like to present evidence before the Committee at a public hearing. The questions in this Guide provide an indication of the issues the Committee will be considering as part of this Inquiry, but they are not intended to be exhaustive and it is not necessary to answer all the questions in comments or submissions.

Q In what ways do senior Victorians contribute to society and the economy?

Q Based on the Terms of Reference, what would you see as the top three concerns for senior Victorians?

Q What do you see as the emerging issues for senior Victorians over the next 20 years?

PARTICIPATION OF VICTORIAN SENIORS IN CONTEXT

Australians are living longer than ever before. Over the past 20 years, life expectancy has increased by 6 years for Australian men and by just over 4 years for Australian women. Australian men can expect to live to an average age of 79.3 years, compared with 85.2 years a century earlier. Australian women’s life expectancy has increased from 85.8 years to 83.9 years over the last century. While the rise in life expectancy is a global pattern, according to United Nations estimates for 2005-2010, Australia’s life expectancy at birth is ranked among the highest in the world.  

Victorian population changes mirror national trends. Together with reduced birth rates, increased life expectancy has been projected to drastically change the make-up of the Victorian population. This is projected to be particularly

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1 Australian Bureau of Statistics (ABS), Deaths, Australia (2009).
2 ABS, Deaths, Australia (2009).
pronounced in the short term, due to a large cohort (represented by the “baby boom” generation) approaching retirement age. Projections indicate that by 2021, more than a quarter of Victorians will be aged 60 or over, 3

These demographic changes present a number of challenges and opportunities relating to how the Victorian community perceives senior Victorians and enables opportunities for their participation in Victorian society and its economy.

A SNAPSH.OT OF SENIOR POPULATIONS IN VICTORIA AND AUSTRALIA

Senior Victorians are a varied group with a rich diversity of backgrounds, experiences, needs and expectations. Senior Victorians do not fall within a clear-cut age bracket. People are generally considered to be part of this group from the age of 60 or 65, depending on the context. However, the Committee recognises that there are a range of ages and capacities within this group.

Q How should “senior Victorians” be defined?

A selection of demographic indicators relating to seniors in Victoria and Australia is provided below.

The following are some relevant demographics specific to Victoria: 4

- People aged over 65 make up almost 14% of Victoria’s population (this has increased from 12.3% in 1995);
- The proportion of people aged over 65 is higher in regional Victoria (16.2%) than in Metropolitan Victoria (12.6%);
- People of working age (15-64) make up approximately two thirds of Victoria’s population, with a higher proportion in Metropolitan Victoria (69.2%) compared with regional Victoria (64.5%).

The following national demographics are available in relation to older people: 5

- Around 70% of Australians between the ages of 65 and 69 are retired and 91% of those aged 70 years and over. The highest rate of retirement is between the ages of 55 and 65 (33%), with the average age of retirement for men being 58, and for women being 49;
- More than 30% of Australian seniors aged over 65 are overseas born;
- Around 34% of Australian seniors aged 60 and over live alone, the highest percentage of all generation groups (compared with 20% of those aged between 60 and 79);
- The proportion of Australian seniors living in residential aged care increases markedly with age, from 1.1% between the ages of 60 and 69 to 1.5% of those aged 80 and over;
- Levels of disability are significantly higher in older age groups, with around 48% of people over 60 reporting a disability, increasing from 36% of people in the 60-64 age bracket to 48% of those aged 70-74 and 88% of those aged 90 and over. However, disability rates for those between the ages of 76 and 85 years have decreased by 5% since 2003;
- Demographic trends show that senior Australians are participating to a greater degree in paid employment, with 19% of seniors reporting their primary source of income as wages, salary or business income, increasing from 13% in 2003;
- There has been a large increase in the number of senior Australians using computers and the internet, almost doubling since 2003.

Q Do the demographics reflect the experience of senior Victorians in the community?

DIVERSITY

Senior Victorians represent diverse groups across the whole of Victorian society. They vary greatly in age, capacity and needs. They come from a variety of backgrounds and cultures and live in a wide range of communities, from inner urban to rural and remote. Senior Victorians may also have different experiences depending on gender.

The Committee recognises that the opportunities and challenges relating to senior Victorians’ participation in the community will differ. For example, age-friendly solutions appropriate for urban communities may not be feasible or helpful in rural and remote communities. Similarly, senior Victorians may require different support services depending on, for example, language, cultural and health needs.

2 United Nations, World Population Prospects (the 2008 revisions), (2009);
4 ABS, Population by Age and Sex, Australian States and Territories 2009: Catalogue No 3231.0 (2009); ABS, Australian Demographic Statistics, September Quarter 1996: Catalogue No 3101.0 (1996);
The Committee invites a range of views that represent the diverse experiences of senior Victorians.

Q What issues are experienced by diverse groups of senior Victorians (including men, women, people of different ages and capacities, people from culturally and linguistically diverse backgrounds, people living in rural and regional areas, Indigenous people)?

Q What strategies need to be considered to account for the diversity of experience?

AGEING WELL

The Committee’s Terms of Reference have a strong focus on “ageing well”. Concepts relating to ageing well are broad and interrelated. These include “successful”, “positive”, “productive” and “active” ageing and the concept of “age friendly cities”.

- The concept of “successful ageing” concerns the maintenance of wellbeing and quality of life of older people and is mainly focused on the experience of individuals.
- Approaches such as “positive ageing” and “productive ageing” emphasise the contribution of older people to the economy and society, and aim to address ageing both at an individual and society level.
- The Active Ageing Framework, developed by the World Health Organisation (WHO) in 2002, defines “active ageing” as “the process of optimising opportunities for health, participation and security in order to enhance quality of life as people age”. A significant aspect of active ageing is the need to ensure the health and wellbeing of older people to allow them to participate to their full capacity for longer.
- In 2007, the WHO developed the Guide to Global Age-friendly Cities. This guide sets out to tackle ageing as a societal concern and outlines strategies in eight subject areas:
  - outdoor spaces and buildings;
  - transportation;

housing;
social participation;
respect and social inclusion;
civic participation and employment;
communication and information;
community support and health services.

The Committee’s Terms of Reference include a review of national and international literature on preparing for an ageing society and the examination of the role and interrelationship of active, successful, positive and productive ageing approaches.

The Committee is keen to hear views on how these approaches can be integrated in the Victorian context. For example, while the Age-friendly Cities framework is a useful starting point, the Committee is interested in gaining an understanding of how it could best be used in the Victorian context, including how non-urban and multicultural experiences of ageing can be integrated into such an approach.

Q What are the key issues for Victorians planning for ageing well?

Q How can approaches to ageing be most effectively integrated in Victoria?

ENABLING PARTICIPATION

The focus of this inquiry is to identify opportunities for participation in and contribution of seniors to Victorian society and the economy. This includes a consideration of the broader social and economic enables necessary to ensure significant actual contribution of senior Victorians.

The Committee recognises that there are various ways in which Victorian seniors participate, including:

- Community participation, including volunteering and community engagement;
- Social participation, including contribution to family and social networks;
- Economic participation, including participation in the workforce.

Opportunities for Participation by Victorian Seniors

Enablers that facilitate the participation of senior Victorians can include:

- Health and wellbeing, including health promotion, prevention and accessible health services;
- Financial security, including sources of income such as wages, superannuation and pensions;
- Respect and social inclusion, including addressing discrimination against older people, engagement in social networks and access to information;
- Physical environment, including accessible outdoor space and buildings, adequate transportation options and secure and affordable housing.

The Committee recognises that many of these areas are overlapping and interrelated.

It is seeking a broad range of views to ensure its inquiry is well informed and will be forward-looking in its proposed solutions. While this inquiry focuses on senior Victorians, it is recognised that Victorian seniors are a highly diverse group, with varying backgrounds, capacities, needs and desires. Additionally, the Committee is interested in hearing about the issues arising for those approaching “senior” status.

What does “participation” mean for senior Victorians and in what ways are opportunities for participation enabled?

Responsibility for Senior Participation

In Australia, governments at Federal, Victorian and local levels have recognised the need to put in place society-wide measures to address the challenges and make the best use of the opportunities presented by an ageing population.

The Committee’s Terms of Reference include the need to identify the role of government in supporting older Victorians.

The Federal Government has responsibility for funding aged care services, income support and other benefits. The Federal Government also controls economic determinants for senior Victorians through taxation, superannuation, welfare and labour policy.

The Victorian Government has involvement in policy, funding and delivery of a range of public services used by senior Victorians. These include health, mental health, disability and support services, justice and family services, education programs and some residential aged care facilities.

Local Governments are involved in the delivery and management of services for senior Victorians, and provide information and social inclusion pathways for Victorian seniors.

The Committee will be considering the intersection of Federal, State and Local Government service provision and government responsibility to seniors.

In what ways do Federal, State and Local Government service provision and responsibility for seniors intersect?

How well are the programs and services across governments relating to senior Victorians integrated and coordinated?

In what way could collaboration between government departments, organisations and services be improved?

What are some examples of effective whole of government and community responses to the needs of senior Victorians?

Are the pathways for participation and access to services for senior Victorians effective? In what way could these be improved?

There are also many ways in which communities are involved in strategies around ageing, and the Committee is interested in hearing about the ways in which communities can be best empowered to promote participation of senior Victorians.

How can communities be best empowered to promote participation of senior Victorians?
HEALTH AND WELLBEING – A KEY ENABLER

The Committee’s Terms of Reference include the consideration of the role of active, successful, positive and productive ageing approaches in promoting better health. Ensuring that senior Victorians stay healthy for longer is a critical determinant of ageing well and contributing to quality of life. There is also evidence that continuing social, community and economic involvement and participation may also have a role to play in maintaining good physical and mental health.

The need for accessible and affordable health services is vital. Similarly, services and programs for the promotion of physical wellbeing and prevention of disease are needed to keep senior Victorians healthier for longer. In addition, for some senior Victorians, mental health is a significant issue.

The Committee is interested in hearing about the needs of senior Victorians and the way in which approaches to health and wellbeing can allow senior Victorians to participate and contribute for longer. In particular, the Committee is seeking to understand the differences in the needs of senior Victorians of different ages and capacities, senior Victorians from different geographic and cultural backgrounds, and any gender-based differences.

Q. How can willing community and social participation by senior Victorians be fostered and what avenues are particularly effective?

Q. What forms of community and social participation are senior Victorians inclined to be engaged in?

Q. What economic benefits flow from senior Victorians participating through community and social networks?

Q. What supports are required to encourage continuing social and community participation of senior Victorians?

COMMUNITY AND SOCIAL PARTICIPATION

The Committee recognises that much of the participation by senior Victorians is voluntary and can take place through informal social and community networks.

One form of community participation is volunteering. Senior Victorians are significant contributors to volunteering efforts. Changing demographics, profile and education levels may lead to a change in the type of community volunteering work in which senior Victorians are inclined to be involved. Other examples of community and social participation include the undertaking of informal carer roles for partners, dependents and younger generations, participation in neighbourhoods, social groups, and undertaking mentoring roles.

The Committee is interested in hearing about the value and nature of community and social participation by senior Victorians, including the needs and desires of seniors from varying cultural, gender and geographic groups and senior Victorians of varying age groups.

The Terms of Reference require the Committee to consider the economic significance of senior Victorians participating in the voluntary sector, and how willing social contributions can be fostered. The Committee is seeking views about the resulting flow-on economic contribution of community and social participation.

ECONOMIC PARTICIPATION

Changing demographics are projected to dramatically shift the balance between the working and the non-working population. Many developed countries are tackling the issue of what this means for the participation of older people in the paid workforce.

The Terms of Reference require the Committee to consider the economic significance of senior Victorians who desire to continue in the paid
Opportunities for Participation by Victorian Seniors

The physical environment could also be a barrier, with access, mobility and other factors being critical for the maintenance of independence for some senior Victorians.

Financial security is a key enabler of participation for senior Victorians. For some senior Victorians, retirement from employment can bring financial stress and challenges in participating in the community.

Different groups of seniors will have varying needs and concerns. For example, in the workforce, senior Victorians may be restricted by attitudes to retirement, availability of pension benefits, health, skill maintenance, employer attitudes and lack of flexibility in workplaces. However, different and varying issues may be faced by senior Victorians involved in small business and sole business enterprises. For other seniors that find themselves living alone, exclusion from social networks may be a significant issue.

The Committee is seeking views and experiences regarding the barriers to participation by senior Victorians. Seniors from different communities are invited to share their experiences of barriers faced, initiatives that have been successful in promoting inter-generational collaboration and respect and examples and ideas about creating age-friendly environments.

BARRIERS TO PARTICIPATION

The Committee is aware that seniors wishing to continue to work and to engage in community and social participation face a number of barriers. The Terms of Reference require the Committee to consider the challenges facing senior Victorians from a diverse range of backgrounds and barriers faced by those who desire to work in or contribute to the community.

Respect and social inclusion is a critical aspect of promoting the continuing participation of senior Victorians. In its broadest sense, it involves ensuring a culture of inter-generational esteem, value and courtesy. It also involves the need to address discrimination in society and the workplace, ensure access to social networks and information, maintain financial and physical security and prevent social disadvantage.

Q How can willing participation by senior Victorians in the workforce be fostered and what avenues for continuing workforce participation are particularly effective?

Q What can be done to help senior Victorians who wish to continue to build up income for when they retire?

Q What avenues are effective in assisting senior Victorians to combine work with other activities, such as community and social participation?

Q What are the barriers to community, social and workforce participation by senior Victorians?

Q What are some examples of effective inter-generational social inclusion?

Q What are examples of "age friendly" environments that facilitate access, mobility and independence of seniors? What solutions work best in different communities?

Q How is the contribution of senior Victorians best recognised in Victorian communities and society as a whole?
LOOKING TO THE FUTURE
The Committee’s Terms of Reference with respect to this Inquiry are very broad. While the above is a guide to some issues the Committee would be interested in hearing about, individuals and groups are encouraged to contribute views and ideas about innovation in response to Victoria’s ageing population and the needs of senior Victorians now and into the future.

Q: What opportunities are there to develop strategies for a whole of government and community response to the needs of senior Victorians now and into the future?

Submissions
The Committee welcomes written submissions addressing one, multiple or all Terms of Reference of the Inquiry.

Submissions close on 2 September 2011.

Guidance regarding submissions can be found at: www.parliament.vic.gov.au/committees/submissions.html

Submissions can be provided in either hard copy or by email to the Executive Officer.

Email: janine.bush@parliament.vic.gov.au

Hard copy submissions should be sent to:

The Executive Officer
Family and Community Development Committee
Parliament House
Spring Street
EAST MELBOURNE VIC 3002

The Committee draws your attention that all submissions are public documents unless confidentiality is requested.

Please contact the Committee if confidentiality is sought, as this has bearing on how evidence can be used in the report to Parliament.
## Appendix 2

### List of submissions

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<tr>
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<th>Name and Organization</th>
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<tr>
<td>1</td>
<td>Mrs Suzanne Fallon</td>
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<td>2</td>
<td>Mr Geoff Williams</td>
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<td>3</td>
<td>Ms Michele Layet</td>
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<td>Ms Linda Lee</td>
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<td>5</td>
<td>Mr Ken McAvoy</td>
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<td>6</td>
<td>Mr Bob Burns</td>
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<td>7</td>
<td>Mr Roger and Mrs Shirley Brideson</td>
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<td>8</td>
<td>Professor Allan Borowski, School of Social Work and Social Policy, La Trobe University</td>
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<td>9</td>
<td>Association of Independent Retirees (AIR), Southern Cross Division</td>
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<td>10</td>
<td>Office of the Public Advocate (OPA)</td>
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<td>11</td>
<td>Ms Joan Sweet</td>
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<td>12</td>
<td>H.L. Stacey</td>
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<td>13</td>
<td>Mr Robert Williams</td>
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<td>Flemington Chinese Golden Age</td>
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<td>15</td>
<td>Mr Theo and Mrs Clare Wiggill</td>
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<td>16</td>
<td>Mr Oliver Raymond</td>
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<td>17</td>
<td>Dr Gitta Trexler</td>
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<td>Women’s Health Victoria</td>
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<td>19</td>
<td>Mr Graham Stoodley</td>
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<td>Benetas</td>
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<td>Financial Care Services</td>
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<td>22</td>
<td>Mr John Lord</td>
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<td>23</td>
<td>Professor Jeni Warburton, John Richards Initiative, Research into Aged Care in Rural Communities, Faculty of Health Sciences, La Trobe University</td>
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<td>24</td>
<td>Ms Lizzie Crosby</td>
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<td>25</td>
<td>Ethnic Communities’ Council of Victoria (ECCV)</td>
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<td>26</td>
<td>Mrs Susan Rubenstein</td>
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<td>27</td>
<td>Alzheimer’s Australia Victoria</td>
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<td>28</td>
<td>State Trustees</td>
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<td>29</td>
<td>Mr Tom Potter</td>
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<td>30</td>
<td>National Council of Women of Victoria</td>
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<td>31</td>
<td>Ms Dorothy Trezise</td>
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<td>32</td>
<td>LD and PJ Le Fevre</td>
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</table>
Ms Frances Lammus
National Seniors Australia, Knox Branch
Mrs Maree Jeffs
Yarra Ranges Council
Cardinia Shire Council
Peninsula Advisory Committee for Elders (PACE)
Council to Homeless Persons
Life Activities Clubs Victoria
Banyule City Council
OM:Ni
Union of Australian Women (UAW), Darebin Group
Hobsons Bay City Council
Mrs Patricia Taylor
Older Persons Consultative Committee, City of Port Phillip
Physical Disability Council Victoria
Ms Helen Jurcevic
beyondblue
Volunteering Victoria
The Australian Association of Gerontology (AAG)
Ms Hathalie Maree Phillips
Mr Lindsay Doig
National Ageing Research Institute (NARI)
Trustee Corporations Association of Australia
Greatconnections
Mrs Carole Adins
Mr Fred Jayne
Ms Marjorie Brewer
Ms Joan Leslee
Association of Independent Retirees Ltd (AIR), Victorian Division
Victorian Equal Opportunity and Human Rights Commission
Golden Plains Shire and Women’s Health Grampians
City of Boroondara
Australian Greek Welfare Society
Spectrum Migrant Resource Centre
Ms Patricia Williams
Ms Anne Scott
Housing for the Aged Action Group (HAAG)
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<tr>
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<td>73</td>
<td>Mr Ross Smith</td>
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<td>Retirement Village Association</td>
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<td>76</td>
<td>Positive Ageing Advisory and Volunteers Committee, City of Kingston</td>
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<td>77</td>
<td>Ms Margaret Cooper</td>
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<td>78</td>
<td>City of Melbourne</td>
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<td>79</td>
<td>Associate Professor Elizabeth Brooke, Business Work and Ageing Centre for Research, Swinburne University of Technology</td>
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<td>80</td>
<td>Aged and Community Care Victoria (ACCV)</td>
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<td>Victorian Employers’ Chamber of Commerce and Industry (VECCI)</td>
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<td>Recruitment and Consulting Services Association</td>
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<td>Visionary Design Development</td>
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<td>Marriott Support Services</td>
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Appendix 3

Public hearings

The Committee held the following Public Hearings around the State:

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<th>Date</th>
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<td>6 September 2011</td>
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<td>4 November 2011</td>
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6 September 2011, Melbourne

**Council on the Ageing (COTA), Victoria**
- Ms Sue Hendy, Chief Executive Officer
- Ms Debra Parnell, Manager, Policy Unit

**National Seniors Australia**
- Mr Peter Matwijic, General Manager, Policy and Research
- Professor Judith Sloan, Chair
- Mr Don McDonald, Chair, State Policy Advisory Group (Victoria)

**Victorian Council of Social Service (VCOSS)**
- Ms Kate Colvin, Policy Affairs Manager

**Retirement Village Association**
- Mr Andrew Giles, Chief Executive Officer
- Mr Craig Little, Senior Consultant, Currie Communications

**Rural Doctors Association of Victoria**
- Dr Michael Moynihan, President

**Business, Work and Ageing Centre for Research, Swinburne University of Technology**
- Associate Professor Elizabeth Brooke, Director of Research

**Carers Victoria**
- Ms Anne Muldowney, Policy Advisor, Policy and Research

**U3A Network Victoria**
- Ms Elsie Mutton, President
### 9 September 2011, Melbourne

**Residents of Retirement Villages Victoria**  
Mr Terry MacDonald  
President

**Victorian Health Promotion Foundation (VicHealth)**  
Associate Professor John Fitzgerald  
Acting Chief Executive Officer  
Dr Julie Woods  
Manager, Nutrition and Food Systems

**Victorian Employers Chamber of Commerce (VECCI)**  
Mr Andrew Rimington  
Senior Manager, Employment, Education and Training  
Ms Raewynn Black  
Manager, Grey Matters Project

**Elder Rights Advocacy**  
Ms Mary Lyttle  
Chief Executive Officer  
Mr Alan Field  
Treasurer, Committee of Management  
Mr Ken Thornton  
Committee of Management

**Seniors Rights Victoria**  
Ms Jenny Blakey  
Manager  
Ms Jenny Lord  
Service Promotion Officer  
Ms Philippa Campbell  
Advocate

**Healthy Ageing Research Unit, Monash University**  
Professor Colette Browning  
Head, Primary Care Research Unit  
Professor Susan Feldman  
Director, Associate

**National Ageing Research Institute (NARI)**  
Dr Bruce Barber  
Deputy Director, Biomedical  
Ms Melanie Joosten  
Master of Social Work  
Ms Debra O’Connor  
Deputy Director, Operations

**The Australian Association of Gerontology (AAG)**  
Ms Marie Curls  
Vice-President  
Ms Robin Harvey  
Executive Committee Member  
Dr Ralph Hampson  
Member

### 5 October 2011, Melbourne

**Victorian Equal Opportunity and Human Right Commission (VEOHRC)**  
Ms Karen Toohey  
Acting Chief Executive Officer  
Ms Rivkah Nissim  
Senior Advisor, Strategic Projects

**University of Melbourne**  
Professor Simon Biggs

**beyondblue**  
Ms Suzanne Pope  
Director, Research and Planning  
Ms Sue Gherdovich  
Program Manager, Population Health

**Volunteering Victoria**  
Ms Dianne Embry  
Chief Executive Officer

**Association of Independent Retirees (AIR)**  
Ms Linda Martin  
President, Victorian Division  
Mr Gordon Weller  
Past President
Appendices and Bibliography

Australian Institute for Primary Care and Ageing, La Trobe University
Professor Yvonne Wells
Professor Jeni Warburton

Benetas
Mr Alan Gruner Research and Development Manager
Ms Jane Boag Executive Manager Residential Services

Brotherhood of St Laurence
Ms Christine Morka General Manager, Retirement and Ageing
Ms Helen Kimberley Principal Researcher

18 October 2011, Melbourne

Municipal Association of Victoria (MAV)
Mr Rob Spence Chief Executive Officer
Ms Clare Hargreaves Manager, Social Policy
Ms Jan Bruce Policy Advisor

Life Activities Clubs Australia
Mr Lindsay Doig President
Mr Don Wollmer Deputy President
Dr Heather Wheat Secretary

Ethnic Communities Council of Victoria (ECCV)
Ms Marian Lau Deputy Chair
Ms Galina Kozoolin Policy Officer, Aged Care

Australian Industry Group
Mr Tim Piper Director, Victoria
Ms Lee-Anne Fisher Manager, Policy and Projects, Education and Training

Recruitment and Consulting Services Association
Mr Steve Granland Chief Executive Officer
Mr Charles Cameron Policy Advisor
Mr Simon Schweigert Secretariat
Mr John Cooper National Indigenous and Diversity Manager

Australian Bureau of Statistics (ABS)
Mr Lane Masterton Regional Director, Victoria

Federation of Community Legal Centres Victoria
Ms Carol Stuart Solicitor, Springvale Monash Legal Service
Ms Fiona Warner Solicitor, JobWatch

State Trustees
Mr Tony Fitzgerald Managing Director
Ms Angela Burton Manager, Personal Financial Solutions
## 21 October 2011, Melbourne

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<tr>
<th><strong>Consumer Affairs Victoria</strong></th>
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<tr>
<td>Dr Claire Noone</td>
<td>Director</td>
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<th><strong>Housing for the Aged Action Group</strong></th>
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<tr>
<td>Ms Wyn Stenton</td>
<td>Chairperson</td>
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<tr>
<td>Mr Jeff Fiedler</td>
<td>Tenancy Advice and Policy Worker</td>
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<td>Ms Ena Ahern</td>
<td>Assistance with Care and Housing for the Aged Program</td>
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<td>Ms Rita Butera</td>
<td>Executive Director</td>
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<td>Ms Rose Durey</td>
<td>Manager</td>
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<tr>
<td>Ms Allie Dawe</td>
<td>Advisor on Ageing</td>
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<tr>
<td>Ms Elizabeth Newman</td>
<td>Vice-President and former coordinator of Standing Committees</td>
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<tr>
<td>Major Jennifer Cloke</td>
<td>Coordinator of Standing Committees, Territorial Seniors’ Ministries Consultant, Salvation Army</td>
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<td>Ms Dianne Biermann</td>
<td>Policy Officer</td>
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<td>Dr David Sykes</td>
<td>General Manager, Education Services</td>
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<th><strong>Victorian Trades Hall Council</strong></th>
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<tr>
<td>Mr David Cragg</td>
<td>Assistant Secretary</td>
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<td>Mr Luke Hilakari</td>
<td>Industrial and Campaigns Officer</td>
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<td>Mr Perce White</td>
<td>Member, Veterans Committee</td>
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<td>Mr Roger Wilson</td>
<td>Member, Veterans Committee</td>
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<tr>
<td>Mr Ian Thomas</td>
<td>Member, Veterans Committee</td>
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<th><strong>Aged and Community Care Victoria (ACCV)</strong></th>
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<tr>
<td>Mr Gerard Mansour</td>
<td>Chief Executive Officer</td>
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<td>Mr James Henshaw</td>
<td>Policy Research Officer</td>
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<th><strong>Uniting Aged Care</strong></th>
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<td>Ms Sandra Bygrave</td>
<td>Service Development Manager</td>
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## 24 October 2011, Melbourne

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<tr>
<th><strong>Australian Housing and Urban Research Institute (AHURI)</strong></th>
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<tr>
<td>Dr Andrew Hollows</td>
<td>Deputy Executive Director</td>
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<th><strong>Diabetes Australia, Victoria</strong></th>
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<tr>
<td>Professor Greg Johnson</td>
<td>Chief Executive Officer</td>
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<th><strong>Victorian Healthcare Association</strong></th>
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<tr>
<td>Mr Trevor Carr</td>
<td>Chief Executive Officer</td>
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### 4 November 2011, Geelong

**City of Greater Geelong**
- Ms Karen Pritchard, Manager, Aged and Disability
- Ms Kathryn McBride, Coordinator, Care Services

**Diversitat**
- Mr Michael Martinez, Chief Executive Officer
- Ms Lynne Shanahan, Aged Support Manager

**Country Women’s Association of Victoria**
- Ms Dorothy Coombe, Deputy State President
- Mrs Lynette Wilson, Geelong President

**Geelong Royal District Nursing Service**
- Ms Rosemary Hogan, Executive General Manager
- Ms Sue Minters, Care Manager

### 18 November 2011, Bendigo

**City of Greater Bendigo**
- Ms Pauline Gordon, Director, Community Wellbeing
- Ms Deb Simpson, Acting Manager, Community and Cultural Development
- Mr Rod Flavell, Manager, Aged and Disability Services

**The Association for International Sport for All**
- Mr Brian Dixon, Founder

**Royal District Nursing Service**
- Ms Rosemary Hogan, Executive General Manager
- Ms Robynn Daley, Manager, Regional Services
- Ms Prue Todd-Reid, District Nurse

**Men in Sheds, City of Greater Bendigo**
- Ms Anne-Marie Roberts, Team Leader, Planned Activity Group
- Ms Alana Cooper, Community Care Coordinator
- Mr David Reid, Supervising Coordinator

### 5 December 2011, Melbourne

**Department of Health**
- Ms Jane Herington, Director
- Ms Barbara Mountjournis, Manager, Senior Victorians
- Ms Georgia Nicholas, Manager, Policy and Programs, Aged Care
Appendix 4

Interstate investigations

The Committee held meetings with the following organisations in The Australian Capital Territory and Western Australia:

7 October 2011, Australian Capital Territory

- ACT Office for Ageing
- Ambassador for Ageing
- Department of Health and Ageing
- Department of Families, Housing, Community Services and Indigenous Affairs
- Treasury
- Productivity Commission

17 February 2012, Western Australia

- Minister for Commerce, Government of Western Australia
- WorkCover, Western Australia
Appendix 5

Study tour of the UK and the Netherlands

The Committee travelled to the United Kingdom and the Netherlands on a study tour from 7 May 2012 to 17 May 2012. The purpose of the study tour was to investigate issues relating to best practice in support of ageing well.

The Committee met with the following organisations:

8 May 2012, Cardiff, Wales

Directorate of Health Services & Children, Welsh Government
Welsh Assembly Parliament
Older People’s Commissioner for Wales
Age Cymru
Age Alliance Wales
National Partnership Forum

9 May 2012, Edinburgh, Scotland

City of Edinburgh Council
Scottish Government
Scottish Parliament
Cross Party of Group on Older People, Age and Ageing


King’s Fund
Local Government Association
Age UK
Action on Elder Abuse

14 May 2012, Amsterdam, Netherlands

Hogewey Nursing Home

15 May 2012, Rotterdam, Netherlands

Apartments for Life Project
Opportunities for Participation by Victorian Seniors

15 May 2012, The Hague, Netherlands
Australian Ambassador to the Netherlands

Department for Work and Pensions
House of Commons
Equality and Human Rights Commission
Victorian Agent-General
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Appendices and Bibliography


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Appendices and Bibliography


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National Seniors Australia (2011) *The ageing experience of Australians from migrant backgrounds*. Canberra, National Seniors Australia.


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Stammer, D. ‘Lucky country’s retirees will get it better than most’, The Australian, 13 July 2011.


Opportunities for Participation by Victorian Seniors

Victorian Auditor General (2011) Local community transport services: The transport connections program Melbourne, VAGO.


