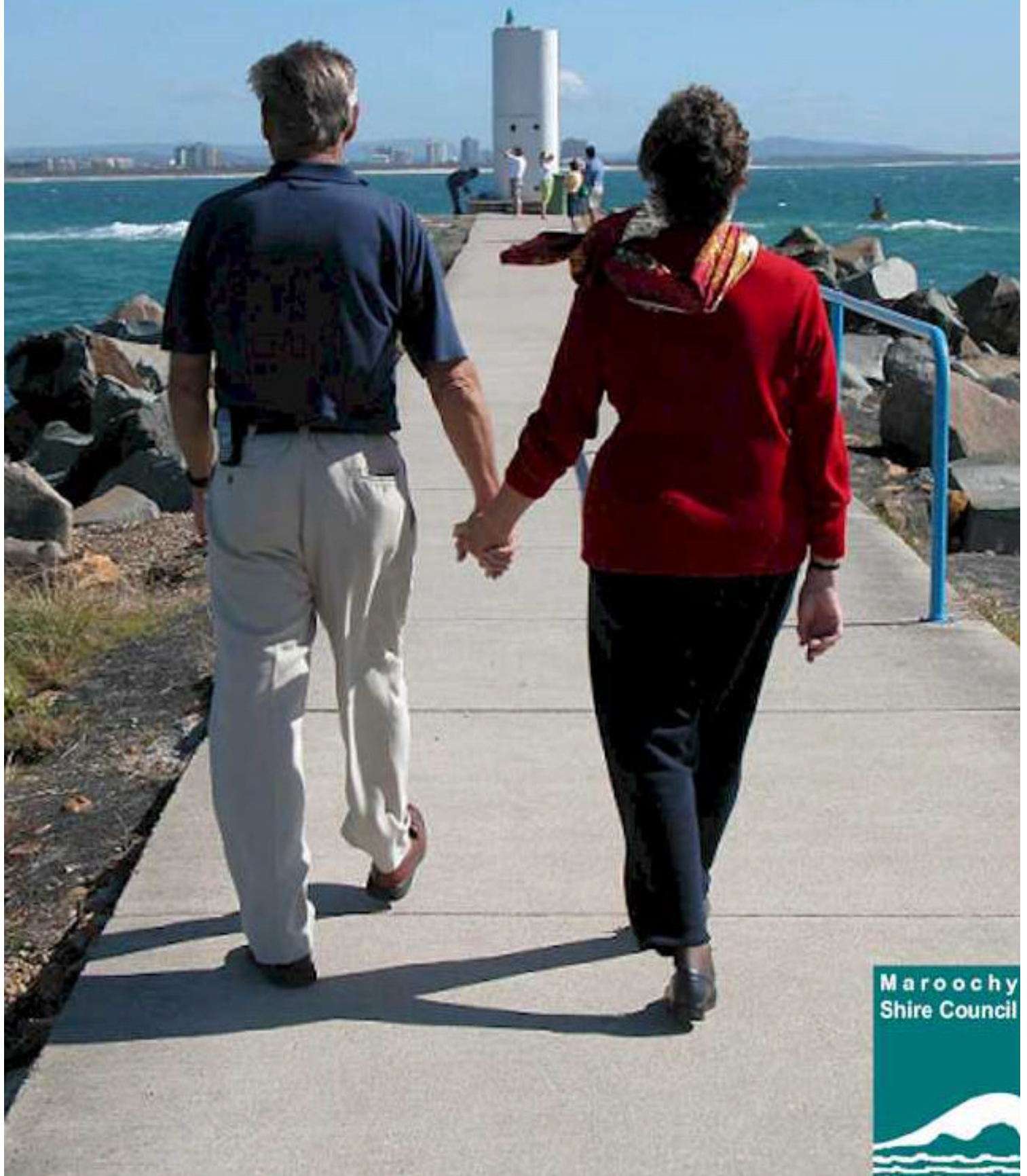


# Ageing Population

*Ageing Population*

Discussion Paper June 2003



Maroochy  
Shire Council



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## Forward

Recently we commissioned the development of this Discussion Paper as part of a range of initiatives to better understand the ageing population phenomenon and its local impacts.

We are all well aware now that Australia has an ageing population. The consequences for our health system and retirement incomes are regularly debated across the national media. Not much attention however has been given to the local impacts of the ageing population.

What will these changes mean for our community and for Maroochy Shire? The Shire is currently undergoing profound demographic changes and growth. Part of this change is our own ageing population. By the year 2021 there will be almost 40,000 people in the Shire who are over the age of 65 years and an increasing number of people will be living in single person households.

We are continuing to develop this strategy along with understanding the impact that the "Baby Boomer" generation will have.

I hope that this report will be widely read and lift the level of debate in our community, and contribute in it's own small way to assisting us all to envision a future for the Shire where there is quality of life for older people within a harmonious community.

Kelvin Spiller  
CEO

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# Table of Contents

<i>Section</i>	<i>Page</i>
<b><i>Executive Summary</i></b>	<b><i>1</i></b>
<b><i>1. Introduction</i></b>	<b><i>3</i></b>
1.1 Purpose of Discussion Paper	3
1.2 Scope	3
1.3 Process to Date	4
1.4 Policy Statement	5
<b><i>2. The Ageing Population in Maroochy Shire</i></b>	<b><i>6</i></b>
2.1 Overview of Maroochy's Ageing Population	6
2.2 Economic Factors	8
2.3 Health	9
2.4 Servicing the Ageing Population	9
2.5 Summary of Ageing Population Trends	11
<b><i>3. Understanding The Issues</i></b>	<b><i>12</i></b>
3.1 Why has ageing become an issue?	12
3.2 Healthy Ageing	12
3.3 Lifelong Learning	14
3.4 Information Provision	15
3.5 Recreation and Leisure	16
3.6 Housing, Accommodation and Neighbourhood Design	18
3.7 Social Isolation	22
3.8 Transport and Access	24
3.9 Safety and Security	26
3.10 Community Attitudes	27
3.11 Employment, Volunteering and Mentoring	29
3.12 Changing Context	32
<b><i>4. Funding for Services and Programs</i></b>	<b><i>33</i></b>
4.1 Funding Delivery	33
4.2 Community Care	34
4.3 Residential Care	34
4.4 Staying at Home	35
<b><i>5. Strategic Frameworks</i></b>	<b><i>37</i></b>
5.1 State and Commonwealth Government Responses	37
5.2 Implications for Local Government	38
5.3 The Imperatives for Maroochy Shire	38
<b><i>6. Looking to the Future</i></b>	<b><i>40</i></b>
6.1 Older Persons Strategy – Terms of Reference	40
6.2 Older Persons Strategy – Framework for Maroochy Shire Council	41
<b><i>Bibliography</i></b>	<b><i>46</i></b>

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# *Executive Summary*

Maroochy Shire and the Australian population in general is about to experience an unprecedented ageing of the population. Significant changes will flow for all aspects of social and economic life, as the proportion of older people in the community increases. The sheer magnitude of the demographic change requires a pro-active approach in order to ensure quality of life for older people, harmony between the generations and positive outcomes for the whole population. (National Strategy for an Ageing Australia 2000).

*How can local governments such as Maroochy Shire Council respond to the needs of the ageing community under the pressure of population increase and change?*

*What does Council need to know and understand in order to be proactive and to ensure that the underlying assumptions in planning for the future are well informed?*

*What will the older population expect and even demand of Council as the number of older people increases and the pressure on services, facilities and the environment increases?*

Council has a significant effect on the built environment via its mandate as planner and regulator. Council is an advocate and provider of services in the community, with the means to facilitate creative local solutions and practices. In particular Council is one of the most influential and significant points of governance with regard to neighbourhood and community relations.

In order to ensure that older people's concerns and needs are met, Council must:

- **Understand** the issues through research, consultation and stakeholder participation;
- **Emphasise** the issues of greatest concern through promotion, policy development and well informed lobbying; and
- **Attend to the issues** through the development of a strategy and strong partnerships.

By the year 2021 there will be almost 40,000 people in Maroochy Shire who are over the age of 65 years and an increasing number of people will be living in single person households.

The anticipated social impacts of the increase in the aged population has prompted both the State and Commonwealth Governments to release Strategic Frameworks to address the issues of older people. Individual local governments may initiate individual policies for a limited range of services, however it will be essential that local governments act together to lobby State and Commonwealth Governments on behalf of their communities.

Council has an obligation to the community to provide leadership and governance. Within this lies the responsibility for adequate planning, service provision, and ensuring that the aspirations of the local community are attended to. Guiding policy and principles are essential in framing the approach, and the varying needs of particular sectors of the population, such as the aged must be reflected in the strategic allocation of resources.

"Maroochy Cares, Maroochy Dares" is the vision for the Shire; a statement that invites a proactive and informed effort to address the issues of population growth and social change. The key outcomes and strategies identified in the Corporate Plan 2001-2004, encompass and frame many of the issues for older people. However, to ensure sufficient focus and emphasis on this important social issue, a policy statement that reflects Council's commitment to older people is required.

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Maroochy Council's Corporate Plan prompts a range of actions that need to be addressed to formulate clear, accountable and strategic directions for older person's services and programs. At present, however, Council's commitment to older people can only be demonstrated through activities such as the one week promotion of older people during Senior Citizens Week, rebates for pensioners, an Access Plan, assistance to organisations who are eligible for community grants, and some service enhancements through libraries.

The current commitment from Council is insufficient to address the pressure the Shire will experience from the increase in the aged population, and therefore an urgent and more comprehensive review is required to ensure Council makes the most strategic contribution possible.

The Corporate Planning Framework provides a comprehensive means to assess Council's responsibilities and capabilities with regard to assisting older people in Maroochy Shire. In many instances however, Council will need to address the issues in cooperation with other local governments in Queensland in order to be more influential with State and Commonwealth Governments and to lobby for resources for the local community. Section 6 of this discussion paper presents a proposed framework and summary of issues for the development of an Older Persons Strategy for the Shire.

The way in which Council responds to the issues of the increased ageing of the population and the concerns of older people, may be through advocacy, facilitation, the regulation of the built environment, or direct service provision. Whatever the responses, it is essential that the community and Council prepare for the changes in a cooperative and proactive partnership.

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# 1. Introduction

It is important to emphasise that ageing is not a social problem, but a life process. Older people are a diverse group in terms of health, well being, financial security, family links, access to transport and as a consequence, they have differing needs. The majority of older people enjoy a healthy and independent old age and therefore age and disease should not be used as interchangeable terms. Although ageing is a biological process, its outcomes and qualities are influenced by the social and community spheres in which it takes place.

A review of relevant literature, including policy documents, highlights two prominent components of the discourse on ageing and older people. One aspect focuses on the demographic “time bomb”, which considers the significant and increasing proportion of the older population with the resultant growing burden that an ageing population will place on future health and welfare resources. The other dominant area focuses on the healthy, productive or positive aspects of ageing that seeks to enhance the capacity of the individual to promote a more positive view of ageing within our society. Both components need to be considered in the development of a strategic approach for older persons in Maroochy Shire.

## 1.1 Purpose of Discussion Paper

The objectives of this Discussion Paper are:

- To explore themes in relation to the ageing population and the likely effects of that population on Maroochy Shire;
- To identify critical issues which will assist Council to integrate the ageing population in its strategic policy and land use planning; and
- To make recommendations on service functions that Council may need to explore in future strategy development.

## 1.2 Scope

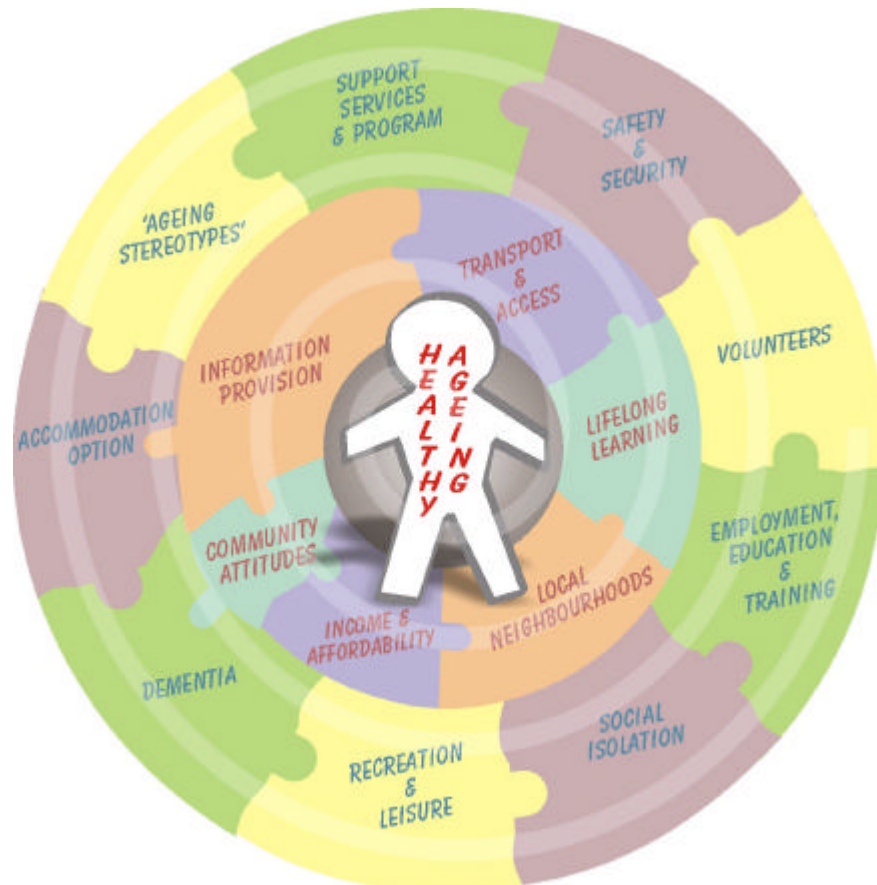
Throughout this Discussion Paper a number of terms will be used interchangeably to refer to the group of the population who are commonly termed older people or the aged. These terms may refer to those aged 55 years or older, in some case 60 or 65 and in others case those older still. This reflects the attitudes of the older community, many of which do not wish to be labelled or limited by a classification. Classifying people according to age can be misleading. Like the rest of the population, diversity among older people is great. There is a 30-year gap between age 65 and age 95. This span means that interests and life experiences differ considerably. Hence, the definition of ageing used in this Paper is a flexible one with different applications in different contexts.

The following themes are explored as a means of providing the context for discussion about the contributions and responsibilities of governments and the community to ensure a standard of living that provides quality of life for older people and their communities:

- Healthy ageing;
- Life long learning;
- Information provision;
- Recreation and leisure;
- Housing accommodation and neighbourhood design;
- Social isolation;
- Transport and access;
- Safety and security;
- Community attitudes;

- Employment, mentoring and volunteering.

The following diagram depicts the array of issues considered in this Discussion Paper; all of them linked and closely interrelated:



For each of the theme areas, the Discussion Paper provides background information, good practice examples, and options for Maroochy Shire to consider in the development of an Ageing Population Strategy.

### 1.3 Process to Date

Maroochy Shire Council hosted an ageing population forum in December 2001. The forum attracted approximately 20 stakeholders from around the Shire to explore and brainstorm the range of issues connected with the ageing population. The workshop identified the following key issues of concern:

- Physical/social accessibility;
- Transport;
- Information;
- Planning, design and location of residential facilities;
- Early renewal, size and affordability, gauge of communities;
- Choice;
- Senior friendly Shire;
- Public space/shade;
- Appropriate housing; and
- Community and personal safety.

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Council can directly influence the concerns raised within this workshop through the development of an Ageing Population Strategy and particularly with regard to the planning and design of residential and public spaces, the provision of information, the promotion of positive community relations, and the provision and advocacy for services.

#### **1.4 Policy Statement**

In order to guide the development of Council's response to older people in the community, a policy statement is required. This may include a commitment to enhance quality of life for older residents both now and in the future through:

- Direct provision of appropriate services, facilities, activities and support;
- Collaboration, co-operation and partnerships with other Council's and spheres of government, non-government and community organisations and the wider community;
- Research and analysis of issues for older people;
- Advocacy and lobbying;
- Facilitation of opportunities;
- Information and referral;
- Celebration of older residents;
- Maximising opportunities for participation; and
- Integration in the community.

## 2. The Ageing Population in Maroochy Shire

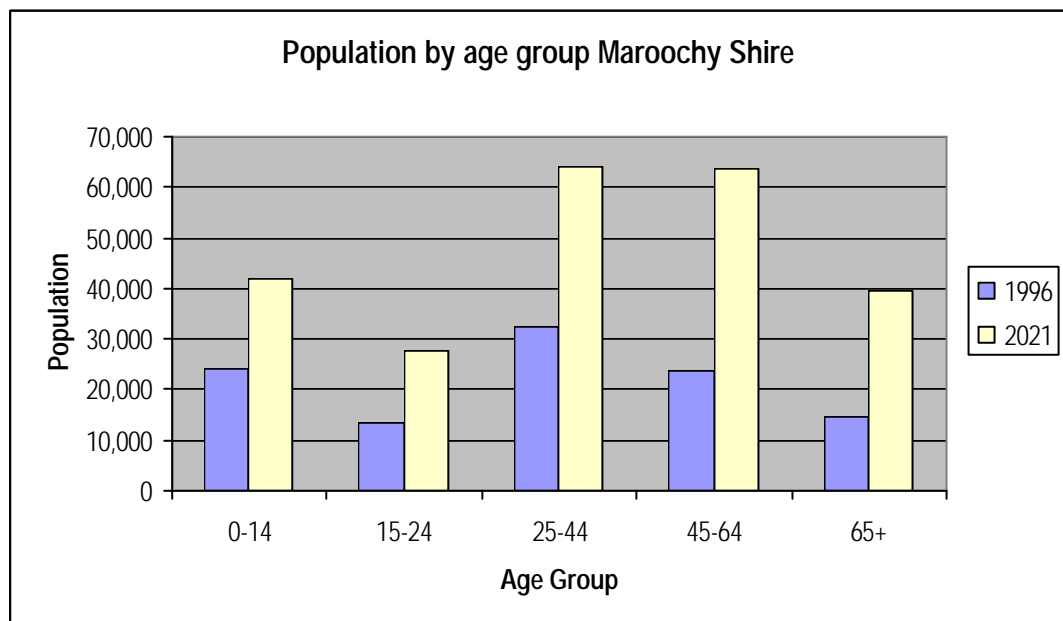
The rate at which Australia's population is ageing is increasing. This increase is expected to continue for the next 40 years (AIHW 1995). Of particular interest, in terms of the potential need for aged care services, is the relative size of older age groups (ie 85 years and over) within the older population. The Australian Institute of Health and Welfare suggest:

*"...it is among this older age group that severe handicap and formal service use is concentrated; hence the need for services and assistance is likely to grow more rapidly than would be predicted simply on the basis of growth in the total aged population."*  
(AIHW 1995)

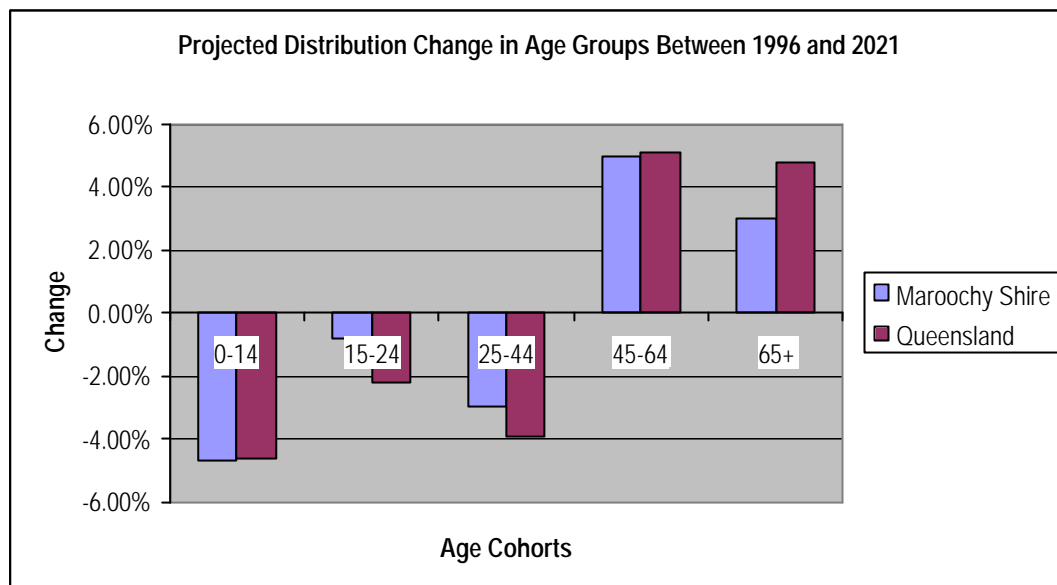
### 2.1 Overview of Maroochy's Ageing Population

#### 2.1.1 Population

The 2001 census showed that there were 21,492 people aged 65 years and over in Maroochy Shire. The population aged 65 years and over in Maroochy Shire reflects 16.6% of the total population in 2001. The population of older people is projected to increase a further 12% by 2016. (Maroochy Shire Council 2000). The effects of this increase will be further exacerbated by the overall high growth rate in the Shire and region and the consequent pressure on existing infrastructure.



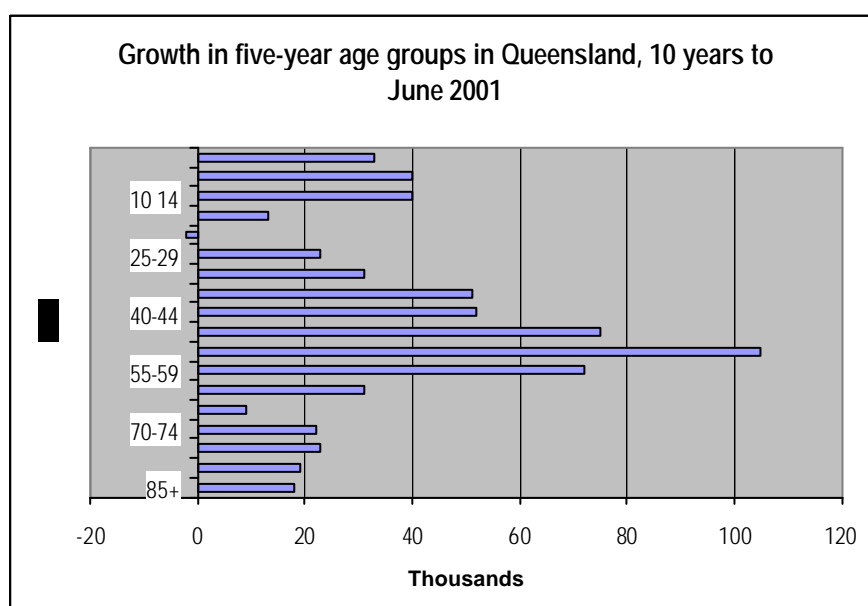
Source: Department of Local Government and Planning, Demographic and Housing Profile Maroochy Shire



Source: Department of Local Government and Planning, Demographic and Housing Profile Maroochy Shire

The median age in the Shire in 1996 was 36 years and by 2021 this is expected to increase to 40 years (DLGP).

The effect of the change in the demographic age profile for Maroochy Shire is very profound, albeit not as marked as the overall State projections. This has implications as much for older people in the community as for the younger population. The provision of vital services and infrastructure will need to increase in the areas of health service, transportation, and recreational facilities in particular to cater to the demands and needs of older people. With a decreasing proportion of 25-44 year olds supporting the education and nurturing of young people and the care of the older population, alternative frameworks will have to be explored. It is vital that the capacity of the community to attend to this dramatic shift in demography is developed.



Source: Department of Local Government and Planning, Queensland Population Update No 2, Based on 2001 Census

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The demographic "time bomb" is clearly depicted in the above chart. Although there is an apparent 10 to 15 years before the impacts of this demographic pattern can be truly known, this is a relatively short period of time to prepare for a change of this magnitude.

Concentration of older people in the Shire, as an approximate proportion of the total SLA population indicates that the 65-80 age group is highest in Maroochydore SLA 18.27% followed by Mooloolaba SLA 17%; Buderim SLA 13%; Nambour SLA 12.5%; Coastal North 12%; and the 80+ age group is highest in Nambour SLA 7%; followed by Buderim SLA 4% and Maroochydore 3.5%. (Maroochy Shire Council 2000) This pattern of distribution is partly influenced by the current location of major hostel and nursing home developments within these areas.

Consideration of older people must also recognise that people of indigenous origin experience a much lower life expectancy than non-indigenous Australians. ABS data shows that the national life expectancy of indigenous males is 56 years compared to 75 for non-indigenous; and similarly for females 66 years for indigenous and 81 years for non-indigenous. Although these figures have improved over the past decade there is still a substantial difference between the two (ABS 1997).

This lower life expectancy (ABS 1997) may mean that those people regarded as elderly may be in their 40s or 50s. This suggests that the age group at which it is appropriate for indigenous people to be in receipt of aged services is lower than for non-indigenous Australians.

### **2.1.2 Housing**

The structure of families and households is also changing, creating in turn a need for different forms of housing. Maroochy Shire has a higher proportion of one and two person households, with the high proportion of couples without offspring significantly contributing to this trend. Lone person households in the Shire have increased over the last decade from 6.64% in 1986 to 8.85% in 1996. Mooloolaba had the highest percentage of lone person households at 10.24%.

These factors necessitate a greater range of options to satisfy a wider range of need. When planning housing options for older people the importance of the relationship between housing and community support services needs to be considered.

While some older people prefer age specific housing, others do not. The design and development of communities where people of all ages can live safely, in a variety of housing types, with adequate access to local facilities and activities, allows older people to be active members of the community.

With ageing population comes an increasing number of people who are living alone and an increasing likelihood of social isolation. Within the 45-55 age group in Maroochy Shire, 24.6% are separated and 30.2% are divorced. This indicates that there could be a higher number of older single people in the Shire in 10-15 years time.

## **2.2 Economic Factors**

Less than 2% of people aged 65 and over in Maroochy Shire were in the workforce in 1996 (Centre for Health and Drug Education 2001 p. 8). For people in the 65-75 age bracket in 1996, their income was similarly low to that of people in the 55-64 age category where the largest percentage in this age group (2291 persons) earned \$6240-\$8320 per annum. By the age of 75, the number of people earning \$1,500 or over per week had dropped to 32 persons. These numbers reflect the large numbers of older people in Maroochy Shire relying on government pensions or benefits for their income.

The numbers are also consistent with the Queensland statistics, which show that 10.6% of aged couples and 35.8% of aged singles live in poverty (Henderson Poverty Line), and are significant when applied to the number of single aged in Maroochy Shire. This has implications for access to community services in an environment that is increasingly moving towards a user pays system.

### 2.3 Health

Good health is a major concern of the elderly as it can make the difference between living an independent lifestyle and restricted mobility or institutionalisation. In the major non-surgical areas of care, conditions such as heart disease, strokes, lung disease and dementia are significant causes of admission to hospital. In the surgical area, the major disease categories indicate that orthopaedic problems (fractures and replacements), gastrointestinal disease (including bowel cancer) and breast cancer are significant. Hearing and vision loss are also two important influences on older people's capacity for independence, which do not appear in the major disease category data. The principal cause of death in the Shire is disease of the circulatory system.

Conditions such as arthritis, cerebrovascular accidents/strokes and heart disease are all contributors to increased disability. These types of conditions are associated with problems of mobility and can contribute to social isolation and the incidence of house-bound older people.

Dementia is an issue of concern for communities with an ageing population. The growing number of older people and this high incidence of dementia in the population aged 75 years and over raises questions in relation to the availability of appropriate housing and other services. By applying national dementia prevalence estimates to the Maroochy Shire 1996 population, it can be estimated that approximately 6% of people aged 60 and over in the Shire have dementia.

### 2.4 Servicing the Ageing Population

The following table provides a snapshot of current provision of services and facilities for older people in Maroochy Shire. It is not a comprehensive list, and Council's Community Information Services holds a more comprehensive database of the range of services, organisations and activities within the region.

Service Type	Provider	Target Client Group
Information	<ul style="list-style-type: none"> <li>Community Information Services (CIS) – Maroochy Shire Council</li> </ul>	<ul style="list-style-type: none"> <li>Sunshine Coast</li> </ul>
Learning/ education	<ul style="list-style-type: none"> <li>Library services – Maroochy Shire Council</li> <li>U3A</li> </ul>	<ul style="list-style-type: none"> <li>Maroochy Shire</li> <li>Maroochy Shire</li> </ul>
Community & Neighbourhood	<ul style="list-style-type: none"> <li>Buderim War Memorial Community Association</li> <li>Maroochy Neighbourhood Centre</li> <li>Nambour Community Centre</li> <li>Safe and Confident Living Program</li> <li>Sunshine 60 and Better Group Inc</li> </ul>	<ul style="list-style-type: none"> <li>Buderim</li> <li>Cotton Tree</li> <li>Nambour</li> <li>Maroochy Shire</li> <li>Maroochy Shire</li> </ul>

Service Type	Provider	Target Client Group
Home Care & Support	<ul style="list-style-type: none"> <li>Blackall Range Care Group</li> <li>Blue Care Maroochy District</li> <li>Cittamani Hospice Services</li> <li>Maroochy Home Assist/Secure</li> <li>Nambour &amp; District Inc</li> <li>The Share &amp; Care Assoc</li> <li>Silver Cord Telephone Reassurance Service – St Johns Ambulance</li> <li>St Luke's Nursing Services</li> </ul>	<ul style="list-style-type: none"> <li>Flaxton</li> <li>Maroochy Shire</li> <li>Maroochy Shire</li> <li>Maroochy Shire</li> <li>Nambour</li> <li>Sunshine Coast</li> <li>Maroochy Shire</li> <li>Sunshine Coast</li> </ul>
Meals on Wheels	<ul style="list-style-type: none"> <li>Coolum &amp; District Meals on Wheels Assoc</li> <li>Maroochydhore Meals on Wheels</li> <li>Nambour Meals on wheels</li> </ul>	<ul style="list-style-type: none"> <li>Coolum</li> <li>Maroochydhore</li> <li>Nambour</li> </ul>
Advocacy	<ul style="list-style-type: none"> <li>Central Sunshine Coast Committee on the Ageing</li> <li>Association of Independent Retirees Inc – Sunshine Coast Branch</li> <li>Australian Pensioners and Superannuants League</li> <li>National Seniors Association Maroochy Branch Inc</li> </ul>	<ul style="list-style-type: none"> <li>Maroochy Shire</li> <li>Sunshine Coast</li> <li>Maroochydhore and Kenilworth</li> <li>Maroochy Shire</li> </ul>
Support Groups	<ul style="list-style-type: none"> <li>Alzheimers Disease Carer Support Group</li> <li>Dementia Association Sunshine Coast Inc.</li> <li>Sunshine Coast Arthritis Support Group</li> </ul>	<ul style="list-style-type: none"> <li>Maroochy Shire</li> <li>Sunshine Coast</li> <li>Sunshine Coast</li> </ul>
Respite	<ul style="list-style-type: none"> <li>Coolum Respite Services</li> <li>Day Therapy Centre</li> <li>Maroochydhore Day Respite Care Centre</li> <li>Sundowners Day respite Centre</li> <li>Sunshine Coast Regional Carer Respite Centre</li> </ul>	<ul style="list-style-type: none"> <li>Maroochy Shire</li> <li>Maroochy Shire</li> <li>Maroochy Shire</li> <li>Maroochy Shire</li> <li>Sunshine Coast</li> </ul>
Housing	<ul style="list-style-type: none"> <li>Sunshine Coast Regional Housing Inc</li> </ul>	<ul style="list-style-type: none"> <li>Sunshine Coast</li> </ul>
Nursing Homes	<ul style="list-style-type: none"> <li>Ninderry Nursing Home</li> <li>Hibiscus House Nursing Home</li> <li>James Grimes Care Centre, Sundale Village</li> <li>Nambour Nursing Home</li> </ul>	<ul style="list-style-type: none"> <li>Bli Bli</li> <li>Nambour</li> <li>Nambour</li> <li>Nambour</li> </ul>
Retirement Villages/Hostels	<ul style="list-style-type: none"> <li>Allora Gardens Lifestyle Villas</li> <li>Bli Bli Retirement Village</li> <li>Bowder Lodge</li> <li>Buderim Garden Village</li> <li>Buderim Meadows Hibiscus Resort</li> <li>Coolum Beach and District Aged Care Organisation</li> <li>Eden Lea Retirement Village</li> <li>Immanuel Gardens</li> <li>Laurel Springs Retirement Village</li> </ul>	<ul style="list-style-type: none"> <li>Maroochydhore</li> <li>Bli Bli</li> <li>Nambour</li> <li>Buderim</li> <li>Buderim</li> <li>Coolum</li> <li>Buderim</li> <li>Buderim</li> <li>Nambour</li> </ul>

Service Type	Provider	Target Client Group
	<ul style="list-style-type: none"> <li>• Lindsay Gardens</li> <li>• McGowan Lodge Hostel</li> <li>• Sundale Garden Village</li> <li>• Nicklin Lodge Hostel</li> <li>• Nyra Gardens Hostel</li> </ul>	<ul style="list-style-type: none"> <li>• Buderim</li> <li>• Nambour</li> <li>• Nambour</li> <li>• Nambour</li> <li>• Buderim</li> </ul>

In addition there are many sporting, cultural, recreational and leisure groups and facilities across Maroochy Shire. Several peak organisations and Government agencies also have regional offices on the Sunshine Coast.

## 2.5 Summary of Ageing Population Trends

The more traditional understanding of older people is no longer relevant to the community – nationally or locally. The point in which one becomes older is increasingly ambiguous. Chronological age is an unreliable indicator. Changing employment and health trends no longer make the transition from work to retirement a reliable indicator of old age. People are in many cases able to remain longer in the work place, to move to early retirement, to sustain good health for longer and obtain assistance to remain at home when support is needed. Diversity is the most defining characteristic for people in Maroochy Shire. However there is a general pattern of financial disadvantage with relatively low incomes.

Changing demographic trends present challenges to ensure the principles of inclusiveness, participation and accessibility are achieved. This will also create opportunities for older people to continue to play an important role within the community.

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## 3. *Understanding The Issues*

### 3.1 Why has ageing become an issue?

To determine why ageing has become an issue it is important to consider the social and demographic dimensions raised in the preceding chapters. In addition we must recognise that older people are not a homogenous group. The needs and issues of older people are as diverse and complex as older people themselves are. One of the key themes identified is the need for flexibility and responsiveness to reflect this diversity. It is important to recognise that many issues and therefore solutions, such as transport and isolation, are inextricably linked and should therefore be addressed in a holistic manner, rather than addressing each issue independently.

It is also important to note that many of the issues discussed are not unique to Maroochy Shire and can be equally applied to older people on a regional, statewide or national basis. The magnitude of the issue and the concern about the capacity of communities to manage the changes has prompted both State and Commonwealth policy and strategies to evolve. It is essential that local governments participate proactively to ensure an equitable and appropriate share of intergovernmental responsibilities.

### 3.2 Healthy Ageing

Healthy ageing can be described as older people's ability to maintain their independence and involvement in society. Important factors within the concept of healthy ageing include:

- attitudes to ageing and older people's attitudes to the ageing process;
- appropriate housing, safe neighbourhoods and communities, adequate income; and
- access to services such as public transport, health and community services, housing and recreational activities.

Healthy ageing is therefore a broadly conceived notion that includes many areas that involve local government. Local government has a key role to play in promoting healthy ageing through:

- encouraging healthy attitudes to ageing through such events as seniors week and other awareness raising activities;
- the planning of housing that involves a variety of housing types including those with smaller lots, more easily maintained gardens and adaptable features;
- the planning of communities that encourage social interaction and strong community networks, that are safe, livable and have a strong sense of community;
- the planning of communities that are less dependent on the car and where housing, transport, shops, educational facilities and health and community services are better integrated; and
- the consideration of community safety and planning and establishing processes that involve older residents in the decisions that affect them and all that they are interested in. These issues and processes are diverse and can include recreation planning, cultural events, library services, safety audits as well as representation on Council committees and working parties.

Many of the concepts underlying healthy ageing were developed by the World Health Organisation (WHO) with the notion of ageing as a lifelong process, with a focus on the well being of people as they age. Objectives proposed by the WHO European regional planning group include:

- prevention of unnecessary loss of functional capacity;
- maintaining quality of life by preventing distressing symptoms;

- 
- assisting the elderly to live in their own homes and prevent unnecessary admission to residential care; and
  - promotion of informal networks of care, particularly families.

Programs and infrastructure that are based on the principles of healthy ageing are an important preventative measure and produce positive results for the whole community. As the population ages, strategies to increase the independence and well being of old people will be essential in order to contain the costs of health care and community services.

Lack of access to activities to promote healthy ageing is likely to result in increased demands on government by less dependent and self-sufficient older population.

The opportunity for healthy ageing is significantly reduced for people with minimal assets and low incomes during the pre-retirement and retirement period.

The physical health and well being certainly contributes significantly to an individual capacity to participate. Health services across SEQ have identified three main areas, which require resources:

- grief and loss – coping with life changes;
- physical and preventative health issues, such as fall prevention and regular exercise; and
- isolation, loneliness and companionship.

#### *Good Practice Example 1*

#### **SOUTH SEA ISLANDER HEALTH PROMOTION PROJECT Strategies for Diversity Pilot Projects**

Strategies for Diversity Pilot Projects, funded by Queensland Health, focuses on developing strategies which would assist people from culturally and linguistically diverse backgrounds to access mainstream health and Home and Community Care (HACC) services. One of the projects located in Mackay, worked with the South Sea Islander Community through the South Sea Islander Association. One of the major barriers to accessing health related information was found to be a resistance to access the community health building, which was quite austere in appearance. To break this barrier the South Sea Islander worker and the Community Health Service combined to provide a series of one-hour weekly presentations on health related issues at the health service. South Sea Islander recipes were used for morning tea and the program was provided for free. Discussions ranged from health cooking and nutrition to focussing on dealing with very specific health matters.

This program was so successful that there was a noticeable improvement in the use of the community health centre by South Sea Islanders in general, and in accessing health services for older people in particular. The main features of the program seen to make the difference were the provision of culturally appropriate refreshments, assistance with transport and the involvement of community leaders from the beginning.

Participation by the community leaders contributed significantly to the acceptance by the community as a whole. The community health workers found that the program was helpful in building up relationships within their South Sea community, developing some level of trust and importantly increasing understanding of the cultural issues associated and impacting on their health care. This project was successful because it not only engaged older people from the South Sea Islander Community, but also engaged the interest of the community health workers in the South Sea Islander culture. It became a mutual learning experience.

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### **An option for Maroochy Shire – Healthy Ageing**

**Encourage access and participation:** The South Sea Islander project was a strategy for health promotion and information dissemination to meet the diverse cultural groups within the Local Government area. The introduction of a small group experience created an intimacy and broke down considerable barriers. This may be a useful approach to involve a wide range of older people in learning about Council's services or local community services and to further provide opportunities for participation.

### **3.3 Lifelong Learning**

Healthy ageing focuses on maintaining older people's health, independence and well being. Education is an important component to this holistic approach to health and ageing. The benefits of education for older people include the acquisition of improved skills, new opportunities and mental stimulation. But education for older people also has many less immediate, less tangible, but no less important outcomes. These outcomes include greater social and physical well being, better memory, greater self-esteem, increased social networks and friendships. For older people in particular, learning activities provides the opportunity to keep up with social and technological change. It's for these reasons that continuing education or lifelong learning is considered to be integral for a healthy ageing approach.

Older people undertake learning activities for a variety of reasons: to improve their health and well being, for leisure and social contact, training and retraining for paid and volunteer work, for pleasure and self development. In many cases their motivations are the same as those for young people. However, learning is especially important for older people because of the relationship of learning and mental and physical health. Fitzgerald (1997) writes that *"participation in learning is linked to higher levels of perceived well being, improved memory, greater self esteem and a sense of purpose"*.

New communications and online technologies provide older people with the potential to enhance their lifestyles through access to information, government, community and other online services, including electronic banking and home shopping. While many older people embrace modern technology, many others are concerned at the limited opportunity to become familiar with some forms of technology and other are resistant, even fearful of contact with technology. There is a need to maximise information technology opportunities for older people and avoid the risk of older people being categorised as 'information poor'.

The role of the Libraries in lifelong learning is substantial with not only a broad range of facilities, equipment and resources, but an organisational commitment to encourage learning and innovation with regard to providing access.

### ***Good Practice Example 2***

#### **OPENING THE DOORS TO LIFELONG LEARNING IN THE ARTS Through the National Endowment for the Arts (United States)**

There has been widely growing support at the State, Regional and Local Council levels for older artists. For example in Poughkeepsie, New York, the focus has been in development of intergenerational programs, building communication and interdependence between generations. Using the arts to bridge the gap, these intergenerational programs have helped to build a renewed sense of parting community. Working through local schools, community centres, senior citizen housing projects, the program has developed intergenerational chorus, life change theatre group, intergenerational art camps, old histories and intergenerational school arts programs. Using kick start funding from the INB Corporation, adults 55 years and over work as mentors, professional artists, program assistance and volunteers in a multi arts program including music, movement, drama, story telling and visual arts.

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The Elders Share the Arts Program (based in New York) has also focussed on intergenerational initiatives. Professional mature established artists work with old people and young people to transform their life stories into dramatic, musical and presentations to celebrate community life and diversity and connecting cultural traditions. Each program consists of a weekly workshop that brings together old people with young people from pre-school to high school age. Each program lasts 30 sessions with ESTA setting up and training the partnership team, meeting to help turn their stories into theatre, story telling, dance, murals, paintings or poetry. A public presentation is a crucial part of the community building project. The presentation mainly at a school, senior citizen centre or public place such as a library or museum. The funding for each partnership team comes from local grass roots fundraising, Local and State Government and from the foundation. Often assistance from schools, parents, associations and local donors helps the process in terms of resourcing and support.

### *Good Practice Example 3*

#### **EMPOWERING OLDER CONSUMERS OF HEALTH SERVICES**

##### **Peer Education and Peer Educators**

The development of peer education and peer educators has been used by Commonwealth recognised projects in health promotion of older people. The Empowering Older Consumers of Health Services Project, aimed to empower older people so that they felt more confident in their interactions with health professionals, more comfortable asking questions and saying no when they wanted to. The aim of the project was to raise awareness among older people about ways to build relationships with health professionals, consumer health rights and responsibilities and encourage and motivate older people to take a more active role in decision-making about their own health care.

Peer educators were recruited through the South Australian Council on the aging publications and those selected participated in two full days of training and were provided with report materials. Peer educator support was provided including assistance in organising and preparing for sessions, keeping peer educators updated of activities, providing opportunities to debrief and to access new resources.

The peer educators were then responsible for facilitating a variety of group activities such as group discussions, brainstorming activities, information dissemination and answer/question sessions. A total of 2,585 older people were involved in some 92 such sessions of which only 474 were aged 70 or under. Participant feedback was very positive in terms of enjoyment of the process as well as provision of information.

### ***Options for Maroochy Shire – Lifelong learning***

**Acknowledge skills and build relationships:** The Opening the Doors to Life Long Learning in the Arts has particular value in the Maroochy context. The well-established community of professional artists in the Shire provides a rich group of older artists to assist in setting up the program. In addition, the intergenerational strategy provides particular value when working the diverse ethnic and aboriginal communities for whom intergenerational linkages are particularly important as part of their tradition and culture. The celebration of each program is also an important part for both community building and presenting a positive understanding of the contribution and value of older people.

**Participation and consultation:** The concept of Peer Educators has broad application not only in health promotion, but across a wide range of areas in which it is important to convey information, to encourage participation and to have an opportunity to be actively involved and addressing issues of concern. It would apply not only in a health promotion application, but in a broad consultative process, engaging older people in any range of issues, which may be of concern.

### **3.4 Information Provision**

Access to and dissemination of information is important for all people in the community. For older people who may be isolated from communications networks, information access is especially difficult. In particular, to enhance access to information for older people, it needs to be targeted to the places and services they frequent and it needs to be in a format that is easily communicated.

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Specific areas of concern surrounding information provision include:

- identifying what services, organisations, and activities are available and how to access them;
- finding out detailed information about services and programs including financial support and eligibility for assistance;
- finding resources and educational and support information about the detailed issues older people face (for example how to effectively care for older people, how to minimise stress, guardianship and legal advice, etc); and
- accessing personal health information and/or advocacy to assist with obtaining the information.

In response to a preference of older people to have a one-stop-shop for information and referrals to service needs of both older people and their carers, the Commonwealth Government is establishing Carelink. Carelink is a telephone service providing information about community care services in local areas and eligibility criteria for such services (National Strategy for an Ageing Australia 1999).

The Councils on the Sunshine Coast have been actively improving the means of providing information to the community through the Community Information Services, including the on-line provision of information about local services and organisations, and the targeted distribution of information directories such as *Keeping in Touch* (information for older people).

#### *Good Practice Example 4*

##### **Hawkesbury City Council**

##### **Peppercorn Place: Disability and Aged Services Centre**

Hawkesbury City Council embarked on a groundbreaking venture to overcome the fragmentation of disability and aged-support services within its area. It established a partnership with service providers and funding bodies to design and build a Home and Community Care Co-location facility. The project team guided the development of the design brief, which drew on the knowledge of co-location committee members.

A succession of planning meetings culminated in a 'best practice' design for an innovative service centre, which combined provision for direct client services with office accommodation. Peppercorn Place was officially opened in May 2001. The centre was financed with contributions from Local, State and Commonwealth Governments. It houses 10 services and incorporates meeting and training facilities and activity halls equipped for the needs of the target group. The construction of Peppercorn Place will deliver in excess of \$50million in recurrent funding to the Council to address the needs of the elderly and disabled. The resources allocated have generated significant social and financial returns for the residents of Hawkesbury.

#### **An Option for Maroochy Shire – Information Provision**

**Cooperative models:** Collaborative projects, which bring together service providers have also occurred in many other local government areas around Australia. Peppercorn Place highlights the success such projects can have and the role local government can play in facilitating such ventures.

### **3.5 Recreation and Leisure**

Recreation means different things to different people. Some people prefer more relaxed leisure pursuits, while others opt for more physical and exercise based forms of recreation. The ageing population has a range of demands relating to socialisation and leisure needs depending on agility and affordability. There is a huge potential for the private, voluntarily and public sectors to work collaboratively to identify and address these needs.

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Participation in community life encompasses individual leisure interests contributing to community development and local services, developing formal and informal networks and being involved in the cultural life of the community. An inclusive approach is essential to respond to the increasing number of people who do not perceive themselves in the stereotypical older person image, but rather are able and interested in pursuing an active, contributing and learning lifestyle.

This requires a balance to be achieved ensuring that services are not discriminatory, that older people are actively encouraged to participate as part of their community and that the specific needs of older people are considered in developing programs and activities within the community.

According to the ABS National Health Survey (1995) the highest health risk factor for people over the age of 65 is lack of exercise. The Australian Sports Commission supports research into the benefits of physical exercise for older people, the establishment of competitive sports for older people and an annual national forum for mature aged sport.

The Background Paper to the National Strategy for an Ageing Australia (1999) notes that older people:

- are active outside their homes, being involved in groups and individual pursuits;
- over 70 years attend musical concerts, theatre and art galleries more than younger people;
- over 65 years visit libraries five times more a year than younger people; and
- spend more time on recreational activities than younger people.

Travel is also noted as an important leisure activity for older people. In a recent study, by the Department of Families, Youth and Community Care it was found that over 75% of people over 60 years had travelled domestically in the previous year and that nearly 80% wanted to travel in the future. Older people spend some \$986million on domestic travel annually (DFYCC 2000). This has significant implications for resident older people and older visitors in Maroochy Shire and raises the issue of local government's role in providing adequate services and facilities for aged visitors to the local area.

Participation in leisure activities is critical to preventing social isolation and an attendant decline in health and well being. Leisure and recreational activities include pursuits undertaken for personal enjoyment whether this is further education, sporting, art and cultural activities, social activities, touring or informal activities at home with friends. The main barriers to participation in recreational and leisure activities have been shown to be affordability, accessibility and information. The development of an integrated leisure and recreation strategy for older people needs to be developed in collaboration with older residents across the Shire.

#### *Good Practice Example 5*

##### **GOLD**

##### **Growing Old and Living Dangerously**

Growing Old and Living Dangerously (GOLD) is an initiative of Brisbane City Council which targets adults aged 50 and over. Some 45 percent of participants are more than 65 years of age and 70 percent are older than 70 years of age. GOLD not only provides participants with a range of physical and intellectual recreational experiences but it focuses on emphasising integration of the older adult community with the broader community.

This approach has not only brought higher rewards for participants but it has also increased support for under used or under supported community facilities and activities. For example, senior citizen centres have been refocussed to encourage involvement of local residents, which not only achieves better financial outcomes, but a greater use of facilities and programs. In another case, a croquet club that experienced low usage was promoted through GOLD, bringing new members and increased viability to the club.

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Council provides grants to some sporting organisations. GOLD links with grant participants to increase participation by older people in such organisations. For example, a woman's sports day was advertised in GOLD and many participants from the GOLD membership joined in the events. The demand for Internet classes is steadily increasing and to satisfy the high demand GOLD has assisted Council libraries to increase their users and extend the value of technology by reaching a wider community target audience. Popular activities such as abseiling, indoor rock climbing and canoeing have demonstrated to commercial providers the potential in marketing to older people, promoting a positive image of older people as active members of the community.

*Good Practice Example 6*

**SOUTH EASTERN SYDNEY AREA HEALTH SERVICE**

**Walking and Health**

A project conducted by the health promoter and service of the SESAHS found that there is a lack of suitable walking groups in the Sutherland Shire. The main aim of the project was to increase the number of opportunities for appropriate moderate physical activity within the local community by the establishment of a sustainable walking group. The project established a walking group called "Sutherland Strollers", to address the known risk factors for inactivity such as lack of motivation, fear for personal safety, boredom, dislike of competition, limited physical ability and limited access to moderate physical activities. In December 1997, there were 167 members of the Sutherland Strollers with an average of 18 people attending each programmed walk. The strollers performed their own administration, developed their own programs, and recruited members independently. A similar project has recently been established by Bankstown City by that area's health service. This project aims to increase physical activity in older people and is establishing a number of walking groups.

Walking programs such as these have multiple benefits. They not only improve people's physical health but can contribute to overcoming social isolation, help people form connections in their own neighbourhoods and assist people to develop a healthier outlook on life. Programs that are based on the principals of health aging are an important preventative and measure positive results for the whole community. As the population ages, strategies to increase the independence and well being of older people will be essential in order to contain the costs of health in community services.

*Options for Maroochy Shire – Recreation and leisure*

**Program Provision:** GOLD provides a model for Council's healthy older persons program and Councils supporting recreational planning. The main focus is not so much the development of specialist or age-specific programs, but rather actively linking older people with the opportunities within the community. This ultimately value adds not only to participants, but to the organisations and groups that are linked and adding viability to the facilities and services provided by Council. Finally, GOLD provides a model for addressing perceptions of faulty and diminished ability by actively incorporating older people in the day to day leisure opportunities in the community.

**Neighbourhood activities:** A program such as the Walking and Health is simple, very cost effective and provides excellent outcomes for older people in local communities. This program could easily be established in numerous localities across Maroochy Shire possibly as a joint Council/Community Health initiative.

**3.6 Housing, Accommodation and Neighbourhood Design**

When planning housing options for older people the importance of the relationship between housing and community support services needs to be considered. Housing and care should facilitate and enhance each other. An integrated approach to housing for the elderly and the provision of support services increases housing options for older people.

The structure of households is changing, creating in turn a need for different forms of housing. These factors necessitate a greater range of options to satisfy a wider range of need.

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Urban design and the well being of older people are intrinsically linked. Poor urban design and inadequate provision of services can be as much an inhibitor of independence as physical frailty or incapacity. As people grow older and their mobility decrease, the neighbourhood in which they live becomes a more important aspect of their lives. Being within walking distance to shops and other facilities is vital. Getting to the shops is more than just shopping, it's a symbol of independence, a valued link to the outside world and an opportunity for social contact.

The People for Places and Spaces Study (undated) on quality of life for older people reported the importance of informal networks of information provision that exist within local neighbourhoods. Crucial in this information network are community's trusted gatekeepers, such as chemists, doctors, chaplains, infant health nurses, nurses and child care workers. These gatekeepers are often the first port of call for advice on problems, especially where an extended family support system is lacking. If the gatekeepers have the relevant information and can recommend more specialised help their advice is most often followed. This informal network highlights the importance of neighbourhood and its associated informal networks for older people.

Neighbourhood changes that create supportive environments for older people can be developed by planning medium density housing near shops and ensuring that appropriate transport is readily accessible. In Maroochy Shire, infill development of medium density housing has occurred in proximity to some urban centres. This housing has been found to be popular with older people and meets many of their needs as it is close to shops and services and often has better access to transport.

The NSW Office of Housing Policy (1996) undertook research, which highlighted the factors important when older people were choosing housing types. The majority of respondents indicated less maintenance, greater personal and property security, increased mobility, more free time and lower costs as the reasons for choosing multi-unit housing. The results suggest that older peoples independence can be enhanced when they are in appropriate housing. These findings confirm the importance of recognising the life cycle changes that people go through and the importance of providing a diversity of options for people whether it be in recreation, housing, transport etc.

Despite the importance of aged specific housing, residential accommodation continues to play an important role in housing for older people. The Commonwealth Department of Health and Aged Care uses standards based on the number of people aged over 70 to plan for residential provisions. The benchmark which the department stresses is only a guide, is that for every 1000 people aged 70 and over, there should be:

- 50 high care places;
- 40 low care places; and
- 10 community aged care packages.

### ***3.6.1 Accommodation Options***

There are several types of aged specific housing and accommodation available, each with different levels of personal care, eligibility criteria and costs. These conditions may vary from organisation to organisation. The following provides an overview of the types of aged accommodation available and descriptions of each.

#### **Independent Living Units**

**Rental Units:** are generally for older people who are on a pension, do not own their own homes and have limited assets.

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**Donation Units:** the organisation requests an outright donation in exchange for the right to occupy the unit and the resident pays a weekly maintenance fee.

**Resident Funded Units:** entry is by a loan/licence agreement where the resident pays market value for the unit and in return is given a license to reside there. A weekly maintenance fee is charged and a portion of the market value payment will often be funded on departure according to the terms of the residents contract.

**Housing Cooperatives:** non-profit community organisations which provide secure long term affordable rental accommodation to people on low incomes who do not own property. Tenants are members of their cooperative and are able to be involved in management.

**Residential Park:** residents generally purchase a relocatable home and pay weekly rent for the site and utilities. This housing option allows for home ownership with small garden areas and close proximity to neighbours.

**Community Housing:** purpose built or modified housing offering accommodation for people who would prefer to live in close proximity to others and who need services such as meals and have limited financial means.

#### **Supported Accommodation**

**Resident Funded Service Departments and Flexi Units:** a loan/licence agreement is purchased by the resident. A weekly service fee also applies. This is either a bed-sit or one bedroom accommodation where the services offered include meals, laundry of linen and room cleaning. Some organisations offer extra services on a user pays basis.

#### **Residential Age Care Facilities**

**Low Level Care (Formerly Hostel):** residents are semi dependent, that is, they are able to get out of bed and use the toilet without assistance, get up and walk around without help. Assessment is by the government age care assistance team, which decides eligibility. Costs include an accommodation bond which is payable by people with assets over \$24,500 (with provision made for people made without assets). All residents pay a basic fortnightly care fee. Full pensioners pay 85% of the single aged pension, the facility claims rent assistance direct from Centrelink. Part pensioners pay a basic care fee based on 85% of the single aged pension plus rent assistance which the facility claims direct from Centrelink. Part pensioners may also be required to pay an additional income tested fee. Non pensioners will pay the full care fee based on 85% of the pension plus rent assistance. In addition an income tested fee portion of the income and care needs is also required.

**High Level Care (Formerly Nursing Homes):** residents are fully dependent requiring 24-hour nursing care. Assessments are required by government age care assessment teams to determine eligibility. Costs include the accommodation charge which is payable by people with assets over \$24,500 (provisions made for people without assets). The maximum accommodation charge is \$12.33 per day. Also residents pay a basic fortnightly care fee. Pensioners and part pensioners pay 85% of the single aged pension. Rent allowance is also claimed directly by the facility from Centrelink. Non pensioners and part pensioners also pay and income tested care fee proportional to income and care needs.

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### 3.6.2 Building Better Housing

While some older people prefer, or have support needs which require, age-specific accommodation, others do not. The design and development of communities where all people can live safely, in a variety of housing types, with adequate access to local facilities and activities, allows older people to continue to be active members of the community.

Maroochy Shire has a significant proportion of older people living in detached homes. However, many older people decide to make a move to a small dwelling which is easier to manage. While some areas in Maroochy Shire offer many forms of medium and high density housing, particularly along the coastal strip, this location does not necessarily meet the needs of aged residents. For example, its proximity to local services, established networks of family and friends and familiar environment. Therefore recognition that a diversity of housing types is required is essential.

Adaptable housing (or life cycle housing) is a housing designed in such a way that it can be modified easily in the future to become accessible to both occupants and visitors. The principles of adaptable housing require a move away from designing special accommodation for different community groups with different needs. Importantly, adaptable housing is good design for everyone and can be achieved at relatively little extra cost during construction stage. Both Local and State Governments around Australia have embraced adaptable housing principles and there are now many examples with satisfied residents.

The affordability of housing is intrinsically linked with the issues of urban design, proximity to services and the mix of housing design and density. Local governments have significant influence with regard to ensuring communities are designed and regulated around issues of housing mix, service access and neighbourhood amenity.

#### *Good Practice Example 7*

##### **WILLOUGHBY & NEWCASTLE CITY COUNCIL Adaptable Housing Model Development Control Plan**

The aim of the project was to prepare a model Development Control Plan (DCP) for Adaptable Housing. The DCP incorporates a range of levels of adaptability – consistent with AS4299 – and describes each of them in functional detail. The process of developing the model DCP included:

- Identification of feasible options for promoting adaptable housing in Sydney's metropolitan and non-metropolitan markets, across a range of housing types;
- Increase in private sector provision of adaptable housing;
- Encourage safety and visibility to all adaptable residential developments for all potential users and visitors;
- Provide guidelines to inform developers, designers and builders on the cost effective adaptation options;
- Provide Council's with a clearer and more effective basis for the evaluation of development proposals in respect of adaptable housing.

The model DCP for adaptable housing improved existing difficulties experienced by developers in interpreting and implementing adaptable housing requirements. The outcome was provision of a range of housing types at the local level (through both new development and retrofitting of existing housing stock), which adequately meet the needs of older people now and have the flexibility to change/be adapted in the future.

#### ***A option for Maroochy Shire – Housing Accommodation and Neighbourhood Design***

**Planning regulations:** The principles adopted for the model DCP provide the framework upon which other local governments can enhance existing planning regulations to provide better housing lifestyle options for residents.

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### 3.7 Social Isolation

A key measure of quality of life is social contact. One of the main roles of many community support services is to provide opportunities for company and support to older people who are socially isolated. With the ageing of our population comes an increasing number of people who are living alone and an increasing likelihood of isolation.

The rates of social isolation have implications for community services delivery. Much of the responsibility for community care is undertaken by a co-resident carer. The 1993 Ageing and Disability Survey (ABS 1993) found that of all carers in Australia, 76% were co-resident. The Maroochy Shire figures, from the Census, suggest that there is a substantial proportion of older people in the community who do not live with someone who could perform a caring role. This places many older people with the risk of becoming isolated and also increases the demand on community for support services.

Isolation can be a frightening or lonely experience. It can arise from losing close family and friends or could be a consequence of decreased physical capacity, lack of transport, language barriers, disability, geographic remoteness, lack of access to services or self neglect. However, Encel Kaye and Zdenkowski (1996) write that living at home alone can also be a satisfying and rewarding experience for some people and the time to prize ones' independence. Not all older people regard isolation as a negative experience. Many value their autonomy and do not welcome interference. Living alone can be a positive experience for some people as it allows time to pursue interests and to suit oneself. Some people are fiercely committed to their independence, which they identify with staying at home whilst also recognising the value of social contact.

Although living alone and isolation are not necessarily linked, the figures of the growing number of people living alone suggest isolation is an issue for some older people. Policy research by the National Housing Strategy (1992) reiterates these comments *"single people over the age of 65 have the most difficulty of all groups in gaining access to services considered important to them, especially to doctors, hospitals and shops and also to relatives and friends. The majority who face these disadvantages were women"*.

The experience of isolation is different for men compared to women. Although men aged over 60 years are less likely to live alone than women of the same age, they appear to be more isolated if they do live alone. Research from the ABS titled Focus on Families (1995) indicated that, on average, men who live alone were bound to spend less time with other people (no more than 19 hours a week), compared with 30 hours a week for women living alone. A large contributor to social isolation is decreased personal mobility. Injury or disability can seriously threaten a person's ability to access services.

Informal interaction with neighbours is a vital and often underestimated means to overcome social isolation. Friedan (1993) writes that *"in age we can finally recognise that we need a community, not just the perfect relationship"*. Observations made by Wallhagen on the isolation of widowed women in retirement villages are equally applicable to the wider community. *"Widows might achieve high satisfaction in such an environment if they were provided with ways to meet other people and to facilitate their participation in the activities of the community"*.

These are thoughts that should be considered in Maroochy Shire's initiative to integrate planning across the Shire. Planning that understands and responds to the social aspects of the demographic changes that local communities are undergoing is required in order to respond in a strategic manner. The effects on quality of life caused by social isolation, create a need for the planning of neighbourhoods that foster social interaction. Consideration of access to shops, transport and facilities is paramount as is the design of inclusive public spaces.

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Planning for communities that foster social interaction needs to be attended to at a number of “levels”. The **strategic overview** of the Shire is important in understanding the relative servicing profiles of each urban centre, the transport connections between them, the demographic variances between communities, and the capacities for each area to develop. With regard to the ageing population, this will include:

- an analysis of the aged specific residential communities and the future expansion of these centres;
- identifying the locations and future service delivery trends of key services that older people regard as important to them such as hospitals, medical specialist centres, libraries, shopping centres, recreation centres, transport/ transit centres etc
- ensuring that the means of travelling to, and communicating with these centres is convenient and accessible for the older people in the community. This may require lateral solutions in partnership with the State Government, public transport providers, and community transport providers such as Home and Community Care (HACC) service providers.

Within **each urban area**, the relationships between various forms of land use (For example, residential, commercial, industrial, community and open spaces) needs to be configured in a way that enhances amenity, connections, and balances the needs of various sectors in the community. For older people this may include:

- ensuring that each urban area has access to a minimum range of services such as medical (including after hours and emergency services), postal, financial institutions, transport, etc; and
- the provision of open space and an appropriate range of recreational opportunities in each urban area.

At a **neighbourhood level**, the amenity, accessibility and perceived safety of an area has a significant impact on the degree of social activity and use of public spaces (for example, ensuring that seating, lighting, shade, toilets, safe paving, parking etc are convenient, and comfortable for older people). The concerns that are raised in the mixed use of spaces such as shared bike/skate/walking areas, children’s play spaces, music in public spaces, need to be attended to at local levels with adequate attention to community relations and consultation.

#### *Good Practice Example 8*

#### **PEOPLE FOR PLACES AND SPACES Family Friendly Community Checklist**

The Family Friendly Community Checklist outlines peoples urban requirements for shopping facilities:

- Small local stores which sell basics such as milk and bread within easy walking distance.
- Benches/seats in the local shopping centres for the elders and others to rest on.
- Trees planted for shade in shopping streets.
- Bubblers in the street and inside major stores.
- Easily accessible, well lit and safe parking spaces.
- Kerbs and footpaths design for prams, pushers, wheelchairs and bicycles as well as for pedestrians.
- Friendly shop keepers.
- Changing rooms for parents with infants.
- Plenty of seating apart from that provided by coffee shops.

- Open, safe and well designed playground and indoor play areas where parents can supervise their children.
- A public accessible health centre to cater for accidents, emergencies, etc.
- Restrooms, seating, ramps, lifts to cater for the needs of older people.

The People for Places and Spaces Study on quality of life for older people reported the importance of informal network information provisions that exist within local neighbourhoods. Crucial in this information network are the communities trusted gatekeepers. These gatekeepers are often the first port of call for advice on problems. If the gatekeepers have relevant information and can recommend help their advice is most often followed. These informal networks highlight the importance of neighbourhood and its associated formal network for older people.

#### **An option for Maroochy Shire – Social Isolation**

**Design and community networks:** The principles and examples provided in the People for Places and Spaces Study offer many ideas for local government to facilitate improve design and built environment outcomes at a local level. Many of the principles referred to are already considered during planning and design phases of projects, the key is providing the correct prompts for the assessor to provide better quality outcomes.

### **3.8 Transport and Access**

*“The provision of appropriate, accessible and affordable transport is fundamental to quality of life for all older people.” (Australian Coalition 1999 p.8).*

Transport issues for older people need to be viewed from the broadest perspective, not simply from the perspective of the frail aged or those with disabilities who have difficulties using mainstream transport. The ability of all older people to access the community and its services is critical.

Residents of Maroochy's regional and rural townships are largely reliant on car ownership as the dominant mode of transport. Provision of public transport services in the urban centres, such as Nambour, Maroochydore and the coastal centres, offer a broader array of options. However, people who are ageing are frequent users of public transport. There are a number of problems directly related to public transport provision, in particular:

- accessibility across the local area;
- affordability; and
- improved access for those who have mobility problems.

Community transport has its origins in the development of local solutions to transport disadvantage. In general such disadvantage arose from lack of service, an inability to access available services and barriers of affordability. This initial context for community transport was not solely a health or welfare focus rather a focus on enhancing accessibility. The focus has changed considerably over the past decade. The funding and support for community transport has now taken on a significantly more health and welfare orientation with the majority of funding being for services which operate on restricted eligibility criteria.

While many community transport activities are supported by HACC or non-profit organisations, some local Council's operate such services. South Sydney City Council is one such example. Council provides services for older people to facilitate access to shopping, personal trips, attendance to social opportunities, for medical purposes and for regular users.

*Good Practice Example 9*

**KIAMA COMMUNITY TRANSPORT**

**Cooperative community transport service**

Kiama Community Transport is funded by Home and Community Care (HACC), the Department of Transport and the Department of Health and Kiama Council. Council operates two mini buses and a pool of cares which are available upon application to transport disadvantaged individuals and groups in the community. Community transport provides non-urgent transport to frail, aged disabled and transport disadvantaged residents of Kiama's Local Government Area.

Referrals are made by General Practitioners, specialists, hospitals, nurses, community service organisations, friends and individuals themselves. The service is staffed by a full time Coordinator, a full time Project Assistant, and a pool of volunteer drivers and driver assistants. Contributions vary depending on distance and mode travelled and no service is denied on the basis of inability to pay.

Services include:

**Health Run** – Weekdays, in 11 seater wheelchair accessible minibus. Door to door service with a flat contribution rate of \$8.00 per trip.

**Shopping Run** – Weekdays, in Council cars. Door to door with volunteer driver. Transport for medical appointments south to Nowra or to Sydney. Contributions range from \$5 - \$50

**Weekend Shopping Run**- Saturday shopping run. 20 seater wheelchair accessible minibus. Volunteer driver and helper. Door to door. A couple of hours shopping at local shopping mall and assistance with shopping bags. Contributions are \$4 from Kiama and \$5 from Gerringong.

**Weekday shopping/Library Run** – Monday shopping/ library run. 20 seater wheelchair accessible minibus. Volunteer driver and helper. Door to door weekly pick ups. A couple of hours at the Library and/or local shopping mall. Assistance with books/shopping bags. Contributions \$4 from Kiama and \$5 from Gerringong.

**Adult Day Care** – Weekdays. 20 seater wheelchair accessible bus. Door to door to access various adult day care or friendship group meetings. Volunteer driver and helper. Contributions made by group for bus hire.

**Individual Care transport** – Weekdays. Council cars. Door to door. Volunteer driver. Based on eligibility, distance and availability of service. Contributions range from \$5 to \$40.

**Bus Hire** – Available to community groups, council or community activities. 11 seater minibus and 20 seater minibus. Group must provide own licensed driver. Hire charges range depending on group and distance travelled in kilometres. Subject to availability, priority is given to Home and Community Care (HACC) eligible groups.

***An Option for Maroochy Shire – Transportation***

**Partnerships:** The Kiama Community Transport Service represents a model of service delivery that broadens the services that can be delivered beyond the limitations of individual programs funded by the Commonwealth and State governments. By structuring a partnership that can service a wider group of people, the viability of community transport is strengthened. This model of service delivery has a great deal of potential for the Maroochy Shire in partnership with community agencies and HACC.

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### 3.9 Safety and Security

Real and perceived safety, both within their own homes and in the wider community is a significant issue for older people and can have serious impacts on quality of life and the ability to participate in community activities. It can lead to loss of confidence and increased isolation. There is considerable anecdotal evidence that many older people will not leave their homes after dark, particularly if they are relying on public transport and others fear venturing beyond their immediate neighbourhood.

The National Campaign Against Crime and Violence report *Fear of Crime* (1998) makes a number of recommendations on how to reduce this fear and make the community more accessible. For example, it points out that in order to reduce fear it is essential to be able to identify what is making people fearful, how it manifests itself and how this can be addressed to reduce each year. It found that "fear of crime" reduction strategies and programs need to:

- target the concerns which people specifically raise;
- have fear reduction as an explicit objective of the program with solutions appropriate to the target audience;
- recognise that fear of crime is often associated with low levels of harassment, incivility and disorder, general environmental decay and lack of community cohesion;
- where immediate action can be taken, such as adding lighting or help points, this should be done expediently to generate confidence in the process; and
- consultation and involvement is essential in implementing solutions as much as to identify problems.

Communities which meet the changing needs of our ageing population use physical and service design principles which maximise the opportunity for older people to be independent, mobile, safe and secure. The issues which must be at the forefront in the design of healthy communities include:

- designing-out crime – adopting principles which foster safer communities;
- reducing risk of accidents, such as falls, through quality footpaths, lighting and safe pedestrian/vehicle contact points;
- increasing neighbourhood access to necessary commercial services, such as grocery stores, medical practitioners, chemists, newsagencies etc; and
- improving pedestrian accessibility to public areas such as parks, open spaces and transport interchanges.

It is important to acknowledge, however, that these same principles apply equally to the community as a whole, from parents pushing prams to children and young people. Safety and accessibility are community issues – not simply issues for older people. However, the extent to which such issues may become an impediment to participation increases for older people.

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*Good Practice Example 10*

**MILDURA CITY COUNCIL  
Planning for Ageing in the Home**

There has been a tendency to focus issues of safety in the community on crime prevention, community safety committees and urban design to reduce the likelihood of victimisation of older people. However this represents only one dimension of safety in the community. It is also important to acknowledge effective practices to focus on empowering older people to remain safe through false prevention pedestrian safety. This project is particularly important because it focuses on the key environment; the home.

The Mildura City Council "Planning for Ageing in the Home" arose from a staff recognition that people wanted to make alterations to their homes following an accident or acute illness and often expressed a need for information to assist them to plan a safe home. Consultation with local occupational therapist confirmed that this was an issue and they were able to provide information on positive and negative aspects of the home environment for older people and people with disabilities. It was then decided that Council would work towards promoting awareness of safe home design issues.

To test the market, consultations were held with local housing industry representatives who agreed that they were aware of many appropriate renovations and building designs, and that the market did have the ability to provide a product which was ageing friendly in a safe environment. The outcome was the development of an integrated information package as part of the Commonwealth Government's healthy seniors initiative. The package included outlining ten major concerns identified by local occupational therapists, a book providing details on the tips that occupational therapists have identified and a pamphlet providing a condensed version of the booklet.

The package was distributed locally and nationally to occupational therapists, Councils, building designers and architects as well as older people. The evaluation found that the package was highly useful, practical and easily understandable and had the capacity to influence people's choices and was well supported by the industry. The supporting commitment by local occupational therapists and the building industry representatives was considered an important part of the success of the project.

***An Option for Maroochy Shire – Safety and Security***

**Information, awareness and cooperation.** This innovation prompts us to consider how well the development approval processes might incorporate the development of safe environments for the aged. The provision of such information and actively promoting the need to incorporate such designs and considerations may ensure homes are more safe. The importance of this model is that it is not limited to older people but generally applies to housing for people with disabilities, people with children and those intending to age in place.

**3.10 Community Attitudes**

The language used in public debates which reinforces the image of older people as dependent and needy and perhaps more as a burden on society, perpetuates how we see older people and frames their social contribution (Fox 1995). The image of older people, as portrayed in the media and through the daily interactions of organisations, is one of increasing infirmity, slowness and diminished capacity. This perception impacts on how older people are treated, their ability to access opportunities and their social isolation from the mainstream community. Many older people see age discrimination as a major barrier.

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To redress this image it is necessary to proactively promote the image of older people as active, contributing members of the community and to dispel myths. Importantly, it is essential to celebrate the value of older people, that is, to promote a positive image of older people as older people. Promotions need also to focus on including older people in a cross section of community contexts. The isolation of images of older people solely within the context of services or issues associated with ageing serves to perpetuate the negative images of ageing.

### **3.10.1 Dispelling the Myths**

- *Older people are not a burden:*  
Older people are more likely to provide financial support and practical assistance to families than to receive it. A study carried out by the Institute of Family Studies (1992) found that older people assisted their adult children in the following ways:
  - 67% provided child minding
  - 40% provided financial assistance with major purchases
  - 27% provided help with their children's tertiary education
- *Ageing does not mean inevitable physical and mental decline:*  
The greatest physical and mental decline occurs in the human body between the ages of 30-40 years.
- *Older people are individuals:*  
Older people are a diverse group, with different backgrounds and beliefs and like to be respected as individuals. It should also be recognised that individuality increases with age due to differing life experiences.
- *Older people continue to learn and participate:*  
Older people who participate and pursue their interests continue to learn from life experiences. Research also shows that memory decline is very limited with age and cognitive and motor skills, if practised, exhibit only minor decline. A survey of NSW Senior Card holders showed that 75% of members had been involved in travelling, eating out, attending cinema, theatre and concerts and visiting galleries and museums.  
(DFYCC 2000)

The promotion of a more positive image of older people needs to be achieved through both example and practice. By increasing community awareness, the level and extent of age discrimination can be reduced.

#### *Good Practice Example 11*

##### **QUEENSLAND DEPARTMENT OF FAMILIES YOUTH AND COMMUNITY CARE Don't Call Me Granny**

The Queensland Department of Families Youth and Community Care produced a booklet called *Don't Call Me Granny* to assist many professionals to more effectively communicate with older people and to address the negative, inaccurate and typical ways in which older people are portrayed. The booklet provides information for professionals about:

- Facts about ageing.
- Tips about how to avoid misrepresentation through judgements about what is appropriate for older people.
- Tips about language ie words which are acceptable descriptions of older people.

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The booklet has the endorsement of the Media Entertainment and Arts Alliance, the Australian Marketing Institute and Advertising Federation of Australia. Importantly this project was followed up by the Queensland Awards "Older People Speak Out Media Awards". These awards which have brought national media attention to the public portrayal of older people and aging issues, acknowledge media who have demonstrated a commitment to presenting older people accurately and positively.

Similar projects have been developed by the New South Wales Council of the Aging and Department of the Aging and Disability and the New Zealand Government. The New Zealand had an added feature of involving in a media watch project which highlighted the stereotypes for presentations which were found to be unacceptable.

#### ***An Option for Maroochy Shire – Community Attitudes***

**Promotions and community awareness.** These initiatives can be related to a number of initiatives at a Local Government level. Firstly it is important that Maroochy Shire Council review its own media approach. Secondly Council can promote in local media the need to adopt an appropriate approach to the portrayal of older people. Finally Maroochy Shire Council can actively promote a positive image of older people, through its own services, such as libraries, cultural development programs, sports development, Senior Citizens Week activities etc.

### **3.11 Employment, Volunteering and Mentoring**

A significant number of unemployed and underemployed people are mature aged. Many have been displaced from the workforce due to organisational restructuring and industrial trends. Ageism is also recognised as a major barrier to employment for mature aged people. On the other hand removal of minimum retirement ages has opened the way for mature aged people to work longer if they choose and have the opportunity to do so.

Traditionally, retirees have been one of the most impoverished of all social groups. The development of the superannuation guarantee scheme is providing greater levels of self-funded retirees. However, the impact of the scheme will not be evident for another 30 years. People retiring with superannuation-based pensions may form a new generation of financially independent retirees. Accordingly, mature aged people are likely to be retiring with greater disposable incomes, creating new markets in tourism, service provision, hospitality, entertainment, arts and cultural products. However there remain a number of issues, such as:

- Retirees without superannuation or who have had inconsistent employment will retire financially impoverished. Adequate retirement income is a predictor of healthy ageing;
- Low income earners and people who experience long periods of unemployment prior to retirement will experience more difficulty affording services in a user pays environment;
- Concerns about the ability of the labour force to support the future welfare needs of the community; and
- The increased amount of leisure time available to a larger group of retired and semi-retired people which will create new recreation demands and consequently new public and private infrastructure and program needs.

Mature aged employment has emerged as a significant issue for older people. The Council on the Ageing, in its submission to the House of Representatives Standing Committee on Employment, Education and Industrial Relations, identified the key factors which underlined importance of employment and unemployment for mature aged people as:

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- The trend towards family formation at an older age, second family formation and increased duration of dependency of teenage and adult children in higher education have meant that mature aged people need to work later in life to meet their parenting obligations;
  - The need to continue to repay a home loan. There are a number of reasons why people over 50 may still be repaying a mortgage, particularly preparing to move to a more appropriate housing option for older age which is not achievable without additional financing;
  - Losing a job later in life. This is often involves reorientating career directions which is more difficult where access to training and retraining has been less accessible to older people;
  - Age discrimination in the job search process. Mature aged people have longer periods of unemployment than younger people;
  - Traditional views of retirement are becoming out moded. Mature aged people wishing to have opportunities to continue to be engaged in productive work is increasing; and
  - Without the capacity to provide for older age through employment, an increasing of mature aged people will become more vulnerable to poverty and dependent on income support.

The ABS *Retirement Intention Survey* (1998) found that:

- Over half of males and one half of females between the ages of 45 and 64 have left employment as job losers rather than job leavers;
- Less than one third of males and one quarter have left work voluntarily for conventional retirement aged reasons. This means that the majority of mature aged people are losing and leaving jobs for reasons unrelated to retirement aged provisions; and
- There are many mature aged persons who are described as discouraged job seekers and do not actively look for work. Data suggests that one in every five unemployed males 60 to 65 and one in every one in five females 55 to 60 are discouraged job seekers. Discouraged worker incidence was found to be far greater for old people rather than younger.

A recurring theme in reports from government studies, community sector submissions and special interest groups is a need for government, at all levels, to act as a role model in the recruitment, employment and retention of mature aged workers. Importantly the public sector needs to ensure that its own policies and practices are consistent with and promote opportunities for mature aged workers.

Finally, it is important to acknowledge the significant role that mature aged people can play as the educators. There has been considerable recognition at the impact of the loss of corporate knowledge, skills and experience when older people leave the work force. However there is only limited evidence of strategies to tap into this knowledge and expertise once the individual has left full time employment.

Initiatives that have focused on engaging mature age people as a resource have demonstrated that:

- mature aged people often have valuable contributions through corporate sponsored mentoring programs involving young people, young businesses and with workers developing a range of professional and technical skills;

- mature aged people are often targeted by businesses for short-term appointments on the basis that established skills and problem solving can change within organisations; and
- mature aged people are often able to offer a more responsive service to older people who relate to someone of a closer age than to a young person who may lack access to the older generation or grandparents.

The development of employment options needs then to focus on ensuring equity and accessibility. It is also important to ensure that the contribution of mature aged workers is not lost to business or the community. This will require the removal of unacceptable, discriminatory and attitude in all barriers.

Studies across Australia have consistently found that the people most likely to do voluntary work are aged between 50-70 years. More than 25% of older people contribute to the Queensland community through volunteer work (ABS 1995). This saves our community billions of dollars each year. The economic value of volunteer work in Australia was estimated at more than \$18billion per annum in 1995 (ABS 1995) Conversely the aged and disability sectors rely heavily on the assistance of volunteers to provide support.

It is generally reported that finding volunteers is becoming increasingly difficult. Consultations conducted by the NSW Ageing & Disability Department in 2000 identified:

- the need to provide more training to volunteers;
- necessity to promote and value to work of volunteers;
- involve volunteers in less paper work; and
- utilise the skills of volunteers more effectively.

The role of volunteers should be seen as an opportunity to develop programs that will encourage people who are ageing to mentor younger people and promote lifelong learning across the community. This approach is a means of developing and building better and more trusting communities.

*Good Practice Example 12*

**SYDNEY EASY CARE GARDENING**  
**Gardening Volunteer Groups Support Older People**

The Sydney based Easy Care Gardening Inc. is a non profit organisation creating low maintenance gardens for people who are frail, aged, or have a disability, enabling them to live in their own homes for as long as they can manage. The group mainly visits homes to assist those who cannot manage their gardens or lawns.

The group provides general garden mowing services, in addition to converting gardens to the easy care principal. An easy care garden is one which is safe and pleasurable, requires low maintenance and requires minimal upkeep, and is achieved through effective use of mulch and appropriate plants. Once converted to this easy care principal, gardens only need a maintenance visit approximately every six months, allowing them to visit more clients in need.

Clients are charged a small fee, negotiable if the circumstances require it. The bulk of financial support comes through a recurring grant from the home and community care program, which is jointly funded by the State and Commonwealth Governments. Just as important however, are donations of funds, equipment, assistance and support from local Councils, community clubs, individuals and schools.

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***An Option for Maroochy Shire – Employment, Volunteering and Mentoring***

**Value adding to existing services-** Volunteer groups are playing an important role in local communities. Resourcing and support from local government can ensure such groups flourish and benefits are shared with the broader community.

### **3.12 Changing Context**

Over the past decade, significant emphasis has been placed on the issues facing Australia as our population ages. This focus has occurred at a time of change. Why? Because the world we live in is constantly changing. Expectations, political will, acceptable standards and technology are constantly changing and our consideration of issues must reflect current trends and thinking.

The following provides just two examples of the changes that are occurring, which have implications for the consideration of issues facing older Australians:

- Cox (1995) defines social capital as "the processes between people which establish networks, norms, social trust and facilitate coordination and cooperation for mutual benefit". Chenoweth (1997) argues that an understanding of social capital is important in contemporary human services for people as the growing devolution to community supports assumes high stocks of social capital. The devolution of support to the community through de-institutionalisation and community living is based on the premise that the community is available and capable of filling support gaps which the formal human services sector has not addressed. This greater reliance on the community has occurred at a time when communities are undergoing profound and rapid change. People are less likely to be connected in meaningful ways through geographical communities, but rather through more formal relationships. Additionally, fewer people have the capacity or interest in making voluntary commitments to community good.
- The medical profession is now starting to consider more closely quality of life implications of disease. The American College of Physicians (1997) reported that as lung function deteriorated so too did activities limited by breathlessness, social and psychosocial functioning. The implication of this research is that chronic disease processes may have to be redefined in terms such as mobility, self care, nutrition, psychological functioning and social interaction and be more reflective of quality of life impacts. In recognition of this, a healthy community needs more than quality and accessible medical services; it also requires the social infrastructure that supports basic human needs such as transport, community support services, safe public spaces, opportunities for education and social interaction. The quality of life impacts of many prevalent diseases may be lessened with the provision of the appropriate community assistance and infrastructure support.

The ideas presented above reflect the diversity of viewpoints and thinking that is currently being poured into issues of an ageing society. At a local level they cannot be ignored and in many cases provide examples of how best to think creatively to increase efficiencies and outcomes for local communities.

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## 4. *Funding for Services and Programs*

Key trends, which impact on the provision of services to older people include:

- A significant proportion of the aged population are healthy and have large amounts of leisure time due to early retirement and a longer expected lifespan;
- There is an increased focus on private sector provision to meet the changes and increases in the demand for services; and
- People with high support needs are more likely to live in the community and may require interventions to assist them to access services.

The following provides an overview of the State and Commonwealth Government policies and programs which are integral to the provision of services and supports for the aged. The aged care system also operates in a broader system of health delivery, income support and housing and community services. Together, these systems offer older people a broad range of services and support, depending on their needs and circumstances.

Although this section of the Discussion Paper focuses on the State and Commonwealth Government, it must be recognised that all levels of government, with consumers and the non-government sector, are currently funding, administering or providing aged care and other services for older people across Australia (Department of Health and Ageing 2002).

### 4.1 **Funding Delivery**

The Commonwealth Government has recently changed how it plans and funds services. Programs will now be delivered in accordance with the population group rather than being based on funding programs. This is commonly referred to as Population Based Planning. Programs will be delivered in accordance with the level of need on a regional basis.

*"Attempts to identify and develop the most appropriate and effective mix of services and assistance are taking place in a context where the need for care is itself the subject of significant demographic and social changes."*(AIHW 1995 p.1) The ageing of the Australian population is an ongoing trend, but one which is marked among the very old. From 1991 to 2006, the annual rate of increase among people aged 80 and over is projected to be about 4% per annum, while that for the population aged 65 and over is less than 2%. It is among this older group that severe handicap and formal service use is concentrated, hence the need for services and assistance is likely to grow more rapidly than would be predicted simply on the basis of growth in the total aged population.

A number of social changes are also occurring, such as increased participation of women in the workforce, higher rates of divorce and family breakdown, increases in population of single-person households, and the ageing of a number of major immigrant groups. These and other related trends have impacts on the availability of informal assistance from family and friends and the volunteer labour which underpins the not-for-profit sector. The difficult task of identifying likely future levels of need for formal services is thus complicated by these social trends.

The 2002-2003 Federal Budget included \$1.2 million over 4 years to establish a Productive Ageing Centre at the University of the Sunshine Coast to conduct research into all aspects of productive ageing, including development of policies and programs to enhance productive ageing and public education programs to promote productive ageing.

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The Commonwealth Government also funds support for Carers through the *National Respite Carers Program*, and the subsidisation of specialised equipment, home modifications, provision of counselling services, special provision and the expansion of psychogeriatric units for respite centres to deal with people with dementia. In addition, older carers of people with disabilities will be funded for a pilot education and training program and assistance with costs faced including respite, transport and equipment.

## **4.2 Community Care**

As hospitals are increasingly under pressure to reduce waiting lists, patients are being discharged earlier and at-home support services are required. As a result support services have been under increasing pressure. In addition, this has impacted on the delivery of such services with the implementation of prioritised needs.

### **4.2.1 HACC**

The HACC Program is provided for under the *Home and Community Care Act 1985*. The Act sets out the agreement that is entered into between State and Commonwealth Governments to fulfil the HACC objectives, types of projects and ways in which program funds can be spent.

The HACC User Characteristic Survey (1994) is an ample survey involving virtually all provider agencies who provide unit record data on a sample of their clients. The survey results indicated that home help is the most utilised service provided (64% of clients), followed by home nursing (37%), home delivered meals (27%) and transport (22%). It should be noted that many clients receive multiple services.

### **4.2.2 Community Care Packages**

The *Aged Care Act 1997* governs all aspects of the provision of residential care, flexible care and community aged care to older Australians.

There are currently two types of intensive community care services in operation in Australia – the Community Options (CO) projects and Community Aged Care Packages (CACP). The CO projects were the first Commonwealth led initiative aimed at providing a more intensive form of community based support and were focused on persons at risk of premature admission to a nursing home. They function on a brokerage model, with a central coordinator combining existing local support services and additional funding to provide an appropriate level of care. CACPs are intended to provide personal care services at the level formally provided in a hostel, but in the recipient's own home.

## **4.3 Residential Care**

Australia has come to recognise the importance of a holistic approach to service delivery, which takes into account the impacts of changes in one sector of care on the functioning of related sectors.

*“...the proportion of frail older people living in the community has increased in recent years. This is to be expected, given the current government policy to reduce reliance on residential care in favour of community care...that the trend has been even more marked in acute care facilities, this too, is consistent with moves towards day surgery and other strategies to reduce length of stay in hospitals.”* (AIHW 1995 p.14)

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## 4.4 Staying at Home

Increasingly older people are preferring to remain in their own homes longer, with support as required, rather than being placed in residential supported accommodation, such as nursing homes and hostels. The Commonwealth Government is encouraging older people to remain at home through its Staying at Home Policy (Government Demonstrates Commitment to Aged 1999) and the provision of the Community Assistance Package Scheme (CAPS).

Aged Care Assessment Teams (ACAT) around the country have identified the need for more community occupational therapists to assist with home modifications given that people are being encouraged to stay at home and age-in-place. They also highlight the importance of social work/professional counselling services to support families who are struggling to cope in their role of being carers.

The abuse of older people can be seen as a result of the breaking down of social supports, for example extended families or increasing dependence on immediate family. One of the disadvantages of the Staying at Home Policy is that it leaves older people vulnerable to abuse and can place huge stress on carers. The Queensland State Government recently established the Elder Abuse Prevention Unit which provides information, support and advice to older people who may have been abused and their families.

### 4.4.1 Respite Care

Respite care allows social interaction for older people with people of their own age and it also gives their carer's time out. It can be seen as an initial point of contact to other services, such as healthy monitoring. Types of respite care available include:

- Centre based care (day care);
- In home respite care (preferable for people with dementia); and
- Residential respite care (allows carers to have an extended break).

Respite care is generally provided through private, public and community sectors. Respite beds are usually booked 4-6 weeks in advance or when necessary on an urgent basis.

#### *Good Practice Example 13*

##### **MACLEAN SHIRE COUNCIL**

##### **Integrated Aged Care Services for the Clarence Valley**

Maclean Shire Council's Community Services Project brings together a number of aged-care services within one organisation – Aged Care packages, Community Options services and Meals on Wheels are all under Council auspices. Funding is provided by State and Commonwealth sources, with Council contributing specialist services and staff. Having these services in one organisation has several advantages.

Firstly, it reduces overheads and gives an opportunity for savings to be channelled into additional client services, including podiatry care, activities groups and outings, special events, specialised services for male clients, after-hour and on-call services, and handyman and chaplaincy services. Secondly, it has made the services available to all clients in the Clarence Valley, urban and rural alike.

Thirdly, it gives access to such specialist Council services as IT, human resources, insurance, property, document preparation and financial services at minimal cost. It has increased awareness of funding bodies of the Valley's specialised aged-care needs, and made it possible, through advocacy, to ensure the continued provision of some services in the Valley, including hospital discharge plans. For the Valley community, the project ensures that high-quality specialised aged-care services are available locally while directly and indirectly providing employment for more than 80 residents.

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***An Option for Maroochy Shire – Service Provision***

The involvement of the Maclean Shire Council in providing in-kind resourcing and advocating for integrated service provision has had significant positive effects for the local community. This approach highlights the capacity local governments have for facilitating change and being a partner in change.

## 5. Strategic Frameworks

There are complex interrelationships between governments, the private sector and communities across all areas of issue for older people. The problem is of such a magnitude that both the Commonwealth and Qld State Governments have issued policy and strategic frameworks to indicate the issues that will need to be addressed.

### 5.1 State and Commonwealth Government Responses

*Our Shared Future* was launched by the Queensland Government in 2000 to respond to the needs of older people across the State by providing a framework for ageing from 2000-2004. In March 2002, the Commonwealth Government launched its *Strategy for an Ageing Australia*.

The following summarises the frameworks for each of these policy statements.

Our Shared Future: Queensland's Framework for Ageing 2000-2004	
Strategic Area	Focus of Objectives
State Government leadership on ageing issues	Promotion of the interests of older people within government and the community.
Community participation	Community attitudes, social participation, safety and security, technology, life-long learning, consumer assistance, sport recreation and cultural pursuits, travel and tourism,
Community infrastructure	Community planning and development in the built environment, transport, housing options designs and maintenance.
Health and well-being	Health promotion, health care, support services, planning for substitute decision making.
Employment and retirement planning	Age discrimination, mature age employment policies, opportunities to apply skills, access to flexible working arrangements, improved economic independence <b>within the jurisdiction of the State Government.</b>
National Strategy For an Ageing Australia	
Strategic Area	Focus of Objectives
Healthy Ageing	Health promotion and illness prevention issues and strategies from a population health perspective.
World Class Care	Responsive, timely and appropriate health services including medical, mental health, rehabilitation, allied health, residential and community care and long term care financing.
Independence and Self Provision	Economic conditions, income, transition to retirement, ability to contribute to the workforce, effective superannuation and taxation. A separate Employment for Mature Age Workers Issues Paper discusses the ageing of the Australian workforce and implications of emerging trends for future economic growth.
Attitude, Lifestyle and Community Support	Community attitudes; housing and the design of public places; transport; lifelong learning opportunities; methods of communication including new technologies; recreation and tourism; Families and community support; social isolation, elder abuse; suicide depression; and contribution and support.

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## 5.2 Implications for Local Government

The roles, which individual Councils have taken on, are diverse, reflecting local needs and environments. Across the nation there is a demonstrable pattern of commitment to providing relevant support to older people. The Australian Local Government Association in its National Agenda for Local Government provides a statement "People and Community" which clearly sets out the role of local government in creating better communities. Those elements of the agenda, which relate to issues of an ageing population, include:

- The need for collaboration with participation in decision making, advocacy and service delivery and for local government to facilitate this process through opportunity, education, information and provision of effective implementation processes;
- Acknowledgment and support of volunteers in services responsive to community needs, community self reliance and participation;
- Development of stronger links between various forms of health and community care, public health, health promotion, community safety, leisure, sport and recreation, community design, cultural development and environmental management;
- Local government support of the development of a diverse range of quality sporting, recreation and leisure facilities, programs and services to meet community needs;
- Local government having its role in the HACCC program strengthened and to participate in inter-government negotiations concerning the programs future;
- Local government's role in community transport should be recognised and supported by other spheres of government;
- Local government has a key role in facilitating community based safety and crime prevention strategies; and
- Local government will continue to promote the principles of access and equity in service provision and ensure that the needs of residents on non-English speaking backgrounds and indigenous Australians are addressed.

The provision of infrastructure varies considerably from state to state, with long-term histories of developing the organisational capacities for policies and service provision. In this context, Queensland has less direct involvement in the provision of services to aged people than local governments in other states. It is essential therefore that Queensland Local Governments adopt strategic policy in order to accurately articulate the impacts of the ageing population and their relative capacities to address local needs. Failing to do so may increase the imposition on Local Governments and their communities to provide services they do not necessarily have the capacity to address.

## 5.3 The Imperatives for Maroochy Shire

Maroochy Shire Council already undertakes many activities, which influence quality of life for both existing and future older residents in the Shire. In conducting business across community development, town planning, building assessment and regulatory operations the Shire impacts on the way people live work and play across the Shire.

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Council provides a number of relevant services, activities or specific mechanisms which assist older people including libraries, community centres, community grants, community information service; Seniors Week activities; disabled persons parking facilities; pension remission rates and charges; and incapacitated waste collection services.

However, this apparently ad hoc list of services or initiatives cannot be sustainable in terms of the severe changes projected for the population. A more strategic position will be important if Council is to assure the community that resources are allocated to the priority needs, and that the population of aged people can be adequately serviced in the future.

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## 6. *Looking to the Future*

Our culture often teaches us to deny old age and to do whatever we can to prevent it. Instead we need to value old age. Growing older is a natural and fulfilling phase of a complete life. The population of Maroochy Shire, like many others, is ageing. The challenge is to remain responsive to the needs of the changing population and to ensure that services are available to assist those older people that need them. Community care and ageing in place create their own issues in terms of planning and delivery of services. Older people want to stay at home. Some, however, are no longer able to completely manage on their own without some assistance. Crucial to this is the capacity of support services to provide affordable assistance with basic home maintenance needs. Also critical is the provision of appropriate housing, the availability of transport and opportunities of socialisation and participation in community life.

What older people need is not so different from what all members of the community need. If neighbourhoods are planned for older people they work for everyone. Whereas if neighbourhoods are planned for the young and mobile they are often only good for the young and mobile. Communities planned with older people in mind are also more sustainable. They rely less on car transport, focus more on the creation of village type living and recognise the social importance of neighbourhoods. Communities planned in recognition of the needs of older people emphasise social contact and social capital, and are more socially sustainable.

There are many misconceptions about the dependency of older people. The literature indicates that the vast majority of older people live in their own environments and do not require alternative residential care. The challenge is to recognise this and to help to address narrow community attitudes that stereotype older people as dependent and a drain on resources. There is much scope for improvement of inter-generational links. Greater opportunities for inter-generational contact could have a positive effect on a number of issues including social isolation, fear of crime and may lead to greater recognition of the contributions of older people.

The contribution old people make to society and the social and economic benefits of these contributions is not sufficiently recognised. For example, grandparents provide up to 50% of all childcare. Older volunteers contribute 25% of the \$18 million contribution made annually by volunteers in Australia. Many older people provide financial support to younger family members. Although these contributions are not measured in the national accounts of the GDP, they have a significant impact on the economy and on community life (Fitzgerald 1997).

### 6.1 **Older Persons Strategy – Terms of Reference**

An obvious progression, in responding to the issues of an ageing population, is the development of an Older Persons Strategy. The Terms of Reference for an Older Persons Strategy would need to include the following:

- Ensure a methodology that includes the community in decision making;
- Establish a reference group of older persons and relevant stakeholders;
- Prepare guidelines for involving older people in consultation and decision-making and incorporate these guidelines in Council's consultation protocol;
- Develop principles and a policy statement regarding Ageing People in the Shire;
- Identify existing Council and Community services, policies and plans for older people;
- Research and analyse the impacts of demographic changes on these services;
- Identify appropriate intergovernmental arrangements for the planning and delivery of services;
- Recommend priorities for Council with regard to service provision, advocacy and the regulation, planning and design of the built environment; and
- Apply a strategic framework to the analysis of servicing the ageing population that is easily applied to Council's corporate responsibilities.

## 6.2 Older Persons Strategy – Framework for Maroochy Shire Council

The implications for Council are apparent when the critical issues are aligned to its corporate planning objectives:

### 1. Involving our Community

#### CRITICAL ISSUES

Increasing proportions of the population who are less mobile, and have particular support needs for communications.

Aged Care Services operating with existing pressure to meet demands and participate in planning.

Diminishing numbers of volunteers

#### FOCUS

- Community consultation
- Council demonstrating commitment to partnership development
- Community awareness of Council's role and range of services
- Council responding to community views and address community issues
- Consult and liaise with volunteer organisations

#### KEY ACTION AREAS

- Facilitate partnerships to address identified social concerns for aged people.
- Address volunteer shortages and the provision of support services.
- Improve access for older people to electronic and online information services.
- Provide training and information and develop community capacity.

### 2. Planning our Finances

#### CRITICAL ISSUES

The demographic changes will impact significantly on the capacity of the community to finance services and infrastructure through existing revenue sources.

#### FOCUS

- Long term financial planning
- Ensure revenue-raising measures are equitable and fair
- Explore all opportunities for Government funding

#### KEY ACTION AREAS

- Forecast the impact of rate and levy rebates with regard to demographic and housing trends,
- Continue the provision of fee rebates for older people
- Identify likely funding sources and ensure Council and the community make applications to meet older persons needs
- Identify and encourage new and innovative ways to resource infrastructure and services.

### 3. Focusing on Our Environment

#### CRITICAL ISSUES

The increase in population will place greater pressure on the natural environment.

#### FOCUS

- Preserve and maintain the natural environment
- Promote and resource the adoption of sound environmental principles and practices.

#### KEY ACTION AREAS

- Develop strategies that include the participation of older people in the preservation and promotion of the natural environment.

### 4. Enhancing our Lifestyle and Strengthening our Community

#### CRITICAL ISSUES

The demographic change will trigger a number of national and state policy initiatives, which will need to be understood locally.

The changes are at a scale that may only be addressed through partnerships and significant additional resources.

#### FOCUS

- Healthy and safe living environment
- Plan, develop and facilitate future service needs
- Advocacy and lobbying
- Community access to information
- Community cultural development
- Community capacity building
- Value the contributions from community members

#### KEY ACTION AREAS

- Partner with existing agencies to determine current levels of provision (both Council services and community).
- Develop standards and benchmarks for the provision of services including housing, health, transport, information and life long learning programs.
- Advocate for increases in the allocated resources from Commonwealth and State Governments.
- Establish partnerships to enhance or deliver new services and facilities.
- Continue to provide information through Libraries and the CIS and identify continuous improvements to access and relevance of the information for older people
- Promote positive images of older people, and recognise their contributions to community life.
- Develop strategies to promote and coordinate mentoring and volunteering.
- Ensure community facilities and communication infrastructures are provided with attention to the needs of older people.
- Develop strategies for recreation options for older people as part of Council Sport and Recreation planning
- Partner with local University and TAFE to further research experiences and concerns of older people.

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## 5. Planning for our Future and Managing our Growth

### CRITICAL ISSUES

The types and locations of residential housing and accommodation options have significant impacts on service delivery models and infrastructure.

The design and amenity of public places is a major concern for older people.

### FOCUS

- Growth management within defined limitations
- Built environments
- Viable and socially responsible development and building
- Public space that meets recreational and social requirements

### KEY ACTION AREAS

- Ensure that the Social Plan addresses the specific needs of older people
- Continue to apply and improve the application of the Access Policy
- Participate in the State Government's policy development and legislative reforms for affordable and adaptable housing.
- Work with planners, developers and older people to develop regulatory controls for the design, layout, and location, of housing for older people.
- Ensure planning facilitates interaction between diverse ranges of people in the community.
- Review the role of Council's community services division in regard to assessments of development applications to ensure appropriate guidelines are met.
- Additional research to explore the social impacts of development of older persons housing in the Shire.

## 6. Driving our Economic Development

### CRITICAL ISSUES

An economic development opportunity exists with regard to the increasing demand for services for older people.

The change in ratio of people likely to be employed compared to people requiring subsidies or assistance with services and support.

### FOCUS

- Innovative and sustainable commercial activities
- Tourism
- Economic partnerships
- Education

### KEY ACTION AREAS

- Identify potential programs, services and facilities that may be commercially viable.
- Promote the economic benefits derived from older people participating in the economic prosperity and development of the community.
- Encourage older people to participate in the promotion of tourism to the Shire.

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## 7. Planning and Delivering Infrastructure and Services

### CRITICAL ISSUES

The ability of older people to access the community and its services is critical.

Viable community and public transport options are limited.

### FOCUS

- Roads, bikeways and footpaths
- Parking
- Transport systems
- Parks and amenities
- Facilities in built environment

### KEY ACTION AREAS

- Ensure design and sequencing of transport systems meets suitable standards for the access of older people
- Partner with providers of community transport to expand and enhance the provision of transport assistance to older people.
- Coordinate the works programs for transportation with the planning and development of residential and community infrastructure.
- Ensure master planning for parks and recreational open space meets the needs of older people.
- Further research destinations and viable links for transport services.

## 8. Striving for Organisational Excellence

### CRITICAL ISSUES

Without the capacity to provide for mature age employment an increasing number of mature age people will become more vulnerable to poverty and dependent on income support.

### FOCUS

- Employees and volunteers
- Professional development
- Customer service
- Service information

### KEY ACTION AREAS

- Adopt mature age employment policies.
- Develop strategies for the engagement and training of older people as mentors and volunteers
- Ensure that customer services are continuously improved to meet the needs of older people.
- Provide adequate and timely information about the range of services, rebates, and assistance available to older people.

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## 9. Managing Corporate Governance

### CRITICAL ISSUES

Council has no clearly articulated policy with regards to older people.

Imminent pressure on existing services will require a more expansive and strategic allocation of resources.

### FOCUS

- Policy and decision making
- Public accountability
- Resource management

### KEY ACTION AREAS

- Formulate a policy statement for older people in Maroochy Shire.
- Develop a Strategy to address the needs and aspirations of older people with open and accountable participation from the community and relevant stakeholders.

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