Blueprint for an Ageing Australia
Longer lives are the most positive development in the last century of human history. They represent the product of greater prosperity, better diet, disease eradication and healthier lifestyles. They offer each of us, on average, 25 extra years of high quality living with new opportunities for productive work, unprecedented leisure, teaching and learning, and fulfilling relationships with family and friends.
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The Panel wishes to thank the Hon Susan Ryan AO and the Australian Human Rights Commission for generously hosting a public consultation on intergenerational equity.

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The Panel is grateful to the National Press Club for hosting the launch of the Blueprint.

Finally, the Panel thanks the members of the public who participated in the consultations and who took the time to send the Panel their written submissions.
Humanity is ageing rapidly and is doing so at a far greater rate than at any time in history.

Until this century, wars and disease caused many early deaths but thankfully the world has largely left these tragedies in the past.

Yet we are now faced with a challenge to create a society that embraces positively the economic and social impact of ageing. It is my privilege to chair a panel that has prepared a Blueprint for an Ageing Australia, and I am pleased to present the Blueprint in the pages that follow.

It sets out the steps that must be taken now to ensure that ageing is an asset, not a liability.

The real task starts at this moment. This Blueprint must not sit on a shelf gathering cobwebs. It is relevant only if it is implemented with urgency. My Panel will now work diligently to make sure that this happens, and I invite you to join us in achieving this.

The Panel wishes to record our grateful thanks to Per Capita, National Seniors and National Australia Bank Group for forming a partnership to make this happen, as well as our supporters at Ashurst and Silver Chain. We also acknowledge the many generous donors without whom this task could not have been completed.

May I also thank all those who attended consultations with us around the nation, and provided the wisdom of their years of experience in the field of ageing.

Everald Compton AM
Chairman, Blueprint for an Ageing Australia
3 September 2014
Ageing as a social and economic asset

Longer lives are the most positive development in the last century of human history. They represent the product of greater prosperity, better diet, disease eradication and healthier lifestyles. They offer each of us, on average, 25 extra years of high quality living with new opportunities for productive work, unprecedented leisure, teaching and learning, and fulfilling relationships with family and friends.

Too often, though, this is not how longer lives are represented in the media or treated by policy-makers. The orthodox perception of ageing is one of decline and decay. We regularly debate the ‘challenges’ presented by an ageing population as though ageing was something to be feared and shunned. We talk about the costs and the burdens of ageing. This perception is misguided: ageing only represents a challenge if we choose to see it so. Instead, we could choose to see longer lives as a social and economic good.

This document—Blueprint for an Ageing Australia—is built around that idea that living longer is a good thing, that the rising average age of our population is a vindication of advances in science and health policy, and that the best way to approach it is to look for ways that older Australians can participate more effectively in our society and our economy to the best of their abilities. The Blueprint is, ultimately, based on the reality that ageing isn’t something that happens to other, older people, it happens to all of us and it is in all our interests to make it a more positive experience for everyone.
For these reasons, our report is not just a document for ‘old’ people. In fact we avoid the term wherever possible. Instead it is a blueprint for all of us as we move throughout the life course.

There is one further important point, without which policies for older Australians will not succeed. Every Australian must be included in the development of policies related to ageing, and in modern Australia with its Indigenous and Culturally and Linguistically Diverse (CALD) communities this means additional consideration must be given to their specific needs. Indigenous communities typically suffer from higher levels of socio-economic disadvantage than non-Indigenous communities, and many CALD communities are ageing at a faster rate than non-CALD communities as a result of historical migration patterns—this makes recognising their needs crucial to the success of any ageing-related policies. This report accepts the principle that underpins other Australian Government approaches, which is that policy design must consider equally the needs and perspectives of Australians from all ethnic and cultural backgrounds. Inclusion, empowerment and accessibility are the major themes that should guide policy-making, and all the policies outlined here should take these CALD and Indigenous-related principles into account in their practical application.

To make its case, this Blueprint summarises much of the excellent research that already exists, much of it undertaken by the Panel auspiced by the Australian Treasury, National Seniors and the Per Capita think tank. A full list of relevant research reports can be found in the bibliography at the end of this document to assist further research.
Over the last decade the nation’s top policy-making bodies have started to focus our population’s mind on the issue of ageing. Led by the Australian Treasury—most notably through its Intergenerational Reports and its report into the economic potential of senior Australians (Turning Grey into Gold)—and by leading demographers like Professor Graeme Hugo, this process has increased our understanding of the relevant issues substantially.

A summary of the findings of demographic research can be found at the end of this Blueprint, but, briefly summarised, it tells us that there are four demographic aspects of Australia’s ageing population over the next two decades that are of significant relevance to policy-makers.

» The numbers of older people will increase rapidly because of the large wave of baby boomers (people born between 1946 and 1965) who will turn 65 between 2011 and 2031. The number of over 65s will increase by 84.8 per cent, from 3.1 million in 2011 to 5.7 million in 2031.

» The proportion that the 65+ population will make up of the total population will increase from 13.8 per cent in 2011 to 18.7 per cent in 2031.
The policy areas and recommendations have been chosen because they highlight the principles we think underpin the right approach to the ageing of our society:

» They are proactive—our recommendations are based on the idea that ageing is creating opportunities and assets that need to be exploited rather than seen as problems to be overcome.

» They are substantial—while not covering every issue, our recommendations go to issues already recognised as substantial by public policymakers.

» They will improve the quality of life of all Australians—too much of the discussion of ageing focuses on issues related to incomes and health care. We agree these are crucial, but so many more issues need attention; here we explore them.

» They are original—many areas of public policy have already been or are being addressed by governments, businesses and the community. These recommendations offer new ways to make a difference.

» They are of relevance to all Australians—people from all backgrounds can benefit from these recommendations.

» They are areas in which our panel members have expert knowledge, expertise and experience—and we invite other Australians with passion and expertise in other areas of ageing policy to join the public debate.

» We see these recommendations are important building blocks in a new attempt to construct a more age-friendly society. We also highlight some other aspects of ageing that cannot be overlooked.

The characteristics of future 65+ generations are quite different to earlier generations entering retirement—economically, socially, and in their values, attitudes and their expectations.

The geography (distribution) of Australians aged 65+ and 80+ in 2021 and 2031 will be quite different to that of 2001 and 2013. Much aged care infrastructure will be increasingly mismatched with the location of older Australians.

The ethnicity of older Australians is becoming more diverse. While in 1996, older persons of CALD background comprised 18 per cent of Australians aged 65 and over, this number rose to 23 per cent in 2011 and is expected to reach 30 per cent in 2021. Overcoming any barriers to their full participation must be part of the policy solutions adopted.

Rather than replicate the detailed work of these reports, this document aims to get policy-makers focused on practical responses and, ultimately, solutions.

To do this and get the ball rolling on further policy action, we offer seventeen practical and important policy recommendations across seven policy areas. These areas are:

1. business opportunities
2. mature-age employment
3. philanthropy
4. enabling environments
5. retirement incomes
6. technology
7. wellbeing
Summary of Recommendations

RECOMMENDATION I
Minister assisting the Prime Minister for Ageing

RECOMMENDATION II
Seniors’ Enterprise Institute

RECOMMENDATION III
Ageing Design Awards

RECOMMENDATION IV
Austrade campaign on Australian exports for ageing marketplace

RECOMMENDATION V
Reskilling of mature workers

RECOMMENDATION VI
Uniform workers’ compensation for the over-65s

RECOMMENDATION VII
Golden Givers

RECOMMENDATION VIII
Housing bonds for rental properties

RECOMMENDATION IX
Design standards for an ageing population

RECOMMENDATION X
Transport for seniors

RECOMMENDATION XI
Raise levels of Internet access for older Australians

RECOMMENDATION XII
Enhance ICT training and support by expanding already successful ICT programs specifically designed for seniors

RECOMMENDATION XIII
ICT industry and professionals to establish a national strategy to increase use of technology by older Australians

RECOMMENDATION XIV
Federal Government to develop a National Vision and Strategy for Telehealth and progressively implement the building blocks of a Telehealth System

RECOMMENDATION XV
Mandating the study of gerontology in all health professional undergraduate courses

RECOMMENDATION XVI
Invest in national health and aged care infrastructure and systems

RECOMMENDATION XVII
The Federal Government should fund a multi-dimensional community campaign to improve knowledge about ageing and to target ageism
The need for culturally inclusive policy

Australia’s response to the opportunities and challenges of an ageing population must be inclusive. Although the recommendations in this Blueprint have been framed in generalist terms, it is essential that they are further developed to ensure they take into account the considerable diversity of the Australian population. There are two groups whose circumstances require special consideration:

1. Aboriginal and Torres Strait Islanders (Indigenous Australians)
2. Australians from culturally and linguistically diverse (CALD) communities

We must stress that we do not advocate similar solutions for both groups. In fact, we believe it that the two groups are fundamentally different and distinct and their special circumstances require and merit separate attention. It should also be understood that both groups are themselves extremely diverse and policies and services designed for them will need to be further refined to take account of this ‘diversity within diversity’.

However, there are some general principles that can be applied to both groups as well as to any other groups with special needs. The overriding requirement is to develop policies and services that are culturally sensitive and responsive and are based on cultural respect. The best way to do this is through:

» Meaningful engagement of the community representatives and elders in the development of policy and the design of services.

» Meaningful involvement of community representatives in governance and ongoing review.

» Increase the number of skilled carers and others providing services or support from within the community.

» Special support to members of the community who provide care on an informal and unpaid basis.

» Special cross-cultural training of service providers drawn from the wider community.
Ageing and Aboriginal and Torres Strait Islander (Indigenous) Australians

The challenges of ageing for the Aboriginal and Torres Strait Islander (Indigenous) population are significantly greater than for the rest of the nation, a reflection of their social and economic disadvantage.

The underlying cause of this is the continuing impact of the ongoing consequences of history. In the words of the Human Rights and Equal Opportunity Commission, “Colonisation, and the consequent dispossession, disruption and dislocation have impacted heavily on the well-being of Indigenous individuals and communities” (HREOC Social Justice Report 2002: Measuring Indigenous disadvantage). Indigenous Australians are more likely to experience poverty, stress, lower employment, less access to healthcare services, poorer housing and less healthy diets. These problems can be significantly greater for those living in small, remote communities.

The starkest outcome of these difficulties is that Indigenous Australians have a seriously lower life expectancy than other Australians. This means they have far fewer older people - according to the 2011 census, the proportion of Indigenous Australians aged 65 or over was 4% compared to 14.4% of the total population.

In addressing these challenges it is important to recognise that there is considerable diversity within the Indigenous communities themselves depending on numerous factors including their place of origin, clan, language, location (while many Indigenous Australians live in remote communities, most live in cities and towns).

To ensure that Indigenous Australians are actively engaged in the development of policy and aged care services, it is essential that there is widespread consultation with the communities themselves. We also believe that the issue of ageing needs to be managed within the over-arching context of Reconciliation. To this end we strongly recommend that Reconciliation Australia be given the responsibility for coordination of the process of consultation and ongoing involvement of Indigenous Australians and that public and private sector organisations be encouraged to develop a Reconciliation Action Plan in relation to ageing.
Over the past 70 years, Australia has become one of the most multicultural nations in the world. One in four Australians was born overseas; 45 per cent of all Australians were born overseas or have at least one parent who was born overseas; we speak more than 260 languages; we identify with 270 ancestries. Moreover, there is also considerable diversity within each of our Culturally and Linguistically Diverse (CALD) communities depending on the circumstances of arrival (e.g. as migrants or as refugees and asylum seekers), the length of stay in Australia, age at arrival and whether born here or overseas.

There is considerable evidence around the world that the ageing experience and the needs of older people are greatly influenced by culture, including traditions, religious beliefs and values and language. It is therefore extremely important that Australia’s response to ageing gives special attention to the considerable diversity of our nation.

Although the recommendations in this Blueprint have been framed in generalist terms irrespective of cultural background, we strongly believe that the special needs of CALD communities must be incorporated in every recommendation.

There are a number of arrangements already in place that we believe should continue and built upon. A good example is the National Ageing and Aged Care Strategy for People from Culturally and Linguistically Diverse (CALD) Backgrounds (the CALD Aged Care Strategy). Based on our consultations with CALD communities, we believe that the best way to ensure that Australia’s response to ageing is culturally relevant and sensitive is through CALD representation in the development of policy and in the design and delivery of services to older Australians. In particular, we strongly recommend the involvement of the Federation of Ethnic Communities of Australia (FECCA), Australia’s peak CALD representative body. FECCA is an inclusive association with considerable experience in reaching out to CALD Australians through its constituent member associations.
We call on the Federal Government to appoint a Minister Assisting the Prime Minister for Ageing. At present there is no Federal Minister for Ageing, and in the previous Federal Government, the relevant Minister combined responsibility for ageing with oversight of mental health.

We believe that the issues associated with ageing are far broader than simply health, and are significant enough to warrant a dedicated Minister under Prime Ministerial oversight. This position would be akin to the current Minister Assisting the Prime Minister for Women.

We believe the primary responsibility of the Minister would be to develop in conjunction with the Prime Minister an overarching national strategy for an ageing Australia, which co-ordinates federal, state and local government responses under Commonwealth leadership. The strategy would involve coordinated cross-jurisdictional planning, policy development and implementation in relation to ageing throughout the life course. Upon its completion, the new Minister would be responsible to the Prime Minister for the execution of the national ageing strategy.
Business opportunities

The opportunities
Nothing could better illustrate the positive aspect of ageing for Australia than the business opportunities it creates. Simply put, an ageing population creates a growing reservoir of older consumers from all walks of life, all ethnic backgrounds and all income groups, each with individual needs and wants. Consider the following facts gathered by the Australian Human Rights Commission’s Age Positive initiative:

» People aged between 55 and 74 had the fastest growing household wealth of any age group between 1994 and 2012.

» In 2011, the 55-75 age bracket held the greatest assets and had the greatest average net worth, ranging from $743,000 to $828,800, giving them considerable discretionary spending power.

» And 50-69 year olds alone hold more than 40 per cent of the nation’s wealth.

The generation that is now retiring—the baby boomers— have higher expectations, different lifestyle choices and different consumption patterns than their forebears, creating new needs for business to meet. Many things generally out of reach to older Australians in past decades, like travel, clothing, entertainment, dining out and home redecoration just to name some, are now in greater demand, making older consumers a market segment crying out for entrepreneurial attention. The possibilities are almost endless, with baby boomers presenting a vast market for a potential explosion of products and services—new dating websites, longevity insurance and new kinds of food amongst others.

And those opportunities are not just in Australia. Globally, over 60s spent $8 trillion in 2010, and by 2020, they will spend $15 trillion. This means ageing is creating new consumer needs and wants across the world, making addressing older consumers a major export opportunity.

An extra feature of this expanding consumer segment is that often the people who understand its needs and wants best and who are best placed to take advantage of it are older entrepreneurs. In fact, the proportion of employed people over ages 50 and 65 operating businesses is already significant, as business ownership tends to increase with age. More than one in five workers (22 per cent) aged 65 years and over in 2011 were business owners. Australia needs these people’s skills, knowledge and business population to boost the workforce participation rate and national productivity.

The barriers
There is an obvious need for a more dynamic and expansive approach from business to this growing demographic. But there are problems.

The first stems from stereotyping. Older people can sometimes be invisible to businesspeople who are still wearing ageist blinkers. When marketers do think of older consumers, too often they are pigeonholed as being interested only in things like mobility aids, palliative care products, insurance and funerals. Others believe that older consumers are too set in their ways, having deeply entrenched brand loyalties that they are unwilling to surrender. Both these stereotypes are wrong. Smarter marketers are appealing to older consumers in far more dynamic ways across a far wider range of products and services, awake to the fact that older people tend to shop more often and are shopping online in ever greater numbers. We need to create stronger awareness of the employment and business opportunities that are being created by the rise of the older consumer and the capacities of older entrepreneurs to meet this need themselves.

The second relates to the comparative lack of products and services available. While products for older consumers have always existed, new ones are needed in addition to the traditional focus on financial services and traditional health products. Here are just a few areas with potential:

» smart personal sensor devices that can anticipate the needs of older people for pharmaceuticals and medical treatment

» “third-age experience agents”—all-in-one travel agents, career counsellors, matchmakers and life coaches

» outsourced services that provide help with important things like investment decisions and home maintenance

» non-invasive laser technology to rejuvenate aged skin

» the provision of mentoring services.

The third barrier relates to entrepreneurialism. While older entrepreneurs do exist, their numbers are still comparatively small; so we need to increase those numbers with new policies and new initiatives.
**RECOMMENDATION II:**

**Seniors’ Enterprise Institute**

Establish a Seniors’ Enterprise Institute to be seeded with joint funding by SEDIFs and the social enterprise sector, complemented by a dedicated program to support older entrepreneurs within the New Enterprise Incentive Scheme.

The Seniors’ Enterprise Institute is a business incubator for new ventures founded by the over 50s. There is enormous scope for the young and the old to form partnerships to start business enterprises or create not-for-profit organisations that meet a community need.

The Institute provides a physical space for co-location of start-up businesses and shared services for these businesses. In addition, it offers them tailored support and advice on business planning, seed funding, marketing, IT and compliance. Finally, it delivers business start-up training for older Australians who might be considering starting a venture but have not yet taken the plunge.

The Institute will house an extensive resource library of the latest market data and research on ageing and longevity markets, all available online as a virtual library. Its staff will have experience in business analysis, financing, operations and product development.

The operational approach of the Institute will be broadly based on the Enterprise Hub model employed by Social Ventures Australia (http://socialventures.com.au/work/act-social-enterprise-hub/). We propose the cornerstone investment is provided by the Commonwealth government through its Social Enterprise Development and Investment Funds (SEDIFs), with secondary funding drawn from the wider social investment sector. As a return on investment, the funders might receive a small equity stake (perhaps 5%) in each of the ventures supported by the Institute. In addition, the Institute would offer some services on a fee-for-service basis, on a sliding fee scale according to profitability.

The Institute would be located in a metropolitan area with a high relative share of older residents, such as the Gold Coast or the northern suburbs of Sydney. This would be complemented by a strong web presence, including an interactive website that houses the virtual library.

**RECOMMENDATION III:**

**Ageing Design Awards**

A consortium of Federal Government, Design Institute of Australia and seniors’ peak bodies should establish Ageing Design Awards (“The gOLDIES”) for innovation in creating new products and services for ageing marketplace.

The Ageing Design Awards will recognize individuals and companies whose vision has improved quality of life for older Australians. Awards will be made for innovation and design excellence in the provision of products and services to the ageing marketplace across a range of categories. These include residential design, leisure, mobility services, retail, hospitality, education and training, financial services and business support.

Category winners will receive a prize of $5,000 and the best category winner will receive a grand prize of $50,000.
Mature age employment

The opportunities

The ageing of the population presents numerous opportunities for employers to benefit from the skills, knowledge and mentoring abilities of older Australians. The benefits of raising participation rates for older workers would accrue to the whole population through increasing revenues, decreasing expenditures and providing people with extra years of savings, investments and superannuation to help prepare for their retirement from paid work. For these reasons, increasing mature age employment participation was identified as a major public policy priority in the Intergenerational Report 2010.

Mature-age employment in Australia has been increasing since the turn of the century, with the proportion of people aged 60-64 years in employment rising from 32 per cent in 2000 to 54 per cent in 2014. These increases have resulted from a number of factors:

» changes in people’s lives including later commencement of work, improved education and better health
» allowing people aged 60+ to receive an income from their superannuation while also receiving paid income
» incentives for employers to hire older workers, such as the recently announced $10,000 for hiring a person aged 50 years and over
» the women’s pension age rising progressively from age 60 in 1994 to age 65 in 2013, combined with higher proportion of women in the workforce
» inducements to work until age 70 such as the Pension Bonus Scheme.

Recently proposed changes to the eligibility age of the Age Pension make addressing this situation one of increasing urgency.

Yet despite these improvements over the last decade and a half, at just 58.9 per cent, Australia has relatively low levels of mature age employment when compared to many other OECD countries, including the USA, UK, Canada and New Zealand. This needs to be addressed. Its implications are obvious as spelt out in the Australian Treasury’s Intergenerational Reports:

RECOMMENDATION IV:
Austrade campaign on Australian exports for an ageing marketplace

Austrade should initiate a significant campaign to assist corporate Australia to export goods, services and investments in the ageing market worldwide in cooperation with national business organisations such as Australian Industry Group, Business Council of Australia and ACCI

Many countries face an ageing challenge but lack the expertise to handle the provision of goods and services that will be required. Australia has the skills and can win contracts worldwide in areas involving health, caring services, age-friendly housing, legal services, retirement incomes, skills training and technology, as well as investment of funds. The potential is huge and the business organisations of the nation can encourage and assist members in taking this up internationally.

To ensure that this potential is leveraged, we require the services and skills of Austrade to ensure that our business and professional communities enter this export market at the earliest possible date and take advantage of the market ahead of other nations so Australia is acknowledged as the world leader in this field.

The first step should be a study of the market and a determination of what segments of the market can be entered first, which sections of our skills base should undertake this and which nations should be targeted initially. The field of endeavour will provide a means of Australia prospering from ageing rather than considering it to be a drain on our economy.
“Older people are projected to continue to have lower labour market attachment than people of prime working age (25 to 54 years). This is particularly the case for people aged more than 65 years. As the number of aged people increases, their lower rates of participation are projected to pull down the total labour force participation rate from 65.1 per cent in 2009–10 to 60.6 per cent by 2049–50. That is, the impact of ageing on participation is expected to outweigh an improvement in the working-age participation rate for people aged 15 to 64 years from 76.2 per cent in 2009–10 to 79.7 per cent by 2049–50.”

The barriers

Although these trends in increasing mature age employment are encouraging, many barriers remain for older Australians who wish to remain in or re-enter the workforce.

In its August 2012 report Barriers to Mature Age Employment: Final Report of the Consultative Forum on Mature Age Participation, National Seniors Australia listed 14 such barriers, including:

» discrimination in employment on the basis of age
» significant care-giving responsibilities
» lack of available flexible work arrangements
» discrimination in recruitment practices
» insufficient job search skills
» lack of appropriate skills due to rapid technological innovation
» physical illness, injury and disabilities
» superannuation rules
» disincentives in the tax and transfer system
» poor quality workplaces unsuitable to older workers.

To these we can add other reasons for low participation rates by older Australians, such as:

» Higher rates of long-term unemployment — on average, unemployed people aged 55+ last worked in a full-time job 67 weeks ago, compared with 38 weeks for people aged 15-54.

» The fact that there is no workers’ compensation insurance for people aged over 65 — except in WA and Queensland. Many people over the age of 65 years face difficulties finding employment because workers compensation is not paid at these ages in most states.

» Age discrimination based on false stereotypes — in its August 2013 report Fact or Fiction? Stereotypes of Older Australians, the Australian Human Rights Commission found that significant numbers of businesses had cut-off age rates for hiring (an average age of 50), believed that older workers were less likely to be promoted, had difficulty adapting to change and were harder to retrain. Another report, Age Discrimination in the Labor Market: Experiences and Perceptions of Mature Age Australians, by National Seniors Australia found that 16 per cent of people in the labour market have been directly told they are too old for a job, 36 per cent of job seekers have experienced age-related discrimination in the form of exclusion during the job search process, and another 13 per cent had reported age-related exclusion in the workplace.

The answers

Further improvements to the prospects of mature age workers need to be made, including:

» making it easier to return to work after illness and injury
» providing health and wellbeing programs
» reducing or eliminating discrimination
» ensuring flexible working hours to accommodate caring responsibilities
» maintaining skills currency through training and reskilling programs and by investing in retraining

In this section we offer two recommendations to address the most important and urgent issues.

RECOMMENDATION V:
Reskilling of mature workers

Development of a specialist investment package by the Departments of Employment and Education and Vocational Education and Training (VET) providers, especially TAFE colleges, for reskilling and workplace transitions for the over 50s
The Mid-Career Training Bursary will be available to over 50s workers for ongoing development of their skills and employability. The package will offer an annual credit of $1,000 redeemable for approved post-secondary training through TAFE or university providers.

The credit will accrue over a period of three years, but will reset at the end of each three-year period. In addition, workers will be able to draw on a matching tax credit of up to $1,000 each year for each dollar of their own money they invest in further training by certified providers.

The program will be jointly developed by the Departments of Employment and Education and TAFE industry associations in each state. It will sign up partner employers who will receive a payroll tax credit for each unemployed over 50s worker they hire.

In each State and Territory, the statutory workers’ compensation scheme will be expanded to provide automatic workplace injury insurance for workers aged over 65.

There is little conclusive evidence to suggest older workers are a greater accident or injury risk in the workplace. The ABS Work Related Injuries report found that people aged 65 years and over recorded the lowest rate of work-related injuries and illnesses of all age groups with 30 per 1,000 people (28 per 1,000 men and 34 per 1,000 women).

WorkCover South Australia has conducted research which supports the findings of the ABS. It found that in South Australia (with its older population) it is not necessarily the person’s chronological age that predisposes them to injury at work but their prolonged exposure to health and safety risk factors over time. The Australian Public Service Commission has suggested that one reason for this is that older workers are more likely to be aware of safety in the workplace and, therefore, are less likely to have an accident.

Given the misconception that older people pose a higher risk of workplace injury, we consider that the case for workers’ compensation being extended to cover the over 65s is strong.

**Philanthropy**

**The opportunities**

As the population ages, an unprecedented opportunity arises for accumulated private assets to be channelled for the benefit of the Australian community.

While many older Australians lack the capacity to make donations to charities, many others have significant capacity, and should be encouraged and assisted to do so. This stands to reason: by retirement age, people typically have accumulated not just more savings but more of life’s necessities, which means they are generally more financially secure and have freer disposable income than younger people who are just starting out in life or just beginning to establish a family. Older Australians are also more likely than younger people to recognise the personal and societal benefits of giving to others.

As our nation becomes wealthier, greater levels of philanthropy are now possible and needed. Never before has Australia had such a powerful middle class, nor has it had so many wealthy people or such a great divergence between rich and poor. Philanthropy can help address these divisions to create a more caring community, and older Australians can play a big role in this.

And this brings an added benefit—because giving provides a great way for older Australians to demonstrate that ageing isn’t a cost to society but, rather, an opportunity to create a caring nation of generous people who improve the social fabric of Australia.

**The barriers**

Despite the need and potential benefit of increasing philanthropy, Australian levels of philanthropic giving are far behind those of the United States on a per capita basis. On average, taxpayers who make tax deductible donations to Deductible Gift Recipient charities (DGRs) donate just 0.35 percent of their taxable income. An obvious reason for this is history: in Australia there has always been a stronger role for the state in supporting individuals and communities and in patronising the arts, education, medical research and so forth. But with pressures on public spending increasing, there will likely be a greater need for philanthropy to fill the gaps in the future.

There are, however, plenty of positive signs. Analysis by the Queensland University of Technology Business School shows that donations to DGRs reached $1 billion in 2002-03 but had reached more than $2 billion just eight years later in 2010-11. That represents very strong growth, and that growth has continued. According to
Increased levels of philanthropy can be achieved by encouraging as many Australians as possible to establish charitable trusts or foundations now or provide for their establishment when making their wills. This means that they can work for Australia long after their death. Those with smaller income and assets can establish accounts within a ‘community foundation’ that has many donors as members. A national marketing campaign can encourage this to happen with urgency and direct it to the areas of greatest need such as education, medical and social research, science, innovation, the arts and the environment.

**RECOMMENDATION VII:**

**Golden Givers**

Invite Australian banks to organise a Golden Givers Campaign over the next decade by encouraging their clients to establish Charitable Trusts and Foundations and offering them management services in investing and distributing funds.

We invite Australian banks to organise a Golden Givers Campaign over the next decade to boost the number and value of charitable vehicles established by older Australians. Banks would encourage their clients, as well as the wider public, to establish charitable trusts and foundations, and offer them trustee services for the investment and distributions of funds. As we have noted in the case of corporate social responsibility in the ICT, we believe the marketing investment by these banks would pay dividends in the form of greater demand for their philanthropy services.

Older Australians would be asked to consider establishing such entities now or through their estate. Those with smaller income and assets would be invited to consider giving through a Community Foundation.

In addition, a Golden Givers Foundation can be established into which bequests for designated purposes can be made by older Australians who do not wish to create their own charitable entity. The Directors of the Foundation will be eminent philanthropists who will be invited to provide initial seed capital to manage the Foundation and promote the national Golden Givers campaign.
Enabling environments

The opportunities
Two of the biggest issues facing older Australians are housing and the quality of the urban environment. The unavailability, unaffordability and unsuitable location of housing within often poorly designed suburbs and towns in Australia poses problems for our ageing society. The right policies, however, can turn our housing stock and our communities into enabling environments—providing older Australians with the opportunities, lifestyle, services and supports to give them the lives they want to lead. Creating more integrated neighbourhoods and communities that work for our ageing population is a big task—one which will require significant redesign and redevelopment work—but it is not beyond us.

The barriers
Australia has a poor record of meeting this urban design and housing mix need in our cities and towns. So what are the problems?

The first set of problems relate to the design of our houses—People often want or need to live in different types of dwellings at different stages of their lives, yet in Australia housing suitable to the needs and tastes of older residents often isn’t available. Simply put, our housing stock is unsuitable, with more than three-quarters of it taking the form of detached bungalows in suburban locations. Such houses can be large, expensive to maintain and heat and in need of extensive refit to meet optimum standards for safety, mobility and amenity. While great for many younger families, these large houses need to be complemented by newly built or renovated dwellings suitable for older people.

Neighbourhoods are often not designed for older Australians—Australian suburbs were largely constructed around cheap petrol driven motor vehicles overcoming the tyranny of distance, and suburban planning to date hasn’t worked for older Australians who benefit from being able to walk and use public transport to reach local services.

The third set of problems concern cost—Rising house prices and rising rents prevent too many older residents from moving to better designed and more suitably located homes. With so much public scrutiny being on the housing needs of self-managed retirees and property-owning self-managed superannuation funds, we forget that a high proportion of older Australians do not own a home and are forced to live in sub-standard accommodation due to high rents. Those who do not own their home and are still renting or paying off a home in their retirement can pay up to five times as much for their accommodation as an owner-occupier does.

This issue of cost is the most urgent and is becoming more serious with every passing year. Research undertaken by the Housing for the Aged Action Group using data from FaHCSIA and the ABS tells us:

- the proportion of older Australians still purchasing their own homes is increasing—from 14.5 per cent in 2006 to 17.7 per cent in 2011
- the proportion of older Australians owning their homes outright is decreasing—by 4.9 per cent between 2006 and 2011
- the number of homeless older Australians is increasing—up from 12,246 people in 2006 to 14,851 people in 2011
- the number of older Australians renting privately in Australia is increasing—up by 100,826 from 2006 to 2011
- rents for older Australians are rising, causing poverty for many—in Melbourne, for example, a typical aged pensioner renting privately is paying 63 per cent of their income in rent for an average one bedroom flat (this figure includes income from all sources such as pension, pension supplement, energy supplement and rent assistance).

There is a general failure to recognise the scale of the shortage that exists for low-cost housing in Australia. In fact, Australia has amongst the most expensive housing in the world and one of the smallest amounts of public housing stock in the OECD—with social housing supply actually falling over the past thirty years.

The answers
New approaches are needed to refocus Australia’s housing and urban development to meet the needs of our ageing population.

Our suburbs, particularly the outer suburbs, need to be retrofitted so that they are age-friendly, environmentally-sustainable and incorporate features that encourage much stronger localism. This will involve improving services that assist older people to remain in their own homes. One example of how we might approach these changes encompasses urban planning to create accessible local environments in which people can get out and about. Improving accessibility for older people will need to include:

- affordable and well run public transport
- accessible transport for those with mobility problems, for instance, dial-a-ride schemes or door-to-door community bus services
» well-maintained footpaths so people do not fear falling over, and low kerbs with wheelchair ramps
» places to sit and rest
» public toilets so that older people affected by incontinence are not forced to stay at home
» safe and well-lit streets with a good police presence.

Inevitably there will need to be some housing redevelopment together with other changes designed to create more integrated neighbourhoods and communities.

Most urgently, though, ways need to be found to create more affordable housing, especially for older Australians who do not own their own homes and need to rent.

RECOMMENDATION VIII:

Housing bonds for rental properties

Develop a new Commonwealth wholesale housing bond program on international markets to facilitate greater investment in affordable rental property suitable for use by older Australians.

The thrust of this recommendation is to increase the supply of affordable rental housing by raising a dedicated pool of capital for targeted investment in new affordable dwellings. With the cessation of future rounds of NRAS, there is a gap in incentives for the construction of housing to be offered at below-market prices.

Through the Australian Office of Financial Management, the Commonwealth Government would tender sets of 10-year wholesale bonds, the proceeds of which would be explicitly quarantined for investment in affordable housing. This investment would be undertaken through a combination of direct construction of social housing under agreements with the states, and tied loans to private developers to build such housing.

These bonds would be sold to institutional investors, rather than retail savers. The rental returns on the social housing, and the interest payments from private developers, would be used to fund the Commonwealth’s coupon payments on the bonds.

Australian 10-year bonds are currently priced around 3.5%, significantly below the cost of debt for private developers, so while rental yields on public housing are unlikely to be more than 3.5%, there remains scope for the Commonwealth to lend to private developers at attractive rates while still covering the interest payments on its bond issue.

RECOMMENDATION IX:

Design standards for an ageing population

The Australian Building Codes Board should integrate age-friendly residential design principles into the Building Code of Australia so that a minimum proportion of dwellings within any new development are suitable for older residents.

The post-war explosion of suburban development resulted in homes largely focused on the needs of younger families. By contrast, a rapidly ageing population will require a broader focus in residential design and in particular, one that is attuned to the needs of older citizens. This may require retrofitting many of our homes (and suburbs) to ensure that they are age-friendly and enable older people to remain in their own homes longer before they may need to move into residential aged care.

It will also require an evolution in our approach to new residential building so that we are delivering an adequate level of age-friendly dwellings as we expand our housing supply. To this end, we call for the Australian Building Codes Board to integrate age-friendly residential design principles into the Building Code of Australia so that a minimum proportion of dwellings within any new residential development are suitable for older residents, including those with dementia.

These principles should be based on the Liveable Housing Design guidelines developed through the National Dialogue on Universal Housing Design and the Dementia Enabling Environment Principles developed by Richard Fleming and Kirsty Bennett at the University of Wollongong.

The Productivity Commission has argued that the mandatory adoption of such principles is not warranted given the community-wide costs (Productivity Commission, 2011: Chapter 12). Given the changing composition of housing demand due to ageing, however, we believe it is reasonable that a minimum proportion of all new residential development are required to enshrine age-friendly housing principles.

RECOMMENDATION X:

Transport for seniors

Federal, State, Territory and Local Governments should plan to vastly upgrade transport services by train and bus so that the use of public transport becomes the preferred mode of travel for seniors.
An age-friendly city is one in which suitable housing for older people is located along transport corridors as close as possible to a city centre and not in remote suburbs so that older people can leave their cars at home and use public transport which is frequent, comfortable, economic and efficient, with no one having to wait more than ten minutes for a train or bus at any time of day.

While this may seem to be costly to achieve, it will save governments huge sums that are increasingly spent in improving roads to handle ever-growing traffic. It will also save seniors a significant section of their pension usually spent in car usage, such as fuel, servicing and parking as well as significantly reducing the costs of traffic accidents.

**Retirement incomes and retirement outcomes**

The Panel recognizes that there has been extensive debate on the subject of retirement incomes in Australia in recent years. Among other things, we have seen the Henry Review of Taxation, the Cooper Review of Superannuation, the proposed Future of Financial Advice (FOFA) reforms, and the current Financial Systems Inquiry (Murray Review) into the Financial Sector. In addition, there is an impending Tax White paper which is also likely to consider aspects of retirement incomes and revenue, as well as the current Treasury review on retirement income stream regulation which canvasses a number of the issues below.

These exercises have already produced a raft of detailed policy suggestions and given this, we believe there is little to be added by offering a set of new detailed policy proposals at the present time.

Instead, we have chosen to approach the topic from the perspective of retirement outcomes — identifying what older Australians are seeking for financial security in retirement, and proposing a set of principles that should inform the evolution of our retirement incomes system.

In this context, the Panel wishes to commend Per Capita’s recent report, The Entitlement of Age, and urges policy-makers to consider its recommendations.

We believe that there are three principal outcomes Australians look for from retirement income, as reflected in the Financial System Inquiry Interim Report:

- **Predictability** — a stable income stream during retirement;
- **Risk management** — including protection from longevity, investment and inflation risks; and
- **Flexibility** — a range of characteristics, including access to occasional one-off withdrawals during retirement, for some the ability to bequeath assets and control over investments.

While Australians say they want to retire with more than just the public pension, and many believe they will do so, the evidence suggests this unlikely to be the case for a large number of older Australians. ABS survey data indicates that around half of people over 45 years of age expect to rely on superannuation as their main income source after retirement (ABS, 2013). However, analysis by CEPAR suggests that for people aged between 55 and 74 in 2012-13, significantly more people found themselves reliant on the public pension after retirement than expected to prior to retirement. What’s more, almost two-thirds of people aged over 50 say they are either worried or extremely worried about outliving their retirement savings (CEPAR, 2014).

The superannuation savings pool is growing and so is the proportion of the ageing population. The system is not yet mature and the swell of Baby Boomers moving into retirement over the next decade will see both a number of policy challenges and a significant change in the system as it enters into a deeper decumulation phase.

In this context, it is valuable to recall the objectives of the system that informed its original design. According to the original proponents and key architects of Australia’s superannuation system, the aims were in the nature of a ‘supplement to the age pension’ not a ‘substitution’ (Treasury, Superannuation Charter Group, 2013: 21). In light of the growing debate about fiscal sustainability, we should ask whether this is still the core purpose or are we deliberately aiming to reduce reliance on the age pension through savings from the superannuation system? If the purpose has changed from ‘supplement’ to ‘substitution’, the guiding policy principles will be different.

Several other developments are worth noting. As the Baby Boomers move into retirement our retirement income system will shift from an almost myopic focus on accumulation to decumulation. The effects of the Global Financial Crisis highlighted a paucity of sophisticated products in the retirement incomes phase. These are being addressed by both the market and by regulators, but important policy choices must still be made.

As noted earlier in this Blueprint, it is both economically and socially desirable given longer lives that Australians remain engaged in the workforce for longer, in ways that accommodate their capacity and desire to do so. This in itself will relieve pressure on our retirement income system, both public and private.

Taken together, these observations suggest the following desired outcomes from our retirement incomes system:

- **A adequate basic income for all older Australians through a targeted public pension, a combination of pension and own savings or relying on own savings;**
The capacity to minimise income volatility, while retaining some degree of flexibility;

Broader options to assist management of longevity risk;

Fiscal sustainability; and

The opportunity to remain in work longer, based on desire and capacity to do so.

We call upon the Federal Government to embrace these broad principles in future reforms of retirement incomes policy, and to include them in the terms of reference of new inquiries or policy evaluations that consider Australia’s retirement income system, such as the impending Tax White Paper.

Information and Communications Technology (ICT)

We need to examine technology from two perspectives:

A. ICT and its impact on the lives of older Australians

B. ICT and its potential in the remote delivery of health services (telehealth)

These are covered in two separate sections below.

ICT and its impact on the lives of older Australians

The opportunities

Few things today have as much potential to transform the lives of older Australians and maximise their continued contribution to the nation and society as Information and Communications Technologies (ICT).

ICT can provide improved health, quality of life and general wellbeing through access to the many services delivered online, including e-care, education, entertainment, financial management as well as social interaction with family and friends. The benefits ICT offers include:

- Greater choice of residential locations because services delivered online can be accessed from any place and at any time.
- Greater safety, security and independence.
- Increased opportunity for employment and volunteering, empowering older Australians to become and remain productive and make a significant contribution to the economy, alleviating skill shortages, increasing GDP and reducing their reliance on social security and welfare.

We are making some progress towards these outcomes. The recently released HILDA survey indicated that:

- From 2003 to 2011, the average retirement age increased from 59.8 years to 62.6 for men, and from 57.7 to 59.7 for women.
- The proportion retiring under 55 fell from a fifth to less than a 10th for men and from a third to a fifth for women over the same period. The share retiring under 60 also fell, and the share of those retiring above 60 rose, more sharply in the case of women.
- Over 65s relied on the age pension for 59.9 per cent of their income on average in 2011, down from 67.8 per cent in 2001.
- The share of over 65s relying on the government for more than half their income also fell from 69.3 per cent to 61.6 per cent but the share receiving any pension at all only fell from 80.9 per cent to 77.9 per cent. (Financial Services Council, 2014)

Of course, we must continue to ensure that the evolution of the retirement income system advances these desired retirement outcomes. Australia needs a retirement income strategy that is comprehensive of all taxation, superannuation, transfer system and employment issues. In light of this, we suggest the following broad principles be observed as the debates around the specific policy settings unfold:

1. Shift the focus among policy-makers, and indeed individuals, towards incomes for later life (the “decumulation phase”) rather than on the accumulation of superannuation.

2. Sustain an adequate age pension which supports vulnerable groups and is maintained in real terms relative to incomes.

3. Promote flexible workplaces that genuinely permit the choice for staged retirement.

4. Encourage superannuants to allocate a majority share of their superannuation balance to an income stream product (potentially with risk mitigation attributes) upon reaching retirement (from or after preservation age).

5. Ensure that over time the preservation age for superannuation reflects changes in life expectancy and the likelihood of longer working lives.

The barriers

Older Australians are not enjoying much of the benefit that ICT can deliver because they do not make enough use of it. According to the ABS, only 46 per cent of over-65s are regular Internet users compared to 83 per cent for all age groups combined. There is some evidence too that older Australians tend to use the Internet less frequently and for a more limited range of activities than those younger. None of this should lead to the conclusion that they are not interested in ICT. This would be an oversimplistic and inaccurate generalization.
THE SEVEN AREAS FOR NEW POLICY

The reality is that, when it comes to using ICT, older Australians face a number of challenges, which must be addressed if we are to increase their usage to the levels of other age groups. These include:

- **Cost**—for pensioners and low-income earners, the monthly cost of broadband connections and the cost of purchasing computer hardware and software can be prohibitive.

- **Insufficient skill in the use of ICT of people over 70**—Federal Age Discrimination Commissioner Susan Ryan has summed up the situation as follows:

  "People in their seventies, eighties and nineties didn’t grow up with computers. They probably left the workforce before computers became absolutely the dominant thing in the office, and so they’re not confident. They do need a bit of training, but there are many examples of people learning even in their nineties to become computer literate."

- **Difficulty in keeping technical competence up-to-date**—although those in their sixties and younger are likely to be more familiar and comfortable with using ICT, the pace and scale of technological change make their skills out-of-date very frequently.

- **Insufficient understanding of what ICT can provide**—many older people have an insufficient understanding of the services available on the internet or of the full potential of mobile devices, especially smart phones. This limits the benefits they get from their use of ICT.

- **Support**—without convenient, timely and affordable technical support, the use of ICT can be disrupted frequently and for long periods.

- **Accessibility for older Australians from CALD Backgrounds**—according to the Federation of Ethnic Communities Councils of Australia (FECCA), language barriers, lack of systems knowledge, limited culturally and linguistically appropriate training in computer, mobile phone, and internet use, and financial limitations all contribute to an inability of many CALD seniors to benefit from the world’s technology revolution, and these issues must be addressed by the provision of culturally appropriate and in-language information, training, and education opportunities.

This requires frequent access to convenient and affordable training to maintain currency of ICT knowledge and skills. This would include ‘last mile’ fibre connection to the NBN to ensure that broadband speeds are not compromised by running the last-mile access on old copper cable.

How can we address this situation?

Before we can address ageing-specific ICT reforms, it must be emphasized that any proposals to use ICT for the benefit of any section of Australian society depend on the availability of high-speed broadband across the whole nation.

The answers

It should be stressed that the recommendations relating to Internet access in residential facilities, community centres and housing specifically refer to those used or intended for use by older Australians only because the Blueprint focuses on an ageing Australia. This does not mean that the recommendations do not merit wider application to other sections of the community.

**RECOMMENDATION XI:**

**Raise levels of Internet access for older Australians**

Improve Internet access for older Australians by:

(a) Mandatory in-room Broadband Internet access in all new (non-private) residential facilities intended for older Australians;

(b) Broadband Internet Access designated as a mandatory feature of age-friendly housing design;

(c) Establishment of PPPs to provide access to high speed broadband networking (including ‘last-mile’ fibre connection to NBN) at all community facilities used by seniors such as libraries, U3A centres and clubs.

Over time, these levels of Internet access should be extended to cover Australians of all ages.

This recommendation comprises three separate initiatives that, taken together, will markedly improve high-speed broadband access for older Australians.

The first initiative requires that all new residential (non-private) facilities intended for older Australians include in-room Broadband Internet access. These dwellings will range across the spectrum of shared housing, including homes providing different levels of care as well as independent and shared living retirement villages.

The second initiative relates to Internet access to the home, which is where the vast majority of people over 65 live (94% in 2011 according to the ABS). Broadband Internet Access should be a standard feature...
of age-friendly housing design. Initially, it should become a mandatory requirement for all new housing with progressive retrofitting of existing homes in line with our Recommendation IX: Design standards for an ageing population. A share of the cost of this initiative would be reflected in a very small increase in dwelling prices. The remainder of the cost would be borne by the network provider to be recouped through broadband prices.

The final initiative is the establishment of one or more public-private partnerships to provide high speed broadband to a range of community facilities used by seniors specifically or shared with other community groups relying on public facilities for Internet access like youth, CALD communities and the unemployed. These would include computer clubs, libraries, U3A facilities, Migrant Resource Centres and Neighbourhood Centres. This initiative necessarily involves a public subsidy, as the community organizations are unlikely to be able to pay commercial rates for these connections, so the public investment within the PPP will be designed to bridge the funding gap.

**RECOMMENDATION XII:**

Enhance ICT training and support by expanding already successful ICT programs specifically designed for seniors.

Expand the Broadband for Seniors kiosk program and other clubs that belong to the Australian Seniors Computer Clubs Association to every LGA with joint funding from Federal/State Governments and facilities provided by LGAs.

Broadband for Seniors program is a highly successful initiative funded by the Australian Government and managed by a consortium comprising NEC, Adult Learning Australia, the Australian Seniors Computer Clubs Association and U3A.

The program provides Internet access, training and support for Australians aged 50 years and over at seniors-friendly, non-threatening and secure internet kiosks located in community centres. Training materials are provided to volunteer tutors who offer both individual and group training to build skills and confidence among older users.

There are currently nearly 2,000 sites, but, given that the older population is spread across the whole country, the program needs to be expanded to cover every local government area in Australia. This should occur with additional funding for broadband connectivity from the Federal government and the provision of kiosk sites by individual local governments and community associations in their own LGAs.

In order to help older Australians keep pace with continuous technological change, the program should also subsidise attendance at refresher courses in ICT by pensioners and other seniors (on a means-tested basis) once a year.

It is important to stress that the expansion of this program will require a corresponding increase in the number of ICT professionals that provide training and support as volunteers. We believe that ICT companies and ICT professional associations have a key role to play in encouraging their employees and members to become volunteers.

**RECOMMENDATION XIII:**

ICT industry and professionals to establish a national strategy to increase use of technology by older Australians.

As providers of ICT products and services, the ICT industry and ICT professionals need to take a leadership role in the development of an over-arching national objective and strategy to significantly increase the use of ICT by older Australians.

ICT companies are in a unique position to encourage and support older Australians to take more advantage of the benefits offered that ICT can deliver. They provide ICT products and services and also have the expertise and understanding to develop special programs that are most likely to work today, but can also adapt to technological change.

As suppliers, it is in their commercial interest to give special attention to one of the fastest growing segments of the national population, most of whom are potential customers. They need to design special packages of hardware, software, broadband connectivity, training and support to cater to the special usage requirements and financial circumstances of older Australians.

As good corporate citizens, they are also in the best position to provide ICT products and services to disadvantaged older Australians with some level of subsidy. Given the significant positive social impact of increased use of ICT by older Australians, ICT companies should give such assistance a high priority by committing 10% of their corporate social responsibility budgets to it.

While it would be up to individual businesses to determine what and how they contribute, it would be of significant advantage for the industry to work together to develop measurable national targets and an over-arching strategy to achieve them. This should also include recommendations on what governments and the
ICT and its potential in the remote delivery of health services (telehealth)

The opportunities
The Australian health system is already under serious pressure due to the rapid rise in demand for health services. The problem is certain to become more severe because, with a rapidly ageing population, the demand for health services is sure to increase very significantly.

ICT provides a practical and very powerful way to deliver a wide range of health services remotely helping overcome our most significant challenges, such as vast distances, low population, small, remote communities, skill shortages and budgetary pressures.

(There are a number of terms used to describe remote delivery of health services including telehealth, telemedicine and e-health. This section of the Blueprint uses the term telehealth.)

The benefits of telehealth include:

- Access for patients anywhere in Australia to the most appropriate health care providers and specialist services in the country
- Improved utilisation of scarce skilled resources by applying them to address demand wherever it arises
- Huge savings in time and cost through reduced need for travel by patients or health service providers
- Availability of treatment in the home or in an aged care facility, giving older people more flexibility in the choice of residence and reducing the pressure on hospital beds
- Remote monitoring of health indicators enabling improved self-management of health

ICT can also stimulate the growth of a very large telehealth export industry by building on the expertise and infrastructure developed within Australia to provide similar services globally, especially to the huge populations in our Asian neighbourhood.

Given Australia’s outstanding track record in the medical sciences and in the leading-edge use of ICT, we unquestionably have the capability and capacity to become a world leader in the telehealth.

The barriers
There are a number of issues which need to be addressed if Australia is to develop a world class telehealth system, including:

- An effective telehealth system will require close collaboration between several departments of Federal, State and Territory Governments, the medical and health care professions, patient representative groups, public and private hospitals, health insurers, researchers, technology providers, telecommunications suppliers and more. This can only be achieved if there is a National Telehealth Vision and Strategy, developed under the leadership of the Australian Government in consultation with all the other stakeholders.

- Although a National E-Health Strategy was developed in 2008 and is due to be refreshed by the E-Health Working Group (EWHG) this year, its focus was on information exchange across the health sector, especially the development of E-Health Records. Without underestimating the importance of E-Health Records – they are an essential requirement for a Telehealth System - the scope of a Telehealth Strategy would be significantly wider.

- Telehealth is highly dependent on the quality, reliability and speed of the telecommunications links between the location of the doctor and the location of the patient. It is not yet clear whether the re-designed NBN will pose any limitations to the range of telehealth services that can be provided from or to different locations.

- Telehealth requires a comprehensive and accurate E-Health record system. The lack of progress in the NEHTA project is therefore of significant concern.

- Telehealth requires substantial change in work practices and culture on the part of doctors, nurses and other providers of health services

- Global leadership in telehealth will require substantial additional investment in Health and ICT research and development.
» While there has been a significant amount of telehealth research in Australia, it is not clear if it is part of an over-arching collaborative research strategy. There is a suggestion that it is fragmented across several research institutions and numerous small projects.

» New Medicare and private health insurance funding models will probably need to be developed to reflect the changes in process and procedure resulting from telehealth.

The answers
What we need today is to recapture the vision, and ambition and courage that created the Royal Flying Doctor Service and make the substantial but essential investments in education and training, research and infrastructure required to develop a health system that meets the needs of the 21st century and beyond.

RECOMMENDATION XIV:
Federal Government to develop a National Vision and Strategy for Telehealth and progressively implement the building blocks of a Telehealth System.

The Australian Government should lead a study into in consultation with other public and private sector stakeholders with the objective of creating a world-class telehealth system over the next 10 years

The Australian Government should address any infrastructure issues that might negatively impact a world-class telehealth system

Finally, it should establish a special public-private national fund for a collaborative Telehealth Research program

Wellbeing
The opportunities
Although there is no universally agreed definition of wellbeing it is generally agreed that it is a multidimensional construct intended to summarise how good our life is, both objectively in terms of how aspects of our life compare to others as well subjectively, how we feel about it.

Research by the Organisation for Economic Co-operation and Development (OECD) has identified nine areas that matter for wellbeing: income, employment, housing, health, work-life balance, education, social connections, environment and personal security. An opportunity exists for the Minister responsible for ageing to promote the implementation of wellbeing indicators in each of the jurisdictions related to these domains. These measures can then be used to guide policy-makers to the issues requiring most focus for different age cohorts, because of gaps or failures in current policy, that require new strategies or resources to maximise wellbeing throughout the life course.

Our document has already made recommendations related to employment, income, housing and environments and how technology can enable social connections,
security and learning. We have therefore restricted our discussion of wellbeing in this chapter to health and participation. Health has in the past been seen as essentially synonymous with wellbeing. Indeed the World Health Organisation (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” Now while it is seen as an important contributor to wellbeing it is no longer, as already discussed, seen as the whole answer. The World Health Organisation (WHO) has a vision for ageing as a positive experience in which a longer life is accompanied by continuing opportunities for: realising one’s potential for health; participating in society according to one’s needs, desires and capacities; while being provided with adequate protection, security and care when one requires assistance. The concept of “Active Ageing” was developed to describe the process for achieving this vision.

There is a substantial evidence base for an association between older people’s activity participation and their health, wellbeing and survival. It is important that participation is not seen solely in terms of providing more opportunities and incentives for mature age employment, which has tended to be the focus of many governments’ response to population ageing, and excludes those more senior and can be seen to diminish the value of those who do not work but often contribute to society in many other ways.

The opportunity to participate in valued activities is important at all ages but can become increasingly challenging as people experience changed capabilities, illness and disability. Nevertheless older people, as they experience changes in their capabilities, adapt and adopt compensatory strategies so that they can maintain the activities most meaningful to them.

Despite the tendency by the media, and many in the general community, to depict older people as fairly homogenous and generally negatively (for example: sick, forgetful, unable to learn, vulnerable and as victims - AHRC, 2013) and still to talk about “the aged” as if we are all the same, we are of course as different in our later as in our earlier years. Thus there is a need for a diverse range of opportunities. These may include:

» Volunteering - where again a broad range of opportunities are needed to suit individual interests, skills, knowledge and wish to take on responsibility. A common theme from the Panel’s consultations was that there were numbers of older people who wanted more challenging and interesting volunteer opportunities.

» Learning - the opportunity to study new or familiar subjects, learn or relearn skills. As the population ages, universities and TAFEs need to see older people as a potential market that is expanding. One that has different learning and support needs and preferences than younger people, and is not necessarily thinking in terms of future employment. We also need opportunities for less formal learning and for sharing knowledge and skills, such as those afforded by community learning centres, U3A, men’s sheds and art and craft groups.

» Recreation - again a variety of formal and informal opportunities for physical and non-physical recreation need to be available within the community.

The barriers

Significant barriers currently exist for Australians to maximise their health and participation as they age:

» A system that focuses more on sickness and decline (especially in relation to older age) than health and wellness – the likelihood of being healthy in older age is increased by optimising health throughout the life course. While it is never too early in life to consider the impact of health promotion and prevention strategies on ageing, so it is never too late. There is increasing evidence that people through to advanced ages can learn and can change their lifestyle and health behaviours in ways that can have a significant impact on their health and function, and thus their wellbeing.

» Admission to hospital when treatment at home is a feasible alternative; or, for potentially preventable/avoidable conditions - admission to hospital is associated for older people with a very much increased risk of developing new or worsening disability and with reducing the likelihood of recovering from disability (Gill et al., 2010). A recent meta-analysis of “hospital in the home” services found that in comparison to treatment in a traditional hospital these services were associated with reduced costs, mortality and readmission rates; increased patient and carer satisfaction; and no increase in carer burden. There is a need for these services to be more widely available.

» Lack of continuity of care – continuity of care has been found to be one of the critical elements associated with higher levels of potentially preventable hospital admissions.
Access to care – the research evidence is also strong for a lack of GP supply being linked to higher levels of potentially preventable hospital admissions. Difficulties are often experienced in maintaining an adequate supply of GPs and access to medical specialists in many rural and remote parts of Australia.

Insufficient focus on restoration and older people’s capacity for recovery – longitudinal research has found that disability in older people is often episodic and speed and completeness of recovery can be greatly influenced by what happens during and after the precipitating event. To promote wellbeing, hospitalisation should be kept to a necessary minimum and always be accompanied by strategies to assist the older person to regain, and sustain in the longer term, as good health and function as possible.

Health professionals’ lack of knowledge and understanding of ageing – despite older people being the most frequent users of health and hospital services there are no mandatory requirements within health professional basic training to study ageing.

Ageism – there are currently reduced opportunities for older people to participate in all areas of life because of ageism. As shown by AHRC’s research, people in the community, including many older people themselves, still hold the negative view of ageing as being associated with decline, dependency and loss. There is little understanding of the ageing process, the frequently episodic nature of disability, the potential for recovery even in later life, the need to maintain capabilities and how effective older people can be at adapting, adjusting and compensating for functional impairments and managing their health issues.

While the disablement process that is often associated with hospital admission for older people is no doubt multifactorial, an important contributor is the knowledge, attitude and associated expectations of some health care staff.

Given the ageing of our population and the fact that the use of health services increases with age throughout adulthood it is essential that teaching directed to understanding ageing and the health and support of older adults is a priority within all health professional training.

The study of gerontology should be a core curriculum component of all undergraduate health professional training across Australia. Just as health is seen by WHO to be a complete state of physical, social and mental wellbeing and not merely the absence of disease or infirmity so do health professionals need to understand ageing across these domains. This is preferable to more restricted studies which focus on disease and aged care. Gerontology, by contrast, includes a spectrum of approaches including the social, psychological and biological aspects of ageing. As a more expansive approach, gerontology also combats the attitude about ageing being about illness and decline.

Recommendation XV:
Mandating the study of gerontology in all health professional undergraduate courses

All undergraduate health professional university courses across Australia should include gerontology (the study of ageing) as an integrated component of core curriculum so that the health workforce is equipped with the knowledge, skills and attitudes needed to assist people to maximise their physical, social and mental wellbeing as they age.

Recommendation XVI:
Invest in national health and aged care infrastructure and systems

This will better enable care continuity, service integration, equitable access to primary health care and a better understanding of the outcomes and costs of care.

We call on the Federal Government to:

» Modify the national e-health record strategy from an opt-in to an opt-out system and to include a person’s aged care as well as health care records.

» Continue to promote the development and take-up of cost-effective technology where it can contribute to improved health and wellbeing outcomes.

» Increase the number of Commonwealth Integrating Authorities who are approved to integrate Commonwealth data with data from other jurisdictions for health services research purposes.

The take up of PCEHRs in the community is currently relatively low. An opt-out system would assist in overcoming this (PCEHR Review, 2013).
The National e-Health Strategy Summary notes that studies have shown that 18 per cent of medical errors are due to the inadequate availability of patient information. A greater take-up of e-Health has the potential to reduce preventable hospital admissions by enabling more effective ambulatory care. It also provides individuals with the ability to access their own health information, increasing the possibility of better self-management and the ability to more actively partner with health professionals in the management of their health and care.

PCEHRs should be extended to include aged care records to enable fast and efficient exchange of patient information between health and aged care providers. In addition to enabling better care this would save significant amounts of staff time collating, sending, receiving and filing critical documentation.

Health services research is critical to the goal of maximizing the health and wellbeing of our population. If we are not to waste public monies on expensive or ineffective services, evaluation of whether a service produces the outcomes it has been designed to achieve, and at what cost, is essential. However, understanding exactly what services people have used and what outcomes have been achieved, is currently difficult as it often requires linking data from multiple data sets sitting in different jurisdictions.

Until now very few projects requiring data have been able to be completed because of data access issues, despite the protocols, expertise and funding being available. More recently a new access system has been put in place which specifies that linkage with Commonwealth data can only be carried out by approved “integrating authorities”. AIHW is currently the only integrating authority, the processes for applying for data are not yet well developed and while many projects are listed as approved, very few have yet received any data. The number of integrating authorities needs to be increased.

**RECOMMENDATION XVII:**

The Federal Government should fund a multi-dimensional community campaign to improve knowledge about ageing and to target ageism

The Government should use the learnings from the AHRC’s ‘The Power of Oldness’ campaign as the basis for the development of a larger, longer-term community campaign to target age-based discrimination and increase community understanding of ageing and adoption of strategies that can assist us to maximize our own, and others, wellbeing as we age.
Appendix I - Demographics

In this section we summarize the dimensions of Australia’s demographic landscape in the medium term. Our summary is taken from the work of Professor Graeme Hugo, and his report, The Demographics of an Ageing Australia.

Numbers of older people
The most rapid population growth in the recent intercensal period was among Australians aged 65+, and especially those aged 65-74 years. ABS statistics show that whether we use high, medium or low population growth scenarios, the numbers of Australians aged 65+ are increasing rapidly.

Proportion older people
The growth of the 65+ population will be more than twice as fast as the total population, and the fastest growth in that cohort will be in the ‘old old’ group of 75+ age groups. These age groups are the ones that have the highest level of demand for aged care and other services, especially health.

Characteristics of the older population
The most salient demographic element in the ageing of the Australia population over the next three decades is the Baby Boomer generation moving into older ages. Figure 1 shows the Australian Total Fertility Rate over the last century and it can be seen that the period following World War II saw an upswing in the number of babies women were having. While most countries experience an upswing in fertility after a war, the Australian post-World War II boom was sustained for two decades. This created a ‘bulge’ in the Australia age pyramid.
Figure 1: Australia: Total Fertility Rate, 1901-2012

Source: CBCS, Demography and ABS, Births Australia, various issues
The characteristics of the Baby Boomers moving into older age are different to previous generations economically, socially, culturally and in their attitudes, resources and expectations. Table 1 shows these differences. Boomers are more segmented than previous generations, and therefore the ageing market will be highly segmented, not only for housing and aged care but for all the goods and services older people use.

Table 1: Australia: Baby Boomers and Pre-war Generation As They Enter Old Age, Social Indicators


<table>
<thead>
<tr>
<th>Social Indicators</th>
<th>Baby Boomers (1946-65) %</th>
<th>Pre-war Generation (1927-36) %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entering later life without a spouse</td>
<td>34</td>
<td>19</td>
</tr>
<tr>
<td>Childless</td>
<td>14</td>
<td>9</td>
</tr>
<tr>
<td>Living alone</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed secondary school</td>
<td>43</td>
<td>6</td>
</tr>
<tr>
<td>Bachelor degree or higher</td>
<td>19</td>
<td>3</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify as Christian</td>
<td>66</td>
<td>80</td>
</tr>
<tr>
<td>Housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owner/purchaser</td>
<td>80.7</td>
<td>84.1</td>
</tr>
<tr>
<td>Rental</td>
<td>19.3</td>
<td>15.9</td>
</tr>
<tr>
<td>No Private Health Cover</td>
<td>37</td>
<td>42</td>
</tr>
<tr>
<td>Overseas-Born</td>
<td>31</td>
<td>21</td>
</tr>
<tr>
<td>NES Overseas-Born</td>
<td>20</td>
<td>12</td>
</tr>
</tbody>
</table>
What are some of the other characteristics of older Australians? The overseas-born population aged 65+ has almost doubled since 1991, while the Australia-born grew by about a third. In 2011, 36 per cent of Australians aged 65+ were overseas-born and 22 per cent were from Culturally and Linguistically Diverse (CALD) backgrounds.

Finally, the evidence shows that the Baby Boomers will have a higher rate of illness and morbidity than the previous generation. They are eight times more likely than the older generation to have three or more health problems. This will have a profound impact on the demands of the health system.

**Geography of the older population**

Australia’s older population is growing faster outside of the capitals than within them. However at the moment, the majority of older Australians live in large cities, especially in the metropolitan capital cities. It is therefore important to examine the changing distribution of older populations in those cities. The highest concentrations of older Australians are in the inner and middle suburbs, due largely to institutions being located in these areas. The fastest growing numbers are in the outer suburbs.

In the past people of pre-retirement or retirement ages have ‘aged in place’, however there are some interesting signs that the Baby Boomer generation may be showing a greater tendency to sell the family home when they become ‘empty nesters.’ There are also some patterns where Baby Boomers are selling their houses in the outer suburbs and downsizing to inner suburban areas and coastal suburbs within the metropolitan area.

It is, however, unclear the extent to which baby boomers will make residential adjustments as they enter or approach retirement. There is a need to more fully investigate the housing intentions of baby boomers and also to monitor ‘retirement-related-migration’ such as downsizing and involuntary trading down among vulnerable groups like renters. Doing this will mean that housing and services for an ageing society are better targeted.
Appendix II -

Summary of the WHO’s Active ageing: a policy framework

The WHO’s active ageing framework highlights the need for all nations to act simultaneously to counter the global socioeconomic and political risks associated with ageing populations the world over.

In Australia and internationally, policy-makers fear that rapid population ageing will lead to an unmanageable explosion in health care and social security costs. But while ageing populations will increase demands in these areas, there is also evidence that countries will be able to manage if they plan ahead, make evidence-based, culturally-appropriate policy choices and employ innovation and cooperation from all sectors.

Societies who are willing to plan can afford to grow old for several reasons:

» The major causes of escalating health care costs are not related to the demographic ageing of a given population—they relate to factors like inefficiencies in care delivery, excessive numbers of medical interventions and the inappropriate use of high cost technologies.

» The costs of long-term care can be managed if policies and programs address prevention and the role of informal care. Preventing chronic diseases and lessening the degree of disability among older citizens enables them to live independently for longer.

» Many people continue to work in the formal labour market in later life or would choose to do so if the opportunity existed. Many others continue to contribute to the economy through informal work and voluntary activities, as well as intergenerational exchanges of cash and family support.
The Framework calls for action to adequately provide for ageing people on three fronts, also referred to by the WHO as their vision for ‘active ageing’:

**Health**—people will enjoy longer and healthier lives. When they need care and medical attention they should have access to the full range of services to meet their needs and rights.

**Participation**—older people will make a productive contribution to society in paid and unpaid activities.

**Security**—older people are afforded protection, dignity, and care, especially when they are no longer able to look after themselves.

Proposals in the Framework crossover from health into a variety of government portfolios and some apply to all age groups while others are specifically targeted to older people. The key policy proposals are:

1. Preventing and reducing the burden of excess disabilities, chronic diseases and premature mortality
2. Reducing risk factors associated with major diseases and increasing factors that protect health throughout the life course
3. Developing a continuum of affordable, accessible, high quality and age-friendly health and social services that address the needs and rights of women and men as they age
4. Providing training and education to caregivers
5. Providing education and learning opportunities throughout the life course
6. Recognising and enabling the active participation of people in economic development activities as they age
7. Encouraging people to participate fully in family and community life as they grow older
8. Addressing the social, financial and physical security rights and needs of people as they age
9. Reducing inequalities in the security rights and needs of older women.
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