



Ageing and Discrimination Forum Summary

“I feel invisible”

Background

COTA Queensland is a state based organisation committed to advancing the rights, needs and interests of older people in Queensland. It aims to create a more just, fair and caring community where older people are actively involved and empowered and have access to appropriate support, services and care.

COTA Queensland undertakes community development with vulnerable older people, provides community education and community awareness on health promotion issues and provides a state wide information and referral service. Furthermore it undertakes research, policy development and advocacy to inform government on issues impacting on older people in Queensland.

COTA Queensland recently facilitated an Ageing and Discrimination Forum "I feel invisible" at the State Library of Queensland on Friday 26 August 2011. The Forum was organised in response to rising concerns amongst older people that age discrimination is increasingly occurring in the broader community across a range of areas.

The Forum included key speakers, a panel discussion and small group discussions. (See Appendix 1 for Forum Program). Speakers included the Anti-Discrimination Commissioner of Queensland Mr Kevin Cocks, a representative from the Lesbian, Gay, Bisexual, Transgender, Intersex communities and a representative from the African Seniors community.

Approximately 50 older people attended the Forum as individuals or representing services which worked primarily with older people. Feedback from participants indicated the Forum was 'educative' and 'challenging' in that it highlighted issues of ageing and discrimination, especially in some vulnerable communities.

Key Forum Findings

While a wide range of issues were discussed, there were some key overall findings which emerged.

- Firstly ageing and discrimination exists across a range of obvious areas such as employment, health, and disability but age discrimination is rarely discussed in a public context, including the media.
- Secondly various communities experience an 'intersection' of discriminations which leads to further isolation and complexities. Older people from culturally diverse backgrounds can experience race discrimination as well as ageing discrimination, older people from gay, lesbian, bisexual, transgender and intersex communities experience sexuality discrimination, women can experience gender discrimination and older people with disability can experience disability and access discrimination in addition to age discrimination.
- Finally there are significant issues which arise e.g. social isolation, depression, elder abuse as a direct result of discrimination occurring on a 'day to day' basis across many areas e.g. transport, customer service.

There was a shared view from many participants that ‘feeling invisible’ hindered and impacted significantly on their daily lives, their relationships with people and accessing the support and services they may require.

Individual Participants Feedback

Forum participants identified the following key issues on ageing and discrimination and feeling invisible.

Employment

Employment and age discrimination has been widely researched and identified over the past decade. This discrimination was the most commonly identified issue by Forum participants. Many participants had directly experienced employment discrimination or knew of someone within their family or social network that had experienced this discrimination.

There was general consensus on the long term effects from this discrimination including decline of self esteem, anger management issues, depression, social isolation, and financial hardship and health issues.

The following quotes are a representation from some of the numerous responses received from Forum participants.

“I was Indirectly discriminated against by my employer because I’m over 45, overlooked for promotion, given ‘unnecessary’ warnings for “poor” performances, forced to leave, and experienced general morale reduction”

“In the workplace, my opinions did not matter. It was as though I was irrelevant – just someone who had to be tolerated. This was mainly by the younger generation and despite me being highly qualified for my role. Being 60+ is extremely difficult finding work. I personally don’t believe that there are many jobs out there for my generation even the Government would like us to agree with their rhetoric on the jobs situation for older people”

“There are multiple instances of age discrimination for people trying to enter employment. 50+ particularly professional males, whilst the media touts there is a shortage of experienced workers and that workers should stay in workforce longer but the reality appears to be a huge amount of age discrimination by employers, suggest strategies of case management, financial enticement to employers”

“In the workplace, young people tend to speak over and interrupt older workers a lot – it’s as if our years of experience count for nothing”.

“In a previous workplace, I objected to the HR officer’s methods of staff selection because they were not based on merit. He made prejudicial comments about applicants and didn’t want to use standardised interview questions. He smiled at me patronisingly and said ‘Have you ever done job interviews before?’ The implication was that I hadn’t. I’ve had many years of chairing recruitment and selection panels in the public sector and have done training in merit selection”



Employment discrimination is also exacerbated for many older people with a disability, and those from culturally diverse backgrounds. An African gentleman poignantly expressed the following *“Most of our adult men and women are denied chance to work”*

Disability

Older people with a disability often experience both disability and age discrimination. While disability covers both physical disability and mental health issues, forum participants identified barriers for people with physical disabilities primarily.

People who are blind or have low vision often experience ‘invisibility’ in many areas such as social participation, lack of suitable employment, lack of appropriate material, and lack of access to information, accessible transport and appropriate recreational activities.

Of particular interest was also the “hidden disability” which impacted on many older people’s lives such as opening packages for people with arthritis, ineligible or difficult to read print, size of written material and reading print over coloured backgrounds. The quality of life was significantly compromised especially as most of the ‘hidden disability’ occurred in the home environment on a daily basis.

Kevin Cocks called upon the Chief Executives of government departments to take personal responsibility for the progress of their agency’s Action Plans, including Disability and other anti discrimination plans. He suggested that unless the Chief Executives accepted this responsibility and lead role, real achievements would not be made. In the context of discussion on the value of a United Nations Convention on the Rights of Older Persons Kevin indicated it was no coincidence that the Australian Government’s interest in developing a National Disability Insurance Scheme followed the ratification of the United Nations Convention on the Rights of Persons with a Disability.

Depression

Depression was identified in the top five categories from participants who attended the Forum, yet it was not openly discussed within the small group discussions, apart from carers suffering depression (see below).

COTA Queensland through its Peer Education program provides generic information on depression to older people across the state. While the numbers of people attending workshops may fluctuate, there is consistent feedback that discussing depression is still a stigma for many, especially for culturally diverse communities.

While time at the Forum prevented discussion on all issues, the incongruence between depression being listed in the top 5 issues from participants and lack of matching conversations is in accordance with research findings on the stigma often attached.

Health

A number of participants had experienced a range of negative encounters with health service providers, including general practitioners and hospitals. There was a general sense that doctors were less interested and bothered with the health issues impacting on many older people. In addition to this it was felt that health providers often made older people feel more marginalised by talking to the care giver as opposed to the older person themselves.



Some participants from culturally diverse backgrounds felt their health needs were not taken seriously. An African man claimed that “We are mostly just treated with Panadol”. Language and cultural barriers often compounded these disempowering experiences.

Other forms of discrimination included:

Sexuality

Discrimination based on one’s sexuality was a key topic chosen by COTA for the Forum. Guest speaker Sujay Kentlyn informed participants on a range of ageing issues which impact on people from the lesbian, gay, bisexual, transgender and intersex (LGBTI) communities. These communities often experienced discrimination based on both ageing and their sexuality which results in a much marginalised community who are often not receiving the appropriate care and/or health services as they age.

While there is significant research on ageing within the LGBTI communities (including recently released findings in the Productivity Commission Report *Caring for Older Australians 2011*), some of the key issues include:

- Many older people from the LGBTI communities are not recognised or supported in the delivery of aged care services
- LGBTI people have a justified fear of nursing homes and a strong desire to age at home. This is particularly evident for same-sex couples who are separated in aged care facilities or experience hostility and discrimination from aged care providers, for example, by not being recognised as an approved decision maker for one’s partner
- Same sex couples experience problems with issues of Enduring Powers of Attorney, funerals, advance health directives and inheritance
- Many care providers are faith based organisations and whilst their good work and faith is recognised, religion and sexuality have often contributed to the discrimination faced by LGBTI community members
- Discrimination and homophobic attitudes towards their sexuality or gender identity from some institutionalised aged care facilities impact on the quality of care, including lack of awareness on their special needs
- There is increasing evidence that gay men are ‘coming out’ in their later lives causing a range of issues relating to support for these men, families and discrimination and exclusion

Gay men were seen as a vulnerable group as they often felt discriminated against in their own community. This was compounded by many older gay men feeling rejected as they aged and experiencing feelings of loss of their attractiveness, ability to find a partner and being made to feel unwelcome in many social situations.

Of particular interest is an apparent ‘invisibility’ of older lesbians who are accessing services or aged care facilities. Of concern is that older lesbians are being increasingly socially isolated and not linking in with social support networks. It was acknowledged that more research is needed but it appears to be an emerging trend.

Overall the LGBTI is a particularly vulnerable group as it experiences the intersection of ageing and sexuality based discrimination.



Culturally and linguistically diverse background (CALD)

By 2026 it is projected that one in four Australians aged 80 and over will be from a culturally and linguistically diverse (CALD) background. Issues impacting on these communities have been researched and documented for over a decade.

There is concern that the issues are still not being addressed as highlighted through the following comments from Forum participants:

“In the African community there is a general feeling of invisibility of older men and women due to language barriers”

“There is still plenty of racial discrimination here in Australia”

“In many communities aged people from CALD are traditionally respected, but not in Australia”

“There still isn’t enough multicultural information and support services around that is accessible for people with limited English”

“Older refugees are here to stay – if the language barriers and discrimination aren’t addressed they will end up as very lonely old people”

“My parents are Italian – they and many of their peers are losing their English language skills more and more. How will they cope if they have to go to a facility where no one understands them, their history and their needs?”

John Okello from the African Seniors and Elders Club of Australia highlighted issues affecting ‘the aged, ageing and retiring’. “Elders play an important role in handing over experience and wisdom to children and grandchildren”, he said. Addressing long standing issues such as suitable culturally appropriate aged assessments, culturally appropriate services, language and interpretation services are the cornerstone of policy and practice changes needed to address the issues of these communities.

Religion

Religion was mentioned by some participants, and there was some discussion on the impact of experiencing discrimination based on one’s dress due to religion. For many Muslim women in particular this is quite frightening as they age and anecdotal evidence suggests that for some they are reluctant to leave the family home to avoid potential discrimination.

Intersection of discriminations

The intersection of discriminations was apparent from discussions at the Forum. It is critical for policy makers, government and service providers to be aware of the impacts on older people who experience both age and another form of discrimination. The above paragraph on Religion provides a good example of the intersection of gender and religion where anecdotal evidence suggests the impacts on older women may be greater than those on younger women.



Discrimination in provision of services

The following examples were also highlighted to demonstrate older people (particularly women) being discriminated in terms of services received at home including home renovations, home repairs and car repairs. For example:

- *Not given full information to make an informed decision*
- *Tradesperson may 'decide' what is best - attitude that older person cannot understand all the information & make their own decisions – yet older person is left with the consequences*
- *Can be an attempt to cheat the older person out of money e.g. advising of work required on a car that was subsequently found not needed (on RACQ inspector's advice)*
- *Older people lacking in confidence may be taken advantage of e.g. an older couple agreed to internal house painting & moved their furniture to accommodate this but the painter took months to finish the work, i.e. would return every few weeks to do a bit more & then disappear again. Consequently, the couple were left with the inconvenience of a disordered home for months.*
- *Assumptions by service people etc that older people won't understand issues e.g. computer issues; solar hot water installation; mobile phones & phone plans.*
- *Families trying to dictate what an older person needs in terms of care or services. Need for case manager to work with older person's priorities in consultation with family members.*

Small group Discussions

Other issues identified by Forum participants affecting older people included:

Cost of Living, including Income

Rising costs of living expenses (rent, rates, power, gas) in comparison to low income/finances is creating poverty amongst many older people. One participant quoted *"There is now an economic invisibility as more and older people struggle with rising electricity costs.* Concern was also raised for some older people who are not aware of available assistance, particularly from Centrelink.

Elder Abuse

Issues of elder abuse are well documented. Powers of Attorney and advanced health directives (mental and physical abuse) continue to be issues of contention. An advance health directive allows people to plan what medical treatment or health care they would like in the event that they cannot make decisions for themselves. An advance health directive also enables them to appoint an attorney for health matters if they wish. However evidence indicates where such wishes can be abused by family members, for example, through the withholding of vital information. A Forum participant stressed that Elder abuse is *"Very important and hidden but is a result of discrimination generally; will likely decrease if other areas listed are addressed."*

Housing

Housing issues for older people encompasses concerns ranging from the lack of affordable housing to insufficient universal access and design, especially for older people who are frail or who have a disability.

The following comments were made in relation to housing issues:



“It is very hard to get government housing, while private rental housing is too costly as it absorbs their entire incomes”

“Homelessness is an increasing problem particularly among old women and in mining communities where older people are renting. Huge rent increases have forced people to relocate, Aboriginal people greatly affected and anyone on a pension”

“There is not enough universal access or universal housing for everyone”

“There are a lot of difficulties with housing bureaucracies including staff not passing on letters or phone calls to relevant authorities”

“For some older people, public housing might be all they have but sometimes it is not a very good environment”

“What happens to the older people who speak little English in public housing – they often don’t participate or understand what is available”

Transport

Regardless of the type of transport used, high anxiety is experienced by many older people. The following comments capture the breadth of transport issues (including older drivers) and impact mentioned on the day.

*“ As a service provider, I hear multiple stories re: taxi drivers:- The most recent example from clients and service providers was taxi drivers ripping off older people – charging more, refusing to accept concessions, not helping with shopping or mobility aids. Taxi driving complaining when old/frail people slow getting in and out of taxis. Client in wheelchair waiting for 1.5 hours for **booked** mobility taxi. Scared to complain as “only a few mobility taxis and I get the same drivers all the time”*

“As a presenter at the Productivity Commission on ‘Caring for older Australians’ I travelled by bus to the city on an early bus full of workers. An elderly lady with a walking stick was frowned upon by most and grudgingly offered a seat. When I spoke up re: my purpose for there as I would, a few smiles and congratulations were offered.”

“Some diverse groups (especially culturally diverse) prefer face to face customer service over technology – Go Cards and Direct debits”

“There is a low take up amongst African seniors of the Seniors Card or the Seniors Go Card”

“There are many assumptions made of older drivers with older cars especially that they are slow drivers. I get anxious when I drive my car because I can see the young drivers getting impatient with me, even if I’m on the speed limit. It means that many younger drivers take risks, causing accidents”

“In Toowoomba I often see young drivers verbally abuse and do rude gestures to older people who are driving. As an African man I am appalled that older people can be treated like this”

“When I say transport, I mean the mistreatment and no help from taxi drivers and buses – buses could do with extra steps. These things sometimes leads to abuse and depression and poorer quality of life and ‘staying indoors’ and therefore social isolation”



Finally there were also a number of general issues impacting on older people which were discussed within the small groups. While they may not be specifically age discrimination they demonstrate the interrelatedness and complexities involved.

Community attitudes towards older people

General community and media attitudes towards older people generated robust discussions. Of particular concern is media stigmatisation and feelings of being undervalued and 'invisible' in the broader community. The following are some quotes from Forum participants which reflect their views on attitudes within society.

"I often feel patronised by my adult children e.g. when I ask for assistance AND explanation about computer issues, my daughter is impatient with me and just does it instead of explaining it to me so I might be able to do it myself"

"When we are in a family gathering the young people are exuberant and interrupt often. When my husband and I speak it's as if we haven't spoken at all."

"I was with an older woman recently at the shops - people talking to me as I was accompanying her and not addressing her directly"

"At an aged care facility, staff often talking with younger people who are visiting the older person and not to the older person directly"

"Some people say things like 'You're only as old as you feel'. I hate that, it's patronising. I feel 72 – that's how old I am. What is wrong with feeling 72 – or 68 or 80? I'm active and intelligent and I live a good life. Why have negative connotations on one's age?"

"Shops – I have witnessed numerous shop assistances overlook older people. Aged care – a Director of Nursing only asked questions to the children rather than the older person. Doctors – the GP only asked questions of the person who was accompanying the older person".

"When people speak over the top of me I'm unsure whether it's because of my age or because I'm a woman – probably it's both"

"There is a general lack of respect for older people e.g. bus and school children"

"African seniors feel their achievements and contributions to their families and to life in Australia are often not acknowledged"

"There is such a lack of respect for authority and knowledge so undervaluing of older people and their experiences and status in the community"

"The recent TV reporter who said – the convoy of 'incompetence' should be convoy of 'incontinence' – that made me so wild – I should have written a letter complaining" (in reference to the convoy protest on carbon tax).

Social isolation

Social isolation is often experienced by older people due to a range of reasons including lack of access to transport, limited finances, health and/or disability issues, language/cultural barriers and



elder abuse. For some culturally diverse communities, social isolation is extremely debilitating and raises serious concerns about the quality of life for many older people.

“Africans have found a ‘severe inability to connect with the Australian ways of life’. Many feel like ‘second class citizens’”

“For some African seniors, a fortnightly trip to Centrelink is the only visit outside the home”

Social Participation

Social participation is a critical indicator of healthy ageing and well-being for all people within the community. This participation is often compromised for older people due to health, transport, disability and limited finances.

“There is a feeling among older Africans living here that they need training and/or mentoring and introductions to community services in order to be able to participate more fully”

“Once you stop participating its harder to keep your spirits up”

“For those living alone at home, unable to get out, family living away, living in residential care and people with mental health issues/depression – they often can’t or don’t participate”

“Children spend less and less time with grandparents so interaction and knowledge is decreased”

“African Elders play an important role in handing over experience and wisdom to children and grandchildren – this is one way they participate”

Government policy and planning

Some Forum participants felt there was a lack of planning by government to address the increasing ageing population. Concern was raised about the lack of policies and strategies by government to address all the issues raised at the Forum.

“All government needs to think more about the growing older population. What is government really doing about it?”

Carer’s issues

Carers were also mentioned as a particularly vulnerable group where often their work is undervalued, underpaid and insufficiently supported. The following comments capture some of the diverse issues impacting on older people who are carers.

“There are no respite carers on public holidays.”

“Older Carers are very prone to depression.”

“Older carers with adult children – some situations are heartbreaking.”

“Older carers are often isolated and most support directed at young carers. Many programs are targeted at younger age groups, including depression and mental health marketing”



Access to legal services

Some Forum participants indicated the need for improved access to legal assistance for elder law issues and family law issues around grandparents raising grandchildren.

Anecdotal evidence indicates that some older people are not able to access or afford legal services and are often embarrassed about seeking assistance, especially in cases involving family members.

Insurance

There appears to be a number of inequities in various insurance covers for older people. For example one participant claimed that a couple could not be covered for life insurance. Another participant felt that obtaining travel insurance for over 70 was very difficult.

Conclusion:

The Ageing and Discrimination – “I feel invisible” Forum has highlighted a breadth of issues as indicated above. The diversity of participants, their experiences and life journey to date contributed to providing COTA Queensland a platform to continue its policy and advocacy.

However the ultimate challenge is for policy makers and governments at all levels to address the myriad of issues for older people and the ageing process through dignified and sustainable responses with the ultimate aim of ensuring no older person feel ‘invisible’.

Appendix 1: Forum Program

Program schedule

9.30am – Registration and morning tea

9.45am - Introduction (Chair – Mark Tucker-Evans Chief Executive of COTA Queensland)

10.00am – Welcome to Country (Aunty Valda Coolwell Aboriginal Elder)

10.15am – Introduction of guest speaker Kevin Cocks Anti Discrimination Commissioner of Queensland and welcome to The Honorable Karen Struthers, Minister for Community Services and Housing and Minister for Women.

10.20am -Kevin Cocks to speak

10.50am – Introduction of panel respondents

10.55am -John Okello-Okanya (Leader, African Seniors and Elders Club)

11.15am - Sujay Kentlyn (Case Manager, Care Connect)

11.35am – Questions for the panel members.

11.45am – Small group activity

12.30pm – Lunch & networking

1pm – Close

