



Industry Brief on Ageing

Edition 1. July – September 2024

Council on the Ageing Queensland

Council on the Ageing Queensland is a for-purpose statewide charitable organisation.

We are the state's Seniors Peak and Seniors Social Isolation Prevention Peak and work with and for older adults, advancing the rights, needs, interests, and futures of people as we age. For more than 60 years, we have worked to influence positive social outcomes for older Queenslanders.

We connect directly with older Queenslanders, their families, carers, and organisations, service providers, consumer advocates, special interest groups, and our federal, state and local governments. We engage with all of these groups to understand needs, aspirations, and priorities for older people in Queensland, and partner to achieve the best outcomes for people as we age.

Our work includes policy analysis, community education, representation, evaluation and research, community engagement, and cross sector collaborations to achieve systemic change. We deliver funded programs directly to older people in need and provide sector support to those organisations who offer aged care and other services to older people.

We seek to eliminate ageism and support healthy ageing and growth of age-friendly communities. There are many areas of policy development needed to achieve this – elder abuse, energy, social isolation and loneliness prevention, climate resilience and disaster preparedness, digital inclusion, health, housing, and transport are just a few.

Our vision is that ageing is a time of possibility, opportunity, and influence.

With the number of older people expected to double by 2050, ensuring their voices are heard has never been more important.

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Acknowledgement

Council on the Ageing Queensland acknowledges Australia's First Nations Peoples as the original custodians of this land.



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Industry Brief on Ageing *Edition 1.*

Council on the Ageing Queensland undertakes a scope of developments, activities and trends every quarter across sector, research, and media which informs our advocacy and policy work as the Seniors Peak and Seniors Isolation Prevention Peak for Queensland.

Scope of the Industry Brief on Ageing

This is the first edition of the Industry Brief on Ageing prepared by Council on the Ageing Queensland. In our role as Seniors Peak and Seniors Social Isolation Prevention Peak for Queensland, in addition to our Aged Care Navigation (Care Finders) program in north Queensland, Commonwealth Home Support Programme (CHSP) Sector Support and Development (SSD) work, Energy4Seniors (E4S) program, and systemic advocacy, policy and engagement work, we bring unique perspectives directly informed by our work, our connections with sector, and our conversations with community.

We present quarterly insights below from Council on the Ageing Queensland work, and our colleagues across all states and territories (the Council on the Ageing (COTA) National Alliance). We then unpack insights from ageing related sectors, national and international research, and national media.

Council on the Ageing Queensland

Council on the Ageing Queensland has undertaken and contributed to diverse activities over the last quarter including **Queensland Seniors Month** which saw over 800 events registered with attendance from almost 32,500 people, and the promotion of Grandparents Day. In addition, the Seniors Peak team connected with community or sector leaders such as the **Queensland Walking Alliance** in active transport, accessibility, and creating safer streets and neighbourhoods; **Volunteering Queensland** in enabling greater participation around volunteerism and older adults; the **Queensland Public Trustee and the Public Advocate**; legibility forums for transport and accessibility, and work in general accessibility and inclusion programs. In broader health spaces including clinical and research, the team contributed to Inform **My Care Advisory committee**, **Australian Frailty Network**, **Queensland Women and Girls Health Strategy Advisory group**, and **Queensland Dementia and Age-Friendly** initiatives. The team also contributed to election related priorities, systems and policy foci for at risk cohorts through **Queenslanders with Disability Network (QDN)**, **Primary Health Networks (PHNs)** and the **Footprints Community**.

Council on the Ageing Queensland made presentations to the **Moreton Bay Elder Abuse Prevention Network**, **Brisbane Seniors Online** (BSOLutions event hosted by Brisbane Seniors Online), in addition to **local Seniors Expos** throughout July and August in Surfers Paradise, Townsville, Mansfield, Caloundra, and Alexandra Hills. We also continued to explore and participate in opportunities for research collaborations with **Queensland University of Technology (QUT)**. In the media, Council on the Ageing Queensland's CEO, Darren Young, contributed to **radio and media interviews** in relation to promotion of Seniors Month and in response to the ABC article *Geriatric hospitals could ease bed shortages, ambulance ramping, doctor says* (published 2 September 2024). Board Chair, Jean McRuvie, participated in the panel discussion *Does ageism affect women in health care?* as part of a session hosted by the **Windsor Group**.

The Seniors Peak team were also invited as panellists to the **University of Queensland (UQ)** Age-Friendly webinar *Highlights from UQ's Age Friendly University, on International Day of the Older Person 2024*, the **Older Women's Network** national conference, in addition to the Australian Association of Gerontology (AAG) webinar on *Ageing Well in the 21st century: Combatting Social Isolation and Fostering Connection*.



The organisation provided support via collective written submission by **the Summer Foundation** for immediate implementation of the National Construction Code (NCC) Liveable Housing Design Standard and call for clearer accountability and transparency measures for inclusive homes and communities (and accessible housing stock) as part of the wider **public consultation on Australia's Disability Strategy (ADS)**. We further contributed to the Joint Regional Needs Assessment Prioritisation Process via a comprehensive survey and consultative process for **Brisbane South Primary Health Network (PHN)**.¹

Council on the Ageing Queensland team has also been working closely with the **Australian Catholic University (ACU)** and the **state government** to progress the development and implementation of an Ageing Well Survey following the trial of the digital survey in 2024. In addition, the team worked with **La Trobe and RMIT Universities** in the recruitment of participants and support for promotion and attendance at the Healthy Ageing and Liveable Neighbourhood workshop which builds on longitudinal data of how people are ageing in the Brisbane region and what they view as priorities to remain within their communities as they age. In September 2024, the CEO, at the invitation from **Western Queensland PHN**, joined community consultations in Alpha and Tambo communities (issues that affected Seniors Health and Wellbeing including presentations on ageing, aged care, disability, and local services), in addition to a separate road trip to Longreach which included community workshop and discussion regarding death and dying.

The team also experienced a busy quarter with the appointment of a new team member to the **Commonwealth Home Support Programme Sector Support and Development team**, and the training of volunteers as part of the **Energy4Seniors project**.

With the appointment of a new Executive Officer, the establishment of the **Seniors Social Isolation Prevention Peak** is underway which will build and strengthen relationships with existing and new organisations in the Seniors Social Isolation Funded Organisations network (these are organisations that have been funded to deliver programs across the state of Queensland to mitigate and prevent social isolation). This will also see new initiatives and opportunities for wider participation and engagement of non-funded organisations and build new connections across the state to ensure the valuable work of community group and local organisations are recognised, sustained and supported.

In addition, the Seniors Peak team connected with Aunty Lyn Cullinane, who is a member of **the Aged Care Council of Elders**. Through mutual synergies and interests, Aunty Lyn provided invaluable insights with Council on the Ageing Queensland to assist our organisation in shaping future directions in building stronger relationships with Aboriginal and Torres Strait Islander older adult representatives and communities.

¹ North Queensland Primary Health Network (NQPHN), in collaboration with Torres and Cape Hospital and Health Service (HHS), Cairns and Hinterland HHS, Townsville HHS, and Mackay HHS, is working together on the JRNA to identify health needs and service gaps in our region. Over the past few months, they have conducted stakeholder and community engagements to gather approximately 1310 responses from health consumers, community providers and health service providers (with the most responses from the Mackay, Townsville, and Cairns regions). To date, emerging themes they have captured included lack of specialists, medication shortages, mental health and alcohol and other drugs, children with developmental delays, and older persons (specifically, aged care). Barriers to accessing care identified to date by health consumers included cost of visiting health service providers, medication shortages, medication cost, lack of specialists, and long distances undertaken for travel to visit a health service provider.



Each year, the Seniors Peak team engages with students **QUT's Work Integrated Learning**. This is a chance for students to be exposed to a sector/industry partnership, and the student work informs Council on the Ageing Queensland's policy and advocacy work. Two topics were set and undertaken by two student groups which included Ageism and Intergenerational Contact (Group 1),² and Community Approaches to Elder Abuse (Group 2)³:

Ageism and Intergenerational Contact

The World Health Organisation (WHO) emphasises intergenerational contact to combat ageism, but the effectiveness of these programs varies. Group 1. explored why this variability exists and evaluated current programs for improvement.⁴ Current intergenerational contact programs often fail to promote equal status between generations and collaborative goals, particularly in residential aged care facilities (and similar sites). Activities like children performing for residents or residents reading to children encourage interaction but do not foster equality or shared objectives. Without structured interventions following models such as Positive Education about Ageing and Contact Experience (PEACE) model, these programs may unintentionally reinforce ageist attitudes.

Studies show that perceptions of loneliness in older adults can predict future loneliness in younger participants, acting as a self-fulfilling prophecy. Negative stereotypes about ageing can lead to earlier declines in physical functioning. To counter these issues, it is crucial to educate participants about the mutual benefits of intergenerational experiences, priming them for positive interactions that challenge ageist myths. There is a need for more programs connecting older generations with primary and post-high school age groups, incorporating structured activities aligned with the PEACE model's five pillars (activities are sanctioned by authority figures; equal group status; intergroup cooperation; common goals; and sharing personal information).

The key learning was that *intergenerational contact programs can reduce ageism, but their success depends on various factors. Improving program design can enhance their effectiveness.*

Community Approaches to Elder Abuse

With a focus on community-dwelling adults aged 65 years and over at risk of or experiencing neglect and psychological abuse (the most prevalent, yet under supported forms of elder abuse), Group 2 focussed on availability of services for older people at risk of or experiencing elder abuse in

² Herriman, J., Kleinschmidt, T., Nagal, H., & Krsmanovic, M. (2024). *Ageism and Intergenerational Contact*. [Industry report]. Queensland University of Technology.

³ Murphy, C., Chalk, K., Christofis, Z., & Wandenelis, S. (2024). *Stronger Together: A Community Approach to Addressing Elder Abuse in Queensland*. [Industry report]. Queensland University of Technology.

⁴ Original research questions set by COTA Queensland included: 1. Define ageism in 2024. Do you think there are similarities in how ageism is experienced by younger and older generations? How? 2. What societal, cultural, or other factors are at play in how we perceive each other across different generations? 3. How does language and imagery impact our general understanding of ageing? 4. If you could write a strategy to tackle ageism for older adults (with your own cultural and generational lens), what would your key recommendations be?



Queensland's regional, rural and remote communities, and how services can be improved and made more accessible.⁵

The key learning was the difficulty of locating and establishing reach of services, identifying accessibility barriers posed by living in regional, rural and remote regions, with a resultant recommendation of a coordinated community response to address elder abuse: *Coordinated Community Responses (CCRs) have significant potential to enhance elder abuse services in Queensland's RRR regions through service integration and fostering collaboration.*

Council on the Ageing (COTA) National Alliance

We further provide an overview of the work undertaken in the past quarter within the Council on the Ageing (COTA) National Alliance (the COTAs that operate across Australia).

COTA Australia has been a strong national advocate for older women's health and wellbeing, addressing the Senate Inquiry report on perimenopause and menopause, which has helped destigmatise these discussions, emphasised the importance of superannuation payments during Commonwealth Paid Parental Leave, as this directly impacts the future financial health of older women, enhancing their retirement savings. They also welcomed the Federal Government's announcement that superannuation will now be paid on payday, a change expected to positively influence retirement savings and backed governmental efforts to combat ageism and improve elder abuse awareness through a national campaign. They increased awareness of financial issues affecting older individuals, many of whom utilise their superannuation for essential services like healthcare. Through webinars partnered with major banks, they have educated the community on identifying and mitigating scams. Additionally, they continued advocacy around the deficiencies in dental care for older Australians, particularly among Aboriginal and Torres Strait Islander communities, following the federal government's response to a 2023 Senate report on dental services.

In terms of aged care, COTA Australia advocated for a bipartisan approach to implementing the New Aged Care Act,⁶ raised concerns regarding wait times for accessing home care services will not be mandated under this act,⁷ and stressed the need for an aged care star-rating system and clearer communication to ensure older individuals and their support networks can understand and trust the

⁵ Original research questions set by COTA Queensland included: 1. Define elder abuse. Do you think different types of abuse should have specific forms of support or is it better to have generic services that can assist across all forms of abuse? 2. Investigate the types of indirect and direct services available for elder abuse (and related areas). a. Are these services – prevention, mitigation and/or intervention? For example, Queensland Police is often considered an intervention or acute service – they respond when a situation has reached or close to reaching crisis point. b. Will they be able to assist diverse older adults (e.g., cultural or language barriers or considerations, LGBTIQ+, gender, lower socio-economic background, early onset dementia, living with chronic health conditions, living with disability, etc.). 3. Investigate location of services – are there services available across the state? Would the current number or type of services meet the needs of older adults living in regional or rural areas of Queensland (can existing services be leveraged? Are there gaps in regional service provision?). 4. What is the most appropriate way to involve consumers (community members) in improving the quality and impact of the elder abuse system? 5. How would you measure success of a state-based elder abuse system? What data is needed and what would be the potential barriers to obtaining that data?

⁶ Australia, Elder Abuse Action Australia, LGBTIQ+ Health Australia, National Seniors, Older Persons Advocacy Network, Partners in Culturally Appropriate Care Alliance and Returned Services League of Australia had also advocated for bi-partisan approach urging federal government and opposition to take stronger action on the rights of older Australians in aged care and introduce the Act sooner for parliamentary review and for appropriate mechanisms implemented for public feedback.

⁷ Anglicare Life on the Wait List report highlighted that older people are on a waitlist on average for 15 months for home care.



information provided to them. They have called for immediate action from state and territory governments to standardise Power of Attorney laws.⁸ They continue to host information webinars in collaboration with the Older Persons Advocacy Network (OPAN) to facilitate discussions about the new Aged Care Act.⁹ They support the Federal Government's investment in Support at Home as part of the New Aged Care Act, as well as the latest round of indexation beginning on September 20, 2024, which includes increases to pensions, carer payments, and rental assistance. These measures aim to provide economic relief to older adults facing cost-of-living pressures.¹⁰

Across various states and territories, the individual COTAs have taken focussed approaches to advocacy and policy development.

COTA Victoria conducted a community survey and discussion paper on disability support for older adults in partnership with local disability organisations, addressed elder abuse by publishing a guide for lawyers aimed at assisting older individuals at risk of financial exploitation, and provided insights into the Care Finders service,¹¹ which helps older Victorians navigate aged care, showing that half of users had not been assessed, while 30% had been assessed but not yet received services.

COTA Northern Territory promoted community focus groups on elder abuse and held forums for aged care recipients and providers. Their advocacy efforts spanned issues such as aged care, housing, cost of living, and older adult rights and promoted events during Seniors Month and Grandparents Day to engage older adults in fitness and social programs, while also providing resources for accessing aged care services.

COTA New South Wales released a *Digital Inclusion Strategy Discussion Paper* with five recommendations aimed at improving engagement with older adults, emphasising the need for inclusive communication protocols and recognising that some residents will remain digitally excluded. COTA NSW also released a survey to inform their report on experiences of loneliness, and raised awareness on staying connected, and healthy ageing initiatives and webinars. They further addressed housing insecurity, social housing, and residential tenancies, nutrition and diet, death and dying (including VAD), energy advocacy, retirement villages, public transport, inclusive language, cognition and social engagement and wellbeing, and attending forums or events that promoted healthy ageing and community care. Their *50+ report* highlighted through survey and focus groups in relation to hospital admissions, that while older adults can access information online, they prefer in-person or telephone support, and they had experienced lengthy wait times and inadequate customer service.¹¹

⁸ *Empowering Futures: A national survey on the understanding and use of financial enduring powers of attorney* report shone a light on the gaps in literacy on the Power of Attorney laws, which means vulnerable or at-risk cohorts are even more exposed to potential elder abuse.

⁹ The Older Persons Advocacy Network (OPAN) continues to provide updates through online information, videos and webinars on a variety of topics including Aged Care Volunteer Visitors Scheme, nutrition, and rights of older adults in care environments.

¹⁰ COTA Australia CEO Patricia Sparrow referenced the increase of \$28.10 per fortnight for single age pensioners, and \$21.20 for each age pension member, the Commonwealth Rent Assistance increase of \$23.00 per fortnight for a single person, bringing the maximum fortnightly payment to \$211.20, and the increase of \$21.80 per member of a couple, totalling \$199 maximum fortnightly payment.

¹¹ An online survey involving over 1,800 individuals aged 50 and above explored their experiences accessing information during hospital admissions. The results revealed significant challenges in obtaining information, emphasising the need for tailored support. Participants could find information online, but they preferred direct communication with staff, either via phone or in-person visits. Many expressed frustrations with phone support due to long wait times and inadequate assistance from customer service. Accessing the necessary information often required extensive discussions with knowledgeable individuals. Experiences during hospital stays varied widely, with both positive and negative aspects reported. Key recommendations from the survey included enhancing accessibility when sharing information, providing intensive advocacy support, and training staff on effective communication with older adults to improve their overall experience in navigating healthcare services.



COTA ACT engaged local communities through initiatives such as the Positive Ageing Awards and the ACT Seniors and Better Ageing Expo, promoting healthy ageing and mental well-being. They also advocated for digital literacy, supporting older adults in becoming digital mentors. Their Tax Help program continued to assist low-income individuals, while they have hosted informative sessions on dementia care and retirement village options.

COTA South Australia promoted the *Strength for Life* program, which provides various fitness and educational opportunities, and addressed the topic of lower acuity facilities for older people who are stranded in hospitals, unable to find appropriate aged care placements, in addition to educational initiatives in relation to healthy ageing and raising awareness on scams, financial planning and literacy and planning for retirement, using technology, and falls prevention seminars. They emphasised community connections through events celebrating older persons and have addressed critical issues such as ambulance access. They advocated for older women affected by domestic violence, highlighting the need for government recognition of the health implications of such experiences that are often overlooked in elder abuse discussions.

COTA Tasmania expressed support for their state budget, noting a slight increase in funding for digital inclusion initiatives. They raised concerns about inadequate care supports in rural areas and advocated for amendments to the *Residential Tenancy Act 1997* to enhance renters' rights. They endorsed advocacy on accessible voting for individuals with disabilities, concerns were raised about residency requirements in the *End-of-Life Choices (Voluntary Assisted Dying) Act*, they called for uniform Power of Attorney legislation to protect older residents from exploitation, and announced initiatives like a new wellness hub *Ticket to Wellbeing* initiative by their state government, and the *Script Back* campaign (a Guild Pharmacies initiative), promoting health and active participation among older adults.

Finally, research from **COTA Western Australia** highlighted significant challenges older West Australians face in accessing information and communicating with government agencies. Findings indicated that many prefer using email for important communications.¹²

¹² Findings revealed that three-quarters of older West Australians struggle to access information and communicate with organisations and government agencies. Most prefer receiving important information via email. Key findings included: older adults are adept at using technology, favouring computers and tablets over smartphones, which see decreased use with age; email is the preferred communication tool, but it must be relevant to avoid being perceived as spam; rapid technological changes and complex user interfaces are major barriers to effective communication for older people; many prefer phone communication when self-help fails, but long waiting times are a significant obstacle; seventy-four percentage of respondents report difficulties in accessing information and communicating with organisations and government agencies. The most cited barrier is unclear or confusing website interfaces, noted by 39% of respondents.



Sector insights

Strong themes across ageing related sectors during the past quarter included:

Aged Care

- Aged Care Act 2024 reforms
- Workforce shortages & affordability
- Rural and remote aged care
- Malnutrition
- New funding models & standards
- Digital & assistive technologies
- Medication safety & innovation
- Home care shortages & waitlists
- Palliative care access & Voluntary Assisted Dying

Dementia

- National reports and action plans
- Dementia-friendly communities
- Inclusion in dementia research & care

Disability & Ageing

- Inclusive healthcare & employment
- Disaster preparedness for older adults with disability
- Disability advocacy & co-design strategies

Financial Security & Retirement

- Cost of living & pension poverty
- Access to financial advice
- Retirement income concerns
- Home ownership versus financial security

Healthcare Access & Prevention

- Preventable hospitalisations
- Cost barriers to medications
- Obesity & chronic disease prevention

Housing & Infrastructure

- Affordable & inclusive housing
- Accessible housing standards
- Ageing in place & planning reform

Mental Health & Trauma

- Mental health in aged care
- Trauma-informed care
- Social isolation & elder abuse
- Impacts of past trauma

Multicultural Communities

- Anti-racism strategies
- Housing, health & safety concerns
- Access to culturally appropriate services

Older People's Rights & Inclusion

- Elder abuse prevention & safeguarding
- Calls for Minister for Older Australians
- LGBTIQ+ elder abuse research
- Ageism & rights protection

Transport & Mobility

- Active transport investment
- Public health benefits of infrastructure planning

Women's Health & Ageing

- Menopause care & clinical guidance
- Barriers to accessing appropriate support

Activities or trends impacting and influencing ageing

We present below an overview of state and national activities and trends impacting or influencing ageing well, healthy ageing, or age-friendly during the last quarter in the ageing related sectors.

Sector

National

Aged care

In September 2024, the **Aged Care Bill 2024 was introduced to Parliament**, marking a significant reform in the aged care sector (the Act subsequently passed Parliament 25 November 2024).¹³ The new Aged Care Act aims to prioritise the rights and needs of older Australians, empowering individuals who are seeking care, and respecting their dignity. The legislation includes e.g. provisions for a single-entry point for aged care services, improved assessment frameworks, and enhanced accountability for service providers. It is hoped that these reforms will lead to a more equitable, sustainable, and responsive system, with implementation in July 2025, and forms part of the ongoing change to address the recommendations from the Royal Commission into Aged Care Quality and Safety.

Australia is confronting **significant challenges in the aged care sector**, notably workforce shortages that compromise both the quality and accessibility of care. This issue is mirrored in New Zealand, where funding problems necessitate reforms aimed at long-term sustainability. A substantial number of aged care residents suffer from malnutrition, emphasising the urgent need for improved nutritional standards and practices, and prompting promising initiatives to enhance food quality in residential aged care facilities (but may require wider implementation to be effective). Recent government reforms in residential aged care focus on **enhancing funding models and care standards**, with an emphasis on means-testing and better resource allocation. The bipartisan support in the last quarter for these reforms indicated a collective recognition of the challenges facing the sector and the necessity for comprehensive solutions. The reforms will require **increased financial contributions from self-funded retirees and part-pensioners**, raising concerns about the affordability of care while aiming to enhance overall quality and accessibility in the sector.

Rural and remote aged care facilities often provide high-quality care despite facing financial struggles, and residents frequently express satisfaction with their care. There is ongoing debate about the potential benefits of standalone geriatric hospitals to alleviate pressure on the broader health system, reinforcing the importance of improving aged care services.

Positively, **the reform discussions have highlighted the changes and expected impact on the sector**, funding announcements, innovative care models, etc. which continue to dominate media and sector discussions. Over the last quarter, topics have ranged from medication management, impact of digital technology, social connections for older adults, news and resources for informal carers, support programs, technological innovations regarding sensors for aged care, and initiatives to improve dementia care. In addition, topics have been highlighted around procurement strategies and

¹³ More information on the New Aged Care Act is available from the Department of Health and Aged Care: <https://www.health.gov.au/our-work/aged-care-act>



partnerships in the aged care sector and enhancement of medication safety. In the **technology space**, the introduction of new assistive technologies, ICT, AI applications, digital transformation strategies, digital health initiatives, and the adoption of electric vehicles by care providers were reported.

There was also an **ongoing focus on dementia** with *Dementia Action Week 2024* and dementia care including new tools and programs to support people living with dementia and their carers highlighting the importance of diversity and inclusion in dementia care initiatives. In the area of **sector research**, studies focussed on home care shortages, impact of hearing loss on social isolation and older adult involvement in dementia research were highlighted. Within clinical care, developments were reported around e.g., palliative care and pain management.¹⁴

Community and social services

The broader sectors of community services, social services, and ageing have held diverse foci over the last quarter. For example, **National Seniors Australia (NSA)** has been focused on **financial wellbeing** and preferences, **dementia experiences**, planning and mitigation anxieties around this and general insights about living with dementia, **vaccinations** and covid measures. In addition, they are currently running a **keep cash campaign**, **energy affordability**, fix **pension poverty**, and **aged care campaigns**. Other topics they continue to campaign on include **equity in retirement incomes**, **concessions**, **housing**, **health costs**, and **‘healthy earth’** (promoting practical opportunities for older Australians to deliver a legacy for future generations).

Further, National Seniors Australia and Challenger (a retirement income provider) explored how cost of living, market volatility and financial advice continue to impact the lifestyle and finances of older Australians. The *National Seniors Social Survey* of 4,700 Australians aged 50 and over revealed that **home ownership does not equate to financial security**. Nearly 90% reported that they rely solely on the Age Pension, and this was described as insufficient for retirement.¹⁵ A further issue raised by respondents is the lack of information to assist in navigating retirement with 42% explaining that they wanted to know more about aged care cost calculations followed by investment options (34%), and options to balance spending and saving (22%).

Further, the *Mental Health in Aged Care* report highlights the challenges faced by older adults including high rates of anxiety and depression and stressed **the importance of mental health support integration into aged care services**. The *Life on the Wait List: Caring for Older Australians at Home* report discusses the long wait times for home care services, which can prematurely force older adults into residential aged care, with an urgent call to action for government to remove the waitlist and increase support for home care services.

The Australian Government, Attorney-General’s Department (AGD) has commissioned and funded the Australian Institute of Family Studies (AIFS), in partnership with Queerspace, to undertake research on the **abuse and mistreatment of lesbian, gay, bisexual, transgender, intersex, queer, and/or**

¹⁴ <https://communitycarereview.com.au/category/features-and-contributors/contributors/>

¹⁵ Half of surveyed homeowners told us they would need \$10,000 (singles) and \$15,000 (couples) more than the Age Pension per annum to meet these needs. While the Age Pension provides a safety-net, the report highlights that older Australians need more for even a basic lifestyle. <https://nationalseniors.com.au/uploads/MEDIA-RELEASE-Study-reveals-Age-Pension-is-not-enough-even-for-home-owners.pdf>



asexual (LGBTIQA+) older people. This research will be guided by an LGBTIQA+ lived experience advisory panel (LEAP). Further, **Elder Abuse Action Australia (EAAA)** team supported the motion to **establish a dedicated Minister for Older Australians**, highlighting the need for a comprehensive approach to the growing older population, as projected in the *2023 Intergenerational Report*. A dedicated minister would help combat ageism and promote positive ageing. The EAAA urged the government to consider the benefits of this role for improving the quality of life for older Australians and fostering a more inclusive society.

Other sectors

From a general scope of sector and policy over the last quarter, the trending themes have been **elder abuse, dementia, mental health, home care, health and preventative care, active transport and infrastructure, economic concerns, obesity and public health, anti-racism, and telecommunications and accessibility**. Specifically, the *Evaluation of the National Plan to Respond to the Abuse of Older Australians (2019 – 2023)* highlights the need for coordination across various levels of government.

The *Dementia in Australia 2024* report provides an overview of **dementia prevalence, risk factors, and the impact** on individuals and their families, emphasising a need for a comprehensive national dementia action plan to improve outcomes; and the *Towards a Dementia-Friendly Future* discussion paper advocates for the creation of dementia-friendly communities to decrease the stigma and increase quality of life.

In relation to transport developments, *Proactive Investment: Policies to Increase Rates of Active Transportation* argues for increased funding and infrastructure improvements to promote walking, cycling, and the use of e-mobility devices. It suggests that such **investments can reduce car dependency and improve public health**.

Potentially Preventable Hospitalisations in Australia by Small Geographic Areas examines hospital admissions that could have been avoided with timely and adequate primary care. It highlights the importance of **effective community health services to prevent hospitalisations**.¹⁶ Further, *Cost Barriers to Medication Access in Australia* analysis reveals that many Australians, particularly women and younger people, struggle to afford medications. It calls for policy reforms to **improve medication affordability and access**.¹⁷ *Obesity in Australia: A Time for Action* discusses the **growing prevalence of obesity** across the life course and in different context and its health impacts and calls for improved health strategies and support systems. Finally, the *Anti-Racism Framework* addresses the

¹⁶ Rates of Potentially Preventable Hospitalisations (PPH) in 2021–22 were higher in older Australians, aged 65 years and over (about 303,000 hospitalisations or 6,900 hospitalisations per 100,000 people) compared with Australians aged under 65 years (about 357,000 hospitalisations or 1,700 hospitalisations per 100,000 people). Rates of PPH were also higher in older Australians in 2020–21. See Figure 2. for details of rates per older adult cohort (over or under 65 years of age): <https://www.aihw.gov.au/reports/primary-health-care/potentially-preventable-hospitalisations-2020-22/contents/summary#Rates-among-older-Australians>

¹⁷ Younger Australians are more likely to experience cost barriers to care than older Australians. A 25–34-year-old is 2.7 times more likely to experience medication-CRNA than a 75–84-year-old, 3.1 times more likely to delay visiting or not visit a general practitioner due to cost, and 3.8 times more likely to delay visiting or not visit a specialist due to cost: <https://www.mja.com.au/journal/2024/221/8/cost-barriers-medications-access-australia-analysis-patient-experience-survey>



experiences of multicultural communities in Australia and proposes strategies to combat racism and promote inclusion.¹⁸

The National Australia Research Institute (NARI) outlined the significant reform in the aged-care sector, the introduction of the *Support at Home* program with the aim to **decrease wait time and have tailored services**, and **subsidies** for clinical services and co-contributions for independence and everyday living services. They raised awareness around **falls prevention and recovery** following a fall through diet, exercise, home modifications, assistive devices and emotional support. They further hosted a Conversations on Ageing series (which is a public online engagement program) with a focus on neurodiversity, specifically **Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD)** in older adults, and from this highlighting the need for increased awareness, diagnosis, and support for neurodiverse older people. In partnership with Silverchain, NARI also **developed a guide for home care providers around implementation of digital technologies** to effectively address barriers and leverage enablers to improve the quality of care for older adults.

Queensland

Community and social services

The *Queensland Election Platform 2024: A Fair Share for All Queenslanders* by **Queensland Council of Social Services (QCOSS)** emphasises several key areas for older adults. **Housing** is a major focus, with plans to build 53,500 new social housing dwellings by 2046 to address housing insecurity among older adults. **Cost of living** is another priority, advocating for improved access to financial counselling and programs to reduce digital disadvantage, ensuring older adults can participate in the energy transition. The platform also calls for the **sustainability of community services** through fair procurement and contracting practices, which includes funding for training and supervision to enhance service quality for older adults. **Human rights and equality** are highlighted, with support for a human rights-respecting culture and reforms to protect older adults' rights. Healthcare investments are emphasised to ensure **accessible and affordable services** for older adults.

In the *Living Affordability in Queensland 2024* report, **financial stress** due to rising costs of housing, energy, food, and transport is a significant issue for older adults. Many face housing stress, spending over 37% of their income on housing. Cost-of-living pressures lead to detrimental trade-offs in health and wellbeing, and high transport costs increase social isolation risks.

The *State of the Sector 2024* report notes **increasing service demand among older adults**, workforce challenges in the community services sector, and the impact of rising living costs. The *National Housing and Homelessness Plan 2024 Bill* addresses the housing crisis and homelessness support for older adults. The *Respect at Work and Other Matters Amendment Bill 2024* and the *Queensland Human Rights Act Review* focus on **workplace discrimination, human rights protections, improving complaint resolution mechanisms** for older adults, and housing and standard of living.

¹⁸ The consultations were designed to ensure a wide spectrum [...] and nine groups were identified as those that were more likely to face racism overlapping with other forms of discrimination. These groups included: Refugees and asylum seekers; Women; LGBTQIA+ multicultural groups; Young people; Older people; People with disability; People and communities of faith; New and emerging communities; Communities with prominent caste systems. An Anti-Racism Framework: The Perspectives of Multicultural Australia: <https://humanrights.gov.au/our-work/race-discrimination/publications/anti-racism-framework-perspectives-multicultural>



The *Queensland State Election 2024 Disability Online Forum Summary Report* by **Queenslanders With Disability Network (QDN)** emphasised the priorities areas across the state (that were raised at the online forum). Critical areas for **older adults with disabilities** included housing as a significant concern, particularly access to **affordable and suitable housing**. The government's four-year disability housing action plan *Partnering for inclusive housing with Queenslanders with disability 2024-2027* was mentioned and aims to address these needs by ensuring new developments meet Liveable Housing Standards. **Healthcare accessibility** was signalled as another priority, emphasising the need for investments in primary healthcare, free GP services, allied health workers, and psychologists. The government's investment in medical aids and equipment programs was also noted as beneficial for older adults with disabilities. **Employment opportunities** were highlighted as crucial, with a focus on creating inclusive workplaces and increasing disability leadership and representation on Queensland Government boards. The report also stressed the importance of **disaster and emergency planning** tailored to the needs of older adults with disabilities.

Rights and advocacy were emphasised, along with government investment in **expanding individual and systemic disability advocacy** to uphold the rights and needs of people with disabilities. Aged and Disability Advocacy Australia (ADA) was mentioned as a key organisation representing their target cohorts' interests. The *Queensland Disability Stakeholder Engagement and Co-Design Strategy 2024* was also mentioned and aims to **enhance the involvement of people with disabilities in planning and implementing reforms**. Key elements include establishing governance structures, creating a Disability Engagement and Co-Design Hub, organising community engagement activities, and implementing robust data collection methods. This strategy focuses on co-design to ensure reforms are responsive and sustainable, **fostering ownership and partnership among stakeholders** for innovative solutions and improved outcomes in disability services across Queensland.

Key points related to older adults from the *Final Report of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability* included **prevalence of disability** (with almost 50% of adults aged 65 years and over living with a disability, which is significantly higher compared to other age cohorts); **adult safeguarding laws** to address elder abuse, which are in place in South Australia and New South Wales, and recommendations for all states and territories to enact similar adult safeguarding laws, empowering independent bodies to administer functions like information and referrals, advice and support coordination, investigation, public reporting, and community education. There were also components within the report on the inappropriate use of **psychotropic medicines to manage behaviours of older people with disability**, and recommendations for joint annual progress reports and independent evaluations to determine if measures have reduced the use of such medications. Finally, **Community Visitor Schemes (CVS)** are mentioned as a mechanism to independently monitor services and facilities provided to older adults with disability, ensuring their rights and resolving issues or complaints.

Palliative Care Queensland highlighted the release of the *Voluntary Assisted Dying Quarterly Report (July – September 2024)*, which detailed the uptake of Voluntary Assisted Dying (VAD) in the state including 489 individuals who undertook initial assessments, with 241 receiving support to end their lives, highlighting the **growing acceptance and implementation of VAD in Queensland**. Furthermore, Palliative Care Queensland launched its *2024 Priorities Report*, which outlined strategic goals aimed at **improving access to palliative care services**, particularly for younger populations and



those in rural areas, in addition to a need for increased funding and community engagement to enhance service delivery and support for families.

Ethnic Communities Council of Queensland (ECCQ) have addressed several pressing issues faced by multicultural communities in Queensland, emphasising the need for **tailored strategies to prevent family and domestic violence against women**. Additionally, they addressed the **housing crisis**, describing it as deeply problematic requiring a holistic approach, put forward a call to consider the **social and environmental risk factors** affecting young offenders to effectively tackle youth crime within communities, urgent needs were identified for the **Adult Migrant English Program (AMEP)** in Mount Isa and for culturally appropriate strategies to combat bloodborne viruses and **sexually transmissible infections**.¹⁹

The **Queensland Mental Health Commission** published their consultation report emphasising the **need for a trauma strategy that specifically addresses the experiences and needs of at risk and vulnerable cohorts**. Key consultations with older persons highlighted unique insights, ensuring the strategy reflects diverse perspectives on trauma, and consultation further highlighted importance of integrated and wrap-around services, particularly for older individuals in rural and remote areas, where accessibility is often limited.

Further, a significant focus is placed on **combatting social isolation and loneliness**, especially during critical transitions such as moving into high-dependency care. The trauma strategy advocates for holistic, trauma-informed approaches that combine medical and psychosocial support, promoting early intervention and equitable access to services. This includes **enhancing collaboration between health services, non-government organisations, and community supports** to create a coordinated trauma care system for older adults.

The **prevalence of trauma among older adults** is highlighted, with up to 70% having experienced traumatic events that can affect their emotional well-being, especially in care settings. The strategy also highlights the **risks of re-traumatisation in care environments**, emphasising the need for practices that respect autonomy and choice. Addressing elder abuse and enhancing early intervention strategies is crucial, along with recognising social determinants of health through models like social prescribing. Community-led initiatives are encouraged to build resilience and support marginalised older populations, fostering environments that nurture well-being. Overall, the strategies call for **tailored, accessible support services to effectively address trauma, promote healing, and enhance the quality of life for older adults** in Queensland.²⁰

As part of the research informing the trauma strategy, a policy paper was prepared,²¹ *Trauma in an Older Adult Context*, which indicated that approximately 75% of Australian adults have experienced trauma, with older adults' prevalence varying globally between 20-90%. While older adults generally exhibit lower rates of **Post-Traumatic Stress Disorder (PTSD)** compared to younger individuals, they

¹⁹ <https://eccq.com.au/publications/filter&tax=publication-type:479>

²⁰ <https://www.qmhc.qld.gov.au/strategic-planning/sub-plans/queensland-trauma-strategy>

²¹ Dr Leander Mitchell from the University of Queensland explored the prevalence, characteristics, and impacts of trauma among older adults, with implications for policy development. Dr Mitchell consulted Council on the Ageing Queensland while writing and researching this policy paper.



may face significant long-term consequences, including an increased risk of dementia and cognitive decline. Further:

- Life changes such as **retirement and bereavement can exacerbate psychosocial effects**. The paper further highlights the impact of **Adverse Childhood Events (ACEs)** on mental health in older adulthood, noting their role in increasing vulnerability to depression and other psychiatric disorders.
- **Elder abuse is also a major concern**, often involving various types of abuse, typically by family members, leading to severe negative outcomes. Environments like residential aged care facilities can trigger past traumas for those with histories of institutional or sexual abuse. The paper advocates for policies that incorporate trauma-informed principles, emphasising the need for staff training to recognise and respond to trauma, strategies to build resilience, and community programs to mitigate ACEs and prevent elder abuse.
- And further calls for research on trauma in older adults, particularly those with **dementia**, and stresses the importance of **enhancing psychological support in residential care settings** to improve the mental health and quality of life for older adults.

In the primary health care space, the **Brisbane South Primary Health Network (BSPHN)** published a toolkit, *Practitioner's Toolkit for Managing Menopause*, to assist **clinicians to assess menopausal status of patients**, including those with past hysterectomy or endometrial ablation, and users of hormonal contraception, identify treatment options, and enhance symptom management. This toolkit was created with advice based on contemporary knowledge around the physiological basis of menopause and new therapeutics, as well as issues of bone health. One in four women and gender diverse people have experienced **moderate to severe perimenopausal symptoms that negatively impact their quality of life**. Despite this prevalence, patients still face barriers to accessing appropriate care.²²

²² The Queensland Women and Girls' Health Strategy 2032 has also raised awareness to perimenopause and menopause related symptoms and experiences of older women. https://www.health.qld.gov.au/__data/assets/pdf_file/0025/1314079/QWGHS_Strategy_A4_Digital.pdf



Research findings

Diverse findings from ageing related research during the past quarter included topics such as:

Accessibility to quality healthcare

Aged care system and service quality

Chronic health conditions

Cultural and spiritual care

Digital literacy and access to digital services

Economic security and retirement income

Healthcare costs including economic costs of frailty

Housing security, affordability and rights of residents

LGBTIQA+ ageing and inclusivity

Legal rights in aged care and retirement living

Malnutrition in aged care

Evidence informing our understanding of ageing

Topics trending in the research space were just as diverse as sector insights. We present some examples of trends on ageing related research below.

High rates of depression, anxiety, and dementia is being reported among older Australians. Research has focused on various interventions aimed at **improving mental health outcomes**, particularly through community-based support systems and personalised therapies. Understanding the unique needs of older individuals is crucial for enhancing mental health services tailored to this population.

Social isolation and loneliness are prevalent challenges with health and economic implications, often exacerbated by mobility limitations and the loss of peers. Studies show that these issues have detrimental effects on both physical and mental health, leading to initiatives such as community engagement programs designed to foster social connections and alleviate loneliness. Research discusses the programs aimed at alleviating loneliness, particularly among low-income seniors, are crucial for improving overall wellbeing.

Chronic health conditions such as arthritis, diabetes, and cardiovascular diseases, continue to be prevalent among older adults and research dedicated to identifying effective interventions and lifestyle modifications to manage and prevent these conditions, highlighting the importance of physical activity and tailored health programs, has been highlighted. Further, malnutrition in residential aged care facilities is another pressing issue with innovative approaches, including natural language processing, being explored to identify and address malnutrition effectively.

Further, **accessibility to quality healthcare** remains a significant barrier and geographic disparities, financial constraints, and complex healthcare policies impede timely access to care. Research highlights the effectiveness of tailored healthcare interventions that improve health outcomes and overall wellbeing for older adults.

The **scrutiny of the aged care system**, particularly regarding the quality and accessibility of services, highlights ongoing challenges around staffing shortages and inadequate funding can compromise the standard of care. Evaluations of existing policies aim to improve support services in both residential and community care settings.

In addition, **cultural and spiritual care** is gaining recognition as a vital component of quality care in long-term facilities with programs that respect and integrate residents' cultural backgrounds can significantly enhance their quality of life.

Economic security poses another critical concern as people encounter financial difficulties related to retirement income and pensions. Studies emphasise the impact of economic policies on financial stability, underscoring the necessity of effective support programs to enhance economic security for older Australians.

Research has also increasingly focused on **digital literacy and access to digital services**. Innovations like assistive technologies and telehealth services hold promise for enhancing quality of life, although barriers such as anxiety and unfamiliarity with technology persist.

The **economic costs of frailty** among older adults are being reported as substantial, with significant healthcare costs and impacts on quality of life and the ongoing studies aim to understand this burden better and develop effective community-based support. Importantly, more awareness is being raised



around **older LGBTIQ+ individuals** who are facing unique challenges in accessing housing and healthcare services, necessitating targeted support systems that promote inclusivity and address disparities.

Finally, **the legal rights of people living in residential aged care facilities and retirement village contexts** are under examination, with advocacy for improved protections essential to ensuring dignity and respect. **Housing security** is also a concern, especially for older single women, with research emphasising the need for policies that provide safe, stable, and affordable housing options.²³

²³ A literature search was conducted via Google Scholar using search terms 'healthy ageing', 'age friendly', 'ageing', 'older adults', and 'older people'. This search was conducted for the period 1 July 2024 through to 30 September 2024. Initial list of articles was collated and scanned; items that did not meet the search criteria were removed. Remaining articles were accessed through their original published site and verified, and insights were gleaned from original articles. Google Search results summary:
https://scholar.google.com.au/scholar?start=50&q=%22older+people%22++australia&hl=en&scisbd=1&as_sdt=0,5



Media snapshots

Opinions, ideas, and snapshots from media stories and report during the past quarter included:

Accessibility to digital tools & literacy	Nutrition in aged care
Ageing & societal attitudes	Racism & ageing
Ageism	Retirement & workforce participation
Alzheimer's & dementia	Social services & healthcare access
Art & identity in ageing	Social inclusion
Biological ageing & fatherhood	Wearable technology & Indigenous health
Changing family structures	Youth justice reform
Cervical cancer screening	
Chronic health conditions	
Community engagement	
COVID-19 vaccinations	
Creative activities (art & music)	
Digital access and literacy	
Disability representation & inclusion	
Elder abuse	
Economic inequality & intergenerational mobility	
Exercise & physical activity	
Geriatric hospitals	
Healthy ageing programs	
Home care & residential care	
Housing affordability & rental stress	
Immigration & visa processing for older adults	
Longevity & ageing population trends	
Loneliness & social connection	
Malnutrition & protein intake	
Menopause & intersectionality	
Mental health & wellbeing	

Public discussions informing ageing

National media has highlighted issues for older Australians across an array of topics that broadly encapsulate health and wellbeing, societal values, technology and accessibility, essential care and services, and policy and advocacy.

In health and wellbeing, media reports have highlighted **Alzheimer's and Dementia related initiatives that improve physical and mental health and wellbeing**, including the positive impact of creative activities such as art and music. The media has reported on the roles of older adults in their local communities including their contributions, the support systems available, and the wider societal attitudes towards ageing, and the importance of inclusivity.

Aged care reforms were also trending strongly, with media reports calling for **more support for older Australians to stay at home** and the requirement of larger contributions from new residential care entrants. **Funding and system concerns** were reported around healthy ageing programs including cancellation of healthy ageing classes which were having positive impacts on older adult physical and mental wellbeing, shortage of class instructors for water activities such as aqua aerobics which are growing in popularity with older adult cohorts, and the much publicised topic of **geriatric hospitals**²⁴ with the view of easing pressure on the primary care, emergency care, and ambulance services.

Nutrition has been another area of concern with attention given to initiatives such as Maggie Beer's *Big Mission* regarding improvement to the quality of food in residential aged care facilities which has demonstrated positive outcomes in older adults' health and satisfaction, along with practical tips and strategies for cooking for older family members. Further, media has highlighted innovation in science in increasing protein intake in malnourished older adult cohorts.

Elder abuse campaigns and reports highlighted in the media including evidence that the rate of elder abuse is increasing in the Northern Territory with calls for better safeguarding measures, and the national campaign to raise awareness and reduce rates of elder abuse was launched, in addition to promotion of protective measures. Further, some **innovative approaches to tackling loneliness** were published with a podcast series featuring inspiring life stories from residential aged care residents.

Population changes were highlighted from drawing attention to the passing of the world's older person (recorded) at the age of 117 years of age, raising the longevity topic and 'secret' to a long life, through to population projections indicating a significant shift with the global population to peak earlier and at a lower number than previously reported.

Global health concerns were being raised in national media, including increased risk of infections due to **antimicrobial resistance (AMR)**, and **dysphagia (difficulty swallowing)** and its impact on daily life if not managed appropriately. Recent advancements in health and medical practices in Australia reflect significant progress in **cervical cancer screening** involving the shift from pap smears to HPV testing, which now allows for self-collection, enhancing accessibility and reducing invasiveness.

²⁴ Council on the Ageing Queensland's CEO undertook a media interview in relation to this news article. See: <https://www.abc.net.au/news/rural/programs/landline/2024-09-29/lightbulb-lupins:-the-pulse-that-could-combat/104410654>



Additionally, **Type 1.5 diabetes** - a condition sharing traits of both Type 1 and Type 2 diabetes - poses challenges in diagnosis, leading to potential mismanagement. The integration of **wearable technology shows promise in Indigenous health**, as these devices can facilitate early detection of heart conditions among older Indigenous populations, potentially saving lives. Meanwhile, **updated COVID vaccines** targeting the JN.1 subvariant are under consideration to bolster protection against emerging strains.

Societal attitudes on ageing have been discussed including calls to recognise the gravity of the **impact of ageism** on older adults in the same way as sexism and racism and attitudes around older adults being a burden or valuable part of community. **Women with disabilities and LGBTQIA+ individuals face unique menopause experiences**, often exacerbated by insufficient healthcare support. Family structures in Australia are becoming increasingly diverse, including multigenerational and blended families, which impact social policies and support systems. Furthermore, racism and discrimination have been linked to accelerated ageing processes, affecting brain health and leading to faster biological ageing. In terms of personal and community well-being, the voices of disabled writers are contributing to a reimagined narrative of health and inclusivity. Artistic representation of an ageing body has also been highlighted through challenging traditional depictions of the female body, focusing on self-representation and identity transformation including across the lifespan.

Technology has been explored and how it affects older adults, both positively and negatively, including discussion around **making digital tools more accessible** and **lessening the digital divide** that can leave some older adults behind. There have been discussions as well on policies and advocacy efforts aimed at improving the lives of older adults including the areas of **housing, healthcare, and social services** tailored to meet their needs. Housing has been one of the strongest trends with reporting on rental affordability and impact to low-income households.

Additionally, broader societal issues highlight the interconnectedness of health and social policies. For example, the implications of ‘biological clocks’ for **older fathers and subsequent increased risks for their children**, and the incarceration of younger people which has been shown to be ineffective and harmful, leading to calls for alternative approaches for **reduction of crime rates**. In broader economic terms, while income distribution in Australia is relatively equal, **intergenerational mobility is hindered by factors like imputed rent and capital gains**. The government is reviewing housing policies to address shortages, but more innovative solutions are necessary for affordability.

The concept of retirement is evolving, necessitating a **re-evaluation of the traditional working age** to better reflect contemporary economic realities, and **long visa processing times for older parents** highlight the pressing need for policy reforms to streamline immigration processes.



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