



**AASW**

Australian Association  
of Social Workers

*AGEING IN AUSTRALIA*



*AASW Position Paper*

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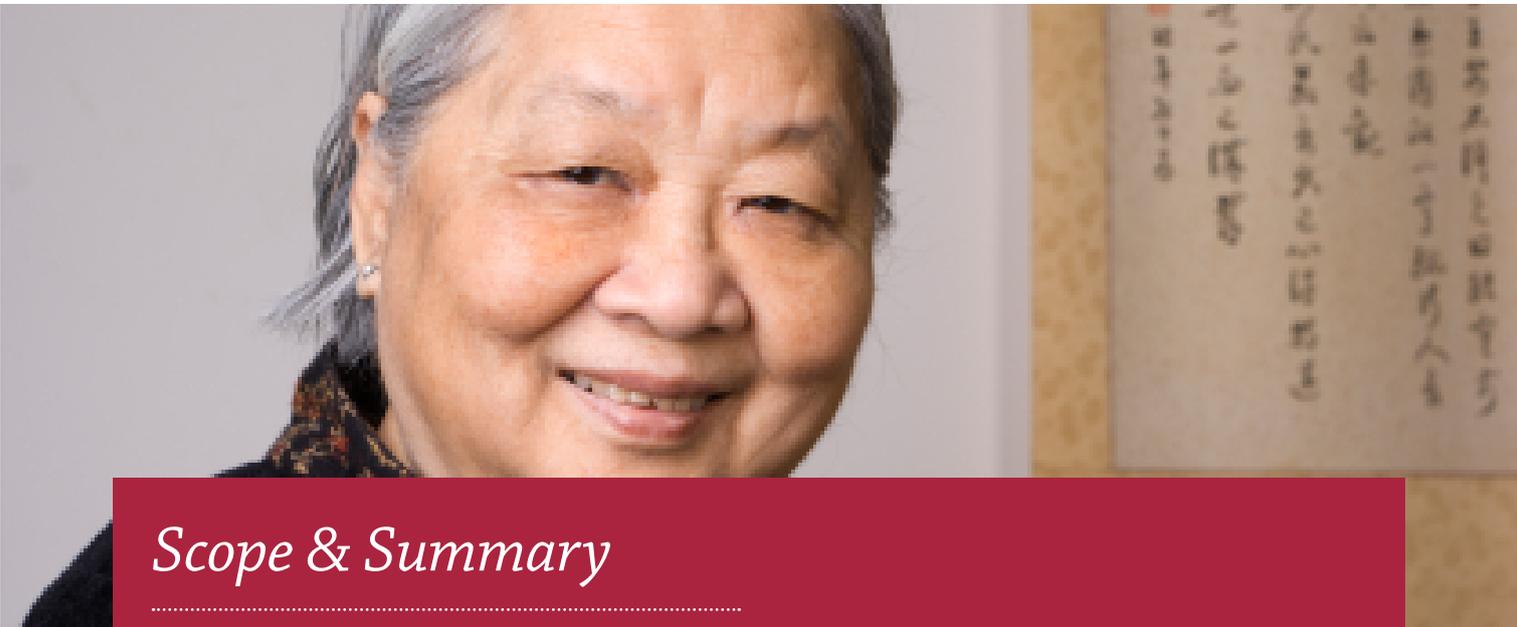
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This paper has been developed by the Australian Association of Social Workers (AASW), in particular the National Social Policy Committee and in conjunction with key professional staff and other members.

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# Scope & Summary

This position paper outlines the Australian Association of Social Workers' views of the challenges facing older Australians and government in their role in supporting older people. It is written for those with responsibility for developing policy and making decisions on how our ageing population is supported. It is within this context that this paper acknowledges achievements and government intentions, and addresses a number of policy concerns, particularly the focus and assumptions on which they are developed.

## Summary

*At the broadest level, the Association holds the view that, as a life stage, older age should provide people with the opportunities to live healthy, positive and productive lives, connected to and participating in the life of the community. Ageing policy should acknowledge the many ways in which older people have contributed and continue to contribute to their families and to the community, rather than focus on the burden of temporary or longer term infirmity.*

- It is important to acknowledge that as a society, we have made significant achievements in promoting the health and wellbeing of older Australians.
- There are, however, many areas where older people continue to face challenges. These include age discrimination, ageism and social isolation. Older people also face challenges in being able to access:
  - » Suitable services in rural and remote areas;
  - » Services that are sensitive to people's cultural needs;
  - » Services that are sensitive to the needs of Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) people;
  - » Adequate social housing services;
  - » Mental health services and dementia care;
  - » Protection from violation of their rights such as in the case of elder abuse.
- Australian governments have made provision for older people in these areas, but more needs to be done.
- In the past few decades, Australian governments have focused on planning to ensure adequate services are in place for older people now and in the future. The planned reforms to the current aged care service system are outlined in the report

*Living Longer, Living Better 2012.*

- While it is necessary and responsible to plan in this way, especially as the Australian baby boomers age, public policy has focused almost exclusively on concerns about the cost that Australia's ageing population will present to the economy to the point of excluding other important issues such as:
  - » Protecting the human and civil rights of older Australians and ensuring that the national legal framework adequately upholds those rights;
  - » Recognising the real contribution older Australians make in the community both in the public and private spheres of our society;
  - » Ensuring opportunities for social inclusion (not just support services) for all older Australians including Aboriginal Australians, people of CALD, people living in rural and remote areas and the LGBTI population.
- The AASW calls for a paradigm shift in the development of aged care policy and programs. Such a shift requires giving up viewing older Australians as essentially a cost burden to seeing them as citizens who have the same human and citizenship rights as everyone else and as people who have much to contribute to community and country.
- Flowing on from this, the AASW also calls for the Government to develop an overarching, meaningful and integrated policy response to supporting older Australians in the context of their human and civil rights. This would facilitate tying together a range of separate initiatives currently in place into a more cohesive and holistic policy approach.
- The AASW supports many of the initiatives proposed in the *Living Longer, Living Better 2012* report, however, notes that careful monitoring is required to ensure that the intended outcomes of the reform are achieved. In particular the AASW is concerned that the:
  - » Increase in investment may not be enough to respond to identified need;
  - » Increase of fees and bonds may result in financial disadvantage for some older people and their families;
- » Elimination of low and high-care distinctions may not guarantee that people who need high care will receive priority;
- » Elimination of low and high-care distinctions may introduce perverse incentives for providers to prioritise low care clients for whom the cost of services/care is lower;
- » The funding for the introduction of Gateway may be inadequate and that its scope is unclear in its current form.
- The AASW supports the careful monitoring of the implementation of the reforms and holds the Government on its promise to review the reforms five years' post implementation.

## *Introduction: The social work platform*

The social work profession is committed to maximising the wellbeing of individuals and society. It considers that individual and social wellbeing are underpinned by socially inclusive communities that emphasise principles of social justice and respect for human rights. Minimum standards of human rights include the right to adequate housing, income, employment, education and health care.

### **Role of social workers**

The Australian Association of Social Workers (AASW) is the only national organisation for social workers in Australia, with over 7,000 members, many of whom are involved in the delivery of aged care and carer support services in a range of fields of practice including direct service delivery, advocacy, service planning, service management, service development and policy. Other social workers are involved in supporting older people in many other areas of practice associated with the social work profession including health, housing, income support, support to Indigenous Australians, disability, workforce participation and community development. Social workers are therefore uniquely placed to hold both a broad and an in-depth view of the multiple issues facing older Australians within a rights-based context and with a focus on social justice.

*“...social workers are involved in supporting older people in many areas of practice associated with the social work profession...”*

### **Australian Association of Social Workers (AASW)**

The AASW is the national association for Australian professional social workers. We set the benchmark for professional education and practice in social work. We have a strong voice on matters of social inclusion, social justice, human rights and issues that impact upon the quality of life of all Australians. We seek a close and collaborative relationship with educational institutions, industry, government, client associations, and the community. The AASW acknowledges the critical importance of the contribution made by Aboriginal and Torres Strait Islander members.



**Karen Healy**  
AASW  
National President



**Glenys Wilkinson**  
AASW  
Chief Executive Officer

### Principles

At the broadest level the Association holds the view that, as a life stage, older age should provide people with the opportunities to live healthy, positive and productive lives, connected to and participating in the life of the community. Older people have the life experience to make a valuable contribution to all aspects of life. They are entitled to the same rights as all other Australians and their goals and aspirations should be supported. Reflecting the United Nations Principles for Older Persons<sup>1</sup>, it is the Association's position that older people have the right to:

- independence;
- exercise choice and control over their lives and deaths;
- pursue lifestyles of their choice and be free to express diversity with respect to their culture, language and sexuality, amongst other things;
- employment;
- opportunities and support to pursue healthy ageing lifestyle choices;
- participate in all aspects of society and be provided with opportunities to share their knowledge and skills with younger generations;
- self fulfilment which involves access to educational, cultural and recreational resources in their communities;
- be treated with dignity and respect ;
- be free from discrimination and abuse;
- equitable and readily available access to a competent, comprehensive and affordable health and social support services that meet their individual needs.

### Achievements

It is important to acknowledge that as a society, we have made significant advancements towards protecting these rights. Older people are generally enjoying a much longer and healthier life span than ever before. They have many opportunities to be engaged in meaningful paid and unpaid work. Technological and medical advances as well as an awareness of healthy ageing strategies have resulted in better health outcomes. The world-wide shift towards community-based, person-centered approaches to support and care mean that the majority of people can age in place. In Australia, many receive in-home services and support tailored to individual needs that are affordable and effective. Residential aged care now offers a great many choices to older people with respect to the intensity of support and location, and caters to diverse needs such as providing specialised services to people with dementia, people who are Culturally and Linguistically Diverse (CALD) and Aboriginal Australians. People have more choices about how to spend their last days and how they wish to die with the support of palliative care services and the growing use of advanced care directives.

### Challenges

There are however also many challenges facing older people themselves and government in their role of supporting older people, now and into the future. Some key challenges are set out on page 7.

## Protection of Human Rights

The rights of older people in Australia are generally upheld through the same legislative and policy frameworks that are in place to protect all other citizens, with the exception of the *Age Discrimination Act 2004 (Commonwealth)* which is specifically aimed at preventing discrimination against older people. It is noteworthy that at the international level, there is no specific binding instrument to protect the rights of older people. At the broadest level, the main international human rights instruments:

- the International Covenant on Civil and Political Rights (ICCPR), and
- the International Covenant on Economic, Social and Cultural Rights (ICESCR)

provide for the right to be free from discrimination on the grounds of, amongst other attributes, “other status”, which is said to include age.

The United Nations Principles for Older Persons (2) have been developed and are supported by Governments within Australia. These principles recognise rights of older persons to:

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

There is a growing global push for a binding international convention on the rights of older people. Such conventions are in place for a number of other groups such as children and people with disabilities. The rights of women are upheld in two international conventions: one that focuses on the elimination of discrimination and another on the elimination of violence. Arguably older people may also

often be vulnerable and discriminated against and there is an argument in favour of having a more formal international agreement to uphold their rights. Merely having a set of principles (above) does not go far enough in building in constitutional protection of the rights of older persons.<sup>2</sup> The AASW supports the United Nations Principles for Older Persons being strengthened in Australia by adopting these in domestic legislation at both a Commonwealth and State level.

Australia’s **legal framework** for protection against age discrimination has been described as possessing a low level of uniformity, enforcement and enforceability at both state and federal levels. The breadth of some of the exceptions and exemptions to the *Age Discrimination Act 2004 (Commonwealth)* undermine the overall effectiveness of the Act which, in its current form, does not adequately address systemic discrimination or promote substantive equality.<sup>3</sup>

*“Ageism is not always intentional or direct; however its impact on older people can be profound.”*

## Ageism

Ageism can be described as ‘a process of systematic stereotyping of, and discrimination against people’ simply because they are older.<sup>4</sup> According to the Human Rights Commission, ageism is an entrenched feature of Australian society with older individuals being ‘lumped together’ or thought of as all being the same just because of their age.<sup>5</sup> COTA, Australia’s premier advocacy agency for older people, agrees with this view, describing ageism as

endemic and pervasive in Australia.<sup>6</sup>

Ageism can play out and impacts on older Australians in multiple ways including:

- **in the forms of speech** by which they are addressed, which can be condescending or dismissive;
- **in the media and arts** where images of older people can be negative, unattractive or stereotypical;
- **in the health system** where certain symptoms in older patients (such as balance problems, memory loss and depression) can be dismissed from the outset as 'old age' instead of being viewed as potentially treatable health conditions.<sup>7</sup> Age discrimination has been detected in assessing suitability for medical rehabilitation services, specifically for stroke and cardiac patients;<sup>8</sup>
- **in access to employment**, in the attitudes of employers to older workers, in access to training and professional development and in the undervaluing of the skills, experience and wisdom of older people. The Australian Human Rights Commission has identified age discrimination as the foremost barrier to the workforce participation of mature age workers;<sup>9</sup>
- **in accessing affordable, safe and suitable housing** including public housing – the profile of older people experiencing homelessness is rapidly expanding beyond the typical stereotype of an older alcoholic man sleeping rough. An increasing number of older people, particularly women, are becoming homeless after being evicted from what has been previously a comparatively stable accommodation in the private rental market. The number of people aged over 65 living in lower income rental households is projected to increase from 195,000 in 2001 to 419,000 in 2026. The greatest projected change is in the 85 years and over age range where estimated numbers are increasing from 17,300 to 51,000;<sup>10</sup>
- **in the planning of public facilities.** Access to public transport, including safe bus stops and accessible vehicles, and location of services often do not take sufficient account of the needs of older people.

Ageism is not always intentional or direct; however its impact on older people can be profound. The broader community, including older people themselves, are often not aware of the myths and stereotypes they have accepted about the abilities and capacities of older people and how older people are portrayed. In many instances, ageism takes the form of omission rather than commission such as not taking into account the needs of older people adequately in the planning of public facilities, social services and public transport.

## Social exclusion

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As well as discrimination, many older people suffer exclusion and social isolation. There are multiple reasons that cause older people to become socially isolated including the loss of a partner, family members moving away, living in rural and remote areas<sup>11</sup> and chronic illness. Age discrimination can intensify social isolation in a psychological sense just as much as poor transport, poor access to appropriate housing, inadequate health services and living in isolated areas.

## Elder abuse

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Elder abuse, as defined by the World Health Organisation is “a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse. It can also be the result of intentional or unintentional neglect”.<sup>12</sup> It is a human rights issue which requires a comprehensive set of strategies and the co-operation of multiple agencies. Preventative strategies informed by human rights principles need to be the foundation of the response to elder abuse in the private and the public lives of older people, whether it be in the spheres health, finance, education, care and support services or recreation.

## Housing

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The core housing attributes valued by older renters include autonomy, security, social connectivity, amenity, adaptability and affordability. Currently the private rental market offers none of these and current levels of public and community housing are failing to meet the increasing demand for people who are no longer able to access private rental. The highest priority must be accorded to those who do not have secure tenure when they reach retirement age.

*“The potential increase in the contribution that older people can make in the future may be missed if they are viewed primarily as drivers of increased demand and cost to government.”*

## Ageing population

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As is well known, Australia’s population is growing older and as baby boomers move into old age, this trend is set to gather greater momentum over the next three decades and beyond.<sup>13</sup> The age composition of Australia’s population is projected to change considerably as a result of population ageing. By 2051, there will be a much greater proportion of people aged 65 years and over than in 2004, and a lower proportion of people aged under 15 years. In 2004, people aged 65 years and over made up 13% of Australia’s population. This proportion is projected to increase to between 26% and 28% in 2051 (respectively) and to between 27% and 31% in 2101.<sup>14</sup>

This demographic trend is not new. It has been building for over a century and is likely to result in changes that will flow on to all aspects of social and economic life as both the number and proportion of older people in the community

increase. While government agencies have tended to view this demographic shift with concern as a growing financial burden on the public purse, in reality, most older people live healthy active lives with aged care becoming a factor for a proportion of the aged population, usually in the last two years of life. The potential increase in the contribution that older people can make in the future may be missed if they are viewed primarily as drivers of increased demand and cost to government. Already many older people invest substantial time and effort in community volunteer activities. Similarly, a proportion of older people, who are also grandparents, often provide practical and financial support to their children and grandchildren.<sup>15</sup>

## Aged care services and support

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Governments fund and subsidise a wide range of support and accommodation services for older people needing these services. Service provision is supplied by all levels of government and by non-government organisations (both for-profit and not-for profit) in fairly complex arrangements that have some variation both across and within states and territories. The quality and safety standards of aged care have increased and the industry has attracted a largely committed and skilled workforce. There are a range of agencies that monitor quality and safety of service provision and provide an independent process for responding to complaints.

Nevertheless, in its 2011 review of the aged care system titled: *Caring for Older Australians*, the Productivity Commission claimed that some of the system’s weaknesses are as follows:

- It is difficult for consumers to navigate;
- Services and consumer choice is limited;
- There is limited confidence among those needing care that they can leave their care package during periods of greater wellness and independence and re-engage readily should their circumstances change;
- Older people are uncertain about having access to care in the future;

- Quality is variable;
- Coverage of needs, pricing, subsidies and user co-contributions are inconsistent or inequitable;
- Workforce shortages are exacerbated by low wages and some workers have insufficient skills;
- There are difficulties in obtaining finance, in particular, to build high care residential facilities;
- Older people who are from the Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) group face additional challenges when entering residential age care and support is needed to ensure they and their partners are not treated with discrimination;
- Older Australians who experienced institutional abuse as children and have been acknowledged as Forgotten Australians, need sensitive and informed approaches as they may move in to residential age care settings;
- There are complex, overlapping and costly regulations and a lack of independence of some regulatory activities.



### **Living Longer Living Better**

In April 2012 the Government announced its reform package for aged care, *Living Longer, Living Better*, largely in response to the Productivity Commission's inquiry. Key directions and changes are as follows:

### **Home and Community Care (HACC)**

After 1 July 2015, HACC services will be absorbed into the Home Support Program, together with the National Respite for Carers program, Assistance with Care and Housing for the Aged, and Day Therapy Centres. HACC service types, planning regions and unit pricing will be reviewed, and a new national fees policy will be introduced. Assessment processes will be reviewed, with an intention to aligning assessment processes within Home Support Program services and Aged Care Assessment Team (ACAT) assessment processes.

### **Packaged Community Care**

The number of community care packages (to be called Home Care packages from 2013) – Community Aged Care Packages (CACPs), Extended Aged Care at Home (EACH) and Extended Aged Care at Home-Dementia (EACH-D) packages - will increase. Two new types of package will be introduced from 1 July 2013: one level below CACP, and one between CACP and EACH. A new Dementia Supplement will be introduced, available to all package levels. Funding changes and means testing

will mean that consumers pay more in fees, depending on their level of income. Packaged community care will be delivered on the basis of Consumer-Directed Care (CDC), which is intended to provide consumers with greater control over their supports.

### **Residential care**

There are a range of reforms proposed for residential care, including:

- The elimination of low and high-care distinctions, resulting in providers being able to charge bonds for all residential care places;
- Introduction of means-testing and capping of fees;
- Changes to funding instruments to reduce government subsidy level; and
- Increases in accommodation subsidies for residents who have no assets and are on a pension and for rural and regional facilities.

### **Information, referral and assessment**

An Australian Seniors Gateway Agency will be established from 1 July 2013 to provide a one-stop-shop for information and referral for accessing aged care services. Initially the Agency will only involve a website and Contact Centre. From 2016, the Gateway will also conduct assessment of eligibility for services. A new national assessment framework is being developed to support this. The new My Aged Care website will publish information and allow some self-service functions. A linking service will assist people with complex needs to access health, disability, housing, financial and other services.

## Regulation

A new Aged Care Financing Authority will be set up to provide advice about pricing, and to approve accommodation charges. The Aged Care Quality Agency will replace the Aged Care Standards and Accreditation Agency as the body which monitors providers and confers accreditation. New quality indicators will be published on the My Aged Care website.

## Role of government

Both the Commonwealth and State governments have a range of initiatives to support older people and are increasing their planning and spending in this area as the large baby boomer cohort begins to age.

The Commonwealth Government's Seniors website lists 21 initiatives to support older people ranging from information related to human rights to helping people find public toilets. Perhaps the most significant of these initiatives are:

- Information about age discrimination (including an outline of the Human Rights Commission and its focus on addressing barriers to equality and participation faced by mature workers and older Australians);
- Information about aged care services; and
- Information about healthy ageing.

*“What is lacking...is an overarching, meaningful and integrated policy response to supporting older Australians in the context of all of their human and civil rights.”*

## Fragmented and complex system

What is lacking from this website, and arguably from government policy, is an overarching, meaningful and integrated policy response

to supporting older Australians in the context of all of their human and civil rights. The government's response is a set of separate projects, perhaps well intentioned, but failing to come together into a cohesive whole. This is exacerbated by the division of roles between the Commonwealth Government and the State and Territory governments. Human rights, for example, is the domain of the Commonwealth, while most initiatives aimed at addressing elder abuse fall to the states.<sup>16</sup> This is just one example of a complex service system with many gaps and overlaps that the average person would find difficult to navigate.

## Misplaced focus

The focus of successive governments has been on strategies that, while they have intrinsic merit, are primarily designed to reduce the cost to government of the ageing population. Three areas have attracted the attention of governments – keeping older people in the workforce, promoting healthy ageing and reforming the aged care system.

According to the Law Reform Commission with respect to keeping older people employed, the Government's overarching objective is to keep people in work, and paying taxes, longer—rather than being on the old age pension.<sup>17</sup> Arguably healthy ageing keeps older people out of hospitals and aged care reform, as expressed in *Living Better Living Longer 2012*, is as at least as much about sharing the cost of care with consumers as it is about increasing choice and improving quality.

## Undervalued contribution & overestimated economic impact

Policy makers tend not to give due consideration to the real contribution that older people make to the community. This contribution is not only that made in old age but the contribution that the elderly have made throughout their whole life (including taxes and other fiscal contributions to the economy) that may give them an entitlement to be cared for in the last stages of their lives.

The negative view of older people as an economic burden (especially with respect to

costly residential care) can also be challenged on economic grounds. According to the Department of Health and Ageing:<sup>18</sup>

- There are relatively few people in aged care homes. At age 80, only 4.8 per cent of men and 8.0 per cent of women are receiving permanent residential aged care at any one time<sup>19</sup>;
- Over the last decade (1998 – 2009), the average level of occupancy for aged care homes has been steadily declining. Occupancy rates have gone from over 96% to 92% in this period;
- Although the likelihood of a person entering residential aged care is increasing in overall numbers, the proportion of the aged population entering residential aged care is decreasing. At the same time, the average age at which people enter residential care is increasing. The result is that the demand for residential services is not increasing as rapidly as the population is ageing.

While planning for the ageing population is necessary and responsible, the intensity of the focus on this issue and some of the assumptions that feed it, are questionable.

## Implementation of aged care reforms

With respect to the aged care reforms proposed in the *Living Better Living Longer* report, at this very early stage of the reforms, it is difficult to comment definitively. The proposals are a complex set of planned systemic reforms that will be implemented over ten years. How all of them will interact synergistically and in the 'real world' is yet to be played out, measured and assessed. The reform will be overseen by the Aged Care Reform Implementation Council. It is imperative that this oversight is rigorous, transparent and accountable. There are currently a number of Working Groups developing the implementation requirements of the reform components. The AASW will be following the implementation process with interest and commenting as opportunities present themselves or where issues of concern warrant this.

## Encouraging intentions

In general, the Association welcomes the Government's intention to:

- Introduce a single gateway to service access for most services;
- Increase in investment in aged care across the board including an increase in the number of residential places and particularly an increase in the number of community based services through Home Care and Packaged Care;
- Introduce a wider range of bands in packaged care;
- Introduce a dementia supplement that will be able to be applied across bands;
- Introduce more rational structure to a number of programs by amalgamating them into the single Home Support Program;
- Strengthen aged care in regional Australia;
- Increase investment in carer support services;
- Ensure that the aged care service system is more aware, sensitive and responsive to the diversity of older Australians including sexual diversity;
- Improve the salary for and skills of the aged care workforce. This is essential as, apart from older people who have dementia and comorbidities, there are now those reaching older age who previously would not have done so, such as people with an intellectual disability, acquired brain injury or a serious mental illness;
- Develop stricter standards and exercise greater control over quality.

## Concerns

The Association has concerns that the proposed:

- Increase in investment may not be enough to respond to identified need;
- Increase of fees and bonds may result in financial disadvantage, despite the means testing and caps that have been placed on consumer contribution. This is especially concerning if it represents the 'thin edge of the wedge' for older Australians to

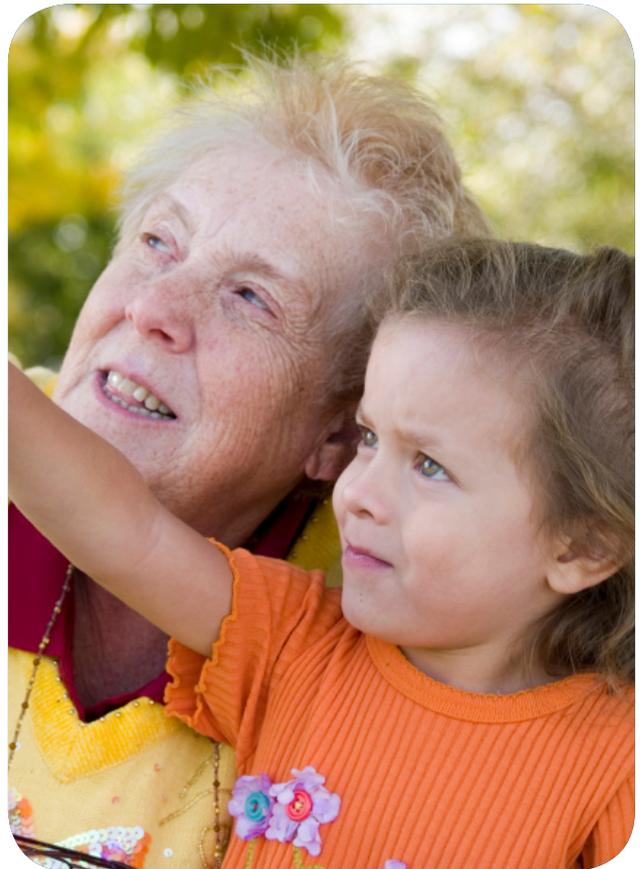
increasingly bear the burden of the rising cost of aged care;

- Elimination of low and high-care distinctions does not guarantee that people who need high care will receive priority;
- Elimination of low and high-care distinctions may introduce perverse incentives for providers to prioritise low care clients for whom the cost of services/care is lower;
- Introduction of Gateway is unclear in scope. Only \$75m of new funding has been allocated and significant emphasis has been placed on the development of a web site and call centre rather than establishing an agency with enough scope and resources to provide comprehensive information, needs assessment, care coordination and carer referral services on a regional basis.

## Workforce issues

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The Government has recognised the major workforce issues with respect to aged care especially and has sought to address these through a new Workforce Compact to be developed from 2012-13 that promises to deliver increased wages, and workforce development initiatives. The Compact will allow signatories who have an Enterprise Agreement that delivers higher wages to workers to access a Conditional Adjustment Payment for extra funding to cover increased wages.



## The AASW calls

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The AASW calls for a paradigm shift in the development of aged care policy and programs. Such a shift requires giving up viewing older Australians as essentially a cost burden to seeing them as citizens who have the same human and citizenship rights as everyone else and as people who have much to contribute to community and country.

Such a paradigm shift would result in the Government asking: How can we ensure the full range of rights of older people are protected and how can we increase their participation in all areas of community life? Rather than viewing every issue associated with ageing through the prism of potential cost.

Such a shift would also involve moving away from the current approach to service solutions and towards needs/rights based framework.

In line with this shift, the AASW calls for the government to:

- Lobby the United Nations (UN) for the UN to develop an International Convention on the Rights of Older People;
- Introduce new legislation to replace the current Age Discrimination Act 2004 (Commonwealth) that will address systemic discrimination against older people and promote equality. This new legislation should have caveats against too many exemptions that have the potential to weaken it;
- Develop a comprehensive, rights based policy framework that explains how older Australians can participate in all aspects of community life and how those who need support can be assisted to meet their goals and aspirations. In developing such a policy, the framework should take full account of the diversity of older Australians and make provision for such. Aged care (and other services and initiatives) should sit under this framework as part of the Government's overall response to meeting the needs of older people. It should not be a stand-alone initiative or one that dominates all other initiatives associated with supporting older Australians;
- Step up its efforts to streamline and simplify the service system that supports older people. Despite various reforms, the system continues to be complex and confusing;
- Carefully monitor the impact of the implementation of the aged care reforms on the health and wellbeing of older Australians. In particular the AASW calls for the monitoring of the reforms on outcomes for people in rural and remote areas, Indigenous Australians, people who are CALD, LGBTI population and people with dementia and/or mental illness. The impact of introducing bonds for people entering high care residential centres should also be carefully monitored to ensure that these people and their families do not suffer undue financial hardships as a result of the reforms. The government should hold its promise to review the reforms five years after implementation;
- Develop a National Older Person's Housing Strategy to address the need for provision of suitable housing for the increasing numbers of older renters to enable them to 'age well'.

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