



# **SOCIAL ISSUES EXECUTIVE**

## ***Anglican Diocese of Sydney***

Submission to the Inquiry into long-term strategies to address the ageing of the Australian population over the next 40 years

### Introduction

The Social Issues Executive of the Anglican Diocese of Sydney commends the Senate Committee on Ageing for undertaking to canvass the wealth of community experience and expertise in regard to the aging of Australia's population. This issue is indeed one of the most significant facing our community today and adequate planning now, will ensure that we deal effectively with the long-term effects of this demographic phenomenon.

The Anglican Diocese of Sydney is active in providing support for the aged in our community on many fronts. At a parish level churches play an integral role in providing social and spiritual support for the aged through church services, seniors groups and visitations. The local church provides a community of friendships where emotional support and practical help is a natural part of relationships.

Organisations such as Anglicare NSW and Anglican Retirement Villages are at the forefront in the provision of aged care services. The Sydney Diocese also administers a superannuation fund.

The preparation for this submission involved a number of interviews conducted with staff members from the above-mentioned organisations. The findings from these interviews are summarised under the following headings.

### Care at Home

A common theme in the interviews was the need to ensure that home care for the aged is carried out properly and with great proficiency. Interviewees expressed a concern that the danger for people staying at home in their ageing years was social isolation and loneliness. Thus home care for the aged should not simply focus on physical needs but social and emotional needs also. An enhancement of quality of life needs to be a priority in the consideration of the care of those who stay in their own homes.

Some practical suggestions included ensuring that there are affordable and available transport options for the aged and that visitation programs be established on a volunteer basis. Respite care and care for carers, including the identification of the carers needs, were also identified as areas that need to be improved as a long-term strategies for the care at home of the elderly.

### Increasingly complex health care needs in aged care facilities

Those working in the aged care sector said the result of people staying at home for longer has been that those entering aged care do so much closer to the end of their life and have more intensive and complex health care needs. One interviewee commented that people were not being adequately rehabilitated in the hospital system, which meant they were more likely to move to aged care after major surgery, such as hip replacements, as they could no longer live in their own homes.

The perception in the community seems to be that people must choose between home care and residential care but rather residential care should be seen as part of a process – that there will be an appropriate and optimum time for people to enter aged care.

***“Many of the people we’re seeing in our aged-care facilities are coming in too late, particularly to the detriment of their carers as they have such complex health care needs. They require a high level of care which we are not funded to give.”***

### Training and staffing requirements

The increasing health care needs of those in aged care requires staff with expert training. One of the greatest threats to the aged care industry is lack of staff. A number of the interviewees were emphatic about the need to attract people to the nursing profession and particularly to the aged care sector. This is important as the mean age of registered nurses is itself ageing.

One practical suggestion was the consideration of alternative methods of nurse education. It was suggested that university was a disincentive for people to go into the nursing profession. A university degree is expensive to undertake particularly when the career at the end of it is not well paid. People may be more interested in nurse training if they were able to earn as they trained. This would also ensure that nurses had better hands-on experience in their training.

### The need to revamp the image of the aged care sector

This idea is relevant to the previous two points. The elderly need to understand that aged care is not a heartless institution where people are treated as numbers, but rather it is an alternative to the loneliness and isolation often associated with staying at home.

A public relations exercise also needs to target people who potentially could work in the aged care sector to help them see aged care as a challenging and rewarding career option.

***“Aged care should not be seen as a bogey but rather an alternative to the loneliness and isolation of being at home with no one around. What goes on in those places is very socially uplifting, but this is not the image portrayed.”***

## Needs of rural Australians

A number of interviewees also identified the need to ensure availability of care facilities, including palliative care, in rural areas so that services might be taken to patients rather than requiring patients to do the travelling. This is especially important for those who require long-term treatment, as they have to leave their family and community at a time when they need their support the most.

Effective training regimes and support for staff also needs to be ensured. The shortage of health care professionals is threatening many rural areas and for any long-term strategy to work, addressing this issue must be a priority.

## Retirement Incomes

People need to be encouraged to consider their plan for the future and how they will sustain their retirement. A representative from the Sydney Anglican Superannuation fund made the following points:

- Superannuation should not be taxed so heavily so that people's retirement fund can build up more quickly
- Contributions to superannuation should be raised and there should be incentives for people to contribute to their super.
- Extended periods of time away from the workforce for reasons such as child rearing also need to be addressed.

## Attitudes

***"We need to value the aged for their wisdom, not despise them and see them as a burden because they no longer contribute to the economy. If we harness their abilities they will have a direct and positive impact on society."***

Community attitudes about ageing, and the aged, need to be addressed. Perceptions that aging is an illness or that people reach a 'use by date' are unhelpful. People, into their aging years, need to have a sense of self worth. Too often in our society people's self esteem is wrapped up in what they do, that is, one's employment. There is a sense in which the elderly are fearful of becoming a 'burden' on those around them. This is a sad indication of the unhealthy attitudes held about what makes life worthwhile.

A common theme in some of the interviews was that people, who retire, have disposable incomes and many years of health before them along with ability, wisdom and expertise. It was suggested that ways to harness the wisdom of this group in a way that's not patronising should be explored.

Another attitudinal issue that needs to be address is people's perception of dementia. As people live longer more incidents of dementia will occur. This can be a heartbreaking time for all involved. Anglican Retirement Villages are piloting, in December, a best

practice program for residents with dementia. What they learn in the pilot study will inform their training of staff on this issue.

One interviewee also shared her concerns about basing long-term strategies on ‘what we think we would want when we’re elderly’. For example, the planners of an aged care facility in the Southern Region of the Sydney Diocese assumed that residents would value privacy. So the facility was built to accommodate people in single rooms. This however, did not suit the residents who preferred to have someone around so they knew there would be help close by if they stopped breathing in the night. What they valued was the companionship of having a roommate.

The aged themselves need to be directly consulted in the planning of long-term strategies.

### End of life issues

The Anglican Diocese of Sydney has argued consistently that euthanasia should continue to be outlawed in Australia.<sup>1</sup>

The attitudes surrounding euthanasia are related to community attitudes discussed in the previous point. It is dangerous to allow euthanasia in a society that also allows the elderly to see themselves as a ‘burden to society’. Major reviews in other Western countries have found that the administration of euthanasia would be too dangerous because it’s impossible to ensure that individuals’ decisions are made on a purely voluntarily basis.

Rather, the Anglican Diocese of Sydney argues for increased resources to be put into palliative care and to provide the elderly with an exceptional quality of care in residential facilities or at home.

***“The World Health Organisation has estimated that up to 90% of pain problems could be managed by general practitioners if they had the knowledge and expertise required... All dying patients would benefit in some way from exposure to palliative care in some form. The aim of palliative care is to relieve symptoms and to neither hasten nor defer death. It aims to liberate patients from the discomfort of their symptoms so they can do the important things they want to do before they die.”***

### Conclusion

We are happy to provide more information should you so require.

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<sup>1</sup> See this address by Dr Megan Best, Bioethicist, member of the Social Issues Executive and a former practitioner in palliative care <http://www.anglicanmediasydney.asn.au/socialissues/features/megantalk.htm>