

Submission
Senate Community Affairs Committee
Inquiry into the cost of living pressures on older
Australians
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Sir as an older Australian with chronic health problems such as ;
1977 cancer of the colon
1993 cancer of the kidney and ureter Golden staph after operation
1995 coronary by-pass
2001 cancer of colon hemicolectomy
2003 cancer of the colon total colectomy
2007 Insulin dependant diabetes,

I find myself at a disadvantage with the cost of living.

The price of essentials such food and petrol impacts highly, as living in the country both are dearer. The car is a necessity as public transport is poor to the point that my wife can only visit her elderly Mother at the nursing home 20km away once a week. We also use the car to travel to Wollongong and Sydney for appointments because with a very short bowel and toilets not being available on trains it is embarrassing and extremely painful.

I would like to say at this point that getting hereditary cancer at the age of 30 yrs impacted on my whole life. It put an end to securing Bank and house loans ,I was not allowed to increase my superannuation, personal insurance was a no go area and getting another job just about impossible particularly if it required a medical so saving for retirement was not an option and being forced to leave the workforce early did not help.

Special dietary needs for my conditions are very expensive .

I am also privately insured with HCF costing nearly \$3000 as I don't trust the public system to care for my health ,long waiting list and no choice of Doctor for cancer Patients is a fact of life as experienced by my brothers and sisters in the public system. Also in the back of my mind is that the government could axe medicare whenever the whim suits them and it would be impossible to return to the private system with my record.

Electricity is costly. We don't use air conditioning for heating or cooling before 5 o'clock and we also pay a green levy by choice as our responsibility to the environment.

Dental care is covered by the health fund . But I am pleased that I don't rely on public dental.

The impact of cost pressures on participating in the community in general are. to say the least, restrictive. I am limited in what I can do financially and physically at the present. The only organisation I belong to is the South Coast advocacy network and that is because I can do it from home and when I feel well enough. Most of the time it comes under the Cancer council umbrella.

This is hard to take as I was very involved in the public arena. a 20yr member of the Rural Fire service, member of Loins, member of progress association, St Micheal P/fF, a local member of the local Disaster plan sub committee, St Vincent De Paul and was a very keen golfer.

The impact of caring for Grand children at the moment is not an issue as our 1.5 grandkids are in London but are likley to return after .5 is born in November, probably 2008

The parents jobs are most likley in the major cities of Australia.

Pensions concession and superannuation does contribute to the cost of living but having chronic illness is a very costly life style, of no choice to the patient. Travel to and from medical appointments, hospitals, chemists and other allied health servces is expensive.

The impact of government over the last 10 yrs is probably money wise o/k but it just about covers the bare requirements of living but the psychological impact is huge and detrimental to the well being of the hardest hit of our community those with severe illness.

It would be nice to deal with Government departments and be treated with courtesy and dignity instead of agression and curtness and being a drain on the rest of society.

I have always tried to put back to the public some of the help I have received from them.

But after working for 30 yrs in my job and being advised by my GP to give it away for medical reasons and to be told by the assessing Doctor for Centre link that just because I had moved to an area with high unemployment I was not entitled to assistance. I have lived in this town 30yrs+

She also asked why I did not have the whole bowel removed .

My Surgeon advised against this and that was none of her business.

She had not read the file in front of her.

Not long afterwards a centre Link person informed me off handedly that people get over cancer.

The reason I have brought this up is that through my dealings with cancer suffers and other chronic patients they find the experience so traumatic that they would rather spend all their super,sick leave and savings than deal with the department.and the shame of attending Centre link.

Our group was approached hospital social worker to take up the cause of people with terminal illness who were being denied payments because the doctors would not put terminal on the form, as they were concerned about the patient's mental health.