

Ageing in Your Community

Summary of what we heard you say

Overview

Between January 4 and February 12, 2021, COTA Queensland invited people to complete an online survey titled “*Ageing in Your Community*”. People were invited to share their experiences of ageing in regional, rural and remote communities across Queensland. This document provides a summary of what people told us.

Participants

Forty-nine (49) people from across Queensland responded to the *Ageing in Our Community* survey during January and February 2021. Of the people who responded, 81% were female and 18% male and all were aged between 34 and 74 years.

Participants included people who identified as:

- living in a regional, rural or remote community
- a carer
- living with a disability or chronic health condition
- being from a non-English speaking background
- LGBTIQ+

Participants included people who:

- receive care or support from people to help them stay living at home, including people receiving the Commonwealth Home Support Programme, a Home Care Package, or through another means
- reside in a residential aged care facility
- do not receive care
- provide informal care to a partner, friend or family member
- provide formal care to clients

Communities represented included Beachmere (x2), Brisbane (x 2), Borallon, Brassall (x2), Bribie Island, Bundaberg (x2), Caboolture, Cairns (x2), Coolangatta, Dayboro, Douglas Shire, Gold Coast, Kenmore, Kureelpa, Landsborough, Logan, Mackay, Magnetic Island, Murrumba Downs, Park Ridge, Rangeville, Redland Bay, Rockhampton (x2), Russell Island, Shailer Park, South Burnett, Southport, Stanthorpe (x2), Sunshine Coast (x4), Surfers Paradise, Toowoomba, Townsville (x2), Warwick (x2), West End, Windsor, Yandina

This is what we heard

We asked people the following questions:

- If a friend or family member from out of town came to visit, what would you tell them about getting older in your community?
- What are the positive things about getting older where you live? How does your community, its services and surrounds help you to stay living in your home or community as you age?
- Is it hard to age well in your community? What has made it hard and what would make it easier for you?
- With COVID-19 there's been a lot of changes in how we interact, go about our daily lives and how services are provided. Has there been anything that has helped you to live well in your home or community during these times?
- If you had a magic wand, what would you like to see in your community to support you, or others as you age?
- Is there anything else you would like to tell us about ageing in your community?

The following is a summary of what we heard you say. We have used your words wherever possible.

If a friend or family member from out of town came to visit, what would you tell them about getting older in your community?

We heard there were positives to getting older in some communities, where people felt connected, supported, included and involved. Many had friends, felt safe, and enjoyed the environment where they lived. People often felt close to services and facilities, including medical facilities, allied health providers, post office, shops, the library, public transport, parks, beaches, cinemas, clubs and social events and had all that they needed. In many areas, there were opportunities for older people to connect, continue to learn and attend activities and cultural events.

While many participants felt connected, others felt lonely in their community, finding it hard to make new friends. In some instances people advised others to avoid moving to their community and that people should not grow old in regional areas. Connecting with the community was sometimes seen as difficult due to health, mobility, isolation and transport reasons. In some areas, community spirit was said to be lost, the community is not set up for people who are ageing, and that ageism exists.

When referring to aged care services, some people said that services are available for older people, they felt supported and that there are retirement homes and aged care accommodation available. Others experienced challenges with aged care services with

assessments being confusing and hard to access, services have limited or no availability, mismanaged entry to an aged care facility, and health and aged care services not being available locally.

Transport was raised as an issue with the ability to move around being difficult, with some areas having no public transport available. Support from family and friends is needed in the absence of public transport and the ability to drive. People find difficulty in travelling to surrounding communities to access services as transport is non-existent, not available when required or is too expensive to use. Housing affordability was also raised as both affordable and unaffordable. Crime, safety, housing options, the cost of living and the pension amount were also raised as concerns.

What are the positive things about getting older where you live? How does your community, its services and surrounds help you to stay living in your home or community as you age?

Many people shared the positives of getting older where they live. Some said there was nothing positive about their community, with others saying they live independent lives, not needing help or knowing little about aged care services available.

Some communities were seen as supportive, safe and friendly, with good social activities and a sense of community or closeness. Beaches, green space, walking tracks, shopping, transport and other services and amenity were accessible in some communities. Council services such as libraries and healthy ageing programs were mentioned along with organisations such as U3A.

Access to and availability of health and support services and aged care were said to be good in some areas, and being close to those services and shopping centres helped people to age well. Some people were accessing support in the home or retirement villages and told us that aged care facilities were available. People were grateful when they had supportive family members living nearby.

Some people said there was nothing positive about living in their community or the positives were not known. Navigating the town in which they live, and the aged care services made it hard, along with communities that are not designed with older people in mind. Some people felt lonely, could not access aged care and found life more difficult without family and aged care support.

Is it hard to age well in your community? What has made it hard and what would make it easier for you?

Some people told us they did not find ageing hard as they have plenty of support, live with family, and live close to local facilities and services. Other participants however are finding it hard to age well in their community. There were varied reasons for this.

We were told that affordable and appropriate living options are not available in some areas, and some do not want to move to other areas as they will miss where they currently live. Some people said that getting older is hard, and that their physical health is declining. Living in areas of little crime, where it is peaceful and people feel connected is helpful. The cost of living was said to be high. Increasing the aged pension, having more affordable medical care, dental and prescriptions were suggested as ways to make ageing easier.

Not having a computer made some people feel they did not have a voice and made navigating and accessing services challenging. People, including those who live alone or an unwell, felt that they did not have support.

Having a more simple system for people to be assessed and get home care services, along with home care packages meeting actual need would be helpful. People said they do not know how to get information on how to access support and that this needs to be better promoted and communicated. Support itself was also hard to access. It was said that services need to be more readily available, with some people suggesting an NDIS-type service involving health care, transport, shopping, activities and support services, where funding is put around the individual and their needs not capped.

Self-funded retirees often do not know where to turn when they need help as they have been self-sufficient in the past and generally have not engaged with government supports or community programs before. Being widowed has made some tasks more difficult and traumatic, with support for particular household activities being unavailable under existing aged care services. Local access to healthcare is not always available.

Transport is an issue if people can no longer drive or they do not have a car. Public transport is either inconvenient, infrequent, expensive, or non-existent. Village buses have been helpful though only run once a week. Access to aged care, health care, social activities and shopping are all impacted. Sometimes a local taxi can be the only option. Transport between towns is difficult. People said that ageing would be easier if there is easy access to shops, health and aged care, level and clean pathways, safe routes for wheelchairs, more disabled parking, cheaper transport options, frequent and convenient transport services.

Better public transport is needed to get to hospitals and other health care facilities, and weekly subsidised taxis generally take people to the shops and the library. Being able to

travel to the hospital or medical/allied health care would be beneficial. People said they are over reliant on family and friends for transport. Grocery delivery has been helpful, though was said to be expensive and people who like to go out shopping miss it when groceries are delivered; sometimes shopping is the only time that people venture out. People said that better transport connections are needed, and services that are not so expensive.

Some found the pension was too low, with it not rising like the out-of-pocket expenses of the various services.

Some people said they are lonely or isolated, with some having lost contact with family and friends after being a primary carer for many years. People often do not know how to start over. Many said it can be difficult to make friends and people can feel lost and forgotten. In some areas, there is no scope for community group activities, with activities only being available in surrounding towns. Noise, hot weather and concern of the criminal element were also raised as challenges.

With COVID-19 there has been a lot of changes in how we interact, go about our daily lives and how services are provided. Has there been anything that has helped you to live well in your home or community during these times?

Some people found that during the height of COVID-19 their lives changed little. They stayed at home while others worked from home, wore masks when needed, used common sense and listened to the government's advice. Many missed seeing their family and their children as they live in different areas. Having access to natural spaces, services and shops close by helped. People connected via Zoom, emails and phone calls, met with friends in small groups, and attended small U3A classes.

When the risk of Covid decreased, some Councils re-established their activities such as tai chi and Zumba. In some communities, people established their own informal small group activities with friends in their local park as it could be done more frequently and allowed them to socialise. Other people connected through social activities in their residential aged care facility or retirement village where people wore masks, used hand sanitiser and cleaners attended to the area. Some people found that Covid impacted on the spirit of their community and that people are not participating in the social life of the community to the same extent, with it being hard to know if people are now out of the habit or if they are scared.

Support by family and friends during Covid was said to be very important. While some people appreciate solitude and enjoy their own company, others appreciated their lives being not as busy. The ability to shop in new and different ways was mentioned by

many. People started to have their shopping delivered, they used 'click-and-collect' or went to the shop during 'quiet hour'. Some smaller local stores started to deliver groceries in response to Covid, and libraries delivered books also.

Having access to the internet was said to help people to stay in touch with family and connect with others, to access healthcare via telehealth and to help with shopping. Reading books and news online and having the newspaper delivered helped keep people busy and up to date with the news. Concern was raised about keeping up to date when local papers are no longer produced, and that people with poor sight find it difficult to use mobile phones.

For some people who were accessing aged care supports prior to Covid, their services stopped during Covid. This impacted on people's care and their ability to get to appointments. Many relied on family members and said that they would not know what to do and would not cope if they did not live with family or have family nearby.

If you had a magic wand, what would you like to see in your community to support you, or others as you age?

People provided a wide range of responses to this question. Many wanted more opportunities to connect with others and to be active, especially during the day. Lifelong learning, keeping the mind and body active and having social interaction was deemed essential as we age. Some wanted community centres or community hubs in their area, catering to 'emerging seniors', and a place where people can meet, socialise and create a sense of belonging. Others wanted more social groups, recreation and sporting activities.

Some people provided innovative suggestions on how people can socialise and help one another. To help connect with like-minded people, something like Tinder for older people was suggested where people connect around interests, not 'hook-ups'. Others suggested social venues where men and women can interact, such as Men's Sheds and women's craft groups, however linking the groups together so men and women can socialise and exchange skillsets. For example, people can sew or cook in exchange for a fence being mended or a car being washed. Writing letters and having pen pals was suggested, along with better advertising of opportunities available.

People mentioned challenges around technology including mobile phones and computers and how electronic communication does not always work. More funds are needed for computer literacy training and programs where volunteers or tutors support older people to learn or adapt to new technology, and better access to reliable internet.

People wanted quality jobs for older people and a rise in the aged pension as the cost of living is high and the ability to afford outings is limited. Access to technical aids and assistance was said to be invaluable.

For aged care services, people wanted services that are available and truly allow people to stay in their own home. They want packages where they can decide on who to employ and what they need, similar to NDIS. Where choice in provider is limited, they want service providers to be more financially accountable. Many said that the aged care systems in place are not working and they intimidate some older people who do not have an advocate, a computer, or knowledge on how to access the system.

People want more government funded services that support older people in their home, including higher level packages, allied health and mental health support, activities inside and outside of the home, and home and yard help. They want aged care services to be more readily available, based locally and for services to do what is requested of them to an appropriate standard. It was said that the cost of services need to be more affordable, and services need to adapt to the needs of people instead of it being the other way around, for example, scheduling. Information on dementia, its prevention and management, and how to support a person with dementia in the home would make it easier for family to provide support and make decisions, and for people to talk about their wishes. More health services and 24-hour emergency care clinics are wanted, along with shorter wait times and the delivery of prescriptions from chemists when people are feeling unwell.

Improvements in transport are needed, with public transport and community taxis not being available or suitable in some areas. Movement between towns to access services is difficult and people rely heavily on family and friends, particularly when they can no longer drive. Transport is often too expensive and runs to a schedule that is infrequent or not suitable for the person.

It was important for people to have the right to die with dignity and to be shown more respect. They wished people would have better manners, for their neighbours to be more friendly, and to have more interaction with young people and children.

Is there anything else you would like to tell us about ageing in your community?

People wanted to tell us that they moved so they can be nearer to services as they age, that having an understanding of the aged care system helps along with having help to access the support available, and knowing what changes are being made in aged care. A one size fits all approach to aged care does not work and not all retirement villages are the same. It was said that due to Covid, many support services, like aged care (often referred to as 'My Aged

Care' by participants) and hospital services ground to a halt, leaving seniors vulnerable and without help, and telehealth was not well received by older people in some areas. In some areas, the community is supportive of older people though access to aged care services is terrible. Aged care access is confusing and people are not comfortable accessing it online. People said that websites are complex and hard to navigate and phone calls can be difficult also. They wanted the care to be put back into aged care.

People said that ageing is difficult and as people get older they become more limited without mobility, relying heavily on family, and become more isolated. They said that more assistance is needed for appointments with medical practitioners, and bureaucracy can be slow and conservative. The cost of living is high and the expense of registrations, drivers licenses, rates and electricity needs to be lessened.

Others expressed concern that communities and organisations often forget about people who are ageing, people with a disability or those with chronic health conditions. People said that more consideration is needed in service planning and communications and that ageing should be promoted as a positive experience as well. Participants also noted that it was hard to know the role of each level of government, and it seemed to people that a lot was done by the federal government, but they were not really sure.

People talked of being lonely and 'missing company'. They also referred to becoming invisible as they age, felt many within the community were not taking the time to help older people, and that people with a disability are on their own.

People also responded to this question saying there needs to be more places for people to gather together and have fun; and the opportunity to contribute. People identified libraries and Councils as supportive and suggested an increase in volunteer and visitor programs in hospitals, law courts, transport services, aged care facilities and the home.

Thank you

As you can hear, people are experiencing ageing in their communities in different ways. For some it is working well, and they are glad to be living in their community. For others, there are major barriers and challenges which inhibit their access to support and services or limit their sense of connection and belonging to the community in which they live.

We thank all of you have shared your experiences, your thoughts and your insights. We look forward to drawing together your information with that of others, to inform our advocacy and planning moving forward.

Thank you.

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