# Ageing Strategy
# 2016 - 2021

23 December 2015

The *LGA Ageing Strategy 2016-2021* has been prepared by UPRS for the Local Government Association of SA (LGA) for use by member Councils. The LGA is the statutory peak body for Local Government in South Australia, representing all 68 Councils in the State.

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# Executive Summary

## Changing experiences of growing older

It is now well understood that the needs and preferences of older people have changed, and will continue to change as baby boomers grow older.

In years gone by, there has been significant emphasis in the media about the impacts of our ageing population, such as a declining workforce and increasing demands for health and services and retirement accommodation, which sometimes leaves older people feeling as though they are a burden on their families and society.

This story, however, masks a very different reality. The majority of older people live independently without help from care services, are among the most active volunteers in formal and informal capacities and are great contributors to the workforce and local economies.

Whereas retirement was once seen to be a relatively short period of time after the completion of full-time work, older people are now planning for the final thirty years of their lives.

## New approaches to planning for population ageing

Older people are citizens of our communities and they have the same rights as other citizens when it comes to the ability to participate in conversations about decisions that will impact on their lives.

Questions of equity and fairness arise when universal infrastructure, facilities and programs are not equally accessible to all members of the community. This may be due to physical barriers that limit or prevent access but also social and cultural barriers caused by factors such as cost, language, timing, transport access and the availability of child care.

Ageing Strategies, Positive Ageing, Active Ageing, Healthy Ageing, Age Friendly Cities/Environments/Communities are all different labels that describe the same overall purpose – namely, how can we ensure we provide our older people a quality life in their final thirty years, and by doing so, provide a great society and environment for all people.

This is no easy task and touches on just about all aspects of our society, from our approaches to customer service to health care, social supports, opportunities for social connection and housing.

Many of South Australia's suburbs and towns were not created with older people in mind, and some older people find themselves living in communities that are not well suited to ageing in place, even though these are the same communities where they are well connected and would like to remain.

The traditional model of service provision, where older people are placed into institutional care, will no longer suffice for the growing numbers of older people who will enjoy good health for the majority of their later years.

We already know how much older people contribute to their communities as volunteers and through continued involvement in paid employment. The changes in the characteristics of the post 65 year olds that are emerging as the "baby-boomer" generation moves into this space will challenge our traditional models of volunteering and work as they seek out their "encore careers".

All of this requires us to think about the way we are planning for our older people. At its heart is acknowledgement of the multiple determinants of wellbeing as we age; the ability to walk down one's street to local shops is just as important as being able to access the necessary information, participate in civic life and live without fear of abuse.

For the Local Government sector, this means that ageing is not just the responsibility of the ageing or community development teams, but also other disciplines such as development and social planners, engineers, customer service personnel, recreation and open space teams, and corporate planners.

**Age Friendly Communities and Environment Framework**

The World Health Organisation has developed a checklist of the essential features of age-friendly cities that make a community more liveable and manageable for older people, touching on

- outdoor spaces and buildings
- transportation
- housing
- social participation
- respect and social inclusion
- civic participation and employment
- communication and information
- community and health services.

In South Australia, the State Government has developed its own guidelines for Age Friendly Environments and Communities as part of the *South Australia's Communities for All: Our Age friendly Future* initiative.

This initiative has taken the WHO checklist and tailored it to the South Australian context in the form of local guidelines for residential developments, Local Government and State Government. As with the WHO Checklist of Age Friendly Cities, the South Australian guidelines traverse both the physical and community service environments that promote active ageing.

**How has the LGA ageing strategy been developed?**

The development of the new LGA Strategy has been led by the Local Government Professionals Community Managers Network with assistance from consultants URPS, including:

- A review of the 2011 – 2016 LGA Ageing Strategy with the Project Steering Committee
- Desktop research to understand recent trends and practice in ageing, including best practice case studies
- Survey of Councils across South Australia to obtain input on their experiences related to active ageing activities, issues and opportunities, resulting in 59 responses from 39 Councils
- The Local Government Active Ageing Forum to explore issues in greater depth
- Meetings with key external stakeholder organisations
- A new framework to assist LGA leadership in ageing

**Purpose:** The Local Government Association of South Australia (LGA SA) provides leadership and support to Councils in recognising and responding to the needs and aspirations of their communities as people grow older.

**Approach:** We will do this through:

leadership and advocacy;

proactive and productive partnerships;

training and development;

communicating and promoting good practice.

**Goals**
1. Effective leadership and advocacy provide better outcomes for our communities as they age.

2. Productive partnerships generate leverage for Councils

3. Councils develop skills and competence to enable the provision of age-friendly places, spaces and experiences.

4. Communicate and promote examples of good practice

**Implementation**

The success of this LGA (SA) Ageing Strategy depends on the level of commitment to its implementation. While primary responsibility rests with the LGA, it is acknowledged that the Local Government Professionals SA Community Managers Network (CMN) will play a significant role in achieving the goals of the strategy.

## Why should Local Government focus on people in their communities as they grow older?

There are many responses that could be made to this question. They could include considerations of citizenship and rights, equity and fairness, efficiency and effectiveness and optimising social capital among others.

Older people are citizens of our communities and they have the same rights as other citizens when it comes to the ability to participate in conversations about decisions that will impact on their lives.

Questions of equity and fairness arise when universal infrastructure, facilities and programs are not equally accessible to all members of the community. This may be due to physical barriers that limit or prevent access but also social and cultural barriers caused by factors such as cost, language, timing, transport access and the availability of child care.

Services that are designed to meet the needs and aspirations of older people in the community are likely to be more effective, reaching more people and enhancing the quality of their lives and those of their carers and families as well as those they care for. These services are also likely to be more cost efficient because the base cost is spread across more recipients, thereby reducing the unit cost of the service.

We already know how much older people contribute to their communities as volunteers and through continued involvement in paid employment. The changes in the characteristics of the post 65 year olds that are emerging as the "baby-boomer" generation moves into this space will challenge our traditional models of volunteering.

They represent a generally better educated and more financially secure generation than their parents. They have a great deal to offer to their communities if the right opportunities are provided.

Local Government makes a significant contribution to the health and wellbeing of our communities including our older citizens. This investment contributes to the building of social capital in our communities.

Local Government is well positioned to play an important role in meeting the needs and aspirations of people as they age.  While other spheres of Government provide targeted services and support to older people, these tend to be directed towards those in need of specific health care and supported accommodation.

Local Government has a citizenship based approach rather than the client focus of the private sector. Councils provide universal services in an holistic way based on their knowledge of their communities.  Where they provide programs designed for older people, Councils use a community development strengths-based approach that empowers older people to make the choices that suit them the best.

## Reframing the question of ageing

Ageing – The Great Triumph of Human Development

It is now well understood that the needs and preferences of older people have changed, and will continue to change as baby boomers grow older.

In years gone by, there has been significant emphasis in the media about the impacts of our ageing population, such as a declining workforce and increasing demands for health and services and retirement accommodation, which sometimes leaves older people feeling as though they are a burden on their families and society.

This story, however, masks a very different reality.  The majority of older people live independently without help from care services, are among the most active volunteers in formal and informal capacities and are great contributors to local economies.

Whereas retirement was once seen to be a relatively short period of time after the completion of full-time work, older people are now planning for the final thirty years of their lives.

Many baby boomers provided care to their own parents, and this experience has and is shaping how they think about their own futures.  It also means that many older people are having conversations about the future they want, discussing their preferences about housing, recreation, finance, work, grandchildren, social life, holidays and volunteering.

As former Thinker in Residence Dr Alexander Kalache describes it:

> *Population ageing is a triumph of human development. The 20th century has given an ever-increasing number of us the gift of an additional 30 years of life…it is the responsibility of all of us in the 21st century to give the gift of quality of life to these bonus thirty years, and to extend it to everyone*!1

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1 Dr Alexandre Kalache, *The Longevity Revolution: Creating a Society for All Ages*, Government of South Australia - Adelaide Thinkers in Residence, available online at http://www.thinkers.sa.gov.au/Thinkers/Kalache/report.aspx

Ageing Strategies, Positive Ageing, Active Ageing, Healthy Ageing, Age Friendly Cities/Environments/Communities are all different labels that describe the same overall purpose – namely, how can we ensure we provide our older people a quality life in their final thirty years, and by doing so, provide a great society and environment for all people.

This is no easy task and touches on just about all aspects of our society, from our approaches to customer service to health care, social supports, opportunities for social connection and housing.

Many of South Australia's suburbs and towns were not created with older people in mind, and some older people find themselves living in communities that are not well suited to ageing in place, even though these are the same communities where they are well connected and would like to remain.

The traditional model of service provision, where older people are placed into institutional care, will no longer suffice for the growing numbers of older people who will enjoy good health for the majority of their later years.

We also need to think differently about work. Despite entrepreneurial activity and high risk start-ups perceived as young people's endeavours, we know that people over 55 are starting businesses at greater rates than those in their 20s and 30, with their success tied to their access to capital, greater work and life experience, deeper personal networks and better skills in controlling risk2.

Similarly, at a recent symposium, South Australian Economic Development Board chair Ray Spencer suggested that Governments could play a bigger role in encouraging people to think about their "encore career".  Helping older people think about their contribution after traditional retirement may create export opportunities and job-generating projects for the State while also adding quality of life to older people through keeping them active and connected.

All of this requires us to think about the way we are planning for our older people.  At its heart is acknowledgement of the multiple determinants of wellbeing as we age; the ability to walk down one's street to local shops is just as important as being able to access the necessary information, participate in civic life and live without fear of abuse.

For the Local Government sector, this means that ageing is not just the responsibility of the ageing or community development teams, but also other disciplines such as urban planners, engineers, customer service personnel, recreation and open space teams, and corporate planners.

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2 BRW, *Meet the Baby Boomer entrepreneurs founding start-ups later in life*,
http://www.brw.com.au/p/entrepreneurs/meet_the_baby_boomer_entrepreneurs_6WlIDDeMMiV9UQYGkCnJQP

## Purpose of this strategy

The Local Government Community Managers Network in South Australia engaged consultants URPS to work with Councils to update the Local Government Ageing Strategy to:

*"raise Council awareness of the needs, impacts and opportunities of an ageing population and provide Councils with an evolving overarching format, tools and support with which to tackle issues at a local and state and national level".*

The strategy has been updated to reflect recent research, as well as significant policy and practice shifts at Commonwealth and State Government levels.

## Research and consultation

URPS completed a review of the 2011 – 2016 LGA Ageing Strategy, developed a summary of recent trends and research in ageing, and prepared a series of best practice case studies.

Consultation was undertaken with Councils across South Australia to obtain input on their experiences related to active ageing activities, issues and opportunities in their Council area. Surveys were received from 59 Council staff from 39 Councils.

The Local Government Active Ageing Forum conducted in July was attended by over 35 staff.

In addition meetings were held with key external stakeholder organisations including:

- The Office for the Ageing (Health SA)
- Seniors Information Service
- Council on the Ageing (COTA)

The following sections of this report document the findings of the research and consultation.

## The international, national and South Australian framework for active ageing

### World Health Organisation Network of Age-friendly Cities

The World Health Organisation (WHO) is the lead international agency concerned with ageing. They promote the concept of active ageing, defined as "the process of optimising opportunities for health, participation and security in order to enhance quality of life as people age."

The WHO Age Friendly Cities Network connects cities, towns and municipalities who have made efforts in the area of active ageing. The network currently consists of 210 members, as diverse as City of Unley in South Australia, the City of Clarence in Tasmania, London, Bern and Seoul.

The WHO active ageing framework consists of the four pillars of:
- Health
- Participation
- Security
- Life-long learning

The philosophy behind the pillars is for cities, town or municipalities to assist individuals and population groups to 'realize their potential for physical, social, and mental wellbeing throughout the life-course and to participate in society according to their needs, desires and capacities, while providing them with adequate protection, security and care when they require assistance3'.

The WHO has developed a checklist of the essential features of age-friendly cities4 that make a community more liveable and manageable for citizens, providing practical guidance about how the pillars of active ageing can be achieved. The checklist was developed on the basis of consultation with older people in 33 cities in 22 countries and addresses:
- outdoor spaces and buildings
- transportation
- housing
- social participation
- respect and social inclusion
- civic participation and employment
- communication and information
- community and health services

**Commonwealth Government approach to ageing**

There is no comprehensive national framework for active ageing in Australia, with the Commonwealth Government efforts largely tied up with aged care services for older people who have differing levels of need for assistance.

In 2012, the Commonwealth Government released its *Living Longer, Living Better* reform package which is significantly changing the way aged care services are provided and funded in Australia. More detail on the reform package and its impact upon Local Government is provided in **Section 5.4**.

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3 World Health Organization 2002, 'Active Ageing: A Policy Framework', World Health Organisation, Geneva apps.who.int/iris/bitstream/10665/67215/1/WHO_NMH_NPH_02.8.pdf

4 World Health Organization 2007, 'Checklist of Essential Features of Age-friendly Cities', World Health Organization, Geneva, http://www.who.int/ageing/publications/Age_friendly_cities_checklist.pdf?ua=1

### South Australian Age Friendly Environments and Communities



In South Australia, the State Government has developed its own guidelines for Age Friendly Environments and Communities as part of the *South Australia's Communities for All: Our Age friendly Future* initiative.

This initiative has taken the WHO checklist and tailored it to the South Australian context in the form of local guidelines for residential developments, Local Government and State Government.  In the case of Local Government, the initiative also includes a toolkit that assists Local Governments in the preparation of their own Age Friendly Action Plans.

As with the WHO Checklist of Age Friendly Cities, the South Australian guidelines traverse both the physical and community/service environments that promote active ageing.

To date, the South Australian Government has funded eight pilot projects with Local Governments to use the toolkit to develop their own Active Ageing Plans.  A further five Councils are currently commencing their Age Friendly Action Plans with the support of the Office for the Ageing.

## Trends and research in ageing

### Understanding the demographic

It is well understood anecdotally that baby boomers, the generation who comprise the large cohort of people nearing retirement age, will age very differently to previous generations.

This generation will, in general, be well informed, wealthy, in good health and hold little tolerance for having their rights ignored. As the generation who over their lifetime radically re-defined gender, sexuality, work, family and leisure, we can expect this emerging generation of older people to redefine all these things as they grow older. Baby boomers can be expected to age "loudly", age for longer and seek flexibility to suit their preferences and abilities.

Former Thinker-in-Residence Dr Alexandre Kalache goes as far as suggesting that just as the boomer generation redefined adolescence and transformed it into a period of experimentation, creativity and rebellion, so too will they transform what it means to age, in

a transition he terms "gerontolescence"5.  The only difference is that while boomers' adolescence lasted for around 4-5 years, their gerontolescence may last for 30 years!

To help ground some of the anecdotal trends about baby boomers and their perceptions of ageing, the LGA (SA) commissioned a large random survey of baby boomers born between 1946 and 1964 and living in South Australia in 20116.  This would cover all aspects of people's lives, with information being collected about their present circumstances and their perceptions of how things will be for them when they are around 70 years old.

Below is summary of the outcomes, which provides a detailed picture of the older people we are planning for.

### Housing and the household

Overall, 90% of respondents own or are paying off their home.  Detached dwellings are the predominant housing type (90%) and just over half of the respondents expect to be living in the same house when they are 70. This reflects the high levels of satisfaction with where people living, with 70% reporting to be 'very happy' with their community, and a further 20% 'quite happy'.

The main reasons given for staying in the same place were attachments to house, familiarity with the area, and for metropolitan respondents, access to public transport. Reasons for moving were most commonly related to the house, not the area, and moving closer to family and services.

When comparing metropolitan Adelaide with the rest of South Australia, those in country areas reported higher levels of living with a partner.  Country respondents were also more likely to move than those in metropolitan Adelaide, usually moving to be closer to family or services.  Those living in metropolitan Adelaide were more likely to be interested in moving to inner Adelaide than country people, while more people from the country expect to be living in retirement villages.

Higher proportions of country residents were born in Australia, meaning that the metropolitan area contains more culturally and linguistically diverse communities.

On the gender breakdown, women are more likely to live alone than men, and this is higher in the metropolitan area.  Similarly, women were more likely to expect to be living alone than men.

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5 Dr Alexandre Kalache, *The Longevity Revolution: Creating a Society for All Ages*, Government of South Australia - Adelaide Thinkers in Residence, available online at http://www.thinkers.sa.gov.au/Thinkers/Kalache/report.aspx

6 South Australian Active Ageing Research Cluster, *Baby Boomer Survey 2012*, Local Government Association of South Australia, available online at http://www.lga.sa.gov.au/page.aspx?c=25204

**Employment, Income and Retirement**

Across the State, more baby boomer men are in full-time permanent jobs compared with women, while women are more likely to be in part-time or casual employment. While more than 90% of respondents have savings accounts, men were much more likely to have income from property, shares or management investment funds.

Those from the metropolitan area were much more likely to have superannuation than those from the country, and men more so than women. It follows that women are more likely to be dependent upon the age pension. Overall, men from metropolitan Adelaide have the most financial capacity, while women from country areas have the least.

The great majority of respondents expect to be retired by the time they are 70, especially amongst people from the country. 40-50% of respondents stated a preference for a phased withdrawal from work, and more than 50% expressed that financial necessity might require working longer than they would like. At the same time, others said that they might work longer if work was enjoyable, to keep active and if hours are flexible.

Overall, there was an expectation amongst baby boomers that their future financial circumstances will be more difficult than their current situation.

**Activities**

More than 70% of respondents identified family events, socialising with friends and household duties as their major activities, followed by gardening (over 50%). Men reported greater involvement in playing sport and attending clubs, while women were more likely to use the internet for social networking and had greater involvement in faith based organisations.

60% of country residents reported undertaking activities in their local area, compared with 45% for the metropolitan area. Country males reported lower levels of participation in all activities except sports and clubs, while metropolitan women are the most likely to mention cultural events.

When asked about the activities they would like to do when they are 70, the responses were similar, with increased interest in travel and volunteering.

**Internet**

The study identified high levels of internet use amongst baby boomers, highest amongst men from the metropolitan area and lowest amongst country men. While the major access points are at home, some rely upon libraries and public access, and others use mobile devices. Importantly, 8% of females and 4% of males expect to use the internet at libraries or Council facilities in the future, indicating that such facilities will remain important to some in the years ahead.

The most common use for internet is information, communication and general browsing (70-80% in each case).  40% of female internet users use it for social networking.

**Volunteering and Caring**

Current rates of volunteering were significantly higher amongst country respondents compared with the metropolitan area.  Thinking about the future when they are aged 70, 76% of country women, 72% of metro women, 70% of country men and 64% of metro men expect to volunteer with the main reasons given being to make a useful contribution and enjoyment.

Around a quarter of respondents reported that they are providing care to others, mostly to parents or parents in law (only 2-3% said it was a spouse or partner).  More women than men (60% compared with 40%) expect to be providing care that will have an effect on their own health, and more country people expect that the person they are giving care to will be living with them.

**Age Care Services**

Around 60% of respondents from metropolitan Adelaide, and 50% of respondents from country areas thought that they would not need assistance to live independently at the age of 70.  When discussing services that might be needed; transport, housework, gardening, home maintenance and healthy life-style programs were most frequently mentioned.

When asked specifically about Council services, libraries were by far the most commonly used facilities, noted by 70% of women and metropolitan men, and 50% of country men.

**Transport**

Over 90% of baby boomers surveyed drive a car, and almost the same number expected to still be driving at age 70.

As expected, reported public transport use was much greater amongst metropolitan respondents compared with those in country.  Amongst people in metropolitan Adelaide, three quarters reported being able to walk to public transport within five minutes.

**Health and Health Care Services**

Most baby boomers rate their current health as 'good' or 'very good'.  That being said, almost 50% reported living with a health condition or disability that impacted on their wellbeing.

Most respondents indicated that they are doing things to maintain or improve their health, while around 40% report having a healthy diet.  Country respondents were slightly more likely to have regular check-ups, avoid smoking, reducing alcohol, protection from the sun and get sufficient sleep.  At the same time, around 50% of county residents reported difficulties in accessing health services, compared with 30% for Adelaide residents.

## Local Perceptions on the Age Friendliness of South Australia

On 25 March 2015, the South Australian Government hosted an Age Friendly Partner's Forum which included a number of Local Government representatives.  At one point during the forum, participants were asked to reflect upon their work in the area, and opportunities and challenges, as follows.

**What brings you most joy in your work with and for older people?**

A range of words were used to describe the experience of working with and for older people, including diversity in communities and lifestyle, learning from older peoples' wisdom and experience, being appreciated by older people, influence, being at the "coal face" of citizenship and affecting real change, the joy of helping people maintain independence and the energy that comes from direct relationships.

The personal connections associated with this work and the ability to really change someone's life were among the most common comments. As one person put it, "something small for a Council can leave a big impact on someone's life, giving a high return on investment".

**What do you find most difficult and why?**

Bureaucracy, cost-shifting, rules and one-size-fits-all approaches were identified as the major difficulties of working in this sector.  Similarly, some expressed frustration that valuable research and good ideas are not brought into policy and practice.

Expectations were also frequently mentioned – expectations of Elected Members, expectations that community development alone is responsible for ageing, unrealistic expectations from funding agencies, as well as expectations of some older people that every service will be made available to them (sense of entitlement).

Stigma and stereotyping were also mentioned as difficulties for the sector, as were inequality between service providers and between different sections within Councils.

**What do you see as the strengths of Local Government in the ageing space?**

Local Government's holistic approach to ageing, knowledge of their local communities, power to influence/advocate and the strengths/ community development/ social inclusion approaches to ageing were identified as the sector's greatest strengths.

At a more practical level, other strengths identified included the availability of volunteers, ability to consult meaningfully with communities, access to infrastructure and facilities, local resources and contacts and ability to influence many elements such as open space, community programs, housing and service provision.

**What are the top opportunities you personally/organisationally can contribute to building age friendly environments and communities?**

Opportunities to contribute to age friendly environments and communities were identified in a few key areas:

- Planning and evaluation(age friendly action plans; working regionally; informing policy; embedding ageing into Strategic Planning).
- Involvement (appropriate approaches to consulting with older people; tailoring approaches to CALD communities; older people's involvement in decision making).
- Programs (volunteering; lifelong learning; working regionally; fostering inclusiveness; information and education).
- Built environment (e.g. place making; centre renewal; facilities that foster social inclusion; involving all parts of Council in age friendly ideas).

## A rights based approach to ageing

Dr Alexander Kalache directed the World Health Organisation's Global Program on Ageing between 1995 and 2008, during which time he conceived the WHO Active Ageing Framework and the Network of Age Friendly Cities.

During 2012 and 2013, he was invited to South Australia as Thinker in Residence, the major output of which was his final report entitled *The Longevity Revolution: Creating a Society for all ages*.

In this report, Dr Kalache emphasises a rights based approach to ageing, explaining that

> *"a focus on the rights rather than the needs of older people is imperative, logical and moral.  This is not to say that older people do not have needs.  They often have very specific needs.  Transcending these, however, are any individual's human rights7."*

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7 Ibid, page 26.

A rights based approach to ageing is essential because changes that people may experience as they age – frailty, illness, disability, isolation, ability to read, write or speak the English language all impact on people's capacity to exercise their basic human rights.

It is necessary to have human rights as our starting point to conversations about ageing because negative stereotypes towards older people, untrue assumptions about older people being boring, unwell, lonely and incapacitated, a loss of independence and elder abuse all threaten older people's rights to respect and autonomy.

Like other forms of domestic abuse, elder abuse is multi-faceted and covers neglect, verbal and emotional abuse, misuse of financial and legal power and physical abuse/assault. Elder abuse can be come from anyone, from complete strangers to family members or professional care/service providers.

A soundly constructed rights-based approach ensures that people who are frail and losing their independence still have autonomy – the right to make the decisions related to their health, care and the way they live their daily life.

A rights based approach to ageing is one that uses language carefully, for myths and stereotypes are perpetuated through language, often in passive and subtle ways.  Our discourse on ageing must be a discourse that empowers and enables older people, emphasising dignity instead of need.

In discussing the rights based approach to ageing in *The Longevity Revolution,* Dr Kalache tells the following story:

> *At a seminar during my residency, I addressed a large group of aged care providers. I asked the participants to close their eyes, to imagine themselves at the age of 80 and to reveal what they most wanted for themselves. The most repeated words from this group were: respect, choice, freedom, happiness, space and comfort. The responses typify our deepest desire to be accorded full humanity at every stage of our life. Every progressive society needs to embrace this fundamental aspiration by applying a human rights perspective to social policy8.*

## Living Longer Living Better Aged Care Reforms

The Living Longer Living Better Aged Care Reforms were announced in April 2012 and are being implemented in a staged process.

Broadly, the reforms are about changing the way older people choose, access and fund the care they need as they grow older.  At the core is moving towards "consumer directed care" which seeks to give older people greater choice to choose the provider of their care.

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8 Ibid page 28.

The reforms include a number of changes to the way subsidies for aged care, including residential care, are calculated, and introduces for the first time the option for older people to opt-in or opt-out of certain extra services and amenities.

Of particular relevance to Local Government are the changes to the home based care programs, many of which have historically have been implemented by Local Government Home and Community Care (HACC) programs.

The new model consists of four levels of care that older people can move between as their needs change: basic care package; low level care package; intermediate care package and high level home care. The reforms increase the planning ratio for home care packages from 27 to 45 places per 1,000 people aged 70 years and over.

Of greatest significance for Local Government is the fact that Council service providers will be in competition with other providers for the provision of home based care.

This is problematic because Local Governments in South Australia, unlike other providers of services for older people, have worked from the position of being able to undertake a holistic approach to an ageing population.

Local Government has a unique view of older people as citizens of their local community, not consumers or clients of a service. In particular, Local Government centre-based programs, which focus on social connection, have complemented HACC services through reconnecting, re-abling and fostering community connections, networks and friendships between local people.

Local Government actively supports and encourages informal relationships between people, even if this means a citizen may not require a direct service. More broadly, Councils also have the responsibility to address other factors that contribute to older people's safety and independence such as footpath design and maintenance, seating, planning for adaptable housing and accessible public and private spaces and places.

The age care reforms and potential loss of funding provide an even greater impetus for Local Government to actively support their older people across all the domains of active ageing. The age care reforms which will see a shift towards functional capacity rather than social inclusion means that Local Government efforts to improve the quality of life of all citizens, including older people, is more important than ever.

# Ageing in a Foreign Land

There is a growing body of research about the unique needs of older people from culturally and linguistically diverse communities who are growing older in a different culture.

Migration at any stage of one's life is a disruptive event and has short and long term implications.  Those older people from culturally and linguistically diverse backgrounds who are ageing in Australia are at greater risk of experiencing social isolation, discrimination and stereotyping, as well as communication difficulties.

In addition, as individuals become frail, their autonomy may be compromised by social or physical factors which limit their ability to make culturally appropriate decisions.  Some ageing migrants may also experience a loss of their learnt language and revert to their first language, which may cause discrimination due to race and language as well as age, causing particular social disconnection.

Some ageing migrants experience a torn sense of belonging and struggle to reconcile different cultural norms about growing older.  In some cases, this is compounded by disappointed relationships with their former country, as their memories of their homeland are different to the present situation.  Some older people also report stigma within their own communities towards disability and mental health, with the later sometimes considered a sin, all of which impact on the way older people access services.

In other cases, the children of the migrants may have adopted the host country's cultural norms about ageing, while the migrants themselves still recall the approach to ageing in their first country.

A study into *Ageing in Culturally and Linguistically Diverse Communities* in Western Australia9 found that CALD older people make an important contribution to the community in the way they preserve their customs, wisdom, culture and language, and links to their homeland.  The study also found that CALD communities experience barriers in accessing services for some of the reasons described above.

The study also found that older people from different cultural groups have very different experiences of ageing in Western Australia, reporting that

> *"Older Western Australians born in the Netherlands, Malaysia, Austria, India and Egypt almost invariably rated highly on all indicators, while the opposite held for those from Italy, Greece, Ukraine and Vietnam.  With the exception of internet access, older people born in China also have low rates.  Together with those from Greece, Italy, Croatia, Poland and Ukraine, they demonstrated a higher need for assistance compared with other birthplace groups10".*

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9 Government of Western Australia Office of Multicultural Interests, 2012, *Ageing in Culturally and Linguistically Diverse Communities: An Analysis of trends and major issues in Western Australia*, available online at http://www.omi.wa.gov.au/resources/publications/localgovernment/Ageing_Report(NR2).pdf

10 Ibid page 37.

Amongst older people in South Australia, around 15% speak a language other than English, and nearly 40% were born outside of Australia.  While many of these are of European origin (UK, Italy, Greece and Germany), the fastest growing migrant communities in SA are from non-European countries.  The current and future demographics of CALD communities will require policy makers to develop ageing policy that is flexible and responds to the diversity of language and cultural groups present in our population.

## Aboriginal and Torres Strait Islander People's Experience of Ageing

Indigenous Australians have particular needs with respect to ageing.  Indigenous life expectancies are much lower than other parts of the population, although these are slowly improving.  While the challenges of providing health and aged care to remote Aboriginal communities is well known, what is less well understood are the nuances of Indigenous culture and culturally sensitive approaches to ageing.

It is important that Councils and other service providers directly engage with Aboriginal and Torres Strait Islander people to find out what is important to them as they grow older and how they would like supports to be provided.

A rights based approach is critical when working the most vulnerable and least enfranchised members of the community.  Aboriginal and Torres Strait Islanders have the right to participate in decisions that affect their ability to age well.

## Role of resilience

There is a growing understanding of resilience and its importance in individual and community wellbeing.  Building on the work of former Thinker in Residence Professor Martin Seligman, the South Australian Health and Medical Research Centre (SAHMRI) is working with a range of Government and non-Government organisations to better understand positive psychology and resilience.

This work uses the PERMA framework to resilience - Positive emotion, Engagement, Relationships, Meaning and Accomplishment[11].  The premise is that the PERMA concept can provide individuals with the tools they need to improve mental health for themselves, their families and their businesses.  SAHRMI is working to spread the message so that it becomes as well known in the community as the slip-slop-slap skin cancer prevention strategies.

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11 http://www.wellbeingandresilience.com/perma-plus/

A current SAHRMI project is working with Port Adelaide Enfield, Salisbury, Adelaide, Charles Sturt, Holdfast Bay, Marion and Unley Councils to develop new tools and strategies based on the PERMA framework to measure and build wellbeing amongst a group of older residents who receive community aged care services12.  The outcomes of this project may provide learnings for understanding the many services that Local Governments provide to older people.

## Case studies of best practice

### City of Melville, Western Australia

The City of Melville, located in Perth's southern suburbs, was one of the first communities in Australia to gain membership to the WHO Global Network of Age Friendly Cities.

The City was involved in a Western Australian Government pilot project using the WHO Checklist in 2006/07, undertaking a comprehensive engagement process to develop the Age Friendly Melville Directions from Seniors 2007-2010 strategy.  The Plan is now in its third iteration (2013-2017), demonstrating that the local government has been able to sustain its efforts over nearly a decade.

Melville have reported that they have appreciated the strong framework set by the State Government and associated support. This extends far beyond the initial pilot projects, involving coordination and 'on the ground' participation in some of the events, forums and networks that the City has run as part of their *Direction from Seniors* strategy.

The City of Melville has strong systems and processes which have facilitated the effective development, monitoring, and ongoing review of its age-friendly strategy.

At the end of each strategy, they have consulted and/or surveyed their older people to help evaluate their plan, and direct their next plan.

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12 https://www.communitycentressa.asn.au/news/the-local-government-ageing-and-wellbeing-project

In addition, they have been able to embed positive ageing into their strategic community plan, corporate planning processes and business planning. In practice, however, Council has reported that while staff associated with initiatives are committed to the Framework and process, there would appear to be a lack of understanding at senior management level, and/or with Elected Members. To try to address this, Melville provides at least annual updates on their activities at an Elected Members Information Session and regular updates in an electronic Elected Member newsletter.

One of the learnings from Melville's first plan (2007-2010) was that the community failed to identify the actions being taken as age friendly. As a result, in more recent years, deliberate marketing and branding has assisted in helping the community to understand and recognise Council's efforts under the "Age Friendly Melville" brand.

The City of Melville recently (2013) undertook its second wellbeing survey of residents to help set the agenda for the 2013-2017 plan. What is particularly noteworthy about Melville is the focused nature of their efforts – rather than trying to do everything, there are clear priorities for each plan.

One of the greatest successes in Melville has been the establishment of partnerships to help achieve their goals. The Council not only has strong partnerships with the State Government and peak bodies in ageing for the purposes of their ageing forums, but also with other Local Governments in their region.

As a practical example of this, in April 2015, Melville partnered with the Cities of Cockburn and Fremantle to host an *Over 55s Healthy Lifestyle Expo*. It has been an annual event since 2013 attracting over 700 people coming together to focus on their health and wellbeing as they grow older.

At the expo, there is information from service providers and the local councils as well as "have a go" activities. Organisations participating in the expo range from Breast Screen, TransPerth, WA Police and the Seniors Recreation Council. Community groups also provide stalls, entertainment and performances.

Melville holds six senior forums each year, covering topics such as Arthritis and laughter, Stay on your Feet, Caring for Carers, Healthy Festive Food. Diets to Defy Dementia; Macular Degeneration and Your Driving Future.


**Province of Manitoba, Canada**

Manitoba is a geographically large province in Canada with a number of small rural and remote communities. Despite the geographic isolation of many of the province's communities, 80% of the population lives in a city/town/village/rural area that is a member of the WHO Age Friendly Cities Network. This has been achieved through a clear framework and strong coordination from the Provincial Government.

To be recognized by the WHO, the Public Health Agency of Canada, and the Province of Manitoba, communities must achieve:

- Community Engagement Milestone.
- Municipal Council Resolution Milestone.
- Action Plan Milestone.
- Public Awareness Milestone.
- Measuring Outcomes Milestone.

In this way, they have broken down the process into simple, achievable steps.  Doing so was essential for Manitoba given the large number of small remote communities.

Another strength of Manitoba was the parallel work with a range of organisations across the province to help to widen the benefit of the active ageing work.

For example, the Aboriginal Seniors Resource Centre are now promoting intergenerational programs in their schools, and documenting stories of older people.  Similarly, La Fédération Des Aînés Franco Manitobains (FAFM) developed a marketing strategy to reach out to older people in French speaking communities, while the Good Neighbour Active Living Program is providing employment opportunities for older adults who provide a home-based support service to other older adults living in the community.

This teaches us that the importance of involving a range of organisations in active ageing projects – local governments don't need to do it all.

An evaluation of the Age Friendly Manitoba initiative was undertaken by the Centre on Ageing at the University of Manitoba.  The study found that successful places had a local age friendly committee that is diverse in terms of representation (e.g. elected officials, older adults, representatives of nongovernmental or governmental senior-serving organizations, business, clergy, etc).

In additional, successful towns were found to have strong collaborations and partnerships with schools, local businesses, senior centres, governmental organizations, and non-government agencies.  The greatest challenges were identified as volunteer burn out, competing demands for community attention and lack of leadership.

**Age Friendly Ireland**

Ireland's experience with active ageing is one of a very strong national framework coordinating and supporting local efforts.

There is a strong national implementation group that works horizontally (i.e. with other national government agencies) and vertically (i.e. with local governments.

The structure is similar to other places in that local communities are encouraged to consult, plan and drive active ageing efforts, working with older people themselves, service providers and the business community.

Age Friendly Ireland has progressed a number of initiatives around age friendly businesses, recognising that improving the sensitivity of businesses to older customers is not just good for businesses, but is also a great way to support older people.

They are promoting research about older people's shopping habits to debunk some myths, with facts such as:

- Older people own 75% of the wealth in the European Union (EU) and account for 50% of consumer spending.
- Older customers (65+) in Ireland have a revenue declared annual income of over €6.5 billion.
- Older consumers will double in number in the next 30 years, and those over 80 will quadruple.
- Older people are loyal customers and outspend younger shoppers.
- Older customers not only spend locally and have a lot of purchasing power, but also have the time to shop.
- 50% of all toys are bought by grandparents.
- Over 50's take on average almost three trips a year in Ireland, staying three nights away.
- Favourite brands are Guinness, Aldi, Apple, Dunnes Stores and Toyota.

Ireland has a four step process for businesses to be certified as age-friendly. The recognition process involves training sessions, a tool kit and support on how to better meet the needs of older adults and in turn, increase business. There are also annual awards for age friendly businesses.

**Age Friendly New York City**

New York City has a well-developed framework for active ageing with the Age Friendly New York City initiative being a partnership between the Office of the Mayor, the New York City Council and the New York Academy of Medicine. According to their website,

> *"The initiative seeks to make New York City a better place to grow old by promoting an "age-in-everything" lens across all aspects of city life. The initiative asks the city's public agencies, businesses, cultural, educational and religious institutions, community groups, and individuals to consider how changes to policy and practice can create a city more inclusive of older adults and more sensitive to their needs13"*

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13 http://www.nyam.org/agefriendlynyc/about-us/

The current projects of Age Friendly New York City are:

### Age-friendly Ambassadors

*Interested older adults are trained on how to connect other older adults to local resources, how to speak to others about Age-friendly NYC, and how to advocate for concerns raised by neighbours.*

### Aging Improvement Districts

*The concerns and suggestions of older adults in a specific neighbourhood are brought together with the leaders and resources of local businesses, non-profit organizations, city officials, cultural, educational and religious institutions to think strategically to make no and low-cost improvements.*

### Age Smart Employer Awards

*Project to research and identify best practices, honouring employers who value workers of all ages, and supporting businesses looking to maximize the potential of their workers as they age.*

### Age-friendly Business

*Help businesses attract, engage and retain older adults as customers by providing resources, materials and assistance to help business owners identify, promote and improve their age-friendly features.*

### Age-friendly Schools, Colleges and Universities

*Working group looking at age friendliness of schools, colleges and universities – both for older people as students, as well as curriculum to prepare the next generation to be ready for an ageing society*

### Age-friendly Technology

*Aims to integrate older adults into society and reduce social isolation by working to increase access, capacity and knowledge of technology among this population.*

### Age-friendly Professions

*The Age-friendly Professions project works with prominent institutions and professional organizations throughout New York City to think about what their profession can do to become more age-friendly (e.g. Age Friendly Librarians, Age Friendly Attorneys, Age Friendly Pharmacists etc)*

### Disaster Preparedness and Response

*Learn from Superstorm Sandy to strengthen and connect formal and informal support systems to keep older adults safe during future disasters (discussed below)*

### City Government's 59 Initiatives

*In 2009, The Office of the Mayor and the New York City Council asked all city departments to consider how they can improve the way they integrate and serve older adults through their work. The 59 initiatives include the 'Taxi of Tomorrow' Competition and a Manhattan Cultural Guide for Seniors.*

### Strategic Assistance to Other Cities

*The New York Academy of Medicine (NYAM), leader of the Age-friendly NYC initiative, provides strategic assistance to cities around the world seeking to become more inclusive of their older adult population. Cities assisted include Chicago, Manchester, Hong Kong and Seoul.*

One of these projects, disaster preparedness and response, stems from a comprehensive study by the New York Academy of Medicines14, which reviewed the strengths and vulnerabilities of older people during Superstorm Sandy, uncovering that:

- Formal and informal social networks influenced decisions and facilitated access to information and assistance.
- Older adults actively supported their communities before, during, and after Hurricane Sandy.
- The local neighbourhood infrastructure was effective in meeting the needs of older people.
- Because older people had not been engaged in emergency planning, emergency services were often inadequate, inappropriate, or inaccessible to older people, and their basic/ health care needs went unmet.

## Consultation with Councils

This section of the report describes the findings of the consultation with Council staff.

In May and June 2015, councils around South Australia were surveyed about active ageing activities, issues and opportunities in their Council area. 59 responses were received from 39 Councils, coming from a range of departments, including community services, corporate services, health and wellbeing, strategic planning, development services and assets and infrastructure.

### Current activities that contribute to positive experiences for older people

- **Planning** – Ageing Strategies, Access and Inclusion Plans, Public Health Plans and contributing an age friendly approach to broader strategy and planning.

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14 New York Academy of Medicines 2012 *Resilient Communities: Empowering Older Adults in Disasters and Daily Life*, available online at http://www.nyam.org/news/docs/pdf/Resilient_Communities_Report_Final.pdf

- **Facilities and infrastructure** - libraries, centres, footpaths, public realm, walking trails, exercise equipment, DDA compliance.
- Services to **maintain independence** – HACC, in home services, ageing in style expos.
- **Social inclusion and wellbeing programs** – excursions, community visitors, intergenerational activities, healthy lifestyle programs, exercise/cooking/computer/first aid classes, volunteering, grants.
- Community **Transport.**
- **Housing** - Independent living units, planning policy to promote housing choice and guide siting and location for housing for older people.
- **Information** – information for visually impaired, acting as first point of contact for older residents.
- Pensioner **concessions.**
- **Networks and partnerships** – ageing taskforces, regional collaborations.
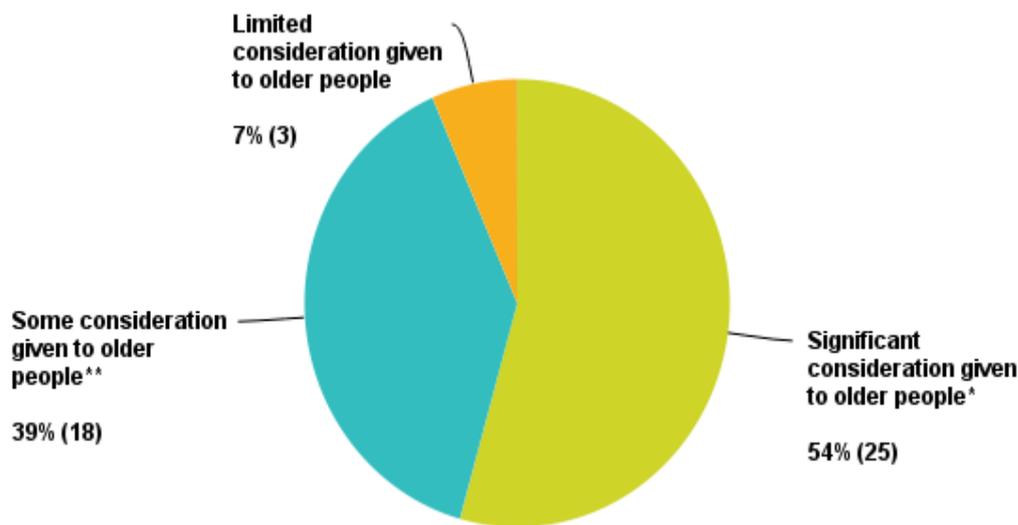
## Consideration given to older people



Figure 2-1: **Consideration given to older people in your area/department**

\* defined as "strategy, policy or specific activities"

\*\* defined as "meets minimum requirements of legislation"

### Ageing strategies

37% of respondents said that they have an ageing strategy in place, 44% said they did not. Of those who did have an ageing strategy in place,

- 37% described it as "a strategic, whole-of-Council strategy that is well understood across the organisation".
- 42% described it as "a strategic, whole-of-Council strategy that is *not* well understood across the organisation".
- 16% as "a strategic document geared towards the Community Services/Health and Wellbeing parts of Council".

For Councils with an ageing strategy in place, there was generally a high level of commitment of elected members and senior management, as shown in Figure 2-2.

Figure 2-2: **Commitment to your Ageing Strategy**
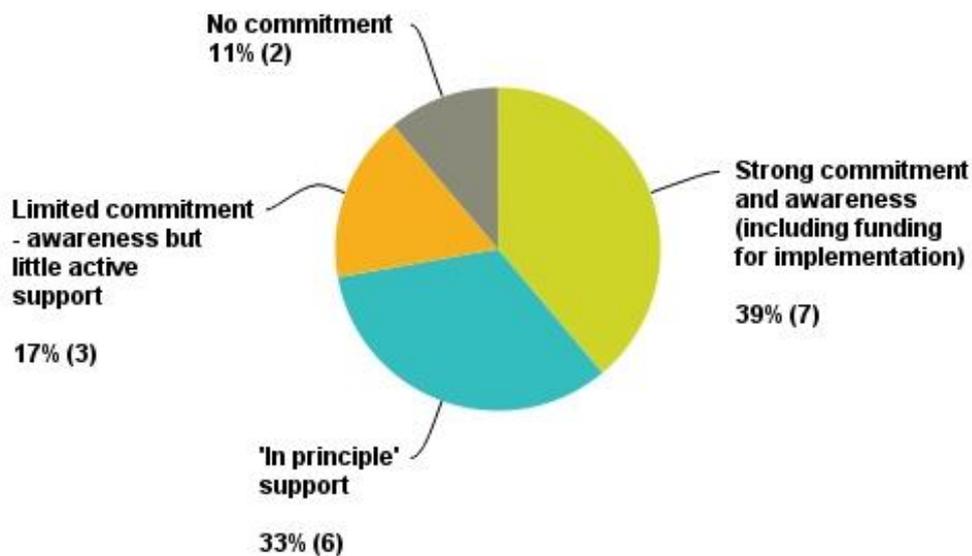
## Collaboration within councils

As Figure 2-3 demonstrates, the highest levels of collaboration within Councils exist around Strategic Planning, Public Health Planning and Community Facilities Planning and Provision.  For these projects, more than 70% of respondents indicated that collaboration exists in their Council.

When discussing collaboration within their Council, participants commented that CEO support is essential to collaborative work and bringing people and departments together. Public Health Planning and DDA Action Planning were regularly identified as projects where there is a high level of collaboration.

Figure 2-3: **Levels of Collaboration by types of projects**
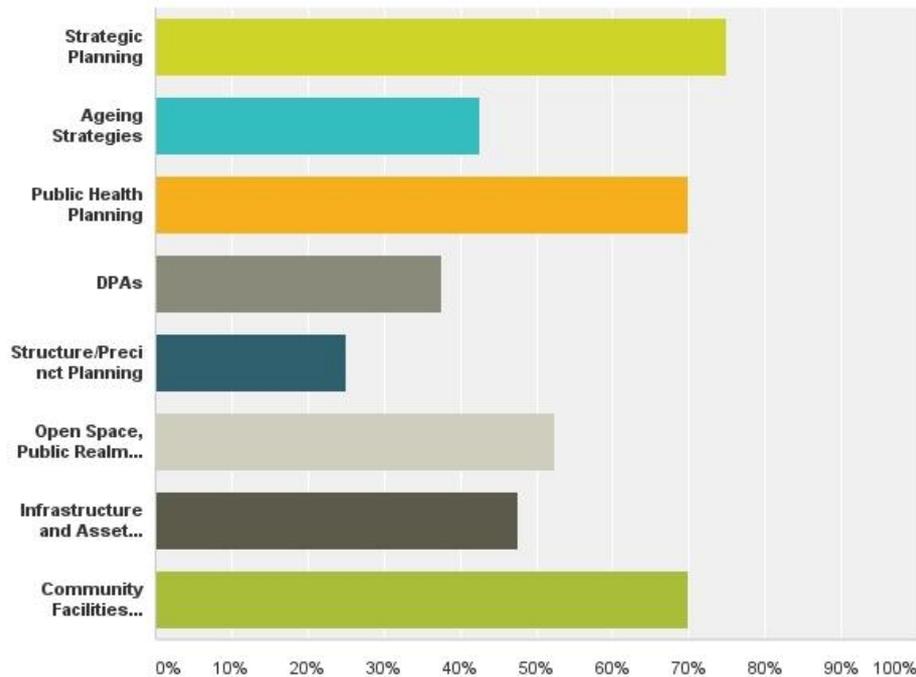
### Commonwealth age care reforms

The survey included three questions about the current Commonwealth age sector reforms. Councils around the state reported to taking a range of responses to these reforms including:

- participating in consultation, preparing submissions and advocating for citizenship approach to older people taken by Local Government in South Australia;
- improving their knowledge through participation in focus groups, seminars, workshops, webinars etc;
- changing team structures, staffing and delivery models;
- providing or committing to additional Council funding;
- pursuing research to understand different business models and gaps in service delivery;
- moving to wellness/re-enablement focus rather than a client service focus.

To the question about future funding for services to older people, responses varied considerably. On one hand, some respondents did not appear to be particularly concerned, noting that they have existing grant funding and expect the Commonwealth to continue to provide funding one way or another.

Others suggested that a loss of Commonwealth funding would see their Council shift its focus, or seek different Commonwealth, State or grant funding.  Some noted that they expect their Council to fill any funding gaps, while others foresee resident co-payments, prudent reductions in staffing (especially administration) and new partnerships.  A number of people commented that regardless of the funding model, any change may result in bad publicity as people assume that they are currently Council funded.

Partnerships were identified as important way to continue to provide services to older people, in some cases seeing it as way to provide services more efficiently.  Partnerships include those with peak bodies and large organisations through to regional collaboration on ageing strategies and service delivery, and specific partnerships with local organisations and service providers.

### The future

A range of possible challenges for managing ageing in Local Government were identified, including:

- higher incidence of chronic disease  and more complex health needs as people live longer;
- uncertainty about the needs of future older people because of diverse expectations from diverse population;
- uncertainty about funding, especially for Commonwealth Home Support Program (CHSP) – and the difficulty for Local Government in operating in a client/consumer oriented environment;

- availability of appropriate housing and care accommodation – and the disconnect between future needs and the housing/accommodation that is currently being provided;
- being able to provide flexibility in facilities and services to meet diverse needs;
- practically providing preventative health /health promotion programs;
- transport;
- ensuring access to services locally when there is increasing trend towards centralisation;
- retaining older people in rural and regional areas;
- climate change – impact on services, facilities, infrastructure and older people themselves;
- ageing volunteers.

A range of possible responses to these challenges were identified.  These ranged from developing the capacity of older people themselves through resilience, health and wellbeing and citizenship, through to better planning and regional collaborations.  A number of responses commented that there is already support of being age friendly – the challenge is around funding and priorities.  Some thought that advocacy in the future will be important, and others thought that innovation might take shape with new business models, such as those that use volunteers and community groups or smaller subcontractors.

### The role of the LGA

Finally, in terms of the role of the LGA in assisting Councils to meet the needs of their ageing communities, suggestions included:

- lobbying and advocating for the interests of South Australian councils as part of the aged care reforms;
- identifying, sharing and disseminating research and best practice;
- elevating the relevance of ageing issues to sectors of local government outside of community services, and among senior management;
- facilitating high level conversation between age care service providers, developers and other levels of Government about ageing;
- training for local government employees.


## Ageing Forum

The Local Government Active Ageing Forum was held on 17 July 2015 between 10am and 3pm at the Campbelltown Function Centre.

The purpose of the forum was to provide an opportunity to present recent research to Council staff from a range of different departments, explore creative ways to address key issues relating to Local Government's involvement in the ageing sector and ensure that the updated LGA Ageing Strategy responds to the needs of Councils around the State.

Discussions at the forum focussed on the following topics:

- Health and wellbeing (including public health planning).
- Access and inclusion plans.
- Age care sector reforms.
- Physical infrastructure and the public realm.
- Community development and social inclusion.
- Housing choice.

Key outcomes from the forum are summarised below, noting that a more detailed Workshop Summary has been prepared, distributed to participants and is available on the project website15.

### Health and wellbeing

There was a strong focus on **public health planning**, the opportunities it provides to drive positive outcomes for older people and also the way in which it fosters cross-Council collaboration.

The **physical environment** was repeatedly identified as important to promoting positive health and wellbeing outcomes for older people, through Council public realm projects, maintenance and by working with private developers.

Participants identified that councils already provide a range of **programs that support health and wellbeing**, from direct health promotion to broader community development and social inclusion activities. Intergenerational activities were identified as particularly important and successful.

**Potential roles of the LGA** included having personnel with specialist skills in health and wellbeing to support councils, as well as providing leadership and advocacy for policy change, and practical supports such as portals for resources and knowledge sharing, and templates for partnering.

Finally, participants emphasised **research** and ensuring that local government plans and activities are based upon a sound understanding of the current situation and future trends.

### Access and inclusion plans

Participants discussed the **synergies between access and inclusion plans and the active ageing agenda**, as well as other initiatives such as DDA Action Plans. These synergies mean that we should strive to clearly communicate the role of each plan and avoid duplication where possible, while also outlining those aspects that are specific to ageing.

**Volunteer management** was identified as an opportunity, with a particular need to streamline volunteer recruitment, training and transfer between councils.

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15 https://www.lga.sa.gov.au/ageing

As with other areas, participants expressed a desire for the LGA to play a stronger role in **coordinating information research and best practice**, and assist councils in scoping research and other funding opportunities.

## Age care sector reforms

The conversations about the age care sector reforms highlighted the many things that councils are doing for their older people beyond direct service delivery because of the **citizenship focus** (instead of client focus). These activities include volunteer management, a wide range of social inclusion programs for the entire community, community transport, libraries and other facilities.

Participants expressed strongly that in light of the HACC reforms, the local government sector should **promote the many positive contributions** that are being made to the lives of older people. This promotion is needed internally – to elected members and senior management – as well as externally through the media.

Opportunities identified for this topic include supporting social enterprise solutions that may provide an alternative service delivery approach, establishing a network/forum for council-only age care service providers and advocacy to the Federal Government about the importance of a wellbeing/citizenship approach to age care.

## Physical infrastructure and the public realm

A key opportunity is the establishment of a **"Design Hub"** to provide technical support as well as resources and examples of local government projects that deliberately took an age friendly approach.

As with other areas, clear information and communication is key to convey the message that while there overlaps between the needs of different groups and we are planning for all ages, **there are some specific considerations/requirements for older people**. It was also thought that we need to more clearly promote the **social return on investment**.

**Partnerships with the development sector** were seen to be very important in this area; there are existing MOUs which should be built upon and new relationships forged.

Improved communication and engagement was identified as an opportunity; this relates both to the culture of community engagement, **moving from inform to consult**, and also communication between departments within Councils.

## Community development and social inclusion

**Reframing the discourse of ageing**, both within Councils and with the community, is one the greatest opportunities to achieve positive outcomes for older people.

Participants also suggested the impact of local government efforts in community development and social inclusion could be widened **by working with the community, to facilitate, partner and develop capacity**, rather than just delivering services.

**Volunteering needs reform**, in terms of reducing 'red tape' and other barriers to volunteering, and also in the way we identify volunteering opportunities. We need to be innovative and better recognise the incredible skills and talents of current and future older people.

**Age friendly businesses** was identified as a social inclusion opportunity, given the amount of interaction older people have with businesses in daily life.

The recurrent theme of the **LGA to share/coordinate resources, showcase successes and advocate** on behalf of councils on common issues was identified as very relevant to the area of community development and social inclusion.

### Housing choice

Participants thought that there are opportunities through planning processes, especially the planning reforms and precinct plans **to better match housing for older people with services, shops, open space and transport.**

At the same time, **housing diversity and choice** throughout the suburbs and country towns was identified as important to facilitate ageing in place.

It was identified that there does not appear to be a particularly good match between the market for housing (i.e. older people and those approaching retirement) and suppliers (i.e. development sector). It was thought that local government and/or the LGA could facilitate some of this communication to help drive alternatives.

## Consultation with peak bodies

Meetings were held with the Office for the Ageing (OFTA), Council of the Ageing (COTA) and the Seniors Information Service.

Each of these organisations noted their existing relationships with the LGA and Councils and expressed a desire to develop stronger partnerships.

A key issue raised by all of the peak bodies was the lack of appropriate affordable housing for older people. They considered that Councils have a key role to play in the area of planning and housing. They identified the need for alternative forms of retirement living including residential parks and intergenerational housing and wondered whether the planning system catered for these.

They also noted the importance of social connection and the essential role of community transport and Council programs in providing these opportunities.

Emerging needs which Councils will need to be aware of are those of the LGBTI community and those born overseas who do not speak English well. While in the recent past these people have largely come from European countries, including Italy, Greece and Poland, increasing numbers of older people from Asia, Africa and the Middle East have different cultural expectations and potentially less resources such as home ownership.

Physical accessibility was also noted as an ongoing issue. The poor condition of some footpaths and the lack of kerb ramps and pedestrian refuges mean that some older people are afraid to walk around their local neighbourhood.

Large shopping centres can also be confusing for people with slippery and shiny floor surfaces, bright lights, loud music and a lack of clear signage at eye height.

OFTA is continuing to work with Councils in the rollout of the "Age Friendly Guidelines for Neighbourhoods" and in pilot projects to increase the awareness of age friendly principles for retail businesses.

OFTA is particularly keen to establish regular communication with the LGA.

# Review of LGA (SA) Ageing Strategy 2011 – 2016

## General Observations

Provided good framework for ageing for its time

Range of things have happen during this time – actions led by the LGA, Community Managers Network, Councils and State Government

Ageing in South Australia has progressed during this time. Awareness of the implications of an ageing population is now common. At the same time, new issues and opportunities are emerging, such as taking more strategic approaches to planning for ageing; age friendly cites/environments/communities; linkages with other initiatives etc

## Actions that have been completed

Adoption of the LGA(SA) Ageing Strategy by State Executive Committee

Review of the LGA Policy Manual to ensure its contains appropriate policies on active ageing

Monitoring and developing agreed positions on State or Commonwealth policy that impact on ageing (done mostly by the Community Managers Network)

Showcasing of best practice

Sharing of research and learnings

Coordination with State Government (OFTA) for the Age Friendly Environments and Communities project

Ongoing partnerships with range of peak bodies and the NGO sector – primarily through the LGA participation in the human services partnership

SA Community Transport Association (SACTA) has ensured there is an effective and integrated model for the delivery of community transport

## Actions that are relevant for the future

Establishment of a realistic implementation strategy/evaluation framework to support the future LGA Ageing Strategy (involving Community Managers Network or LGA)

Monitoring and developing agreed positions on State or Commonwealth policy that impact on ageing (to date done mostly by the Managers Network)

Review of the LGA Policy Manual to ensure it contains appropriate policies on active ageing

Re-igniting the online portal of the Community Managers Network – possibly requiring people to write a 100 word summary of everything that is uploaded.  Related to this is the need to use the LGA website effectively and provide links to the Community Managers portal of resources.

Explore other ways to gather, review and distribute best practice research

Promoting the use of the Age Friendly Toolkit to help drive co-ordinated and cross-disciplinary approaches to ageing, and engage all sectors of Council

Promotion of the contribution of older people to the community, and the contribution of Councils to their wellbeing

Relationship with ALGA as a way to provide feedback to the Commonwealth Government regarding South Australian issues

Continue to explore opportunities through LG R&D fund  to support Council age friendly initiatives

## New opportunities

LGA to lead the engagement of Council planners (urban, social and strategic) and community services personell in the development of the Planning and Design Code to ensure the needs of older people are included

Align age friendly action plans with other agendas – e.g. access and inclusion plans, and public health plans  to avoid duplication and acknowledge what is already being done

Workshop/Tour to facilitate a conversation about age friendly environments with different sectors of Local Government

Scope R&D project (e.g. workshop/tour) to facilitate cross disciplinary action (e.g. age friendly, safety, health and wellbeing, access and inclusion, liveability, public health)

Promotion and marketing of the good work that Councils are doing for older people – and deliberate marketing of CHSP so Councils can be seen as the preferred provider of services – e.g. Age Friendly – Don't Overlook Council; Call us first; stickers on community buses; social media; shopping centres; bumper stickers etc.

## Strategy and Action Plan

Purpose:        The Local Government Association of South Australia (LGA SA) provides leadership and support to Councils in recognising and responding to the needs and aspirations of their communities as people grow older.

Approach:      We will do this through:

leadership and advocacy;

proactive and productive partnerships;

training and development;

communicating and promoting good practice.

### Goal One: Effective leadership and advocacy provide better outcomes for our communities as they age.

**Strategies:**

1. Incorporate age-friendly initiatives within LGA plans and policies.

2. Engage with the Community Managers Network to develop agreed positions on State and Commonwealth policies that impact on ageing.

3. Work with the ALGA to provide feedback to the Commonwealth Government regarding the specific South Australian context for the Aged Care Reforms.

4. Encourage Councils to recognise the needs of older people in their overarching Strategic Plans of Management (Community or City Plans).

| | Actions | Who | When |
|---|---|---|---|
| **1.** | Review the LGA Policy Manual to ensure alignment with the LGA Ageing Strategy 2016-2021 | LGA | |
| **2.** | Develop a co-ordinated plan to prepare Councils for the possible loss of block funding as a result of Commonwealth Reforms, and to position themselves to provide continued services and support to their older residents. | CMN LGA ALGA | |
| **3.** | Maintain regular communication with key personnel in ALGA and other state associations to support national lobbying and advocacy initiatives. | LGA | |
| **4.** | Support the recognition of Council's existing plans and strategies which support age-friendly principles and practices, for example: Access and Inclusion Plans; Public Health Plans; Pedestrian and Cycle Movement and Open Space Strategies; Health and Wellbeing Strategies. | LGA CMN LG Professionals | |
| **5.** | Provide training and resources for Councils on how to engage effectively with older people, particularly those from Culturally and Linguistically Diverse (CALD) communities, Aboriginal and Torres Strait Islander (ATSI) peoples and LGBTI people. | CMN LGA | |

**Goal Two: Productive partnerships generate leverage for Councils**

**Strategies**

1. Continue to build and maintain strong partnerships with the State and Commonwealth Governments, relevant peak bodies, the private sector and non-government organisations.

2. Identify potential partners based in universities or other research institutions to lead or participate in innovative research.

| Actions | Who | When |
|---|---|---|
| **1.** Engage with the Office for the Ageing (OFTA) to support the continued expansion of OFTA's "Age-Friendly Neighbourhoods Guidelines and Toolkit" to Councils across the state. | LGA | |
| **2.** Invite relevant research organisations to participate in a Think Tank to brainstorm ideas for collaborative and innovative research and identify potential sources of funding. | LGA | |
| **3.** Support the application of existing research to the Local Government environment | LGA  CM | |

**Goal Three:   Councils develop skills and competence to enable the provision of age-friendly places, spaces and experiences.**

**Strategies**

1.  Council staff and elected members have the skills they need to plan for appropriate housing, an accessible physical environment, socially inclusive programs and the meaningful participation of older workers and residents.

2.  Capitalise on the potential of the "baby boomer" generation to reimagine the world of volunteering.

3.  Facilitate better co-ordination between Council urban, social and strategic planners and community services personnel to ensure the needs of older people are included in policy and practice.

| Actions | Who | When |
|---|---|---|
| **1.** Seek Research and Development Fund support for training experiences for both Elected Members and Council staff from a range of disciplines. These training sessions could include a tour of effective and ineffective responses to meeting the physical and social needs of older people. | LGA<br><br>CMN<br><br>Participating Councils | |
| **2.** Convene a forum comprising Council planners and community service personnel to provide information about the new Planning and Design Code and to develop a coordinated response. | LGA<br><br>CMN<br><br>PIA | |
| **3.** Continue to participate in the South Australian Volunteering Strategy partnership and work together to identify new models of volunteering that meet the aspirations of baby boomers entering retirement. | LGA partnership with Volunteering SA and COTA | |

### Goal Four:  Communicate and promote examples of good practice

**Strategies:**

1.  Enhance the provision of information and resources through the LGA website and other online environments.

2.  Promote the contribution of older people to the community and of Councils to the wellbeing of older people.

3.  Showcase good practice initiatives undertaken by Local Government and others.

4.  Recognise the achievements of Councils and Council staff in making their Council areas great places to grow older.

| Actions | Who | When |
|---|---|---|
| **1.** Prepare marketing and promotional materials that highlight the good work that Councils are doing for older people and use these to market Council services, facilities and programs to the South Australian community. | LGA  CMN  Councils | |
| **2.** Review the LGA website and update this to include a link to the resources available on other sites including the Community Managers Network and the State Government's Office for the Ageing. | LGA | |
| **3.** Re-ignite the forum page of the Community Managers Network and encourage members to share their experiences. | CMN | |
| **4.** Continue to support the LG Professionals SA Award for Excellence in Age-Friendly Communities. | LGA  CMN | |

## Implementation and Monitoring

The success of this LGA (SA) Ageing Strategy depends on the level of commitment to its implementation. While primary responsibility rests with the LGA, it is acknowledged that the Local Government Professionals SA Community Managers Network (CMN) will play a significant role in achieving the goals of the strategy.

It is recommended that following the endorsement of the strategy a schedule be established for the review of the progress made on the strategies and actions.

Six monthly reviews are recommended in Years 1 and 2 with annual reviews in Years 3 and 4.

During Year 5 a more comprehensive review should be undertaken.

The findings of the review, with a focus on what has been achieved, should be made available on the LGA and Community Managers Network's websites.