

Planning for an Ageing Community Strategy 2010 +



**PENRITH
CITY COUNCIL**
Serving Our Community

ACKNOWLEDGEMENTS

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Cover Image: Seniors Concert at the Joan Sutherland Centre for Performing Arts.

Statement of Recognition of Penrith City's Aboriginal and Torres Strait Islander Cultural Heritage

Council acknowledges the unique status of Aboriginal people as the original owners and custodians of lands and waters, including the land and waters of Penrith City.

Council values the unique status of Torres Strait Islander people as the original owners and custodians of the Torres Strait Islands and surrounding waters.

We work together for a united Australia and City that respects this land of ours, that values the diversity of Aboriginal and Torres Strait Islander cultural heritage, and provides justice and equity for all.

Penrith City Council is pleased to present this Planning for an Ageing Community Strategy 2010+. The Strategy has been developed after extensive consultations with older residents and services across Penrith City. The Strategy outlines the challenges of a growing ageing population and Council's commitment to supporting and developing an age-friendly city for current and future generations of older people.

Penrith is a vibrant regional city set on the picturesque Nepean River at the foot of the Blue Mountains in Western Sydney. The environment is marked by a harmony of urban and rural lifestyles. In 2006 there were approximately 172,142 people living in the City of Penrith.

While the proportion of older people within the City is below the NSW and national averages, the population of Penrith is expected to age rapidly. By 2021 the number of Penrith residents aged over 65 will nearly double to over 24,000 people. In the short term, Penrith City does not face an unmanageable challenge in regards to population ageing. Nevertheless, there is a clear requirement for effective long term planning. It is important that Council respond to this emerging opportunity to enable people to live their lives close to their family, friends and community.

The Strategy includes five key priority themes and presents more than a hundred actions. The Strategy themes and actions support an integrated approach by Council services to the challenges of an ageing population. The implementation of the Strategy will lead to greater opportunities for older people to participate in community life across the city. This will also contribute to the health and wellbeing of the City's older residents.

I would like to take this opportunity to thank the residents and services of Penrith City for their valuable contribution in assisting Council develop this Planning for an Ageing Community Strategy 2010+.

We look forward to working with you in implementing this important Strategy for the older people of Penrith.



Councillor Kevin Cramer, OAM
Mayor



Alan Stoneham
General Manager

| | | | | |
|---|-----------|-------------------------|--|-----------|
| Executive Summary | 4 | 6 | Encouraging healthy lifestyles and access to health care and support services | 40 |
| 1 Introduction | 7 | 6.1 | Issue overview | 40 |
| 1.1 Introduction | 7 | 6.2 | What the literature says | 41 |
| 1.2 Strategy Objectives | 7 | 6.3 | Council's role | 42 |
| 1.3 How the Strategy has been developed | 8 | 6.4 | What older people and services said in consultations | 43 |
| 1.4 Structure of the Strategy | 9 | 6.5 | Future issues and challenges | 43 |
| 2 The Context for the Ageing Strategy: Demographic Dimensions | 10 | 6.6 | The strategy | 45 |
| 2.1 A snapshot of population ageing in Australia | 10 | 7 | Supporting older people to age in place | 47 |
| 2.2 Stages of Ageing | 11 | 7.1 | Issue overview | 47 |
| 2.3 Older Australians – a diverse group | 12 | 7.2 | What the literature says | 48 |
| 2.4 Changing expectations: The Baby Boomers | 13 | 7.3 | Council's role | 49 |
| 2.5 Active Ageing and Ageing Well | 14 | 7.4 | What older people said in consultations | 50 |
| 2.6 Key Trends | 16 | 7.5 | Future issues and challenges | 50 |
| 3 The Context for the Ageing Strategy: Policy Dimensions | 17 | 7.6 | The strategy | 51 |
| 3.1 Global context | 17 | 8 | Creating local communities that support active ageing | 53 |
| 3.2 Australian Government context | 17 | 8.1 | Issue overview | 53 |
| 3.3 State Government Context | 18 | 8.2 | What the literature says | 54 |
| 3.4 Local Government Context | 19 | 8.3 | Council's role | 55 |
| 3.5 Penrith Council policies and plans | 20 | 8.4 | What older people said in consultations | 56 |
| 4 Understanding population ageing in Penrith | 22 | 8.5 | Future issues and challenges | 58 |
| 4.1 Population Characteristics | 22 | 8.6 | The strategy | 59 |
| 4.2 The distribution of older people in Penrith | 26 | 9 | Encouraging participation in, and contribution to, community life | 63 |
| 4.3 Household and dwelling types | 29 | 9.1 | Issue overview | 63 |
| 4.4 Income | 31 | 9.2 | What the literature says | 64 |
| 4.5 Core Activity Need for Assistance | 33 | 9.3 | Council's role | 65 |
| 4.6 Cultural and linguistic diversity | 34 | 9.4 | What older people said in consultations | 65 |
| 4.7 Implications for Council | 34 | 9.5 | Future issues and challenges | 66 |
| 5 Encouraging participation in social, leisure and cultural activities | 35 | 9.6 | The strategy | 67 |
| 5.1 Issue overview | 35 | 10 | Implementation | 69 |
| 5.2 What the literature says | 35 | 10.1 | The strategy | 70 |
| 5.3 Council's role | 36 | Acronyms | 71 | |
| 5.4 What older people said in consultations | 36 | References | 72 | |
| 5.5 Future issues and challenges | 37 | | | |
| 5.6 The strategy | 38 | | | |

While the proportion of older people within the City of Penrith is currently well below the state and national averages, the population of Penrith is rapidly ageing. In 2006 14,103 Penrith residents, or just over 8% of Penrith's population, were aged over 65 years. By 2021, the number of Penrith residents aged over 65 years will nearly double to 24,128 people, or 11.5% of Penrith's population. While Penrith City does not face a crisis concerning population ageing now, there is nevertheless a clear requirement for long term planning.

In the context of objectives contained within Council's Strategic Plan, Management Plan and Social Planning Framework, Council resolved to prepare an Ageing Strategy to guide its planning, actions and service delivery to respond to the challenges of an ageing community. The aims of the strategy are to assist Council to:

- understand the changing needs of the City of Penrith and the priorities of different groups of older people
- deliver suitable infrastructure and services over which Council has direct control or influence
- direct actions and resources strategically to meet the diverse needs of older people, and
- undertake advocacy and develop integrated responses to issues where Council may lead or partner with other organisations.

Preparation of the strategy has involved:

- an initial Scoping Paper which set the parameters to be addressed in the strategy
- a literature review
- analysis of demographic forecasts

- consultations with older residents and services in Penrith, involving over 260 participants at four public consultations in Penrith & St Mary's and six focus group discussions with residents with particular needs.
- consultations with Penrith Council staff and review of existing Council policies and strategies.

In considering the context of population ageing in Australia, the strategy notes:

There is no single definition of 'old'. Being an "older person" may span a period of 30 years or more and involve passing through several different stages of ageing. The needs and issues for active "well" aged people (with a focus on lifestyle) are likely to be quite different to those for frail aged (with a focus on care and support services). It is around the lifestyle needs and interests of the "well aged" that local government is particularly well placed to respond.

- Increasing life expectancy presents older people with an extended period of opportunity and capacity and relatively active and independent phase after retirement. Older people are seeking support to use this time well, with a focus on quality of life and well-being. An "active ageing" framework underpins this ageing strategy.
- Older people are an increasingly diverse group in terms of their life experiences, care needs, lifestyle preferences, and access to resources. This is challenging past cultural stereotypes of older people as a dependent and homogenous group.



In preparing for an ageing community, key challenges for Council will include:

- Meeting the diverse expectations of older people
- Balancing the needs of older people in a context of a changing community
- Responding to increasing demands for appropriate services and facilities to support older people to remain healthy, active and independent
- Planning for a greater diversity of housing options to accommodate older people
- Adapting infrastructure which has not been built in the past for an ageing population
- Working with other levels of government, community and private sector organisations as well as older people to ensure Penrith provides a supportive community for the diverse range of older people in the City.

Both the number and proportion of older people are likely to increase markedly in Penrith over the next two decades. The population of older people will be concentrated in the older established residential areas of Penrith. The majority are likely to have relatively modest incomes and a high rate of home ownership. At the same time there will be a small but growing number of older people renting on very low to low incomes. There will be increasing cultural diversity amongst older age groups and growing need for support services associated with the significant increase in numbers of people aged over 85 years, where rates of disability and dementia are highest.

The strategy is structured around five priority themes which formed the basis of the consultations. For each priority theme, the strategy provides an overview of the issue, key literature findings, an outline of Council's current role, a summary of key issues from the consultations, future issues and challenges, and the strategies and actions to address the issues.

The priority themes and key strategies are outlined below. For each strategy, a number of specific actions have been identified, along with responsibility within Council for their implementation.

Finally, the report presents a series of actions for the on-going monitoring and review of the strategy. This includes monitoring the implementation of the strategy and the review and update of demographic forecasts.

Priority theme 1: Encouraging participation in social, leisure and cultural activities

Council will take action to:

- 1.1 Encourage provision of a broad range of social, leisure and cultural activities and programs that reflect the diverse interests and preferences of older people
- 1.2 Ensure Council's social and cultural facilities and libraries are able to address the diverse and changing needs of older people into the future
- 1.3 Improve access to information about activities and programs available for older people

Priority theme 2: Encouraging healthy lifestyles and access to health care and support services

Council will take action to:

- 2.1 Encourage the provision of health education and prevention programs that promote safe and healthy lifestyles for older people
- 2.2 Develop strategies that improve support for carers



- 2.3 Support the planning, delivery and co-ordination of residential and community aged care services in Penrith
- 2.4 Enhance access to information about available services and support

Priority theme 3: Supporting older people to “age in place”

Council will take action to:

- 3.1 Increase the supply of housing suited to the needs of older people in appropriate locations
- 3.2 Support older people to remain living independently in their own homes by working with other agencies to enhance home maintenance and home safety services

Priority theme 4: Creating local communities that support active ageing

Council will take action to:

- 4.1 Develop and implement strategies and policies that support age-friendly built environments
- 4.2 Enhance community and personal safety and sense of security for older people within Penrith
- 4.3 Improve access to transport services to meet the needs of older people
- 4.4 Promote social interaction and sense of community for older people through neighbourhood design and facilities
- 4.5 Provide public open space and recreation facilities that support active living for older people and respond to their changing needs and interests
- 4.6 Create safe pedestrian and driving environments for older people
- 4.7 Promote access to all public facilities and services for older people

- 4.8 Ensure Council’s parks and walking trails support the health and well-being of older people

Priority theme 5: Encouraging participation in and contribution to community life

Council will take action to:

- 5.1 Provide flexibility in Council’s employment practices to meet the varied and changing employment needs of older people
- 5.2 Provide opportunities for older people to contribute their skills and experience to the community, for instance through volunteering
- 5.3 Promote opportunities for older people to participate in community life and to be recognised for their achievements and contributions
- 5.4 Promote access to opportunities for lifelong learning and development of new life skills

Implementation - On-going planning for an ageing community

Council will take action to:

- 6.1 Consider the financial implications of an ageing population for Council’s rate revenue projections and future expenditure
- 6.2 Continue to develop the research base underpinning this Planning for an Ageing Community Strategy 2010+
- 6.3 Regularly monitor and review the Ageing Strategy.



1.1 Introduction

While the proportion of older people within the City of Penrith is currently well below the state and national averages, the population of Penrith is rapidly ageing, as “baby boomers” who settled in the new suburbs of the 1970’s and 80’s approach retirement age. Over the next decade, numbers of people aged 65 and over are expected to nearly double within the Penrith LGA, with the proportion of older people set to increase at a faster rate than the NSW average for the foreseeable future. This population will be diverse in terms of its age and life course stage, life experience, health and financial status, cultural background, and geographical concentration, pointing to a diversity of needs, priorities and lifestyle choices that will require a variety of approaches and strategies to support positive ageing.

The ageing of the population poses a number of challenges for Penrith City Council, particularly given that its primary focus has been on meeting the needs of families with children and young people, who have to date made up the bulk of the population. Trends for an ageing population at international and national levels, along with forecasts for what this means in the Penrith context, are putting pressure on Council to review its programs and priorities and redirect activity and resources to ensure that it is well placed to meet the challenges of an ageing community.

Penrith does not face a crisis concerning population ageing now and there is substantial time before the older population is expected to reach large numbers. While this will allow for gradual adjustment, there is nevertheless a clear requirement for long term planning.

“Penrith is already a great place to live!”

Resident, Penrith Workshop

In the context of objectives contained within Council’s Strategic Plan, Management Plan and Social Planning Framework, Council has resolved to prepare an Ageing Strategy which will guide its planning, actions and service delivery to respond to the challenges of an ageing community. The Ageing Strategy will enable Council to develop an approach which recognises the changing needs of the City of Penrith and which directs actions and resources appropriately to ensure that the diverse needs of older people will be met within the City. The Strategy will help ensure that Council can deliver suitable infrastructure and services over which it has direct control or influence, and that it develops integrated responses on issues where Council may lead or partner with other agencies and organisations. The focus of the Strategy is on identifying priorities, achievable actions and Council’s role in implementing the actions, so that a clear pathway is established to anticipate and address ageing issues within the City.

In developing the strategy, the focus has been on actions to be undertaken within the context of Council’s strategic and management planning framework, to create the platform and positioning for longer term strategies.

1.2 Strategy Objectives

The objectives of the ageing strategy are to:

- a. Identify ageing trends and projections to help Council understand the nature of future ageing issues in Penrith
- b. Identify the needs and priorities of different groups of older people within Penrith
- c. Consider the policies, programs, facilities and services Council needs to put in place to improve the quality of life and well-being of older people and support them to lead healthy, independent lives as they age
- d. Consider how Council can support the existing strengths and capacities of older people and how an Ageing Strategy can build on this to ensure that older people continue to participate in community life and achieve fulfilment

- e. Assist Council in developing an approach which recognises the changing needs of the City of Penrith and which directs actions and resources appropriately to ensure that the needs of older people will be met within the City
- f. Ensure that Council can deliver suitable infrastructure and services over which it has direct control and that policies appropriately influence the development of a built environment, including different housing options which can support older people.
- g. Ensure that Council develops integrated responses on issues where Council may lead or partner with other agencies and organisations, as well as identify opportunities in which Council might influence the actions of others or advocate on behalf of its older residents
- h. Provide a framework to link and integrate the variety of planning and policy initiatives Council is already undertaking which have implications for older people
- i. Identify clear priorities, responsibilities and achievable actions and Council's role in implementing the actions, so that a clear pathway is established to anticipate and address ageing issues within Penrith City
- j. Identify the resource implications of implementing the Strategy and appropriate resourcing strategies..

1.3 How the Strategy has been developed

Preparation of the Ageing Strategy has involved:

1. Preparation of an initial *Scoping Paper* in 2006 which set the parameters to be addressed and provided the foundation on which Council's *Ageing Strategy* was to be developed. The *Scoping Paper* considered the range of issues relevant for consideration in the *Ageing Strategy* and identified six priority areas for Council's attention. The priority areas included:
 - meeting the housing needs of older people
 - creating supportive local communities
 - meeting the social, recreation, leisure and cultural needs of older people
 - encouraging participation in and contribution to community life
 - access to health care and support services.
 - income and revenue raising issues
2. A research phase in 2007, which included:
 - a literature review
 - a review of the policy context at national, state and local government levels
 - a demographic analysis of current and forecast profiles of older people in Penrith
 - development of principles and objectives to inform Penrith's approach to preparing for population ageing.

These elements have been incorporated within this final Strategy Report.

“We need to recognise that some people just don't want to be involved”

Participant, St Mary's workshop



3. A consultation phase in 2008 to identify the issues and priorities regarded by older people and their representatives as most important to address in the strategy. This recognised that the views of older people themselves were central to the development of the strategy. Over 260 people participated in the consultation process, through:
- two half day community workshops in Penrith and St Marys with older residents
 - two half-day workshops with representatives of community organisations and services
 - six focus groups with groups of older people with special needs, including older Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds, people from rural parts of Penrith and carers.
 - consultation with council officers.

Key outcomes from the community consultation have been incorporated within this final Strategy report. A separate detailed report on the consultation process and outcomes is available from Council if required.

4. Preparation of the strategic action plan, in close association with Council staff. This action plan identifies clear priorities and responsibilities for Council action to address population ageing within Penrith City.

The Wheels of Life



1.4 Structure of the Strategy

As background to the strategy, this report presents an outline of the social context of ageing in Australia and the policy context in which the strategy has been prepared. This is followed by a profile of the current population of older people in Penrith and demographic forecasts to 2021. The strategy is then presented in terms of five priority themes which formed the basis of the consultations for the strategy:

- Encouraging participation in social, leisure and cultural activities
- Encouraging healthy lifestyles and access to health care and support services
- Supporting older people to age in place
- Creating local communities that support active ageing
- Encouraging participation in, and contribution to, community life.

For each theme, the report outlines:

- An overview of the issue
- What the literature says
- Council's current role
- What older people said in the consultations
- Future issues and challenges
- The strategies and actions to address the issues.

The strategies and actions have been aligned with Council's goals and objectives as set out in its 2008-9 Management Plan. These in turn align with the Penrith Principles for a Sustainable City, which Council has adopted as the organising framework for its strategy for the City. The Planning for an Ageing Community Strategy 2010+ is also aligned with Council's 2009-10 Draft Strategic Plan.

Finally, the report also includes a strategy for on-going planning, to ensure that needs and outcomes are monitored and that the strategy is updated regularly to keep pace with population ageing in Penrith.

This chapter provides an overview of the dynamics of population ageing in Australia, and outlines the current approach to encouraging 'active ageing' as a strategy to ensure older people are able to 'age in place', remain healthy and independent, financially secure and engaged in their local communities as they grow older.

2.1 A snapshot of population ageing in Australia

Population ageing has been described as one of humanity's greatest triumphs as well as a great challenge.¹ It has also been described as one of the most 'certain' global changes to confront mankind, as we are able to predict with relative accuracy the increase in numbers and proportion of older people in our communities in the coming decades².

The population ageing dynamic is being driven by two trends: people are living longer, associated with improvements in medical technology and public health, and they are having fewer children, resulting in slower growth in younger age cohorts. Population ageing is occurring at different rates and at different times across countries and regions. There is an important 'location' dynamic to the impacts and responses to population ageing.

In Australia, the proportion of people aged 65 and over is projected to grow from 13.3% of the total population in 2006 to over 23% in 2035, that is from 2.7 million older Australians in 2006 to 6.2 million in 2035; and to over 26% (7.5 million people) in 2055.

In NSW, the number of people aged 65 years and older is expected to more than double between 2006 and 2031, while the population of children and young people under the age of 15 will slightly decrease. Currently around 1 million people in NSW are aged 65 years or older, representing 14% of the population. By 2026 this is expected to increase to 1.5 million (20% of the population) and by 2046 to over 2.2 million, representing 25% of the population.

Of particular note is the rapid increase in the population aged 85+, associated with greater longevity, as it is the "old old" where health and care costs are greatest, associated with increasing rates of disability. Around 34% of people in NSW aged 80-84 have a profound or severe disability. This rises to 48% for those aged 85-89³. Between 2031 and 2051 baby boomers (those people born in the post-war era of the 1950's) are projected to swell the population aged 85 and over from 856,100 to 1.62 million⁴. In 2006 there were around 1,000 people aged 100 years or older in NSW; by 2026 this is expected to increase to 6,500 people and by 2051 to 27,000 people⁵.

The rate and scale of population ageing varies markedly at the local level. Within NSW for example, the proportion of the population who are 65 and over will be highest in middle ring suburbs and coastal areas; however the rate of population ageing will be most rapid in outer-suburban areas. This issue will be critical for the development of service capacity, urban design, housing development and planning controls in Penrith.

¹ World Health Organisation (2002) *Active Ageing – A Policy Framework*, p.6

² Piggot J (2007) *Demographic Shift and its Implications*, UNSW

³ Office for Ageing 2006, Population Ageing Overview. Fact Sheet.

⁴ Hugo G (2007) *Some spatial dimensions for the future of Australia's ageing population*; ABS (2005) 85.

⁵ Office for Ageing 2006, Population Ageing Overview. Fact Sheet.



2.2 Stages of Ageing

Within the field of ageing policy, there is no simple and widely recognised definition of “older people”. Government policy contains a variety of definitions in relation to planning and eligibility for age-related benefits:

- 55 years for access to Seniors Living housing (although in practice most new residents are well into their 70’s), and access to some superannuation entitlements;
- 60 years as the traditional retirement age;
- 65 years for entitlement to the aged pension;
- 70 years for planning benchmarks for aged care services;
- 80 years for driving licence matters.

Being an ‘older’ person can span a time period of 30-40 years or more, and any categorisation based purely on age presents a limited view of the diversity of older peoples’ culture, health status and interests. However it is useful to consider different stages of ageing, particularly in terms of the ‘likely’ differences in requirements for care and support services. Suggested categories, to assist in service planning and delivery, are identified below:

Pre-retirement Age (around 55-65 years). This group is still very much engaged in work and community life. They are likely to be in good health and may be planning for retirement by preparing to down-size accommodation, moving to part-time work or preparing to travel or enjoy other lifestyle changes. This group is likely to be providing active support to family, either through caring for their own parents, or grandchildren.

The Young Old (around 65-75 years). They tend to be generally very independent, healthy and still active within their community. Many people within this age group are still leading active working lives, and some are still supporting ageing parents.

The Middle Old (75-85 years). At this age, increasing numbers are becoming widowed, as well as starting to experience some health and mobility problems. However, a large proportion of people within this age group are still active and independent.

The Frail Aged/ Very Old (85 years and over). There is expected to be a fivefold increase of the over 85s age group by 2051 in NSW. The demand for health, home care and residential care services increases proportionally with age, particularly within this age group.

There is growing recognition of the importance of taking a ‘life course’ approach in the development of comprehensive strategies to promote healthy ageing and prevent chronic disease. It recognises the accumulation of health risks throughout an individual’s life, as well as the growing numbers of people leading active, socially and financially independent lives as they age. In particular, it is important to recognise that the needs and issues for active “well” aged people (with a focus on lifestyle) are likely to be quite different to those of the frail aged, who are likely to focus more on care and support services. It is around the lifestyle needs and interests of the “well” aged that local government is particularly well placed to respond.



2.3 Older Australians – a diverse group

‘Older people’ are a diverse group and their lives and experiences vary in many ways. People’s experience of ageing will vary according to a range of factors - gender and sexuality, family and social networks, income, cultural background, health status, disability, workforce participation, housing, whether they live in urban or rural areas, their interests and life goals ⁶.

In addition, there are groups with particular needs: for instance people from non English speaking backgrounds, recently arrived refugees, older Aboriginal and Torres Strait Islander people, people with a pre-existing disability and people with a mental illness. In 2006, only 3% of Aboriginal and Torres Strait Islander people in NSW were aged 65+⁷. Given the current shorter life expectancy of Aboriginal and Torres Strait islander people, “old age” is considered (including the Home and Community Care Program) to start at 45 years for Aboriginal and Torres Strait Islander Australians. At the same time, 28% of people aged 65+ in NSW were born overseas. These groups may require different approaches and more specialist strategies to support them as they age.

Solutions and local strategies to respond to population ageing will need to recognise the increasing diversity of older people, and their need for preventative responses and a spectrum of services and service models. Different approaches will be needed to achieve equitable outcomes for different groups of older people.



“I make a point of getting to know someone in my street – I can ask them for help and they’ll notice if I’m not around for a few days ”

Resident, Nepean Food Services focus group

⁶ Office for Ageing 2006, *Population Ageing Overview*. Fact Sheet.

⁷ Australian Institute of Health and Welfare 2007 *Australia’s Welfare* 2007 p. 82



2.4 Changing expectations: The Baby Boomers

People's experience of ageing also reflects different generational values and priorities. Long term policy and strategies need to anticipate generational changes in the older population, and in particular the rising expectations of the large baby boomer cohort and their personal capacities and resources for achieving them. There will be a behavioural shift as older age cohorts become increasingly composed of post-war baby boomers, who will begin reaching 80 years old in the 2020's. The baby boomers are large in numbers and have had a defining influence on each period of Australian history since the 1950's. The characteristics of this generation point to some particular issues for future consideration:

- They will bring different attitudes to old age and are unlikely to display the stoic acceptance, low expectations and predispositions to save of their parents' generation. They are likely to demand higher levels of choice in relation to aged care services, lifestyle services and accommodation options, and have expectations of rights and entitlements, along with more organisational skills for getting their way and negotiating bureaucracy. The extent to which the quality of publicly available aged care services will meet their expectations when they reach old age is a key question for the future ⁸.
- They will present a more educated generation of older people, and have different experiences of work. In particular a much higher proportion of women will have been in the workforce during their 40's and 50's and may stay in the workforce into old age.
- They will generally be more wealthy than previous generations, but will also display increasing wealth disparities. Many will be self-funded retirees with access to substantial retirement savings that enable travel and affluent lifestyles. For others, retirement savings from superannuation are likely to be insufficient to support the

lifestyles they desire. A significant proportion will rely on government income support to supplement superannuation income. Many older workers will stay in the labour force longer as a result of concerns over the adequacy of their retirement income. There are likely to be gaps between rising incomes and even greater rises in expectations. Groups with low retirement savings, such as women, migrants, Aboriginal and Torres Strait Islander people, those from rural areas and people with disabilities, will be especially vulnerable.

- At retirement, baby boomer retirees will have a higher proportion of home ownership than any generation before them, although a proportion will carry mortgage debt into the retirement phase of their lives. The proportion of this group living in 'resort-style' retirement villages is also likely to increase as more of these facilities are built to satisfy the "lifestyle" focus of this generation. However, the one out of five older people who do not own their own home are highly vulnerable, not only in terms of income but also in having minimal assets to buy into appropriate accommodation and care.
- They will also have fewer children, and there will be significant numbers ageing without ever having married or having had children. It is anticipated that about 27% of older women in 2020 will be separated or divorced on entry to old age, compared with just 7% for the current elderly cohort ⁹. Baby boomers will be more likely than any generation before them to be living alone as they age.

These characteristics are important in the Penrith context, as it is the baby boomers who will start to swell the numbers of older people in Penrith in the next decade.

⁸ Kendig, H and Duckett, S 2006. *Australian Directions in Aged Care: The Generation of Policies for Generations of Older People*. p.55

⁹ Australian Institute of Health and Welfare 2007 p. 85

2.5 Active Ageing and Ageing Well

Over the last half century average life expectancy has increased by at least 10 years, from 75 years to 85 years plus. The vast majority of people can look forward to several decades of relatively independent life after retirement, a great contrast to the short and restricted retirement experiences typical of the early postwar era. It has been estimated that Australian women at age 60 can expect another 25 years of life, of which only about 4.5 years may be associated with disability, while Australian men at 60 can expect another 17 years, with about 4 years of disability¹⁰.

The National Strategy for an Ageing Society recognises old age as a time of opportunity and capacity, rather than inevitable decline and dependency. Managing health and wellbeing through diet, exercise, safe accommodation and participation in community and family life should ensure that the additional years of life is a positive experience, with quality of living retained in one's older years. There is a developing body of literature that suggests ageing well requires a prevention approach to supporting ageing across the life-course.

Prevention means taking action now to ensure good outcomes later. It can apply to the health sphere (diet, exercise and physical health) but is equally relevant to financial planning, planning for changes to working conditions, for accommodation – (for example implementing housing adaptations before they are 'critical'), and developing social networks to keep engaged and support psychological health and wellbeing. The literature describes the prevention approach as 'healthy' or 'active ageing', or 'ageing well'.

Healthy ageing, ageing well and active ageing are terms which are used interchangeably to describe both the outcome and the way in which we can retain our quality of life as we enter the retirement and post-retirement phases of our lives. Achieving an increase in disability-free life years is a key priority of an active ageing approach.

While in Australia we tend to talk about 'healthy' ageing, this can result in a more restrictive physical health related paradigm. The World Health Organisation recommends the term 'active' ageing as this incorporates health and physical activity, but also the notion of active engagement in the community and workforce.

Healthy or active ageing requires a partnership between individuals, communities and government. It requires individuals to take some responsibility for healthy lifestyles, but also requires provision of age-friendly built environments, facilitating opportunities for social and economic participation and provision of care and support services that meet different and changing levels of need.

¹⁰ Kendig, H and Duckett, S 2006.. p51

“We don't see many younger people in this community. Sometimes it's so quiet in the day if you say help no-one will hear you”

Maltese focus group, Llandilo



The Australian Centre for Ageing ¹¹ identifies a number of ‘predictors’ of healthy aging. They include both behavioural elements associated with healthy lifestyles such as being physically active and good nutrition, and psychosocial elements such as social support networks, living arrangements and engagement in social and productive activity. These predictors are useful as they demonstrate where prevention and early intervention efforts, urban planning and social inclusion responses are best targeted. They show that good physical health alone is not enough to ensure quality of life in older age. Strategies that engage older people in the community and encourage ongoing participation in paid and voluntary work, social and educational opportunities and living arrangements that meet individual needs are critical.

“Getting out of the house and talking to people is best health you can get”

Resident, St Marys workshop

Further research has found that when older people are asked what ‘healthy aging’ means to them ¹², they have identified the following factors, which correspond closely to the predictors of healthy ageing identified by the Australian Centre for Ageing:

- Health and healthy living
- Capacity for independent activity
- Social activity and networks
- Supportive environments (safe neighbourhoods, quality housing)
- Having the resources for everyday life (income, transport, information)
- Choice and control over life
- Positive attitudes

Adoption of an “active ageing” framework provides an indication of the key areas for action in preparing for the ageing of the population and assessment of the approaches most important to older people and most likely to achieve quality of life as people transition through the stages of ageing.



¹¹ Peel, McClure, Bartlett (2005)

¹² Bartlett, H 2007

2.6 Key Trends

While it is difficult to anticipate the effects of social change, the following key trends point to a different future for older people and ageing in coming decades:

- Increasing life expectancy presents older people with an extended period of opportunity and capacity and relatively active and independent phase after retirement. Older people are often seeking support to use this time well, with a focus on lifestyle, quality of life and well-being.
- Older people are an increasingly diverse group in terms of their life experiences, care needs, lifestyle preferences, and wealth. This is challenging past cultural stereotypes of older people as a dependent and homogenous group.
- Older age groups will progressively reflect the greater ethnic diversity of Australia and as a result demand for culturally appropriate, flexible and consumer centred aged care services is expected to increase.
- Older Australians will become an increasingly powerful political force, demanding opportunities to be heard and responsiveness to their needs. The rising expectations and more diverse means of the baby boomer generation when they reach old age will result in demand for new types of services and models of care and support.
- Trends towards increased consumer rights are likely to be associated with trends towards a more “user pays” system as a result of fiscal pressures on governments and rising consumer expectations – most people will need to pay more for their own services.
- Demand for aged care services will rise considerably over next three decades as numbers of frail aged people increase. In addition to concerns for the adequacy and quality of care, there will be increasing concern for enabling choice of care and for funding approaches that are equitable between different groups of older people and between younger and older people.
- Most older people will want to continue to “age in place”, creating challenges for infrastructure, housing, land use and transport policies in responding to this trend.
- Information technology is likely to have a major impact, associated with greater access by older consumers and increased consumer power.
- The cornerstone to quality old age will continue to be adequate income, pointing to the importance of superannuation and income support policies that will provide older people with sufficient resources to pay for assistance in the forms they prefer. Several emerging trends make future demand hard to predict. Chief amongst these is the impact of the global economic downturn and the sudden loss in value of superannuation accounts for many already in, or close to, retirement.

THE CONTEXT FOR THE AGEING STRATEGY: POLICY DIMENSIONS

3.1 Global context

The World Health Organization has developed a Framework for Active Ageing which has influenced policy development around the world. The WHO Framework is premised on the rights, rather than needs, of older people, according to the United Nations principles of independence, participation, dignity, care and self-fulfilment. It identifies the need for co-ordinated policy responses that promote health and wellbeing, social participation and independence in order to minimise social inequalities and age related poverty for older people and reduce impacts on health and social services.

The WHO describes active ageing as

“the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age”.

Active ageing is about every individual being able to

“realize their potential for physical, social and mental well being 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 assistance”.

The WHO Framework for Active Ageing is based on three pillars: promoting good health and health care, enabling participation in all spheres of life, and promoting social, financial and physical security. The Active Ageing Framework suggests that a policy response to population ageing will require a coordinated, inter-sectoral, whole-of-government (national, state and local) and whole-of-community response. Despite variations in the rate of ageing around the world, the Framework also recognises that local planning for future population ageing must commence now. Early planning will enable opportunities presented by population ageing, such as growth of employment and volunteering opportunities, to be realised.

3.2 Australian Government context

The Australian Government policy perspective on ageing promotes a whole-of-government view of ageing and the changing needs of Australians as they age. This view includes consideration of superannuation and retirement income support, workforce participation, housing, social inclusion, and life long education, as well as service provision from the health and aged care sectors. In the face of the ageing of the population, the maintenance of the health of older people is a principal policy objective.

The Australian Government’s National Strategy for an Ageing Australia aims to “deliver the best outcomes for all Australians regardless of age”, envisaged as a joint responsibility for all levels of government, communities and individuals¹³. The National Strategy for an Ageing Australia is framed around four priority areas:

- Independence and self provision (includes employment for mature age workers)
- Attitudes, lifestyles and community support
- Healthy ageing
- World class care

The following principles underpin the National Strategy:

- The ageing of the Australian population is a significant common element to be addressed by governments, business and the community.
- All Australians, regardless of age, should have access to appropriate employment, training, learning, housing, transport, cultural and recreational opportunities and care services that are appropriate to their diverse needs, to enable them to optimise their quality of life over their entire lifespan.

¹³ Department of Health and Ageing, 2000, National Strategy for an Ageing Australia, Commonwealth of Australia

- Opportunities should exist for Australians to make a life-long contribution to society and the economy.
- Both public and private contributions are required to meet the needs and aspirations of an older Australia.
- Public programs should supplement rather than supplant the role of individuals, their families and communities.
- A strong evidence base should inform the policy responses to population ageing.
- The delivery of services and pensions for our ageing population is affordable so long as we have a well managed economy and growth.

The Ministerial Conference on Ageing, reporting to the Council of Australian Government (COAG) is a forum where the three levels of government work together to facilitate a 'consistent approach in active ageing, housing for older people, integration of community aged care services, and local government planning arrangements'¹⁴. One of the early actions of the Rudd Government was to appoint an Ambassador for Ageing, Noeline Brown. The role of the Ambassador is to ensure that older Australians have a strong voice, a direct link into Government and a person to promote positive and active ageing. This includes encouraging people to remain healthy and to avoid preventable illness, as a key requirement for continuing social and economic participation.

The Australian Government is also currently undertaking a variety of reviews of health and aged care programs and other initiatives with implications for older people. Significant funding and policy reform is anticipated in the next few years.

3.3 State Government Context

The NSW Government is a major funder of health services and community aged care services, in partnership with the Australian Government. The Department of Human Services, Ageing Disability and Home Care (ADHC) supports older people in a number of ways including:

- providing support at home with personal care, domestic support, meals and home maintenance, through the Home and Community Care (HACC) Program
- providing respite
- providing community transport
- promoting active ageing through Seniors Week and the Seniors Card
- raising community awareness about issues that affect older people.

The Department also auspices:

- The Office for Ageing, which provides strategic advice to the Director-General and Minister for Ageing on the implications of the ageing of the population and the needs of older people in the community, and works with other agencies to build awareness and promote appropriate policies and services for older people.
- The NSW Ministerial Advisory Committee on Ageing, which is appointed to advise the Minister for Ageing on issues affecting older people in NSW and on the impact of the ageing of the population.

¹⁴ Department of Health and Ageing 2008, p.3



NSW Health is also a major provider of services to older people, including community nursing, allied health services, geriatric medicine, Aged Care Assessment, and health education programs (such as falls prevention and nutrition), as well as hospital services. Many other NSW Government service delivery responsibilities also have direct implications for an ageing community, such as public transport, police, housing and further education. Increasingly, healthy ageing is being seen as a whole of government responsibility and policies such as healthy ageing and housing for older Australians are being generated by a range of relevant departments. In accordance with the whole-of-government approach State Government planning and housing policies are increasingly recognising the implications of an ageing population and the need for housing and new residential development to address the needs of older people.

The NSW Healthy Ageing Framework 1998-2003 has not been updated; in 2007 however the NSW Government engaged in statewide consultations which drew together experts in the field of ageing policy to partake in Ageing 2030: A Roundtable on Population Ageing. The key themes of the consultations focused on prevention and early intervention (including ageing well and maintaining independence), social and economic engagement and liveable homes and communities.

The NSW State Plan also reflects this integrated whole of government approach. Within the State Plan, older Australians are not considered as a separate sub-group, but benefit from State Plan targets that relate to hospital admission, chronic disease prevention, participation, volunteering, public transport and affordable housing.

3.4 Local Government Context

Local government has an important role to play in a range of areas that will be affected by population ageing in the coming decades. The Australian Department of Health and Ageing has identified that local government is strategically placed between the community and other

levels of government to be a key stakeholder and important partner in addressing population ageing, due to its:

- Intimate knowledge of the local community and identification of the diversity of older people;
- Provision of infrastructure and facilitation of developments that ensure that the physical, social and economic environment of the local community is conducive to the overall well-being of older people;
- Planning and provision of programs and services that are flexible and locally appropriate to the needs of older people;
- Community participation in decision-making and development of community networks;
- Advocacy on behalf of the local community with other government and non-government organisations.

Challenges to local government due to the impact of an ageing population include significant demands on revenue. The Productivity Commission in its recent study, *Economic Implications of an Ageing Australia*,¹⁵ found that:

- With many councils being direct providers of aged care services (unlike Penrith City Council), local councils are more likely to face budgetary pressures from population ageing than from traditional activities such as road and infrastructure provision and maintenance.
- The main demands are expected to be health and aged care, home support services, subsidy of medical services, community transport and a range of cultural and recreational services.
- Local government will face significant demands on revenue due to a decrease in rate revenue as pensioner households increase.
- Local government will face increasing pressure due to the suitability of infrastructure, much of which may have been constructed without particular consideration for an ageing population.

¹⁵ Productivity Commission 2005,

The Australian Local Government Association has been working to provide tools and information to support local government to respond to the challenge of population ageing and has recently completed a research project and action plan around priorities for the Association to support councils in meeting the challenges of population ageing. One of the outcomes of this work is a set of online planning tools to assist local government plan for ageing in their community. The Association notes that councils are responding to population ageing in different ways and there is no 'one size fits all' approach to planning for an ageing community. What is common is the need to ensure a partnership approach involving all tiers of government, the community and private sector, in order for cost shifting to local government to be avoided.

The NSW Local Government and Shires Association stresses that it is not necessarily a council's role to provide or even fund a number of services or facilities, but rather to plan and identify ways to ensure that all aspects of older people's services are provided. A number of areas for local government action have been identified by the LGSA, including:

- nurturing positive attitudes towards older people
- encouraging cultural diversity
- providing equal access and opportunities
- encouraging ongoing community participation and opportunities to participate in recreation and leisure within the broader community, and
- encouraging lifelong learning

The LGSA aims to increase awareness across local government and monitor the effectiveness of their policies and programs. Councils are expected by the LGSA to take responsibility for the planning of suitable services and facilities including transport, adaptable and affordable housing. A planning tool, the Resource for Ageing Population Planning (RAPP) has been developed to assist councils begin to plan for their ageing populations by providing information on general population trends and projections, to encourage councils to examine their own communities and identify what role they can play in the implementation of policies¹⁶.

3.5 Penrith Council policies and plans

Penrith Council uses an integrated strategic planning process that involves Councillors, communities and residents as well as Council staff. This identifies priorities for the City as well as for Council.

3.5.1 Penrith Council's Strategic Planning

The Strategic Plan 2005-2009 is Penrith City Council's principal policy statement. It is considered to be the 'big picture' document that looks at a long term view for the City over four years and beyond. It provides the basis upon which all other Council plans and policies are built and implemented.

Within the Strategic Plan are a number of stated goals that acknowledge the importance of planning for an ageing population in Penrith. The most pertinent of these are:

- Issue 7: The social wellbeing and health of individuals and communities within the City has been maintained and improved. Within this goal, specific achievements are identified including putting strategies in place to respond to the social and health needs of the community. Also, increasing access for communities that face barriers to using social services and facilities, and providing housing that addresses the supply, choice, affordability, social and economic diversity and workplace location needs of the community.
- Issue 13: Established neighbourhoods are revitalised and people have pride in the community in which they live. Specific achievements include implementing a program of renewal for selected neighbourhoods that contributes to a sense of community identity and cohesiveness.
- Issue 14: Quality outcomes are achieved in the redevelopment of our established suburbs and town centres. A specific achievement is that Council's planning approach to the provision of housing across the City addresses the supply, choice, affordability, economic, social diversity and workplace location needs of the community.

¹⁶ NSW LGSA website at www.lgsa.org.au

- Issue 15: New areas provide well planned, serviced and cohesive living and working environments. Specific achievements are identified as part of this goal including providing cohesive communities based on sustainable, safe and satisfying living and working environments, and the development of new release areas to deliver jobs and match incoming workforce participant numbers. Additionally, the provision of diverse housing opportunities that are consistent with emerging community needs and facilitate the development of diverse neighbourhoods.
- Issue 24: An accessible public transport and regional road network. Within this goal is the objective to implement public transport facilities and services that reasonably match the travel needs of the community for access to employment centres, education facilities and other activity centres.

Penrith Council is currently finalising its Strategic Plan for the period 2009+. This plan will continue to provide a sound framework for the development and implementation of the Ageing Strategy.

The 2009-13 Delivery Program includes a task to implement the actions in the Planning for an Ageing Community Strategy 2010+.

3.5.2 Council Management Plan 2008-2009

The Council Management Plan 2008-09 is the fourth implementation plan of the Strategic Plan 2005-09. This is the second year of the new organising framework for the management plan which aligns all Council's programs with the Penrith Principles for Sustainable Cities. These principles identify key priorities for achieving social, economic and environmental sustainability.

3.5.3 United Nations Environment Program (UNEP) Principles for Sustainable Cities

In 2003, Penrith City Council adopted the United Nations Environment Program's Melbourne Principles for Sustainable Cities to achieve sustainability. These principles are 'intended as a guide for cities in diverse nations around the world to develop sustainable solutions that are relevant to their own particular circumstances'¹⁷. These Sustainability Principles address social, economic and environmental sustainability issues and provide a link to the critical actions and key tasks for services and projects (the day to day work of Council and its officers).

Penrith Council has adapted these principles and they are now the Penrith Principles for a Sustainable City. These principles have been integrated into the Planning for an Ageing Community Strategy 2010+ and action plan documented from Section 5 onwards in this report.

3.5.4 Other planning policies

Penrith City Council has a variety of policies and plans that have implications for an ageing community. Key policies and plans include:

- Penrith Social Planning Framework
- draft Penrith Local Environmental Plan 2008 and draft Penrith Development Control Plan 2008
- Sustainable Penrith Action Plan
- Sustainability Blueprint for Urban Release Areas
- Penrith Integrated Transport and Land Use Strategy
- Penrith Residential Strategy
- Penrith City Centre Strategy
- St Marys Town Centre Strategy
- Penrith Valley Community Safety Plan
- Draft Penrith Inclusion Plan – People with Disability 2009-2013

Preparing for population ageing requires a coordinated approach, based on the rights of older people, acknowledging population diversity and promoting active lifestyles and active engagement in society and the economy throughout the life course. This coordinated approach requires a clear understanding of the roles and responsibilities of commonwealth, state and local government and partnerships with the private and non-government sector and the wider community.

¹⁵ Penrith City Council, 2008a

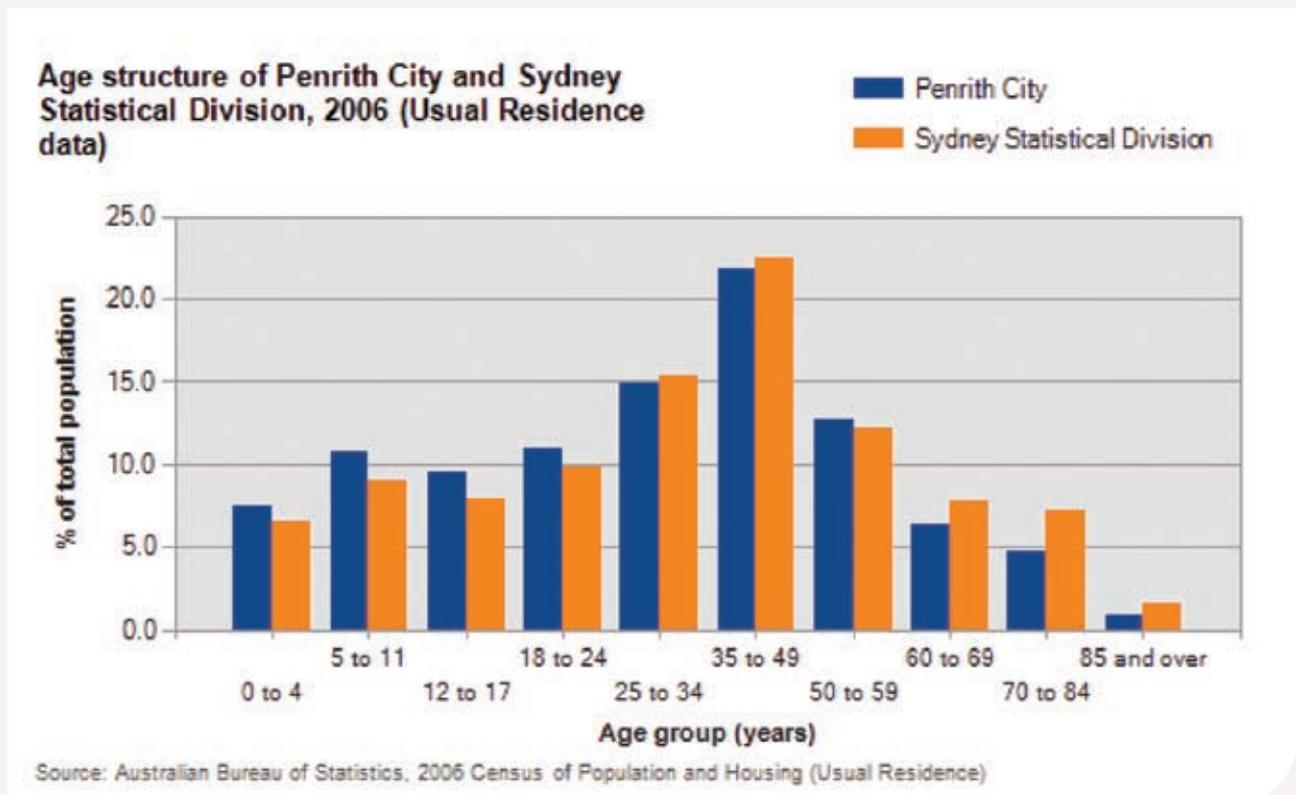
The population of Penrith is currently relatively young compared to the rest of NSW and Australia. However, it is projected to age rapidly, with the numbers of people aged over 65 set to almost double by 2021. The older population in Penrith in coming years is likely to be diverse, and to be predominantly concentrated in the established residential areas of Penrith. This chapter examines how the Penrith population will change over the coming decades.

4.1 Population Characteristics

4.1.1 Penrith's current population

In 2006, there were 172,142 people living in the City of Penrith. Of these, 14,103 people, or 8.2% of the population, was aged 65 and over. By contrast, 13.3% of the national population and 13.8% of the population of NSW were over 65 years of age¹⁸.

Compared to the rest of Sydney, Penrith has a relatively young population, with a greater proportion of people aged under 24 years, and a smaller proportion of people aged over 60 years. More than a quarter (27.7%) of the Penrith's population is made up of people under 18 and only 11.9% of people in the Penrith City are aged over 60 years old. By comparison, in the Sydney Statistical Division there is a smaller proportion of the population aged under 18 (23.6%) and a larger proportion aged over 60 years (16.7%). The difference in age structure between the Penrith and Sydney can be seen below in Graph A.

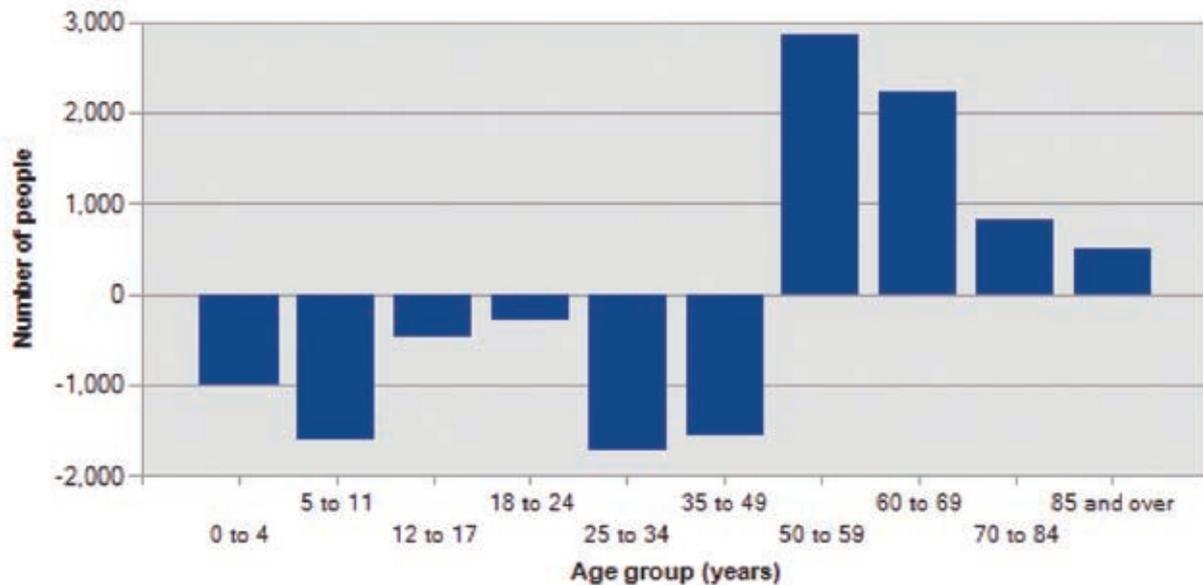


¹⁸ Australian Bureau of Statistics 2006, *Census of Population and Housing*, Canberra

Although Penrith currently has a relatively young population, its age structure is changing rapidly. Graph B shows the change in population in Penrith City between 2001 and 2006, in five year age groups. It shows that in the five year interval there was a decrease in population for every age group under the age of 50 years, while a marked increase in each cohort aged 50 years and over. This indicates in stark terms that while Penrith is relatively young at present, it is ageing rapidly. This rapid ageing can be attributed to a number of factors including:

- the ageing of the large number of “baby boomers” born in the 1950’s and 1960’s who settled in the newer suburbs of Penrith through the 1970’s – 1980’s,
- the out migration of younger people, the children of those who are ageing themselves, who are establishing new households elsewhere, and
- generally declining fertility, along with improving longevity and reduced mortality, associated with improvements in health care.

Change in age structure of Penrith City, 2001 to 2006 (Usual Residence data)



Source: Australian Bureau of Statistics, 2006 and 2001 Census of Population and Housing (Usual Residence)

4.1.2 The future population of Penrith

The population of Penrith is projected to increase by an average annual growth rate of 0.53 % per annum, to a total of 210,484 people by the year 2021¹⁹. average annual growth rate of 0.53 % per annum, to a total of 210,484 people by the year 2021. This is primarily due to the development of several large urban release areas such as Penrith Lakes, Delfin Lendlease St Marys and the Caddens Road development. Growth is also expected to occur in existing centres such as Penrith, St Marys and Kingswood.

The increase in total population, combined with the ageing of the population, means that both the number and proportion of older people are likely to increase markedly in this time, as shown below in Table 1 (Penrith City Council 2008).

This table shows that by 2021, the population of people aged 65+ in Penrith will have grown to about 24,128 people, representing 11.4% of the Penrith population. Department of Health and Ageing forecasts suggest that by 2026, there will be an estimated 32,960 people over 65 living in Penrith, representing 16.6% of the total Penrith population.

Table 1: Penrith population: age structure and projected age structure: 2006, 2015 and 2021

| Age Structure | 2006 number | 2006% | 2015 number | 2015% | 2021 number | 2021% |
|-------------------|---------------|--------------|---------------|--------------|---------------|--------------|
| 55 to 59 years | 10,396 | 5.9 | 10,846 | 5.8 | 11,400 | 5.4 |
| 60 to 64 years | 6,646 | 3.8 | 8,962 | 4.8 | 9,757 | 4.6 |
| 65 to 69 years | 4,509 | 2.6 | 7,137 | 3.8 | 7,763 | 3.7 |
| 70 to 74 years | 3,360 | 1.9 | 4,769 | 2.5 | 6,511 | 3.1 |
| 75 to 79 years | 2,740 | 1.6 | 3,457 | 1.8 | 4,485 | 2.1 |
| 80 to 84 years | 2,080 | 1.2 | 2,428 | 1.3 | 3,026 | 1.4 |
| 85 years and over | 1,414 | 0.8 | 1,985 | 1.1 | 2,343 | 1.1 |
| TOTAL | 31,145 | 17.8% | 39,584 | 21.1% | 45,285 | 21.4% |

¹⁹ Penrith City Council, 2008b

Table 2 below summarises the projected growth in older age cohorts between 2006 and 2021 as a percentage of the total Penrith population.

Table 2: Percentage of total Penrith population in older age cohorts, 2006 and 2021

| | 2006 | 2021 |
|-----------------------------------|-------|-------|
| Penrith residents aged 55+ | 17.8% | 21.4% |
| Penrith residents aged 65+ | 8.2% | 11.4% |
| Penrith residents aged 75+ | 3.6% | 4.6% |
| Penrith residents aged 85+ | 0.8% | 1.1% |

This table shows that by 2021, 21.4% of Penrith's population is expected to be aged 55 years and over, in contrast to 17.8% in 2006. Those aged 65+ will increase from 8.2% of the population in 2006 to 11.4% in 2021. Of particular significance will be the increase in the numbers of those in the oldest age cohorts, those aged 85+. Although the proportion in this cohort will be small, any increase here has significant implications for aged care services. Many of these people will have cognitive impairment including dementia, an estimated 85% will require some form of assistance in managing their lives and between a third and a half are likely to need residential aged care.

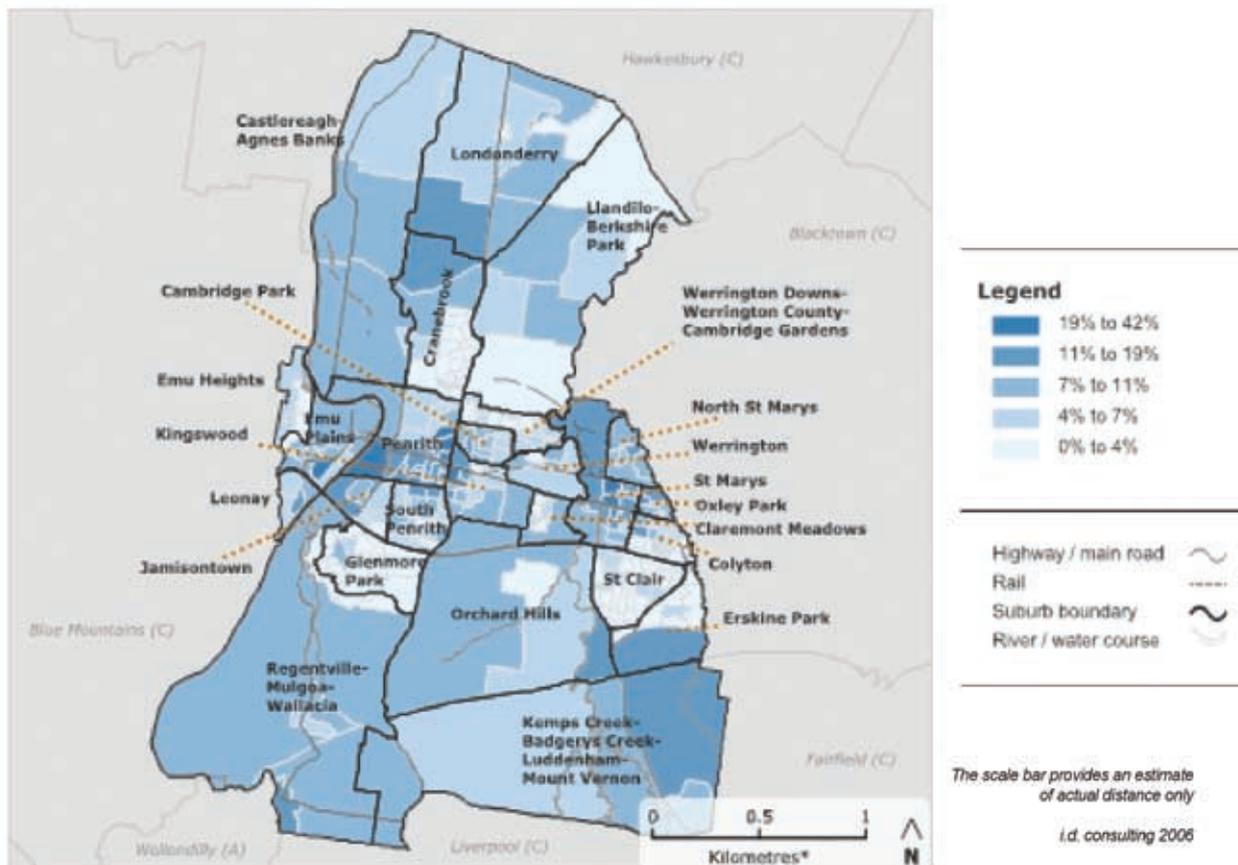


4.2 The distribution of older people in Penrith

The City of Penrith comprises a number of older established suburbs, new urban release areas and rural areas. The older population of Penrith is currently concentrated in the established suburbs, and this trend is expected to continue to 2021 and beyond. The distribution of older people in Penrith at the 2006 Census is shown in the figure below.

Penrith City - Persons aged 65 years and over

(As a proportion of total population)



4.2.1 Established residential areas of Penrith

The older population of Penrith is currently predominantly concentrated in sixteen established suburbs, which together accommodate over 77.6% of residents aged over 60 years. The suburbs with the largest proportion of their residents aged over 60 years are Penrith (21.9% of all residents are aged 60+), St Marys (18.9% of all residents are aged 60+) and Emu Plains (18.4% of all residents are aged 60+). An analysis of changes in the age structure for these areas between 2001 and 2006 reveals that many of these suburbs are experiencing noticeable net loss of young people in their 20's, as adult children leave home and move elsewhere ²⁰.

Table 3 shows the six suburbs with the largest numbers (as opposed to proportions) of people aged over 60 years. These are Penrith, South Penrith, St Clair, St Marys, Emu Plains and Kingswood.

Table 3: Penrith 2006: distribution of older people in the six most populous suburbs

| Suburb | 60-69 | | 70-84 | | 85+ | |
|----------------------|--------------|------------------------------------|--------------|------------------------------------|------------|----------------------------------|
| | Number | % of total 60-69 yr old in Penrith | Number | % of total 70-84 yr old in Penrith | Number | % of total 85+ yr old in Penrith |
| Penrith | 889 | 8.0 | 1,234 | 15.1 | 380 | 26.4 |
| South Penrith | 1,067 | 9.6 | 569 | 6.9 | 99 | 6.9 |
| St Clair | 534 | 6.6 | 177 | 12.3 | 60 | 4.2 |
| St Marys | 823 | 7.4 | 907 | 11.1 | 157 | 11.4 |
| Emu Plains | 752 | 6.8 | 534 | 6.6 | 177 | 12.3 |
| Kingswood | 559 | 5.1 | 561 | 6.9 | 103 | 7.2 |
| TOTALS | 4,624 | 43.5% | 5,785 | 58.9% | 976 | 68.4% |

This table shows that these six suburbs together accommodate 43.5% of all Penrith residents aged 60-69 years, 58.9% of all Penrith residents aged 70-84 years, and 68.4% of all Penrith residents aged 85+ years.

Population projections indicate that the concentration of the ageing population in the more established residential areas of Penrith is likely to continue. In 2021, the suburbs with the largest share of people aged over 60 years will be Penrith (accommodating 11% of total people aged over 60 years in Penrith LGA) and St Clair (accommodating 9% of total people aged over 60 years in Penrith LGA) ²¹. It is also worth noting that Penrith and Emu Plains have significant numbers of aged accommodation dwellings in large retirement villages including hostels and nursing homes.

²⁰ Penrith City Council, 2008b

²¹ Penrith City Council, 2008b

4.2.2 Rural areas of Penrith

By contrast, the outlying older villages and rural areas of Penrith currently house a very small proportion of older people. Together, these 14 suburbs accommodate only 3,299 people, or 15.9% of the people aged over 60 years in Penrith. This is because the overall populations of these areas are relatively sparse.

However, while numbers of older people are small in the rural areas, they nevertheless make up a relatively high proportion of their settlement populations. For example, Kemps Creek has 19.7 % of its population aged over 60 years (407 people), while Orchard Hills has 15.2 % of its population aged 60+ (298 people). The most noticeable demographic characteristic of the rural areas is the ageing of their populations, and this ageing trend is expected to continue. Cranebrook is expected to have the largest population aged over 60 years amongst the rural areas (although this is a mixed suburb with both urban and rural components).

4.2.3 Urban release areas of Penrith

The urban release areas currently have a predominance of families with children and very small proportions of older people . In 2006, the new residential areas of Glenmore Park and Claremont Meadows together housed only 1,338 people aged over 60 years. This comprised only 6.5% of the total population aged 60+ years living in the City of Penrith.

Table 4: Penrith 2006: distribution of older people in Claremont Meadows and Glenmore Park

| Suburb | 60-69 | | 70-84 | | 85+ | |
|--------------------------|------------|-------------------------------------|------------|-------------------------------------|-----------|----------------|
| | Number | % of total 60-69 yr olds in Penrith | Number | % of total 70-84 yr olds in Penrith | Number | % of total 85+ |
| Claremont Meadows | 113 | 1.0 | 61 | 0.7 | 9 | 0.6 |
| Glenmore Park | 708 | 6.4 | 413 | 5.0 | 34 | 2.3 |
| TOTAL | 821 | 7.4 | 474 | 5.7 | 43 | 2.9 |

In coming years the proposed new release areas of Penrith Lakes, St Marys and the Caddens Rd development are expected to show marked population growth, predominantly with families with children. The slightly older release areas of Claremont Meadows and Glenmore Park, however, are expected to see dramatic jumps in the proportion of people aged over 60 years as a result of ageing and out-migration of younger people. In 2021 it is predicted that Glenmore Park will accommodate over 8% of Penrith residents aged 60+. However, compared to the rest of the City, these suburbs will retain a relatively younger age structure overall.

4.3 Household and dwelling types

The household type and housing tenure characteristics of the Penrith population aged 65+ at the 2006 Census are shown in the tables below.

Table 5: Household type of residents aged 65+

| Household type | Number of households | % of all households of residents aged 65+ |
|---|----------------------|---|
| Couple with no children | 2,976 | 36.9 |
| Couple with children at home | 776 | 9.7 |
| Single parent family with children at home | 840 | 10.5 |
| Other family | 124 | 1.5 |
| Lone person | 3,205 | 39.8 |
| Group household | 135 | 1.6 |
| TOTAL | 8,056 | 100 |

Of particular note from this table:

- Nearly 40% of households where the reference person is aged 65 years or more are lone person households. This rises to 50% in households where the reference person is aged 75 years or more
- About 20% of households where the reference person is aged 65 years or more still have children living at home (including both couple and single parent households)
- Nearly 37% of households where the reference person is aged 65 years or more are couple only households.



Table 6 summarises the housing tenure of households of residents aged 65 years and older.

Table 6: *Housing tenure of residents aged 65+*

| Tenure type | Number of households | % of all households of residents aged 65+ |
|---------------------------|----------------------|---|
| Fully owned | 5,511 | 68.4 |
| Being purchased | 542 | 6.7 |
| Private rental | 689 | 8.6 |
| Public rental | 622 | 7.7 |
| Rented: not stated | 39 | 0.5 |
| Other tenure | 183 | 2.3 |
| Tenure not stated | 470 | 5.8 |
| TOTAL | 8,056 | 100 |

Of particular note from this table:

- Over two thirds of households where the reference person is aged 65 years or more fully own their home, and only 6.7% are still in the process of paying a mortgage
- 8.6% of households are in private rental accommodation, while a further 7.7% are in public housing.

The style of housing in Penrith City is currently predominantly separate houses (85.3%), with relatively few semi-detached town houses (8.1%) and units (6%). Data regarding the type of housing occupied by households where the reference person is aged 65 or more is not available; however, given the dominance of separate housing in the Penrith market, it is likely that the vast majority of older person households occupy detached dwellings.

Increases in overall population size will mean there will be demand for increases across all housing types in coming years. However, as the age structure changes it is expected that household structure will change, and this will give rise to demand for changing housing types. The greatest changes in household type over the next 15 years will be a dramatic increase in the proportion of lone person households and a corresponding decrease in the proportion of couple families with children. By 2021 it is estimated that the proportion of couple families with children will drop by nearly 5% from 42% in 2006. Lone person households on the other hand will increase by 5% from 18.7% in 2006 to 23.7% in 2021 ²².

²² Penrith City Council, 2008b

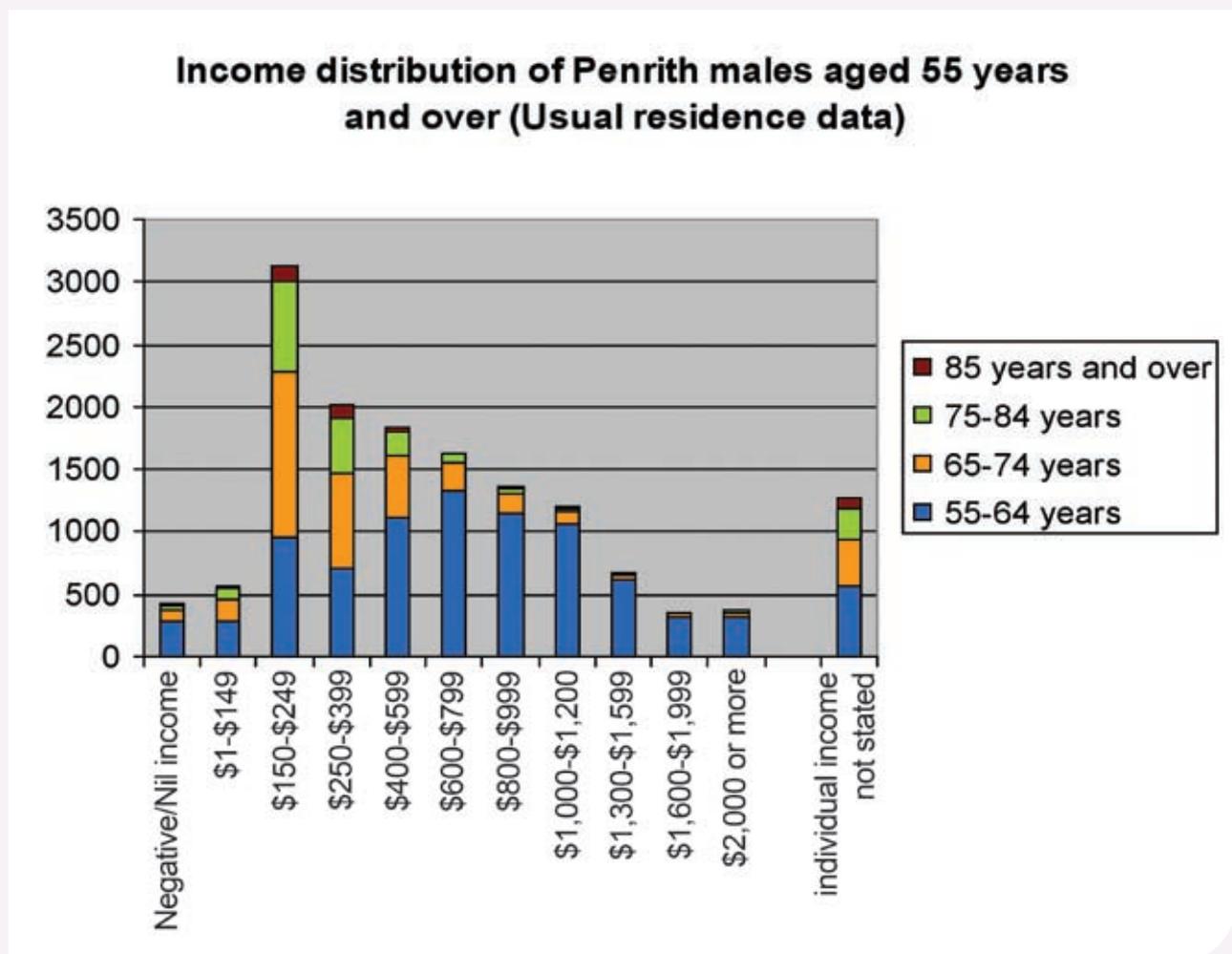
4.4 Income

In 2006, the Penrith population had an average weekly individual income of \$517, slightly less than the average weekly individual income of the Sydney Statistical Division (\$518) ²³.

Income is not distributed evenly across the age groups, or between the sexes, in Penrith (see graphs D and E below). Most people aged over 65 years have average weekly individual incomes in the range of \$150 to \$399. However, females over 55 years have less income than males in the same age group in Penrith. This slightly higher income among men is concentrated among those men in the 55 to 64 year age group, with very few males aged over 65 years earning an average weekly individual income over \$600.

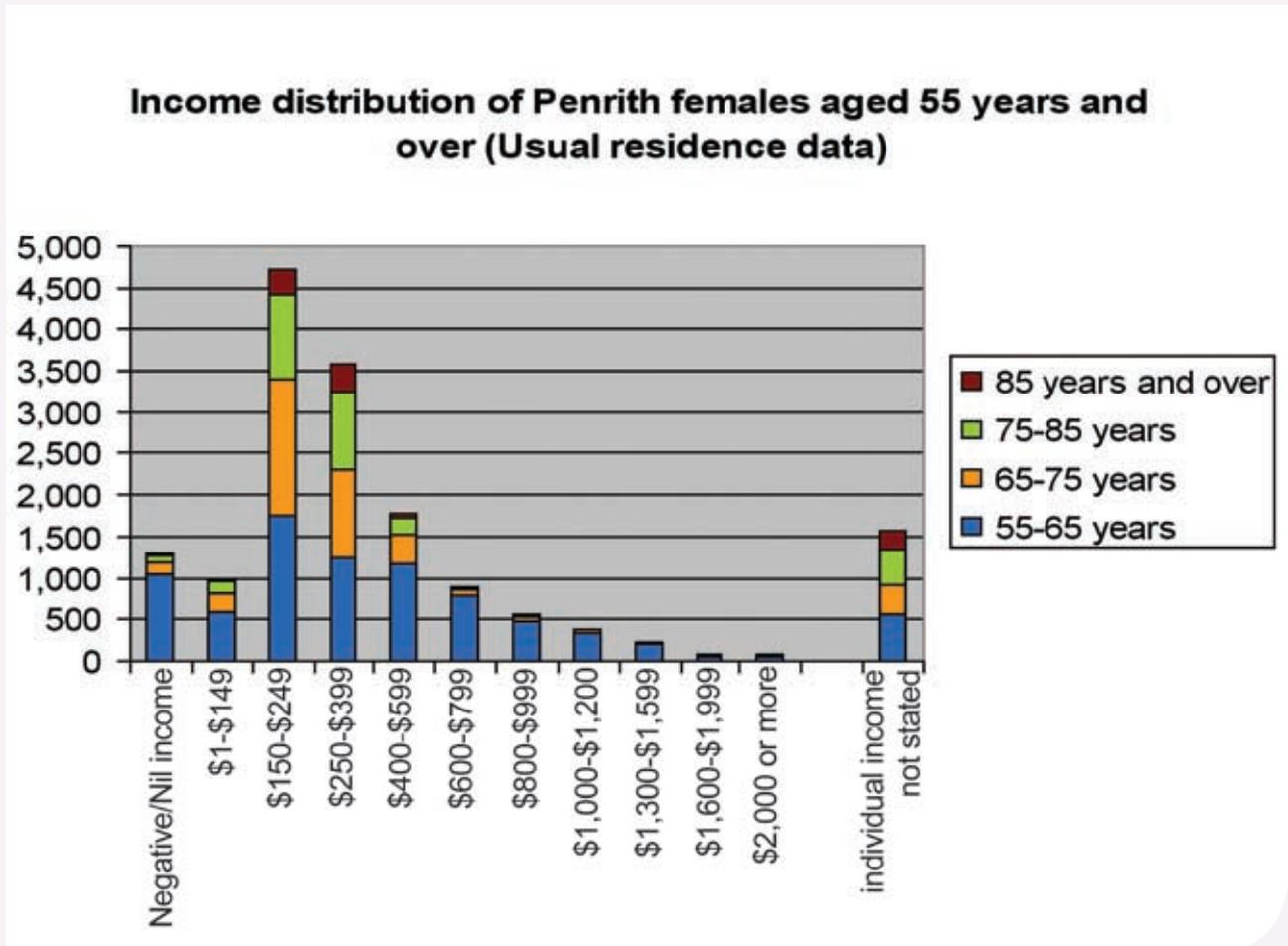
By comparison, most females aged over 55 years in Penrith earn under \$400 per week, and even in the 55 to 64 year age group relatively few females have average individual weekly incomes above this figure. This is particularly important as there is a greater proportion of females than males in the older age groups and female longevity is greater than that for men: in Penrith women make up 52% of population aged over 55 years, 60% of the population aged 75-84 years and 71% of the population aged 85 years and over. In other words, statistically, older people in Penrith are relatively poor and women who are poor in early older age will remain so as they age.

Graph D: income distribution of Penrith males 55 years and over (source, ABS Census, 2006)



²³ ABS, 2006

Graph E: income distribution of Penrith females 55 years and over (source, ABS Census, 2006)

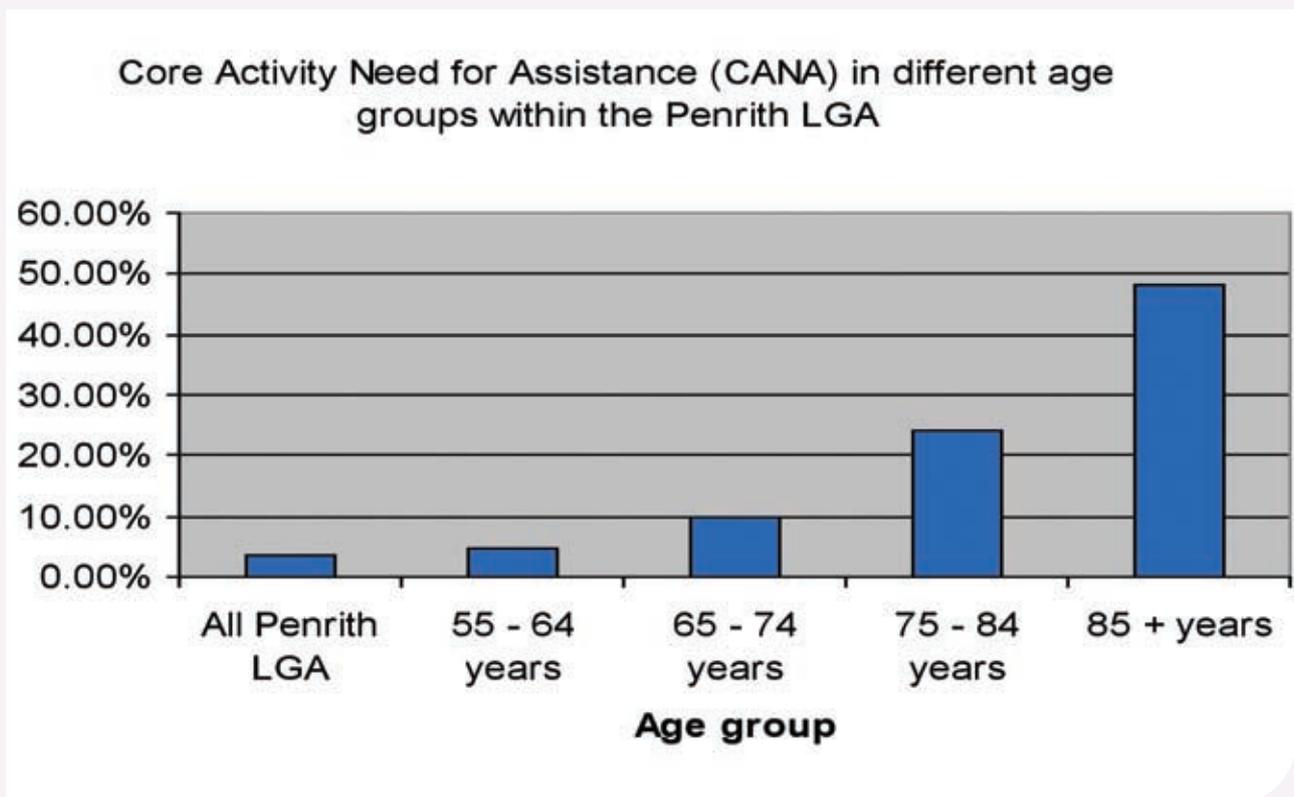


4.5 Core Activity Need for Assistance

'Core Activity Need for Assistance' (CANAs) refers to people with profound or severe impairment, defined as those people needing help or assistance in one or more of the three core activity areas of self-care, mobility and communication because of a disability, long term health condition, or old age. As can be seen in Graph F, the likelihood a person will have a core activity need for assistance increases as people age.

Although in 2006 only 4% of the overall population of Penrith had a core activity need for assistance, this figure increased to 5% of those 55-64 years, 10% of those 65-74 years, 24% of those 75 – 84 years and 48% of those aged 85 years and over (Australian Bureau of Statistics, 2006).

Graph F: Core Activity Need for Assistance in Penrith



Dementia is one of the most significant types of disability likely to be experienced by older people. Dementia affects 2% of people 65-74 years, 6% of people 75-84 years and 22% of people 85 years and over ²⁴.

While rates of disability and cognitive impairment are significant, it is important to remember that at the state level, two out of three people aged 65 years and over rate their health as good to excellent ²⁵.

²⁴ Australian Institute of Health and Welfare 2007, p. 56

²⁵ Department of Ageing, *Disability and Home Care* 2004, p. 20

4.6 Cultural and linguistic diversity

Aboriginal and Torres Strait islander people

There were 3,478 Aboriginal and Torres Strait islander people in Penrith at the time of the 2006 Census, making up 2% of the population. The ATSI population of Penrith is proportionally younger than the whole population of Penrith. Only 1.9 % (67 people) of Penrith's ATSI population are aged over 65 years, making older Aboriginal and Torres Strait Islander people a very small group of the population in Penrith.

People born overseas

Penrith is predominantly made up of people born in Australia (73.8 %). However, small but significant numbers are overseas born, and do not speak English as their first language.

Of those born in non-English speaking countries, the most common countries of origin of Penrith City residents at the 2006 Census are the Philippines (7.4% of those born outside Australia), India (4.5%), Malta (3.8%) and Italy (2.9%). Following English, the most common languages spoken at home in Penrith in 2006 were Arabic, Italian, Maltese and Tagalog. There are also increasing numbers of people born in Iraq moving to Penrith. More recently there are also increasing numbers of Sudanese people settling in Penrith City. People escaping situations of violence or oppression in their own countries can have experiences of trauma and torture in their past and such experiences add further complexity to ageing in place and provision of community care.

4.7 Implications for Council

The changing demographic profile of Penrith and growing numbers of older people will require Council to consider:

- Planning for a greater diversity of housing options to accommodate smaller households, particularly increased numbers of older people living alone, in established, urban release and rural areas
- Planning to adapt existing infrastructure to better suit the needs of increasing numbers of older people, and to accommodate the lifestyle needs of older people in areas that have been developed around the lifestyle needs of families and children
- Increasing access to community services and facilities to support older people to remain healthy, active and independent, as different residential areas experience ageing trends differently. This will be a particular challenge in relatively sparsely populated and less well serviced areas
- The affordability of services within Penrith, given the financial vulnerability of large numbers of residents with low incomes. More financially disadvantaged residents are likely to face increased hardship as they age, and to have fewer choices for community participation and entertainment opportunities, community care services or purchasing appropriate residential aged care.
- Different groups of older people, including people from non English speaking backgrounds, recently arrived refugees, older Aboriginal and Torres Strait Islander people, people with a pre-existing disability, people with a mental illness, and those facing financial hardship, will each require targeted strategies to support their ageing.

The older population in Penrith, in coming years, is likely to be diverse, and concentrated in different areas of the LGA. The diversity of age, health status, need and lifestyle preference amongst older people points to the need for a diversity of approaches and strategies to support positive ageing, rather than relying on simple stereotypes of frailty and dependence.

Penrith Council will need to work closely with other levels of government and community partners to respond effectively to these challenges

5.1 Issue overview

Penrith provides a wide range of opportunities for recreation, leisure and social activity, both organised and unstructured. There is a large variety of sporting and social clubs and organisations which provide recreational and social activities, and a wide range of hobby and special interest groups in Penrith. Informal outdoor recreational activities such as walking that make use of open space areas, the natural environment and waterways are also popular with older people.

To date, there has been significant focus within Penrith on meeting the social and recreational needs of families, children and young people. However, the location and type of social and leisure facilities and services that Council invests in may not be appropriate or sustainable in the future. As the population ages, there will need to be greater focus on adult social and recreation activities and the particular interests and preferences of older people.

It has been recognised that there are social and economic benefits for all if older people are actively encouraged to participate in social, leisure and cultural activities. Since older people are known to be at more risk of social isolation than any other group within the community, their involvement in social and leisure activities across Penrith is considered to be crucial.

5.2 What the literature says

Social, cultural and physical participation is a critical ingredient in healthy ageing and longevity. The capacity to participate in recreation, special interest and leisure pursuits has been identified as an important factor in developing and maintaining an older person's health and quality of life ²⁶. Older people are active participants in social, sporting, recreation, leisure, travel and cultural pursuits. Older people spend 41% of their waking hours on leisure and recreation, compared with 29% for the rest of the population ²⁷. Approximately 80% of older people attend social activities and 65% go to cultural events and venues such as cinema, libraries and museums ²⁸.

Studies have shown that encouraging physical activity can have a number of benefits for a person's emotional and physical wellbeing. As the World Health Organisation Health Principles identify, appropriate physical activity can be especially beneficial to older people, reducing the risk of developing degenerative illness and disease and reducing the risk of falls. Enjoying social contact and mental stimulation are also important factors in maintaining health, well-being and quality of life for older people.

The primary source of social contact for older people is their family. Older people are just as likely as others to have face-to-face contact with family and friends outside their homes, but less likely to visit with friends. Apart from this face-to-face contact, most older people (96%) rely on fixed telephones to maintain contact with people outside their homes and are less likely to use mobile phones or the internet to maintain relationships ²⁹.

Attendance at cultural, leisure and community events declines with increasing age (from 87% for people aged 55-64 years to 59% for people aged 85 or over in 2006). Participation in sport and recreational physical activity also declines with age (from 59% for people aged 55-64 years to only 25% of people aged 85 years or over). Participation in social, community and civic group activities also declines with increasing age ³⁰.

A number of factors may lead to social exclusion or create barriers to older people's participation in social and leisure activities. Chief among these are low income, poor health, poor transport and lack of family support nearby.

²⁶ Australian Institute of Health and Welfare, 2007 p.90

²⁷ Australian Institute of Health and Welfare, 2007 p.91

²⁸ ABS and DADHC 2004 Older People NSW 2004 p 17.

²⁹ Australian Institute of Health and Welfare, 2007 p.90.

³⁰ Australian Institute of Health and Welfare, 2007 p.91.

5.3 Council's role

Council has a central role in providing sporting and recreational facilities and to a lesser extent, leisure services, programs and activities. It also plays a critical role in providing social and cultural facilities. Most of these are mainstream facilities provided for the whole community, and include spaces for performing arts and visual arts, libraries, neighbourhood community centres, swimming pools, parks and a hydrotherapy pool. The Penrith Council Home Library Service is available to visit housebound patrons who are unable to visit the library due to ill health, frailty or disability. Council also provides two Senior Citizens Centres where social and leisure activities are organised to promote healthy and independent lifestyles for older people in Penrith.

In addition to the direct provision of facilities, Council supports a wide variety of local community-based interest groups involving older people, through both financial contributions and the provision of subsidised accommodation in Council buildings.

5.4 What older people said in consultations

- Overall, it was felt that a wide range of opportunities to participate in social, leisure and cultural activities exists in the Penrith area. However, requirements were identified for a variety of additional activities and leisure services, particularly with a cultural focus, to meet the needs of particular interest groups or geographical communities.
- A number of barriers to participation were identified, including:
 - Lack of information about what is available. Many older people are not aware of the opportunities that exist and do not know where to seek such information
 - Poor public transport means that many older people cannot access the leisure and social opportunities that do exist, particularly if they do not own a car or drive
 - Problems arising from distance and physical isolation in rural and outlying areas
 - Poor accessibility of some facilities, associated with lack of convenient wheelchair access and lifts and insufficient parking nearby for seniors and people with a disability
 - The affordability of social and leisure opportunities, especially for those on low incomes. Participants suggested that Council could reconsider its charges for services and facilities for older people as high costs discourage participation
 - Under-funding and lack of resources for some community facilities, and particularly a lack of paid staff to support older peoples' groups
 - Safety concerns, especially for going out at night, and lack of a partner and unwillingness to participate alone.
 - Language barriers for older people who do not speak English.
- Council's libraries are well used and highly valued by older people, and could provide a key source of information about activities and services available for older people. The importance of the libraries in providing access to computers for older people and support in how to use them was also stressed.
- While the Senior Citizens Centres are currently well utilised, some people felt that the activities offered do not meet the needs of the new generation of older people, and identified the name as a deterrent to accessing the centre as they don't identify as 'seniors'.

5.5 Future issues and challenges

As Penrith's population ages, it will be important to ensure that opportunities for leisure, recreation and social interaction keep pace with population growth and the diverse and changing needs and preferences of the ageing population. A key challenge for Council will be to ensure that its social and cultural facilities are accessible and available to older people. This may require:

- enhancing accessibility of public buildings, increasing wheelchair access in public spaces, installing hoists in swimming pools, enhancing hearing assistance in public buildings
- ensuring that local neighbourhood community facilities that have traditionally had a focus on activities for children and parents can also provide social and leisure activities for older people
- adapting the resources and programs of libraries, Senior Citizens Centres and other cultural facilities to respond to the needs and interests of an older population, and one that will have different lifestyle expectations and preferences to the current population of older people.

Council will also need to address many of the barriers to participation identified by older people, particularly those associated with lack of awareness and information about what is available, and the affordability of leisure options.

Particular issues will arise in addressing the social and cultural needs of the increasing numbers of older people from non English-speaking backgrounds. Isolation, loneliness and need for company with other native language speakers are key issues. Isolation is exacerbated by poor public transport, making contact between distant individuals difficult. Inability to join in with mainstream activities such as Senior Citizens Centres or day-care because English is not a first language or cultural inappropriateness of services is a problem. This creates some need for ethno-specific social opportunities. There is currently only a small number of organisations in Penrith catering for cultural and linguistic diversity.

The potential for innovative and attractive recreation and leisure programs for older residents will be an important consideration. Industries involved in the provision of travel, recreation and leisure for the Penrith community will need to consider the impact of an ageing population on the types of services and activities sought. There will be increasing demand on Council resources to support the establishment of local interest and activity groups.

“We need more places for older people to meet and gather - it would be good to have a hall in the centre with activities, as our old people like sitting around and talking”

Aboriginal focus group



5.6 The strategy

| Penrith Principal 2 - Achieve Long-term Economic and Social Security | | | | |
|---|--|--|--------------------------------|------------------------------|
| Objective 2 (i) We have access to what we need | | | | |
| Priority Theme 1: Participation in social, leisure and cultural activities | | | | |
| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
| 1.1 Encourage provision of a broad range of social, leisure and cultural activities and programs that reflect the diverse interests and preferences of older people | 1.1.1 Consult with existing groups and the wider population of older people to investigate the needs, interests, preferences of different groups of older people for leisure activities, to identify areas of unmet need and to ensure activities and programs provided by Council match with changing needs | Service | RM | S |
| | 1.1.2 Explore opportunities for partnerships with other organisations providing innovative recreational, leisure and social opportunities for older people to address gaps in service delivery, particularly for older people from diverse cultural backgrounds and those in rural and outlying parts of Penrith | External partnership | CCDM | M |
| | 1.1.3 Continue support to community based interest groups and organisations providing activities for older people, though community grants and provision of affordable accommodation in Council buildings | Service | CCDM | C |
| | 1.1.4 Explore opportunities within the current staff establishment to create the position of an Active Lifestyles/Sport Development Officer to maximise use of existing Council facilities for all sections of the population, including older people | Service | RM | S |
| 1.2 Ensure Council's social and cultural facilities and libraries are able to address the diverse and changing needs of older people into the future | 1.2.1 Continue to provide and advocate for community infrastructure that gives older people affordable and accessible meeting and activity spaces, including in new community centres and libraries, and redevelopment of any existing facilities | Service | CCDM | C |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|--|--|-------------------------------------|------------------------|----------------------|
| 1.2 Ensure Council's social and cultural facilities and libraries are able to address the diverse and changing needs of older people into the future | 1.2.2 Improve equitable access to Council's neighbourhood facilities by older people through the implementation of a transparent and equitable management framework including fees and charges. | Service | PDASM | S |
| | 1.2.3 Improve community infrastructure in areas with a high proportion of older people and local facilities that are not accessible | Service | CCDM | S |
| | 1.2.4 Together with seniors and other organisations for older people, review the role and 'naming' of Council's Senior Citizens Centres and identify future options for the long term viability of centres that will address the changing needs of the older population. | Service | CCDM | M |
| | 1.2.5 As the population of older people grows, adjust library collections according to the profile of borrowers and expand services for housebound residents | Service | LSM | L |
| | 1.2.6 Consider the needs of older people in the design and development of new library facilities that have a strong technology focus | Service | LSM | M |
| 1.3 Improve access to information about activities and programs available for older people | 1.3.1 Develop and promote the role of Council libraries as the key source of information about what is available for older people | Service | LSM | S |
| | 1.3.2 Explore ways to improve Council's website as a conduit for information for older people about local activities and programs, for instance through a seniors web page | Service | CCDM | S |
| | 1.3.3 Provide information about activities and programs in Council newsletters, through a regular column "What's on for Seniors" | Service | CCDM | S |
| | 1.3.4 Provide information about activities and services available for older people during Seniors Week | External partnership | CCDM | C |

6.1 Issue overview

In consultations with older people, health is usually identified as their most important single issue of concern. Older people want appropriate, affordable and accessible health care and support services which promote their independence and well-being and which enable them to continue to live in their own home in the community for as long as possible. They want information and support to enable them to lead healthy lifestyles and they want confidence that health care and support services will be available to them if the need arises. They also require access to residential care services if they can no longer remain at home.

Promoting good health throughout life and preventing illness are vital to encouraging independence and continuing workforce and community participation. People who take action throughout their lives on healthy and active ageing have the best chance of reducing their need to access health and aged care services in later life.

The funding of health and aged care services is primarily a responsibility of Commonwealth and State governments, with services delivered through a range of programs by a variety of government, non-government, religious, charitable and private sector agencies.

“Getting information about health care and services in Penrith is difficult. We share information: when we find something out we tell each other.”

Dutch Focus Group

Primary and community health care services are delivered by the Sydney West Area Health Service through five Community Health Centres across the Penrith area. The St Clair centre includes an aged day care facility and the Governor Philip campus incorporates the Lemongrove (formerly Kingswood) centre including the specialist Aged, Chronic and Complex care team as well as a Nursing Home, an 80 bed high level care facility. The Aged Care and Assessment Teams (ACAT) undertake a comprehensive assessment to assist older people and their carers determine what kind of support will best meet their needs.

In Penrith there are two key issues in relation to the provision of services:

- the extent to which services are available to older people within Penrith who need them now and in the future
- the extent to which the complex system of services is integrated to provide co-ordinated care and support to older people.

While not generally a direct provider of health care and support services, local government can play an important role in encouraging healthy lifestyles and access to health care and support services by:

- Assisting with the planning and co-ordination of aged care services
- Advocating for Penrith to receive a fair share of funding for health and aged care services
- Supporting aged care services through provision of affordable and well-located accommodation
- Supporting delivery of health promotion and health education initiatives to promote healthy lifestyles.

6.2 What the literature says

With people living longer, the policy focus is on supporting people to remain healthy and independent for as long as possible in order to enjoy an active and healthy older age. Common lifestyle risk factors such as smoking, excessive drinking, lack of physical exercise and obesity account for about one third of the total burden of disease. Many chronic diseases can be prevented or minimised by better health management³¹. A consistent national effort to reduce lifestyle health risk factors and promote good health and healthy ageing is a high priority of the Australian Government.

Old age is not necessarily a time of dependence on aged care services. About 80% of people aged 70 years and over live independently without help from care service³². Less than one out of five older people require any assistance with the household tasks or activities of daily living that are central to aged care³³. However, the need for some form of assistance with tasks of daily living increases markedly as people age, particularly for people aged over 85 years³⁴.

Studies confirm that informal support from family carers is the primary source of assistance for those older people who live with substantial disabilities in the community. About 77% have some form of informal support and 53% receive formal support from community service³⁵. In 2003, 690,000 older Australians were receiving assistance from one or more informal carers and in most cases the main carer was living with the person receiving the care³⁶. Many carers are themselves older people. A significant number of older people are carers of adult children with long term disabilities or of even older parents. What is represented in these figures is the massive voluntary effort of partners and other family members of older people in providing the care necessary to enable them to continue to live at home, or to age in place.

However, the availability of informal carers is expected to decline over coming decades. While the demand for informal carers is expected to rise by 160% between 2001 and 2031, the supply is expected to increase by less than 60%³⁷. Such a shortfall in carers could undermine the sustainability of community care and increase the demand for residential care. In acknowledging the importance of informal carers, the Australian Government has recently announced an inquiry to investigate how carers can be better supported.

A key trend in recent years has been expansion of community care and funding policy, and the associated restricted growth of residential care. This reflects the predominant desire of most older people to “age in place” and remain living at home for as long as possible. Older people commonly experience access problems to both residential and community care. While funding has increased over the past decade, so too has demand for services, as a result of growing numbers of older people and increased expectations of services.

Community services, primarily delivered through the Home and Community Care (HACC) Program, are the mainstay of aged care for most frail older people. It is estimated that approximately one third of frail older people use the HACC program, predominantly community nursing and home help. The median age of HACC service users is 78 for women and 75 for men³⁸. Public provision of HACC services is capped and there are long waiting lists for many community based services.

³¹ Department of Health and Ageing 2008b p3.

³² Department of Health and Ageing 2000 *National Strategy for an Ageing Australia* p. 18

³³ Kendig, H and Duckett, S 2006 p52

³⁴ Productivity Commission 2008b XV11

³⁵ Kendig, H and Duckett, S 2006 p53

³⁶ Australian Institute of Health and Welfare, 2007 p.105.

³⁷ Productivity commission 2008b

³⁸ Kendig, H and Duckett, S 2006 p 18

³⁹ Kendig, H and Duckett, S 2006 p52

⁴⁰ Productivity Commission 2008 b, p.7

Only a minority of the people who reach old age are ever likely to need residential care. About 92% of older people live in private households and only 7% (one in thirteen) in some form of supported care accommodation³⁹. However, the proportions in residential care are especially high for those who are widows and never-married men, reflecting the important influence of informal care. Overall, less than half of the people entering old age are projected to live in a nursing home or hostel at some point in their lives. The average age of entry to residential care is 82 years for both men and women⁴⁰. These figures demonstrate that ageing in place, at home, is the clear preference of older people until impairment or care need indicates residential care is required

Funding for residential care is allocated by the Federal Government according to planning ratios which provide for 112 places per 1,000 people aged 70+. This allows for 44 places for low care, 44 places for high care and 28 community care packages. These targets are intended to be planning and resource allocation tools, with new resources to be directed as a priority to areas below the national benchmarks, and are not necessarily measures of need. According to the Department of Health and Ageing, the Nepean Region currently has 2,248 residential places now, against the ratio of 1,995 places. Despite being above the planning ratio by 253 places, there is still a perception of need for more residential places in Penrith. In terms of community care places, the Nepean Region currently has 469 places, against a ratio of 567 places, indicating a need for an additional 98 places. Projections based on the ratios by the Department of Health and Ageing indicate that by 2021 the Nepean Region will require an additional 1,140 residential places and an additional 495 community care places to meet the needs of the growing population of older people. The lead times for construction of new facilities can be extensive, and it is estimated that a new residential aged care facility takes on average five years from first idea to opening the facility.

Further issues relate to the cultural appropriateness and equity of access to support services for Aboriginal and Torres Strait Islander people and people from culturally diverse backgrounds, particularly those who do not speak English. While the numbers in these two groups are relatively small, the needs of these groups are often unmet because few services are available.

6.3 Council's role

Council employs a full-time Community Development Officer - Older People who works with residents, service providers, community organisations and government departments in responding to the needs of frail aged and healthy older people in Penrith. The position is partly funded by the Department of Human Services Ageing, Disability and Home Care (ADHC) to provide leadership and support to Home and Community Care service providers and service users throughout Penrith. The position also identifies emerging issues, advocates for the Penrith area and supports the training of staff in aged care services. The position plays a key role in supporting ADHC in identifying service gaps and needs and planning for local service enhancements.

Council is a provider of residential care accommodation for older people, through its ownership of the Lemongrove Gardens Retirement Village and Hostel. The Lemongrove Gardens Retirement Village was established by Penrith Council in 1975 to provide a secure and settled environment for people aged 55 and over. There are 30 individual self-care units in the village which also includes common areas, laundry facilities, carpools, storage and a Community Hall. Council also employs an off-site Village Coordinator to administer the facility and support the residents. In addition Council also owns the adjacent Lemongrove Gardens Hostel, a 46 place hostel that is operated by Anglican Retirement Villages under a lease/management agreement. The Hostel and Retirement Village facilities were the subject of a review in 2004 which recommended that Council should work towards moving away from a direct aged accommodation role.

Council has been supportive of a number of community aged care services through the provision of subsidised office accommodation in its Community Connections building within the Penrith City Centre, and in other facilities within the Penrith Valley Cultural Precinct in St Marys.

Council is working with the Department of Human Services, Ageing Disability and Home Care (ADHC) with regard to improving the planning and funding of aged care services in the City, in part through the provision of service data and planning information. Council is supporting and linking with ADHC initiatives for integrated planning and monitoring of services and has an advocacy role in relation to the funding of aged services in Penrith.

6.4 What older people and services said in consultations

- Older people felt strongly that “prevention is better than cure” and that they needed to be supported in staying healthy and active. They require access to information on how to stay healthy and prevent illnesses, how to recognise the early signs of illnesses and how to manage different illnesses. They also want access to healthy lifestyle programs and activities, such as gentle exercise, hydrotherapy and nutritious eating. Gentle exercise opportunities include both group activities such as dancing and fitness classes, and individual activities such as walking and swimming. The ability to walk to local shops and services was also seen as an important contributor to a healthy lifestyle.
- Participants had a variety of suggestions for supporting older people to maintain good nutrition. These included:
 - providing better training and support to meals-on-wheels services
 - the provision of culturally appropriate food through meals on wheels
 - greater utilisation of the commercial kitchen in the Penrith Senior Citizens Centre
 - volunteer deliveries of fresh fruit and vegetables to older people.
- While it was acknowledged that some services existed to support carers, participants felt that more needed to be done to support this group, especially in terms of providing respite for carers and information about available services.
- Older people felt that many people did not access the aged care facilities, services and supports available in Penrith because they were unaware of their existence. A need for better access to information about services was a theme of the consultations, and it was felt that Council could play a key role in addressing this need.

- Some participants felt there was a lack of awareness or acknowledgement of mental health issues in older people and carers, especially depression. It was felt that structures needed to be in place to prevent and respond to mental health issues in older people, including early intervention.
- Service providers identified the value of Council’s Aged Services officer in assisting greater coordination and information sharing between services. This role was vacant at the time of the consultations and it was requested that the role be filled as soon as possible.

6.5 Future issues and challenges

The ageing of the population and especially the substantial increase in those aged 85 years and over will lead to significant increases in demand for aged care services. Changing patterns of disease amongst older people are also expected to increase the proportion of frail old people with more complex care needs. There will be increased demand for both community care and residential care services.

Ensuring Penrith receives an equitable share of funding for services

Resources for health and aged care services (both community and residential) are allocated by government programs through population needs based formulae, such that funding for services should increase in proportion to increases in the number of older people living in Penrith. However, this is dependent on the total pool of funding available for health and aged care increasing as the total population increases. To date, government funding has not always kept pace with population growth and demographic change. Moreover, there is commonly a time lag between population increases, funding increases to a given area, and the delivery of services on the ground.

Given the population forecasts for Penrith, it is critical that funding for services for older people be increased in response to the ageing of the population and that Penrith receive an equitable share of available funding in proportion to its population size.

Penrith's identified status as a Regional City in the NSW Government's Metropolitan Strategy (2005) will support the development of higher order services and facilities with the capacity to meet the needs of the broader regional community. This may include the establishment of government and private services providing a range of programs to the growing number of older people across the Nepean and wider region.

Supporting the delivery of aged care and support services

In this context of funding deficiencies, it will be important that aged care services are supported in Penrith through the provision of well located and affordable accommodation, and through on-going support from Council's Aged Services Officer to assist with the planning and co-ordination of aged care services.

Meeting the needs of people from different cultural backgrounds

As the number of older people from Aboriginal and Torres Strait Islander and non English speaking backgrounds increases in Penrith over the next decade, it will be important that health and aged care services can adapt to provide culturally appropriate services, based on an appreciation of the needs of these populations. Council's Aged Services Officer will play a role in supporting the development of targeted training to services providers to ensure access and equity outcomes.

Supporting carers of older people

Government policies to encourage older people to remain living at home in the community for as long as possible are putting strain on their carers, particularly in a context of the lack of adequate supply of home support services. There will be an increasing need for programs and initiatives to support carers of older people, through respite programs, and information and counselling services.

Establishing new residential aged care facilities

As discussed above, the Nepean Region will require an additional 1,140 residential care places by 2021 if the national planning ratios are to be achieved. In terms of establishing new residential aged care facilities, a key challenge is finding land which is both well located and affordable for non-government service providers. As the price of land increases in established areas, it is becoming more difficult for organisations to develop new residential aged care facilities, which often require large sites and very substantial capital infrastructure. Such facilities ideally need to be well located with regard to access to public transport, shops and medical services, a need not usually met by building on the urban fringe where land is cheaper but access relatively poorer. There is an immediate need to increase places in Penrith through building new facilities. Given the long lead times, there is a need for this planning to commence immediately.

The Department of Health and Ageing is keen to progress a dialogue and a new partnership with Penrith City Council to consider how the supply of residential aged care places in Penrith might be enhanced, particularly through land use and development approval strategies.

6.6 The strategy

| Penrith Principal 2 - Achieve Long-term Economic and Social Security | | | | |
|---|--|-------------------------------------|------------------------|----------------------|
| Objective 2 (ii) We plan responsibly for now and the future | | | | |
| Priority Theme 2: Encourage healthy lifestyles and access to health care and support services | | | | |
| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
| 2.1 Encourage the provision of health education and prevention programs that promote safe and healthy lifestyles for older people | 2.1.1 Utilise existing partnerships with the Sydney West Area Health Service and the Nepean Division of General Practice to deliver health education and prevention programs for older people, such as falls prevention and safety in the home | External partnership | EHM | C |
| | 2.1.2 Utilise existing partnerships with ADHC to explore areas of unmet need and issues associated with the health and well-being of HACC target groups, for instance the delivery of food services for socially isolated older people | External partnership | CCDM | S |
| | 2.1.3 Identify and pursue funding opportunities from Commonwealth and State Government programs focused on active ageing | External partnership | CCDM | C |
| | 2.1.4 Identify and disseminate information about health education and prevention initiatives for older people | Service | EHM | S |
| | 2.1.5 Encourage initiatives that promote good nutrition and access to local fresh food for older people for instance through Council policies on farm-gate sales, farmers markets and community gardens | Service | EHM | C |
| 2.2 Develop strategies that improve support for carers | 2.2.1 Work with ADHC on support and information initiatives for carers | External partnership | CCDM | S |
| | 2.2.2 Celebrate the contributions of carers through the Carers Award in Council's annual Wall of Achievement awards | Service | EDCMM | C |
| | 2.2.3 Enhance access to information about support services for carers | External partnership | CCDM | M |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|---|--|-------------------------------------|------------------------|----------------------|
| 2.3 Support the planning, delivery and co-ordination of residential and community aged care services in Penrith | 2.3.1 Create the full-time position of Community Development Officer - Older People to provide information and support to HACC service providers and to ensure the care and support needs of older people are identified, addressed and advocated for through collaborative planning with aged care services (achieved in February 2009 through additional grant funding from ADHC). | Service | CCDM | C |
| | 2.3.2 Continue to advocate to Commonwealth and State agencies to ensure Penrith receives an equitable share of funding resources for aged care and support services. | Service | CCDM | C |
| | 2.3.3 Continue to support community aged care services through provision of affordable and well located office accommodation, in the short term in Council's Community Connections building. | Service | CCDM | C |
| | 2.3.4 In the longer term, partner with the State and Commonwealth Governments to provide purpose built affordable accommodation for aged care services and organisations in the Penrith City Centre | External partnership | CCDM | M |
| | 2.3.5 Work with ADHC and SWAHS to enhance the provision of community facilities for centre based aged care and respite activities | External partnership | CCDM | M |
| | 2.3.6 Encourage establishment of new residential care facilities within Penrith through assistance to providers in identifying suitable sites and through working with the Department of Health and Ageing to address emerging shortfalls | Service | DSM | C |
| | 2.3.7 Consider Council's future role in relation to the on-going operation of the Lemongrove Retirement Village and Hostel | Service | CCDM | S |
| 2.4 Enhance access to information about available services and supports | 2.4.1 Explore partnerships with the Commonwealth-funded Nepean Carelink Centre to promote greater awareness amongst older people of its role as a key source of information and referral about aged care services | External partnership | CCDM | S |
| | 2.4.2 Consider ways to better promote access to the Council Community Services Directory to reach socially isolated older people | Service | CCDM | S |
| | 2.4.3 Work with service providers and ADHC to promote greater awareness of aged services among culturally and linguistically diverse and Aboriginal and Torres Strait Islander communities | External partnership | CCDM | S |

SUPPORTING OLDER PEOPLE TO AGE IN PLACE

7.1 Issue overview

The overwhelming majority of older people want to remain living in their own home as they age. Many will want to remain living in their family home, and may require support to make their existing home appropriate. Others may wish to move to housing better suited to their needs as they age. While some are likely to retire to the coast or country, the majority are likely to want to remain in their existing community, with familiar surroundings and family and friends close by.

Housing development within Penrith has traditionally been targeted at families with children, with a predominance of low-density, single-family homes. An ageing population requires a greater diversity of housing types, in order to provide greater choice to older people and ensure that their housing needs can be met within the communities where they live, with familiar shops and services and established social networks. The paucity of higher density housing in Penrith located with ready access to shops, services and public transport will become a key issue as the number of older people living in Penrith increases.

Meeting the housing needs of older people requires recognition of the diversity of need and number of sub-markets within the aged housing sector. These include:

- providing smaller, more compact and more manageable dwellings for healthy active older people who wish to downsize from a large family home. A home with less maintenance and a smaller garden is often a key requirement. These needs may be met by well-designed small lot dwellings, townhouses and units which are also suitable for all people and so are not restricted to a particular age group
- some older people may wish to move to a better serviced area or to be closer to their children, but not necessarily a smaller townhouse or apartment. Planning for diversity of need, rather than stereotyping older persons' housing need, will be important, particularly in the new release areas
- providing accessible housing – self-care housing designed to be accessible for people with mobility limitations, with a focus on proximity to services and transport, manageable pathway gradients, entrances and access to essential rooms (ie no steps)
- providing adaptable housing – self-care housing which can be adapted to meet the needs of older people and people with a disability as their needs change, but which is not age restricted. This usually means providing extra space, wider doorways and designing bathrooms and kitchens to accommodate people in a wheelchair.
- providing self-care housing designed specifically to meet the needs of older people able to live independently in the community, with occupation restricted to a particular age group (e.g. housing built under the State Environment Planning Policy (SEPP) Seniors Living for people aged 55 and over or people with a disability). Such housing is integrated into the community, not segregated in separate villages
- retirement housing - self-care housing designed specifically to meet the needs of older people and which may also include arrangements for the provision of support services. Such housing is usually integrated within the community but clustered together for ease of delivering care services and facilitating social contact amongst residents
- retirement villages that are usually large age-segregated complexes, often with a tiered range of accommodation offering different levels of care, or leisure lifestyle facilities

- residential aged care facilities (hostels and nursing homes) with Commonwealth funded places for older people who can no longer live independently in the community and require on-going care
- some older people live with their children and this points to a need for housing designed for extended family households, including granny flats or other self-contained areas.

Safety in and around the home is a further issue of concern for older people. Removing hazards that may cause accidents, implementing falls prevention programs and ensuring homes are fitted with smoke detectors are ways in which the safety of older people in their homes can be enhanced. Fitting homes with security devices or personal alarm systems can also make older people feel more secure in their homes.

7.2 What the literature says

The clear preference of older people is to remain living at home independently for as long as is possible. This preference for living at home, and being supported by community care services rather than previous patterns of earlier entry to residential aged care, is referred to as “ageing in place”. Providing a range of community care services to meet the support needs of older people is critical in enabling ageing in place⁴¹.

Staying home can be central to older people’s sense of identity and to their independence. While the family home can be difficult to maintain, older people can be remarkably inventive in adapting and using their home environments to render them supportive and to overcome physical limitations. If they are no longer able to remain independent, they overwhelmingly prefer to remain at home with outside help rather than to move to a relative’s household or to supported accommodation⁴².

“What we need is local, affordable and diverse housing options”

Resident, Penrith workshop

Research has found that about 92% of older Australians live in a private dwelling with family members, non-family groups or alone. However, the proportion of people living in accommodation with care on site increases with age, from 1% of those aged 65-74 years to 31% for those over 85 years, or 39% for those over 85 years who live alone⁴³. This indicates that the challenges of ageing in place increase as an older person ages, and with increasing impairment of a spouse or indeed the death of a spouse.

Women living alone are the predominant group receiving community care services. By contrast, more older men live with family than live alone. This demonstrates that ageing in place is more likely to involve solitary living for women than it is for men, once care needs increase to a point where HACC services are required⁴⁴.

Research also points to the importance of housing suited to the needs of older people being located close to shops, services and public transport, to support older people to remain active and independent and to avoid social isolation.

Rates of home ownership amongst older people are high. In 2006, at the national level 82% of households with people aged 65+ owned their home with or without mortgage and 15% rented⁴⁵. About 75% of older people today are outright home owners, with low housing costs that permit a reasonable standard of living even if they have government benefits as their principal source of income. Their home is a substantial asset that can be used to buy into aged care facilities if required. In contrast, most older private housing tenants experience high housing costs and low incomes, and lack choices to move as their accommodation needs change.

⁴¹ Australian Institute of Health and Welfare, 2007 p.105

⁴² Kendig, H and Duckett, S 2006. p 49

⁴³ Australian Institute of Health and Welfare, 2007 p.144

⁴⁴ Australian Institute of Health and Welfare, 2007 p.123

⁴⁵ Productivity Commission 2008b p 11

There are currently over 60,000 older people living in public and community housing across the State, and this number is expected to rise considerably over the next two decades. Older tenants have said that they want housing that is safe, secure, affordable, allows them to keep their links with family and friends, and also easily access the services they need. Housing NSW currently provides a range of housing services for older people:

- priority for public housing
- construction of purpose built housing for older people. Properties may include hobless showers and grab rails, lever taps and enlarged light switches, with a proportion of units having fully modified kitchens and bathrooms.
- modification of existing housing for older people as their needs change
- partnerships with organisations to provide support services to help older people remain in their current home.

The NSW Government recently announced new initiatives to address the housing needs of older people in NSW. Under the *New Directions in Social Housing for Older People*, the amount of public housing available to older people will increase by 10% to around 30,000 dwellings.



7.3 Council's role

Council has an ongoing role in developing and implementing planning and housing policies to ensure that housing choices reflect the needs of the local community. In its key role as regulator of the built environment, Council has substantial influence over the nature and location of housing provided within Penrith.

Council has recently prepared a city-wide Local Environmental Plan (LEP), which recognises the need to provide a mix of housing types and densities, and to provide for appropriately located and adequate amounts of housing for seniors and people with a disability. This has required revision of the Penrith Residential Strategy to consider the location of higher density residential zones, located in and around centres with good access to services and facilities.

Council also influences the supply of housing for older people through its planning policies and Residential Development Control Plans which prescribe minimum standards for adaptable and accessible housing. The current policies provide that the provision of adaptable and accessible housing should be delivered as a proportion of all housing types in locations that have the capacity to accommodate such development. In addition, Council's approach to meeting the requirements of the State Environmental Planning Policy (SEPP) Seniors Living and the Affordable Housing SEPP will also impact on the location and nature of possible housing for older people.

Council's Sustainability Blueprint for Urban Release areas (2005) requires that housing in new release areas should contain a greater mix of housing types to ensure that housing choice is available to respond to the needs of a changing community. Providing housing in new release areas suited to the needs of smaller or single person households or extended households (accommodating several generations) is important in enabling older people to live with or close to their families for support. In some cases older people may also provide valued family support functions such as care for grandchildren.

7.4 What older people said in consultations

- Many participants felt development in Penrith needed to include more housing that is:
 - single storey and adaptable to the changing needs of older people with no stairs, wide doorways, bathrooms that could accommodate wheelchairs and small gardens
 - close to the city centre and neighbourhood shops and services
 - affordable
 - available to rent as well as to buy
- Particular needs were identified for
 - More retirement village options in Penrith
 - Assistance for renters who need to modify their homes to incorporate mobility aids such as ramps or railings
 - Options such as granny flats so older people can live independently with their families
- Access to support in the home, and support with home maintenance and other tasks for those living in their own homes, was seen by many as a preferred model of care and support because it helped people to maintain their independence.
- A particular need was identified for help with home and garden maintenance, especially for older people who do not qualify for HACC program services. Difficulties with home and garden maintenance can lead to safety problems for older people, and are one of the most common reasons why older people move house.

7.5 Future issues and challenges

Future issues and challenges to ensure suitable housing for the future ageing population is available within Penrith include:

Ensuring housing choice for older people

Older people will require access to a range of housing forms and sizes to cater for their diversity of lifestyle choices and support requirements. Such diversity is currently limited in Penrith, and will need to be enhanced if Penrith is to retain its population of older residents.

Providing suitable housing in appropriate locations

Ways to encourage housing choice for older people close to public transport, retail and service centres will need to be considered. Consideration will also need to be given to ways of meeting the housing needs of older people living in the rural areas of Penrith, where the proportion of older residents is already quite high, but services and transport are limited.

Housing adaptability and accessibility

Increasing the supply of housing which is accessible and adaptable for older people with a disability will be an important priority in enabling older people to remain living in the community and to age in place, rather than having to move to institutional care as their needs change.

Affordability of housing

Affordability of housing will be a key issue, given the income profile of older people on fixed incomes in Penrith. Moving house is generally an expensive exercise and the capacity for older people to move to more suitable housing may be constrained by affordability. Downsizing does not necessarily mean cheaper housing or funds left over for income support in retirement. A new apartment close to the city centre within Penrith may well cost more than could be realised from sale of an old, poorly maintained detached home in a fringe location, and may be unaffordable for many older people. Similarly the affordability of residential care, both in terms of entry costs and on-going fees, is an issue of concern for many older people and their families. Access to affordable housing will become an increasing priority as the population of Penrith ages.

Supporting older people to remain at home

Increasing numbers of older people will require support to remain in their own homes, through home modification and maintenance and home safety/security devices. There will be increasing demand for these types of services. While frail aged people may receive these types of services through the HACC Program, there are many older people who are not yet eligible for HACC services, but who still have difficulty with undertaking home maintenance activities themselves, or with organising assistance to do so. While Council does not have a direct role in providing home maintenance services, it should support the work of ADHC and local service organisations in addressing this gap.

6.6 The strategy

| Penrith Principal 2 - Achieve Long-term Economic and Social Security | | | | |
|---|--|-------------------------------------|------------------------|----------------------|
| Objective 2 (ii) We plan responsibly for now and the future | | | | |
| Priority Theme 3: Supporting older people to “age in place” | | | | |
| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
| 3.1 Increase the supply of housing suited to the needs of older people in appropriate locations | 3.1.1 Through the Penrith Urban Study and Strategy, increase the potential for housing forms suited to the needs of older people in identified centres and other locations that provide ready access to shops, services and public transport | Service | LPM | C |
| | 3.1.2 Encourage the provision of lifecycle housing that can adapt to meet the changing needs of home occupiers across the lifespan, through universal design principles | Service | LPM | C |
| | 3.1.3 Encourage provision of accessible and adaptable housing by setting requirements in Council’s DCP for a proportion of dwellings in multi-unit housing developments to be accessible / adaptable | Service | LPM | S |
| | 3.1.4 Review Council policies with regard to permitting secondary dwellings / granny flats to enable older people to live close to their children | Service | DSM | M |
| | 3.1.5 In Penrith’s new urban release areas, continue to encourage a range of housing types and adaptable housing designs to meet changing household requirements, and encourage the provision of retirement housing and aged care facilities | Service | EPM | C |
| | 3.1.6 Explore ways to promote the provision of affordable housing for vulnerable groups of older people in Penrith, including Aboriginal and Torres Strait Islander residents | External partnership | CCDM | S |
| | 3.1.7 Explore strategies to increase the availability of land in Penrith for aged housing projects, with a particular focus on sites where Council or the State Government are significant land owners | External partnership | LPM | C |
| | 3.1.8 Through developer forums, provide information for builders and developers to raise awareness of housing design for an ageing population | Service | DSM | M |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|--|--|-------------------------------------|------------------------|----------------------|
| 3.2 Support older people to remain living independently in their own homes by working with other agencies to enhance home maintenance and home safety services | 3.2.1 Work with ADHC and local organisations to develop information initiatives to promote sustainable gardens and garden maintenance for older people | External partnership | CCDM | M |
| | 3.2.2 In partnership with local organisations, explore ways in which the home and garden maintenance needs of older people who are not within the HACC target group might be met | External partnership | CCDM | M |
| | 3.2.3 Develop partnerships with other organisations to explore and promote home safety audits to identify domestic safety hazards for older residents | External partnership | PDASM | C |
| | 3.2.4 Work with SWAHS, other agencies and Police to disseminate information and education material on safety around the home | External partnership | PDASM | C |

C=current, s=short-term (1-2 years), m=medium-term (2-5 years) and l=long-term (5-10 years)



CREATING LOCAL COMMUNITIES THAT SUPPORT ACTIVE AGEING

8.1 Issue overview

The physical environment of neighbourhoods is important in supporting older people to remain living at home and to continue to participate in their communities. As well as appropriate housing, older people require neighbourhoods which are safe and secure and provide easy access to services and facilities, so they can remain full and active members of the community and live independently.

Creating built environments that are age-friendly and which support active ageing involves providing :

- neighbourhoods that encourage physical activity and an active lifestyle, by making it safe, attractive and enjoyable for people to walk
- ready access to public transport services
- easy access to shops, services and facilities
- physical infrastructure and public facilities that are well maintained and provide universal access
- public spaces that are safe and provide a sense of security
- neighbourhood design and facilities that promote social interaction and sense of community
- public open space and recreation facilities that support active living
- safe environments for pedestrians and motorists.

As they age, older people have increasing reliance on informal support from their local communities. Neighbours and local friends can be key components of older people's support systems.

Older people living alone may be at greater risk not only of social isolation but also of experiencing a fear of crime or problems with security. Older people need to have the confidence to conduct their lives without the fear or threat of crime, with adequate infrastructure and public transport, and ready access to shops and services. Beyond the immediate need for safety is the higher need for a positive feeling of belonging to a community. This is a particularly important need for older people living alone or socially isolated.

“Take our cars away and we are stuck at home”

Maltese focus group, Llandilo



8.2 What the literature says

Equity of access has been identified by the World Health Organisation as a key health principle for older people to ensure they have the right and opportunity to realise their full potential. It has identified that the provision of safe environments is crucial for preventing illness and injury and in encouraging older people to use public places. The World Health Organisation has also prepared a check-list of essential features of age-friendly cities, as a tool for local government to make their city more age-friendly and to assess its positive characteristics and barriers⁴⁶.

Studies have found that the impacts of disability can be reduced by appropriately supportive environments. This includes not only the provision of aids in everyday living, but also adaptable housing, accessible safe and local areas, and universal design within the built environment⁴⁷.

Older people stress the importance of meaningful social support and social interaction as central to their sense of well-being. Housing and neighbourhood designs which promote a sense of neighbourhood or community, facilitating interaction and support amongst neighbours, are important in enhancing this. Research has demonstrated that community connections, networks, and social cohesion play a significant role in the health, well-being, and positive mental health outcomes of a variety of population groups, including links with cardiovascular health, depression and rates of mortality and morbidity⁴⁸. Meaningful social contact with other people helps avoid the damaging impacts of isolation and loneliness on human mental and physical health. Research has also demonstrated that physical characteristics of the built environment can facilitate the development of a sense of community, through design that fosters social contact between neighbours.

Having access to public transport is one of the critical factors in a person's ability to remain living in their existing home, particularly as they may lose the ability to drive with increasing age. Lack of public transport can be a key barrier for older people wanting to lead active and independent lives. Older people are one of the main user groups of public transport, so its appropriateness is a major issue for them.

Older people stress the importance of being able to walk around their neighbourhood, as a means of access to shops and services, as a fitness and recreation activity, and as a means of staying in touch with neighbours and having local social contact. Obstacles to safe and easy pedestrian access may include:

- lack of footpaths, uneven, sloping or discontinuous pathways, or poorly maintained pathways
- lack of safe pedestrian crossings at key destinations frequented by older people
- the speed of traffic in areas frequented by older people
- lack of adequate street lighting
- lack of street trees for shade
- lack of seating along public walking routes, to enable older people to rest along the way.

Although statistics reveal older people are less likely to be victims of crime or personal violence than any other age group, there is a very real perception amongst older people that they are at risk. While the level of crime against older people is comparatively low, the worry about safety can very much inhibit their lifestyle and prevent them from participating which can lead to negative health consequences. Appropriate design of the physical environment can enhance a sense of security in public places. This points to a need for education for older people about ways to minimise the risk of crime in public places, and attention to the design, lighting, paving and landscaping of public areas to improve security. Attention also needs to focus on the design and maintenance of public spaces to minimise the risk of falls or injury for older people. The provision of public seating in safe areas is also an important consideration.

⁴⁶ World Health Organisation 2007 *Checklist of Essential Features of Age-friendly Cities* WHO/FCH/ALC/2007.1

⁴⁷ Kendig, H and Duckett, S 2006 p62

⁴⁸ Australian Psychological Society

The use of motorised wheelchairs and scooters by people with a disability is increasing. The RTA website includes the following advice:

- Motorised wheelchairs and other types of disabled persons' conveyances are exempt from registration and users do not require a licence or third party insurance
- Only people with a disability that substantially impairs their mobility can, by law, use a motorised wheelchair.
- A motorised wheelchair user is considered a pedestrian under the Australian Road Rules.
- Operators of these vehicles must comply with the same road rules as pedestrians
- Speeds must be limited to 10 km/h.

8.3 Council's role

Council plays a key role in creating supportive communities for older people, through the planning of neighbourhoods and town centres, through the design of public spaces to be safe and to encourage social interaction, through the provision of recreation facilities and open space to support active living and through the provision and maintenance of public facilities to promote safe and accessible use.

Many council planning and infrastructure programs and strategies impact on the delivery of supportive environments for older people, with the key ones including:

- Penrith Valley Community Safety Plan
- Penrith Integrated Transport and Land Use Plan
- Path Paving Construction Program
- Pedestrian Access and Mobility Program
- Building Asset Renewal Program
- Parks Improvement Program
- City Centre Improvement Program
- Open Space Action Plan

Council has a responsibility to encourage appropriately designed development that can reduce the likelihood of crime against persons and property. This is often done through Council's Development Control Plan (DCP), which applies to all development in the City on both public and private land. Additionally, Council's role involves consideration of advice from various levels of government, local service providers and community organisations and representatives on how to implement appropriate community safety strategies. Council's Community Safety Partnership fulfils this function.

Council has two community access buses which are available for use by non-profit community groups and organisations based in the Penrith LGA. Buses can be hired during the day and evening as well as for weekend use.

Council also has a strong advocacy role in lobbying public transport providers, including State Rail and the Ministry of Transport, to improve train and local bus services.



8.4 What older people said in consultations

- Access to local neighbourhood shops and services within walking distance is limited in many parts of Penrith, with major retail and other services centralised in the Penrith City Centre or St Marys Town Centre. This disadvantages older people who do not drive and reduces opportunities for walking and for casual social encounters with friends and neighbours in local neighbourhoods.
- Well maintained footpaths were seen as essential to enable older people to get around in Penrith. While participants recognised that footpath provision has improved in many parts of Penrith, it was felt that more could be done. This included:
 - footpaths on both sides of roads
 - wider footpaths to accommodate both scooters and pedestrians
 - rules to govern use of scooters on pedestrian footpaths
- Poor public transport in many parts of Penrith is identified as a major barrier to active living. Participants felt that public transport services are designed with commuters in mind rather than older people, who want to travel in off-peak times. A lack of effective linkages between transport modes was also an issue and made it difficult to carry shopping or visit friends and family across the City. Participants felt that moving around in Penrith could be improved by:
 - re-routing and improved frequency of services to better reflect the needs of older people
 - improving seating, shelter and bus stops suitable for people with mobility issues
 - more staff at railway stations, to provide increased security and a sense of improved safety
- Parks and open space in Penrith are enjoyed and highly valued by older people in Penrith. Parks are recognised as increasingly important as people move to smaller homes with less private open space. Participants felt parks and open space could be improved by:
 - greater accessibility through better maintained footpaths and public transport services
 - inclusion of more features of interest to older people such as public art
 - more seating and shade structures
 - the provision of footpaths around and through parks to enable older people to walk and exercise safely
 - removal of graffiti and other rubbish and implementation of “no alcohol” policies to contribute to people feeling safe in parks
 - improved access to public toilet facilities
 - more BBQ and picnic facilities
- Older people are also keen to see more open space with walking trails to provide opportunities for recreational walking and exercise to help stay healthy. Participants felt walking trails could be more user friendly for older people through improved accessibility, maintenance and infrastructure such as seating, and better connectivity with residential areas.

- Accessibility for people in wheelchairs, using motorised scooters and walking aides was seen as an important feature of supporting ageing in place in Penrith. Suggestions for improvements to support people with mobility impairments included:
 - improving accessibility of public places and key facilities such as banks, government offices and major shops, through removal of steps
 - more safe crossings suitable for people with a mobility impairment, including islands to wait in the middle of roads
 - considering ways to enhance footpath safety for both pedestrians and users of motorised wheelchairs and scooters
 - stations for people to recharge motorised scooters throughout Penrith.
- Participants identified parking difficulties and a shortage of disability parking spaces in the Penrith City Centre and St Marys Town Centre as barriers to conveniently accessing shops, services and public spaces. Related issues included:
 - a lack of undercover disability parking to provide shelter from rain and sun
 - a need for seniors parking located close to shopping centre/facility entrances as the distance to walk is a key issue for this group
 - a need for drop off zones with seating available near entries to major facilities
 - greater enforcement of disability parking restrictions.
- Participants felt that isolation contributed strongly to health problems and loneliness amongst older people. Issues associated with social isolation include living in areas where there are few people around during the day, lack of public transport, and feeling unsafe in public areas. Suggestions included:
 - supporting smaller village centres with a range of retail and service options rather than centralising so many facilities and services in the city centre
 - providing greater support to isolated and rural communities
- A number of participants reported feeling unsafe walking in their neighbourhoods or going to shopping centres and leisure outings, particularly at night, for fear of crime. Suggestions to improve safety and sense of security in Penrith included:
 - improved street lighting
 - fast removal of graffiti and other rubbish
 - increased police presence
 - installation of more CCTV's
 - provision of home security systems in housing for older people
 - making key streets and parks alcohol free zones.
- The community transport system in Penrith was seen as being a vital support, assisting many older people to maintain their independence. Many participants used and enjoyed the Council run shuttle bus that operates during the Christmas weeks. However, participants felt that moving around Penrith could be improved by:
 - community transport that is cheaper and more flexible
 - subsidised taxis for older people
 - extension of the Christmas shuttle bus service throughout the year,
 - a volunteer driver service similar to volunteer meals on wheels.



8.5 Future issues and challenges

Strategies are needed to promote independent living and a healthy lifestyle for older people, to remove barriers to access to facilities and services and to ensure older people feel supported within their community. Particular challenges include:

Public transport

The low density housing which characterises much of Penrith has not been conducive to the development of strong public transport services away from the railway line. It will be important that new housing options for older residents are coupled with adequate transport infrastructure, and that efforts be made to improve public transport for older people in established areas. This includes public transport services linking suburbs, to enable older people to maintain friendship networks across the City, as well as links to facilities and services in local and major centres.

Facilitating social support networks

In designing suburban areas, it will be important to create small-scale public spaces, shopping centres and community facilities which promote social interaction and a sense of community. Designing streets that encourage walking and casual encounters and housing which overlooks the street will also be important.

Encouraging physical activity and active lifestyles

Providing safe footpaths, parks, walking trails and other recreation facilities will facilitate older people remaining active and healthy, as will providing convenient access to local shops and other destinations used by older people. As older people lose the ability or confidence to drive, they become more focused and reliant on their local neighbourhood and services and facilities within walking distance. This distance for older people is generally considered to be within 400 metres or so from home. However, many of the suburbs within Penrith have been designed for car dependent families and lack local shops and services in walking distance.

Providing accessible facilities and services

Council's access policies will need to ensure that all public buildings and spaces within Penrith promote universal access, that parking and public toilets address the needs of older people. and that new technology is not a barrier to older people accessing or communicating with services and facilities, given their more limited familiarity with new technology.

Identifying groups at risk of social isolation

There are particular groups of older people at risk of social isolation that may require strategies to address their support needs. They include:

- people living alone; widowed men are particularly at risk, as they may lack the social and domestic skills to look after themselves or make connections with others
- people living in the smaller rural communities, where services, transport and where there may be small numbers of like-minded older people
- older people housebound with a disability or illness
- ageing carers, who may become isolated by virtue of the demands of their caring role. This group includes ageing carers of adult children with a long term disability and partners of older people
- people from culturally and linguistically diverse communities, particularly those from non English speaking communities and refugee communities. Social isolation may be exacerbated by poor English language skills, lack of support networks and limited acceptance in mainstream social networks
- older Aboriginal and Torres Strait Islander people who may often have health challenges at an earlier age than other older people.

8.6 The strategy

| Penrith Principal 5- Build on the characteristics of ecosystems in the development and nurturing of a healthy and sustainable city | | | | |
|--|---|-------------------------------------|------------------------|----------------------|
| Objective 5 (i) Our built environment supports well communities | | | | |
| Priority Theme 4: Create local communities that support active ageing | | | | |
| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
| 4.1 Develop and implement strategies and policies that support age-friendly built environments | 4.1.1 Through planning policies, ensure public spaces, neighbourhoods and town centres are designed to maximise safe, convenient and accessible use by all sections of the community, including older people | Service | LPM | C |
| | 4.1.2 In new release areas, neighbourhood renewal and centres redevelopment programs, encourage planning for walkable communities that enhance older people's access to local shops, services, public transport and the public domain, through actions identified in the PITLUS Action Plan | Service | DTAM | C |
| | 4.1.3 Explore incorporation of seating, shade, resting places and Stop and Drop zones in the design of public spaces and facilities within the Penrith City Centre | Service | DTAM/MPM | C |
| | 4.1.4 Through developer forums, provide information to builders and developers outlining age friendly neighbourhood design principles and requirements | Service | DSM | M |
| | 4.1.5 Develop skills and awareness amongst relevant Council staff to highlight age friendly design principles and requirements | Service | DSM | M |
| 4.2 Enhance community and personal safety and sense of security for older people within Penrith | 4.2.1 Ensure that designing for safety, security and social cohesion in public spaces is considered at all stages of the planning and development process | Service | MPM | C |
| | 4.2.2 Continue to ensure the representation of older people on the Penrith Valley Community Safety Partnership (PVCSP) to identify community safety issues of concern to older people | Service | PDASM | C |
| | 4.2.3 Provide information to older people to enhance their safety and sense of security, through the seniors page in the community safety section of Council's website, and through partnerships with PVCSP, police, and government and community organisations on safety for seniors initiatives | Service | PDASM | C |
| | 4.2.4 Implement alcohol free zones and areas in accordance with Council policies | Service | PDASM | S |
| | 4.2.5 Continue to remove graffiti and rubbish through initiatives outlined in the Penrith Valley Community Safety Plan | Service | PDASM | C |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|--|--|-------------------------------------|------------------------|----------------------|
| 4.3 Improve access to transport services to meet the needs of older people | 4.3.1 Promote implementation of the PITLUS Action Plan with regard to initiatives that may improve older people's access to public transport services, reduce their car dependence and encourage active transport (walking and cycling) for short distance trips | External partnership | DTAM | C |
| | 4.3.2 In improving transport services through the PITLUS, ensure that transport planning recognises the importance of public transport in supporting older people to lead active lives | External partnership | DTAM | C |
| | 4.3.3 Encourage the Ministry of Transport to consult with older people in its review of service levels and routes in Penrith and publicise opportunities for older people to provide input to this review | Service | DTAM | C |
| | 4.3.4 Collaborate with ADHC and community transport organisations to improve access to community transport services for disadvantaged groups of older people. | External partnership | CCDM | C |
| | 4.3.5 Investigate transferring Council community transport buses to GREAT community transport | Service | CCDM | C |
| | 4.3.6 Provide assistance to GREAT Community Transport to secure a permanent and secure site from which to operate, to help ensure sustainable and better utilised community transport services. | Service | PDM | C |
| | 4.3.7 Work in partnership with local business groups to investigate demand for community shuttle bus services to and within commercial centres that are not well served by public transport | External partnership | DTAM | S |
| 4.4 Promote social interaction and sense of community for older people through neighbourhood design and facilities | 4.4.1 Encourage neighbourhood social interaction through the Neighbourhood Renewal program community events and initiatives eg Family Fun days | Service | CCDM | C |
| | 4.4.2 Monitor the impact of social isolation amongst older people in the community and coordinate with agencies ways to overcome the impact of social isolation | External partnership | CCDM/EHM | C |
| | 4.4.3 Enhance support to community organisations working with isolated older people such as culturally and linguistically diverse and Aboriginal and Torres Strait Islander communities | External partnership | CCDM | C |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|---|--|-------------------------------------|------------------------|----------------------|
| 4.5 Provide public open space and recreation facilities that support active living for older people and respond to their changing needs and interests | 4.5.1 Create parks and gardens with interest and destination points that will attract and appeal to older people (such as public art, heritage items, landscaped gardens, seating/shading, water features) | Service | MPM | M |
| | 4.5.2 Promote access to waterways and bushland areas within Penrith | Service | PM | M |
| | 4.5.3 Design amenities to support passive recreation for all age groups, including older people | Service | MPM | M |
| | 4.5.4 Extend the network of pathways, walking trails and cycling tracks linked to the wider network of open space in Penrith, to cater for the popularity of walking as a recreational activity for all age groups, including older people – eg Great River Walk | Service | CWM/PM/ MPM | C |
| | 4.5.5 Promote awareness of walking paths and trails through Council newsletter and Council website | Service | PM | M |
| | 4.5.6 Through partnerships with local organisations, support walking and cycling clubs and special events that support active living for older people | External partnership | RM | M |

Penrith Principal 5- Build on the characteristics of ecosystems in the development and nurturing of a healthy and sustainable city

Objective 5 (ii) Our infrastructure is adaptable and responds to changing needs

Priority Theme 4: Create local communities that support active ageing

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|--|---|-------------------------------------|------------------------|----------------------|
| 4.6 Enhance pedestrian and road safety environments for older people | 4.6.1 In setting priorities for the future Path Paving Construction Program to commence in 09/10, give consideration to older residents' level of activity in local areas and their needs for safe pedestrian access to facilities and services | Service | CWM | M |
| | 4.6.2 Implement the PITLUS actions regarding pedestrian and mobility initiatives and disability parking spaces, with a particular focus on implications for older people | Service | DTAM | S |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|---|---|-------------------------------------|------------------------|----------------------|
| | 4.6.3 Continue to identify hazards in the built environment, especially footpaths and crossings, via Council's footpath audit process | Service | CWM | C |
| | 4.6.4 Continue to implement and advocate for safety measures such as adequately timed lights, pedestrian refuges and traffic calming devices in places identified by older people as unfriendly to pedestrians | Service | DTAM | S |
| | 4.6.5 Advocate for the development of safety codes and infrastructure standards for motorised scooters and electric wheelchairs | Service | DTAM | M |
| | 4.6.6 Explore the potential to provide undercover wide bay parking spaces and undercover pick up / drop off points in key locations used by older people, such as major shopping centres | Service | DTAM | M |
| | 4.6.7 In partnership with local organisations, explore opportunities to provide road safety workshops and driver education courses for older drivers | External partnership | CCDM | M |
| 4.7 Promote access to all public facilities and services for older people | 4.7.1 Ensure future Council facility and infrastructure design and construction/ reconstruction incorporates universal design principles | Service | MPM/CWM | C |
| | 4.7.2 In the implementation of the Penrith City Centre Civic Improvement Program, plan for and provide adequate street and park furniture , benches, resting places and shade in public places in the Penrith City Centre | Service | MPM/CWM | M |
| | 4.7.3 Support provision of bus shelters in bus stop locations with high usage by older people, and support current design of new shelters as suitable to meet the needs of older people | Service | DTAM | S |
| 4.8 Ensure Council's parks and walking trails support the health and well-being of older people | 4.8.1 In implementing Council's Parks Improvement Program, ensure access for all age groups, including older people | Service | PM | S |

ENCOURAGING PARTICIPATION IN, AND CONTRIBUTION TO, COMMUNITY LIFE

9.1 Issue overview

Positive ageing requires that older people feel that the knowledge, skills and wisdom that they have acquired are recognised and utilised and that they are valued and respected members of the community. This requires consideration of social attitudes towards older people and the opportunities available to them to participate in and contribute to the life of the community.

Community attitudes and stereotypes of older people and ageing are often negative and do not reflect the reality for the majority of people. While most older people live independently in the community and enjoy an active lifestyle, the popular stereotype of ageing is often of dependence, frailty and vulnerability. Many older people feel that they are not seen by the community as individuals, but are stereotyped as a group purely on the basis of their age. Ageing can have a strong stigma attached to it.

The media is often blamed for perpetuating and reinforcing these attitudes, through stories and advertising images that focus on the frailty and vulnerability of older people, rather than on their contributions and achievements. Negative community attitudes are entrenched in many government services, manifested through patronising or dismissive attitudes towards older people, especially from service providers.

Discussions about our ageing society are often framed in terms of the economic cost of ageing, in a context where resources for human services are under increasing pressure. This portrays older people as a burden for the community, in terms of the cost of providing services and income support for them as they grow older, which need to be financed by those in the workforce. It needs to be recognised that older Australians have already contributed taxes to support the development of infrastructure and services. Most older Australians also lead independent and active lives and continue to make a significant contribution to the social and economic aspects of society.

Action has already been taken to discourage age discrimination through legislation in Australia. However, other more subtle areas of age discrimination occur in society and relate to attitudes towards the value of older people.

Older people need to have available a variety of opportunities to participate in community life. Participation in learning, employment, volunteer activities and community events provides opportunities to be involved in meaningful activity and productive social roles in the community. This is important in enabling older people to maintain a sense of purpose, identity and self-worth and to contribute and feel valued for their skills and experience.

Some older people choose to postpone retirement and to remain in the paid workforce for longer. To assist people meet this need, there is a need for greater flexibility in employment practices, for instance to enable part-time work and reduced hours. Older people may also seek to have the opportunity to work from home, to enable them to juggle other responsibilities. In this regard, it is noted that increasing numbers of retired and semi-retired people are operating home-based businesses, both as part-time activities and as more full time ventures.

With more people having internet access at home, this is providing opportunities for many older people to not only work from home, but to engage in a variety of computer-related leisure activities (e.g. digital photography). This in turn has implications for housing requirements.

As life expectancy increases and people remain healthy and active for longer, it is important to ensure that adequate and appropriate opportunities for meaningful activity are available, reflecting the diversity of interests, circumstances and abilities of older people. For these reasons, increasing opportunities for such participation is a central component of enhancing quality ageing.



9.2 What the literature says

With current life expectancies and low retirement ages, many people can expect to live 20 years or more after they retire. The average age of retirement in NSW is 52 years⁴⁹. Many older people who are not working report that they would like to work around 19 hours a week⁵⁰.

Penrith's total working age population (15-64 years) is projected to fall from its current 69% of the population, to around 66% by 2022. However, it is projected to actually increase in size, from its current almost 125,000 to around 131,000 people⁵¹. Participation in the workforce is recognised as an important factor in self-perception and self-esteem, as well as being a source of income. Employment also has value as a stimulus for mental activity, a place for social interaction and a place for reward for effort.

Leaving the workforce or reducing hours worked is an important transition time for people. With the removal of discriminatory mandatory retirement for many workers, there are fewer barriers to mature age workers' continuing to work and productive employment continues well into older age for many. Opportunities associated with mature age employees include their range of experience, and personal qualities such as maturity, stability and loyalty. Encouraging the continued participation of older people in employment will be important if Penrith is to have a flexible and diverse workforce, which will be important in maintaining sustained economic growth.

Barriers that discourage continued participation of mature age workers in the workforce do still exist and need to be addressed. Government and private sector employers may need to adopt more positive attitudes to employing mature age workers and create opportunities for part-time work which will both give them access to the skills of older people, but also assist people to make a gradual transition from full time participation in the paid workforce to (semi) retirement and assist the adjustment to the changed status and circumstances of retirement.

It is estimated that people over 55 years of age in Australia contribute \$75 billion per annum in unpaid caring and volunteering activities, with more than half of this contributed by

those over 65 years of age⁵². Healthy older people contribute significantly to society, and remain healthy at least in part through social participation. About 28% of people 65 years and over do unpaid voluntary work⁵³ and more than half of home and community care volunteers in NSW are 65 years or over⁵⁴. Older people also provide a considerable proportion of informal childcare and care for people with a disability in NSW.

While the potential pool of volunteers will grow significantly with the ageing of the population, there will be growing competition for volunteers between the aged care sector and other community activities. As such, there will be increased pressure on aged care organisations to make effective use of their volunteers and provide them with a rewarding experience.

Many studies have shown that older people continue to learn as they age. They are particularly good at integrating new information into their existing skills and knowledge⁵⁵. People over 55 are the fastest growing group of internet users in Australia⁵⁶. A survey of retirees under 75 years found 53% accessed the internet from home⁵⁷.

Nevertheless, a major education issue for older people is learning how to use new information technology and electronic equipment associated with their day to day activities and new forms of communication and entertainment. New technology provides exciting opportunities for older people but it can act as a barrier if it is not explained or made easily accessible to them. Cost can be a major barrier, both in terms of purchasing a computer and participating in some courses, given that a large number of older people have very low incomes. This points to the importance of public access to computers and affordable support to learn how to use them.

⁴⁹ ABS *Retirement and Retirement Intentions* 2004-5 Cat No 6238.0

⁵⁰ ABS 2006 *Barriers and Incentives to Labour Force Participation* 2004-5 Cat no 6239.0

⁵¹ Local Government and Shires Association 2008

⁵² Department of Health and Ageing 2008, p.3

⁵³ ABS and DADHC 2004 *Older People NSW* 2004 p. 18

⁵⁴ DADHC 2002 *Volunteers in HACC funded services*

⁵⁵ Office for Ageing 2006, *Population Ageing Overview Fact Sheet*.

⁵⁶ ABS 2006 Household Use of Information Technology

⁵⁷ Office for Ageing 2006, *Population Ageing Overview*. Fact Sheet.

9.3 Council's role

Penrith City Council is a major employer within the City and its policies and practices with regard to the employment of older people can provide a leading example to other business leaders and employers. Council is also a major service provider within Penrith and the attitudes and practices of its staff towards older customers are important in demonstrating equitable treatment and avoiding discrimination towards older people.

The Council is in a position, through its publications and policies, to influence the ways in which older people, their contributions and achievements are portrayed. This influence includes sponsoring activities/opportunities that encourage older people to become actively involved in volunteering in their community. Council has Wall of Achievement awards which recognise volunteer achievements.

Council is an authoritative source of local information, not only about its own services but also about other resources and opportunities in the area. Information is provided through Council publications (for instance through newsletters and community service directories), through the Council website and through Council staff, libraries, senior citizen centres and neighbourhood community centres.

Council also supports lifelong learning for older people, by providing affordable accommodation for adult education activities (e.g. University of the Third Age). Another contribution is Council's support of older persons' advocacy groups and information services (e.g. Older Women's Network) through provision of affordable accommodation in Council facilities for their administration and activities.

Council-sponsored events and activities (e.g. Seniors Week, local festivals) can provide direct opportunities for older people to participate in community life and to celebrate their achievements and contributions. Council further supports local community organisations to run their own events and activities for older residents during Seniors Week, through the provision of grants. In 2008, Council allocated \$4,000 to six community organisations to assist in the delivery of Seniors Week projects. Council's community assistance program grants also provides funding to assist older people to participate in community life

9.4 What older people said in consultations

- Participants believed that opportunities for meaningful participation were important to keep people mentally and physically healthy, and to allow people to continue to contribute in meaningful ways to society. However, participants also noted that a one-size-fits-all approach did not work as different people have different interests and abilities.
- Participants felt that changes needed to be made to workplace culture to enable older people to continue contributing to the workplace for longer. It was felt that greater flexibility, acknowledgement of the skills of older workers and a move away from the 9-5 culture was needed.
- Participants felt there were several obstacles to volunteering in the Penrith community including:
 - lack of information about volunteering opportunities available in Penrith
 - often unrealistic expectations of volunteers in terms of time limits, costs, and appropriate activities. Participants felt volunteer activities needed to be age and ability appropriate and not leave volunteers out of pocket
 - a need for more flexible volunteering opportunities, which are less restrictive in time commitments so volunteers could take time to pursue other activities such as travelling
 - encouraging younger people to become involved in volunteering as a lifelong activity.
- Access to information about available opportunities for community involvement was seen as very important. Suggestions to improve information access for older residents on opportunities for meaningful participation included:
 - providing information during Seniors Week
 - information, for example fliers and newsletters, provided in shopping centres and stores
 - greater awareness of libraries as a source of information.

- Participants also suggested that regular opportunities to participate in decision making through consultation were worthwhile.
- Opportunities for intergenerational activities need to be increased to break down stereotypes and build understanding between young and older people. Older people's involvement in school programs and inter-generational hobby and leisure groups was seen as important.
- Computer skills were recognised by participants as important to accessing opportunities for meaningful participation. Many older people do not know how or where to access computer training appropriate to their needs. Suggestions included:
 - using the library as a source of information about computer courses available for older people
 - the provision of more short courses on particular activities e.g. accessing the internet or paying bills on-line.
 - the provision of internet facilities in retirement villages.
- Opportunities for on-going education and lifelong learning are important in enabling older people to take on new challenges and develop new skills, and to provide mental stimulation and opportunities to meet new people. While the availability of learning opportunities is adequate now to meet demand, such opportunities will need to increase as the older population grows and diversifies.
- There is also a need for more informal educational opportunities to assist older people to develop new life skills, particularly living skills that may have been the domain of a deceased partner. There will also be a need for opportunities for older people of non-English-speaking background who want to learn English.
- In order to promote volunteering as a means of both achieving personal satisfaction for older people and providing much needed help within voluntary organisations, there will be a need to make it more attractive to older people, and to provide volunteers with appropriate support, training, equipment, insurance and reimbursement of expenses. As volunteering does not suit everyone, there will also need to be alternative avenues available to older people to achieve the same outcomes of fulfilment, involvement and sense of worth.

9.5 Future issues and challenges

Future issues and challenges include:

- A need to continue and expand on initiatives to create more positive attitudes to ageing and older people, to increase public recognition of their interests, achievements and diversity, to reflect more accurately the contribution of older people to the community and to promote inclusiveness, tolerance and interaction between the generations.
- Better understanding of the ways in which older people currently access information, particularly with regard to their access to new forms of information technology. Information and communication technology will inevitably change significantly over the next 30 years. Access to information is becoming easier for mainstream society; however it is going to be crucial to ensure that older people in Penrith are not left behind in the "digital divide" between those with access to the new technologies and those without.
- As the population ages, Council sponsored events and activities will need to reflect the changing character of the Penrith population. Such events will also provide an opportunity to promote the interests and achievements of older people and to involve them in the planning, organising and delivery of activities. It will be crucial to ensure that these activities are accessible for older people in both urban and rural parts of Penrith.

9.6 The strategy

| Penrith Principal 7 – Empower people and foster participation | | | | |
|--|--|-------------------------------------|------------------------|----------------------|
| Objective 7 (ii) We play an active role in our communities | | | | |
| Priority Theme 5: Encourage participation in and contribution to community life | | | | |
| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
| 5.1 Provide flexibility in Council's employment practices to meet the varied and changing employment needs of older people | 5.1.1 Encourage continued participation of older workers in Council's workforce, through Council's policies on part time work and working from home | Service | GM-WD | S |
| | 5.1.2 Continue to support older employees to make a phased transition to retirement, using long service leave in more flexible ways that combine with part-time work | Service | GM-WD | C |
| | 5.1.3 Continue to support older employees through annual seminars on planning for retirement to raise awareness of transition and retirement planning issues | Service | GM-WD | C |
| | 5.1.4 Influence the employment practices of other employers in the city business community through advocacy to promote the skills and contributions of older workers and setting leading practice benchmarks by Council's employment practices | External partnership | GM-WD | L |
| 5.2 Provide opportunities for older people to contribute their skills and experience to the community, for instance through volunteering | 5.2.1 Work with ADHC and the Penrith Volunteer Centre on initiatives to support utilisation of volunteers and develop sustainable volunteer strategies that meet older people's flexibility requirements | External partnership | CCDM | M |
| | 5.2.2 Review Council's use of volunteers and ensure leading practice in working with volunteers is adopted with regard to training, equipment, supervision, insurance and flexibility | Service | GM-WD | M |
| | 5.2.3 Explore ways in which the City can support and facilitate programs and activities featuring intergenerational exchanges of skills and knowledge or older people as mentors for younger people | Service | GM-WD | L |

| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
|---|---|-------------------------------------|------------------------|----------------------|
| 5.3 Promote opportunities for older people to participate in community life and to be recognised for their achievements and contributions | 5.3.1 Ensure older people, their contributions and diverse achievements are recognised and portrayed positively in Council publications, policies, civic events and celebrations | Service | CMM | C |
| | 5.3.2 Continue to support older persons interest and advocacy groups in Penrith including through the provision of affordable accommodation in Council facilities | Service | CCDM | C |
| | 5.3.3 Continue to provide resources for Seniors Week as the major annual opportunity to promote the profile of older people, recognise their achievements and acknowledge the contributions of volunteers | Service | CCDM | C |
| | 5.3.4 Continue to support local groups to run their own events and activities during Seniors Week through provision of grants for local projects | Service | CCDM | C |
| | 5.3.5 Identify and investigate opportunities for future Council-sponsored events and activities that would appeal to the older population | Service | CCDM | C |
| 5.4 Promote access to opportunities for lifelong learning and development of new life skills | 5.4.1 Continue to support and advocate for community based learning programs such as Nepean Community College and U3A including through the provision of affordable, well located accommodation | Service | CCDM | C |
| | 5.4.2 Enhance assistance and resources for older people requiring support in accessing computers in libraries | Service | LSM | C |
| | 5.4.3 Continue support for community groups and programs that aim to enhance access, skills and confidence of older people in using new information technologies | External partnership | CCDM | C |

C=current, s=short-term (1-2 years), m=medium-term (2-5 years) and l=long-term (5-10 years)

Implementation of the strategies and actions contained in this report will provide a platform to help ensure that Penrith is well placed to respond to the challenges of an ageing community. It will be important that the implementation of the actions and strategies is monitored regularly, to assess progress in achieving goals and to ensure that actions remain appropriate in a changing social, political and economic context.

While the *Planning for an Ageing Community Strategy 2010+* has been based on the best information currently available to forecast the demographic characteristics and needs of the future population of older people in Penrith, it will be important that these forecasts are reviewed and updated regularly, to ensure that the strategy remains based upon accurate and reliable foundations.

In the consultations for this Strategy, older people in Penrith welcomed the opportunity to provide input to its preparation and sought on-going involvement in its future evaluation and review.

The strategies and actions identified in the table on the right are intended to address these issues.

“You know what is going on if you are in the loop but there are risks for people who are isolated”

Aboriginal focus group



10.1 The strategy

| Penrith Principal 2 – Achieve Long-term Economic and Social Security | | | | |
|---|---|-------------------------------------|------------------------|----------------------|
| Objective 2 (ii) We plan responsibly for now and the future | | | | |
| Priority Theme 6: Planning for an ageing community | | | | |
| Strategy | Actions | Service/ External partnership | Responsible Manager | Timeframe c/s/m/l |
| 6.1 Consider the financial implications of an ageing population for Council's rate revenue projections and future expenditure | 6.1.1 Monitor the implications of growth in the population of older people on Council's rate revenue base | Service | FSM | L |
| | 6.1.2 Monitor the pricing policies of Council services in relation to the income circumstances of different groups of older people to ensure Council services remain affordable | Service | FSM | L |
| 6.2 Continue to develop the research base underpinning the <i>Planning for an Ageing Community Strategy 2010+</i> | 6.2.1 Continue to monitor demographic profiles and forecasts for the ageing of the Penrith population and to monitor demand for aged care services and service utilisation trends | Service | CCDM | C |
| | 6.2.2 Monitor impacts of Council policies, programs and services on different groups of older people and support equitable access for all groups | Service | CCDM | S |
| | 6.2.3 Together with community partners, actively seek the contributions and opinions of diverse groups of older people in Council facilitated consultations and debate on key issues associated with planning for an ageing community | External partnership | CCDM | C |
| 6.3 Regularly monitor and review the Ageing Strategy | 6.3.1 Fund the Community Development Officer - Older People position as a full-time position and agree a work plan in consultation with ADHC that includes responsibility for monitoring implementation of the Ageing Strategy (achieved in February 2009 through additional grant funding from ADHC) | Service | CCDM | C |
| | 6.3.2 Review implementation of this action plan annually | Service | CCDM | S |
| | 6.3.3 Undertake a comprehensive review and revision of this Strategy and action plan after 5 years | Service | CCDM | L |

The following acronyms have been used throughout the Strategy tables in the column marked 'Responsible Manager' to identify the relevant Council Manager.

| | |
|--------------|---|
| GM-WD | Group Manager – Workforce Development |
| EDCMM | Economic Development and City Marketing Manager |
| RM | Recreation Manager |
| LPM | Local Planning Manager |
| DSM | Development Services Manager |
| EPM | Environmental Planning Manager |
| DTAM | Design Technical Advice Manager |
| MPM | Major Projects Manager |
| CWM | City Works Manager |
| PM | Parks Manager |
| LSM | Library Services Manager |
| CCDM | Community and Cultural Development Manager |
| PDM | Property Development Manager |
| PDASM | Public Domain Amenity and Safety Manager |
| FSM | Financial Services Manager |
| EHM | Environmental Health Manager |

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