The way forward for Greek Australians: A significant group of CALD Elders

AGWS Submission to the Productivity Commission Inquiry: Caring for Older Australians

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Introduction

Australian Greek Welfare Society (AGWS) is an ethno-specific agency involved in the delivery of a range of community-based services and advocacy on behalf of the Greek Australian community since 1972. Specialised culturally relevant services are operated across the Melbourne metropolitan area and include home, community and centre-based aged care services, CACPs, Supported Access and individual assistance through casework and counselling, advocacy, community education and training.

The rapid ageing of the community and the numerically large numbers of individuals with complex care needs has added to the demand for (AGWS) services that are already burdened due to lack of substantial growth from both the State and Commonwealth governments.

In attempting to meet this demand for services as well as provide a holistic response to care, AGWS has developed a range of partnerships with key service providers within the broader community and aged care services sector to maximise the opportunities for Greek Australians to receive culturally and linguistically appropriate care.

We very much welcome the opportunity to make comment to the Productivity Commission’s enquiry into aged care and wish from the outset to endorse the submissions made by the Ethnic Communities Council of Victoria (ECCV) and that of the Federation of Ethnic Communities’ Councils of Australia (FECCA).

Background – Greece-Born Population

Greek settlement in Australia dates back to the late 1820’s when seven young sailors from the island of Hydra were convicted for piracy by a British naval court in Malta and were sentenced to transportation to Australia. By 1901, there were 878 Greece born people living in Australia. In the years since the turn of the century, there was a steady flow of Greek migrants to Australia and by 1933 there were 8337 Greece born people living in Australia. However, it wasn’t until the post Second World War period were there were “waves” of Greek migration which saw the Greece born population living in Australia reach its peak in 1971 with 160,200 Greece born people residing in Australia.

Migration to Australia in the post war years played a major role in the provision of a labour force to industries that were experiencing rapid growth. For Greek immigrants who arrived in Australia between 1947 and 1971 it is estimated that more than 75% were unskilled and many were employed as labourers or process workers (Kringas, 1988). As a result, according to the 1991 Census data, a total of 55% of Greece-born persons aged 15 years or older were in the occupational categories of labourers, plant and machine operators or drivers and tradespersons.
The level of English proficiency within the Greece-born population has statistically been very low. In fact, 34.4% rated their proficiency in spoken English as “Not well” or “Not at all”. This is attributed primarily to the fact that many had little or no time to undertake any formal learning of the English language during their working lives with some working two or even three jobs at a time to make ends meet. As a result, the need for culturally and linguistically appropriate services for our ageing population is critical.

Today, there are 109,989 Greece-born people living in Australia of which 54,325 (49.39%) live in Victoria (2006 Census). From the Victorian Greece-born population, there are 51.1% females and 48.9% males whose demographic distribution covers all of the metropolitan regions. The majority however reside in Melbourne’s Northern Metropolitan regions with Darebin, Whittlesea and Moreland being the most populated Local Government Area’s. Other areas with significant Greece-born residents include Monash, Manningham, Kingston, Brimbank, Glen Eira, Whitehorse and Boroondara.

It is estimated, that the ageing Greece-born population will peak from 2011 and beyond. During this time the need for culturally and linguistically appropriate services will reach a critical point and as such substantial measures will need to be implemented if the quality of care of this specific section of the Australian ageing population is to be maintained at appropriate levels.

Furthermore, it should be noted that of the 18,382 Cyprus-born people living in Australia, 8,399 live in Victoria. From this population group, 5,143 (61.2%) speak Greek at home. Other population groups who speak Greek at home include the Egypt-born population and as a way of example (11,575 in Victoria) of whom 1,755 (15.2%) speak Greek at home.

**A National Cultural Diversity in Ageing Strategy**

1. By next year, 2011, approximately 22.5 per cent of Australian seniors over the age of 65 will be from a culturally and linguistically diverse background (CALD). Or in other words, over 650,000 people. By 2025 this figure will be close to 1 million CALD elderly people. The ageing of our population requires all levels of government to undertake a leadership and facilitative role, to ensure older Australians from CALD backgrounds are able to lead healthy, active and fulfilling lives whilst recognising the diverse needs within these groups.

2. Therefore AGWS proposes the development and implementation of a National Cultural Diversity in Ageing Strategy which is representative of a whole-of-government commitment. The last such initiative was the Ethnic Older Persons’ Strategy produced by the then Commonwealth Department of Human Services in 1995.
3. At the state level AGWS supports the Department of Health’s policy directions in the area of diversity and in the development of the Diversity Framework to underpin the future work of all health and aged care providers engaged in the delivery of services to Victorian seniors.

4. The variation in aged care service delivery arrangements across the various jurisdictions and the challenges that this has presented for CALD seniors trying to navigate an already complex system requires streamlining and simplification. Models of service delivery that recognise the specialised, cultural expertise of the ethno-specific and multicultural organisations must be given serious consideration.

**National CALD Diversity in Ageing Advisory Structure**

5. AGWS recommends the development of an advisory structure at a national level which includes adequate representation from ethno-specific and multicultural organisations. The role of this advisory structure will be the provision of advice and recommendations to government on matters relating to aged care for CALD seniors.

**Capacity Building for ethnic communities**

6. AGWS supports cost-effective models of service delivery that are aimed at maximising government resources through the development of partnerships at a local level.

7. Ethno-specific and multicultural organisations contribute significant cultural and linguistic expertise to mainstream organisations through formal and informal collaborative service delivery arrangements. Appropriate resource allocation is required for these organisations in order for them to engage meaningfully and equitably in partnership arrangements.

8. The specialised expertise of ethno-specific and multicultural organisations in the care of older Australians at all levels across the ageing spectrum must be recognised and promoted by government. Where aged care services are provided by these agencies the uptake and utilisation by the respective CALD elderly is extremely high. Ethno-specific and multicultural agencies are connected to their communities, are trusted by these communities and provide the essential point of entry into a complex system.
Workforce Development  

9. The significant ageing of the population has placed considerable strain on the capacity of the existing aged care workforce to meet the complex and often immediate needs of its seniors. The multi-faceted needs of an ageing Greek community which are compounded by English language barriers, add to the growing concern about an insufficient and under-skilled workforce.

10. An enormous amount of time, resources and infrastructure is required for the appropriate recruitment, training and retention of staff to perform the functions of what is now becoming an increasingly scrutinised and highly accountable community care role.

11. Opportunities for formalised training are available through commonwealth traineeship programs, however are limited due to the constraints placed on organisations for backfilling and training attendance costs. Curricula offered through available training packages are all in English and require ethno-specific and multicultural organisations to provide additional support to trainees to ensure training content is understood and competency is achieved.

12. The pathway towards supporting a CALD individual to enter into the aged care workforce is not straightforward and is usually prefaced with 2 or more years of English language tuition prior to commencement of training at a certificate III level or above.

13. The promotion of the health and aged care industry to the general community as a vocational career option requires additional time, specialised marketing skills and relationship development with providers that sit within unfamiliar territory to those working within aged care i.e. employment and disability employment networks etc.

14. AGWS advocates for a long-term national workforce development strategy to provide policy direction in the area of workforce development with an emphasis on diversity. The congruence between the current workforce and the needs of older Australians including those with diverse cultural and linguistic needs must be assessed. Consideration must be given to the appropriate level of remuneration, a ‘green’ card that will allow community care workers to work across a range of settings within the health and aged care domain and appropriately funded training to support this initiative.
National Volunteering Strategy

15 AGWS supports 200 Greek-speaking volunteers in their role as community visitors to frail isolated Greek elderly and younger persons with a disability, who are restricted from participating fully within broader community life. The opportunities created for both the volunteer and the recipient of care through this exchange should be viewed within the broader context of civic engagement, community participation and social inclusion.

16 With an ageing population, many of the services provided to care for older Australians are underpinned by the contributions of volunteers. The unique role of formal volunteering needs to be recognised and supported by government as does the more informal forms of voluntary participation and engagement. This is of particular relevance in the ethno-specific and multicultural domain given that most of the volunteering that occurs within this sector is hidden and therefore under-reported.

17 The time, resources and energy that are required to recruit volunteers from CALD backgrounds who are unfamiliar with the concept of volunteerism in a formal sense must be acknowledged. An appropriate level of funding must therefore be provided to relevant organisations in recognition of the additional work that is undertaken to engage volunteers from non-English speaking backgrounds.

18 A review of current activity based funding models should be considered to address the growing administrative costs associated with the recruitment, police checking, training and retention of volunteers. The ageing nature of AGWS volunteers for example, which is certainly not unique to this agency, must also be considered within the context of the viability and sustainability of the voluntary sector in augmenting services to the elderly.

19 AGWS supports the development of a National Volunteer Strategy to set the long-term vision for volunteering within Australia and secure the commitment from all levels of government, the community and business in advancing and strengthening Australia’s voluntary capacity.

Community Care

20 The pivotal role performed by the ethno-specific and multicultural sector in the coordination of services for older CALD Australians is becoming increasingly defined through current and evolving service provision arrangements. AGWS supports approximately 500 frail elderly persons and their carers per year through the provision of person-centered and culturally and linguistically appropriate direct care services, and in excess of 2,000 individuals through generalist casework and counseling services.
21 Therefore the HACC funded Supported Access Pilot Project at the state level and the Community Partners Program at the federal level, is demonstrative of the ‘leading and linking’ role organizations such as AGWS play in engaging individuals with the aged care service system at various point across the ageing spectrum.

22 AGWS advocates the ongoing triennium funding of these two significant programs, to increase the capacity of ethno-specific organizations to provide seamless, quality care across the ageing continuum.

23 Social Support services including the PAG, Respite and Volunteer Coordination Programs are all pivotal and effective in addressing the social determinants that affect individual physical and emotional health and well being. There are programs that are preferred by many CALD elders and prolong their capacity to remain independent and living in their own homes. Models that advance independence, that promote restorative models of health such as the DH’s Active Service Model, the National Healthy and Active Living initiatives are to be supported and resourced.

24 Funding for these activities has been shortcoming since 2003 under the HACC program arrangements in Victoria. Similarly, growth for respite care through the commonwealth NRCP has not occurred since 2005. The AGWS strongly advocates an increased allocation of resources for social support programs such as PAG, respite care that is flexible and under-pinned by an individual capacity-building approach, and for additional resources to support volunteers engaged in friendly visiting both in the community and within residential care facilities.

Health Promotion

25 The role of the ethno-specific and multicultural sector in the provision of health education to the communities it represents is paramount to the maintenance of health and well being in these communities. The Greek speaking community has a need to be informed around issues such as heart health and heart rehabilitation. Appropriate use of medication is an area that merits much greater attention and wider community education. The National Prescribing Service (NPS) carries out some innovative programs with CALD communities that must be expended significantly. In particular Greek speaking elderly are amongst other Southern European communities, prone to suffer from diabetes and the propensity for obesity compounds this as a major health threat.

26 The preference for CALD seniors to seek services from within their own community has been widely documented. This is compounded by the inability of mainstream
service providers to meet the linguistic and cultural needs of CALD seniors in a holistic sense, which prevents access and uptake of these services. AGWS intake data has noted a marked increase in the number of individuals in the 65+ age group seeking information and resources regarding health including prevention, treatment and management strategies.

27 AGWS recommends that government consider existing innovative models of community engagement within the ethno-specific and multicultural sector that focus on health promotion and active living activities. There have been some very innovative pilot programs introduced by the commonwealth including on falls prevention and obesity that merit rolling out in a comprehensive manner and resourced appropriately.

28 Recognition of the effectiveness of the ethno-specific and multicultural sector in engaging the community through appropriate communication strategies, media liaison and the provision bi-lingual information and resources.

Language Services

29 The continued lack of sufficient language services for CALD communities that are currently ageing, continue to preclude these already marginalised groups from having equitable access to basic services.

30 The lack of uptake of language services from the residential care sector requires serious consideration if we are to encourage ageing in place for residents who have been placed in long term care. Consideration of innovative models underpinned by assistive technologies, to promote the independence and active participation of aged care facility residents in the use of interpreters is highly recommended.

31 The ageing of the current interpreting and translating workforce for communities such as the Greek community has serious implications for the continued viability of this service and its capacity to meet the aged care needs of these groups. A coordinated recruitment strategy to raise the profile of interpreting and translating and to attract younger persons into this profession is required and recommended.

32 The variation in the competency of interpreting and translating professionals across the various language groups, and the absence of a quality monitoring system in the purchasing of language services, has caused vast discrepancies in quality across the board. AGWS strongly recommends the development and implementation of a
The National Quality Assurance Framework which stipulates the operating standards and guidelines for the use of language services across Australia.

**Dementia Care**

33 With the projected rise of Australia's ageing population, it is estimated the number of people living with dementia will increase to almost 800,000 within 40 years. 12.4% of people with dementia do not speak English at home and are from a CALD background.

34 The late presentation of Greek-speakers to services seeking assistance means that often families are in crisis and have not had an opportunity to plan and involve the individual suffering with dementia in decision making for current and future care. The interface between diagnosis, treatment and community care is multi-layered and complex.

35 Increased community education and awareness programs regarding dementia and related support services are paramount to the early diagnosis and management of the illness. Family-centred care that addresses cultural and spiritual needs is intrinsic in maintaining the dignity of CALD individuals and their families.

36 Education and training to increase the capacity of mainstream service providers in their response to the linguistic and cultural needs of individuals with dementia and their families is paramount in the advancement of a national dementia strategy.

**Elder Abuse**

37 Is projected that there are 20,000 unreported cases of abuse, neglect and exploitation in Victoria per year and approximately 100,000 throughout Australia per year of Australian elders. By 2025 it is estimated that elder abuse will be costing the health system over $350 million dollars per year. (Elder Abuse Prevention Association 2007)

38 Among known perpetrators of abuse and neglect the perpetrator is a family member in 90% of the cases, with two-thirds of the perpetrators being the adult children or spouses. Older persons who are mistreated can suffer from severe emotional distress, especially depression, and are likely to die more quickly. (Elder Abuse Prevention Association 2007)
AGWS has been actively working with the Greek community on the issue of elder abuse. Some of the findings of this work include the following:

- Little knowledge and understanding of elder abuse
- Little or no recognition of behaviours that constitute abuse
- The most obvious form of elder abuse is financial abuse
- Most incidents are inflicted by family members and carers
- Older people are affected emotionally and psychologically from the abuse
- Older people avoid confrontation with family members due to fear of breakdown of relationships, threats of harm if raise concerns with family members

Recommendations:

- CALD Communities require education and information to increase their awareness of the growing incidence and to seek support from the relevant services. Therefore funding needs to be provided for this work.
- Education strategies that are developed will need to address the cultural and linguistic needs of CALD communities through culturally responsive programs;
- Consideration given to mandatory reporting within community service sector to support the growing incidence of elder abuse;
- Education to carers and families on incidence of abuse and recognising behaviours leading to abuse and how to access supports;
- Training and education to professionals to improve capacity of services to address elder abuse, including cultural training;
- Specific laws must be developed to protect the elderly and to take action against perpetrators given the vulnerability of the group;