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Response to the Productivity Commission Inquiry: Caring for Older Australians

Submission prepared by

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Executive Summary

As the leading professional body supporting ageing research, the Australian Association of Gerontology (AAG) believes that building a robust evidence-base is an essential foundation upon which to develop ageing and aged care policies and reforms to best meet the challenges and opportunities of an ageing Australian population.

In particular, the AAG believes that a specific program of funding dedicated to ageing research would assist in addressing gaps in the evidence-base. As gerontology requires a multi-disciplinary approach to research, any research program would necessarily need to incorporate the broad spectrum of relevant ageing issues, including:

- Biological ageing;
- Demographic patterns;
- Society and ageing;
- Health and aged care;
- Cultural diversity and ageing;
- Ageism and social attitudes to ageing;
- An ageing workforce;
- People with dementia;
- Housing, the built environment and assistive technologies; and
- The economic impact of ageing.

While programs such as the Australian Government's *Ageing Well, Ageing Productively* Research Program have been useful in terms of advancing an ageing research agenda, a broader, more structured ageing research program that promotes collaborative, cross-disciplinary research and supports skills development and career opportunities for emerging researchers is required to ensure that the research community has the capacity to keep pace with the rapid changes expected of an ageing population. To this end, targeted funding towards an ageing research program administered through Government bodies, such as the National Health and Medical Research Council (NHMRC) and the Australian Research Council (ARC) is fundamental to meeting this challenge.

Furthermore, there is a need for translating this research into meaningful policy and practice outcomes. This requires engaging with relevant stakeholders, including consumers, service providers, practitioners, researchers and policy makers, to identify key areas of research and models of best practice. Tools, such as an online portal, protocols for standardised access to datasets, and a services evaluation clearinghouse would be useful for developing and disseminating policy and practice relevant research findings.

To effectively contend with Australia's ageing population for the benefit of all Australians, now and in the future, support for collaborative, multi-disciplinary ageing research is required to successfully inform policy and practice outcomes.



Introduction

The Australian Association of Gerontology (AAG) appreciates the opportunity to contribute to this important inquiry into *Caring for Older Australians*. The AAG is the leading national professional organisation committed to the promotion of gerontological research and the dissemination of relevant information to inform policy, practice and attitudes to ageing.

The inquiry's Terms of Reference are well shaped to gather informed opinion on the care needs of older Australians and delivery of that care in community settings and residential accommodation. There is also the important issue of understanding the varied factors that interact with the ageing well process across the life span and their positive and negative impacts on the health and aged care systems.

With the structural and numerical ageing of Australia's population there will be an ever increasing demand for aged care services and an inevitable increase in spending on aged care over the coming years. Furthermore, changing patterns of disease, improvements in care technologies, increased diversity in terms of care preferences and expectations, and the growing affluence of some older Australians will also impact on aged care services in terms of range, delivery and choice.

The AAG believes that while there are elements of aged care in Australia that work effectively to deliver a world class system of care, the increase in demand, together with changing patterns of expectations of care, require reshaping of the current system. A well developed and robust evidence base is a critical foundation for the design and implementation of an improved health and aged care system to meet the challenges of an ageing population. The development of this evidence base and its translation into practice and policy are of particular interest to the AAG.

Caring for Older Australians

The provision of quality health services is a fundamental right of older people. As a general principle, all older people in Australia should have access to planned and properly resourced integrated quality health care that is flexible, equitable, accessible and affordable, that recognizes diversity and promotes choice and respect for users. The aim is to develop a continually improving system of health and aged care for the increasing numbers of older people, which promotes self care, provides the best care for the older person and where relevant the family, in the best setting, using evidence-based best practice to achieve maximum physical and mental capacity and minimum disability. Where disability is unavoidable and illness terminal the aim is to maximise choice, participation in care decisions and a palliative approach to care.

This submission recognises that there are a number of important elements to a quality health and aged care system in Australia; however, as an organisation dedicated to gerontological research, the AAG will focus on the need for an ageing research agenda, as we believe that quality research and effective knowledge transfer is essential to provide the foundations for the best possible health and aged care system to benefit all Australians.



Ageing and Aged Care Research

Developing and maintaining an effective aged care system requires a long term commitment to research. Identification of agreed research priorities in ageing and aged care is essential but needs to be handled with some caution. Research priorities are ever changing as research findings often open up further areas for investigation. Government priorities will also change and therefore need to be regularly reviewed and updated. Additionally, even where there are well-defined and agreed research priorities, some funding should be available for “other research” since often it will be the unusual or indirect research that serendipitously yields the unexpected big breakthrough. National Health and Medical Research Council (NHMRC) and Australian Research Council (ARC) funding rounds and grants specifically targeting priority ageing and aged care issues are needed to assist ageing and aged care gain status as research priorities, with the corollary of improving evidence-based best practice in aged care and the health and wellbeing of older Australians.

Ageing is a major issue for the full range of research supported by the ARC and NHMRC and there are few aspects of medical, scientific or social research that will not impact upon or be affected by the ageing of the Australian population. Unlike much traditional health and scientific research, ageing research does not apply a single issue, reductionist research model. Gerontological enquiry recognises the complexity of ageing and the multi-factorial causality of age-related health and decline. Ageing research demands a cross-disciplinary approach, building capacity in medical, psycho-social, nursing, allied health, environmental and technological areas. While the outcome of ageing research is the wellbeing of the general population of older adults, there may also be a need to examine ageing across the whole life span.

Against this broad and varied effort, an ageing research program will need to be appropriately focused. This will involve targeted medical, health science, social and economic research that examines socio-biological factors promoting healthy ageing, including mental and physical activity, social participation, activity and support, good nutrition, education and human capital accumulation, the local environment and social capital. It also needs to develop the evidence base in relation to chronic and complex conditions that influence the ageing trajectory for many older people and their informal carers. Despite a strong focus on primary care, it is the reality that a proportion of older people, especially those over 85 years of age, will be disabled, ill or dying, and thus research into appropriate care and workforce needs is essential.

Furthermore, there is an urgent need to build Australia’s capacity in ageing research. A strong research and development focus, supporting skill development and career opportunities for researchers will be a national resource in addressing an ageing population over the coming decades. For successful research outcomes it will be necessary to harness all the existing expertise as well as promoting the development of additional expertise.

A research program that builds capacity within the ageing research community and funds inter-disciplinary research is essential for addressing both the opportunities and challenges of an ageing population and for informing relevant policies and programs for the benefit of older Australians. The



AAG believes that the NHMRC needs to be held accountable for providing significant funding to implement its 2010-12 Strategic Plan in the key area of *Ageing and Health*. This plan states that “maintaining health as we age is an important social and economic objective. NHMRC will focus on research, evidence translations, and capacity building in the care and support of ageing Australians and provide the evidence to underpin the most effective services supporting prevention of ill-health, improved quality of life and promotion of well-being”. To date, funding for this type of research has been inadequate when compared to the high cost investment in disease specific research.

Key research areas to be addressed

While the health and wellbeing of older people is obviously an important area of study for researchers of ageing, there must also be research into the care and support needed for those who require it. To this end, there has been very limited study or quantification of the burden on carers, who are vulnerable to stress, depression, poor health as well as considerable social and economic loss.

Furthermore, there is a need to dispel ageist social attitudes that persist and instead focus on aspects of positive and productive ageing; that is, research is required into the ways older people continue to live rich and rewarding lives that contribute to the social fabric of Australian communities. Ageing is not only about health and degeneration; it is also about growth and productivity.

The need for evaluation and monitoring of policies, programs and interventions to provide soundly based information on both beneficial and harmful social and health outcomes must be a foundation of all ageing research.

In 2003, the Australian Government released its *Framework for an Australian Ageing Research Agenda*. Building on symposia and fora identifying key areas for research, the Framework identified six key policy issues of imminent importance requiring thorough research:

- 1) Maintaining economic growth in the face of an ageing workforce and reduction in the supply of younger workers.
- 2) Achieving adequate, sustainable retirement income over lengthening periods of retirement.
- 3) Developing positive images of ageing and supporting continued social participation.
- 4) Developing age-friendly infrastructure and built environment.
- 5) Achieving healthy ageing to maintain health and independence.
- 6) Providing accessible, appropriate, high quality health and aged care.

While a limited amount of research has been conducted in these areas supported by Australian Government initiatives, such as the *Ageing Well, Ageing Productively Research Program*, further research is required to properly address these issues, particularly in light of current events, such as population projections outlined in the Australian Government’s third *Intergenerational Report* and the Global Financial Crisis. The AAG believes that the following areas of research will assist to advance understanding in ageing and develop a robust evidence base, thus allowing policy makers to



make informed decisions on ageing and aged care policies and programs for the benefit of all Australians. These theme areas include:

Biological ageing

- Multi-disciplinary research into the complex causation, prevention and clinical management of the common multi-factorial “Geriatric Syndromes” (gait instability and falls, acute confusional state and delirium, cognitive decline and dementia, slowing and reduced mobility, incontinence, depression) that create co-morbidity, prolong length of stay in acute care and increase disability following acute systemic illness.
- Trials of multiple interventions in multi-factorial age-related syndromes; this includes combining physical, social and mental activity with medication screening and environmental safety measures.
- Preventive research into complex inter-related causes of the cognitive and mobility disorders of old age, where knowledge lags well behind prevention of the systemic diseases (heart, lung, cancer etc) e.g. dementia prevention models combining anti-oxidants, mental stimulation, vascular preventives, physical activity and social involvement in mild cognitive impairment to delay dementia onset.
- Biological research into the mechanisms causing the common primary neurodegenerative processes affecting cognition and mobility (primary age related neuronal loss unrelated to known mechanisms - vascular, metabolic, toxic, inflammatory, infective etc).

Demographic patterns

- Population health research that addresses responses to geographic and demographic patterns of ageing.
- Special needs groups in the ageing population, including people with disabilities and those living in isolated communities.
- Population health research that addresses community responses to ageing issues e.g. advanced care directives, very old people living alone, isolation and depression, suicide, carer support, access to health and allied services, access to transport and strategies for intervention.
- Issues around family and informal care and the effect of demographic change on the capacity for informal care.

Society and ageing

- Research into the extent, availability and importance of social support and social interaction and its relevance to the older community
- Understanding the lifestyles of older Australians and their evolving needs for support services, including the needs of diverse groups of older people, such as, for example, older gay, lesbian, bisexual, transgender, and intersex people.

Health and aged care

- Targeted healthcare services and workforce research examining healthcare systems for older people within, and that can be integrated across, all settings, including at home, in the local community, acute hospitals, rehabilitation/functional recovery and residential care.



- Models of care and different workforce requirements (including associated educational and skills requirements) that are best able to support older people.
- Care, generally (as opposed to treatment and cure), with a focus on better integrated care systems that maximise function and independent living.
- Better understanding of how to effectively support and maintain informal carers in the role.
- Development of an agreed set of outcome measures, both quantitative and qualitative, for measuring the impact of aged care.
- Understanding the support and service needs of older people living with mental illness/a mental health problem.
- Equitable access to health services and treatments that are appropriate to the needs of older people, and prevention of age-discrimination in service provision.

Cultural diversity and ageing

- Aboriginal ageing research, with particular emphasis on the structural inequities that have resulted in a lack of advanced ageing, in both rural and urban Aboriginal communities and on appropriate models of care.
- Research into the development of culturally specific care, particularly where English is not the first language as serious communication problems may be encountered where the carers cannot communicate effectively which may ultimately impinge on the older person's mental health and quality of life.

Ageism and social attitudes to ageing

- Societal monitoring of cohort change, social attitudes and values (and how they do and can change and influence behaviour).
- Research into the aspirations and resources of the baby boom cohort as they will have improved capacity to self-manage their own health, to self-manage chronic illness when it occurs, and to use the health and aged care systems more effectively than previous generations.
- Community education on the positive aspects of ageing, including expectations that good health and good opportunities can be achieved by older people owning their own futures, by businesses and communities creating opportunities for older people, and by governments fostering the vision of positive and productive ageing.
- Enabling older people to participate fully in making decisions about their health and care, including advance care directives.
- Research into how to make the most of the opportunities afforded by the growth in our older population, such as the potential for mentors, carers, and volunteers.

Ageing workforce

- Understanding the role of older individuals in the workplace, flexible working options, barriers such as age discrimination, physical and mental health, skills training, and retirement planning.
- Redesigning work to utilise the skills of older workers appropriately and reduce early retirements.



People with dementia

- Research into the causes of dementias, including biomarkers and genetic tests, and treatments, including pharmacological treatments and complimentary therapies.
- Assessment of the care needs of people living with dementia (both in the community and in dementia-specific aged care facilities), as well as the needs of carers who are often placed under great physical and mental strain with little respite.

Housing, the built environment, and assistive technologies

- Investigating the housing needs of older Australians, including stock and availability, age-friendly universal design, and alternative care and accommodation choices beyond the current paradigm of residential aged care facilities.
- Addressing issues of older people and homelessness, including mental health and dental hygiene.
- Research into patterns of transport usage and health and community care services uptake amongst older people and projected levels of demand.
- Research into the development and application of new technologies assisting older people to live independently for longer.

Economic impact of ageing

- Estimating the resources required by an ageing population and exploring how these resources can be provided.
- Understanding the particular needs of the financially disadvantaged and how those with few resources can best make the transition to a positive later life.
- Research into financial independence of older people and their capacity to pay for a healthy and satisfying old age, as well as to manage the costs of increasing dependence and assistance.
- Analysing the impact of the global financial crisis on people's financial plans and retirement intentions and what this will mean for the economy more broadly in terms of support and the current and future capacity of individuals to make a financial contribution towards a sustainable health and aged care system.

Key aspects of an ageing research program

Quality evidence based ageing research is essential for informing policy and practice. To be successful, a comprehensive ageing research program requires a number of key elements. In particular, a successful ageing research program must:

- Be inter-disciplinary to ensure that knowledge gains have value in informing constructive action;
- Encourage participation by key stakeholders (consumer advocate organizations, NGOs, government agencies, industries and services, older people) in the development, conduct, and application of research;



- Emphasize positive outcomes - how to maximize the benefits of ageing as well as how to prevent or ameliorate negative aspects of ageing;
- Be of sufficient quality and appropriate scale and continuity to bring together collaborative teams and build substantial bodies of knowledge, both nationally and internationally;
- Incorporate mechanisms for dissemination and translation of research findings to increase the uptake and application of knowledge by policy makers and practitioners; and
- Include mechanisms for evaluating the social and economic costs and benefits of research undertaken.

Additionally, to ensure that an ageing research program is able to achieve its full potential, the following is required:

- Funding for new analyses of existing datasets in order to make important findings available more quickly and to make better use of the substantial investment in current data collections. This includes resources to make existing datasets more widely available to build emerging researcher capacity in ageing research.
- Establishing protocols for standardised access to administrative datasets on aged care programs to enhance both the quality of aged care research and the expediency in which the research is conducted.
- Funding priority from both the NHMRC and the ARC to support a dedicated research program targeting those elements of critical importance in developing an evidence base to support ageing and aged care policy and programs.
- Support for longitudinal studies analysing existing and future matched datasets to provide information on trends and differences between age cohorts.
- Regular publication by government of key data collections, such as the Australian Institute of Health and Welfare publication *Older Australia at a Glance*.
- Collection and analysis of national cross-sectional surveys (notably by the ABS and AIHW), which provides 'social monitoring' of change, associated with individual ageing, cohort succession, and social change.
- Collection and analysis of national prevalence data regarding conditions such as dementia, social phenomena, such as elder abuse and carer wellbeing to assess the need for and effectiveness of current and future health promotion, policy and program initiatives.
- Funding by government and non-government organisations to support students and emerging researchers in ageing in order to build capacity within the ageing research sector.

Moreover, translating research into policy and practice needs to be a meaningful outcome of an ageing research program, and requires the collaborative efforts of service providers, consumers, policy makers, researchers and funding bodies. For example, the AAG together with Aged and Community Services Australia and the ARC/NHMRC Research Network in Ageing Well recently launched their National Community Care Research Agenda as part of their paper entitled "Researching Community Care with Older People" (a copy of this paper is available at www.aag.asn.au). This involved sector-wide activities to identify pertinent research questions which were then ranked by an expert panel to develop a national agenda for community care research.



To improve the effectiveness of translating research into policy and practice, efforts could be made to empower consumers by supporting efforts such as the Australian Government's Ageing Research Online Portal (www.aro.gov.au) which gives open access to the latest in ageing research, or by facilitating a clearing house specifically dedicated to ageing research. This would be in line with the Productivity Commission's research report into *Contribution of the Not-for-Profit Sector* which recommends:

An evaluation clearinghouse and advisory service, initially focussed on government funded community service effectiveness, should be established. The Centre for Community Service Effectiveness would maintain a portal for lodging and disseminating evaluations, including consideration of their quality, provide training materials on good evaluation practice, and support the undertaking of meta-analysis of the evaluations by relevant experts.
(January 2010: xxxvi)

This recommendation could be extended to include a specific focus on community and aged care services, including gaps in service delivery (e.g., range, choice) and relevant areas for ageing research to ensure that training materials are relevant and good practice established and maintained.

Conclusion

Ageing research must be a major focus within health and aged care reform, and as such should be supported by a dedicated funding stream that not only enables greater opportunities for collaborative, cross-disciplinary ageing research, but also increases capacity in the sector by supporting skills development and career opportunities for researchers. Any research program will also need to have input from a wide range of stakeholders to ensure that research is policy and practice relevant. It is to be expected that the priorities and key tasks will change over time in light of new data, new technologies, medical advances, changing social trends and improved overall population health. It is important, therefore, that avenues of research remain flexible and capable of turning attention to new needs and circumstances as they arise.

The AAG has a strong focus on ageing research and education across many fields. Its members have considerable expertise in both in-depth medical, biological and social research, as well as in cross-disciplinary projects. The Association welcomes the opportunity to contribute to further development of the inquiry into *Caring for Older Australians*, both now and in the future.