



Communities  
& Justice

# NSW Ageing Strategy from 2021 – Have Your Say Survey Report September 2020

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# 1 Introduction

This report is a summary of the general findings of the Have Your Say survey (the survey) of older people in NSW, conducted by the Department of Communities and Justice (DCJ) in May and June 2020. This was to inform the development of the next NSW ageing strategy (the strategy) from 2021.

## Background

The first NSW Ageing Strategy was released in July 2012. It outlined the NSW Government's response to the challenges and opportunities of an ageing population. The strategy was renewed in 2016 to continue the NSW Government's commitment to our increasing ageing population and reflect emerging priorities.

The current NSW Ageing Strategy 2016–2020 is the second Ageing Strategy in NSW and concludes on 31 December 2020. It has provided a framework for a whole-of-government delivery of strategy projects and broader initiatives that support the NSW Government's vision. This vision is for people in NSW to experience the benefits of living longer and enjoy opportunities to participate in, contribute to and be included in their communities.

Ageing, Policy and Implementation within DCJ is developing a new NSW ageing strategy from 2021. To achieve this, a consultation process was conducted with older people and various stakeholders across the state. DCJ consulted with a wide range of older people and stakeholders, including peak bodies and advocates, service providers, local government, government agencies, and the private sector.

Due to the impact of the COVID-19 pandemic on public gatherings, this was undertaken through a series of virtual and targeted consultations, including the Have Your Say survey.

## Survey aims and objectives

The aim of the Have Your Say survey was to identify the priorities and hopes of older people across NSW and their views on the factors and issues impacting them in their ageing.

The objective of the survey was to identify emerging trends and factors impacting older people, to inform the development of a new NSW ageing strategy from 2021.

The survey included quantitative questions to provide a snapshot of seniors in NSW, and qualitative high-level aspirational questions.

## Promotion

The Have Your Say survey was open online between 18 May and 30 June 2020 on the NSW Government Have Your Say website:

<https://www.nsw.gov.au/have-your-say>

It was promoted through the DCJ website, social media and intranet; via an email campaign to a wide range of stakeholders; email distribution to NSW Seniors Card members; and a media release.

The survey included information on the strategy's proposed vision, principles and strategic approach.



*Image from DCJ social media promotion of the survey*

## 2 Survey results

### Our participants

The survey was completed by 4,714 individuals and 50 organisations (see Appendix I, Organisations that responded to the survey).

Approximately 53% of the individual respondents identified as female and nearly 46% male, with almost 1% identifying as other. This is similar to the gender distribution of the broader NSW population.<sup>1</sup>

Approximately 89% of the individual respondents identified as an older person, with 6% identifying as a community member, 2% as a carer and 1.5% as a professional.

In terms of geographical location, 76% of respondents lived in a city, 14% in a major town and 10% in a rural area.

### Age breakdown

The majority of respondents were in the age group 60–69 years (60%). Respondents across each age group were as follows:

- 90+ years: 0.5%
- 80–89 years: 4%
- 70–79 years: 32%
- 60–69 years: 60%
- 50–59 years: 3%
- under 50 years: 0.5%

The spread of survey respondents across the age groups is not reflective of the age distribution across the general population of NSW. This should be kept in mind when interpreting results.<sup>2</sup>

### Specific groups

Some respondents were older people from particular groups or cohorts, and identified as:

- having a disability or chronic health condition (17%)
- being from a culturally or linguistically diverse (CALD) background (10%)
- LGBTIQ (lesbian, gay, bisexual, transgender, intersex or queer) (3%)
- a veteran (2%)
- Aboriginal and Torres Strait Islander (ATSI) (1.1%)

with 65% of respondents indicating they did not identify with any of these groups. As self-identification may be influenced by a range of factors, these figures may

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<sup>1</sup> <https://www.abs.gov.au/websitedbs/censushome.nsf/home/2016>

<sup>2</sup> In NSW, 36.8% of the population is in the 50–59 age group, 31% in the 60–69 year age group, 19.7% in the 70–79 year age group, 10.1% in the 80–89 year age group, and 2.4% over 90 years of age.

not accurately reflect the actual percentages of respondents belonging to each of those groups.

### **Work status**

In terms of their work status, respondents described themselves as:

- retired (57%)
- working part-time (15%)
- working full-time (11%)
- unemployed and looking for work (4%)
- unpaid volunteer work (4%)
- unpaid domestic or carer work (1%)
- part-time student (0.30%)
- full-time student (0.15%)
- never having worked (0.05%).

### **Income sources**

Respondents described their income sources as:

- self-funded retiree (50%)
- income earner (25%)
- age pensioner (20%)
- allowance recipient, e.g. veteran, disability support, sickness, carer (5%).

### **Housing, accommodation and living arrangements**

When asked about their accommodation and living arrangements, 73% of respondents said they lived in a house, 22% in a flat/apartment/villa/townhouse/unit and 3% in a retirement village/self-care unit. The remaining answered being either in a mobile home, boarding house, boat, on rural land or homeless.

In terms of home ownership, 89% owned where they lived with 12% renting.

More than 66% of respondents lived with a spouse or partner, with 25% living alone, 15% with relatives, and 2% with non-relatives.

### **Health**

When asked about their current health, respondents answered that it was:

- good (55%)
- excellent (24%)
- fair (18%)
- poor (4%).

When asked whether they thought their health limited their daily activities, 68% answered that it did not limit their daily activities, and 32% answered that it did.

## Getting around

In indicating how they get around, 88% responded that they drove, with 53% also using public transport, along with 8% each being driven or using driving services. A further 13% indicated they walked or cycled, with 2% using community transport.

## Impact of COVID-19

The COVID-19 pandemic has significantly impacted the lives of older people across NSW in many ways.

Individuals and organisations answered how they were impacted as follows.

Impact	Individual	Organisation
Social isolation	64%	83%
Travel	60%	52%
Difficulty accessing services, e.g. medicine, doctor's appointments, groceries	21%	56%
Employment or business	18%	13%
Health and mental health	17%	50%
None	12%	6%

Responses from older people who identified with specific cohorts (see p.5) reveal marked differences across some groups, particularly in the areas of social isolation, access to services, and health and mental health.

Impact	ATSI	CALD	Disability	Veterans	LGBTIQ
Social isolation	84% (26)	63% (204)	72% (400)	67% (46)	70% (57)
Travel	58% (18)	61% (199)	51% (281)	58% (40)	63% (51)
Difficulty accessing services	29% (9)	27% (88)	33% (183)	22% (15)	22% (18)
Health/mental health	29% (9)	19% (61)	32% (176)	10% (7)	27% (22)
Employment or business	16% (5)	21% (69)	16% (86)	13% (9)	28% (23)
None	6% (2)	14% (46)	10% (55)	13% (9)	10% (8)

The individual responses across both groupings (general and specific) indicate 'Social Isolation' as being the highest impact of the pandemic on older people, followed by 'Travel'. The highest response rate for 'Social Isolation' was from Aboriginal and Torres Strait Islander people.

Aboriginal and Torres Strait Islander people, CALD people, and people with disability rated 'Difficulty accessing services' higher when compared to others.

Responses from older people who identified as LGBTIQ and CALD showed a higher impact on employment than for other cohorts.

Older people with disability rated the highest impact on 'Health/mental health', followed by Aboriginal and Torres Strait Islander people, and LGBTIQ.

### **Learnings and support**

The survey also asked respondents if they had learned or discovered anything new to support them through the pandemic.

Of those who indicated they had, respondents stated they:

- adapted to life online using video communication platforms
- found being social and mentally healthy was vitally important
- continued to enjoy their families and friends and neighbours
- discovered they had to plan and find new ways to have the basics delivered to them, such as food or medicines
- did more of what they like, e.g. sleeping, watching TV, reading, crosswords
- learned new ways to spend their days in isolation, resulting in new activities taken up or old ones reinvigorated, e.g. gardening or cooking
- took up services such as JobKeeper or Telehealth and became more self-reliant
- worked from home and completely changed routines
- exercised, enjoyed their pets and were outdoors more
- demonstrated safety practices, patience and tolerance, and adjusted to the changes directed by government officials
- slowed down to enjoy a cleaner world around them with less traffic and chaos
- reinvented themselves and caught up with things they had been meaning to do, e.g. writing life stories, painting, teach knitting.

Of the 3,014 responses collected, almost 50% stated they had not learned or discovered anything new.

## **Priorities for older people**

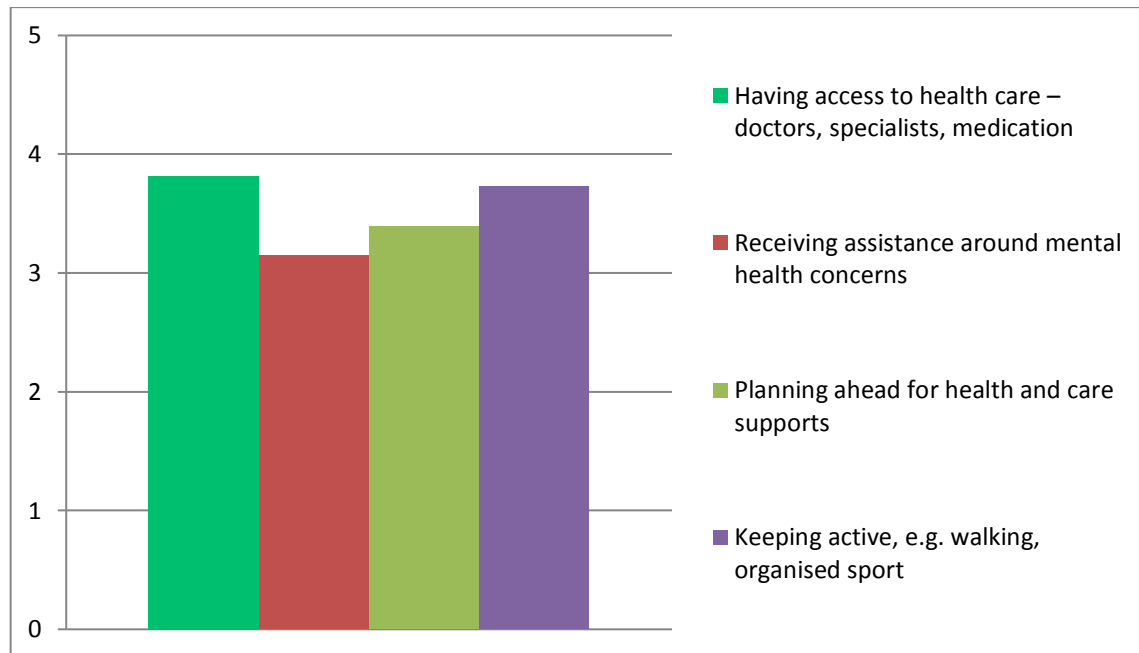
The survey was structured around the five priorities of the current NSW Ageing Strategy 2016–2020. Questions focused on what older people considered important to them under each of the priority areas.

Individual respondents were asked to indicate their priorities using a scaled ranking (with 5 being Very important and 1 Not at all important).

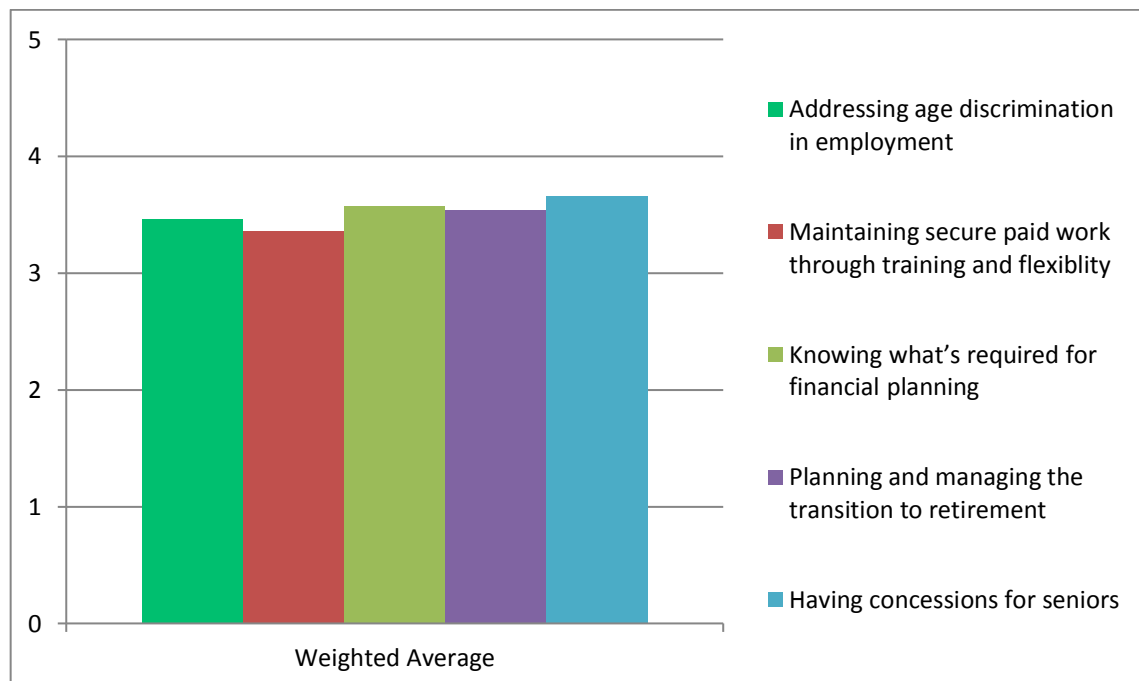
This provided weighted averaged answers on how important they ranked particular elements under each of the priority areas.



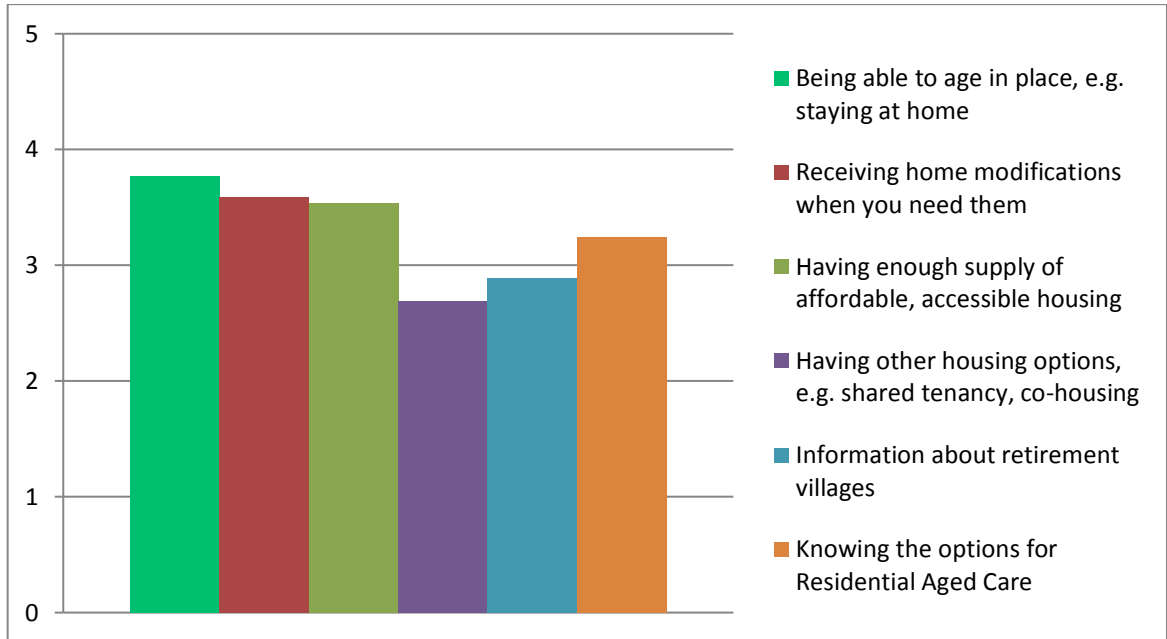
## Health and wellbeing



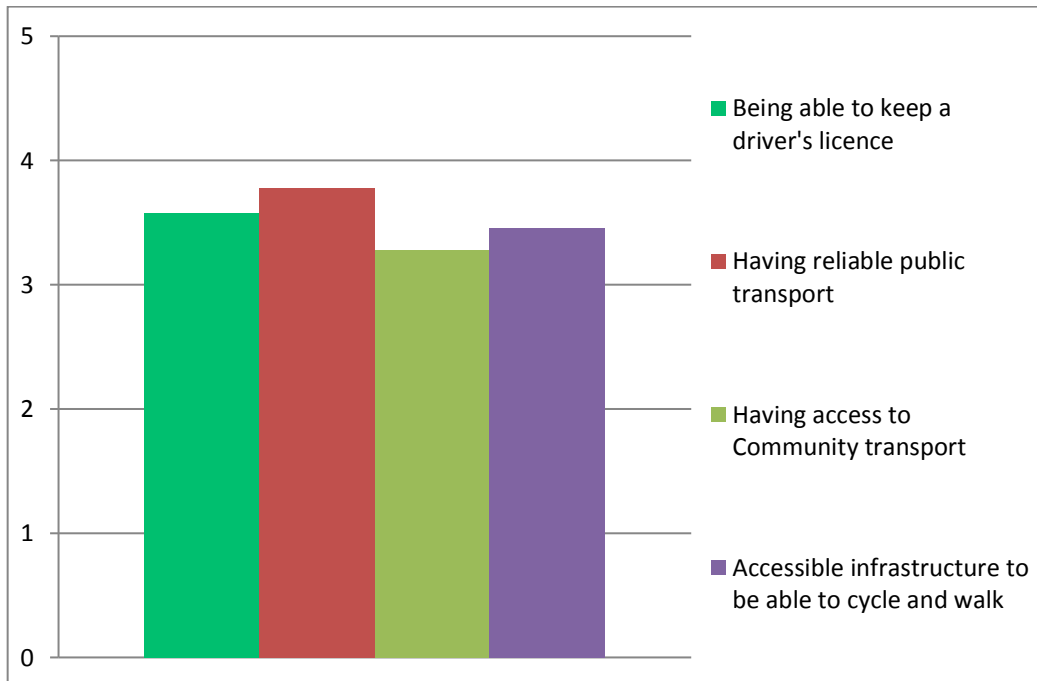
## Working and retiring



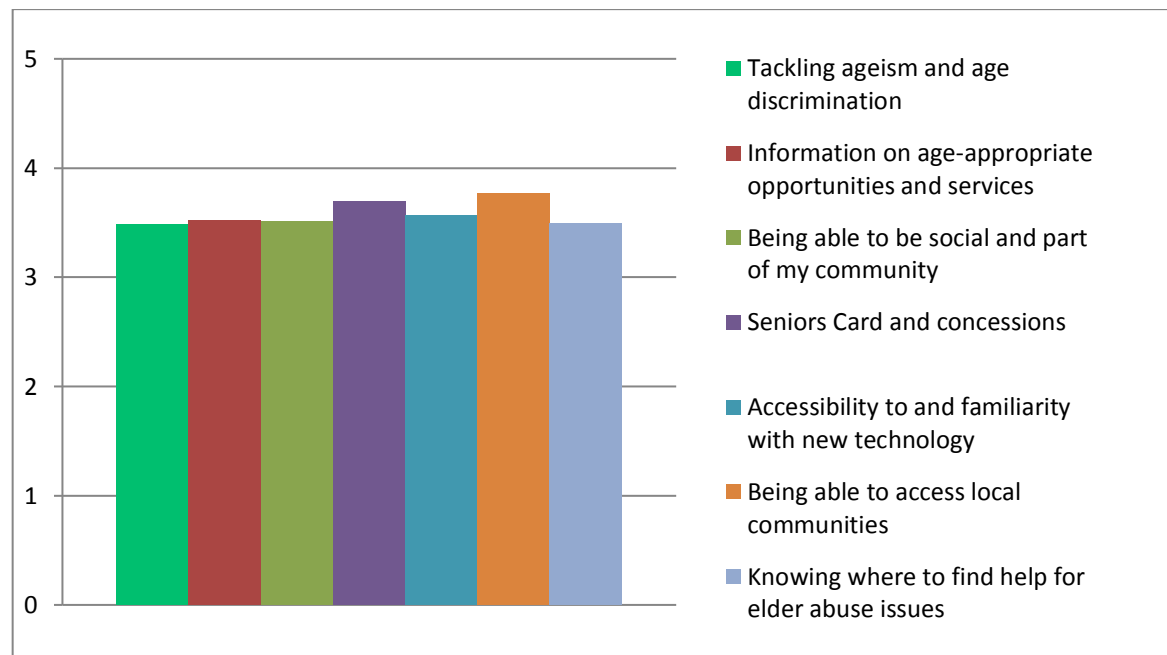
## Housing choices



## Getting around



## Inclusive communities



## Priorities for specific groups, or cohorts, of older people.

When older people from specific groups were asked which priority they considered the most important, they consistently nominated 'Health and wellbeing' first, followed by 'Getting Around'.

Priority	ATSI	CALD	Disability	Veterans	LGBTIQ
Health and wellbeing	84% (26)	90% (294)	94% (519)	93% (64)	91% (74)
Working and retiring	42% (13)	50% (163)	35% (190)	32% (22)	47% (38)
Getting around	58% (13)	62% (203)	69% (382)	72% (50)	70% (57)
Housing choices	32% (10)	30% (98)	44% (187)	30% (21)	46% (37)
Inclusive communities	35% (11)	45% (146)	37% (206)	32% (22)	49% (40)

Aspirational responses were also encouraged for each theme with the following open-ended questions testing the results:

- What's working well?
- What's not? Why?
- What can be done to make improvements?

Section 3 provides a more detailed analysis of these responses.

### 3 Comments on priority areas

Participants were asked what could be done to improve certain aspects of their life. Questions were framed under the current NSW Ageing Strategy 2016–2020 priority areas of health and wellbeing, working and retiring, getting around, housing choices, and inclusive communities. While over 4,700 surveys were completed, not all survey respondents provided comments on each priority.

In addition, many comments addressed multiple issues, and have been categorised under more than one theme in the following analysis.

#### Health and wellbeing

A total 2,662 comments related to what could be improved for health and wellbeing. Given the timing of the survey during the COVID-19 pandemic, the majority of comments identified COVID-19 as a major issue, with respondents voicing concern over restrictions and general health and safety during the pandemic.

*Maintain these online programmes as restrictions ease so that the option to exercise and be entertained at home continues.*

*Perhaps this period has shown both governments and others what can be done in a crisis and to continue implementing these changes for the good of all.*

The next two most common themes were the importance of having support and information regarding their own health and wellbeing, and the need for accessible and affordable health services.

Respondents asked for a focus on preventative health and early intervention. Several suggested that opportunities for low-cost physical activity programs were important, especially in areas of socio-economic disadvantage.

*Support older people to have active and healthy lives through enhanced knowledge and skills, and by creating environments that support healthier choices.*

*Advice about how to stay well, stay healthy and involved and build individual immunity and self-care.*

One respondent commented that due to the pace of development, liveability in our communities has been reduced, thus impacting on physical and mental wellbeing.

*The increase in density and subsequent loss of greenspace impacted their willingness to undertake outdoor exercise and social connectedness in their suburbs.*

Feedback about accessible and affordable health services included respondents wanting more access to the Commonwealth Government Health Care card, more doctors in rural areas, and free access to x-rays, ultrasounds and radiology. Discounted physiotherapy, chiropractic and dental services, and the possibility of dedicated professionals to check in on the wellbeing of older people were also suggested.

Another respondent suggested the development of specialist hospital programs to provide out-patient care would be beneficial. Mental health services for older people was also identified by several participants.

*There could also be an increased focus on, and inclusion of, older people in other government initiatives around issues that impact young and old alike. For example, initiatives around mental health regularly target research, interventions and campaigns around younger populations, whereas older people also experience significant mental health challenges.*

There were requests for better communication across government services in addition to access discussions.

*There can also be improvement in communication between departments and governments responsible for different types of services (e.g. aged care, primary health care, hospital care, allied health, social services, etc.). This could incorporate the provision of better information for older people to allow them to navigate the system, and be aware of and access all the services that they need and are available to them regardless of which layer of government is responsible for providing the service.*

The final main themes relating to health and wellbeing were the importance of having good communication with older people, and of involving older people in the development of services. Respondents emphasised the importance of respect and effective communication with older people when developing, implementing and providing services.

*Start with recognising Aboriginal elders and adopting their practice of respecting older people.*

*Ageist behaviour and language in the health sector could be addressed by modifying curricula that challenges bias and encourages the use of inclusive communication strategies with patients.*

*Ongoing involvement of older people in advisory committees and accredited training in the hospital setting is also an option. (The inclusion in these committees of older people living with dementia and other age-related conditions was also recommended.)*

*Using more inclusive and relevant messaging that incorporates older people would help to ensure that these initiatives and campaigns capture all relevant sectors of the population and refer them towards appropriate services and supports appropriate to their life-stage.*

## **Aged care**

Aged care was a recurring theme and the feedback on this will be shared with the Commonwealth Government agency that has oversight of aged care in Australia. Respondents commented on:

- the quality of care in residential aged care facilities
- staffing levels, qualifications and diversity
- fees and affordability
- access in rural and regional areas
- choice, including for diverse population groups
- in-home support.

## Working and retiring

A total of 2,340 comments related to what could be done to improve working and retiring. Financial wellbeing was the most common theme, followed by employment.

### Financial wellbeing

Comments on financial wellbeing covered a range of issues. The majority related to financial security for older people in retirement, including specific comments about financial security for Aboriginal people, self-funded retirees, women and people who leave work before retirement age.

Numerous participants expressed concerns about their own financial situation.

*Being able to access affordable financial advisors for financial planning toward retirement.*

*Allow self-funded retirees to obtain benefits that aged pensioners get, like discounts for health care and medicines, reduced car registration.*

*At a government level, I think a greater awareness of the gender inequality that still pervades the system (and, while we're at it, an awareness of the impacts of racism, homophobia, transphobia and ableism would be good too.) There were suggestions that this may include allowing Aboriginal people to retire early, and paying super to carers, including stay-at-home parents.*

*More attention to encouraging people to be self funded retirees.*

*Pay self funded retirees a pension. Give them a concession card, appreciate them... We have paid our dues, not squandered our money, and saved for our retirement.*

Many participants commented on superannuation, concessions, pensions, income tax and income support, including eligibility and payment levels for the Age Pension and JobSeeker Payment. This feedback will be shared with Commonwealth Government agencies that have oversight of these issues.

### Employment

Comments relating to employment were evenly spread across the following themes:

- discrimination and negative attitudes towards older people in the workplace wanting and/or needing to work for as long as possible

*Set up job sites specifically for employers seeking older people to fill permanent and part time positions.*

*Working with Unions on Industrial Relations reform around ageism and sexism in the workplace and employment generally.*

*The systems in place which should prevent ageism aren't working.*

- working conditions (flexibility, leave provisions, other provisions)

*Better opportunities for people to transition from work to retirement by having reduced hours.*

*People who work in a physical trade or areas deserve to be able to retire / receive a pension at a reasonable age as physical work wears out the body way quicker than sitting in an office.*

- work opportunities (internships, location)

*More security for older Australians in the workforce in regional areas.*

*Provide incentives for businesses to employ an agreed ratio of experienced / senior workers in all applicable industries.*

- incentives to work.

*Allowing aged people to work more and earn more without penalty than they can at present (although this probably is more a federal matter).*

*An encouragement to older people to stay in the workforce would be to revise the Pension Bonus Scheme so that once qualified, work days could be reduced so seniors can still contribute while upholding family commitments and interests to better prepare them for eventual retirement.*

Respondents also commented on the importance of volunteering.

*Look at ways to extend and promote volunteer activities for retired people who have time to provide experience, knowledge and time to aid their community. This could include support to transition from employment to community-oriented activities and volunteering.*

## Housing choices

A total of 1,970 comments related to what could be done to make improvements regarding housing. Over a third of these addressed the need to improve government assistance with downsizing incentives, reducing stamp duty, pension increases, financial support for help with home maintenance, and concessions for self-funded retirees.

A recurring comment was that those who prepared well for retirement were not rewarded as they don't receive the same entitlements. The confusing nature of the current system and its differences depending on one's personal circumstances was also seen as an issue.

*A central agency where you can sit down with a case worker who can steer you through the process.*

*Housing incentives by government to make owning your own home more achievable. Banking operatives to reduce high fees in applications, interest rates in some cases and early mortgage payouts.*

*If downsizing, being able to keep any capital gains free of tax or the pension asset test and a reduced or reduced sale tax if the property to be purchased is the primary place of residence.*

*I'm not sure I have the answer but I have relatives in both circumstances – self funded and pensioners and the rules are so very different – it's very confusing.*

The next most common theme was improving housing options. This included co-housing, changing legislation to have a range of housing, more information on housing choices, building more different types of dwellings, and downsizing.

*Need more housing options that are suitable for Aboriginal people, including aged care homes, especially culturally appropriate for elders and also for younger generations to learn. Younger people need the yarning circles as much as elders.*

*Possibly force developers of multi-storey developments to include a certain number of apartments on lower levels (in case the lifts break down!) designed for the elderly, and which can only be sold to, and occupied by, people aged 60+. These apartments would have to meet design requirements... By including accommodation for older people within normal developments, you achieve an age mix and help older people remain in their areas.*

*Different types of accommodation options for a wide range of lifestyles and needs. Thoughtful planning of these and inclusion.*

Many respondents addressed commonwealth-related issues such as aged care/nursing home facilities and retirement village issues/choices. These comments will be shared with the relevant Commonwealth Government agencies.

Comments relating to housing choices were evenly spread across the following themes:

- housing affordability

*Increased supports for older people to... access housing options in the form of older person housing grants or other housing purchase discounts, in markets outside of Sydney, regardless of if they have owned a property before or not. This would help to support both older people to relocate and regional areas with their local economies etc.*

*Invest in public housing, ensure that all apartment blocks being approved for construction include affordable housing, change to way renters are viewed to make the power between renters and owners more equitable.*

*Not everyone owns their own house – which the government seems to put such high priority on – what about assistance for renters?*

- independent living and staying in one's own home, including home modifications

*Living independently for aged people needs a lot of assistance such as changing bed linens, gardening, meals on wheels, transport services, companionship or visitors to solve one's loneliness or isolation (especially to those who are unable to move or walk around easily anymore).*

*Inexpensive assistance such as lawn and garden care. I also think a maintenance team that can be on call for assistance with changing light bulbs and other small tasks that are dangerous and difficult for aged persons.*

*Receiving home modification when required as a reduced rate. (Some respondents also suggested specialist training for the construction industry so they can better understand and meet the needs of older people.)*



- accessibility of services.

*More information and options through different media be provided to the non English speaking elderly... when they still able to plan ahead.*

*Planning laws should insist on a higher proportion of well-designed accommodation options for older people, not necessarily retirement villages, but thoughtful SEPP55 developments IN THE AREAS WHERE PEOPLE CURRENTLY LIVE!*

*Ensure there are medium density housing options for older people near public transport and shopping / service facilities.*

## Getting around

A total of 1,977 comments related to what could be improved in getting around. The most common theme was the accessibility and improvement of public transport, followed by the infrastructure needed to be able to get around.

Respondents also noted that greater consideration should be given to the mobility needs of older people with disability, e.g. people using wheelchairs or with generally limited mobility needs, as well as ensuring older people feel safe in their communities, including at night.

*Adequate, affordable public transport.*

*Continue to improve foot walks and accessibility good for ALL the community!!  
Protect the train services and local bus services in regional areas, there value is not only a measure of dollars and cents revenue.*

Respondents also commented on:

- the importance of maintaining and extending the Gold Opal card and Travel Card

*Retaining Seniors Gold Opal card with NO price increases. Preferably add extra level, say over 70 years, should be free.*

*Regional Travel Cards permanently available for all seniors especially those seniors with disabilities.*

- financial assistance or concessions for older people with private vehicles

*Make registration for owned vehicle free, as it is for pensioners.*

*Rebate on car rego, insurances and petrol, and cheap electric cars for seniors.*

*Perhaps seniors could get discounts or exemption from tolls, parking station fees and parking meters.*

- the links between transport and health and wellbeing

*Develop strategies which support improved transport access of older people to key destinations such as hospitals, health clinics and shopping centres.*

- the transition from being a driver to non-driver

*Having affordable options other than expensive taxis or Uber for people who can't drive.*

Some comments suggested providing concessions to those who are carers could help in this regard.

*It is hard but it happens to all of us as we age so there will come a time when I will hand in my Licence and I know I will hate to have to do this but if I am a danger to other road users then so be it.*

- improvements needed in rural and regional areas.

*Major government investment in public transport OUTSIDE of Sydney.*

*A recognition that the more rural the area the more the need for affordable and sufficient community transport.*

*Participants also responded with improvement ideas around parking, safety on the road with more police, and encouraging the greater use of hybrid or electric cars.*

## Inclusive communities

A total 1,455 comments related to what can be done to improve communities and make them more inclusive. Almost half of these comments spoke to issues of ageism and discrimination, and the need for respect for older people (including respect for their experience and contribution) and improving social inclusion and community involvement.

This theme linked with others, such as having the financial means to attend activities or to be able get around, and having access to information and services to feel included in their community.

Essentially, older people want access to information that allows them to participate in community events they can travel to. They also want to feel that their experience is valued.

*Challenge the assumptions that surround ageing. This requires a crossover between the different generations. Ageism works in all directions. Interaction between the young and old in schools, at community activities to assist in breaking down assumptions.*

*Anti-ageism campaigns, more public transport where it is needed, improving physical access with ramps to buildings, creating social opportunities for men, especially men who are not into sheds, advertising them promoting them and making them fun, appointing a minister for loneliness.*

*As a society we need to value our old age families.*

Other areas in which respondents wanted improvement included:

- social isolation

*Opportunities for older and younger people to interact... Provide opportunities for older people to participate in and connect with their communities in order to alleviate isolation and loneliness.*

- safety in the community

*People will have to be confident they can go out to a public place and be safe to meet people.*

- family relationships

*We need to get better with our use of technology for contact with family and friends.*

*Better supports for people who do not have close friends or family to provide support. (One suggestion was a phone service that regularly rings designated vulnerable people.)*

- continued learning.

*Provide more opportunities for university level learning for a mature cohort and without exams.*

*More community based activities, learning groups.*

In adapting to the changes as a consequence of the COVID-19 pandemic, many respondents commented on how technology played a large part in being included and excluded.

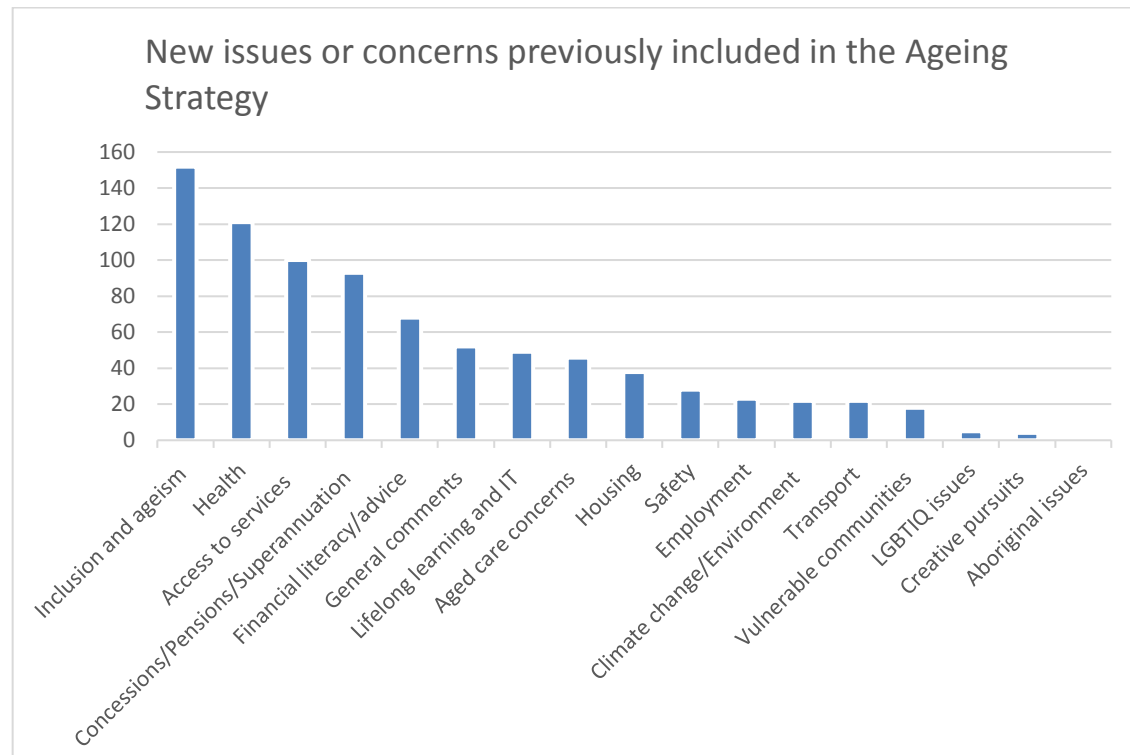
*Continued support and expansion of the Tech Savvy Seniors program to increase knowledge and usage of new technology. Further investigation and investment in providing access to technology to disadvantage groups or areas is also needed.*

*We rely heavily on the internet for social interaction, information and entertainment. More affordable internet and internet support would be a great asset to seniors.*

*Realise several seniors still want face to face direct or over the phone contact. Do not penalise them for having a paper bill or not having an email address.*

## 4 New issues for older people

Participants were asked to include new issues or concerns not previously included in the NSW Ageing Strategy 2016–2020. A total of 999 responses were received and thematically examined. These are represented in the following graph.



It was evident that none of the issues identified were new issues, and they had all been identified in the strategy. That in itself suggests there is continuing support for the strategy.

Some comments specifically related to the strategy. Others expressed general support for responses to the challenges and opportunities of an ageing population. These comments included words of encouragement, ideas for improvements, and confirmation of the need for the strategy.

*The 2016 to 2020 strategy had many excellent programs addressing the priority domains, and it also discussed in the introductory material the need for connection and coordination across jurisdictions (e.g. Federal for Tax, super, Aged Care, etc.; states for health and community services, housing etc., local for amenities, local programs). However, people still fall through gaps between the systems or have trouble navigating to find the supports they need. We would like to see included in the new strategy a clear roadmap and concerted effort to connect the systems from within all layers of government, and also greater effort to assist people to be aware of and navigate seamlessly through the systems (social welfare, health, housing, aged care).*

*Thank you for providing this opportunity to respond and always allow aged people to offer their input on a routine basis, because as one's circumstances change as we age so too might the input we need to provide at that stage.*

*Action. Having strategies does not make any difference if they are not translated into actions.*

Some respondents did not support the strategy, with comments demonstrating scepticism about the strategy or the resourcing behind it.

*Any strategy is useless without detailed and achievable tactics.*

*I'm disappointed with this survey: it seems to be designed to 'find out' what the NSW Government believes it already knows – not the other way round.*

*Stop dumbing down your questions and solutions.*

*The strategy as presented is very generic. Nothing new nothing that suggests there will be the sort of changes that are needed for everyone.*

Many of the identified issues were common across all cohorts.

Responses relating to specific groups or cohorts are summarised as follows.

## Aboriginal and Torres Strait Islander older people

- *Help Aboriginal people stay connected with their communities and people through travel to Country.*
- *Create spaces for yarning circles through culturally appropriate aged care facilities.*
- *Oversee nursing homes – too many elderly dying because of lack of care and neglect.*
- *How to report elder abuse when you see it happening, and knowing that your name is kept strictly confidential.*
- *Dental care is important because bad dental care is causing ill health and cannot afford to see private dentist.*
- *Education – learning new things being part of something bigger.*

## CALD older people

### Services and concession

- *Vulnerability of older people to being ripped off by tradespeople.*
- *Discount for CTP and other car insurance.*
- *NDIS – help with navigation.*
- *Comprehensive information package about what is available as they age; financial information about pensions and superannuation.*
- *Advocacy for older people dealing with different agencies (and possibly tradies); central location for referral to appropriate services, or an advocacy service when dealing with agencies like Centrelink.*

## **Social connection**

- *Need information on how to get volunteering roles.*
- *Not enough 'connectivity', given there will be more pandemics in future, need more strategies to keep older people connected, e.g. possible online choir.*
- *Women's Sheds as well as men's – can alternate using the space.*
- *Lifelong learning should be affordable.*
- *Some older people don't have any family – no children or siblings – very lonely.*

## **Employment**

- *Encourage businesses to take on older people.*
- *Finding work is hard, but also concerned about taking opportunities from younger people.*
- *Have much to offer so want key roles and meaningful work.*

## **Age/race discrimination**

- *Get serious about age discrimination! There is more diversity now, so should not pigeon hole or stereotype anyone.*
- *Plenty of brain power out there: use older people as mentors.*
- *Utilise the experience and wisdom of the elderly for the benefit of the community.*
- *Educate younger people about what older people face.*
- *Don't treat us as baby sitters for our grandchildren only.*

## **Health**

- *How will government protect older people from future pandemics?*
- *Need information in other languages.*
- *Need culturally appropriate services and culturally specific aged care.*

## **Other**

- *Environment and environmental regenerations.*
- *Adult children are being made guardians but don't know what this means – need to be better informed before sign.*
- *More financial support for carers.*
- *Elder abuse – concern at lack of NSW jurisdictional oversight, and concern about family violence generally.*

## Older people with disability

### Services and concession

- *Financial subsidies for self-funded retirees.*
- *Need more or improved services; telehealth services – long waiting lists.*

### Getting around

- *Suggestions for improved infrastructure, including footpaths and improved transport.*

### Information

- *Access to information about services.*
- *Need local papers for local information.*
- *Justice and legal advice.*
- *Companion card and peer support program; how to access meaningful volunteering.*

### Discrimination/respect

- *Ageism exists and we need strategies to increase respect for older people.*
- *Need better technology (including NBN) or classes for older people.*

### Other

- *Lifelong education is important.*
- *Need changes voluntary assisted dying legislation.*
- *Need action about global warming/environment.*
- *Weekly visits to check on vulnerable older people and more care for 'invisible' older people.*

## Older veterans

### Getting around

- *Suggestions for improved infrastructure, including footpaths.*

### Information

- *More information online.*
- *Registry of skills and talents that can be shared in local area.*

### Social groups

- *To make new friends.*

### **Services/concessions**

- *Option of face to face services.*
- *Discount on insurance costs for home owners.*

## **LGBTIQ older people**

### **Technology**

- *More opportunities for older people to learn how to use technology to keep in touch, access information and access services.*

### **Strategies to support diversity and promote inclusion**

- *Information prepared and shared appropriately.*
- *Inclusive practices in aged care; promote use of advocates.*
- *Ensure information is not just geared toward heterosexual couples.*

### **Support services**

- *More cost of living support.*



## 5 Other comments

Additional comments also focused on:

- consultation with older people
- the diversity of older people
- issues in rural and regional NSW
- aged care services.

### Consultation

'Being heard' was a resounding theme in the general comments. These comments supported consultation with older people and highlighted the importance of genuine and inclusive consultation.

### Diversity

Diversity was a recurring theme across the comments made about specific priority groups, as well as comments about improvements in inclusion.

Respondents commented on the need to be inclusive of diverse groups. Some examples of diverse population groups were identified and have been included throughout this report. These were:

- Aboriginal and Torres Strait Islander people
- people from culturally and linguistically diverse backgrounds (CALD)
- Lesbian, Gay, Bisexual, Transsexual, Intersex and Queer people (LGBTIQ)
- people with disability
- carers
- veterans.

### Rural and regional NSW

The experience of older people in rural and regional NSW was also a recurring theme, with 15% of respondents linking their experiences of the availability of transport, services, retirement villages and employment, to living in rural and regional NSW.

## 6 Next steps

This report provides a summary of the Have Your Say Survey 2020.

The contributions of respondents have been recorded. The full range of ideas, experiences and perspectives received from this and other consultation activities will be fed into the next NSW strategy for seniors from 2021.

DCJ will also correspond with Commonwealth Government agencies about the feedback on income support, superannuation and residential aged care.

## 7 Summary

*Older folk are still rational human beings who deserve respect and not being treated as village idiots or ignored as 'non-beautiful' people.*

'Health and Wellbeing' was consistently ranked the most important of the current strategy's priorities, followed by 'Getting Around'.

Within the existing priorities:

- having access to health care
- having seniors concessions
- being able to age in place with reliable and accessible public transport, and therefore being able to access local community locations

were deemed highly important. This has been reflected in the section, 'Comments on priority areas'.

Older people recorded significant challenges with social isolation and travel arising from the impact of the COVID-19 pandemic. Just over 50% said they had learned or discovered something new to support them through the pandemic.

In the 'New issues' section of the survey, inclusion and ageism comprised the highest responses, followed by health, access to services, and financial aid in the form of concessions. While these were raised as 'new issues', all were reflected in the current strategy, which suggests support for the priorities of the strategy.

There were also new specific issues raised by some of the identified cohorts, including a need for increased cultural appropriateness with respect to housing, retirement villages, and activities.

## 8 Appendix: Organisational respondents

- AASHA Australia Foundation
- ACON Health Limited
- Anglicare Village Castle Hill
- Australian Seniors Computer Clubs Association
- Australian United Pensioners Group
- Bobby Goldsmith Foundation
- Chester Hill Neighbourhood Centre
- Council on the Ageing (COTA) NSW
- Dementia Australia
- Dementia Outreach Service
- EastGate Retirement Village
- FamilyVoice Australia (NSW)
- Focus Home Care & Disability Services
- Fusion Culture Group
- Halliday Shores Retirement Living Pty Ltd
- Harrington Senior Citizens Association
- Home Instead Senior Care Wollongong
- IT 4 Retirees Pty Ltd
- Lifeline Macarthur
- Magnolia Gardens Retirement Village
- Maltese Community Council of NSW Inc.
- Manning Support Services Inc.
- Marumali
- Mental Health Carers NSW
- Mingara Indoor Bowls Club
- NSW Elderly Suicide Prevention Network
- Office for the eSafety Commissioner
- RSL LifeCare at Home
- Seniors Rights Service
- Social Futures
- South Western Sydney Local Health District
- Strathfield Ratepayers & Residents Association
- Sydney Local Health District
- Sydney Region Aboriginal Corporation
- Tender Loving Cuisine Australia Pty Limited
- The Manor Retirement Village & Aged Care
- Tumbarumba Men's Shed
- United Hospital Auxiliary
- Uniting
- UNSW Ageing Futures Institute
- Urban Development Institute of Australia NSW
- Walka Grange Lifestyle Village
- Walking for Pleasure
- Woodlands Retirement Village Ltd
- World Saiva Council Australia