

Older people

City of Port Phillip Health Profiles

Worldwide, people are living longer, bringing new opportunities for older people to take on a greater role in contributing to and nurturing their communities; and creating new challenges for the provision of social, political economic and health delivery systems that meet the needs of older people. Ageing affects people in different ways. Many older people experience good health and wellbeing as they age, while others experience declines in mental and physical capacities and require significant help from their families and communities.

Who lives in our municipality?

- People aged 65 years and older make up about 11.5 per cent of the resident population of Port Phillip, compared to 15 per cent across the state (Australian Bureau of Statistics, 2016; Department of Health and Human Services, 2019). Statewide, this age group is forecast to triple in population size by 2058 and make up a higher proportion of the total population (Department of Health and Human Services, 2019).
- Over 40 per cent of older residents were born overseas. Greece, the United Kingdom, Italy, Ukraine, and Poland are the most common overseas birthplaces. Compared with Greater Melbourne, a slightly higher proportion (64.2 per cent) speak only English at home (vs 62.8 per cent in Greater Melbourne). Other than English, Greek, Russian, Italian, Polish and German are the most spoken languages.
- People aged 65 years and older living in the City of Port Phillip are increasingly more likely to have a formal educational qualification (45 per cent vs. 33.7 per cent in 2016 and 34.8 per cent vs. 27.9 per cent in 2011) and be employed than their peers across Greater Melbourne.
- A higher proportion of people aged over 65 years live in lone households (35.1 per cent in Port Phillip compared with 24.4 per cent in Greater Melbourne).
- Compared with Greater Melbourne, a higher proportion of people aged over 65 years are living in dwellings that are privately rented (10.1 per cent compared with 7.3 per cent) or social housing (10.7 per cent compared with 3.0 per cent).
- This group is significantly more likely to be living in medium or high-density housing compared to their Greater Melbourne counterparts (84.3 per cent vs. 23.4 per cent). In 2016, 66.3 per cent were in households with an internet connection (in line with proportions in Greater Melbourne at 66.9 per cent).

Older People - City of Port Phillip Health Profiles



• Of the approximately 11,600 residents aged 65 years and over, more than 5,000 (under half) are receiving the aged pension in the City of Port Phillip (City of Port Phillip, 2020).

How are older people in our municipality tracking?

- In 2016, 1,918 people aged 65 and over (16.5 per cent of the resident population aged 65 and over) were recorded as needing help in one of three core activity areas: self-care, mobility, and communications. This is lower than the proportion for the Great Melbourne region of 28 per cent.
- A study commissioned by Dementia Victoria in 2017 estimated that 1,197 Port Phillip residents were living with dementia in 2016 and that this would increase more than threefold by 2050 (NATSEM, University of Canberra, 2016).
- In Victoria, 10 per cent of people over 60 experience **chronic loneliness** (Department of Health and Human Services, 2019). Living alone is a key risk factor for mental ill health. Whilst data on social connections and loneliness is limited, the City of Port Phillip has a high proportion of older people who live in lone households (35.1 per cent in Port Phillip compared with 24.4 per cent in Greater Melbourne) although this proportion has remained stable over time.
- The relatively high proportion of older people living in rented premises or social housing, is a trend that requires monitoring (21.4 per cent are currently renting including 10.7 per cent in social housing vs. 10.7 per cent of Greater Melbourne residents aged 65 years and over or which 3.0 per cent are in social housing). In an uncertain economic climate, and with projected growth in the population of older people, there is potential for more older people to be at risk of losing access to adequate housing and economic disadvantage.
- Elder abuse is one of the worst manifestations of ageism and inequality in our society, and most commonly occurs within the family. Whilst elder abuse is believed to be greatly underreported, the World Health Organisation estimates that it affects between 1 to 10% of older people worldwide. Whilst data on the prevalence of elder abuse across Victoria is unavailable, Victoria Police, Age Care service providers and family violence practitioners identify elder abuse as a significant and growing issue, which must be addressed (Department of Health and Human Services, 2019).

How do outcomes vary for different population groups?

 Overall, in 2018, Australians aged 65 and over lost more than 1.8 million disability-adjusted life years due to premature death or living with a disease (Australian Institute of Health and Welfare, 2018).

Older People - City of Port Phillip Health Profiles



- The highest disease burden was among 65 to 69 year olds and older populations lost relatively fewer years1.
- The disease burden is relatively evenly distributed between males and female, with males accounting for just over half (51 per cent) of the burden (Australian Institute of Health and Welfare, 2018)
- People who are of ATSI backgrounds have lower life expectancies (in 2012 the life expectancy for ATSI males was 69.1 years vs. 79.7 for non-ATSI males and 73.7 years for ATSI females vs. 83.1). (The health and welfare of Australia's Aboriginal and Torres Strait Islander people, 2015) For this reason, the term older person encompasses Indigenous people aged over 50.
- Older people who are GLBTIQ+ are at a higher risk of loneliness and less inclined to enter mainstream services because of concerns they will face discrimination. This can lead to poorer health outcomes (Gerard Mansour, Commissioner for Senior Victorians, 2016)
- Older people have become more likely to undertake roles and responsibilities related to being a carer. Older carers are at a high risk of social isolation and loneliness (Gerard Mansour, Commissioner for Senior Victorians, 2016). Additionally, older people make up 11.5 per cent of the resident volunteer population in Port Phillip.

How has COVID-19 affected outcomes for older people?

- The pandemic has put a spotlight on how residential and aged care facilities can be particularly vulnerable settings to health risks.
- Social distancing policies may heighten risk factors related to isolation and loneliness among older populations, which can lead to mental health issues and cognitive decline.
- For some older people, the pandemic has provided opportunities to move online and take advantage of connecting with families and services virtually. For others, the digital divide has been exacerbated, putting them at heightened risk of isolation.

Why is supporting older people important for our community?

- People are living longer and the proportion of older people in the population is growing.
 The vitality of the local communities and economies are linking the extent to which older people's participation is fostered and encouraged
- Older people have a right to participate and be included in society. The stories, experiences
 and wisdom of older people contributes to a civil society and can help build community
 values of inclusion, participation and respect.

¹ Disease burden is the impact of a health problem as measured by financial cost, mortality, morbidity, or other indicators. It is often quantified in terms of quality-adjusted life years (QALYs) or disability-adjusted life years (DALYs), both of which quantify the number of years lost due to disease (YLDs).

Older People - City of Port Phillip Health Profiles



- Many older people are active workers, helpers, carers, parents, and grandparents. Nearly
 40 per cent of Victorians aged 65 to 85 also volunteer for their communities (Department of
 Health and Human Services, 2019)
- Providing services that support older people creates new opportunities for them to make incredibly valuable contributions to our communities
- Preventative approaches to create age-friendly communities that increase healthy behaviours and social participation will prevent or delay the onset of many illnesses.

What is the role of Council in contributing to outcomes for older people?

Services for older people operate in a complex and rapidly changing environment. Over the last ten years, numerous Commonwealth and State inquiries have considered reforms and made needed changes.

Victorian local governments are required to promote the health and wellbeing of all its residents, including older people. In addition to mandated responsibilities, over the next three years Port Phillip has the opportunity to make a more substantial contribution to outcomes for older people in the municipality by:

- Co-designing policy that sets out the aspirations and needs of older people in our municipality and principles for what services Council's should provide
- Supporting opportunities for older people to participate in community life, including the Senior's Festival and the Older Persons Consultative Network, the seniors register and Linking Neighbours Program and programs that address the digital divide.
- Providing home and community care services including the community bus and community meals that meet the needs of our community and align with changes resulting from federal aged care reforms
- Providing community and recreational facilities and funding for community organisations to support the needs of people of all ages and background to socialise, be active, and contribute to community life
- Providing financial support for people who are asset rich and income poor through rate payment plans and pensioner rebates
- Maintaining Rainbow Tick accreditation for home and community care services to ensure that they are responsive to and supportive of the needs of GLBTIQ+ people
- Implementing workforce training and create referral pathways to family counselling and mediation, and financial counselling for those subjected to elder abuse
- Supporting the work of our regional elder abuse prevention network to raise awareness and identify opportunities.



Who are our partners?

In order to facilitate a comprehensive, consistent and whole of community approach to ensuring equitable outcomes for all older people Council partners with community organizations and other levels of government to deliver community interventions. Some of our key partners include:

- Local residential aged care providers
- Department of Health and Human Services Office of Housing
- Community health care organisations
- Commonwealth My Aged Care
- Local CALD community groups
- Elder Abuse Prevention Network
- Council of the Aging Victoria
- Seniors Rights Victoria
- University of the Third Age U3A Port Phillip
- Port Phillip Life Activities Club
- St Kilda and Port Melbourne Probus
- Port Phillip Men's Shed Association
- Community centres and Neighbourhood Houses

What may change over the next five years?

- Commonwealth aged care reforms in Victoria, which may include changed funding model and new accountability requirements will require Council to determine its role in direct service delivery and how the needs of the most vulnerable are met under the new model.
- The outcomes of the Royal Commission into Aged Care may give a new focus to the type and quality of service provided to people as they age and/or require assistance to continue to live independently at home and in the community.
- The separation of Assessment Services and Direct service will be further embedded in a new model and this may lead a redefining of Councils role in advocacy and in service navigation.

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Older People - City of Port Phillip Health Profiles

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