Eurobodalla Positive Ageing Strategy 2009 – 2018

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I am proud to present the Eurobodalla Positive Ageing Strategy, Eurobodalla Shire Council’s ‘local action on ageing’ document for the next ten years. During that period, we expect the shire’s population to grow and age and that these changes will present us with a number of challenges and opportunities. This Strategy has been designed to assist Council to meet these.

It identifies the factors that affect seniors and recommends actions under a range of themes to ensure that the Eurobodalla remains a healthy, active and age-friendly Shire.

Eurobodalla Shire Council is proud of the way it plans for the future and the Positive Ageing Strategy provides us with a strategic plan for a future that includes our older citizens.

You will find the thoughts and feelings of local seniors are captured in the Strategy. Most seniors say they feel safe in their community and believe that the community ‘feels like home’. There is also a strong feeling of pride and respect for the Shire and a shared responsibility to improve the community by getting together to solve common problems.

On that note, seniors living in the Shire have a wide range of skills and knowledge that is of great benefit to our community. At Council, we continue to work to ensure that we provide a community where the participation and contribution of seniors is welcomed and valued.

Fergus Thomson
Mayor, Eurobodalla Shire Council
November 2009
Introduction

Eurobodalla Shire Council has chosen to play a lead role in senior’s affairs in the shire and is well placed to listen and respond to the needs of seniors. Council also has a significant influence on the design, development and maintenance of urban areas, the environment, community facilities, services and resources. Council is committed to improving wellbeing of older residents. The Eurobodalla Positive Ageing Strategy captures the thoughts of seniors, identifies the factors that affect them and recommends actions under a range of themes for Council and others to consider.

What do the statistics tell us?

The 2006 Census tells us that there were nearly 8,000 people aged over 65 living in the Eurobodalla Shire and that this population group represents 22.8% of the total population compared to 13.1% for NSW. Local modelling estimates that the number and percentage people aged over 65 in the Eurobodalla Shire will rise to about 10,300 people or 24% by 2016 and to about 13,500 people or 26% by 2031.

The number of people aged over 80 has increased by 53.7% in the ten year period to 2006. This trend is expected to continue with the number of people aged over 80 living in the shire expected to reach about 2,000 by the year 2030.

The current Commonwealth Government Provision Ratio equates to 113 operational residential places and community care packages for every 1,000 aged 70 years and over. After applying the Aged Care Provision Ratio to Council’s 2006 population estimates, the Shire currently has adequate aged care places overall.

This is significant considering that dementia is common in the elderly and is very common in the very old. It is estimated that 6.5% of persons aged over 65 years and 22% of persons older than 85 years had dementia in 2006. (Australian Institute of Health and Welfare) This figure is estimated to double by 2030 and treble by 2050.

Migration figures show that people are moving to the Eurobodalla Shire from Canberra and to a lesser extent from Sydney and country NSW. Most seniors that move away from the shire are moving to the warmer climate of Queensland or larger cities where there is greater choice in housing, health and aged care services.

Aboriginal people die at a significantly younger age and are admitted to hospital far more often when compared to non Aboriginal Australian people. Renal dialysis accounts for the largest number of hospitalisations for Aboriginal people. (Australian Bureau of Statistics)

37.1% of seniors surveyed by Council said that they had to leave the shire for health treatment

The predominant health treatments conducted away from the shire were cardiovascular, dental, diagnostic scan, eye treatment cancer treatment and therapy services.

The median age for the shire is 47 years compared to 37 years for NSW

Aboriginal people die at a significantly younger age and are admitted to hospital far more often when compared to non Aboriginal Australian people. Renal dialysis accounts for the largest number of hospitalisations for Aboriginal people. (Australian Bureau of Statistics)
The Policy context - why Council consulted?

International
The opportunities and risks associated with population ageing have attracted international attention for several decades. Council used the following themes derived from the United Nations (UN) - Rights of the Older Person when consulting with older residents to help identify their issues and to capture their positive thoughts and aspirations.
- Independence
- Advocacy and community capacity building
- Participation and self fulfilment
- Health and aged care
- Dignity and respect

Federal Government
The Australian Government is the primary funding source for aged care services and has undertaken considerable research into the implications of an ageing population and embraced policy directions that:
- Recognise older person’s rights and equality before the law
- Introduce programs that reduce negative stereotypes and promote positive ageing
- Promote active healthy lifestyles and greater community participation by seniors

Some examples of policies and strategies that inform these themes include the National Strategy for an Ageing Australia and Physical Activity Recommendations for Older Australians.

State Government
The New South Wales Government strategy Towards 2030: Planning for our changing population encourages all State agencies to actively plan for ageing of the population. The strategy has five strategic outcomes:
- Getting in early - planning for change
- Improving prevention and early intervention
- A productive, skilled and adaptable workforce
- Facilitating participation in all areas of society
- Providing quality care and support

The South Coast Regional Strategy identifies the NSW Far South Coast as an area that is subject to development pressures and advocates that communities focus upon planning and adapting for our changing population. The Eurobodalla Positive Ageing Strategy is therefore designed to reflect and support regional and local planning.

Local Government
Council is obliged by the Local Government Act to plan and report on the way it manages the social, cultural, economic and environmental aspects of the community. Where Council cannot address an issue directly, it may take an advocacy role, ensuring the resident’s views are heard and understood by another agency or level of government.
Council must ensure that social planning processes include local residents, business and community groups, government and non-government agencies. Council must pay particular attention to promote fair, open and participatory dialogue, to involve vulnerable people and recognise cultural diversity and avoid discriminatory practices. As part of this obligation, seniors are one of the seven mandatory target groups for consultation by Councils.
How Council consulted

The Eurobodalla Positive Ageing Strategy was developed by the Eurobodalla Shire Council Community Wellbeing Group in collaboration with people living in the Eurobodalla Shire and relevant service providers. The development process was guided by an internal reference group with input from the 14 agencies of the Eurobodalla Healthy Communities Group.

Council has gained a thorough insight into the values and aspirations of older residents through a series of community consultations held in late 2008 and early 2009. Council spoke with over 400 hundred people aged over 60 to capture a snapshot of how each felt about living in the shire, how safe they feel, their level of community participation and exercise and their aspirations for the future.

The methodology for developing the strategy draws upon the following elements.

- health data and demographic analysis of seniors living in the Eurobodalla Shire
- 124 street interviews conducted with seniors throughout the shire
- 158 surveys completed on-line or manually by older residents
- World Café style consultation that engaged 126 organisational delegates
- conversational sessions with 11 older person’s focus groups with 185 participants
- review and analysis of existing Council research and the work of other significant groups

How do seniors feel about living in the Eurobodalla Shire?

Council found that a number of factors are impacting on the health and wellbeing of the shire’s seniors. These factors include social and economic conditions, access to housing, transport and leisure opportunities plus individual behaviour such as eating well, socialising and exercising.

Most seniors said that they feel safe in their community, liked living among people from other cultures and believe that their community ‘feels like home’. There was also a strong feeling of responsibility to the community, that the community is friendly towards newcomers and that people, even strangers, would get together to solve common problems.

Nearly 50% of people spoken to said that they exercised for at least 30 minutes three times each week, while 65% rated their health as good. In the 12 month period prior to being polled, over 75% of survey respondents had received health treatment, half of which was
provided outside the shire. Popular leisure activities included eating out with friends, going to the beach, waterfront attractions, local parks or gardens. Three quarters of survey respondents said they were members of an organised club or community group.

**What local seniors told us about the future**

Council has recognises that the shire’s seniors are striving to retain their identity and independence in a rapidly changing environment. The main values and aspirations to emerge from consultations with Eurobodalla seniors are listed below.

Seniors would like to……

- Be recognised for the contribution they make to families and the community
- Have expanded opportunities for work, learning, adventure and recreation
- Live in harmony in a well-ordered, safe and inclusive community
- Feel supported to maintain independence and community involvement
- Have their voices heard on community and cultural issues
- Enjoy good health and improved access to high quality services
- Participate in the development of plans and activities that impact on their lives
- Be active in the design and management of the built and natural environment
- Have improved access to affordable and accessible accommodation and transport
- Maintain a strong sense of community identity and diversity

**The directions we wish to take at Council**

The Eurobodalla Positive Ageing Strategy is driven by the following seven directions that seek to promote a rights based approach in support of the shire’s seniors.

- Improve accessibility and transport options
- Support the availability of a range of housing options
- Maintain the level of safety and security currently enjoyed by the community
- Advocate for the needs of seniors
- Encourage more active and healthy lifestyles
- Improve the range of health and community services
- Promote, enhance and celebrate the character, heritage and culture of our community, towns and villages
Demographic information and population forecasts

Overview of the shire’s population

This section provides an overview of population statistics relating to the Eurobodalla Local Government Area (LGA). In the main, enumerated data is used and where relevant, the shire has been benchmarked against the lower South Coast Statistical Division and the State of NSW.

Table 1 provides a ‘snapshot’ of the Eurobodalla Shire’s population on Census nights in 1996, 2001 and 2006. This table illustrates that the Eurobodalla population is growing and ageing. On Census night in 2006, the total population of the shire was 34,541; this represents an increase of 4.23% or 1,404 persons from the 2001 Census and 13.4% or 4,094 persons since 1996.

In 2006, the number of people aged over 65 living in the shire was 7,892 or 22.8% of the total population. There was an increase of 551 (14.6%) non-Aboriginal people aged over 65 in the five years since the 2001 Census and nearly 25% since 1996. The median age of the shire increased from 41.5 to 47 in the ten year period between 1996 and 2006 representing the second highest in NSW. The number of people aged over 80 increased by 53.7% in the same period.

Between 1996 and 2006, the number of Aboriginal people aged over 65 increased by 38 (65.6%) although Aboriginal people aged over 65 represent less than 1% of all people aged over 65 in the shire.

Table 1 - Eurobodalla profile 1996 - 2006 (enumerated data excluding overseas visitors)

<table>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>30,447</td>
<td>33,137</td>
<td>8.1</td>
<td>34,541</td>
<td>4.4</td>
</tr>
<tr>
<td>females</td>
<td>15,391</td>
<td>16,808</td>
<td>8.4</td>
<td>17,628</td>
<td>5.0</td>
</tr>
<tr>
<td>males</td>
<td>15,056</td>
<td>16,329</td>
<td>7.8</td>
<td>16,913</td>
<td>4.0</td>
</tr>
<tr>
<td>All people 65 +</td>
<td>6,611</td>
<td>7,341</td>
<td>10</td>
<td>7,892</td>
<td>7.0</td>
</tr>
<tr>
<td>All people aged 80+</td>
<td>1,094</td>
<td>1,523</td>
<td>28.2</td>
<td>2,037</td>
<td>25.3</td>
</tr>
<tr>
<td>All Aboriginal people</td>
<td>1,135</td>
<td>1,378</td>
<td>21.4</td>
<td>1,542</td>
<td>12.8</td>
</tr>
<tr>
<td>Aboriginal people 65+</td>
<td>22</td>
<td>34</td>
<td>54.5</td>
<td>60</td>
<td>11.1</td>
</tr>
<tr>
<td>Australian born</td>
<td>25,137</td>
<td>26,766</td>
<td>6.5</td>
<td>28,096</td>
<td>6</td>
</tr>
<tr>
<td>Overseas born</td>
<td>3,996</td>
<td>4,363</td>
<td>8.9</td>
<td>4,658</td>
<td>7.7</td>
</tr>
<tr>
<td>Median age</td>
<td>41.5</td>
<td>44</td>
<td>6.0</td>
<td>47</td>
<td>6.8</td>
</tr>
</tbody>
</table>

1 Refer to Definitions - Enumerated data
2 Lower South Coast Statistical Division includes Shoalhaven, Eurobodalla and Bega Valley LGAs
3 For the purposes of this report, the term Aboriginal includes people of Aboriginal and Torres Strait Islander backgrounds
Age profile

Figure 1 depicts the total age profile of Eurobodalla LGA in 2006 compared with the NSW Lower South Coast Statistical Division (SD) and NSW. The graph illustrates the outward migration of people aged 15 – 30, the inward migration of people aged 30 - 60 and the higher percentage of older people in the Eurobodalla Shire and the NSW Lower South Coast Statistical Division.

Population estimates released by the Australian Bureau of Statistics in March 2009 show that 13.3% of the Australian population is aged 65 years and over. This is up from 10.8% in 1988.

In the Eurobodalla Shire and over the past two decades, the number of people aged over 85 years more than doubled from 1.2% to 2.5% of the total population. Increased life expectancy for both males and females has contributed to this rise. There were 65% more females as males in this age group at 30 June 2008 which reflects the higher life expectancy at birth for females compared with males.  

Figure 2 depicts the age profile of people aged 45 and above in the Eurobodalla LGA in 2006 compared with the NSW South Eastern (SD) and NSW. The graph illustrates a significantly higher percentage of older people living in the Eurobodalla shire.

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5 ABS Census of Population and Housing 2006 (enumerated data)
6 Ibid
7 NSW South East Statistical Division includes Palerang, Queanbeyan, Bega Valley, Bombala, Cooma Monaro, Snowy River, Yass, Goulburn, Crookwell, Boorowa, Young and Harden
Figure 2 – Eurobodalla seniors profile 2006 compared with SE NSW and NSW

Figure 3 shows that in the ten year period since 1996 there was an increase in the number of people aged over 45 in the Eurobodalla Shire.

ABS Census of Population and Housing 2006 (enumerated data)

Aboriginal Elders

In the Eurobodalla shire, 1,542 people or approximately 4.8% of all people identified themselves as an Aboriginal or Torres Strait Islander. This is a higher percentage than Aboriginal populations of the Lower South Coast (3.6%) and for NSW (2.1%).

Of all people living in the shire, 60 people or 0.17% of the total population identified themselves as an Aboriginal or Torres Strait Islander aged over 65, while 3.86% all Aboriginal people in the Shire are aged over 65 years of age. This is compared to 23.7% of the non Aboriginal population being over 65 years of age.

Eurobodalla Aboriginal people tend to be concentrated in areas where there is some traditional linkage with the land, and the presence of public, Aboriginal or community housing (J. Stubbs & Associates, 2007).

Figure 4 depicts Aboriginal people in the Eurobodalla LGA in 25 year age groups and by gender in 2006. The graph illustrates the high number of Aboriginal children and the low number of Aboriginal Elders in the shire.

Figure 4 - Number of Aboriginal people living in the Eurobodalla Shire 2006

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total number of people</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-24</td>
<td>450</td>
</tr>
<tr>
<td>25-49</td>
<td>229</td>
</tr>
<tr>
<td>50-64 years</td>
<td>86</td>
</tr>
<tr>
<td>65+</td>
<td>25</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Total number of people</th>
</tr>
</thead>
<tbody>
<tr>
<td>male</td>
<td>445</td>
</tr>
<tr>
<td>female</td>
<td>401</td>
</tr>
</tbody>
</table>

10 Derived from J. Stubbs & Associates, 2007, draft Eurobodalla Housing Strategy
11 ABS Census of Population and Housing 2006 (enumerated data)
Birthplace and language

Figure 5 - Overseas non English speaking birthplaces of Eurobodalla people aged 65+  

In the 2006 Census, 1,924 people aged over 65 were born overseas. Of these, 586 were born in a non-English speaking country and 106 people aged indicated that they spoke another language and little or no English.

Migration to the shire

Retirement (39.7%) and lifestyle (21.3%) were the predominant reasons why older people moved to the shire, with 164 respondents (58.1%) to the Positive Ageing Survey having lived in the shire for 10 years or more. (Eurobodalla Shire Council, 2009)

Table 2 – Main reason for moving to the shire

<table>
<thead>
<tr>
<th>Reason for moving here</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifestyle</td>
<td>21.3%</td>
<td>60</td>
</tr>
<tr>
<td>Family</td>
<td>10.6%</td>
<td>30</td>
</tr>
<tr>
<td>Climate</td>
<td>5.7%</td>
<td>16</td>
</tr>
<tr>
<td>Retirement</td>
<td>39.7%</td>
<td>112</td>
</tr>
<tr>
<td>Natural environment</td>
<td>3.9%</td>
<td>11</td>
</tr>
<tr>
<td>Work related</td>
<td>10.3%</td>
<td>29</td>
</tr>
<tr>
<td>I’ve lived here all my life</td>
<td>3.9%</td>
<td>11</td>
</tr>
<tr>
<td>Other</td>
<td>4.6%</td>
<td>13</td>
</tr>
</tbody>
</table>

Table 3 – Length of time survey respondents have lived in the shire

---

12 ABS Census of Population and Housing 2006  
13 Eurobodalla Shire Council, 2008-09, Eurobodalla Positive Ageing Survey  
14 Ibid
Table 4 illustrates the net out-migration of youth and strong in-migration of ‘Baby-boomers’ and Gen-X adults. While the data shows a positive net in-migration of people aged over 65, the amount for this age group is greatly reduced.

Table 4 - Migration for Eurobodalla Shire by age group 2006

<table>
<thead>
<tr>
<th>Age group</th>
<th>In</th>
<th>Out</th>
<th>Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 to 14 years</td>
<td>1,131</td>
<td>611</td>
<td>520</td>
</tr>
<tr>
<td>15 to 24 years</td>
<td>588</td>
<td>1,328</td>
<td>-740</td>
</tr>
<tr>
<td>25 to 34 years</td>
<td>950</td>
<td>649</td>
<td>301</td>
</tr>
<tr>
<td>35 to 54 years</td>
<td>2,175</td>
<td>1,210</td>
<td>965</td>
</tr>
<tr>
<td>55 to 64 years</td>
<td>1,613</td>
<td>650</td>
<td>963</td>
</tr>
<tr>
<td>65 years and over</td>
<td>1,144</td>
<td>1,001</td>
<td>143</td>
</tr>
<tr>
<td>Total</td>
<td>7,601</td>
<td>5,449</td>
<td>2,152</td>
</tr>
</tbody>
</table>

Information contained in Tables 5 and 6 indicates that older people are moving to the shire from Canberra and to a lesser extent from Sydney and country NSW. Those that move from the shire are in the main moving to the warmer climate of Queensland. Presumably some would also move to be closer to family.
It is also possible that smaller and more affordable housing options and social support and health services may also be drivers for out-migration to the Shoalhaven Local Government Area.

Table 5 – Source location of migration gain to Eurobodalla Shire (2006)\(^\text{17}\)

<table>
<thead>
<tr>
<th>LGA</th>
<th>65 years and over</th>
<th>Total population</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In</td>
<td>Out</td>
</tr>
<tr>
<td>ACT</td>
<td>200</td>
<td>105</td>
</tr>
<tr>
<td>Sutherland Shire</td>
<td>48</td>
<td>4</td>
</tr>
<tr>
<td>Blacktown</td>
<td>30</td>
<td>3</td>
</tr>
<tr>
<td>Bega Valley</td>
<td>51</td>
<td>29</td>
</tr>
<tr>
<td>Parramatta</td>
<td>22</td>
<td>0</td>
</tr>
<tr>
<td>Goulburn Mulwaree</td>
<td>22</td>
<td>7</td>
</tr>
<tr>
<td>Hornsby</td>
<td>17</td>
<td>3</td>
</tr>
<tr>
<td>Wagga Wagga</td>
<td>21</td>
<td>7</td>
</tr>
<tr>
<td>Cowra</td>
<td>13</td>
<td>0</td>
</tr>
<tr>
<td>Liverpool</td>
<td>12</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 6 – Destinations of migration loss from Eurobodalla Shire (2006)\(^\text{18}\)

<table>
<thead>
<tr>
<th>LGA</th>
<th>65 years and over</th>
<th>Total population</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In</td>
<td>Out</td>
</tr>
<tr>
<td>Shoalhaven</td>
<td>44</td>
<td>76</td>
</tr>
<tr>
<td>Caloundra (Qld)</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>Wyong</td>
<td>7</td>
<td>20</td>
</tr>
<tr>
<td>Maroochy (Qld)</td>
<td>3</td>
<td>16</td>
</tr>
<tr>
<td>Gold Coast (Qld)</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>Hervey Bay (Qld)</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td>East Gippsland (Vic)</td>
<td>0</td>
<td>10</td>
</tr>
</tbody>
</table>

**Religious affiliation**

Table 7 shows that in the 2006 Census, 6,544 or 73% of people aged over 45 nominated a religious affiliation. Christianity is the dominant religion in the shire. There has been growth in most religions with significant growth in both the Catholic and Anglican faiths and the number of people with no religion since 2001.

\(^{17}\) Informed Decision, 2009, Profile .id
\(^{18}\) Ibid
Table 7 - Religious affiliation, Eurobodalla people aged 45 and over in 2006.\textsuperscript{19}
Figures in brackets indicate the difference between corresponding religious affiliations in 2001.

<table>
<thead>
<tr>
<th></th>
<th>Anglican 3,038 (+224)</th>
<th>Baptist 101 (+8)</th>
<th>Catholic 1,779 (+329)</th>
<th>Eastern Orthodox 56 (+24)</th>
<th>Jehovah’s Witnesses 48 (+9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buddhism</td>
<td>7 (-8)</td>
<td>Uniting Church 575 (-6)</td>
<td>Christian\textsuperscript{20} 56 (+13)</td>
<td>Hinduism 5 (+2)</td>
<td>Islam 8 (+5)</td>
</tr>
<tr>
<td>Lutheran</td>
<td>137 (+15)</td>
<td>Pentecostal 39 (+10)</td>
<td>Presbyterian and Reformed 601 (+59)</td>
<td>Salvation Army 22 (+5)</td>
<td>Seventh-day Adventist 8 (-6)</td>
</tr>
<tr>
<td>Aboriginal</td>
<td></td>
<td>Judaism 5 (+1)</td>
<td>No religion\textsuperscript{21} 833 (+241)</td>
<td>Other religions\textsuperscript{22} 50 (-27)</td>
<td>Religious affiliation not stated 664 (+146)</td>
</tr>
<tr>
<td>Traditional Religions</td>
<td>0 (no change)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Public housing for older people**

Table 8 shows the Department of Housing properties that are designated for people aged over 55. This data does not include tenants over the age of 55 living in general accommodation such as cottages, townhouses and general units.

There were 50 applications on the Eurobodalla LGA waiting list aged over 55 years of age (Batemans Bay, Moruya, Narooma). This figure does not identify the number of individuals and does not take into consideration couples or families.

Table 8 – Public housing designated for over people aged over 55 (Housing NSW, 2009)

<table>
<thead>
<tr>
<th>Eurobodalla suburbs</th>
<th>Number of seniors in public housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Batemans Bay</td>
<td>53</td>
</tr>
<tr>
<td>Batehaven</td>
<td>18</td>
</tr>
<tr>
<td>Catalina, Denhams Beach, Sunshine Bay</td>
<td>0</td>
</tr>
<tr>
<td>Surf Beach</td>
<td>4</td>
</tr>
<tr>
<td>Surfside</td>
<td>0</td>
</tr>
<tr>
<td>Moruya</td>
<td>37</td>
</tr>
<tr>
<td>Narooma</td>
<td>21</td>
</tr>
<tr>
<td>Kianga &amp; Dalmeny</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>133</strong></td>
</tr>
</tbody>
</table>
Family and household makeup – Eurobodalla Shire with NSW comparisons

Figures 6 and 7 demonstrate the characteristics of an older Eurobodalla population when compared with NSW. In addition, the Eurobodalla Shire overall has 15% more families with no children and 3% more lone person households. Planning consideration needs to be given to the higher number of older people living alone in the Eurobodalla Shire.

Figure 6 - Family composition - Eurobodalla and NSW

Figure 7 – Lone person households 65+ - Eurobodalla and NSW percentages

---

23 Informed Decision, Profile .id, 2009 (enumerated data)
24 ABS Census 2006, Count of persons in occupied private dwellings
Individual weekly income – people aged 50 and over

Figure 8 shows that the weekly income is less than $400 for the majority of people aged over 65 in the Eurobodalla Shire. This is on par with NSW. However, the percentage of Eurobodalla people aged 65-74 earning less than $249 per week and the percentage of people aged 85+ with no income is higher than for NSW.

Figure 8 - Weekly individual income of Eurobodalla people aged 65+

Older people with a disability

In 2006, there were more Eurobodalla women than men aged over 65 who identified as having a profound or severe disability. Conversely, there were more men than women with a profound or severe disability in the 55-64 age group.

Eurobodalla Shire Council is a significant local provider of services for frail older people and their carers. These services are primarily funded by the State and Commonwealth Governments and include Community Transport, Centre Based Respite, Day Activity Services, ComPacks, Respite for Carers Program and Community Options.

When comparing information in Tables 8 and 9, the percentage of Aboriginal people aged over 45 identified as having a profound or severe disability is significantly higher than the non-Aboriginal population aged over 45.

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25 ABS Census of Population and Housing 2006. Information expressed as a percentage of the stated aged category (65-74, 75-84, 85+)
26 ABS defines the profound or severe disability population as: ‘those people needing help or assistance in one or more of the three core activity areas of self-care, mobility and communication, because of a long-term health condition (lasting six months or more), a disability (lasting six months or more),"
Table 9 - Eurobodalla older people with profound or severe disability in need of care

<table>
<thead>
<tr>
<th>Age/Gender</th>
<th>Males</th>
<th>Females</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td>45-54</td>
<td>108</td>
<td>112</td>
<td>220 (4.2%)</td>
</tr>
<tr>
<td>55-64</td>
<td>190</td>
<td>118</td>
<td>308 (5.5%)</td>
</tr>
<tr>
<td>65+</td>
<td>482</td>
<td>742</td>
<td>1,224 (15.5%)</td>
</tr>
<tr>
<td>Totals</td>
<td>780</td>
<td>972</td>
<td>1,752 (9.3%)</td>
</tr>
</tbody>
</table>

Aboriginal Elders with a disability

Table 9 shows that more Aboriginal people have a profound or severe disability and are in need of care when compared to the overall population of people aged over 45 years of age.

Table 10 - Eurobodalla Aboriginal seniors with profound/severe disability in need of care

<table>
<thead>
<tr>
<th>Age</th>
<th>Males</th>
<th>Females</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td>45-54</td>
<td>10</td>
<td>7</td>
<td>17 (10.4%)</td>
</tr>
<tr>
<td>55-64</td>
<td>12</td>
<td>8</td>
<td>20 (20%)</td>
</tr>
<tr>
<td>65+</td>
<td>4</td>
<td>6</td>
<td>10 (16.4%)</td>
</tr>
<tr>
<td>Totals</td>
<td>26</td>
<td>21</td>
<td>47 (14.5%)</td>
</tr>
</tbody>
</table>

Veterans living in the shire

In January 2009 and according to statistics issued the Commonwealth Department of Veterans Affairs (DVA), there were 1,537 Veterans and War Widows living in the Eurobodalla Shire. This represents about 4.4% of the total population and ranks the Eurobodalla Shire 31 out of 156 NSW Local Government Areas for the number of registered Veterans and War Widows.

Table 11 – Veterans and war widows in the Eurobodalla Shire 2009

<table>
<thead>
<tr>
<th>Total DVA beneficiaries</th>
<th>Gold Cards</th>
<th>White Cards</th>
<th>Service Pensioners</th>
<th>Disability Pensioners</th>
<th>War Widows</th>
<th>Social Security Age Pensioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,537</td>
<td>884</td>
<td>160</td>
<td>801</td>
<td>519</td>
<td>368</td>
<td>16</td>
</tr>
</tbody>
</table>

27 ABS Census of Population and Housing 2006 (Figures in brackets denote the percentage of people with a profound or severe disability in that age group)

28 ABS Census of Population and Housing 2006. (Figures in brackets denote the percentage of people with a profound or severe disability in that age group)
Unpaid assistance to a person with a disability

In the Eurobodalla Shire, 10% (3,471) of the population provided unpaid care to people who are disabled and or suffer from a long term illness or problems related to old age. Figure 9 shows that the majority of unpaid carers are those aged 45–64 years of age (1,782 people).

Figure 9 - People in Eurobodalla Shire who provided unpaid care to family members or others because of a disability, a long term illness or problems related to old age

Population forecasts

Figures 10 and 11 illustrate steady increases in total population and the number of people aged over 65 years. Based on these figures, the percentage of the Eurobodalla population aged 65 and over is expected to rise from about 22% in 2006 to approximately 24% in 2016 and 26% in 2031 (Informed Decisions). However, the NSW Department of Planning predicts that the percentage of the shire’s population aged over 65 could be as high as 36% by 2031.\(^\text{30}\)

Table 11 shows that the suburbs with the highest share of the population aged 65 and over were Dalmeny, Kianga, Surf Beach, Batehaven, Sunshine Bay, Tuross Head and Denhams Beach. This distribution can in part be explained in part by the larger share of aged care facilities in some of these areas.

By contrast, the Rural Hinterland areas all had far lower numbers of older people. These areas tend to have migration loss with older people moving to urban centres.

Increases are expected in some areas of the Shire to 2021 as a result of ageing, while some areas are expected to have relatively stable numbers of older people based on greater attraction of young persons.

The largest increases in the numbers of people aged 75+ are expected in Malua Bay, Lilli Pilli, Rosedale, Moruya urban area, Tuross Head, Surf Beach, Batehaven, Sunshine Bay, Denhams Beach and the rural hinterland areas.\(^\text{31}\)

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\(^{29}\) ABS Census of Population and Housing 2006

\(^{30}\) Given the already high number of seniors, the finite capacity of local services and recent slowing of in-migration trends, Council’s demographer predicts a lower gain in older age groups and a larger gain of persons 0-54 years when compared to predictions made by the NSW Department of Planning.

\(^{31}\) Informed Decision, 2009, Forecast.id, Population and households forecasts for Eurobodalla Shire
Figure 10 – Eurobodalla Shire population growth estimates – total population and 65+\(^{32}\)

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2011</th>
<th>2016</th>
<th>2021</th>
<th>2031</th>
</tr>
</thead>
<tbody>
<tr>
<td>total</td>
<td>36595</td>
<td>39502</td>
<td>42593</td>
<td>45461</td>
<td>50872</td>
</tr>
<tr>
<td>65+</td>
<td>8181</td>
<td>9123</td>
<td>10336</td>
<td>11524</td>
<td>13558</td>
</tr>
</tbody>
</table>

Figure 11 – Eurobodalla Shire forecast age structure\(^{33}\)

\(^{32}\) Ibid
\(^{33}\) Informed Decision, 2009, Forecast.id, Population and households forecasts for Eurobodalla Shire
Local modelling suggests that the number of seniors is expected to increase in all areas of the shire to 2031 as a result of ageing and in-migration.

Table 12 – Eurobodalla population projections 2006-2021

<table>
<thead>
<tr>
<th>Snapshot areas</th>
<th>Age range</th>
<th>2006</th>
<th>2011</th>
<th>2016</th>
<th>2021</th>
<th>Change 2006-21</th>
<th>Change 2006-21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surfside - Long Beach - Maloreys Beach - North Batemans Bay</td>
<td>Total</td>
<td>2755</td>
<td>3259</td>
<td>3676</td>
<td>4111</td>
<td>1356</td>
<td>49%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>484</td>
<td>537</td>
<td>647</td>
<td>741</td>
<td>257</td>
<td>53%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>34</td>
<td>50</td>
<td>56</td>
<td>54</td>
<td>20</td>
<td>59%</td>
</tr>
<tr>
<td>Batemans Bay - Catalina</td>
<td>Total</td>
<td>3936</td>
<td>4300</td>
<td>4598</td>
<td>4914</td>
<td>978</td>
<td>25%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>898</td>
<td>867</td>
<td>904</td>
<td>948</td>
<td>50</td>
<td>6%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>146</td>
<td>167</td>
<td>185</td>
<td>201</td>
<td>55</td>
<td>38%</td>
</tr>
<tr>
<td>Batemans Bay Rural Hinterland including Nelligen</td>
<td>Total</td>
<td>2505</td>
<td>2834</td>
<td>3035</td>
<td>3232</td>
<td>727</td>
<td>29%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>316</td>
<td>362</td>
<td>442</td>
<td>526</td>
<td>210</td>
<td>66%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>25</td>
<td>37</td>
<td>40</td>
<td>38</td>
<td>13</td>
<td>52%</td>
</tr>
<tr>
<td>Surf Beach - Batehaven - Sunshine Bay - Denhams Beach</td>
<td>Total</td>
<td>5202</td>
<td>5784</td>
<td>6001</td>
<td>6212</td>
<td>1010</td>
<td>19%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>1225</td>
<td>1373</td>
<td>1497</td>
<td>1621</td>
<td>396</td>
<td>32%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>193</td>
<td>219</td>
<td>224</td>
<td>222</td>
<td>29</td>
<td>15%</td>
</tr>
<tr>
<td>Malua Bay - Lilli Pilli - Rosedale - Guerilla Bay</td>
<td>Total</td>
<td>2141</td>
<td>2572</td>
<td>2809</td>
<td>3105</td>
<td>964</td>
<td>45%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>458</td>
<td>642</td>
<td>763</td>
<td>874</td>
<td>416</td>
<td>91%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>13</td>
<td>36</td>
<td>44</td>
<td>56</td>
<td>43</td>
<td>331%</td>
</tr>
<tr>
<td>Broulee – Tomakin – Mossy Point</td>
<td>Total</td>
<td>2600</td>
<td>3135</td>
<td>3584</td>
<td>3823</td>
<td>1223</td>
<td>47%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>520</td>
<td>553</td>
<td>625</td>
<td>704</td>
<td>184</td>
<td>35%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>62</td>
<td>80</td>
<td>85</td>
<td>81</td>
<td>19</td>
<td>31%</td>
</tr>
<tr>
<td>Urban Moruya - Moruya Heads</td>
<td>Total</td>
<td>3202</td>
<td>3671</td>
<td>3992</td>
<td>4311</td>
<td>1109</td>
<td>35%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>610</td>
<td>734</td>
<td>844</td>
<td>963</td>
<td>353</td>
<td>58%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>94</td>
<td>112</td>
<td>121</td>
<td>130</td>
<td>36</td>
<td>38%</td>
</tr>
<tr>
<td>Moruya Rural Hinterland</td>
<td>Total</td>
<td>2239</td>
<td>2675</td>
<td>2859</td>
<td>3046</td>
<td>807</td>
<td>36%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>255</td>
<td>363</td>
<td>469</td>
<td>591</td>
<td>336</td>
<td>132%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>15</td>
<td>14</td>
<td>19</td>
<td>20</td>
<td>5</td>
<td>33%</td>
</tr>
<tr>
<td>Tuross Head</td>
<td>Total</td>
<td>2136</td>
<td>2402</td>
<td>2504</td>
<td>2557</td>
<td>421</td>
<td>20%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>609</td>
<td>733</td>
<td>816</td>
<td>886</td>
<td>277</td>
<td>45%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>49</td>
<td>56</td>
<td>67</td>
<td>70</td>
<td>21</td>
<td>43%</td>
</tr>
<tr>
<td>Dalmeny</td>
<td>Total</td>
<td>1827</td>
<td>2196</td>
<td>2362</td>
<td>2495</td>
<td>668</td>
<td>37%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>487</td>
<td>544</td>
<td>621</td>
<td>698</td>
<td>211</td>
<td>43%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>129</td>
<td>141</td>
<td>138</td>
<td>136</td>
<td>7</td>
<td>5%</td>
</tr>
<tr>
<td>Narooma - North Narooma - Kianga</td>
<td>Total</td>
<td>3179</td>
<td>3509</td>
<td>3821</td>
<td>4116</td>
<td>937</td>
<td>29%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>864</td>
<td>857</td>
<td>941</td>
<td>1067</td>
<td>203</td>
<td>23%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>89</td>
<td>120</td>
<td>130</td>
<td>137</td>
<td>48</td>
<td>54%</td>
</tr>
<tr>
<td>Narooma Rural Hinterland including Boddalla and Mystery Bay</td>
<td>Total</td>
<td>2831</td>
<td>3165</td>
<td>3346</td>
<td>3539</td>
<td>708</td>
<td>25%</td>
</tr>
<tr>
<td></td>
<td>65-84</td>
<td>401</td>
<td>489</td>
<td>609</td>
<td>704</td>
<td>303</td>
<td>76%</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>26</td>
<td>42</td>
<td>49</td>
<td>56</td>
<td>30</td>
<td>115%</td>
</tr>
</tbody>
</table>

34 Informed Decisions, 2009, forecast.id
Eurobodalla Positive Ageing Strategy

Theme 1 – Independence

Discriminatory attitudes and inequitable practices can result in seniors becoming socially isolated and in poor health which can limit them from maintaining their independence. Council has a responsibility to ensure that its services and facilities are provided ‘barrier free’ and to take a leadership role to encourage others to follow.

1.1 Pedestrian access

When consulted in focus groups, seniors called for more footpaths that are wider and connect residential areas with essential services to make the streets safer for pedestrians while encouraging people to exercise and reduce their reliance on private vehicles. They also suggested an expansion of the cycle way network, improved design of bus stops to allow for low floor buses and additional disabled parking spots near to public services. (Eurobodalla Shire Council, 2009)

State Planning Guidelines require that a bus service be available within 400 metres of any residential property in an urban area. Council has included this in its Design Guidelines for Subdivisions.

In its Shared Path Strategy, Council is considering a number of commitments regarding the integration of transport and has committed to the provision of footpath on at least one-side of all collector roads and bus routes within the urban areas. The Shared Path Strategy proposes the need to identify networks that have an origin and a destination and to provide connectivity. As such Council’s public works schedule will seek to provide paths that lead to transport sources such as bus stops.

The Shared Path Strategy has also identified attractors such as licensed clubs and community centres. Council is proposing to provide a paved path for at least 500 metres along collector roads leading from attractors so as to improve pedestrian access to and from these facilities.

Council and the community have sought external funds to match local funds to create shared pathways in a variety of locations across the shire. Council engineers and construction staff have used the funds to support the valuable construction work carried out by community volunteers.

1.2 Access to information

When 282 seniors were asked if they knew where to go for help if they or their partner could no longer cope at home due to ill health or disability, 63 people or 22.3% said that were unsure where to go. (Eurobodalla Shire Council, 2009) However, seniors have suggested to Council that access to information about services and facilities is crucial to maintaining independence after retirement. (Eurobodalla Shire Council, 2009)

Delegates at the Eurobodalla Positive Ageing Summit suggested that Council explore opportunities to expand the role of visitor’s centres and libraries to provide a higher level of general community information. Suggestions included the preparation of fact sheets by Council on a range
of older person’s issues including housing and accommodation options, health and aged care, transport and financial planning. (IRIS, 2008)

Library services provide free access to the internet, internet beginner classes and word-processing via the public access computers available at each branch. Public computer use has grown steadily each year since inception with over 30,000 internet booking sessions being recorded in the 2007/08 period. The public computers are used for a range of tasks including email, online banking, online tax returns, job applications, homework and research. (Eurobodalla Shire Council Annual Report 2007-08, 2008) (Eurobodalla Shire Council Annual Report 2007-08, 2008)

Library services have had increasing demand to provide a home delivery service for clients who can no longer visit the library due to infirmity or disability. Council is investigating the development of a volunteer supported service, possibly using an existing community based agency to enable the delivery and return of library items. (Eurobodalla Shire Council, 2009)

Council’s publication Growing Older in the Eurobodalla currently provides details about aged care and supported accommodation for seniors. Scope exists to expand this publication to include the information that has been identified as important to seniors such as retirement planning, financial planning, lifelong learning networks, housing and accommodation options, sports and leisure pursuits.

1.3 Community access

When asked to identify facilities that were hard to access, 120 people or 42.1% of the 282 survey participants responded to this non-compulsory question. Of the 120 people, 45% of respondents identified shopping centres, 15% identified private property (mostly shops) and 6.7% identified a hospital or medical centre as being hard to access. Access within shopping centres, hospitals, cinemas etc that are privately owned are generally beyond Council’s control. (Eurobodalla Shire Council, 2009). In these cases, Council wrote to each property owner making them aware of the access difficulties and suggesting that they may wish to investigate.

Ten people or 12% of respondents indicated that they’ve experienced difficulties crossing Perry Street in Batemans Bay. Apart from Perry Street, only 5.8% of respondents identified a Council owned facility, such as a public toilet, as being hard to access. Access within shopping centres, hospitals, cinemas etc that are privately owned are generally beyond Council’s control. (Eurobodalla Shire Council, 2009). In 2009, Council recognised pedestrian difficulties at Perry Street by allocating resources to undertake a traffic study and funds to create a pedestrian refuge.

Council has allocated an annual budget of $50,000 to implement the directions and actions contained in the Disability Access Action Plan. Council’s Action Plan Access Committee (APAC) assists Council in developing strategies to improve access to Council premises and services for residents and visitors. The APAC also provides advice to Council on disability access issues arising from the assessment of development applications as requested due to considerations such as 'Unjustifiable Hardship'. (Eurobodalla Shire Council, 2009)
During 2007-08 the APAC contributed financially to a range of community access. Design and construction is provided by Council and includes specific projects to improve accessibility including pathway extensions, kerb ramps and viewing platforms. All new Council amenities are designed and constructed with accessible toilets. Shared pathways are constructed with width to provide for cyclists, motorised scooters and pedestrians without conflict.

Council is also progressively upgrading infrastructure such as boat ramps and wharves to incorporate floating pontoons for improved access.

### 1.4 Access to public transport

Analysis of the car ownership of the households in Eurobodalla Shire in 2006 compared to NSW shows that 12,686 people (87.3%) owned at least one car, while 992 people (6.8%) did not. The major differences between the car ownership of the households in Eurobodalla Shire and NSW were:

- a larger percentage of households with one vehicle (44.9% compared to 36.7%)
- a smaller percentage of households with no vehicles (6.8% compared to 11.2%).

Access to public transport is crucial to the ability of people with disability, seniors and parents with infants to participate fully in community life. Public transport in the Eurobodalla Shire comprises school services, fixed-route bus services in Batemans Bay and Narooma, local taxi services and commercial long distance coach services. The public transport sector faces an important challenge in meeting the growing needs of seniors for responsive, inexpensive and convenient transport.

In January 2009, the NSW Ministry of Transport introduced the requirement for bus operators to issue a new type of ticket, the Regional Excursion Daily (RED) ticket. The RED ticket is a $2.50 all day multi-ride ticket for use on scheduled bus services in the Shire for people who hold a valid Pensioner Concession card, NSW Seniors card or War Widower/s card.

When 282 seniors were asked what Council can do in a practical sense to plan for an ageing community, 49 of the submissions revolved around the need to improve public transport. When the same people were asked why they were unable to participate in a range of suggested social activities, 28 people or 7.5% said that they were unable to drive or use public transport. (Eurobodalla Shire Council, 2009)

When consulted in focus groups, seniors suggested to Council the need for community buses which are smaller, more accessible and that offer flexible service routes in areas without sufficient demand for scheduled bus routes. (Eurobodalla Shire Council, 2009)

When 126 delegates at the Eurobodalla Positive Ageing Summit were asked what would contribute to the independence of seniors, most responses could be summarised as saying If we had better footpaths, pedestrian crossings and public transport we could enhance independence. Some delegates were more specific suggesting that the flexible utilisation and sharing of current transport resources is the key to enhancing transport provision. (IRIS, 2008)

Council has twice successfully applied to the Country Passenger Transport Infrastructure Grants Scheme (CPTIGS) in the past five years. These funds were used to contribute to costs associated
with the construction of a transport interchange including signage, shelter and roads works in Moruya and Batemans Bay CBD areas. In 2009, Council was also successful in obtaining infrastructure funds from the Federal Government for construction of a further three bus stops at Surf Beach, Malua Bay and Tuross Head. In constructing this infrastructure, Council has adopted designs that meet the requirements of the Commonwealth Disability Standards for Accessible Public Transport. (Attorney General’s Department, 2002) The guidelines cover access and paved surfaces to the vehicle.

1.5 Financial subsidies and rebates

Council faces potentially significant demands on revenue. The Productivity Commission concluded that with the delivery of human services now representing 49% of total local government expenditure, local councils are more likely to face budgetary pressures from population ageing than from traditional activities such as road and infrastructure provision and maintenance. (Hawker. D, 2003)

Council is mindful of the effect of its pricing policies when considering the cost of services or products. Council may choose not to recover the full cost of delivering a service or product in recognition of the community’s interest in having that service subsidised to enable access to that service by most users. Some examples where an older person may be eligible for a financial subsidy are listed below.35

- camping fees
- some companion animal fees
- aged care, respite and community transport services
- hire of sports ground, community centres and public halls, tennis courts and coaching
- swimming pool entry and season passes

Under current State legislation some pensioners are eligible for mandatory Land Rates concessions. The amounts of the concessions available on an annual basis (up to maximum $425 in a rebate on the rates that they would normally pay) include36:

- Up to $250 on all ordinary rates and charges for domestic waste management services
- Up to $87.50 on water rates or charges
- Up to $87.50 on sewerage rates or charges

The rebate is deducted from the overall rate that the pensioner would normally be required to pay. Council then applies for a 55% subsidy back from the State Government to recover part of the foregone income.

The level of foregone income not recoverable by Council currently stands at approximately $800,000pa and this is expected to grow at about 1.5%pa, however, there has been some suggestions that the 2009-10 economic crises will have greater impact in this shire as self funded retirees need to rely on some form of government assistance including a rebate of rates.

People who are not an eligible pensioner or do not satisfy the ownership conditions may still be eligible for special hardship rate relief upon application to Council.

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35 Eurobodalla Shire Council Fees and Charges 2008-09
36 As at June 2009
Direction (D1) – Increase accessibility and transport options

Council response (CR1) - Increase access to information, services and facilities

Action 1. Provide safe and accessible community facilities

1.1. Conduct appraisal of Council owned community facilities
1.2. New and refurbished facilities are designed and constructed to meet access standards
1.3. Subsidies apply to hire of community facilities
1.4. Undertake a program of paved footpaths leading into community facility locations
1.5. Routinely inspects paving for defects or trip hazards

Benefits and rewards
✓ Community facilities are safe, accessible and used more often
✓ Seniors feel connected with their community
✓ Reduced risk of injury
✓ Reduce reliance on private motor vehicles

Action 2. Use innovative and contemporary methods to inform and consult seniors

2.1. Develop a community engagement strategy
2.2. Review Growing Older in Eurobodalla and seek sponsors to incorporate topics such as housing, aged care, safety, leisure and learning, retirement and financial planning
2.3. Develop and provide access to the community directory on demand to local non profit groups, aged care facilities, hospitals and community centres
2.4. Investigate use of touch screen kiosks and on-line discussion boards to improve communication
2.5. Develop promotional material that is culturally appropriate
2.6. Advocate for seniors to support their use of new technologies such as mobile phones, computers and automatic teller machines

Benefits and rewards
✓ Seniors feel valued and remain independent
✓ Recognition that many seniors still prefer face-to-face contact
✓ Increased community engagement
✓ Improved customer satisfaction
✓ Aboriginal and CALD people recognise and relate to the services that are available to them
Action 3. Provide accessible community services

3.1. Council services comply with relevant aged care service standards

3.2. Strive to provide disability and cultural awareness training to Councillors, relevant Council staff and volunteers

3.3. Subsidies apply to selected community services and Rates for eligible recipients

Benefits and rewards
- Seniors feel valued and remain independent
- Improved customer satisfaction
- Non-discriminatory services provided on the basis of need
- Mandatory concessions apply

Action 4. Improve public transport options for seniors

4.1. Support the Eurobodalla Passenger Transport Working Group

4.2. Investigate subsidised hire of Community Transport accessible buses by community groups

4.3. Work in partnership to enhance the range and capacity of transport services available to seniors

4.4. Undertake bus shelter installation program complying with public transport access standards

4.5. Work in partnership to provide transport services within prescribed distance of dwellings in urban areas

Benefits and rewards
- Seniors feel valued and remain independent
- Public transport is enhanced
- Increased autonomy of community groups
- Reduced reliance on private cars
### Action 5. Provide library services to housebound residents

5.1. Investigate management and delivery options and implications

**Benefits and rewards**
- Seniors feel valued and remain independent
- Improved customer satisfaction

### Action 6. Improve access for older pedestrians

6.1. Incorporate older person’s safety, fitness and mobility needs into footpath and public transport planning, design and construction

6.2. Develop priorities for integration of footpaths, cycle ways and bus stops

6.3. Introduce and enforce local laws related to accessible footpath trading

6.4. Investigate improved pedestrian access across Princes Highway at Moruya and ‘The Flat’ in Narooma

6.5. Provide seating at regular intervals along footpaths, shared paths and cycle ways

6.6. Support shared pathways education campaign to reduce conflict between pedestrians, bicycles and scooters

**Benefits and rewards**
- Seniors remain fit, active, independent and connected with community
- Reduce reliance on private cars
- Exposure to injury and risk is reduced
1.6 Settlement Planning and Housing

Good urban design enables all people to move around and participate fully within the community. The provision of equitable access involves more than providing ramps and toilets for people in wheelchairs, it also includes the provision of appropriate lighting and colour contrast for people with visual impairment, tactile indicators to assist people who are blind, appropriate signage and the provision of information in various formats to assist people who are hearing impaired and those with an intellectual disability. (NSW Department of Planning, 2007)

When asked about ways to improve affordable aged housing options, local service providers and business operators suggested that there is a demand for low cost rental properties and supported accommodation for seniors. There was also a call for Council to consider development of some of its own land for affordable aged housing. (IRIS, 2008)

When local focus groups were asked to suggest housing options for seniors, the following responses were given. (Eurobodalla Shire Council, 2009)

- encourage construction of compact and accessible single level housing linked to local services by accessible paths
- provide incentives to enable seniors to live with or near to relatives, for example, consent for temporary ‘granny flats’ such as the Victorian Government Moveable Unit model.\(^{37}\)
- explore affordable housing options including rental market for seniors
- issue builder and developer fact sheets that detail incentives for construction of senior’s housing
- independent and subsidised home modification services to enable seniors to remain in their own home

A Housing Strategy has been prepared for the Eurobodalla Shire to provide background data and strategic input to the development of the new Eurobodalla Local Environmental Plan (LEP). At present 85% of the existing housing stock within the Eurobodalla LGA is detached housing. The NSW Government target ratios for the housing mix in regional centres and towns in South Coast LGAs are as follows.

- Within centres: 60% detached : 40% medium density
- Across the whole LGA: 70% detached : 30% medium density (NSW Department of Planning, 2007)

Analysis of the number of persons usually resident in a household in the Eurobodalla Shire compared with NSW shows that there was a larger percentage of lone person households (26.6% compared to 24.2%), and a smaller proportion of households with 4 persons or more. In the Eurobodalla Shire in the 15 year period to 2006, lone person households increased from 21.5% to 26.6% of total households while in NSW the corresponding change was 20.1% to 24.2%. (Informed Decisions)

Given that the vast majority of future households in the Eurobodalla Shire are predicted to be couples or singles, the new Local Environment Plan includes zone objectives and development controls to increase the opportunities for and to encourage a variety of housing types and density. This will encourage an improved housing mix and make more efficient use of existing and future housing stocks, improve diversity and economic activity around town centres, improve housing affordability and provide more housing choice.

This has been achieved through the extensive application of the medium density zone (R3) in town and local centres. In addition to dual occupancies, provisions in the State *Environmental Planning Policy (SEPP) Infrastructure (Amendment) 2009 - Affordable Housing* are designed to allow social

housing providers to develop affordable housing in accessible locations without the need for a rezoning. These provisions have been extended under clause 63A to include residential flat buildings or multi dwelling housing on land within 400 metres of land in Commercial Core Zone (B3) or Zone B4 (Mixed Use) or in an equivalent zone in 32 NSW regional cities and towns that include Batemans Bay. (NSW Department of Planning, April 2009)

Car parking is not required to be provided in relation to development for housing provided by social housing providers or public authorities under these provisions. This prevents councils from requiring proposals to comply with the council's parking policy or requiring parking provisions beyond those proposed in development applications to avoid unnecessary costs.

Under clause 63D, the amendment also makes residential development by or on behalf of Housing NSW, development without consent if it is no more than 8.5 metres high or more than 20 dwellings on a single lot and complies with Seniors living policy: urban design guidelines for infill development. (NSW Department of Infrastructure, Planning and Natural Resources, 2004)

Eurobodalla Shire Council proposes to allow secondary separate dwellings to be erected in low density residential zones in conjunction with another principal dwelling and on the same lot of land. The total floor area of the secondary dwelling (excluding parking) must not exceed 60m² or 30% of the total floor area of the principal dwelling. Council's new Town Centre and Housing Development Control Plans (DCP) include objectives and development controls including the requirement for a 25% adaptable housing component to be provided in multi dwelling housing and residential flat building development over four units in size.

1.6.1 Public Housing

In 2007 and in the Eurobodalla Shire, people with either a disability or carer allowance accounted for 28.5% of public tenants, indicating a high level of need from residents with a disability, or by someone looking after a spouse, friend or relative with a disability. Approximately 27% of all tenants received a sole parent pension whilst around 20% tenants received an aged pension.

As of June 2007, Housing NSW managed 417 dwellings in the Eurobodalla. The majority of these are located in Batemans Bay (33.8%), Moruya (30.5%), and Narooma (17.0%).

According to data provided by Housing NSW in 2007, there were 521 applicants waiting to be housed in public housing accommodation in Eurobodalla. Of that figure, Priority Applicants requiring urgent accommodation equated to 3.1% of demand, Elderly Applicants who meet the general housing criteria and are aged 80 years and over equated to only 0.6% of demand, Transfer applicants equated to 5% of demand and Wait-Turn applicants who are not considered as ‘priority’ applicants, but who satisfy the requirements for public housing equated to the remaining 91.3% of all applicants waiting to be housed in public housing. (J. Stubbs & Associates, 2007)
Direction (D2) - Support the availability of a range of housing options

Council response (CR2) - Facilitate a range of housing styles, types and sizes across the Shire to cater for an ageing population.

Action 7. Land use planning considers the needs of seniors

- 7.1. Encourage development of adaptable housing with transport and pedestrian links to community facilities and services
- 7.2. Monitor supply of zoned land to facilitate land affordability
- 7.3. Promote targeted use of secondary separate dwellings
- 7.4. Prepare fact sheets that detail incentives for creation of senior’s housing
- 7.5. Explore local applications of the Victorian Moveable Units program

Benefits and rewards
- Seniors feel valued and remain independent
- More people stay and live comfortably in the Shire as they age
- Reduce isolation by enabling seniors to live with or near to relatives

1.7 Safety and security

1.7.1 Emergency planning and management

The topography and nature of the shire means that it is exposed to fire risk, flooding and ocean inundation or storm damage and as people get older their mobility often decreases. In the event of an emergency, especially natural disasters, they may not have the mobility or resources to self-evacuate. While emergency management is the responsibility of a number of agencies working together, Council has a responsibility to consider the potential risks when making planning decisions that affect older people. Council works with a number of agencies as the Local Emergency Management Committee when preparing emergency strategies. Measures such as a list of vulnerable persons and persons with high medical needs could be considered to enable managers to implement effective response procedures.

1.7.2 Personal safety

When surveyed in 2008-09, 96% of 282 older people indicated that they feel safe in their neighbourhood during the day and about 60% said that they feel safe walking in their neighbour at night. (Eurobodalla Shire Council, 2009) This compares with community survey results collected in 2004 from people aged over 65 (90% and 56% respectively). (IRIS, 2005)

When the same group were asked whether they felt a stranger would help them in the event of an emergency, about 72% agreed or strongly agreed with this statement.
The shire has a growing network of shared paths and footpaths. To ensure safety, adequate lighting must be provided to reduce the risk of falls and to ensure personal safety. Shared paths also need to be in visible locations and be well maintained to ensure a clear line of sight to assist with safety.

1.7.3 Road safety

The 65+ cohort is over represented in multi-car accidents and for the three year period 2005-2007, 12% of all crashes in the Eurobodalla involved drivers over the age of 65 years. Fortunately, none of these crashes involved a fatality. In NSW between 2002 and 2004, 30% of drivers aged over 85 were involved in an accident outside of their own local government area.\footnote{RTA, 2007, Licensing of Older Drivers Discussion Paper}

Given these trends, a driver safety and education program for older people could help in addressing these safety needs. This is also supported by results from the consultation with older people living in the shire. Council’s Road Safety Strategic Plan provides a framework for all road safety issues throughout the shire. Its aim is to provide a coordinated and holistic approach with key themes being *Safer People, Safer Roads and Safer Vehicles and Equipment*. Each year an Action Plan will be developed to address road safety related issues relevant to not only our ageing community but the old age visitors to our area. Some examples may include workshops and/or information for motorised wheelchair users, driver's license testing changes, accessibility maps, rest area locations for mobile homes, driving with medicines and fatigue management.

**Direction (D3) - Maintain the level of safety and security currently enjoyed by the community**

**Council response (CR3) - Work with local and regional crime, bushfire and emergency agencies in programs designed to reduce accident and crime rates.**

**Action 8. Work in partnership to plan for and manage natural disasters and emergencies**

8.1 Develop an local disaster management plan (DISPLAN) incorporating the needs of elderly and vulnerable people

**Benefits and rewards**

- Maintain safety of seniors in times of emergency or natural disaster


Council response (CR4) - Improve the level of community safety and security

<table>
<thead>
<tr>
<th>Action 9.</th>
<th>Work in partnership to identify and address community safety issues affecting seniors</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.1</td>
<td>Facilitate the Eurobodalla Police Liaison Committee</td>
</tr>
<tr>
<td>9.2</td>
<td>Facilitate development of a Community Safety Plan</td>
</tr>
<tr>
<td>9.3</td>
<td>Work in partnership to identify personal safety issues and improvement strategies for seniors</td>
</tr>
</tbody>
</table>

Benefits and rewards
- Eurobodalla communities are safe for seniors
- Seniors feel safe at home and in the community
- Stakeholders, responsibilities identified and external funds attracted

<table>
<thead>
<tr>
<th>Action 10.</th>
<th>Initiate road safety programs for seniors</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.1</td>
<td>Implement Council's Road Safety Strategic Plan</td>
</tr>
<tr>
<td>10.2</td>
<td>Provide input to annual road safety action plans</td>
</tr>
</tbody>
</table>

Benefits and rewards
- Raise awareness of road safety issues affecting seniors
- Promote alternative transport options for seniors to benefit health and the environment
- Minimise risks to older road users
- Seniors remain independent
Theme 2 – Advocacy and Community Capacity Building

Council has a responsibility to identify social justice issues and act on behalf of older people. This would include consultation with older people followed by liaison with service providers and Government agencies.

Where Council cannot address an issue directly, it can assume an advocacy role or policy position to ensure that the views of older residents are heard and understood by the relevant organisations or by another level of government.

Participants at the Positive Ageing Summit felt that Council could play a leadership role in recognising and promoting the roles of older people in the community. It was also suggested that Council could assist older people by advocating to other levels of government on issues that were impacting negatively on older people. (IRIS, 2008)

Council has a role to undertake Community Capacity Building. This requires Council to work with other partners such as Chambers of Commerce, service clubs and community organisations to create an environment that encourages and supports older people to participate in and contribute to community life.

While the Australian population as a whole is ageing, the migrant population is ageing even more rapidly. The demographics of Eurobodalla’s ageing culturally and linguistically diverse population is reflective of the patterns of migration following World War II and has immediate and future implications for the planning and delivering aged care services. Older people from diverse cultural backgrounds have unmet cultural, linguistic and spiritual needs and face multiple barriers in accessing appropriate aged care services. (Black, 2007)

It is estimated that in Australia 22,500 families are made up of grandparents looking after 31,000 children younger than 17 years of age. In these families, 60% of the grandparents are over 55 and 62% rely on a government pension for income. It is estimated that around 70% of children who live with their grandparents, also visit their parents who live elsewhere. (Raising Children Network)

There are a growing number of Grandparent Support Groups to be found in NSW, however, the nearest grandparent support group to the Eurobodalla Shire is based in Nowra. Most groups are run by grandparents and provide an opportunity for grandparents to share stories, swap ideas and learn more about how to cope.

When 282 older people were asked what Council can do in a practical sense to plan for an ageing community, this non compulsory question was answered by 257 people (91.1% of all survey respondents). (Eurobodalla Shire Council, 2009) Nearly half of all respondents to this question suggested that Council needs to improve support of older people by working with other groups including State and Federal Governments. The main theme to emerge being the need to improve health and care services for older people in the Eurobodalla Shire.
A table with the number of responses by category is listed below.

**Table 13 – Community perception of Council’s role in planning for an ageing community**

<table>
<thead>
<tr>
<th>Response category</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy - Council to work with other groups and levels of Government for the needs of older people</td>
<td>43.6%</td>
<td>112</td>
</tr>
<tr>
<td>Development of services and facilities</td>
<td>25%</td>
<td>64</td>
</tr>
<tr>
<td>Transport development</td>
<td>19.1%</td>
<td>49</td>
</tr>
<tr>
<td>Aged housing and accommodation</td>
<td>8.9%</td>
<td>23</td>
</tr>
<tr>
<td>Economic development</td>
<td>1.5%</td>
<td>4</td>
</tr>
<tr>
<td>Inappropriate response</td>
<td>1.9%</td>
<td>5</td>
</tr>
</tbody>
</table>

**Direction (D4) - Advocate for the needs of seniors**

*Council response (CR5) - Advocate to State and Commonwealth agencies to secure funds to meet future demand for services and infrastructure*

**Action 11. Contribute to local, regional and state health and aged care planning and development**

11.1 Identify and consult with local advocates for seniors

11.2 Report relevant data to funding agencies

11.3 Facilitate the Eurobodalla Healthy Communities Group and contribute to regional health and aged care planning

11.4 Improve linkage with the NSW Ministerial Advisory Committee on Ageing (MACA)

**Benefits and rewards**

✓ Intergovernmental activities are integrated
✓ Local input underpins regional planning
✓ Access to health and aged services in improved
✓ The local economy is enhanced
### Action 12. Improve the range of health care services in the shire

12.1 Advocate for a single regional hospital in the shire

12.2 Work in partnership to address health workforce issues in the shire

**Benefits and rewards**
- Fewer people leave the shire for health care
- Increased employment and education options
- The economy is enhanced

### Action 13. Investigate the needs of local older residents who care for their grandchildren

13.1 Seek funds to undertake a Far South Coast Grandparents needs analysis

**Benefits and rewards**
- The number of grandparents caring for children is estimated
- The needs of grandparents caring for children are identified

*Council response (CR6) - Work in partnership to improve communication, service coordination and resources sharing*

### Action 14. Facilitate local community, health and aged care networks

14.1 Develop strategic alliances with aged care organisations

14.2 Contribute to a local integrated service and training plan

**Benefits and rewards**
- Maximise use of aged care funding and resources
- Improved coordination of local aged care services and training
- Local aged care issues identified and solutions sought
- Local aged care needs reported to funding bodies
Theme 3 – Participation and self-fulfilment

3.1 What are seniors doing with their time?

The majority of older Australians are actively involved with the people around them. The Benevolent Society 2006 General Social Survey found that 96% of older people (aged 65 and over) had some form of contact at least once a week with family and friends from outside their household, and 76% had face-to-face contact with them. However, while many older people have access to social networks, social isolation is a reality for some. Evidence shows that social isolation is associated with depression and low morale. (Social Policy Research Centre, 2009) Building sustainable communities and social networks, based on social diversity and tolerance, is an important way of addressing social isolation and enhancing quality of life for all, including older people.

In roundtable discussions with over 400 seniors and other stakeholders in 2007, the NSW Ministerial Advisory Committee on Ageing (MACA) formulated the following statement. Connected communities are characterised by a diversity of cultures and age groups, thriving intergenerational relationships based on mutual respect, a safe environment, a supportive environment in which carers receive appropriate levels of support, a high level of community engagement and participation in social and cultural activities, education and training opportunities, strong linkages with other communities and a sense of belonging for all. (Elton Consulting, 2007)

Local survey data indicates high levels of community participation by older people living in the Eurobodalla Shire. When asked to select which three activities they had done in the last three months from a list of 13 activities, all 282 respondents chose at least one with 375 entries being recorded in total. (Eurobodalla Shire Council, 2009)

The five most popular responses were; went to a restaurant, bar or club (91.8%), Visited a local beach or waterfront attraction (79.8%), Gone out with a group of friends (79.4%), visited a local park or the Botanic Gardens (69.1%), Attended a meeting of an organised club or community group (64.2%) and Visited a library (63.1%). Also of interest, 133 people or 47.2% had done voluntary unpaid work in the last three months. Interestingly, the three least popular activities were also well patronised. These were; used one of the shire’s swimming pools (14.2%), attended an education class, workshop or course (27%) and attended a sporting or cultural event as a spectator (30.1%).

Of the 282 respondents, 48.3% of respondents stated Not interested as the primary reason for not participating. Other reasons given for not participating were; Lack of time due to work [paid or voluntary] (14.1%), Can’t afford (9.1%), Unable to drive or use public transport (7.5%), Too sick, old or disabled (12.5%), Nobody to go with (3.2%), I feel unwelcome (1.3%).
While many older people are socially active and participate in cultural, recreational and other activities, participation and attendance rates generally decline with age. Some of the risk factors for isolation are:

- loss of a partner or other family member
- being a carer
- difficulties with communication (e.g. hearing loss);
- coming from a culturally and linguistically diverse (CALD) background
- living in a rural or remote area
- living in an aged care facility
- having poor access to transport
- being male and single (Social Policy Research Centre, 2009)

Disability and illness and associated loss of functional activities can clearly impose restrictions on social participation. Older people have also reported feelings of discrimination and self-consciousness about their disability as hindering their participation in community activities. (Social Policy Research Centre, 2009)

Inadequate social support is associated not only with lower overall general health and wellbeing, but also with higher levels of emotional distress, more illness and higher mortality rates.41

There are a higher number of deaths among isolated people than among those with networks of relationships and emotional support, (Social Policy Research Centre, 2009) while being part of a social network is a significant determinant of longevity. This is especially the case for men. (Social Policy Research Centre, 2009)

### 3.2 Bridging the generation gap

In 2009, and to help celebrate both Youth Week and Seniors Week, the Council hosted a gathering of youth and seniors in Moruya and called the event *It's On for Young and Old*. The event was designed as an opportunity for approximately 50 older and younger citizens to participate in some organised intergenerational activities.

The activities were aimed at breaking down some of the barriers and misconceptions and stereotypes between citizens young and old. Activities included a get-to-know-you activity modelled on speed dating followed by a lunch where intergenerational teams participated in a trivia competition.

The NSW Council on the Ageing (COTA) coordinates the *Grandfriends* Program in some areas of the State. *Grandfriends* helps to bridge the generation gap and provides an opportunity for young people in the community to get to know members of an older generation. Through the *Grandfriends* program, members of the younger and older generations can learn from one another and begin to understand and respect one another.

For schools, the program represents an opportunity to respond to the needs of parents and children, and to be involved more closely with people of the older generations who make up an important part of the community. *Grandfriends*.

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41 World Health Organisation, 2002
Direction (D5) - Encourage more active and healthy lifestyles

Council response (CR7) - Increase opportunities for community participation

**Action 15.** Involve seniors in program planning and evaluation

15.1 Regularly consult with participants of senior’s programs and activities

Benefits and rewards

✔ Improved customer satisfaction and patronage
✔ Service Standards met

**Action 16.** Facilitate activities that improve relations between age groups

16.1 Aged Care and Youth Services collaborate on intergenerational activities

16.2 Investigate mentoring opportunities for seniors

Benefits and rewards

✔ Age discrimination is reduced
✔ Seniors are more active
✔ Youth skills and experience is enhanced

**Action 17** Promote, develop and engage seniors in community volunteer networks and activities

17.1 Provide information about volunteering in the shire

17.2 Promote new and existing volunteering opportunities
Action 18  Target specific groups of seniors to increase participation

18.1  Plan and deliver activities for older people from Aboriginal and CALD backgrounds

18.2  Consider working in partnership to create a register of volunteers with specific skills and qualifications

18.3  Work in partnership to explore part time work and training options for semi-retired professionals

Benefits and rewards
✓  Increased community participation by older people
✓  Older people contribute to community wellbeing and the economy
✓  Reduced isolation and improved health outcomes
✓  Utilise the skills and experience of trained older people

Eurobodalla’s 2009 Young Person of the Year Ben Radburn and Senior Citizen of the Year Margaret Perger
Theme 4 – Health and Aged Care

4.1 Health

Australians now have one of the world’s longest life expectancies. The current life expectancy is 81.4 years and by 2060 an Australian woman can expect on average to reach the age of 90. (AIHW, 2008) Figure 3 in the demographic section of this report illustrates steady increases in total population and the number of people aged 65 years and over in the Eurobodalla Shire. Based on these figures, the percentage of the Eurobodalla population aged 65 and over will rise from about 22% in 2006 to approximately 24% in 2016 and approximately 26% in 2031. (Informed Decisions)

Older people are the largest users of hospital and health care. Of all episodes of care at Moruya and Batemans Bay hospitals in 2003-04, 42% and 53% respectively were for people aged over 65 years. (Greater Southern Area Health Service, 2006) Despite this, statistics and self reporting show that the majority of the ageing population experience good health. (Eurobodalla Shire Council, 2009) However, this is unevenly distributed across the population with those with the greatest social disadvantage also likely to experience the worst health. Additionally, these groups are likely to have difficulties with transport, access to services and poorer environmental conditions.

The ABS 2006 SEIFA Index\(^{42}\) (Socioeconomic Indices for Areas) indicates that the Eurobodalla Shire has a high level of socioeconomic disadvantage when compared to other local government areas of NSW and Australia. (Australian Bureau of Statistics, 2006)

In 2006, the SEIFA index of disadvantage for the Eurobodalla Shire was 961 compared to NSW’s lowest index score of 765 for Brewarrina (ranked number 1) and highest index of 1,207 for Ku-ring-gai (ranked 153). This ranks the Eurobodalla shire 56\(^{th}\) of 153 local government areas in NSW in terms of socio-economic disadvantage.

Within the region, the SEIFA indices are: Bega Valley (977), Shoalhaven (964), Palerang (1,083), Cooma Monaro (1,000) and Queanbeyan (1,037).

Within the shire, the areas with high socio economic disadvantage are: Moruya (899), Catalina (906), Narooma (942), Dalmeny (948) and Surf Beach/Batehaven (957) while the areas with lower socio-economic disadvantage are: Batemans Bay rural hinterland (996), Moruya rural hinterland (1010) and Rosedale/Guerilla Bay (1033)

In a study of health indicators in 39 Local Government Areas (LGAs) by the Greater Southern Area Health Service between 2002 and 2007, Eurobodalla was ranked in the bottom four worst shires in terms of patients having difficulty getting health care when they needed it. This equated to 33% of over 800 people responding in this way. This can be a factor of multiple causes including transport and travel, availability of health care professionals and specialists as well as access to bulk billing and out of hour’s services. (Greater Southern Area Health Service, 2004)

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\(^{42}\) The Index of Relative Socio-Economic Disadvantage has “…been constructed so that relatively disadvantaged areas (e.g. areas with many low income earners) have low index values. The Index of Relative Socio-Economic Disadvantage is derived from attributes such as low income, low educational attainment, high unemployment, jobs in relatively unskilled occupations and variables that reflect disadvantage rather than measure specific aspects of disadvantage (e.g., Indigenous and Separated/Divorced). An area that has a Relative Socio-Economic Disadvantage Index value of 1200 is less disadvantaged than an area with an index value of 900.” (Australian Bureau of Statistics, 2006, Socio-Economic Indexes for Areas (SEIFA 2006) cat. no. 2033.0.55.001)
As the South Coast has no major tertiary health facilities within its boundaries, major referral hospitals for the Eurobodalla Cluster are The Canberra Hospital, John James Hospital and Calvary Hospital in the ACT. In 2003/04, Eurobodalla Hospitals met the majority (61.4%) of demand for acute inpatient episodes (7,087 episodes). Flows to other NSW hospitals accounted for 17.6% (2,026 episodes); flows to the ACT 14.6% (1,684 episodes) and flows to other GSAHS facilities 5.7% (655 episodes). (Greater Southern Area Health Service, 2005) (Greater Southern Area Health Service, 2006)

This data is confirmed by results collected in the Positive Ageing Survey, where 229 of the 282 (81.2%) respondents said they’d received health treatment in the last 12 months and 37.1% said that they had to leave the shire for treatment. Of those that had received treatment, most had only seen their General Practitioner. Of the remaining treatments, the predominant types included cardiovascular, dental, diagnostic scan, eye treatment cancer treatment and therapy services.

Statistics collected by Council’s Community Transport service shows that 77% of all passengers are aged 65 and over. Health related travel has increased from 14.9% of all trips in 2004-05 to 21% of all trips in 2007-08. More significantly, the actual kilometres travelled by community transport vehicles on out of area health related travel has increased from 64% or about 146,000 kilometres in 2004-05 to 74% or about 412,000 in 2007-08. Of all of the out of area trips recorded 63% were to Canberra, 16% to Nowra, 10% to Bega, 8% were to Sydney and 3% were to Wollongong.43

Veterans utilise Council’s Community Transport service for health related travel. Veterans represent 1.5% of all clients and 6.5% of all trips carried out by the service while transport fees collected from the Department of Veterans Affairs represent 9% of the service’s total income.

4.1.1 Smoking and chronic obstructive pulmonary disease (COPD)

Tobacco smoking was responsible for 7.8% of the total burden of disease in Australia in 2003. Compared to the State average, Eurobodalla had significantly higher rates of hospitalisations attributable to smoking and alcohol. It is these conditions especially that contribute to chronic diseases such as COPD, renal disease and cancer. (NSW Health)

In the Eurobodalla Shire, smoking is the single most preventable cause of admission to hospital and GSAHS is working towards reducing tobacco consumption. To that end, the target for effective tobacco control within the NSW State Plan is to reduce smoking rates by 1% each year to 2010, then by 0.5% each year to 2016. (NSW Health)

COPD is a long-term lung disease characterised by progressive development of airflow limitation that is not fully reversible. Marked initially by shortness of breath with exertion it becomes progressively worse over time. The COPD death rates in males and females aged 65 years and over are much higher as the disease affects mainly older people. (Australian Centre for Asthma Monitoring, 2008) Reductions in mortality from chronic obstructive pulmonary disease follow the decline in smoking rates particularly among males and better management of the disease. (NSW Health - Population Health Division)

In 2007, the New South Wales Population Health Survey showed that the lowest proportion of current smokers is among those aged 65-74 years (9.8%) and 75 years and over (4.0%) although many of these people acknowledged that they were smokers earlier in their life. (NSW Department of Premier and Cabinet , 2006)

43 Data obtained from Eurobodalla Shire Council EuroTransport service May 2009
A wealth of scientific evidence now exists showing that the breathing of tobacco smoke polluted air by non-smokers can lead to serious harm. Second hand or passive smoking is a known carcinogen as well as contributing to respiratory and cardiovascular diseases such as increased bronchitis, pneumonia and other chest illnesses in children, lung cancer and other lung disease. This is in addition to the well known irritant effects of tobacco smoke to the eyes, nose, throat and airways. While public support and demand for smoke-free work places and public areas has grown in the past 20 years (The Cancer Council Australia, 2006), there are some public areas including Council properties where smoking still occurs. However, we must be mindful not to target the individual, who still has a right to smoke, just not while in the presence of carers, staff or on enclosed Council property or vehicle.

4.1.2 Alcohol use

Alcohol has both a hazardous and protective effect on health, which varies by age and sex. In Australia in 2003, the burden of disease associated with alcohol was 10 times higher in males than in females, with the greatest burden in males occurring in those aged up to 44 years. (Greater Southern Area Health Service, 2009) This figure has long term implications as these men age. Diseases caused by drinking excessive amounts of alcohol include some cancers, heart disease, stroke, liver disease, gastritis and dementia. Alcohol also contributes to injury from assaults, road trauma, domestic violence and suicide. The distribution of hospitalisations that can be attributable to alcohol would be expected to reflect risk drinking or long-term drinking in the community. Increased use of alcohol has been associated with increased social disadvantage. (Greater Southern Area Health Service, 2009)

4.1.3 Nutrition

Dietary factors are linked to health and disease as protective influences or as risk factors including coronary heart disease, some cancers, Type 2 diabetes, overweight and obesity, osteoporosis, dental caries, gall bladder disease and cardiovascular disease. (National Health and Medical Research Foundation, 2006) In 2007, only 54.4% of adults consumed the recommended minimum of two serves of fruit each day and 10.7% of adults ate the recommended minimum of five serves of vegetables each day. Between 2002-07, Eurobodalla Shire rated in the second lowest quintile in terms of the recommended vegetable consumption by year by persons aged over 16 years of age, however, consumption of the recommended quantities of fruit and vegetables was higher among those aged over 55 years, 62% and 14.7% respectively. (NSW Health - Population Health Division)

A healthy mouth allows people to eat, speak, and socialise without pain, discomfort or embarrassment. Poor dental health is identified by obvious symptoms such as tooth decay and tooth loss but is also linked to many other health problems such as heart disease, diabetes, stroke and respiratory disease. Eating the wrong foods can lead to a loss of teeth which means that older people in particular cannot eat and chew properly. (NSW Health, 2008)

The poor oral health of Eurobodalla residents prompted Council in 2007 to vote to introduce fluoride in public drinking water. This followed extensive consultation with the area health service the community. The introduction of water fluoridation will positively influence oral health of the current and future populations of the shire.
4.1.4 Physical activity and healthy weight

Recent research on the Eurobodalla population has shown some positive health behaviours. For example, the shire’s residents get adequate physical activity, have lower rates of avoidable deaths and significantly lower rates of hospitalisations attributed to falls when compared with the State. The health impact of arthritis and musculoskeletal conditions can be reduced through early prevention low impact gentle exercise or tai chi and appropriate management. (NSW Health - Population Health Division)

The NSW Chronic Care Program includes arthritis and other musculoskeletal conditions in the range of chronic conditions for which special interventions are being developed, focusing on prevention, early detection and optimal management to reduce disability and improve quality of life. (NSW Health, 2008) Apart from helping to reduce the likelihood of obesity, physical activity can delay functional decline and the onset of chronic disease. It can also reduce the severity of disability associated with chronic diseases, improve mental health, promote social contacts, prolong independent living and reduce the risk of falls. Physical activity plays an important role in sustaining the health of muscles, bones and joints. Medical costs are substantially lower for older people who are active. (World Health Organization, 2002)

The Australian Government has developed a new campaign titled Physical Activity Recommendations for Older Australians. (National Ageing Research Institute, 2009)
Under the new recommendations, older people are urged to accumulate at least 30 minutes of moderate physical activity a day, as a slight increase in activity can make a difference to a person’s overall health and wellbeing. Specific examples of physical activity include the following.

- moderate fitness activities such as brisk walking, vacuuming or golf
- strength activities such as carrying groceries, moderate yard work or taking the stairs instead of the lift
- flexibility activities such as tai chi, bowls or yoga
- balancing activities such as walking heel to toe

In a recent local survey, 282 older Eurobodalla residents were asked how often they participated in moderate physical activity for at least 30 minutes where moderate activity was described as a brisk walk that increased breathing and heart rate. About 69% of respondents said that they exercised at this level three or more times each week. This figure included 34% who said that they exercised daily at this level. (Eurobodalla Shire Council, 2009)

In 2007, the New South Wales Population Health Survey showed that 51.7% of the population was classified as overweight or obese. In both sexes this percentage rises steadily until age 65-74 years then declined among older respondents. Obesity is not seen as significant problem for most people aged over 75 years. Combined with the fact that people are living longer, the obesity epidemic is likely to result in an increase in the number of older, obese people with implications for health status, medical and health care resources, and the cost of health and aged care. (AIHW, 2004)

The NSW Department of Health, Healthy People NSW Strategic Plan recognises that overweight and obesity rates are known to increase with increasing socioeconomic disadvantage. Socioeconomic disadvantage can increase the prevalence of overweight and obesity by as much as 30% in women and 15% in men. This is very relevant for the Eurobodalla Shire given its low SEIFA (Australian Bureau of Statistics, 2006) index in comparison to local government areas across Australia.
The NSW Health strategy to reduce obesity involves local government, industry and the community working together to implement coordinated programs that promote healthy weight through increasing physical activity and healthy eating. (NSW Health - Population Health Division)

Council’s Recreation Strategy under preparation in 2009, will reflect Council’s capacity to provide a range of accessible recreation facilities to meet the needs of older residents. For example, the accessibility and sustainability of Council’s swimming pools and sports ground amenities is being significantly improved in 2010 using new infrastructure funding from Government.
In addition, Council’s halls will be audited in 2009. The audit process will help determine the key attributes of each of the shire’s halls and provide recommendations to improve accessibility, sustainability and utilization by arts and cultural practitioners.

Aunty Jean’s Good Health program was developed in partnership with Aboriginal Elders, Aboriginal Health and Allied Health Service providers in the Illawarra to improve access, equity and health outcomes for Aboriginal people with chronic and complex care needs. The aim is to work together to increase the possibility of a healthy environment for Aboriginal people with chronic illness – to be healthy spiritually, socially emotionally, mentally and physically, by producing:
- A culturally welcoming space in a community setting
- Creating a supportive environment for mutual learning in a culturally appropriate context
- Promoting Aboriginal Elders as positive role models and mentors within the community. (SESIAHS, undated)
Direction (D5 continued) Encourage more active and healthy lifestyles

_Council Response (CR8) - Provide facilities and services that enhance the health and wellbeing of seniors_

### Action 19 - Encourage higher level of physical activity by seniors

19.1 Work with GSAHS and SGPN to promote Physical Activity Recommendations for Older Australians
19.2 Support the incorporation of physical activity programs into aged care services
19.3 Work with GSAHS to promote Tai Chi for arthritis prevention
19.4 Encourage participation by Aboriginal people in Aunty Jean’s Good Health program

**Benefits and rewards**
- Seniors enjoy improved health, wellbeing and community participation
- Reduced pressure on health and care services

19.5 Council’s Recreation Strategy encourages more seniors to partake in physical activities

**Benefits and rewards**
- Greater utilisation and sustainability of community facilities and services
- Recreation services and facilities reflect the needs of seniors

### Action 20 - Encourage higher consumption of nutritional foods by seniors

20.1 Inform clients, carers, workers and volunteers about healthy dietary intake

**Benefits and rewards**
- Seniors enjoy improved health and wellbeing
- Reduced pressure on health and care services
Action 21 - Reduce smoking and the effects of passive smoking

21.1 Investigate an extension of public areas where smoking is prohibited
21.2 Work with GSAHS to reduce smoking by Shire residents

Benefits and rewards
- Seniors enjoy improved health and wellbeing
- Reduced number of smokers
- Reduced smoking related litter

Action 22 - Consider working in partnership on chronic diseases identification and management

22.1 Explore chronic disease identification and management partnership opportunities with Southern General Practice Network (SGPN) and Greater Southern Area health Service (GSAHS)

Benefits and rewards
- Seniors enjoy improved health and wellbeing
- Reduced pressure on health and care services

4.3 Council’s Aged Care services

Many of Council’s aged care programs are funded by the State and Commonwealth Governments and receive management and financial support from Council. Programs include Community Transport, Good Neighbour Service, Community Options, Carer Support and Respite for Carers.

The level of support and care planning provided will depend on an individual’s needs, their existing support networks and available resources. Those in danger of inappropriate institutionalisation and those who have no carer or live alone or are geographically and socially isolated have priority on the programs. Clients are allocated a Care Planner who coordinates their service. The types and functions of aged care services provided by Eurobodalla Shire Council are listed below.
4.2.1 Community Transport (Eurotransport)

Eligible clients of Council’s Eurotransport service can receive help with social transport such as shopping and health related trips such as a doctor’s appointment. Assessments and trip planning is carried out by trained Council staff while all transport is provided by trained volunteers. Eurotransport maintains a fleet of modern cars and wheelchair accessible minibuses.

Council has provided a community transport service since 1987. The service receives its principle funding from the Home and Community Care (HACC) program, as well as funding from the Greater Southern Area Health service for non-emergency health related transport.

The service currently has over 2100 registered clients. Using a team of up to 70 volunteer drivers, the service provides over 11,000 door to door trips each year to eligible passengers under the various funding streams. In recent years, costs and demand have increased, requiring the service to assess current practices and look for ways to improve performance and cost effectiveness.

In 2008 Council received an Innovative Brokerage grant from the Department of Ageing, Disability and Home Care (DADHC) to develop a best delivery model for community transport in the Shire.

The objectives of the project were to:
1. Design a service delivery model for EuroTransport that responds to the anticipated increase in, and complexity of transport needs of the potential clients:
   - ensuring best practice service delivery with measurable outcomes
   - ensuring financial viability under current funding arrangements and to remain viable in the future; and
   - providing a flexible, responsive and client oriented service.
2. Establish mechanisms (such as partnerships) to allow for the delivery of a redesigned service.

The project has involved research, planning and change management. Since commencement in November 2008 a number of incremental changes in service have already been made such as, a refined and simplified the fee schedule and easy to read brochures. A number of reforms still need to occur and will require greater involvement and consultation with volunteers and passengers of the service, an increase in the percentage of funding expended on direct service delivery and a stabilisation of expenditure.

4.2.2 Good Neighbour Service

The Good Neighbour Service is funded to provide social support to people who are frail aged who live alone and/or are socially isolated. Assessments and coordination is carried out by trained Council staff while service is provided by trained volunteers. Some examples of the service include one to one companionship, taking the garbage bin in and out and help with shopping and appointments in town.

4.2.3 Community Options

Community Options is a case management and brokerage service for people with complex care needs. Comprehensive assessments and service coordination is carried out by trained Council staff while service is provided by trained care workers. Case Management is the primary role, with a Community Options care planner helping the client to assess needs and plan and coordinate a services that may be provided by a range of agencies. Specific help
may be required and Community Options has the capacity to act as a broker to acquire this support.

4.2.4 ComPacks

ComPacks is a package of care for up to six weeks that can help an older person to regain independence and manage a safe return to home following an admission to hospital. Assessments and coordination is carried out by a trained Council staff while service is provided by trained care workers. Services available include domestic help, personal care and meal preparation.

4.2.5 Centre Based Day Care and Good Neighbour programs

Council’s Centre Based Day Care and Good Neighbour programs offer weekly social groups for older men and women from across the shire. Clients are offered return transport, a cooked meal and participate in a range of entertaining activities in the friendly atmosphere. Groups regularly enjoy guest speakers and outings to local places of interest. With weekly social interaction and regular health support, these people are often able to stay at home independently. The number of aged persons using these programs and living alone is currently 20 people or 40% of Day Care Programs clients and 38 people or 72% of Good Neighbour clients. Statistics show that the number of people living alone and using these services has increased by about 5% over the last five years. With a constant ten people on a waiting list, for over five years, Centre Based Day Care and Good Neighbour programs require more external funding to support the growing numbers of men and people who have higher health care needs in the shire. Input from focus groups supports this with a call for an increase in the frequency of aged day care groups.

4.2.6 New Direction Program and Regional Coordination Group

The NSW Department of Ageing, Disability and Home Care (DADHC) is introducing two new programs that will provide a framework for implementing growth in adult day programs as well as future growth in adult day programs under the “Stronger Together” strategy. The programs are the New Direction Program and the Regional Coordination Group.

DADHC has identified that there is a growing number of individuals with a disability living beyond middle age that require new service delivery options as they age. To meet this need, Council’s EuroCare has been selected to be a provider of the New Direction service delivery program funded by DADHC. Council of Australian Governments (COAG) supports DADHC in these initiatives being rolled out to the community.

The Eurobodalla Respite Co-ordination Group (RCG) is a central contact point to reduce multiple referrals and assessments. The RCG meets monthly to look at meeting the respite needs of families, including Ageing Parent Carers who live within the Shire. Families may choose to present their own story to the group, providing the opportunity to present their needs to the RCG members rather than telling their story over and over again. Information about unmet need will also be collected by the RCG and forwarded to the funding bodies to inform planning processes and shape future service systems within the Eurobodalla.

The core organisational members of the Eurobodalla Regional Coordination Group are listed below.

- EuroCare services (Eurobodalla Shire Council)
- DADHC

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44 Input from Eurocare Centre Based Day Care coordinator
45 Input from Eurobodalla Shire Council Assistant Coordinator Community Options
Effective aged care services need to be community based and culturally appropriate to enable older Aboriginal to remain in their own communities and to support the unique needs of Aboriginal carers (National Rural Health Alliance and Aged & Community Services Australia, 2009) Aboriginal people utilise aged care services at a younger age when compared with the overall population. For Aboriginal people, this is consistent with poorer health status, lower life expectancy and a lower eligibility age for services.

Of those Aboriginal people admitted to permanent or respite aged care during 2003–04, almost 29% were under 65 years of age, compared with fewer than 5% of other Australians. As with all Australians, the number of older Aboriginal people will increase as health status improves. It is important that, in the coming decades, the Aboriginal population is not marginalised in its access to aged and community care services. (National Rural Health Alliance and Aged & Community Services Australia, 2009)

Improving the provision of aged care and respite services to Aboriginal people living in the Eurobodalla Shire was a Council priority in 2008-09. Council has employed Aboriginal care workers to assist with assessment and delivery of culturally appropriate aged care services. Council has also met with local Aboriginal people to promote the types of available services.

Community aged packages for Aboriginal people in the Eurobodalla Shire are provided primarily by Kuranya, a service managed by Uniting Care. Kuranya is funded by the Commonwealth Government to provide Indigenous specific Community Aged Care Packages (CACP) and Extended Aged Care in the Home (EACH). See section 4.6 for greater detail.

Weja Aboriginal Home Care branch provides assessment, home support, domestic assistance, carer respite, minor home maintenance, shopping and personal care for Aboriginal seniors. Weja is managed by the NSW Department of Ageing, Disability and Home Care and funded by the Home and Community Care (HACC) program. Weja operates from Nowra and has an sub-office in Moruya. As a measure to support the independence of Aboriginal people and their families, Aboriginal people may be able to access Weja services from the age of 45.

A carer is a family member, friend, neighbour or other community member who provides care and assistance to another person, often in a regular and sustained manner, without payment other than in some cases a pension or benefit. (NSW Health, 2007)

The National Survey of Disability Ageing and Carers (SDAC) last conducted in 2003 established the following statistics in relation to carers living in NSW. (Australian Bureau of Statistics, 2003)
Carers represent 11% of the NSW population.

Carers are in all age groups, however, primary carers are most likely to be 45 years of age and over and 72% are women.

Caring tends to be a long-term commitment with 33% of primary carers report that they have been caring for at least 10 years.

Over one half of primary carers provide at least 20 hours of care a week.

Carers tend to have lower incomes than the rest of the population and more than half rely on government pensions and allowances as their principal source of income.

While many carers are well supported by family and friends and have no need for formal services, there are carers who are isolated, providing significant amounts of care and are not receiving any support. These ‘Hidden’ carers include ageing carers, carers from culturally and linguistically diverse (CALD) backgrounds, young carers and Aboriginal carers. Reaching ‘hidden’ carers earlier can reduce the negative impact of caring on their own health and wellbeing and prevent crises. (NSW Health, 2007)

Participants at the Eurobodalla Positive Ageing Summit felt that it was a priority to support the ageing population through the provision of independent living options for people with a disability so aged carers can live well by knowing their children have accommodation or support after they die. (IRIS, 2008)

The 2006 ABS Census shows about 1,200 people aged over 65 of 3.5% of the Eurobodalla population were in need of personal assistance (care) compared with 2.4% for NSW. (Informed Decisions)

The Productivity Commission found that in 2008, 37% of people with dementia were cared for entirely by family and friends and received no formal care. Of those that received formal care in the community, the majority of direct care services were provided by volunteers. (Access Economics, 2009)

Council’s National Respite for Carers program assists people who are caring for another person such as those listed below.

- Someone with dementia and or challenging behaviour
- Frail older people and younger people with moderate, severe or profound disabilities
- People with terminal illness in need of palliative care

Some examples of respite care provided by Council are listed below.

- Regular respite provision for day or evening activities or overnight, weekend or other short breaks
- Pampering of carers such as massage, haircut/colour, manicure
- Help with costs of a carer’s leisure pursuits such as sport, education, driving lessons
- Purchase of essential equipment that provides respite for the carer
- Carer support groups
4.6 Residential and Community Aged Care

4.6.1 Residential Aged Care

Residential aged care is for older people who can no longer live at home. Reasons can include illness, disability, bereavement, an emergency, the needs of their carer, family or friends, or because it is no longer possible to manage at home without help.

Aged care homes are owned and operated by people or organisations that have the approval of the Commonwealth Government.

There are two main types of residential aged care in Australia, low level care and high level care. While some aged care homes specialise in low or high level care, many homes in the shire now offer the full continuum of care, which allows residents to stay in the same home as their care needs increase.

Mostly, people in low level care can walk or move about on their own. Low level care focuses on personal care services (help with dressing, eating, bathing etc.), accommodation, support services (cleaning, laundry and meals) and some allied health services such as physiotherapy. Nursing care can be given when required. Most low level aged care homes have nurses on staff, or at least have ready access to them.

High level care provides functionally very dependent people with 24 hour care either by registered nurses or under the supervision of registered nurses. Nursing care is combined with accommodation, support services (cleaning, laundry and meals), personal care services (help with dressing, eating, toileting, bathing and moving around) and allied health services (such as physiotherapy, occupational therapy, recreational therapy and podiatry).

(Department of Health and Ageing, 2009)

The current Commonwealth Aged Care Provision Ratio equates to 113 operational residential places and community care packages for every 1,000 aged 70 years and over. After applying the Aged Care Provision Ratio to Council’s 2006 population estimates, the Shire currently has adequate aged care places overall. To meet the needs of the shire’s aged population estimated to be in excess of 9,000 people in 2031, the commonwealth will need to increase residential and community aged care places by 62\%.

This is significant considering that dementia is common in the elderly and is very common in the very old. It is estimated that 6.5\% of persons aged over 65 years and 22\% of persons older than 85 years had dementia in 2006. (Australian Institute of Health and Welfare) This figure is estimated to double by 2030 and treble by 2050.

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46 Based on the Commonwealth’s current Aged Care Provision Ratio
## Table 14 - Residential Aged Care places – Eurobodalla Shire as at 30 June 2009

<table>
<thead>
<tr>
<th>Facility</th>
<th>Low Care places</th>
<th>High Care places</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banksia Village</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>IRT Crown Gardens</td>
<td>39</td>
<td></td>
</tr>
<tr>
<td>IRT Dalmeny</td>
<td>35</td>
<td>55</td>
</tr>
<tr>
<td>Edgewood Park</td>
<td>38</td>
<td>107</td>
</tr>
<tr>
<td>Maranatha Lodge</td>
<td>95</td>
<td></td>
</tr>
<tr>
<td>IRT Moruya Village</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Sir James at Dalmeny</td>
<td>50</td>
<td>30</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>337</strong></td>
<td><strong>192</strong></td>
</tr>
</tbody>
</table>

### 4.6.2 Community Aged Care Packages

The Australian Government funds and regulates three forms of community aged care. The three forms of care are: Community Aged Care Packages (CACP), Extended Aged Care at Home (EACH) and Extended Aged Care at Home-Dementia (EACH-D) packages. (Department of Health and Ageing, 2009)

Community Aged Care Packages (CACP) provide care at home for frail older people with care needs requiring care planning and case management. They are designed to meet the daily care needs of frail older people to enable them to remain in their own homes as an alternative to low-level residential care. A Community Aged Care Package may include personal care assistance, assistance with meals and domestic assistance, such as cleaning.

Extended Aged Care at Home (EACH) offers coordinated, managed and individually tailored care to assist frail aged people with complex care needs to stay in their own homes as an alternative to high level residential care. Extended Aged Care at Home packages may include clinical care (including some nursing services), personal assistance, meal preparation, continence management, therapy services, home safety and modification.

Extended Aged Care at Home-Dementia (EACH-D) packages help frail older people with high level care needs and dementia, and or behaviours of concern, to remain at home. They offer the same types of assistance as Extended Aged Care at Home packages with additional services targeted to meet the needs of people with dementia. A brief description of packages is given below.

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48 Illawarra Retirement Trust Pty Ltd
Table 15 – Overview of Community Aged Care Packages as at May 2009

<table>
<thead>
<tr>
<th>Program</th>
<th>Eligibility (based on assessment by an Aged Care Assessment Team)</th>
<th>Level/ Hours of assistance per week (average)</th>
<th>Funding currently provided per care recipient</th>
</tr>
</thead>
<tbody>
<tr>
<td>CACP</td>
<td>Care recipient requires low level care</td>
<td>6 hours per week</td>
<td>$33.97 $12,399</td>
</tr>
<tr>
<td>EACH</td>
<td>Care recipient is a frail older person who requires high level care</td>
<td>18-22 hours per week</td>
<td>$113.55 $41,446</td>
</tr>
<tr>
<td>EACH-D</td>
<td>Care recipient has dementia with behaviour of concern and requires high level care</td>
<td>18-22 hours per week</td>
<td>$125.23 $45,709</td>
</tr>
</tbody>
</table>

In the Eurobodalla there are four providers of community aged care packages. Packages available through Uniting Care are specifically for Aboriginal people living in the shire. Aboriginal people are able to access these services from 45 years of age.

Table 16 – CACP numbers and providers Eurobodalla Shire as at May 2009

<table>
<thead>
<tr>
<th>Eurobodalla care provider</th>
<th>CACP</th>
<th>EACH</th>
<th>EACH-D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anglican Retirement Villages</td>
<td>21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Illawarra Retirement Trust (IRT)</td>
<td>82</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uniting Care Kuranya (Indigenous)</td>
<td>35</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Eurobodalla Totals</td>
<td>138</td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Regional Care provider</th>
<th>CACP</th>
<th>EACH</th>
<th>EACH-D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Merimbula Home Nursing</td>
<td>22</td>
<td>18</td>
<td>12</td>
</tr>
</tbody>
</table>

49 These packages may be used in a flexible manner by Merimbula Home Nursing to support demand in Cooma, Bega Valley and Eurobodalla Shires. The data is not included.
4.6.3 Aged Care forecasts

Table 19 shows estimates for the number of community and residential aged care places that will be required in the future. This is based on growth estimates for the population of people aged over 70 years of age (Informed Decisions) and the Commonwealth Government Aged Care Provision Ratio.

The current Commonwealth Government Provision Ratio equates to 113 operational residential places and community care packages for every 1,000 aged 70 years and over in 2011. Within this target, 44 of the total 113 places should be residential high care places, 44 should be residential low care places and 25 places should be community care packages. (Department of Health and Ageing, 2009)

After applying the above Aged Care Provision Ratio to Council’s 2006 population estimates, the Eurobodalla Shire currently has adequate aged care places overall.

Table 17 – Growth estimates - Commonwealth funded aged care 2006-2031

<table>
<thead>
<tr>
<th>Year</th>
<th>Est. no of people aged 70+</th>
<th>CACP, EACH, EACH-D</th>
<th>Residential Care high and low</th>
<th>Combined aged care - community &amp; residential</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(25 per 1,000 people over 70)</td>
<td>(88 per 1,000 people over 70)</td>
<td>(113 per 1,000 people over 70)</td>
</tr>
<tr>
<td>2006*</td>
<td>5,812</td>
<td>145 (148)</td>
<td>512 (529)</td>
<td>657 (677)</td>
</tr>
<tr>
<td>2021</td>
<td>7,960</td>
<td>199</td>
<td>700</td>
<td>899</td>
</tr>
<tr>
<td>2031</td>
<td>9,597</td>
<td>240</td>
<td>844</td>
<td>1084</td>
</tr>
</tbody>
</table>

* In data for 2006, the figures in brackets indicate the actual allocation using the Commonwealth Aged Care Provision Ratio as at 3 June 2009

4.6 Aged care needs of gay and lesbian people

Aged care providers including Council have a responsibility to provide non-discriminatory services. As society comes to acknowledge gay and lesbian relationships, so too is the need for recognition by aged care providers as they are sure to encounter gay and lesbian clients at some point in time.

Non-discriminatory policies and practices need to be adopted and aged care services need to consider the provision of awareness training for paid and unpaid staff around the characteristics of understanding, empathy, trust, advocacy and leadership. (Matrix Guild of Victoria, 2009)
Direction (D6) - Improve the range of health and community services

Council response (CR9) – Council’s aged care services meet or exceed industry standards and customer expectations

Action 23 - Work in partnership to support emerging aged care needs

23.1 Implement Eurotransport reforms
23.2 Explore new and emerging models of aged care service delivery
23.3 Deliver the Life Choices and Active Ageing adult day program
23.4 Advocate for growing numbers of older men, people with dementia and people with higher health care needs
23.5 Facilitate the Eurobodalla Regional Respite Coordination Group
23.6 Advocate for the needs of older parent carers
23.7 Seek new funds to meet increasing demand for centre based day care services

Benefits and rewards
✓ Efficient and effect community transport
✓ Demand is met
✓ Output levels are met
✓ More people remain independent as they age
✓ Carers are recognised and adequately supported in their role
Action 24 - Advocate for the needs of identified target groups

24.1 Improve access to aged care services by men, Aboriginal people, people from a Culturally and Linguistically Diverse (CALD) background and gay and lesbian people

24.2 Provide specialist awareness training to paid and unpaid staff

Benefits and rewards

✓ Organisational and community diversity is enhanced and promoted

Action 25 – EuroCare Services to implement Business Excellence Framework

25.1 Maximise aged care service delivery by implementing tasks identified by the Business Excellent Framework

25.2 Review methods of recruitment, support and retention of care workers

Benefits and rewards

✓ Higher levels of productivity and customer satisfaction
✓ Efficient, affective and affordable services that meet funding body service outputs
✓ Sound financial balance sheet
✓ Higher productivity plus worker and customer satisfaction
✓ Higher levels of productivity plus customer and worker satisfaction
Action 26 - Work in partnership to support local nursing and allied health disciplines

26.1 Seek funds and work with aged care providers to develop a model of clinical and allied health support

Benefits and rewards

✓ Attract and retain health care professionals working
✓ Improve continuity of care
Theme 5 – Dignity and Respect

5.1 What local people said

A strong community is one where people of all ages are involved. The community may unwittingly create social, economic and physical barriers and limit, prevent or alter opportunities for involvement by older people.

Participants at the Eurobodalla Positive Ageing Summit in 2008 felt that the following key directions for local action would help enhance the right of older people to live in dignity. (IRIS, 2008)

Older people are valued members of the community – the right to be valued through identifying opportunities to positively promote older people within the community

Community inclusion – the right to be treated fairly through an inclusive approach to planning and the provision of facilities and services to the whole community, not just older people

When focus groups were asked what can be done to encourage people to see ageing as an opportunity and to see older people as valuable, participants views revolved around the dignity and respect for older people. (Eurobodalla Shire Council, 2009) Some of their statements are listed below.

- older people often feel invisible as they perceive that society is focussed on youth and middle age.
- society should acknowledge that the vast majority of older people are ageing disgracefully and loving it!
- learn from traditional country towns that are more friendly and tolerant of older people when compared to new towns
- older people also need to be respectful of young people and people in service industries – it’s a two way thing
- always liaise with Traditional Custodians when developing or renewing projects that involve Aboriginal people
When asked to rate nine statements about living in the shire, where one equals *strongly disagree* and five equals *strongly agree*, all 282 respondents of the Eurobodalla Positive Ageing Survey answered. A summary of the results is provided below.

Table 18 – Rated statements about living in the shire

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Rating out of 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>My community feels like home</td>
<td>1.4% (4)</td>
<td>3.6% (10)</td>
<td>7.8% (22)</td>
<td>37.4% (105)</td>
<td>49.8% (140)</td>
<td>4.31</td>
</tr>
<tr>
<td>I feel safe in my neighbourhood during the day</td>
<td>1.4% (4)</td>
<td>1.4% (4)</td>
<td>1.1% (3)</td>
<td>33.8% (95)</td>
<td>62.3% (175)</td>
<td>4.54</td>
</tr>
<tr>
<td>I feel safe walking in my neighbourhood at night</td>
<td>6.7% (19)</td>
<td>14.9% (42)</td>
<td>18.8% (53)</td>
<td>30.9% (87)</td>
<td>28.7% (81)</td>
<td>3.60</td>
</tr>
<tr>
<td>People from other countries and cultures enrich this area</td>
<td>2.1% (6)</td>
<td>6.0% (17)</td>
<td>21.4% (60)</td>
<td>39.9% (112)</td>
<td>30.6% (86)</td>
<td>3.91</td>
</tr>
<tr>
<td>I feel a responsibility to contribute to the community</td>
<td>0.4% (1)</td>
<td>2.1% (6)</td>
<td>10.6% (30)</td>
<td>45.4% (128)</td>
<td>41.5% (117)</td>
<td>4.26</td>
</tr>
<tr>
<td>If there was a problem in the community, people would get together and solve it</td>
<td>3.2% (9)</td>
<td>5.7% (16)</td>
<td>16.4% (46)</td>
<td>48.6% (136)</td>
<td>26.1% (73)</td>
<td>3.89</td>
</tr>
<tr>
<td>If I had an emergency, people I don't know would help me</td>
<td>3.2% (9)</td>
<td>7.1% (20)</td>
<td>12.1% (34)</td>
<td>46.8% (132)</td>
<td>30.9% (87)</td>
<td>3.95</td>
</tr>
<tr>
<td>The community is friendly towards newcomers</td>
<td>2.5% (7)</td>
<td>6.4% (18)</td>
<td>15.4% (43)</td>
<td>51.8% (145)</td>
<td>23.9% (67)</td>
<td>3.88</td>
</tr>
<tr>
<td>It is very important to me to live where I do</td>
<td>0.4% (1)</td>
<td>2.9% (8)</td>
<td>7.1% (20)</td>
<td>35.4% (99)</td>
<td>54.3% (152)</td>
<td>4.40</td>
</tr>
</tbody>
</table>
When asked to identify ways that they could make the community stronger, 125 people or 44.3% of the 282 respondents of the Eurobodalla Positive Ageing Survey answered to this non-compulsory question. A summary of the results is provided below.

Table 19 – Ways that survey respondents felt that they can make the community stronger

<table>
<thead>
<tr>
<th>Response category</th>
<th>Response percent</th>
<th>Response count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community participation including volunteering</td>
<td>30.4%</td>
<td>38</td>
</tr>
<tr>
<td>Personal responsibility, respect and understanding of each other</td>
<td>37.6%</td>
<td>47</td>
</tr>
<tr>
<td>Someone else’s responsibility</td>
<td>23.2%</td>
<td>29</td>
</tr>
<tr>
<td>Inappropriate response</td>
<td>8.8%</td>
<td>11</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>125</td>
</tr>
</tbody>
</table>

Many survey responses (37.6%) centred around personal responsibility and for nurturing respect and understanding of each other. Some of the more poignant responses are listed below.

- develop community spirit and be more friendly to newcomers
- people need to care about each other
- being helpful and considerate of others
- open doors, put kettle on
- more acceptance of people - less rigid in views towards others
- get to know your neighbours, be more social

Engaging skilled mature age Australians or ‘Golden Gurus’ to provide mentoring support to small businesses and the community was considered one of the top five ideas at the National 2020 Summit. The Federal Government agrees that as the population ages, mentoring will be a valuable way of passing on the skills and experience from retirees to the next generations. In its response to the 2020 Summit, the Federal Government says that is committed to developing a national Golden Gurus mentoring scheme to provide various opportunities for retired mentors to support a range of small business and community needs. The Federal Government is planning to develop this scheme during 2009.

5.2 Cultural Respect

5.2.1 Aboriginal Elders and members of the Stolen Generation

Family is the core unit for Aboriginal people and sharing customs through generations is essential in keeping their sense of identity alive. The removal of Aboriginal children from their families was official government policy in Australia until 1969. Taking children from their families was one of the most devastating practices of white settlement and for many Aboriginal people the impact of the Stolen Generation is felt today. (NSW Department of Community Services, 2009)

Overall in Australia, it is estimated that 7% of Aboriginal adults have been removed from their natural family. Of this figure, it is estimated that 22% are aged over 45 years.
Six out of 10 Indigenous adults in non-remote areas (60%) said that they recognised a specific area as their homelands or traditional country. Of those individuals who did recognise their homelands, the majority (73%) did not live on their homelands but were allowed to visit. (AIHW, 2009)

Some Aboriginal people living in the Eurobodalla Shire are members Stolen Generations and it is vital to consult with them about the issues of their culture and aged care with acknowledgement of the ramifications of the Stolen Generation for them.

5.2.2 Older people from a non-English speaking background

In the 2006 Census, 586 residents of the shire were born in a non-English speaking country and 106 people aged over 65 indicated that they spoke another language and little or no English. While overall the Eurobodalla Shire is not noted for its cultural diversity, there are a notable number of older people of European descent, primarily German, Dutch, Croatian and Italian. Other population groups of note include Austrian, Greek and Maltese.

The onset of old age combined with disability or illness including dementia and dispersion of the population, may lead to social isolation and often limited support networks and social infrastructure. Council will need to examine the need for specific access strategies for these target groups and use accredited interpreter services where necessary. (NSW Department of Local Government, undated)

Direction (D7) – Promote, enhance and celebrate the character, heritage and culture of our community, towns and villages

Council response (CR11) - Encourage people to see ageing as positive and to value the contribution of seniors

Action 27 - Promote the positive aspects of ageing

27.1 Provide community grants to support Senior’s Week

27.2 Present the annual Senior Citizen of the Year Award

Benefits and rewards

✓ Seniors maintain autonomy

✓ Seniors are recognised for their contribution
Pictured are Noelene Brown Australia’s First Ambassador for Ageing and Kaye Shephard 2008 Eurobodalla Senior of the Year
# Performance Measures

The Eurobodalla Positive Ageing Strategy will be monitored annually to ensure that strategies are implemented in accordance with Council’s Management Plan. The General Manager will submit an annual performance report to Council and contribute to the access and equity performance statement in the Annual Report.

<table>
<thead>
<tr>
<th>Direction</th>
<th>How Measured?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Access and safety appraisal of Council facilities undertaken</td>
</tr>
<tr>
<td>1.2</td>
<td>Priority access and safety actions for Council facilities identified and costed</td>
</tr>
<tr>
<td>1.3</td>
<td>Subsidies applied to hire of community buses and facilities and reported annually</td>
</tr>
<tr>
<td>1.4</td>
<td>Pedestrian Access and Mobility Plan (PAMP) developed for Batemans Bay, Moruya, Tuross Head and Narooma</td>
</tr>
<tr>
<td>1.5</td>
<td>Number of paving defects identified and repaired per annum and reported annually</td>
</tr>
<tr>
<td>2.1</td>
<td>Community Engagement Strategy developed by 2011</td>
</tr>
<tr>
<td>2.2</td>
<td>Growing Older in Eurobodalla reviewed by 2011</td>
</tr>
<tr>
<td>2.3</td>
<td>Number of community directories distributed annually</td>
</tr>
<tr>
<td>2.4</td>
<td>Investigation of innovative consultation methods completed by June 2010</td>
</tr>
<tr>
<td>2.5</td>
<td>Promotional material developed that features Aboriginal and CALD people by 2011</td>
</tr>
<tr>
<td>2.6</td>
<td>Older people receive training in new technologies and statistics reported annually</td>
</tr>
<tr>
<td>3.1</td>
<td>Aged Care Standards met &gt;90% and reported annually</td>
</tr>
<tr>
<td>3.2</td>
<td>Number of Councillors, staff and volunteers that attend cultural awareness training reported annually</td>
</tr>
<tr>
<td>3.3</td>
<td>Subsidies applied to supply of community services and reported annually</td>
</tr>
<tr>
<td>4.1</td>
<td>Number of initiatives by the Eurobodalla Passenger Transport Working Group reported annually</td>
</tr>
<tr>
<td>4.2</td>
<td>Investigation of community bus hire completed by 2011</td>
</tr>
<tr>
<td>4.3</td>
<td>Change in number of accessible bus shelters reported annually</td>
</tr>
<tr>
<td>4.4</td>
<td>Change in percentage of urban residents with access to public transport reported every five years</td>
</tr>
<tr>
<td>5.1</td>
<td>Review of library services completed by June 2011</td>
</tr>
<tr>
<td>Direction</td>
<td>How Measured?</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------</td>
</tr>
<tr>
<td>Direction D1</td>
<td>Increase accessibility and transport options (continued)</td>
</tr>
<tr>
<td>6.1</td>
<td>Pedestrian Access and Mobility Plan (PAMP) developed for Batemans Bay, Moruya, Tuross Head and Narooma</td>
</tr>
<tr>
<td>6.2</td>
<td></td>
</tr>
<tr>
<td>6.3</td>
<td>Development Control Plan adopted by 2011</td>
</tr>
<tr>
<td>6.4</td>
<td>RTA commitment by 2011</td>
</tr>
<tr>
<td>6.5</td>
<td>Increase in number of accessible seats installed or maintained reported annually</td>
</tr>
<tr>
<td>6.6</td>
<td>Number of incidents and shared pathways education initiatives reported annually</td>
</tr>
<tr>
<td>Direction D2</td>
<td>Support the availability of a range of housing options</td>
</tr>
<tr>
<td>7.1</td>
<td>Number of adaptable houses built and reported annually</td>
</tr>
<tr>
<td>7.2</td>
<td>Change in ratio of land released to market demand reported annually</td>
</tr>
<tr>
<td>7.3</td>
<td>Change in number of secondary separate dwellings reported annually</td>
</tr>
<tr>
<td>7.4</td>
<td>Senior’s housing fact sheets developed by 2011</td>
</tr>
<tr>
<td>7.5</td>
<td>Investigation of Victorian Moveable Units model completed by 2012</td>
</tr>
<tr>
<td>Direction D3</td>
<td>Maintain the level of safety and security currently enjoyed by the community</td>
</tr>
<tr>
<td>8.1</td>
<td>The needs of elderly and vulnerable people incorporated into Local Disaster Management Plan by 2011</td>
</tr>
<tr>
<td>9.1</td>
<td>Number of meetings and initiatives by Police Liaison Committee reported annually</td>
</tr>
<tr>
<td>9.2</td>
<td>Funds obtained for Community Safety Plan by 2012</td>
</tr>
<tr>
<td>9.3</td>
<td>Community safety issues and strategies affecting older people identified and reported annually</td>
</tr>
<tr>
<td>10.1</td>
<td>Road Safety Strategy Plan adopted by 2011</td>
</tr>
<tr>
<td>10.2</td>
<td>Road Safety Action Plans developed and reviewed annually</td>
</tr>
<tr>
<td>Direction</td>
<td>How Measured?</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------</td>
</tr>
<tr>
<td>Direction D4</td>
<td>Advocate for the needs of older people</td>
</tr>
<tr>
<td>11.1</td>
<td>Number of consultations and initiatives with older people and their advocates reported annually</td>
</tr>
<tr>
<td>11.2</td>
<td>Change in amount and accuracy of data reported annually to funding agencies</td>
</tr>
<tr>
<td>11.3</td>
<td>Number of Healthy Communities Group initiatives supporting older people reported annually</td>
</tr>
<tr>
<td>11.4</td>
<td>Formal link established with NSW Ministerial Advisory Committee on Ageing (MACA) by 2012</td>
</tr>
<tr>
<td>12.1</td>
<td>Government commitment for single regional hospital in the Shire</td>
</tr>
<tr>
<td>12.2</td>
<td>Change in number of health industry workers employed across the shire and reported annually</td>
</tr>
<tr>
<td>13.1</td>
<td>Funds obtained to undertake a Far South Coast Grandparents needs analysis by 2012</td>
</tr>
<tr>
<td>14.1</td>
<td>Strategic alliance developed with aged services providers by 2012</td>
</tr>
<tr>
<td>14.2</td>
<td>Local integrated service and training plan established by 2013</td>
</tr>
<tr>
<td>Direction</td>
<td>How Measured?</td>
</tr>
<tr>
<td>-----------</td>
<td>--------------</td>
</tr>
<tr>
<td>15.1</td>
<td>Number of seniors annually consulted in evaluation and planning of care programs</td>
</tr>
<tr>
<td>16.1</td>
<td>Number of joint activities and participants involving aged and youth services reported annually</td>
</tr>
<tr>
<td>16.2</td>
<td>Older persons mentoring project investigated and recommendations made by 2012</td>
</tr>
<tr>
<td>17.1</td>
<td>Change in number of seniors enquiring about volunteering and being recruited reported annually</td>
</tr>
<tr>
<td>17.2</td>
<td>Change in number of seniors enquiring about volunteering and being recruited reported annually</td>
</tr>
<tr>
<td>18.1</td>
<td>Change in number of older people from Aboriginal and CALD backgrounds in Council activities reported annually</td>
</tr>
<tr>
<td>18.2</td>
<td>Exploration of a professional qualifications and skills register undertaken and recommendations made by 2013</td>
</tr>
<tr>
<td>18.3</td>
<td>Change in number of older people employed or enrolled in formal training across the shire reported annually</td>
</tr>
<tr>
<td>19.1</td>
<td>Change in number of physical activity projects and older participants reported annually</td>
</tr>
<tr>
<td>19.2</td>
<td>Change in number of older Aboriginal people participating in organised physical activity reported annually</td>
</tr>
<tr>
<td>19.3</td>
<td>Change in number of initiatives and participants involving the promotion of healthy dietary intake reported annually</td>
</tr>
<tr>
<td>19.4</td>
<td>Change in estimated number of cigarette smokers – annual estimates obtained from Health Department</td>
</tr>
<tr>
<td>19.5</td>
<td>Change in number of people diagnosed with chronic diseases - annual estimates obtained from Health Department</td>
</tr>
<tr>
<td>20.1</td>
<td>Change in number of initiatives and participants involving the promotion of healthy dietary intake reported annually</td>
</tr>
<tr>
<td>21.1</td>
<td>Change in estimated number of cigarette smokers – annual estimates obtained from Health Department</td>
</tr>
<tr>
<td>21.2</td>
<td>Change in estimated number of cigarette smokers – annual estimates obtained from Health Department</td>
</tr>
<tr>
<td>22.1</td>
<td>Change in number of people diagnosed with chronic diseases - annual estimates obtained from Health Department</td>
</tr>
<tr>
<td>Direction D6</td>
<td>How Measured?</td>
</tr>
<tr>
<td>--------------</td>
<td>---------------</td>
</tr>
<tr>
<td><strong>Improve the range of health and community services</strong></td>
<td></td>
</tr>
<tr>
<td>23.1</td>
<td>Change in Eurotransport cost benefit reported annually</td>
</tr>
<tr>
<td>23.2</td>
<td><em>New Directions</em> adult day program funded and implemented by 2012</td>
</tr>
<tr>
<td>23.3</td>
<td>Change in number of services to older men, people with dementia and people with higher health needs reported annually</td>
</tr>
<tr>
<td>23.4</td>
<td>Number initiatives of the Regional Respite Coordination Group reported annually</td>
</tr>
<tr>
<td>23.5</td>
<td>Number of submissions and activities on behalf of <em>older parent carers</em> reported annually</td>
</tr>
<tr>
<td>23.6</td>
<td>Change in funding and service levels for centre based day care programs reported annually</td>
</tr>
<tr>
<td>23.7</td>
<td>Change in numbers of Eurocare aged care clients from identified target groups reported annually</td>
</tr>
<tr>
<td>24.1</td>
<td>Change in number of training opportunities for paid and unpaid aged care staff reported annually</td>
</tr>
<tr>
<td>25.1</td>
<td>Benchmarking of Council’s aged care services undertaken by 2012</td>
</tr>
<tr>
<td>25.2</td>
<td>Change in retention rates for aged care workers – Commonwealth data obtained and reported annually</td>
</tr>
<tr>
<td>26.1</td>
<td>Funding obtained to develop a model of clinical support in local aged care by 2015</td>
</tr>
<tr>
<td><strong>Direction D7</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Promote, enhance and celebrate the character, heritage and culture of our community, towns and villages</strong></td>
<td></td>
</tr>
<tr>
<td>27.1</td>
<td>Number of Senior’s Week grants allocated and reported annually</td>
</tr>
<tr>
<td>27.2</td>
<td>Change in number of seniors participating in Senior’s Week activities reported annually</td>
</tr>
</tbody>
</table>
Appendix 1—Positive Ageing Summit Final Report—Executive Summary


Positive Ageing in Eurobodalla

A report to Eurobodalla Shire Council

Eurobodalla Shire Council

Good Government, Better Living

Positive Ageing Summit

Facilitated by
IRIS Research
November 2008
EUROBODALLA POSITIVE AGEING SUMMIT - EXECUTIVE SUMMARY

This report presents a summary of findings of the Positive Ageing Summit conducted by Eurobodalla Shire Council on 6 November 2008. The main aim of the Summit was to explore directions for local action for a growing and ageing community and to identify key areas of importance for more in-depth investigation and community consultation. The research objective was to gain an understanding of what aged service providers and senior community groups considered important to providing a positive ageing experience for all older people within Eurobodalla. Information from the Summit and the further in-depth community engagement exercises, and other strategies such as an on-line community survey on ageing, will ultimately inform Council’s first Positive Ageing Strategy for Eurobodalla.

A total of 126 people representing 63 organisations (government, non-government and private) attended the Summit. The Summit involved a morning of learning about the extent to which the local area is ageing, and, hearing about leading practice Positive Ageing Strategies from other councils and others perceptions of what it means to age positively. In the afternoon, participants were engaged in an interactive Positive Ageing Cafe where they rotated around cafe tables and had conversations with other participants on questions posed about positive ageing in Eurobodalla.

During the day participants were introduced to the United Nations Principles for Older Persons. Rather than addressing the needs of older people, the United Nations has developed a „rights based” approach to planning for older persons. The “Five Rights of Older People” address the independence, participation, care, self-fulfilment and dignity of older persons and Council will base its Positive Ageing Strategy on these five rights of older persons. The findings of the Summit have provided directions for addressing these five rights.

**Independence**
Affordable supported and community accommodation (such as a rental option for retirement villages) and an accessible environment and community were the two key directions to emerge for local action that could enhance the right of older people live independently.

“*Need a village that is exclusively rental for people who can’t afford to buy in to retirement villages*”

“*If we had better footpaths and pedestrian crossings, transport we could enhance independence*”

**Participation**
Key directions for local action that could enhance the right of older people to remain integrated with and active participants in their community included intergenerational activities, in particular mentoring programs and opportunities; and, providing pathways for older people to facilitate their entry into volunteer positions where they can use their skills and knowledge to serve their community.

“*Intergenerational interaction eg school kids going into aged homes*”

“*More integration of older people with youth eg mentors, sharing their knowledge and life skills → utilise men’s sheds → cars, bikes*”

“If we had (aged) volunteers working as mentors then we could get more people involved in groups (as they wouldn’t be shy etc) and they would be more active in community life”

“Team of volunteer leaders like at Manningham Council”
Care
Participants considered the key directions for local action that could enhance the right of older people to appropriate care included the promotion of healthy ageing; a good health care industry (that is valued and well resourced with highly skilled personnel and accessible health facilities); and, counselling services for mental and emotional well-being.

“If we valued aged care workers provide incentives For example, wages; traineeships; free Uni after 3 years. Then we would have a vibrant appropriated aged care industry”

“More and better services — pool for hydrotherapy”

“Grief counselling: financial; loss of independence; loss of housing; loss of friends/family”

Self-Fulfilment
Encouraging the extension of existing programs and providing additional activities (such as assistance with technology; speaker programs; graceful ageing program; drama for seniors; story telling; community gardens; etc) were the two key directions identified for local action that could enhance the right of older people to pursue opportunities for self-fulfilment.

“Retirement village activities open to others in surrounding area”

“Teaching people to use technology eg ATMs, - adapt to changes; technology in shops”

“Community projects: community gardens; men’s sheds; things for the greater good; renewable energy”

Dignity
An inclusive approach to planning for older persons was considered a key direction for local action that could enhance the right of older people to live in dignity.

“If we could have everybody belonging to someone then we could maintain inclusiveness, sense of need → individual values → better wellbeing → self worth”

“General approach (from Manningham Council) aims to provide facilities and services addressing all age groups not just older people”

Other key directions to emerge during the Summit identified opportunities where local action could be taken to enhance positive ageing across all five of the United Nations rights of older people:

Communication between all services and sharing resources
Networking, coordinating communication between all services and activities, and sharing resources were considered important to enhancing service provision for older persons.

“If we better networking we could do better planning”

“More communication between services; better coordination of services”

Information to seniors
Ensuring older persons have access to relevant information prior to and during retirement was identified as important to enhancing positive ageing. Participants suggested various avenues to improve the flow of information including a coordinated and centralised information source, senior’s expo / forum and new resident information pack for older persons.

“If we had a „one stop shop‟ for newcomers and others for volunteering, activities, information”

“Like the idea of the retirement forum – Seniors Expo”

Additional resources
Participants acknowledged that additional resources were one avenue to enhancing positive ageing within a community and that this could include additional and sustainable funding, facility improvements and more equipment, and additional people resources.

“If we had resources we could do more”
“Funds to support secretarial support for volunteer and small organizations” “Communities need meeting places – halls should be available at major towns” “If we had equipment we could do oral history” “If we had more volunteers then we can improve accessibility for old persons”

Council conducted the Positive Ageing Summit as the first step in talking to the local community about what could be included in a plan for local action on ageing. It was not intended that the Positive Ageing Summit provide all the answers, merely the direction for future discussions with the community. Possible directions for Council based on the above findings are included in the Ageing Strategy.

Appendix 2 – Eurobodalla Positive Ageing Survey 2008-09

The 22 question survey was open from 27 October 2008 to 5 January 2009. The survey could be accessed and completed on-line from the Eurobodalla Shire Council web site. Hard copies were distributed to participants of the Positive Ageing Summit (126 delegates), seniors groups, community centres and libraries. Two media releases publicised the survey resulting in two radio interviews, newspaper editorial and coverage.

1. **There were 282 survey respondents**
   - 88 were completed on-line
   - 124 were completed by Council staff in face to face interviews
   - 70 returned to Council by post or hand delivered

2. **Of the 282 survey respondents**
   - 276 people or 98% were permanent residents of the shire. The remaining six people were non-resident ratepayers
   - Female: 165 (58.5%), Male: 118 (41.8%)
   - Nine (9) respondents or 3.2% identified as being Aboriginal

3. **Home suburb/location of respondents**

<table>
<thead>
<tr>
<th>Suburb</th>
<th>No. of respondents</th>
<th>Suburb</th>
<th>No. of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Batehaven</td>
<td>9</td>
<td>Mogendoura</td>
<td>1</td>
</tr>
<tr>
<td>Batemans Bay</td>
<td>15</td>
<td>Mogo</td>
<td>2</td>
</tr>
<tr>
<td>Benanderah</td>
<td>1</td>
<td>Moruya</td>
<td>37</td>
</tr>
<tr>
<td>Bodalla</td>
<td>10</td>
<td>Mossy Point</td>
<td>6</td>
</tr>
<tr>
<td>Broulee</td>
<td>19</td>
<td>Mystery Bay</td>
<td>2</td>
</tr>
<tr>
<td>Catalina</td>
<td>7</td>
<td>Narooma</td>
<td>24</td>
</tr>
<tr>
<td>Central Tilba</td>
<td>3</td>
<td>Nelligen</td>
<td>1</td>
</tr>
<tr>
<td>Coila</td>
<td>1</td>
<td>North Narooma</td>
<td>2</td>
</tr>
<tr>
<td>Bingi/Congo</td>
<td>4</td>
<td>Potato Point</td>
<td>3</td>
</tr>
<tr>
<td>Cullendulla</td>
<td>1</td>
<td>Rosedale/Guerilla Bay</td>
<td>3</td>
</tr>
<tr>
<td>Dalmeny</td>
<td>18</td>
<td>Shallow Crossing</td>
<td>1</td>
</tr>
<tr>
<td>Denhams Beach</td>
<td>1</td>
<td>South Head Moruya</td>
<td>8</td>
</tr>
<tr>
<td>Deua River Valley</td>
<td>1</td>
<td>Sunshine Bay</td>
<td>3</td>
</tr>
<tr>
<td>Kianga</td>
<td>6</td>
<td>Surf Beach</td>
<td>10</td>
</tr>
<tr>
<td>Lilli Pilli</td>
<td>2</td>
<td>Surfside</td>
<td>4</td>
</tr>
<tr>
<td>Longbeach</td>
<td>6</td>
<td>Tomakin</td>
<td>6</td>
</tr>
<tr>
<td>Malones Beach</td>
<td>4</td>
<td>Turlingah</td>
<td>2</td>
</tr>
<tr>
<td>Malua Bay</td>
<td>13</td>
<td>Tuross Head</td>
<td>46</td>
</tr>
</tbody>
</table>
4. Respondents by postcode

<table>
<thead>
<tr>
<th>Postcode and extent of location</th>
<th>Number of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>2536 (South Durras to Mogo including Batemans Bay)</td>
<td>84</td>
</tr>
<tr>
<td>2537 (Tomakin to Turlinjah including Moruya &amp; Tuross Head)</td>
<td>130</td>
</tr>
<tr>
<td>2545 (Bodalla and Potato Point)</td>
<td>13</td>
</tr>
<tr>
<td>2546 (Dalmeny to Tilba incl Narooma)</td>
<td>55</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>282</strong></td>
</tr>
</tbody>
</table>

5. Age of survey respondents

- 51-60: 48 (15%)
- 61-70: 108 (37%)
- 71-80: 99 (34%)
- 81-90: 39 (13%)
- 90+: 4 (1%)

6. Survey respondents country of birth

<table>
<thead>
<tr>
<th>Country</th>
<th>Australia</th>
<th>Indonesia</th>
<th>United Kingdom*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td>215</td>
<td>Indonesia</td>
<td>1</td>
</tr>
<tr>
<td>Canada</td>
<td>1</td>
<td>Republic of Ireland</td>
<td>1</td>
</tr>
<tr>
<td>Croatia</td>
<td>1</td>
<td>Netherlands</td>
<td>1</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>1</td>
<td>New Zealand</td>
<td>4</td>
</tr>
<tr>
<td>Egypt</td>
<td>1</td>
<td>Republic of South Africa</td>
<td>2</td>
</tr>
<tr>
<td>Germany</td>
<td>3</td>
<td>Tanzania</td>
<td>1</td>
</tr>
<tr>
<td>Greece</td>
<td>1</td>
<td>United Kingdom*</td>
<td>47</td>
</tr>
<tr>
<td>India</td>
<td>2</td>
<td>USA</td>
<td>2</td>
</tr>
</tbody>
</table>

* United Kingdom includes England, Scotland, Isle of Man and Wales
7. **Length of time respondents have lived in the shire**

<table>
<thead>
<tr>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than one year</td>
<td>3.9%</td>
</tr>
<tr>
<td>1-5 years</td>
<td>14.9%</td>
</tr>
<tr>
<td>6-10 years</td>
<td>23.0%</td>
</tr>
<tr>
<td>11-20 years</td>
<td>23.0%</td>
</tr>
<tr>
<td>21 years or more</td>
<td>35.1%</td>
</tr>
</tbody>
</table>

8. **Main reason for respondents moving to the shire**

<table>
<thead>
<tr>
<th>Reason for moving here</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifestyle</td>
<td>21.3%</td>
<td>60</td>
</tr>
<tr>
<td>Family</td>
<td>10.6%</td>
<td>30</td>
</tr>
<tr>
<td>Climate</td>
<td>5.7%</td>
<td>16</td>
</tr>
<tr>
<td>Retirement</td>
<td>39.7%</td>
<td>112</td>
</tr>
<tr>
<td>Natural environment</td>
<td>3.9%</td>
<td>11</td>
</tr>
<tr>
<td>Work related</td>
<td>10.3%</td>
<td>29</td>
</tr>
<tr>
<td>I've lived here all my adult life</td>
<td>3.9%</td>
<td>11</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>4.6%</td>
<td>13</td>
</tr>
</tbody>
</table>

9. **Respondents were asked to what extent did they agree with the following statements about living in the Shire**

<table>
<thead>
<tr>
<th>Response category</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Rating Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>My community feels like home</td>
<td>1.4% (4)</td>
<td>3.6% (10)</td>
<td>7.8% (22)</td>
<td>37.4% (105)</td>
<td>49.8% (140)</td>
<td>4.31</td>
</tr>
<tr>
<td>I feel safe in my neighbourhood during the day</td>
<td>1.4% (4)</td>
<td>1.4% (4)</td>
<td>1.1% (3)</td>
<td>33.8% (95)</td>
<td>62.3% (175)</td>
<td>4.54</td>
</tr>
<tr>
<td>I feel safe walking in my neighbourhood at night</td>
<td>6.7% (19)</td>
<td>14.9% (42)</td>
<td>18.8% (53)</td>
<td>30.9% (87)</td>
<td>28.7% (81)</td>
<td>3.60</td>
</tr>
<tr>
<td>People from other countries and cultures enrich this area</td>
<td>2.1% (6)</td>
<td>6.0% (17)</td>
<td>21.4% (60)</td>
<td>39.9% (112)</td>
<td>30.6% (86)</td>
<td>3.91</td>
</tr>
<tr>
<td>Response category</td>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Neither</td>
<td>Agree</td>
<td>Strongly Agree</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
<td>-------------------</td>
<td>----------</td>
<td>---------</td>
<td>-----------</td>
<td>----------------</td>
<td></td>
</tr>
<tr>
<td>I feel a responsibility to contribute to the community</td>
<td>0.4% (1)</td>
<td>2.1% (6)</td>
<td>10.6% (30)</td>
<td>45.4% (128)</td>
<td>41.5% (117)</td>
<td></td>
</tr>
<tr>
<td>If there was a problem in the community, people would get together and solve it</td>
<td>3.2% (9)</td>
<td>5.7% (16)</td>
<td>16.4% (46)</td>
<td>48.6% (136)</td>
<td>26.1% (73)</td>
<td></td>
</tr>
<tr>
<td>If I had an emergency, people I don’t know would help me</td>
<td>3.2% (9)</td>
<td>7.1% (20)</td>
<td>12.1% (34)</td>
<td>46.8% (132)</td>
<td>30.9% (87)</td>
<td></td>
</tr>
<tr>
<td>The community is friendly towards newcomers</td>
<td>2.5% (7)</td>
<td>6.4% (18)</td>
<td>15.4% (43)</td>
<td>51.8% (145)</td>
<td>23.9% (67)</td>
<td></td>
</tr>
<tr>
<td>It is very important to me to live where I do</td>
<td>0.4% (1)</td>
<td>2.9% (8)</td>
<td>7.1% (20)</td>
<td>35.4% (99)</td>
<td>54.3% (152)</td>
<td></td>
</tr>
</tbody>
</table>

10. Ways that respondents felt they can make the community stronger

This non-compulsory question was answered by 125 respondents (44.3% of all respondents). For the purposes of this report, the number of responses are categorised below and the full transcript is provided as appendix 2.

<table>
<thead>
<tr>
<th>Response category</th>
<th>Response Percent</th>
<th>Response count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community participation including volunteering</td>
<td>30.4%</td>
<td>38</td>
</tr>
<tr>
<td><strong>Personal responsibility, respect and understanding of each other</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Someone else’s responsibility</td>
<td>23.2%</td>
<td>29</td>
</tr>
<tr>
<td>Inappropriate response</td>
<td>8.8%</td>
<td>11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>100%</td>
<td>125</td>
</tr>
</tbody>
</table>
11. How respondents rated their health

<table>
<thead>
<tr>
<th>Self assessed health rating</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>14.2%</td>
<td>40</td>
</tr>
<tr>
<td>Very good</td>
<td>29.8%</td>
<td>84</td>
</tr>
<tr>
<td>Good</td>
<td>34.0%</td>
<td>96</td>
</tr>
<tr>
<td>Fair</td>
<td>17.4%</td>
<td>49</td>
</tr>
<tr>
<td>Poor</td>
<td>4.6%</td>
<td>13</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>282</td>
</tr>
</tbody>
</table>

12. How respondents rated their health now compared to one year ago

<table>
<thead>
<tr>
<th>Self assessed health rating</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Better than one year ago</td>
<td>15.6%</td>
<td>44</td>
</tr>
<tr>
<td><strong>About the same as one year ago</strong></td>
<td><strong>59.2%</strong></td>
<td><strong>167</strong></td>
</tr>
<tr>
<td>Slightly worse than one year ago</td>
<td>20.9%</td>
<td>59</td>
</tr>
<tr>
<td>Much worse than one year ago</td>
<td>4.3%</td>
<td>12</td>
</tr>
</tbody>
</table>
13. Respondents nominated the activities that they done in the shire in the last three months.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gone out with a group of friends</td>
<td>79.4%</td>
<td>224</td>
</tr>
<tr>
<td>Visited a library</td>
<td>63.1%</td>
<td>178</td>
</tr>
<tr>
<td>Done voluntary unpaid work</td>
<td>47.2%</td>
<td>133</td>
</tr>
<tr>
<td>Attended an education class, workshop or course</td>
<td>27.0%</td>
<td>76</td>
</tr>
<tr>
<td>Played organised sport or physical activity</td>
<td>34.4%</td>
<td>97</td>
</tr>
<tr>
<td>Used one of the Shire's swimming pools</td>
<td>14.2%</td>
<td>40</td>
</tr>
<tr>
<td>Went to a local cinema, theatre or concert</td>
<td>50.4%</td>
<td>142</td>
</tr>
<tr>
<td>Attended a religious or spiritual activity</td>
<td>32.6%</td>
<td>92</td>
</tr>
<tr>
<td>Attended a sporting or cultural event as a spectator</td>
<td>30.1%</td>
<td>85</td>
</tr>
<tr>
<td>Attended a meeting of an organised club or community group</td>
<td>64.2%</td>
<td>181</td>
</tr>
<tr>
<td>Visited a local park or the Botanic Gardens</td>
<td>69.1%</td>
<td>195</td>
</tr>
<tr>
<td><strong>Went to a local restaurant, bar or club</strong></td>
<td><strong>91.8%</strong></td>
<td><strong>259</strong></td>
</tr>
<tr>
<td>Visited a local beach or waterfront attraction</td>
<td>79.8%</td>
<td>225</td>
</tr>
</tbody>
</table>
14. Respondents nominated which factors prevented them from doing the activities listed in the above table.

Up to three answers could be given and 375 answers were recorded.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not interested</td>
<td>48.3%</td>
<td>181</td>
</tr>
<tr>
<td>Can’t afford</td>
<td>9.1%</td>
<td>34</td>
</tr>
<tr>
<td>Fear of abuse, assault or burglary</td>
<td>0.5%</td>
<td>2</td>
</tr>
<tr>
<td>Unable to drive or use public transport</td>
<td>7.5%</td>
<td>28</td>
</tr>
<tr>
<td>Too sick, old or disabled</td>
<td>12.5%</td>
<td>47</td>
</tr>
<tr>
<td>Lack of time due to work (paid/voluntary)</td>
<td>14.1%</td>
<td>53</td>
</tr>
<tr>
<td>Nobody to go with</td>
<td>3.2%</td>
<td>12</td>
</tr>
<tr>
<td>I feel unwelcome</td>
<td>1.3%</td>
<td>5</td>
</tr>
<tr>
<td>Other*</td>
<td>3.5%</td>
<td>13</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>375</strong></td>
</tr>
</tbody>
</table>

* Other factors included the following.
  - New to the area
  - I’m often away from the shire
  - Caring for a sick or disabled relative
15. Respondents were asked how often they participated in moderate physical activity for at least 30 minutes.

Moderate activity was described to respondents as a brisk walk that increased breathing and heart rate.

<table>
<thead>
<tr>
<th>Response category</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all</td>
<td>6.7%</td>
<td>19</td>
</tr>
<tr>
<td>Less than once a week</td>
<td>6.4%</td>
<td>18</td>
</tr>
<tr>
<td>1 to 2 times a week</td>
<td>18.4%</td>
<td>52</td>
</tr>
<tr>
<td>3 times a week</td>
<td>14.9%</td>
<td>42</td>
</tr>
<tr>
<td>More than 3 times a week</td>
<td>19.9%</td>
<td>56</td>
</tr>
<tr>
<td>Every day</td>
<td>33.7%</td>
<td>95</td>
</tr>
</tbody>
</table>

16. Respondents were asked to identify facilities that are hard to access, for example, shopping centres, public buildings or CBD areas.

This non-compulsory question was answered by 120 people (42.1% of all survey respondents). For the purposes of this report, the number of responses are categorised below and greater detail is provided in Appendix 3.

<table>
<thead>
<tr>
<th>Response category</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shopping centre</td>
<td>45%</td>
<td>54</td>
</tr>
<tr>
<td>Private building/facility</td>
<td>15%</td>
<td>18</td>
</tr>
<tr>
<td>Council owned facility</td>
<td>5.8%</td>
<td>7</td>
</tr>
<tr>
<td>Hospital or medical facility</td>
<td>6.7%</td>
<td>8</td>
</tr>
<tr>
<td>Issue or facility not adequately described</td>
<td>12.5%</td>
<td>15</td>
</tr>
<tr>
<td>Respondent happy with local access</td>
<td>15%</td>
<td>18</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>120</td>
</tr>
</tbody>
</table>

17. Respondents were asked where they would go for help if they or their partner could no longer cope at home due to ill health or disability.

This was a compulsory question.

<table>
<thead>
<tr>
<th>Where would you go for help?</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsure where to go</td>
<td>22.3%</td>
<td>63</td>
</tr>
<tr>
<td>I’d know where to go for help</td>
<td>77.7%</td>
<td>219</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>282</td>
</tr>
</tbody>
</table>
Where would you go for help by category?  

<table>
<thead>
<tr>
<th>Category</th>
<th>Response count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council</td>
<td>29</td>
</tr>
<tr>
<td>Community Health</td>
<td>19</td>
</tr>
<tr>
<td>Family, friend or neighbour</td>
<td>73</td>
</tr>
<tr>
<td>General Practitioner</td>
<td>57</td>
</tr>
<tr>
<td>Aged care provider</td>
<td>25</td>
</tr>
<tr>
<td>Aboriginal Medical Services</td>
<td>3</td>
</tr>
<tr>
<td>Hospital</td>
<td>3</td>
</tr>
<tr>
<td>Internet</td>
<td>3</td>
</tr>
<tr>
<td>ring 000</td>
<td>2</td>
</tr>
<tr>
<td>Centrelink</td>
<td>3</td>
</tr>
<tr>
<td>Senior's Information Line</td>
<td>1</td>
</tr>
<tr>
<td>Carelink</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>219</td>
</tr>
</tbody>
</table>

18. Respondents were asked whether they needed home and community services within the last 12 months and whether they were able to obtain that help locally.

<table>
<thead>
<tr>
<th>Response option</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not applicable, I didn’t need help</td>
<td>76.3%</td>
<td>215</td>
</tr>
<tr>
<td>Yes I was able to obtain help locally</td>
<td>20.2%</td>
<td>57</td>
</tr>
<tr>
<td>No, I was not able to obtain help locally</td>
<td>3.5%</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>282</td>
</tr>
</tbody>
</table>

19. Respondents were asked if they’d received health treatment in the last 12 months. Yes respondents were asked to specify their treatment.

<table>
<thead>
<tr>
<th>Response option</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No I didn’t have health treatment</td>
<td>18.8%</td>
<td>53</td>
</tr>
<tr>
<td>Yes I received health treatment</td>
<td>81.2%</td>
<td>229</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>282</td>
</tr>
</tbody>
</table>

Types of treatment that 229 respondents received in the previous 12 months. Respondents received more than one type of treatment.
20. Respondents were asked if they had to leave the shire to obtain their health treatment.

This non-compulsory question was answered by 224 people (79.4% of all survey respondents).

<table>
<thead>
<tr>
<th>Medical treatment</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP check up only</td>
<td>30.3%</td>
<td>77</td>
</tr>
<tr>
<td>Treatment inadequately described</td>
<td>11.8%</td>
<td>30</td>
</tr>
<tr>
<td>Cardiovascular treatment</td>
<td>8.3%</td>
<td>21</td>
</tr>
<tr>
<td>Dental</td>
<td>6.3%</td>
<td>16</td>
</tr>
<tr>
<td>GP other treatment</td>
<td>5.5%</td>
<td>14</td>
</tr>
<tr>
<td>Diagnostic scan</td>
<td>5.5%</td>
<td>14</td>
</tr>
<tr>
<td>Eye disorder</td>
<td>5.1%</td>
<td>13</td>
</tr>
<tr>
<td>Cancer</td>
<td>5.1%</td>
<td>13</td>
</tr>
<tr>
<td>Therapy including physiotherapy</td>
<td>4.7%</td>
<td>12</td>
</tr>
<tr>
<td>Musculoskeletal</td>
<td>3.9%</td>
<td>10</td>
</tr>
<tr>
<td>Hearing disorder</td>
<td>2.8%</td>
<td>7</td>
</tr>
<tr>
<td>Skin conditions</td>
<td>2.8%</td>
<td>7</td>
</tr>
<tr>
<td>Digestive disease</td>
<td>2.0%</td>
<td>5</td>
</tr>
<tr>
<td>Nutrition</td>
<td>1.9%</td>
<td>5</td>
</tr>
<tr>
<td>Genitourinary</td>
<td>1.6%</td>
<td>4</td>
</tr>
<tr>
<td>Podiatry</td>
<td>0.8%</td>
<td>2</td>
</tr>
<tr>
<td>Neurology</td>
<td>0.8%</td>
<td>2</td>
</tr>
<tr>
<td>Mental health</td>
<td>0.8%</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>254</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Response Option</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No I did not have to leave the shire for health treatment</td>
<td>62.9%</td>
<td>141</td>
</tr>
<tr>
<td>Yes I had to leave the shire for health treatment</td>
<td>37.1%</td>
<td>83</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>224</td>
</tr>
</tbody>
</table>
21. Respondents that had left the shire for health treatment were then asked where they had gone.

This question was answered by 83 people (29.4% of all survey respondents). Some respondents visited more than one centre.

<table>
<thead>
<tr>
<th>Response Option</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canberra</td>
<td>53%</td>
<td>61</td>
</tr>
<tr>
<td>Sydney</td>
<td>20%</td>
<td>23</td>
</tr>
<tr>
<td>Bega</td>
<td>13.8%</td>
<td>16</td>
</tr>
<tr>
<td>Nowra</td>
<td>8.6%</td>
<td>10</td>
</tr>
<tr>
<td>Melbourne</td>
<td>1.7%</td>
<td>2</td>
</tr>
<tr>
<td>Wollongong</td>
<td>1.7%</td>
<td>2</td>
</tr>
<tr>
<td>Coffs Harbour</td>
<td>0.8%</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>115</td>
</tr>
</tbody>
</table>

22. Finally, respondents were asked what Council can do in a practical sense to plan for an ageing community.

This non compulsory question was answered by 257 people (91.1% of all survey respondents). A summary of responses by category is listed below and detailed responses are provided as Appendix 4.

<table>
<thead>
<tr>
<th>Response category</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transport development</td>
<td>19.1%</td>
<td>49</td>
</tr>
<tr>
<td>Aged housing and accommodation</td>
<td>8.9%</td>
<td>23</td>
</tr>
<tr>
<td>Economic development</td>
<td>1.5%</td>
<td>4</td>
</tr>
<tr>
<td>Development of services and facilities by Council</td>
<td>25%</td>
<td>64</td>
</tr>
<tr>
<td>Advocate with others</td>
<td>43.6%</td>
<td>112</td>
</tr>
<tr>
<td>Inappropriate response</td>
<td>1.9%</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>257</td>
</tr>
</tbody>
</table>
## Eurobodalla Positive Ageing Strategy

### 1. The purpose of this survey?

This survey will help Council to seek input from the broader Eurobodalla community in the development of an Ageing Strategy to ensure that a diversity of ideas and views contribute to the planning process.

The Ageing Strategy 'Planning for an Active Ageing Community’ will help Council understand and prepare for the impact of population ageing in the Eurobodalla Shire. It will guide Council’s planning, policies, actions and service delivery to meet the challenges and realise the opportunities of an ageing community.

This survey is to be completed by Eurobodalla Shire residents and non resident rate payers aged 55 and over.

### *1. What is your residential status?*
- [ ] Permanent resident
- [ ] Non resident rate payer

### *2. In which Eurobodalla suburb is your home?*

City/Town: [ ]

### *3. Gender*
- [ ] Female
- [ ] Male

### *4. In what year were you born?*

### *5. Are you an Aboriginal person?*
- [ ] Yes
- [ ] No

### *6. Which country were you born in?*

### *7. How long have you lived in the Shire?*
- [ ] Less than one year
- [ ] 1-5 years
- [ ] 6-10 years
- [ ] 10-20 years
- [ ] 20 years or more


### Eurobodalla Positive Ageing Strategy

*8. If you’ve moved to the Eurobodalla Shire, what was the main reason for you coming here?

- Lifestyle
- Family
- Climate
- Retirement
- Other (please specify)_

*9. On a scale of 1 to 5, where 1 means that you strongly disagree and 5 means you strongly agree, to what extent do you agree with the following statements about living in the Shire?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>My community feels like home</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel safe in my neighbourhood during the day</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel safe walking in my neighbourhood at night</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People from other countries and cultures enrich this area</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel a responsibility to contribute to the community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If there was a problem in the community, people would get together and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>solve it</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If I had an emergency, people I don’t know would help me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The community is friendly towards newcomers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It is very important to me to live where I do</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10. Can you think of any ways that residents can make this community stronger?

*11. In general, how would you rate your health?

- Excellent
- Very good
- Good
- Fair
- Poor
**Eurobodalla Positive Ageing Strategy**

* 12. Compared to one year ago, how would you rate your health now?
   - Better now than a year ago
   - About the same as one year ago
   - Slightly worse now than one year ago
   - Much worse now than one year ago

* 13. Please tick the activities that you have done in the shire in the last three months (you may select more than one answer).
   - Gone out with a group of friends
   - Visited a library
   - Done voluntary unpaid work
   - Attended an education class, workshop or course
   - Played organised sport or physical activity
   - Used one of the Shire's swimming pools
   - Went to a local cinema, theatre or concert
   - Attended a religious or spiritual activity
   - Attended a sporting or cultural event as a spectator
   - Attended a meeting of an organised club or community group
   - Visited a local park or the Botanic Gardens
   - Went to a local restaurant, bar or club
   - Visited a local beach or waterfront attraction

* 14. Which of the following factors prevented you from doing these activities (select a maximum of three factors)?
   - Not interested
   - Can't afford
   - Fear of abuse, assault or burglary
   - Unable to drive or use public transport
   - Too sick, old or disabled
   - Lack of time due to work (paid/voluntary)
   - Nobody to go with
   - I feel unwelcome
   - Other (please specify):

* 15. How often do you participate in moderate physical activity for at least 30 minutes (moderate activity like a brisk walk will increase breathing and heart rate)?
   - Not at all
   - Less than once a week
   - 1 to 2 times a week
   - 3 times a week
   - More than 3 times a week
   - Every day

16. Can you identify facilities that you find are hard to access (for example: shopping centres, public buildings or CBD areas)?
**Eurobodalla Positive Ageing Strategy**

* 17. Where would you go for help if you or your partner found you could no longer cope at home due to ill health or disability?
   - Unsure where I would go for help
   - For help I would go to (please specify)

* 18. If you or your partner needed home and community care services in the last twelve months, were you able to obtain that help locally?
   - Not applicable, I didn’t need help
   - Yes
   - No

* 19. Have you received health treatment in the last 12 months?
   - No (if no go to question 22)
   - Yes, (please specify treatment)

20. If you have received health treatment in the last twelve months, did you have to leave the Shire?
   - No I did not leave the Shire for treatment (if no go to question 22)
   - Yes I had to leave the Shire for treatment

21. If you received health treatment outside of the Shire, where did you go?
   - Canberra
   - Sydney
   - Bega
   - Other (please specify the name of city)

22. What can Council do in a practical sense to plan for an ageing community?
Can you think of ways that residents can make this community stronger?

**Theme 1. Community participation including volunteering**

- spend more time with young people
- Become a volunteer wherever possible
- everyone too busy to take time to help others
- joining community groups
- more community spirit - volunteering
- encourage younger people to join service clubs etc
- get together more
- working together for a cause
- be more involved
- spend more time with young people
- more volunteering in community groups
- volunteer more - particularly 20 - 45 age group
- work with young people

By attending Maloney's Beach Residents Association meetings to give their opinions on local needs.

They are doing a pretty good job now.

- improve community communication
- help older people
- Support local businesses, festivals, sporting clubs, community organizations
- attend planning meetings and participate, volunteer in local community services
- become a volunteer
- become a volunteer
- join community groups
- become involved in local and community affairs
- get together more on a social level
- Participate in community activities
- join groups working to improve area, dune care etc
- volunteer to help their fellowman
Volunteer more, share skills with youth, speak to each other more, get involved and support community events
participate more in the governance of the Shire
By supporting each other as we face the future
Assist young people to feel valued
Encourage more involvement on a volunteer basis with council or others underwritten support.
By being more active in local decision making that effects their lifestyle
Be supporters of their community groups not just leave it to a few people to do all the work
Participation in community activities
Street Party
The younger generation need to get more involved, eg, rural fire service & Landcare
join together, volunteering

**Theme 2. Personal responsibility, respect and understanding each other**
develop community spirit that there seems to be in Moruya and Mogo
be more friendly to newcomers
Being helpful, considerate of everyone and the environment, and buying locally.
more acceptance of people - less rigid in views towards visitors and newcomers
being more friendly
aboriginal - more tolerance
open doors, put kettle on
just be here for each other
work together
get together to discuss issues
be more welcoming to ALL
participating, including, inviting, respecting, healthy open discussion debate, not over committing to too many things
people need to care about each other
be more positive towards newcomers
helping each other
more liaison between young and old - adopt a granny or pa or older couple
communication particularly to & from youth & council
help people
Join together in activities
Generally be more welcoming, include newcomers in some of their activities, invite into home for morning or afternoon teas.
Take more responsibility for the cleanliness and friendliness of the local population
Where there is a need, help one another in times of adversity. - Be supportive when necessary.
get to know your neighbours - be more social
more communication
helping one another
Just by pulling together and striving for the same things that will help the community as a whole
be there for each other
respect others
for people to respect others at all times
By trying to help themselves as much as possible
be more positive (but that is hard when things go wrong)
Yes. Through greater emphasis on self-help, especially healthy life-styles.
Find more opportunities for employment creation
learn to express and pursue their opinions more effectively
only to accept people as they are
Focus on the positives and the community - not just themselves
Be more concerned and involved with preserving the environment, both land and sea
Working together with community and council to gain the best amenities for our shire
more community events
forming support groups - talk with council - be more aware
be more openly friendly
be more supportive of each other
working together - communication!!!!!!
take more interest in the community in general
communicate with one another
be friendly to one another

**Theme 3. Someone else’s responsibility**

- better facilities
- organise more cultural events in the shire
- more visible police presence
- have a lobby group to push for more buses
- people who move into this area SHOULD NOT try and change it!!
- more community events in Tuross
- encourage people to lobby for better community transport
- more facilities for youth
- put residents first, businesses & developers second
- People need to shed their bigotry
- more family activities around celebrations
- more communication and more social activities
- More police present/action we live in fear.
- Newcomers must leave their negative city ideas behind
- stop small town whingers
- Take a zero tolerance to crime. Have strict guidelines for tourist behaviour. evict tourist vandals from the Bay. Make Canberra responsible for their young thugs. More police patrols. Proper judicial sentencing.
- more cultural events for our community e.g. parades, music events & community celebrations to bring us together
- Opinions respected and acted upon in a positive way by council
- Need to have a community meeting place in Maloneys Beach, so that activities can be held which would support community awareness and connectedness.
- More awareness of voluntary work, other things to do available to make transition from work to retirement
- Work towards having villas in retirement villages available for rent for those of us who cannot afford to buy one but who can afford to pay a higher rent; and there are many more than you might think.
- By working towards helping the homeless, especially men who are transients up and down the coast.
- Mossy Point is difficult, as there a few permanent residents, and the community association seems to have folded.
There needs to be a central area where new residents can learn details about the town where they live and what services etc are available.

- Report all vandalism & dob in all vandals
- Stamp out anti social behaviour
- With more funds residents could do more community activities
- Encourage people to join in community happenings!

Do something to make newcomers welcome, some sort of club perhaps. Make Narooma Leisure Centre available to all groups, heat the swimming pool; I believe these are the places where people would like to congregate. Encourage AFTERNOON activities. Everything is in the morning. I, for one, struggle hard to get to things in the morning, but afternoons would be great. Council funded exercise programs. Pensioners can't afford exercise classes and trainers, which we need. I would also like to attend afternoon Church services or activities in this area.

Help stop vandalism be watchful!

**Inappropriate responses**

There were 11 inappropriate responses
<table>
<thead>
<tr>
<th>Facilities or location that are hard to access</th>
<th>Response count</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Narooma Plaza car park</strong></td>
<td>21</td>
</tr>
<tr>
<td>Pedestrian access across Perry Street Batemans Bay</td>
<td>10</td>
</tr>
<tr>
<td>Shopping centres location not described</td>
<td>10</td>
</tr>
<tr>
<td>Shopping centre – Stocklands Village Centre</td>
<td>4</td>
</tr>
<tr>
<td>Shopping centre – Broulee</td>
<td>4</td>
</tr>
<tr>
<td>Shopping centre – Moruya Southlands</td>
<td>3</td>
</tr>
<tr>
<td>Shopping centre – Moruya Air Raid Building</td>
<td>1</td>
</tr>
<tr>
<td>Shopping centre – Malua Bay</td>
<td>1</td>
</tr>
<tr>
<td>Shopping centre – Central Tilba</td>
<td>1</td>
</tr>
<tr>
<td>Batemans Bay Cinema</td>
<td>7</td>
</tr>
<tr>
<td>Parking – location not described</td>
<td>5</td>
</tr>
<tr>
<td>Lack of public transport – location or issue not described</td>
<td>4</td>
</tr>
<tr>
<td>Shire swimming pools – location not described</td>
<td>4</td>
</tr>
<tr>
<td>Toilets – location not described</td>
<td>3</td>
</tr>
<tr>
<td>Toilet – mid town Narooma</td>
<td>1</td>
</tr>
<tr>
<td>Toilet – Dalmeny</td>
<td>1</td>
</tr>
<tr>
<td>Narooma Post Office</td>
<td>1</td>
</tr>
<tr>
<td>Beaches</td>
<td>2</td>
</tr>
<tr>
<td>Footpaths and cycle ways – location not described</td>
<td>2</td>
</tr>
<tr>
<td>Private buildings with stairs and disabled access – location not described</td>
<td>5</td>
</tr>
<tr>
<td>The majority of picnic tables are difficult for elderly people to access</td>
<td>1</td>
</tr>
<tr>
<td>Most churches are not accessible for wheelchairs</td>
<td>1</td>
</tr>
<tr>
<td>Doctors and medical centres – location not described</td>
<td>4</td>
</tr>
<tr>
<td>Taxi rank in Batemans Bay should be located near bus and coach stop</td>
<td>1</td>
</tr>
<tr>
<td>Hospitals – location or access issue not described</td>
<td>4</td>
</tr>
<tr>
<td>Council Chambers</td>
<td>1</td>
</tr>
<tr>
<td>Respondent answered that there are no facilities that are hard to access</td>
<td>18</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>120</strong></td>
</tr>
</tbody>
</table>
What can Council do in a practical sense to plan for an ageing community?

**Transport development**

<table>
<thead>
<tr>
<th>focus on public transport</th>
<th>better public transport</th>
</tr>
</thead>
<tbody>
<tr>
<td>improve public transport</td>
<td>better public transport</td>
</tr>
<tr>
<td>improve transport</td>
<td>improve public transport</td>
</tr>
<tr>
<td>improve transport - support mini buses around CBD areas</td>
<td>need more community transport which is more flexible</td>
</tr>
<tr>
<td>transport, care support</td>
<td>transport, care support</td>
</tr>
<tr>
<td>Improve the public transport system</td>
<td>cheaper transport</td>
</tr>
<tr>
<td>cheaper transport</td>
<td>better and cheaper transport</td>
</tr>
<tr>
<td>cheaper and better public transport</td>
<td>more buses, public transport cheaper, even when using Eurotransport you have to book</td>
</tr>
<tr>
<td>very unhappy with Eurotransport - refused to arrange return transport from Canberra due to lateness leaving, also refused to pick me up on the following day from Canberra to bring me back home! Something should be done to stop that ever happening to anyone else.</td>
<td>cheaper transport</td>
</tr>
<tr>
<td>more public transport</td>
<td>cheaper and better public transport</td>
</tr>
<tr>
<td>improve public transport - more housing options for older people</td>
<td>improve public transport</td>
</tr>
<tr>
<td>improve public transport</td>
<td>improve public transport</td>
</tr>
<tr>
<td>better public transport</td>
<td>concentrate on a better transport system</td>
</tr>
<tr>
<td>improve public transport - make community transport fares more appropriate to users income</td>
<td>increase public transport options</td>
</tr>
<tr>
<td>increase public transport options</td>
<td>improve and increase transportation</td>
</tr>
<tr>
<td>more transport</td>
<td>concentrate on a better transport system</td>
</tr>
<tr>
<td>we need a bus service</td>
<td>we need a bus service</td>
</tr>
<tr>
<td>a full time bus</td>
<td>in Tuross we need reliable transport</td>
</tr>
<tr>
<td>in Tuross we need reliable transport</td>
<td>in Tuross we need reliable transport</td>
</tr>
</tbody>
</table>
- More public transport to Tuross and other outlying towns
- Make public transport available
- Improve public transport
- Why does community transport now not take phone referrals or registrations wouldn’t this make it less accessible to older persons.
- More public transport & more age facilities
- Introduce public transport to Canberra/Nowra to access rail transport to Sydney.
- Improve local public transport services
- Home delivery of library books, a community bus for shopping
- Better transport services for medical assistance especially to pensioners.
- More public transport to anyone unable to drive. Bus services to Maloney’s Beach is only twice a day

### Aged housing and accommodation

- Affordable housing/aged residential housing
- Good quality retirement villages and nursing homes
| More Moruya retirement units - at a reasonable cost |
| encourage development of retirement village - medical facilities for older people |
| aged care accommodation - integrated care - more home care services - keep country village feel |
| provide retirement accommodation - independent living |
| promote independent living - communal housing |
| plan for more aged care residences and train more aged care workers for future needs |
| retirement style housing within town |
| more information on retirement options |
| more aged housing options |
| more independent living - rezoning of level ground |
| plan for more suitable aged care accommodation facilities. |
| cheaper accommodation |
| improve aboriginal housing |
| more aged friendly housing |
| more 55+ housing options. |
| housing options for older people |
| attract and approve retirement villages and medical specialists |
| make sure land is zoned for aged care housing and facilities |
| fast track seniors housing proposals |
| pressure needs to be put on the government to assist this ever-growing group of older people to achieve the same sense of housing security as those who are fortunate enough to be able to buy into a retirement village. |
| develop community housing in towns to reduce the need for driving |

**23 housing submissions**

**Business and retail**

improve retail choice in Narooma - stop people going to Batemans Bay
improve retail choices in Narooma. keep people shopping locally
Narooma lacks a variety of shops, they are too spread out and disgustingly behind the times.
arrange either lift or new ground floor facility for Batemans Bay cinema
<table>
<thead>
<tr>
<th><strong>4 business submissions</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community facilities and services</strong></td>
</tr>
<tr>
<td>provide an indoor pool for exercise and therapy in Batemans bay</td>
</tr>
<tr>
<td>sealing of gravel roads</td>
</tr>
<tr>
<td>need accessible toilet Narooma mid-town</td>
</tr>
<tr>
<td>investigate &quot;pet therapy&quot; - promote volunteering in newspapers etc</td>
</tr>
<tr>
<td>more pedestrian crossings in shopping centres; maintain footpaths; support to volunteer groups</td>
</tr>
<tr>
<td>Make Council web site more user friendly</td>
</tr>
<tr>
<td>have a mobile library for people unable to attend the libraries</td>
</tr>
<tr>
<td>Council sponsored exercise programs as gyms are too expensive</td>
</tr>
<tr>
<td>Heated swimming pool, build cultural centre for stage productions and regional gallery</td>
</tr>
<tr>
<td>Footpath from Moruya Bowling Club to Thomas Street. Sponsored bus outings for pensioners.</td>
</tr>
<tr>
<td>Ensure that any advancements are publicised in the local paper</td>
</tr>
<tr>
<td>more info about community services - newspapers or brochures</td>
</tr>
<tr>
<td>improve footpaths - remove trip hazards - keep main hospital in Moruya</td>
</tr>
<tr>
<td>more homecare so people could stay at home longer</td>
</tr>
<tr>
<td>more paths, create more disabled parking spaces and then monitor them!</td>
</tr>
<tr>
<td>more paths - particularly in suburbs</td>
</tr>
<tr>
<td>put in a lot more suburban paths. put a pedestrian crossing over Perry sty Batemans Bay</td>
</tr>
<tr>
<td>coordinate information about various aged care / accommodation services available locally</td>
</tr>
<tr>
<td>keep people informed about community services - help with retirement planning</td>
</tr>
<tr>
<td>more in-home care such as housework at a reasonable cost</td>
</tr>
<tr>
<td>more seating along pathways/cycle ways - improve facilities at Casey’s beach</td>
</tr>
<tr>
<td>put a pedestrian crossing at Perry sty Batemans Bay or an island</td>
</tr>
<tr>
<td>council doing a good job</td>
</tr>
<tr>
<td>increase footpaths in urban areas.</td>
</tr>
<tr>
<td>improve paths particularly in Elizabeth Drive and Heath Sts [Broulee] need to have paths for the use of both children exiting school and residents of Banksia Lodge.</td>
</tr>
<tr>
<td>Toilet in Riverside Park</td>
</tr>
</tbody>
</table>
Council get more involved with youth
Loneliness is a big problem, suggest low cost group activities where regular human contact would promote greater happiness, wellbeing and a sense of belonging.

build a cultural centre
heated pool in Batemans Bay
pedestrian crossing across river road Moruya near IRT retirement village to access the riverside path
more performance arts and music on Moruya
increase availability of retirement places with access to shops DRs etc. more public access to waterways (eg riverside walkway in Narooma) with access for fishing etc
parking availability in Moruya! public toilets in Moruya are disgusting!
more parking places in Moruya, public toilets in Moruya are often unclean!

examine gaps in services. - increase footpaths - upgrade Evans rd toilet block - evaluate the toilet cleaning contractor
buildings (inc gov) in commercial precinct should be designed by architect eg bike shop (Moruya) it’s excellent - more consideration for pedestrians - encourage walking - reconfigure street lights in Moruya do them like the ones at Sydney town hall.
workshops for elderly eg woodwork, knitting easy computers, encourage more participation in life
more planning to facilitate travel for people with walking aids & other disabilities. eg more pedestrian paths and ramps.
more information, more paths, more public transport, more interaction between young and elderly to encourage respect.
provide more ramps
more footpaths, improve public transport
provide crossing for Perry sty, build a senior citizens centre, encourage school leavers to become doctors by offering scholarships
more public transport, more footpaths
plan villages with communal centres and social hubs
more paths desperately needed everywhere

Build a year round aquatic centre in Batemans Bay, where half the population of the shire lives, for the health and wellbeing of all from very young to very old and all ages in between.
weather proof shelter at taxi ranks
finish bicycle way on South Head road, develop William sty, Moruya
provide toilets in riverside park
provide adequate transport for shopping, medical, recreational activities, library access.
| Provide help for housebound, more community cars to take people shopping and for appointments |
| Lower Rates for pensioners, reduce Council outlay on sport |
| Build retirement village with all levels of care plus gym, heated swimming. Flat access paths to CBD areas suitable for 'gophers' |
| Build a heated pool with disabled access. Have more podiatry clinics. Hold more social groups for men. |
| More disabled parking spaces |
| Provide more talking books at the library. Make more disabled parking spaces |
| Provide support for independence, enrich physical and environmental participation opportunities |
| Make this area as sustainable as possible with local produce, etc and keep a lid on development. |
| Give us somewhere that is ours to meet for our varying activities and aid for the costs. |
| Teach people to be aware of the costs of maintaining a home (not just rates) - e.g. septic systems. |
| Provide community coordination staff to assist voluntary groups and service providers get care to the people who need it. Setup and fund internet services and phone services to help volunteers and recipients keep in contact. Help coordinate an ongoing communication program to ensure people are aware of services on offer and where they can look for help. Work with preventative health services to deliver services and education to our community. |
| Complete William street, complete bicycle track on South Head Road |
| More cultural events & venues, heated swimming pool in Batemans Bay open all year-for water aerobics, swimming for fitness |

**64 facilities and services submissions**

### Advocacy – Council to work with other groups and levels of Government

- Lobby state/federal Governments for more help
- Improve health care services by advocating to state. Retirement living, self care/independent living
- Maintain both local hospitals
- Maintain and improve Moruya hospital for southern shire residents
- Get the mobile blood bank to Narooma/Moruya
- Need more flexibility with visiting hrs to GPs, council lobby for more specialists to visit regularly
- More contact with community - one great councillor - Lindsay Brown
- Lobby for better medical facilities, should encourage GPs to bulkbill
- Improve the hospitals
develop social plan that reflects not just ageing but youth right through. need to address social implications re quick growth - reflect needs - social, health, psychosocial etc. we are becoming a city - loose small town mentality.

hospitals need attention
more rehab facilities
more medical services
improve hospital situation
more medical facilities particularly rehab
more medical care + research (statistics)
more nursing home care
more aged care facilities
improve nursing home facilities therefore creating availability
easier access to care for the aged
gas line through to coast
listen!!!!
improve hospitals, age care facilities, nursing homes, transport, more retirement villages
health care issues
advocate to state to improve health care - retain hospital services in Batemans Bay - indoor heated pool in Batemans Bay.
attract retirement village services.
create more hospital beds - increase nursing staff
become more involved with providers of retirement villages
more aboriginal cultural activities
talk to the community more - housing suited to the affordability of local people
improve hospital services - more GP's less waiting time
support more cultural activities
more help for women in their own homes
medical availability in Tuross Head
where are the retirement homes/villages in Tuross Head
more nursing homes needed, therefore staffing of these places. Moruya TAFE does train people but it seems more are needed. eg regular ads for staffing. Council needs to address this need.

- encourage GP service for Tuross
- we need a GP in Tuross - more police throughout shire
- encourage more specialists to our shire - encourage a GP into Tuross
- support the work of non-profit organisations
- more retirement options in Moruya
- encourage more medical services for older people - specialists in gerontology
- lobby for regional hospital with state & federal government for better specialist care, more retirement to nursing care facilities, advertise community support services eg send fliers with rate notices.
- adequate home care to allow residents to stay in their own homes. Better hospital facilities to avoid leaving the shire
- provide rental units in retirement villages as many seniors can't afford to buy
- build over 55 village with rentals available
- provide a community facility for seniors
- need a meeting place for seniors. look after southern end of shire regarding our rates
- more self care placements
- strengthen already available services
- lobby for more aged care facilities in the south. plan for future transport needs of the elderly
- plan more hospital places in southern end of shire
- make sure there are enough homecare help & aged homes, for the rise in ageing we will experience in future.
- research needs for future - council could act as advocate for elderly - eg create awareness of services for those living on their own.
- improve hospital service
- Local Doctor or Medical facilities needed at Tuross
- Recognise that numbers of ageing members are growing
- Assist developers such as Silver Spirit - Moruya East Village proposal
- provide better cheaper transport
- Increase help to pensioners to help them stay at home
- Bring specialists into the area, and x-rays to Narooma, subsidise things, eg specialists, exercise, hairdressers, dental, activities
- Build a new hospital, and employ Eurobodalla residents.
social inclusion respite care
More aged care homes including dementia care located near main town centres
create and coordinate more community projects
good to show older people as active but I don't think the bloke on the surfboard is very female inspirational/friendly - work with health department for low cost aqua aerobics/exercise classes etc
attract doctors & specialist to area and develop Moruya hospital for the whole shire
ensure as many services from birth to the grave are available to everybody, new one will ask and if these services are not available or too hard to find they will not come or move out.
provision of more nursing and health specialist services
review and implement more accessible public transport, put pedestrian crossing Perry Street
educate / encourage personal responsibility for healthier life styles and improve mobility within residential areas by making streets user friendly for non-motorists.
reduce the need to go to Canberra and elsewhere for medical treatment by developing a wider range of services locally; replicate more services across the shire
Help is needed to instruct the elderly on computer use, ATM use, Video use and mobile phone use.
Each of the major centres (Batemans Bay, Moruya, Narooma) needs a comprehensive Medical Centre/Hospital. A privately funded hospital would be a useful addition but not a substitute.
improve access to medical facilities in Tuross and assist in the provision of public transport to Moruya
Make it a safe community because it certainly isn't. During holiday breaks thugs rule and run the [Batemans Bay] bay with impunity.
ENDEAVOUR TO ARRANGE FOR MORE HEALTH SPECIALISTS SERVICES LOCALLY
Facilitate the provision of more aged care accommodation from over-55’s retirement villages to nursing home accommodation.
A GP in Tuross Head
It would be great to have a doctor in Tuross Head. A bus to travel once each week between Tuross Head and Batemans Bay
ensure good access to facilities, transport and health facilities
Push for a Regional Hospital with full complement of specialists. Footpaths on main roads, more effective public transport system, parking for the elderly other than disabled, pedestrian crossing in busy CBD areas. A Service Directory (no initials) to make it easy for the elderly to contact the correct Department in times of distress or great need.
act as facilitator, lobby, be catalyst for change, ensure connections and pathways in place, continue to communicate
Negotiate better infrastructure funding with State and Federal Govt
<table>
<thead>
<tr>
<th>Lobby the State for better Health Care, funding for accessibility programs, funding for community, library and recreational facilities, assistance with surf lifeguards etc</th>
</tr>
</thead>
<tbody>
<tr>
<td>pursue a well staffed special unit for rehabilitation, interim management of dementia, palliative care</td>
</tr>
<tr>
<td>maintain and support public and private health services</td>
</tr>
<tr>
<td>Listen to what people need - value older people’s contribution</td>
</tr>
<tr>
<td>Advertise more about groups events or special occasions that are out there for seniors.</td>
</tr>
<tr>
<td>Plan more aged care facilities</td>
</tr>
<tr>
<td>Open more home care services, more local jobs to keep skills here, encourage employers to take on older workers like me who need to work till at least 65 years of age</td>
</tr>
<tr>
<td>Need a heated, hydrotherapy complex in Batemans Bay, not in 15 years but NOW, to keep me and my fellow age pensioners fit and healthy.</td>
</tr>
<tr>
<td>have a senior citizens group separate from U3A as they DO NOT represent the aged in the shire</td>
</tr>
<tr>
<td>Support construction of a new hospital</td>
</tr>
<tr>
<td>Properly angled access ramps; easier access to GPs and dentists; cinema that does not require stairs; more walking/cycle paths; more consistent speed zones - George Bass Drive near Mossy Point has many entrances, yet speed is 100kph, which is too fast for older reaction times.</td>
</tr>
<tr>
<td>lobby for improved health services, aged care, housing, transport &amp; provide access to education &amp; cult act</td>
</tr>
<tr>
<td>develop community links to assist people to stay in their own homes where possible</td>
</tr>
<tr>
<td>Make land available for building new retirement villages or extending existing. Provide transport facilities.</td>
</tr>
<tr>
<td>Encourage more local bus services in the shire, including a weekend service</td>
</tr>
<tr>
<td>Lobby RTA for a safe pedestrian crossing on the [Narooma] &quot;Flat&quot;. That would assist many of the elderly.</td>
</tr>
<tr>
<td>Develop a coherent and practical political strategy for attracting either a new private hospital or a single public hospital to the shire - a proposal for a centralised hospital was due to be completed at the start of 2007</td>
</tr>
<tr>
<td>Council can push for a private hospital to stop having to travel long distances for specialist hospital treatment</td>
</tr>
<tr>
<td>Provide better and more appropriate aged services, possibly another facility like Maranatha (independent to nursing care for seriously ill).</td>
</tr>
<tr>
<td>Work for better ageing health facilities.</td>
</tr>
<tr>
<td>apply pressure to the NSW government to spend more of the funds received from the Federal government to improve the quality of our hospital systems in Batemans Bay &amp; Moruya</td>
</tr>
</tbody>
</table>
Would like to see the Coila Lake side walk cleaned of all vandalism...if this is not possible, paint would make it all less offensive. Vandalism attracts further vandalism and then the litter will follow and we will see a drastic disregard for our beautiful environment. Council already does a wonderful job in maintaining this area but the offensive spray painting needs to be completely eliminated. Tuross Head needs its own police presence...especially so on weekends and school holiday times. Late night parties with alcohol, loud noise & offensive behaviour can be extremely intimidating for us elderly folk.

| Help us plan for a future where we can access affordable services |
| Undertake a feasibility study into purchase and conversion of the current Narooma Sporting and Services Club into a private hospital. |
| Ensure current range of community services are maintained and increased and enhanced according to need of increasing population |
| Attract more GP’s and specialists to the area. The current waiting time for appointments is too long and the cost and inconvenience of travel to specialists is high. |
| Increase allied health service provision (waited 6 months for physio) |

112 Advocacy submissions
Appendix 3 – Eurobodalla Positive Ageing Focus Groups

In the period 16 October 2008 to 12 February 2009 Eurobodalla Shire Council facilitated ten focus groups plus a meeting with two Aboriginal Elders representing 185 community participants.

Apart from the Youth Committee, the sessions involved senior citizens groups that self nominated at the Eurobodalla Positive Ageing Summit facilitated by Eurobodalla Shire Council in November 2008.

A series of colour flip charts with prompt questions were used to encourage discussion around the United Nations Rights of the Older Person; independence, participation, care, self-fulfilment and dignity.

While participants had an opportunity to vent their issues, they were encouraged to offer suggestions, solutions and examples of successful activities that they may have heard about or seen.

The name of each focus group and the number of participants is listed below along with the date of the session. A summary followed by a full transcript of each session is then provided.

<table>
<thead>
<tr>
<th>Date of focus group</th>
<th>Group name</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 October 2008</td>
<td>Eurobodalla Shire Council Youth Committee</td>
<td>19</td>
</tr>
<tr>
<td>4 December 2008</td>
<td>Batemans Bay Country Women’s Association (CWA)</td>
<td>18</td>
</tr>
<tr>
<td>15 December 2008</td>
<td>Tuross Head Senior Citizens and Pensioners Group</td>
<td>16</td>
</tr>
<tr>
<td>12 January 2009</td>
<td>Moruya Senior Citizens and Pensioners Group</td>
<td>16</td>
</tr>
<tr>
<td>13 January 2009</td>
<td>EuroCare Centre Based Day Care Ladies Group</td>
<td>9</td>
</tr>
<tr>
<td>19 January 2009</td>
<td>Eurobodalla Seniors Computer Users Group</td>
<td>18</td>
</tr>
<tr>
<td>28 January 2009</td>
<td>Banksia Village residents social group (Broulee)</td>
<td>30</td>
</tr>
<tr>
<td>2 February 2009</td>
<td>EuroCare Centre Based Day Care Men’s Group</td>
<td>19</td>
</tr>
<tr>
<td>4 February 2009</td>
<td>Batemans Bay Senior Citizens and Pensioners Group</td>
<td>26</td>
</tr>
<tr>
<td>12 February 2009</td>
<td>University of the Third Age (U3A)</td>
<td>12</td>
</tr>
<tr>
<td>13 March 2009</td>
<td>Aboriginal Elders</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>11 groups</td>
<td>185</td>
</tr>
</tbody>
</table>
Summary of focus group suggestions by category

Theme 1 – Independence

1.1 Transport and pedestrian access
Flexible door to door bus or taxi that can be pre booked
Utilisation of idle school buses to support older person’s social groups
Community Transport accessible buses available for hire at a subsidised rate by community groups mid week, evenings and weekends
Provide a subsidised refresher program for older drivers
Review of bus routes to service aged care facilities, libraries, hospitals and new residential areas
Discounted fixed zone taxi fares and use of per paid vouchers
Explore more open use of courtesy buses
Lobby long distance coach operators to introduce “Red Tickets’ for pensioners
Funding by Council to Community Transport is supported
Planned and integrated footpath and kerb system to encourage older people to walk or scooter from home to local services and facilities

1.2 Housing and accommodation
Encourage construction of compact and accessible single level housing linked to local services by accessible paths
Incentives for older people to live with or near to relatives, for example, consent for Moveable Units (temporary granny flats) such as the Victorian model.50
Explore affordable housing options including rental market for older people
Building fact sheets that detail incentives for construction of senior’s housing
Independent and subsidised home modification services to enable older people to remain in their own home.

1.3 Financial impacts
Maintain Rates rebate and concession entry to leisure facilities for pensioners
Maintain free library and internet usage at libraries
Review hall hire rates and booking processes with input from seniors groups

1.4 Information
Provide information in fact sheet format on practical housing and accommodation options, health and care services, transport, financial planning tips including funeral funds
Print hard copy of the community directory and distribute on demand to non profit community groups, aged care facilities, hospitals and community centres etc
Community touch screen kiosks with links to media releases, plans of exhibition, community directory and other Council publications
Use on-line discussion boards to obtain community feedback on Council issues
Provide important information on audio CD for sight impaired people
Partner with relevant businesses to develop awareness training for older people in new technologies such as mobile phones, computers and automatic teller machines

Theme 2 – Participation

2.1 What helps older people to remain involved?
Volunteering, church and special interest and social groups including gender specific
Promote the philosophy of ‘it’s better to give than to receive’
Organised and social sporting activities
Interaction and mentor activities with youth and older people through youth groups, schools, aged care facilities and community events

Friendly and supportive neighbourhoods
Lobby bus companies to run social outings as many older people are happy to pay for organised day trips
Encourage housing complexes with a mix of age groups
Libraries are a safe and interesting place

2.2 What is Council's role in promoting participation?
Explore schemes such as 'adopt a grandparent' to increase social and intergenerational interaction
Council to organise celebratory days such as the Centenary of the Shire event
Increase number and frequency of aged day care groups
Continue to support seniors groups with community grants
Maintain and increase aqua – aerobics and hydro therapy programs
Coordinate subsidised transport to enable older people to attend organised groups and events
Ensure that community facilities are accessible and affordable
Host an expo showcasing the range of older persons groups and interests
Make volunteering more appealing or 'sexy'
Encourage interaction between seniors and youth and children
Distribute information about social, health and recreation options in Rates notices
Provide accessible parking and footpaths at essential services

Theme 3 – Care

3.1 What is positive ageing?

<table>
<thead>
<tr>
<th>Keeping active and fit including dancing</th>
<th>Camping, fishing and collecting bush medicines</th>
<th>Gardening and growing vegetables</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cooking</strong></td>
<td><strong>Study and reading</strong></td>
<td><strong>Keep mentally active with games, puzzles and quizzes</strong></td>
</tr>
<tr>
<td><strong>Attending social and interest groups</strong></td>
<td><strong>Sports and exercise</strong></td>
<td><strong>Gentle exercise, tai chi and yoga</strong></td>
</tr>
<tr>
<td><strong>Don't feel sorry for yourself</strong></td>
<td><strong>Do as much as you can for yourself</strong></td>
<td><strong>Happily sharing tasks at home</strong></td>
</tr>
<tr>
<td><strong>Try new things and encourage each other</strong></td>
<td><strong>Keep up with new developments and new technology</strong></td>
<td><strong>Go out to lunch with friends</strong></td>
</tr>
<tr>
<td><strong>Art, drama and photography</strong></td>
<td><strong>Recording personal, family and local history</strong></td>
<td><strong>Caring for your spiritual self</strong></td>
</tr>
<tr>
<td><strong>Feeling respected and dignified</strong></td>
<td><strong>Use your skills to help others and volunteer</strong></td>
<td><strong>Time with children and young people</strong></td>
</tr>
</tbody>
</table>

3.2 What health and community services are needed to achieve this?
An indoor heated pool in Batemans Bay
A ‘welcome basket’ for new residents and a roving information display with information about facilities and services
An expo and ‘come and try’ day where seniors groups and others can come together and mingle with service providers and businesses
Lower hall hire rates for recognised seniors groups
Roaming Council information displays where
Subsidised fitness programs for seniors
Counselling for older people particularly those who have lost a partner
Creation of positive and safe neighbourhoods where young and old can mix
Men’s shed concept and art, craft and woodwork groups supporting people of all ages
Performance and visual art at venues across the shire
Spiritual support and quiet places to meditate or pray
Reinvigorate Neighbourhood Watch and Safety House schemes
Hospital and aged care visiting services incorporating companion animals
Home delivered library and talking books

Theme 4 – Self-fulfilment

4.1 How can older people be supported with “life long learning”?
Encourage and support older people to record their life stories
Support senior’s education through Adult Education, TAFE, libraries and U3A
Provide seniors groups with funding to obtain learning games and equipment
Encourage seniors to use the library and embrace new technologies
Negotiate affordable insurance for bona fide senior’s group
Promote environmental groups as they are often free and offer a range of learning experiences as well as social opportunities
Foster the art of conversation and creative writing
Encourage and train youth to help seniors with new technologies
There are many stimulating groups in the shire and it’s a personal choice whether to join them

4.2 How can older people share experience, skills and leadership with others?
Assist seniors to undertake storytelling, reading and other support roles at primary schools
Assist seniors to be engaged intellectually with high school students
Seniors groups should develop a program of guest speakers and also offer to be guest speakers themselves
Create opportunities for intergenerational activities
Explore the creation of an organised ‘adopt a grandparent’ program
A series of debates for young and old
Encourage older people to donate interesting artefacts to the museum
Public letter writing and speaking engagements (Toastmasters)

Theme 5 - Dignity

Older people often feel invisible as society is focussed on youth and middle age
Council can promote positive aspects of ageing and the skills, knowledge and experience of older people. This can help break down stereotypes.
Senior’s group proactively invite school groups to share experiences and promote tolerance.
Learn from traditional country towns are obviously more friendly and tolerant of older people when compared with new towns with high proportion of new residents
Work with schools and other institutions to instil respect for older people at an early age
Promote seniors that are ageing disgracefully and loving it
Keep spiritually strong and confident
Older people need to be respectful of young people and people in service industries
‘It’s a two way thing’
Always liaise with Traditional Custodians represented on Council Aboriginal Advisory Committee when developing or reviewing projects that involve Aboriginal people
Promote the information collected in the Aboriginal Heritage Study
AGEING STRATEGY FOCUS GROUP 1
EUROBODALLA SHIRE YOUTH COMMITTEE
Date: 16 October 2008
Location: Eurobodalla Shire Council Committee Room
Facilitators: Steve Picton and Kim Bush
Number of participants: 19 (aged 12-18)
Schools represented: Batemans Bay High School, Moruya High School, Narooma High School, Carroll College, St Peters Anglican College

The participants split into four groups and were asked to respond to two questions related to growing older.

**Question 1. What's good about getting older?**

<table>
<thead>
<tr>
<th>Group 1</th>
<th>More privileges including voting, drinking, wisdom, influence youth, more responsibilities and, less restrictions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group 2</td>
<td>More life experience, looking forward to retirement.</td>
</tr>
<tr>
<td>Group 3</td>
<td>Get driver's licence, wiser, get older- less responsibilities, life style changes</td>
</tr>
<tr>
<td>Group 4</td>
<td>Freedom, independence, look after self, not as many commitments, time to do more things</td>
</tr>
</tbody>
</table>

**Question 2. What positive things can young people do to support people aged 60 and over?**

<table>
<thead>
<tr>
<th>Group 1</th>
<th>Volunteering to help, scooters vs. skate boards competition.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group 2</td>
<td>Volunteer at hospitals, age care facilities and older persons groups, listen more to what they say, buddy program, encourage activities that both young and old can do</td>
</tr>
<tr>
<td>Group 3</td>
<td>Support older people, treat them the same, and create events to mix with the older generation.</td>
</tr>
<tr>
<td>Group 4</td>
<td>Give them seat on bus, show interest in what they have to say, keep them company.</td>
</tr>
</tbody>
</table>
AGEING STRATEGY FOCUS GROUP 2
BATEMANS BAY COUNTRY WOMENS ASSOCIATION (CWA)

Date: 4 December 2008
Location: CWA Hall Batemans Bay
Facilitator: Steve Picton
Number of participants: 18

Theme 1 – Independence
Transport
Transport is the key to enable social, health and day to day travel for older people.
Flexible bus service would help older people. Eg Queanbeyan pre-booked, door to door service.
Community Transport is a great model but can be restrictive and expensive.

Pedestrians
Improved quality and number of footpaths would encourage more older people to walk.
Crossing of Perry Street Batemans Bay is problematic. Need to a solution that also maintains traffic flow.

Housing
Encourage construction of more single level housing near to local services.

Information
Council to compile information on accommodation options, health and community care services for older people.
Print the Community Directory for community groups not just on the Internet.

Theme 2 – Participation
What helps older people to remain involved?
Volunteering and participation in interest groups is very important.

Promote the philosophy 'to give is better than to receive'

Council’s role?
Promote volunteering
Listen to the community
Care for older people

Theme 3 – Care
What is positive ageing?

Keep active
Dancing
Gardening
Cooking
Charity and community work
Study, quizzes, reading, crosswords, games like cards and Sudoku
Meet people through social and special interest groups

What health and community service are needed to achieve this?

An indoor heated swimming pool
An ocean pool
A welcome basket for new residents containing information about services and facilities
Council organise an annual expo where seniors groups can come together and mingle along with services providers and relevant businesses.

Theme 4 - Self fulfilment
How can people be supported with lifelong learning?

Have help writing their life stories
Support to seniors education groups like U3A
Learning from each other
How can older people share their experience?
Intergenerational activities to enable sharing between age groups (teens and younger children)
Older people help out in schools, eg reading with Primary age children
Cooking and crafts with kids
Organised Grandparent program

Theme 5 – Dignity
Older people become invisible at 70 as society focuses on youth and middle years
More focus on the positive aspects of older people
Promote the skills, knowledge and experience of older people
Facilitate intergenerational activities to help break down stereotypes
Generate respect for older people
AGEING STRATEGY FOCUS GROUP 3
TUROSS HEAD SENIOR CITIZENS AND PENSIONERS CLUB
Date: 15 December 2008
Location: Tuross Head Country Club
Facilitator: Steve Picton
Number of participants: 16

Theme 1 – Independence
Transport
Transport to and from Moruya with flexible pick up and drop.
Utilise idle school buses.
Pedestrians
There are many streets in Tuross Head without a footpath. Older people are forced to use the road. For example, Hood St to Jutland St.
Health
Tuross Head needs a doctor as it’s difficult travelling to Moruya for basic GP support
Housing
Encourage construction of more single level housing near to local services.
Older people need to live near family not isolate themselves
Information
Need for hard copy information about community groups and services.

Theme 2 – Participation
What helps older people to remain involved?
Volunteering such as driving and meals on wheels
Social groups are very important.
Sporting activities particularly organised groups such as golf, bowls and tennis.
Encourage interaction with youth
Council’s role?
Promote volunteering
Information distributed in Rates notices
Encourage visitation at nursing homes
Improve parking and footpaths near services

Theme 3 – Care
What is positive ageing?
Keep active, have lots of interests like gardening, cooking and sports
Study, quizzes, reading, crosswords, games like cards and Sudoku
Meet people through social and special interest groups
What health and community service are needed to achieve this?
Cheaper rates for hall hire

Theme 4 - Self fulfilment
How can people be supported with lifelong learning?
Support groups – music, reading games
Advertise available groups and services on TV and radio
Exercise classes for seniors
How can older people share their experience?
Share experiences with youth, instil tolerance
Older people help out in schools, eg reading with Primary age children
Storytelling and debating with children and youth
Theme 5 – Dignity
Focus on the positive aspects of older people
Promote the skills, knowledge and experience of older people
Facilitate intergenerational activities to enhance respect for older people
AGEING STRATEGY FOCUS GROUP 4
MORUYA SENIOR CITIZENS AND PENSIONERS CLUB
Date: 12 January 2009
Location: Moruya RSL Hall
Facilitator: Steve Picton
Number of participants: 16

Theme 1 – Independence
Transport
Transport to and from social activities with flexible pick up and drop.
Make Community Transport wheelchair buses available at a subsidised rate for the group to use weekly and for social outing.

Housing
Encourage construction of small and affordable private houses in Moruya.
Encourage construction of more retirement homes and residential care facilities, including high care, in Moruya.

Information
Need for hard copy information about community groups and services.

Theme 2 – Participation
What helps older people to remain involved?
Social groups are very important to counter isolation and keep people in contact.
Sporting activities particularly bowls and walking.
Council’s role?
Transport services with flexible pick up and drop off
Venues at an affordable fee.

Theme 3 – Care
What is positive ageing?
‘Don’t feel sorry for yourself, walk the talk!’
Keep active, have lots of interests like gardening and sport.
Do as much at home for yourself as possible. Men need to take on some of the domestic duties.
Meet people through social and special interest groups

What health and community service are needed to achieve this?
Free courses or ‘come and try’ day with all of the services and leisure options present for people to experience.

Theme 4 - Self fulfilment
How can people be supported with lifelong learning?
Use the library and embrace new technology.
Council could promote and support senior’s computer group.
How can older people share their experience?
Find ways to share knowledge and interesting stories with children and youth.

Theme 5 – Dignity
Promote interaction between young and older people.
AGEING STRATEGY FOCUS GROUP 5
EUROCARE LADIES CENTRE BASED RESPITE GROUP

Date: 13 January 2009
Location: Dr Mackay Community Centre Moruya
Facilitator: Steve Picton
Number of participants: 9

Theme 1 – Independence

Transport
Appropriate transport needed to support social groups and day to day travel for older people. Flexible bus service would help older people Community Transport is a great model but expensive, doesn’t help on weekends and priority goes to medical transport.

Housing and accommodation
Information on housing choice and locations where older people can relocate
More single level housing near to local services.

Information
Council to compile information (directory or similar) on health and community care services, housing options, financial planning, funeral services for older people.
Print the Community Directory for and make available through everyday locations such as supermarkets, GPs, pharmacies, hairdressers not just on the Internet.

Counselling
Many older people need someone to talk to after the loss of a lifelong partner.

Theme 2 – Participation

What helps older people to remain involved?
Friendly neighbourhoods.
Social groups
Lobby bus companies to run weekend outings as lots of older people would be happy to pay for organised day trips
Housing with a mix of age groups, not just older people together

Council’s role?
Encourage interaction with children and youth

Theme 3 – Care

What is positive ageing?
Keep involved
Cooking
Quizzes, reading, crosswords, games like cards and Sudoku, craft and art
Meet people through social and special interest groups
What health and community service are needed to achieve this?
Council organise a mobile information display where seniors and families can learn about relevant activities and services in their area.

Theme 4 - Self fulfilment

How can people be supported with lifelong learning?
Learning from each other at organised groups
How can older people share their experience?
Help older people to link in with schools.
Investigate Grandparent program

Theme 5 – Dignity

Promote tolerance, respect and understanding of older people and people with a disability through an awareness campaign.
Older person’s groups can invite children to participate and share experiences.
AGEING STRATEGY FOCUS GROUP 6
EUROBODALLA SENIORS COMPUTER USERS GROUP - NAROOMA BRANCH
Date: 19 January 2009
Location: Narooma HACC Meeting Room
Facilitator: Steve Picton
Number of participants: 18

Theme 1 – Independence
Transport
Public transport is essential for social and health
A flexible bus service that people can pre book.
Provide scheme similar to Teen Safe for older people to improve their driving
Housing
Council be more open to ‘Granny Flats’ being built on existing blocks
Encourage construction of more single level housing on The Flat near to local services.
Information
Council’s Community Directory is great. Distribute hard copies to community groups not just on the Internet.
Use on-line discussion boards

Theme 2 – Participation
What helps older people to remain involved?
Volunteer mentors to pass on skills to younger people.
Social and skills based groups
Council’s role?
Make volunteering ‘more sexy’ to encourage younger people
Provision of accessible meeting spaces that are affordable and incorporate new technologies
Initiate a Community Shed concept for Narooma
Investigate surrogate grandparent opportunities

Theme 3 – Care
What is positive ageing?
Be involved and interested
Look for things to do and places to go
Keep fit and healthy by using cycle ways, swimming pools and Tai Chi
What health and community service are needed to achieve this?
Council to subsidise fitness and aquatic exercise classes for older people
Use new technology at fitness centres like Wii
Create safe environments that young and old alike can use
Counselling services are very important particularly for older people who have lost a partner

Theme 4 - Self fulfilment
How can people be supported with lifelong learning?
Affordable insurance for bona fide groups
Affordable and accessible venues
Environmental groups are often free and offer a huge range of learning experiences as well as opportunities to meet new people and see new places
How can older people share their experience?
Get involved in your local community and share your knowledge and skills
Theme 5 – Dignity
Age awareness through greater promotion of the many talented older people
Create opportunities for youth and older people to mix and share their skills. Older persons
groups can do this although help from Council would be beneficial.
AGEING STRATEGY FOCUS GROUP 7  
BANKSIA VILLAGE RESIDENTS SOCIAL GROUP - BROULEE

Date: 28 January 2009  
Location: Banksia Village common room  
Facilitator: Steve Picton  
Number of participants: 30

**Theme 1 – Independence**

**Transport**  
Public transport exists but not every knows about it or where to find it  
It would be great if Priors bus service could pick up and drop off near Banksia Village  
**Pedestrians**  
Extend the shared footpath from Banksia Village to Coronation Drive and link up with existing shared pathway.

**Housing**  
Older people would benefit from practical advice about the style of home to purchase or build as they age.

**Information**  
A copy of the community directory made available in hard copy to the Banksia Village residents group

**Financial planning**  
Older people need independent financial advice, Centrelink can help with this and Council’s community directory lists some non-profit financial advisers.

**Theme 2 – Participation**

**What helps older people to remain involved?**

Attend and join in with established groups such as CWA, U3A, Church, Probus etc  
The library is a safe and interesting place

**Council’s role?**

A trade services expo could be a way of showcasing the various social and community groups.

**Theme 3 – Care**

**What is positive ageing?**

Trying new things and encourage each other  
Keeping active physically and intellectually through organised groups  
Stimulate the mind through games  
Tai Chi is a terrific way to stay physically and emotionally fit  
Swimming and light gym work  
Go out to lunch with friends

**What health and community service are needed to achieve this?**

A positive neighbourhood with people you can socialise with and trust  
Somewhere quiet to go for prayer or reflection  
Counselling support for older people  
Information on what’s available

**Theme 4 - Self fulfilment**

**How can people be supported with lifelong learning?**

Show interest in new technologies but retain writing and conversation skills.  
Seek help on new technologies from younger people  
**How can older people share their experience?**

Seniors groups link with Primary and Secondary Schools to meet and share stories  
Same groups invite guest speakers to regular meetings  
Share and record personal stories and history with others.
Develop a program of surrogate grandparents to benefit the older person and the families they interact with.

**Theme 5 – Dignity**

Moruya is very friendly and the people are helpful, sincere and almost loving to older people. People living in Tuross Head and Batemans Bay could learn from this. Promote positive images of older people doing what they do best!
**AGEING STRATEGY FOCUS GROUP 8**
**EUROCARE MEN’S GROUP**

**Date:** 2 February 2009  
**Location:** Dr Mackay Community Centre  
**Facilitator:** Steve Picton  
**Number of participants:** 19

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**Theme 1 – Independence**

**Transport**
Modify bus routes to service residential areas taking into account new areas
Pedestrians
More paths and improvements to kerbs to support older people using scooters
A mobility map would help people in scooters and wheelchairs to navigate the CBD areas safely

**Housing**
Lessen waiting times for home modification service.

**Information**
Provide information on where to go for independent legal and financial advice
Provide information on audio CD such as the Growing Older publication

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**Theme 2 – Participation**

What helps older people to remain involved?
Community facilities
Opportunities to meet young people
The Men’s Group is an important social contact group
Council’s role?
Transport to activities. Not just Council programs, include art and cultural events
Ensure that community facilities are accessible and affordable

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**Theme 3 – Care**

What is positive ageing?
Reading, singing, games puzzles, photography & art
Feeling respected and dignified
Caring for your spiritual self

What health and community service are needed to achieve this?
Regular contact with friends, the Men’s Group helps with this
Home help and advice on who to contact for help

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**Theme 4 - Self fulfilment**

How can people be supported with lifelong learning?
Keep intellectually active
Volunteer wherever you can as the giver benefits as much as the receiver
Promote the art of conversation

How can older people share their experience?
Share and record life experiences and interesting stories.

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**Theme 5 – Dignity**

Introduce the concept of respect for elders to children at an early age
Provide opportunities for children to meet with older people in a safe environment
Promote aspects of ageing successfully
AGEING STRATEGY FOCUS GROUP 9
BATEMANS BAY SENIOR CITIZENS AND PENSIONER GROUP

Date: 4 February 2009
Location: Batemans Bay Soldiers Club
Facilitator: Steve Picton
Number of participants: 26

**Theme 1 – Independence**

**Transport**
- Make bus routes and times more flexible
- Pensioner Excursion bus tickets
- Investigate lower fixed taxi fares for seniors groups

**Housing**
- Lessen waiting times for home modification service.

**Information**
- Provide a printed community directory for each community group

**Accommodation**
- Explore opportunities for Council to provide affordable rental houses for the elderly
- Council to develop fact sheets with housing options for the elderly to assist with retirement planning

**Theme 2 – Participation**

**What helps older people to remain involved?**
- Engage with young people through schools and older people in nursing homes
- Regularly attend and participate in social and friendship groups
- Outings are very important
- Socialising makes you feel younger

**Council’s role?**
- Increase frequency of social groups for seniors
- Continue to support groups with community grant funding
- Provide aqua aerobics during cooler months

**Theme 3 – Care**

**What is positive ageing?**
- Keep mentally and physically active with reading, exercising, games, puzzles, bowls, bingo, walking, aqua aerobics
- Feeling respected and dignified

**What health and community service are needed to achieve this?**
- Men’s Shed and other art, craft and woodworking groups
- Performance art like choirs and the theatre

**Theme 4 - Self fulfilment**

**How can people be supported with lifelong learning?**
- Maintain conversations with family and friends
- This is personal choice and there are educational opportunities available for those who choose to study. There are opportunities for retired professionals to pass on their knowledge in a structure manner through Adult Education, U3A, TAFE.
- Improve and share computer skills through the senior’s computer users group
- How can older people share their experience?
- Sharing of personal and professional skills with others through guest speakers.
- Share memories and historical memorabilia with historical groups
- Public letter writing such as Letters to the Editor and speaking engagements
Theme 5 – Dignity
Keep spiritually strong and confident
Recognise and accept youth culture to engage meaningfully with young people in an attempt to fill the generation gap. Seniors can often interact better with youth than middle age adults and parents.
AGEING STRATEGY FOCUS GROUP 10
UNIVERSITY OF THE THIRD AGE (U3A) GROUP
Date: 12 February 2009
Location: Batemans Bay Community Centre
Facilitator: Steve Picton
Number of participants: 12

**Theme 1 – Independence**

**Transport**
Utilise spare capacity on existing services
Utilise surplus vehicles between school bus runs
Explore more open use of Courtesy Buses
Lobby coach companies such as Priors and Murrays to accept the ‘Red Ticket’ for Pensioners
Lobby for inclusion of bus stops at each of the libraries
U3A supports use of Council funds to subsidise Community Transport

**Financial planning**
Independent financial planning is crucial for people aged between 50 and 65. Centrelink provide this service but is restricted.
Older people must avoid credit and higher purchase and downsize to minimise unnecessary overspending
Lobby Centrelink for more independent financial advisors to help older people to plan and manage their savings and investments.

**Information technology**
Seniors are sick of the ‘Techno Babble’
Investigate methods of training older people in use of mobile phones and ATMs as well as computers. U3A has invited Dick Smith and Telstra to be guest speakers to achieve this for group members

**Theme 2 – Participation**

**What helps older people to remain involved?**
Become a regular members of social and interest groups such as the U3A & Probus.
Keep active in the ‘workforce’ as a volunteer as this keeps you motivated and focussed.
Engage with young people through schools, family and neighbourhood.

**Council’s role?**
Council examine the ‘Adopt a Grandparent’ scheme
Council to support more celebratory community days like the Centenary event.

**Theme 3 – Care**

**What is positive ageing?**
Keep mentally and physically active with reading, exercising, games, reading, study, gardening, walking, swimming
A strong sense of community, be more neighbourly

**What health and community service are needed to achieve this?**
Spiritual support through groups
Reinvigorate Neighbourhood Watch and Safety House schemes
Council to develop local home and hospital visiting scheme using companion pets
Home delivery library service

**Theme 4 - Self fulfilment**

**How can people be supported with lifelong learning?**
There are many groups catering for all tastes and older people should be aware of an open to joining groups
Libraries are an important learning link especially as libraries offer new technology and other resources for no charge.

How can older people share their experience?

Older people can help young people to hone their skills in retail and hospitality

U3A members support each other

**Theme 5 – Dignity**

‘It’s a two way thing’

Older people need to respect young people, this includes shop assistants, wait staff

Older people can act as mentors for youth

Older people can teach others to spell
AGEING STRATEGY FOCUS GROUP 11
ABORIGINAL ELDERS
Date: 13 March 2009
Location: Dr Mackay Community Centre
Facilitator: Steve Picton
Number of participants: 2

Theme 1 – Independence
Transport
Advertise travel discounts like the ‘Red Ticket’ for Pensioners
Continue to offer transport vouchers
Younger people need help to get a driver licence to be able to drive cars and buses
Council to allow hire of community buses to non profit community groups with trained and approved drivers
Financial planning
Information about legitimate funeral plans to allow Aboriginal people choice
Information
Improve information about a range of services including care, health, transport and advocacy
Income
Council to continue to employ Aboriginal people and trainees and encourage other local organisations to follow suit

Theme 2 – Participation
What helps older people to remain involved?
Keep active in the community as this keeps you motivated and focussed.
Elders have a responsibility to contribute to the growth of the community by sharing with youth, storytelling. This is particularly relevant for the Traditional Custodians
Council’s role?
Support and nurture the Aboriginal Advisory Committee to contribute to government policy and to make the wider community more aware of Aboriginal culture.
Support activities that promotes local Aboriginal culture through publications, historical displays in libraries and cultural tours.
Hands on cultural awareness training for Councillors and senior staff

Theme 3 – Care
What is positive ageing?
Keep mentally and physically active with camping, fishing, collecting bush medicines, keeping busy in the community
Don’t smoke and drink less alcohol
Stay involved with family for their health and your health
What health and community service are needed to achieve this?
Footpaths and tracks to enable people to walk into town

Theme 4 - Self fulfilment
How can older people share their experience?
Aboriginal Elders share their knowledge with younger people
Recognise and record information from the Traditional Custodians

Theme 5 – Dignity
Council to meet with Elders to improve their understanding of tradition, knowledge and leadership as it relates to Aboriginal culture
Improve the image of Elders by publicising some of the information collected in the Heritage Study and using regular articles in the local press and radio to promote positive images
Appendix 4 – Methodology

Why we consulted?

Council is obliged by the Local Government Act to plan and report on the way it manages the social, cultural, economic and environmental aspects of the community. As part of this obligation, older people are one of the seven mandatory target groups for consultation by Councils.

The State Government has identified the NSW Far South Coast as an area that is subject to development pressures and the Eurobodalla Positive Ageing Strategy is designed to reflect and support regional and local planning. (NSW Department of Planning, 2007)

Council values the opinions of older people and has contributed considerable resources to support older people living in the shire. For example, Council annually supports hundreds of older people with thousands of occasions of services utilising over 100 volunteers and millions of dollars in Government funding.

Council is committed to addressing issues that affect community wellbeing as identified in the social plan. As such, this report provides Council with the issues that are affecting older people and recommends improvement strategies for Council and others to consider.

How we consulted?

The Eurobodalla Ageing Strategy was developed by the Eurobodalla Shire Council Community Wellbeing Group in collaboration with people living in the Eurobodalla Shire and relevant service providers. The development process was guided by an internal reference group with input from the Eurobodalla Healthy Communities Group.

The methodology for this report draws on the following elements.

<table>
<thead>
<tr>
<th>Methodology</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>Demographic analysis of older people living in the Eurobodalla Shire</td>
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<tr>
<td>124 street interviews conducted with older people throughout the shire</td>
<td></td>
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<tr>
<td>158 surveys completed on-line or manually by older residents</td>
<td></td>
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<tr>
<td>World Café style consultation that engaged 126 organisational delegates</td>
<td></td>
</tr>
<tr>
<td>Conversational sessions with 11 older person’s focus groups with 185 participants</td>
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<tr>
<td>Analysis of health data obtained from the Greater Southern Area Health Service</td>
<td></td>
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<tr>
<td>Review and analysis of existing Council plans</td>
<td></td>
</tr>
<tr>
<td>Review of research from other councils, non-Government and Government sources</td>
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</tbody>
</table>

Council’s Community Wellbeing Group consulted with service providers and older people separately to identify what services exist and which are working well. We also wanted people to tell us what we should do if we had the resources.

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51 Derived from NSW Department of Planning, 2007, South Coast Regional Strategy

52 The Eurobodalla Healthy Communities Group is an advisory committee to Eurobodalla Shire Council representing 14 Government and non-Government agencies in the human services sector
Council embraced new methods of consultation in order to engage with as many relevant people as possible. For example, the consultation with services and community groups involved the use of the ‘World Café’ (The World Cafe web site)\(^\text{53}\) model while for the first time Eurobodalla Shire Council used an on-line survey to consult with older people.

Consultation with older people sought to capture a snapshot of how each felt about living in the shire, how safe they feel, their level of community participation and their aspirations for the future. The questions asked of older people mirror those used in previous social planning consultations allowing for comparisons to be made.

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\(^{53}\) The World Cafe model is described in the Definitions section. Also go to [www.theworldcafe.com](http://www.theworldcafe.com)
### Appendix 5 - Definitions

<table>
<thead>
<tr>
<th>Definition</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Enumerated</td>
<td>The ‘place of enumeration’ is the place at which the person was counted on Census night. It is not necessary their usual place of residence. Data provided prior to 2006 Census is often based on enumerated data.</td>
</tr>
<tr>
<td>Place of Usual Residence</td>
<td>The ‘Place of Usual Residence’ is the place where a person usually lives. It may, or may not be the place where the person was counted on Census Night. Census counts compiled on this basis are less likely to be influenced by seasonal factors such as school holidays and snow seasons, and provide information about the usual residents of an area.</td>
</tr>
<tr>
<td>Unjustifiable Hardship</td>
<td>The Commonwealth Disability Discrimination Act allows discrimination against a person with a disability if the action required to prevent or eliminate the discrimination would cause the discriminator “unjustifiable hardship”.</td>
</tr>
<tr>
<td>Profound or severe disability</td>
<td>ABS defines the profound or severe disability population as: “those people needing help or assistance in one or more of the three core activity areas of self-care, mobility and communication, because of a long-term health condition (lasting six months or more), a disability (lasting six months or more),”</td>
</tr>
<tr>
<td>World Café</td>
<td>The World Café is an innovative yet simple methodology for hosting conversations about questions that matter. These conversations link and build on each other as people move between groups, cross-pollinate ideas and discover new insights into the questions or issues that are most important to them.</td>
</tr>
</tbody>
</table>

#### North
- Eurobodalla Shire from South Durras to Mossy Point and Mogo (includes Batemans Bay). Postcode 2536.

#### Central
- Eurobodalla Shire from Mossy Point and Mogo to Turlinjah (includes Moruya and Tuross Head). Postcode 2537.

#### South
- Eurobodalla Shire from Turlinjah to Akolele (includes Bodalla, Dalmeny and Narooma). Postcodes 2545 and 2546.

#### Adaptable Housing
- Housing based on a flexible floor plan to enable inexpensive modifications or extensions to suit the changing needs of the resident.
## Appendix 6 - Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>EACH</td>
<td>Extended Aged Care in the House</td>
</tr>
<tr>
<td>EACH-D</td>
<td>Extended Aged Care in the House - Dementia</td>
</tr>
<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
</tr>
<tr>
<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
</tr>
<tr>
<td>ATSI</td>
<td>Aboriginal people and/or Torres Strait Islanders</td>
</tr>
<tr>
<td>CACP</td>
<td>Community Aged Care Package</td>
</tr>
<tr>
<td>DAA</td>
<td>NSW Department of Aboriginal Affairs</td>
</tr>
<tr>
<td>DADHC</td>
<td>NSW Department of Ageing, Disability and Home Care</td>
</tr>
<tr>
<td>DET</td>
<td>NSW Department of Education and Training</td>
</tr>
<tr>
<td>DOH</td>
<td>NSW Department of Housing</td>
</tr>
<tr>
<td>ESC</td>
<td>Eurobodalla Shire Council</td>
</tr>
<tr>
<td>GSAHS</td>
<td>Greater Southern Area Health Service</td>
</tr>
<tr>
<td>HACC</td>
<td>Home and Community Care Program</td>
</tr>
<tr>
<td>IRIS</td>
<td>Illawarra Regional Information Service</td>
</tr>
<tr>
<td>IRT</td>
<td>Illawarra Retirement Trust</td>
</tr>
<tr>
<td>MACA</td>
<td>NSW Ministerial Advisory Committee on Ageing</td>
</tr>
<tr>
<td>NHMRC</td>
<td>National Health and Medical Research Council</td>
</tr>
<tr>
<td>NRCP</td>
<td>National Respite for Carers program</td>
</tr>
<tr>
<td>SEACC</td>
<td>South East Area Consultative Committee</td>
</tr>
<tr>
<td>SEAR</td>
<td>South East Arts Region</td>
</tr>
<tr>
<td>SESIAHS</td>
<td>South East Sydney and Illawarra Area Health Service</td>
</tr>
<tr>
<td>SGPN</td>
<td>Southern General Practice Network</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
</tbody>
</table>
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Manningham City Council – Ageing Well in Manningham
Shire of Melton – Ageing in Melton Action Plan
Macedon Ranges Shire Council – Older Person’s Future Service Needs
Australian Unity – What Makes Us Happy?
Australian Local Government Association – Ageing Toolkit

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Social Planner November 2009