Cardinia Shire Council

# **Age Friendly Strategy** 2015-19 Creating an age friendly Cardinia Shire **April 2015**

# **Contents**

1	Executive summary	3
1.1	Acknowledgments	4
2	Introduction	5
3	What is an age-friendly city?	5
4	What the Age Friendly Strategy will achieve	6
5	Council's role	6
6	Council's values framework	6
7	About our shire	6
7.1	Geography	6
7.2	Demographics	8
7.3	Socio economic factors	8
7.4	Health and wellbeing	9
8	Policy context	10
8.1	Local government context	10
8.2	State government context	10
8.3	Federal government context	10
8.4	International context	11
9	Developing the Age Friendly Strategy	11
9.1	Methodology	11
9.2	Community engagement	11
9.3	Key findings	12
10	Strategic plan	14
10.1	Priority area 1: Outdoor spaces and buildings	14
10.2	Priority area 2: Transport	14
10.3	Priority area 3: Housing	14
10.4	Priority area 4: Respect and social inclusion	15
10.5	Priority area 5: Social participation	15
10.6	Priority area 6: Communication and information	16
10.7	Priority area 7: Civic participation and employment	16
10.8	Priority area 8: Community support and health services	17
11	Review and evaluation	17
12	Dissemination	17
13	References	19
14	Action plan 2015-16	18

# **1** Executive summary

Cardinia Shire Council's 2015–19 Age Friendly Strategy (AFS) sets out the strategic direction for Council to work towards its goal to **create an 'age-friendly' community for Cardinia Shire residents.** 

Underpinned by Cardinia Shire Council's values framework, development of the strategy has been informed by a review of demographic and health data and consultation with stakeholders. Consultation data has been collated and analysed against the evidence to develop objectives for the age-friendly framework priority areas.

Priority area (domain)	Key objectives
Outdoor spaces and buildings	Environments that enhance physical wellbeing, promote independence, foster social interaction and enable people to conduct their daily activities
Transport	<ul> <li>Access to public, community, volunteer and healthy transport modes</li> <li>Older drivers to retain independence and social connections</li> </ul>
Housing	Older residents are living independently and ageing in place
Respect and social inclusion	<ul> <li>Respect for older people's decisions and lifestyle choices</li> <li>Older people are connected to their communities</li> </ul>
Social participation	Older people are actively participating in the social, cultural and spiritual life of their community
Communication and information	<ul> <li>Inform Council and the community about Cardinia Shire's Age Friendly Strategy and how it aligns with the World Health Organisation's Age Friendly Cities Framework</li> <li>Older people have access to timely and relevant information</li> </ul>
Civic participation and employment	<ul> <li>Older people are participating in the paid workforce</li> <li>Volunteering opportunities for older adults to connect with and contribute to their community</li> </ul>
Community support and health services	<ul> <li>Residents maintain their physical and emotional wellbeing as they age</li> <li>Appropriate community support and health services are available</li> </ul>

The Council Plan 2013–17 identifies managing population growth, encouraging community engagement in Council's decision making and encouraging residents to improve their health and wellbeing as key challenges for the future. Aligned to the 2013–17 Council Plan and Municipal Public Health and Wellbeing Plan, the AFS responds to our ageing population by creating an environment to enable our residents to live in security, maintain their health, and be able to fully participate and be an integral part of the community.

The AFS includes an action plan that sets out a series of activities and projects to be delivered in partnership over a 12-month period.

The term used to depict and describe people as they age in this strategy will be 'older person' and refers to people aged over 60. This is aligned with best practice terminology in the WHO guidelines.

#### 1.1 Acknowledgments

Cardinia Shire Council thanks all individuals and organisations, as well as the work of the Council officers and the Positive Ageing Steering Committee, who provided input into this strategy. We also thank Kathleen Brasher, Karen Ivanka and John Doutch from the Community Participation Team at The Council on the Ageing, our partners in the community consultation.

## 2 Introduction

Our AFS aims to facilitate the inclusion of older persons to create a more age-friendly environment.

An age-friendly world enables people of all ages to actively participate in community activities and treats everyone with respect, regardless of their age (WHO, 2015).

Council's Municipal Public Health and Wellbeing Plan (MPHWP) aims to improve the health and wellbeing of the Cardinia Shire community where they work, learn, live and play. The MPHWP focuses on features of our environment which influence our health outcomes, such as access to public transport, housing, land, recreational space and food, and having a safe urban environment with adequate roads, footpaths and street lights. Natural environmental factors including climate change and air and water quality can have an impact on farming and food production, and in turn our health. Providing a safe and liveable environment through addressing these key areas can enable people to be physically and emotionally healthier. The Age Friendly Strategy is aligned to the MPHWP to aid creating a better place to live.

# 3 What is an age-friendly city?

An age-friendly city is one which enables older persons to live in security, maintain their health and participate fully in society. 'Making cities age-friendly is one of the most effective approaches for responding to demographic ageing' (WHO, 2007). An age-friendly community is developed through addressing eight priority areas (domains):

- outdoor spaces and buildings
- transportation
- housing
- social participation
- respect and social inclusion
- civic participation and employment
- communication and information
- community support and health services.

Responding through each priority area creates a place that makes it easy for older people to stay connected to other people who are important to them; it helps people stay healthy and active even at the oldest ages and provides appropriate support to those who can no longer look after themselves.

Age-friendly city policies, services, settings and structures support and enable people to age actively by:

- recognising the capacities of older people and their significant contribution to the community
- anticipating and responding flexibly to ageing-related needs and preferences
- respecting older people's decisions and lifestyle choices
- protecting those who are most vulnerable
- promoting the inclusion in and contribution of older people to all areas of community life (WHO, 2002).

# 4 What the Age Friendly Strategy will achieve

Overarched by the Cardinia Shire Municipal Public Health and Wellbeing Plan 2013–17, goals and objectives have been developed to address the priority issues. Council has a lead role to respond to population ageing with a strategic focus of the AFS to:

- ensure our community and business stakeholders are conversant on the age-friendly communities framework
- collaborate and work in partnership with individuals, community groups, organisations and service providers to identify the needs of the ageing community
- develop partnerships with local community and business stakeholders to implement actions to address priority issues
- build capacity of the local community and workforce to respond to local issues
- celebrate the contribution of our older population.

## 5 Council's role

The objectives of Council are described in the Local Government Act 1989 - Sect 3C.

Council's role in health and wellbeing is determined by Division 3 of the *Public Health and Wellbeing Act* 2008. Section 24 of the Act states the function of Council is to seek to protect, improve and promote public health and wellbeing within the municipal district. The MPHWP 2013–17 has been prepared as required by Section 26 of the Act.

The AFS, overarched by the Council Plan and aligned to the MPHWP, sets out the strategic direction for Council to respond to our ageing population.

# 6 Council's values framework

Delivery of the AFS is underpinned by Council's organisational values and behaviours.

We value:

**Teamwork:** We work collaboratively to achieve shared goals

**Respect:** We value diversity and appreciate others

**Accountability:** We are responsible for our actions and behaviours

**Communication:** We communicate openly and share knowledge with others

**Customer focus:** We consider the needs of others and make a difference for our community

# 7 About our shire

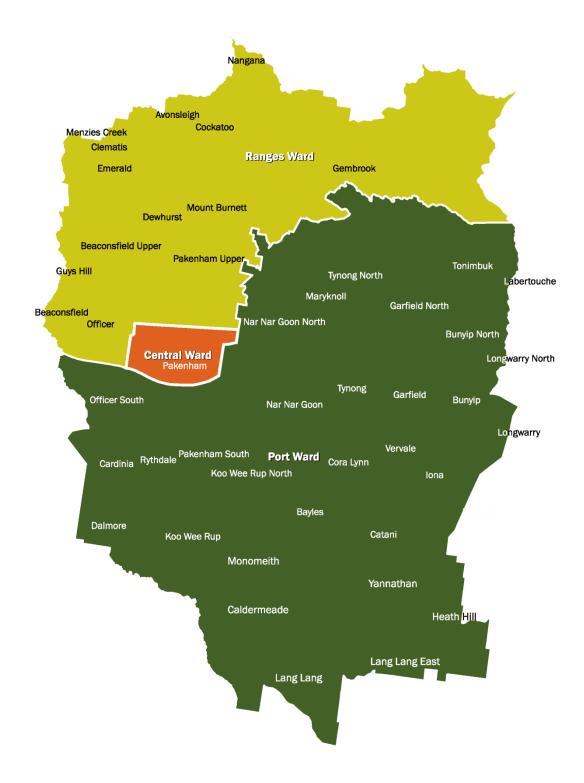
# 7.1 Geography

Cardinia Shire is located in the outer south-east of Melbourne and is one of nine 'interface councils' around the perimeter of metropolitan Melbourne. An interface council is defined as 30 per cent urban and 70 per cent rural, forming the interface between regional and metropolitan Victoria. Cardinia Shire's primary urban centre is Pakenham, which is located 55 kilometres from Melbourne's central business district.

The Princes Highway and Gippsland railway corridor runs east—west through the centre of Cardinia Shire providing a key road and rail link between Melbourne and West Gippsland. The western end of this

corridor includes the Cardinia Shire urban growth area comprising the townships of Beaconsfield, Officer and Pakenham (about 10% of the shire's land area).

#### Map of Cardinia Shire



Cardinia Shire has a large rural population with 27 rural townships outside the urban growth area. The northern part of the shire is set in the foothills of the Dandenong Ranges and includes Bunyip State Park and Cardinia Reservoir. The Koo Wee Rup swamp and Westernport Bay are significant features of the southern part of Cardinia Shire.

With an area of approximately 1,280 square kilometres, the shire faces unique challenges due to the diverse nature of communities which have varying needs and aspirations. Urban sprawl, existing rural communities and new suburbs pose both challenges and opportunities for managing health and wellbeing.

# 7.2 Demographics

Cardinia Shire is growing by an average of four families per day and has a current population estimated at 90,325. By 2026, the age structure forecasts for Cardinia Shire indicate a 124.5 per cent increase in population of retirement age.

The Pakenham Precinct will experience the greatest increase in people aged 60 to 85+ years between 2015 and 2019. Significant increases in our ageing population will also occur in the growth areas of Beaconsfield and the Officer Precinct, and the townships of Nar Nar Goon, Tynong and Cockatoo. The areas with the highest proportion of people aged 60 and over are Pakenham, Emerald, Bunyip, Koo Wee Rup, Lang and Garfield.

In Cardinia Shire, the Aboriginal population is an estimated 28 people in the 50–64 years age group, 20 females and 8 males. Twenty are in the 65 years and over age group – five females and 15 males. Cardinia Shire has a growing Aboriginal population, though data for people aged 50 and over is smaller due to life expectancy of the Aboriginal population still being significantly lower than other populations.

The Cardinia Shire population are predominantly born in Australia. The 2011 census reported that approximately 1,206 aged 65 years and over were born in non-English speaking or culturally and linguistically diverse (CALD) countries. The vast majority of these residents settled in the shire from European countries as part of the post–World War II migration program. The largest population of residents from non-English speaking countries have migrated from The Netherlands, Italy, Germany, Croatia and Greece. More recently, residents aged 65 years and over have arrived from CALD countries including India, Sri Lanka, Mauritius and China.

In 2011, 6.2 per cent of Cardinia Shire's households were classed as older lone person households compared to 8.9 per cent in Victoria. While Cardinia Shire had a lower proportion of older lone person households, it varied across the shire with a high of 20.6 per cent in Pakenham Central. The five areas with the highest percentages were Pakenham Central (20.6%), Lang Lang (12.8%), Garfield (10.5%), Koo Wee Rup (9.1%) and Rural (South and East) Sub Region (8.7%). Just over 30 per cent (30.6%) of lone person households 65 years and over are female.

#### 7.3 Socio economic factors

The prevalence of a highly qualified population is one of the most important indicators of socio-economic status. Pockets of distinct disadvantage are present within the shire and include the areas of Pakenham, Koo Wee Rup and Lang Lang, which are also the areas with our highest population of people aged 60 years and over. Year 10 is the highest level of education completed by 55 per cent of people aged 65 and over, higher than the rest of Victoria at 34 per cent.

Cardinia Shire has higher participation in the labour force for people 50 years and over compared to Victoria; 36 per cent of people aged 65 and over work more than 40 hours per week, which is higher when compared to 29.5 per cent in Victoria. Just over 61 per cent (61.5%) of people 65 and over work and live in Cardinia Shire which is higher when compared to 45.6 per cent in Victoria. Females 50–64 years have the highest participation in the workforce, with 20.7 per cent providing assistance to people with a disability.

In 2011, 3.6per cent of Cardinia Shire's labour force aged 55 years and over were classed as unemployed compared to 3.7 per cent in greater Melbourne. While Cardinia Shire had a lower rate of unemployed people aged 55 years and over, proportions varied to a high of 7.2 per cent in Pakenham North West. The five areas with the highest unemployment rates in this age group are Pakenham North

West (7.2%), Emerald area (6.0%), Garfield (5.2%), Pakenham Precinct (4.9%) and Northern Rural Sub Region (4.4%).

People 65–69 years in Cardinia Shire have a median weekly gross individual income of \$361 which is lower compared to the rest of Victoria at \$501. Age pension rates at 76.4 per cent are higher than Victoria. A lower median individual income impacts on the ability to access health services and participate in social participation activities.

In 2011, 29.3 per cent of people aged 55 to 64 in Cardinia Shire experienced transport limitations in the past 12 months compared to 28.2 per cent in Victoria. Transportation, including accessible and affordable public transport, is a key factor for people in Cardinia Shire. It is a theme which runs through the other priority areas. Access to transport can determine social and civic participation and access to community and health services.

## 7.4 Health and wellbeing

Achieving good health as we age is important to enjoy a good quality of life and to participate fully in the community. It also assists in reducing demands for health and aged care services. Maintaining or adoption of a healthy lifestyle as we age contributes to preventing disease and functional decline, and promoting a longer and a better quality of life.

From the Community Indicators Victoria (2007) survey, 46.1 per cent of people 55 years and over consider themselves to be in excellent or very good health. People were asked to rate their health as 'excellent', 'very good', 'good', 'fair' or 'poor'. Cardinia Shire reported a higher level of self-reported health in comparison to the state of Victoria (31.5%).

Community Indicators Victoria rationalises life expectancy at birth is an indicator of mortality conditions, and by proxy, of health conditions. With increasing life expectancy, this has implications for planning to support the physical, social and mental wellbeing of the community for health services and beyond. In Cardinia Shire, female life expectancy is 83.8 years and for males is 80.3 years (Department of Health, 2007). The Victorian average for males is comparative, while for females life expectancy is slightly lower in Cardinia Shire (84.4 years for Victoria).

The percentage of Cardinia's population from 55 to 84 years with a disability is lower than the Victorian average. Just over 57 per cent of people aged 85 years and over have a disability; higher than the Victorian average of 52.6 per cent.

Healthy behaviours are an important determinant of good health. Health gains can be achieved at all stages of life by addressing the underlying causes of poor health by encouraging healthy eating and physical activity, and reducing smoking and harmful alcohol use. Rates of overweight and obesity are linked to chronic preventable diseases including Type 2 diabetes, cardiovascular disease and some cancers. Rates of obesity are higher for females than males for people aged 55 years and over.

The leading cause of death for people 65 years and over was ischemic heart disease (coronary heart diseases) and cerebrovascular diseases (notably stroke). These diseases were also attributed to disability among older people. Heart failure was also a leading cause of death. This data relates to older Australians and is not available specifically for Cardinia Shire's population.

# 8 Policy context

### 8.1 Local government context

Cardinia Shire Council's corporate plan, *Creating the Future*, Council Plan 2013–17 states its vision for the municipality as:

Cardinia will be developed in a planned manner to enable future generations to enjoy and experience the diverse and distinctive characteristics of our Shire.

Key Council strategic documents set out to deliver this vision include the:

- Council Plan
- Municipal Strategic Statement
- Municipal Public Health and Wellbeing Plan.

### 8.2 State government context

A report titled *Inquiry into opportunities for participation of Victorian Seniors* was released in August 2012, following a parliamentary inquiry. This report covered a range of issues including participation in later life, leadership, empowering people in later life, changing perceptions of ageing and participation, planning for participation in later life and achieving age-friendly environments.

In 2013, Gerard Mansour was appointed Victoria's first independent Commissioner for Senior Victorians. As chair of the Advisory Committee for Senior Victoria, Gerard Mansour consulted with the aged care sector and within government to develop the Victorian Governments Seniors Participation Action Plan known as Seniors Count!. However, since a change of government in 2014, this is now under review.

Cardinia Shire Council is in the unique position of not directly delivering Home and Community Care Services (HACC). The policy and strategy direction in this area is informed by policy supporting a preventative health approach. The Victorian Government through the Department of Health is implementing a growth project for HACC services within the Southern Metropolitan Region, to meet growing demand.

#### 8.3 Federal government context

In 2011, the Productivity Commission's report *Caring for Older Australians* was launched. The policy direction for older Australians is still being developed through the recommendations contained in this report. A key element is the shift to a 'consumer-directed care' approach, to improve choice, flexibility and access to more home care packages, so that people can age in place.

The 2015 Intergenerational Report, produced by the Commonwealth Government every five years, presents what could happen to Australia over the next 40 years based on a detailed analysis of recent trends, changes to Australia's population size, age profile and existing policy settings. It considers the possible impact on Australia's economic growth, workforce and public finances. It is based on the assumption that current government policies remain the same for the next 40 years, drawing the government's attention toward longer term challenges which may require further policy modification and development.

Susan Ryan (AO) continues in her role as Australia's first Age Discrimination Commissioner with the addition of the Disability Discrimination portfolio in July 2014 to her role.

#### 8.4 International context

In 2002, the United Nations, in its response to significant changes in population demographics, adopted the Madrid Political Declaration and Plan of Action on Ageing. This resulted in the development of the World Health Organisation's *Active Ageing: A Policy Framework*. The policy defined active ageing as 'the process of optimizing opportunities for health, participation, security and life-long learning in order to enhance quality of life as people age'.

The World Health Organisation's Age-Friendly Cities Project Methodology outlines the process of making cities age-friendly. It is recognised globally as one of the most effective approaches for responding to demographic ageing.

# 9 Developing the Age Friendly Strategy

# 9.1 Methodology

The methodology to develop Council's Age Friendly Strategy involved a review of policy and legislation, desktop review and consultation with key stakeholders. This process involved four aspects: internal consultation with Council staff; review of current documentation and actions of business units; analysis of population data through existing sources such as the census and the Victorian Population Health survey, and community and stakeholder consultations.

At community consultations 'age-friendly' perspectives were presented along with demographic and health data for participants to gain an understanding of the challenges confronting the ageing population. The eight key areas (domains) were discussed with participants responding to the following main questions.

From your experience as an older person, a person providing care to an older person, or as a provider of services in the community:

- 1. What is it like to live in Cardinia Shire as an older person?
- 2. With consideration to the eight domains (please refer to the 'What is an age-friendly city?' section above) can you describe the 'age-friendly' qualities your community has? What is your positive experience in this area?
- 3. With consideration to the eight domains can you describe any negative experiences you have had in which your community proved not to be age-friendly?
- 4. With consideration to the eight domains can you suggest ways to improve the 'age-friendliness' of your community?

Council worked in partnership with COTA (Council on the Ageing) to deliver the consultations which sought feedback based around the age-friendly key priority areas.

# 9.2 Community engagement

A comprehensive engagement plan was implemented to develop a greater level of understanding and knowledge of the Age Friendly Community Framework with key stakeholders, and to seek relevant information to inform the development of the 2015–19 Age Friendly Strategy.

Council on the Ageing's Manager Community Participation Kathleen Brasher presented to senior management and Cardinia Shire Councillors. Council officers were then consulted on relevant policies and strategies which support creating an age-friendly community.

A series of external community consultations were conducted with participation invited from the following stakeholders.

- Positive Ageing Steering Committee
- Mecwacare
- Royal District Nursing Service
- Koo Wee Rup Regional Health Service
- Monash Health
- Township committees and progress associations
- Men's Shed Network
- Scooter group
- Neighbourhood House network
- University of the 3<sup>rd</sup> age (U3A)
- Southern Migrant Refugee Centre
- Women on Farms
- Outlook
- Senior citizens clubs and groups
- Access and Inclusion Steering Committee
- Cultural and Linguistically Diverse Network.

Nine community consultations were successfully delivered in partnership with COTA (Council of the Ageing) in Koo Wee Rup, Lang Lang, Gembrook, Bunyip, Pakenham and Emerald. There were 275 participants; 46 males and 229 females. The age range of participants was from 55 to 92 years old.

The Positive Ageing Steering Committee met quarterly to support the process and represent the interests of older residents.

The CALD network was consulted in the development of this age-friendly strategy. It highlighted the need to continue to engage with CALD communities and supporting organisations as it is likely that older CALD population groups will continue to grow in our local communities. Because of this growth, exploration and advice around best practice to achieve increased participation from CALD communities will be sought in the development of age-friendly initiatives.

## 9.3 Key findings

The community consultation process identified the following issues:

- the need for access to good public and community transport
- it is very important for older people to be independent
- for older people to feel supported and respected
- to have the ability to maintain good health for as long as possible
- to keep a drivers licence for as long as possible
- to feel safe moving about in the community
- for physical infrastructure such as footpaths, connections and car parking
- concern was raised for those in the community at risk of social isolation
- to have opportunities to stay mentally stimulated, as it is still important to feel challenged
- to maintain strong social connections to support wellbeing

- community understanding and appreciation of the challenges of ageing
- feeling respected and valued for their voluntary work in the community
- being supported to participate in voluntary work
- being well informed on activities and services available to support participation
- the need to improve local channels of communication to support vulnerable older residents
- having knowledge and understanding of the latest technology is not important for a lot of older residents
- vulnerability of older people in extreme climate events
- the demands of caring for grandchildren
- to have access to affordable health and community services.

# 10 Strategic plan

The strategic plan sets out the goals and objectives under each of the strategy's eight priority areas to achieve the aims of the AFS.

## 10.1 Priority area 1: Outdoor spaces and buildings

The physical environment is an important determinant of physical and mental health for everyone. Creating age-friendly outdoor spaces and building design means access to physical infrastructure such as footpaths, connections to services and car parking and was an important issue discussed in focus groups.

**Goal:** Environments which enhance physical wellbeing, promote independence, foster social interaction and enable people to conduct their daily activities.

#### **Key objectives:**

- Develop community infrastructure and outdoor spaces that are inclusive, safe and accessible.
- Design and maintain open spaces to encourage active and passive recreational activities.

#### **10.2** Priority area 2: Transport

Cardinia Shire is not well serviced by public transport; the community is mostly car dependant. Access to suitable, affordable, safe transport plays an important role in independence for older residents. Whether driving a car or taking public or private transportation, access to transportation allows older people to participate in social, cultural, volunteer and recreational activities, as well as enabling them to carry out such daily tasks as working, shopping or going to appointments (AFRRC, p.14).

Goal: Access to public, community, volunteer and healthy transport modes.

#### Key objectives:

- Support community stakeholders to identify and develop responses to transport issues.
- Increase the ability and confidence of older people to use all transport modes.
- Promote information about local transport services to residents.
- Advocate to public transport services about the customer needs of older people.

**Goal:** Older drivers to retain independence and social connections.

#### **Key objectives:**

Facilitate programs to increase the competence and confidence of older drivers.

#### 10.3 Priority area 3: Housing

For people approaching retirement age, or who have retired already, it is a time in life when people consider moving into smaller dwellings or locating closer to services. Focus group discussions highlighted the importance of enabling older people to remain independent for as long as possible. This can be achieved by having suitable housing options and access to appropriate support; for example, the availability of help with housework and gardening or repair work could enable people to remain in their homes.

With dementia, one of the leading reasons older Australians seek residential care, provision of care options is important for older people to locate within their local area close to friends and family.

**Goal:** Older residents are living independently and ageing in place.

#### **Key objectives:**

- Support Council's housing action plan to facilitate development of a diverse, flexible, adaptable range of housing types and tenures for older residents.
- Provide information to older residents about housing options and aged care support services.
- Advocate to land developers for appropriate housing for older people.

### 10.4 Priority area 4: Respect and social inclusion

The social connections people create and maintain as they age, through participation in regular social activities, are particularly important given the strong linkages between social isolation and health. As people age they want to be able to contribute to, and benefit from, community life. If they are active and involved in their community they are less likely to experience social isolation and more likely to feel connected.

**Goal:** Respect for older peoples decisions and lifestyle choices.

#### **Key objectives:**

- Support initiatives that educate the community on how older adults experience the ageing process.
- Advocate for positive public perceptions of ageing in media and council publications.

**Goal:** Older people are connected to their communities.

#### Key objectives:

- Collaborate with service providers and community groups to identify barriers and develop strategies to reconnect and support isolated people into social activities and support networks.
- Support seniors social groups and other clubs to cater to changing needs of a growing older population.

## 10.5 Priority area 5: Social participation

Social networks, social participation and feelings of belonging are important to healthy living, disease prevention and the prevention of isolation among seniors. Older people who remain active in society and socially connected are happier, physically and mentally healthier, and better able to cope with life's ups and downs (ARFFC, p.24).

Goal: Older people are actively participating in the social, cultural and spiritual life of their community.

#### Key objectives:

- Support the development of and promote a range of events, activities and programs for older people to maintain competence, respect and esteem.
- Collaborate and build the capacity of established and emerging groups to enhance sustainability.
- Encourage participation in social activities through access to good local information, suitable transport and appropriate accessible facilities.
- Provide support to community groups to deliver and promote affordable and accessible activities for the annual Seniors Festival.

## 10.6 Priority area 6: Communication and information

Communication and information was highlighted as a priority during consultation. Internet access has become a preferred method to keep the community informed about community events and broader information. Nearly 40 per cent of our older population are unable to access information via electronic means; this has significant implications to access regular, reliable and accurate information to support social connectivity.

**Goal:** Council and the community understand how Cardinia Shire's Age Friendly Strategy aligns with the World Health Organisation's Age friendly Cities Framework.

#### Key objective:

 Inform Council officers and the community about the World Health Organisation's Age friendly Cities Framework.

**Goal:** Older people have access to timely and relevant information.

#### Key objectives:

- Provide information in a range of mediums.
- Promote information on health and wellbeing issues relating to older adults.
- Support older adults to learn and stay updated with changing technology and communication platforms.

## 10.7 Priority area 7: Civic participation and employment

As people age they do not stop contributing to their communities when they retire. Many continue to provide unpaid and voluntary work for their families and communities. With the proposed increase in the retirement age, people will be working longer; therefore opportunities must be maintained and created for people to continue in paid work for as long as they wish to participate. Participation is not just for economic means, but also to maintain mental and physical health and social connectedness.

**Goal:** Older people are participating in the paid workforce.

#### **Kev objectives:**

- Advocate for training opportunities to develop skills and experience to enhance securing and maintaining employment.
- Develop transition into retirement program for older people to connect and participate in the community.

Goal: Volunteering opportunities for older people to connect with and contribute to their community.

#### **Key objectives:**

- Celebrate and recognise the contribution of volunteers in Cardinia Shire.
- Increase opportunities for voluntary roles to match individual skills, interests and appropriate training.
- Provide opportunities for older people to be represented on Council, committees and boards.
- Promote the health and social benefits from volunteering and provide information on where to access opportunities.

## 10.8 Priority area 8: Community support and health services

Access to affordable health and community services was reported as a key issue at focus groups for older people to be able to age in place. These include professional services, such as medical, home and community services. It is believed that when community members have access to the services they need, when they need them, they are more likely to have feelings of civic engagement and wellbeing (Bastian 2000). Provision of access to services is important for social connectedness in the community, particularly for vulnerable groups.

Goal: Residents maintain their physical and emotional wellbeing as they age.

#### Key objectives:

 Collaborate with key stakeholders to develop preventative health initiatives to reduce the burden of chronic disease.

**Goal:** Appropriate community support and health services are available.

#### Key objectives:

- Advocate for accessible community support and health services.
- Promote available community and health services.

## 11 Review and evaluation

An annual review of the AFS will be completed to monitor the implementation of the action plan to ensure:

- implementation is on track
- assessment of the results to identify if they are achieving what is expected
- demographics and needs of the community have not changed
- required changes to the strategy are identified relating to the point above
- if appropriate, the AFS is amended.

Key projects will be selected which have evaluation plans that can assess the impact on community health outcome.

# **12** Dissemination

A report will be prepared at the conclusion of implementation in 2019 and disseminated to the community, community groups and services.

## 13 References

Australian Bureau of Statistics (ABS) 2011, Census of Population and Housing, viewed 28 March 2013, <a href="http://www.censusdata.abs.gov.au">http://www.censusdata.abs.gov.au</a>

Australian Institute of Health and Welfare, 2007, Older Australia at a glance, 4th edition.

Australian Government, 2015, Intergenerational Report Australia in 2055, March 2015 Chapter 1, p.1

Australian Bureau of Statistics (ABS) 2011, Census of Population and Housing, viewed 28 March 2013, http://www.censusdata.abs.gov.au

Community Indicators Victoria 2007–11, *Cardinia wellbeing profile*, viewed 11 March 2015, http://www.communityindicators.net.au/wellbeing\_reports/cardinia

Dr E Gallagher, Dr V Menec and Dr J Keefe, 2006, *Age-Friendly Rural and Remote Communities: A Guide*, Healthy Aging and Wellness Working Group of the Federal/Provincial/Territorial (F/P/T) Committee of Officials (Seniors).

Informed Decisions 2012, *Cardinia Shire Profile* 2006–11, viewed 11 March 2015, http://profile.id.com.au/cardinia

Victorian Government, 2012, *Inquiry Into Opportunities For Participation of Victorian Seniors*, Parliament of Victoria, Family and Community Development Committee.

World Health Organisation, 2002, *Global age-friendly cities: A guide*, <a href="http://www.who.int/ageing/age-friendly-world/en/">http://www.who.int/ageing/age-friendly-world/en/</a> viewed 11 March 2015

World Health Organisation, 2007, WHO age-friendly cities project methodology. P3.

United Nations, United Nations, New York, NY, USA, 2002.

Madrid International Plan of Action on Ageing. Report of the Second World Assembly on Ageing. Madrid. 8-12 April 2002,

# **14** Action plan 2015–16

Priority area	Actions	Responsibilities	Resources
All	Apply to register as a World Health Organisation Age Friendly Community	Community Strengthening	Internal
Outdoor spaces and buildings	Consider age-friendly checklist when planning recreational master plans and township strategies	Sustainable Communities Strategic Planning	Internal
Transport	Implement an asset-based community development project on transport solutions for older adults	Community Strengthening	Internal
Transport	Deliver an older driver program	Community Strengthening	Internal
Social participation	In partnership with community organisations, develop and promote a series of events, activities and programs	Community Strengthening	Internal
Social participation	Prepare a promotional kit to assist seniors groups to run events for the Seniors Festival	Community Strengthening	Internal
Social participation	Deliver two events for the Seniors Festival	Community Strengthening	Internal
Respect and social inclusion	Develop an in-house training module on awareness of ageism	Community Strengthening Organisational Development	Internal
Communication and information	Provide staff education about the age-friendly community checklist.	Community Strengthening	Internal
Communication and information	Develop an annual communication strategy to promote the AFS and how it aligns with the World Health Organisation's Age Friendly Cities Framework	Community Strengthening	Internal
Civic participation and employment	Recruit volunteers to assess their local community for age friendliness	Community Strengthening	Internal
Community support and health services	In partnership with community organisations, develop and promote a series of health and wellbeing programs and activities	Community Strengthening	Internal