Speech by Adam Graycar:

"Ageing in Australia"

presented at the Australian Retired Persons Association (ARPA) Annual General Meeting, 18th August 1987

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AUSTRALIAN RETIRED PERSONS ASSOCIATION

ANNUAL GENERAL MEETING

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18 AUGUST 1987

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One of the interesting things about my job is the variety of the groups I talk to. Yesterday I spoke to a group of schoolchildren and today its a group of retired people. It seems to me that life is a steady progression from wanting to know where babies come from to trying to figure out where the money goes to.

As we look to the future we will see more older people, and we will see more of our older people living longer.

While the advance of science has helped to push back the frontiers of longevity it would be a disaster if our civilization removes much of the will to live that would render the exercise worthwhile.

It is a sad commentary on our times that telecommunications have brought the world into our living-rooms but have rendered us blind to the misery next door. This situation must not be allowed to become self-perpetuating.

These two points - the will to live and live well, and responsiveness to the needs of those around us, particularly those of older people are the main activities of those of us working in the ageing field.
Our pattern of ageing is that we have greater life expectancy at birth and at all advanced ages, substantial drops in age specific mortality rates at higher ages, high rates of chronicity, a surplus of women at higher age groups, most of whom have no spouse, nearly all older people living in private dwellings, nearly all older people with handicaps living in private dwellings, a nursing home population with a median age approaching 85 and a situation soon in which half of our over 65s will be over 75.

In essence we have and will continue to have two older populations each defined as old with very different and incompatible definitions. One population is deemed too old for the paid labour force, and one deemed too old to participate physically and emotionally in mainstream society. It is incumbent on us not to get our policy wires crossed.

We are facing two explosions - an explosion of perceived uselessness and an explosion of care.

It wasn't long ago that work and physical exertion were intimately intertwined. But today that is not longer so. We are no longer a nation of farmers and factory workers. Many of us have become walkers, joggers, bicyclists and aerobics exercisers. I don't have data for Australia, but in the United States almost half the population now exercises in some way - up from only about a quarter 25 years ago. Australians, like Americans have reduced their fat intake substantially -
consumption of red meat and dairy products is down. Smoking in the U.S. has declined by 50 per cent among people over the age of 40. The number of health food stores in the United States increased eight times over in the past fifteen years. As we parallel and follow America in so many ways, even if some of these characteristics are evident in Australia one hypothesis is that we will have a more healthy ageing population in the future.

The one countervailing characteristic is that our present middle aged population aren't all joggers and health food freaks - they have had many years of diets of highly refined and processed foods, and for many years have had the temptation of tantalizing varieties of high-salt, high-fat take-away foods. We don't know what the long term effects of these on our ageing population will be.

What we do know is that lower age specific mortality rates at the top end mean that the multiple chronic disabilities which are more prevalent at higher ages will affect both a higher proportion of the population and more people. The three major age related disabilities - incontinence, immobility and dementia are giving us, and will continue to give us planning and caring tasks that will test every ounce of our supportive capacities.

The incidence of dementia increases with age. It has been estimated that there are about 10,000 people in South Australia suffering from dementia - this is equivalent to the population of a city like Port Pirie. As the structure of the elderly population changes, so too will the incidence of dementia from
about 1 in 20 people over 65 to 1 in 5 people over 80. We are nowhere near an understanding of the causes and nowhere near a cure. It is important however to be able accurately to diagnose dementia.

Immobility increases with age. The Handicap Survey conducted by the ABS shows that about 19 per cent in the 65 to 69 age group were immobile, rising to 32 per cent of males and 46 per cent of females over the age of 75.

We have very scant data on incontinence. Urinary incontinence is estimated to affect between 4 and 6 per cent of the total population and 10 to 15 per cent of those aged 65 and over, and 60 per cent of the nursing home population. Industry sources estimate that about 800,000 Australians suffer from incontinence.

The costs to the individual and their families are great. Not only are there issues of self-esteem and self-confidence, there are substantial financial costs in the purchase of appliances - costs of up to $500 p.a. for a male and up to $1000 for a female.

Incontinence is one of the major causes of admission to our billion dollar plus nursing home industry, and within nursing homes laundry costs directly attributable to incontinence are $40,000 per annum for a 20 bed nursing home and $200,000 p.a. for a 100 bed home. It is estimated that in nursing homes 25 per cent of nursing time is spent managing incontinence.
Data on incontinence are skimpy because the Australian Bureau of Statistics says it is too embarrassing to ask about incontinence in detail in its surveys. Indicators about incontinence could be developed if better data were available and thus would strengthen the lobbying process already under way.

The scenario will be a large and reasonably fit "young old" population, whose only claim to the title "old" is that they are or will have retired from the paid labour force, and a burgeoning old-old population exhibiting characteristics of chronic dependency. We need very importantly to develop different types of policies and not assume the homogeneity of all our people aged 65 and over. This has enormous ramifications for retirement age and policy planning for populations beyond retirement.

It is a total absurdity to think of any action or achievement to be "normal" for any age. While Mozart was playing brilliantly at 3, Chopin composing his polonaise in G Minor at 7, Thomas Edison setting up his first laboratory at 10, Bobby Fischer becoming a Chess Internation Grand Master at 15, Winston Churchill was 65 when he became British Prime Minister and began his epic struggle against Hitler. Golda Meir became Prime Minister of Israel, thus taking on one of the world's hardest jobs at age 71. At age 76 Pope John XXIII was elected and he then presided over 5 monumental years of charge in the Catholic Church. At age 80 Winston Churchill resigned from his second stint as Prime Minister, but came back into Parliament at age 84 - and started exhibiting some of his paintings. At age
81 Benjamin Franklin made possible the adoption of the American Constitution by skillful negotiation and wheeling and dealing among disagreeing convention delegates. Remember - you're never too young, nor too old to do what you're capable of doing.

Unfortunately our retirement values try to put a certified assurance of uselessness on many people.

We are seeing a dramatic change in retirement patterns in Australia. Only a small number of those retired today stayed in the workforce until age 65. How many of you retired early?

There are four and a half million people in Australia aged 45 and over, and of these 53 per cent have retired from full time work, 36 per cent have not retired from full time work, and 11 per cent had never worked full time. Of those who had retired 39 per cent had retired at age less than 45 - almost one million people. A further million people had retired early - by this it is meant they had retired before the traditional retiring age. In other words 80 per cent of those who had retired from the paid labour force had retired before the traditional retirement age.

The four main issues for a person facing retirement are income - having enough and having it regularly; having adequate health care; having appropriate living and housing arrangements; and having interest and purpose in life. Old people are not at all different from their younger contemporaries in the requirement that life must have some meaning. We have made enormous advances in recent years in the first three of these
areas, income, health, accommodation. The fourth issue, interest and purpose in life is often the least recognized and most neglected. Yet it is the heart of many of our difficulties in retirement.

Today there is a cruel and ironic contradiction in the fate of our older citizens. Never before have older people been able to look forward to so many years of vitality but never before have they been so firmly shouldered out of every significant role in life - in the family, in the world, at work and in the community.

To be needed is one of the richest forms of moral and spiritual nourishment and not to be needed is one of the most severe forms of psychic deprivation. When we look at young people who feel they are not needed and when we look at old people who think they have been placed on the scrapheap we see the basis for a massive disjunction in societal continuity and coherence.

Young children are not taught very much about older people, and older people are not encouraged by our education system. Unfortunately our educational arrangements for lifelong education are ridiculously inadequate. Most education institutions are still designed for young people. They are ill-suited to men and women who must fit their learning into a busy life or who have had a busy life and are looking to re-orient their interests.
8.

Fewer older than younger people participate in both formal and non-formal education. For too long education, work and leisure have been compartmentalized into different parts of the life cycle - childhood, adulthood and retirement. With the very obvious need to integrate education, work and leisure into our changing social structure, - a structure which is seeing later labour force entry, shorter working hours and early retirement, we must all be aware that the thirst for knowledge does not diminish with age - often it expands if the encouragement is there.

Over the past five years in South Australia 23 per cent of people aged 55 to 64 years, and 10 per cent of those aged 65 and over have participated in non-formal adult education. For a significant number of people, retirement or the period leading up to retirement is not a time of dormant learning experiences, an intellectual wasteland, but rather a time to learn new skills, acquire new knowledge, and feel part of the broader society.

My Office has established an education committee with three special areas of focus:

a) education for professionals working with older people
b) education for older people themselves
c) education for the community at large about ageing
9.

In this last area we are helping to dispel many of the myths and stereotypes about ageing, and our first target is school children. Within a couple of weeks we will have completed a project kit for school children covering Accommodation, Age Discrimination, Poverty and Health among other things. This is one way of meeting one of our statutory objectives - the creation of a social ethos, based on clear understanding, of appreciation and respect which properly belong to older people.

In the long term, the process has to be an interactive one. Children, who are oriented towards the future must have their roots in the past. History books tell things in a certain way, and extended nuclear families are not always available. We hope to facilitate projects whereby older people can introduce in the child's mind the dimension of time and the notion of continuity. This will provide a firm base for intergenerational harmony in the future.

A 50 year old has an expectation of life of around 30 years, though an expectation of considerably fewer years in the labour force. In most cases retirement will hit the individual suddenly and leave them stunned.

There are three factors that need to be considered when talking about retirement, and each of these factors represents a stage in the retirement process that requires adjustment. The first factor is the retirement "event" - that point in time when a person leaves his workplace forever. The second factor is referred to as the "process" of retirement which simply means the process of adjustment to the retirement state. Finally, the
"period" of retirement refers to that phase in a life career after the person, or the head of a spouse's household permanently ceases full-time work.

If the individual reaching retirement is fully alive and accustomed to thinking constructively about life's transitions and challenges he or she will be far better fitted for the next stage of the journey, but too often they are not. Too often they have learnt no new skills or interests for years then we plunge them into one of life's toughest adjustments and expect them to make it easily. Too many people face the retirement transition passively and fearfully doing little to make it a constructive experience, but how could it be otherwise when many of them have spent the preceding years in circumstances that foster passivity?

It is important to design a society in which older people have choices. In designing such a society we have to work harder on some choices than others. It is already fairly easy for the older person to be alone. It is often much harder for him to find companionship and friends. It is much easier for him to find a park bench to sit on, it is much harder for him to find useful work to do. One of the most serious defects in our present arrangement for older people is the absence of relevant and useful things for them to do whether this be paid work or personal activity. Like everyone else older people need to be needed. They need to have something to occupy their hands and minds and hearts.
One of the most useful things a society could do to help people adapt to retirement would be to give all its members in their early and middle years the kind of experience that will build a capacity for self-renewal. Perhaps they simply need a challenge and change, perhaps they are ready for a second career, perhaps they have grown tired, perhaps they have been trapped by circumstances, or perhaps they were defeated by self-doubt or fear or cynicism or self indulgence. We all know people who at advanced ages retain an incredible freshness, curiosity, awareness and enthusiasm.

It seems to me that those of you who have made the effort to come here today want to retain that freshness, curiosity, awareness and enthusiasm. You are able to develop the variety that is needed. Do what turns you on, do what excites and challenges you - you'd be surprised how much there is in the way of recreation and life enrichment in our community, of how many people want to share your friendship and will open up to you if you open up to them.

Removal from the workforce and depositing a person in front of a television set, away from active recreation, social life and cultural or political activities is a particular form of idleness which spells social disaster.

You are all active and alive and if your attitudes are positive, retirement will be a period of thoughtful and exciting self enrichment. You have your life in your hands - get out there and smell the roses. The one thing better than smelling the roses is sharing the smelling of the roses with somebody.

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