



Fact Sheet 3

Ageing in rural, regional and remote Australia

MAY 2009

Australia is getting older. The ageing of the population is more marked in country areas and people there, as elsewhere, prefer to age in their own home and neighbourhood. The most important challenges for the provision of services to the elderly in rural and remote areas include choice, access and affordability.

Governments have responded over many years to some of the issues faced by the elderly in rural and remote communities. For instance, viability supplements have been provided for residential and (more recently) community care services in rural areas, and service models with greater flexibility such as Multipurpose Services, Regional Health Services and the Innovative Pool have been supported.

However many elderly people in rural areas still cannot find the care they need close to home. The challenge for governments, communities and the private sector is to devise additional services that provide choice, are available at or close to home, are affordable and maintain social inclusion. The services also have to cater for the realities of rural areas, such as more limited means, lower health status, reduced access to transport, and greater difficulties accessing health care – especially the more specialised services.

A rural profile

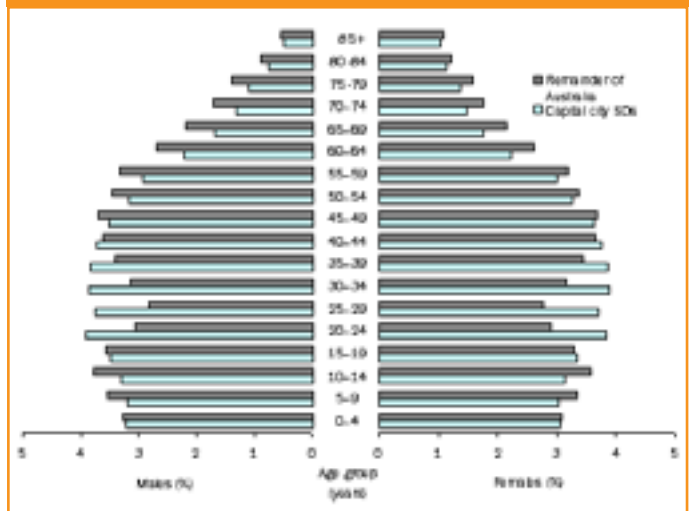
Thirty-five percent of Australians aged 65 and older (hereafter referred to as 'elderly') live outside the major cities. Twelve percent of the population in major cities are elderly, compared with 14 per cent in regional and 7 per cent in remote areas.

Internal migration contributes to these proportions. Many young people from the country move to the city for education and work opportunities; retirees shift from urban areas to the country; and it is believed that people from remote areas – particularly if they need regular access to more specialised services – will move to less remote places if they can.



PHOTO: ARTHUR MOSTEAD

Age and sex distribution (%), capital cities and rest of Australia, June 2006



ABS: Population by age and sex, Australia 2006

Access to aged care, health care and ancillary services (such as transport, carer respite, emergency respite, aids and supports etc) is more limited in country areas, and the scope of the services that are locally available is often less comprehensive than those in the cities.

As a result of both local and global economic forces, rural communities continue to lose services such as aged and community care and other community infrastructure. Part of the problem is that it costs more to run an aged care facility in rural areas because, for example, goods and services cost more (due in part to the cost of transporting goods) and smaller facilities do not benefit from economies of size.

Overall, rural Australians have shorter life expectancy, higher death rates, higher rates of certain chronic diseases, and are more likely to have a disability than city dwellers. This is the case even when taking into account the effects of the known poorer health of Indigenous Australians, who make up a greater proportion of the population in more remote areas.

Maintaining health among the elderly

It is important that programs are available for the elderly, including in rural areas, to help keep them healthy by preventing disability and maintaining function and independence. Such an approach will be assisted by moves to break down the perception that, even in the absence of disease, age equates to disability.

This inaccurate view permeates Australian society even though there is strong evidence that, for the mainstream population, function can be maintained and the risk of falls reduced through the use of prevention strategies. These strategies must be made available in rural areas and include:

- sustained exercise – specifically, training in balance, co-ordination and reaction time, and weight resistance;
- weight reduction and smoking cessation programs;
- nutrition programs;
- early access to the effective use of assistive technology; and
- early access where necessary to home or community-based rehabilitation.

Older people also need safe transport options that preserve dignity, maximise independence, and provide access to the full range of activities that contribute to quality of life. In rural and remote areas public transport is much less readily available but it may be that community spirit and the visibility of the elderly mean that community support for their transport needs is more common in small communities.

Older people also need a safe environment in which to live, free of violence and coercion, and this is one area where those in smaller communities may be advantaged.

Ageing in Aboriginal and Torres Strait Islander communities

The age structure of the total Australian population differs markedly from that of the Indigenous Australian population. ... the young age structure evident in the Indigenous population more closely resembles patterns observed in developing countries.

Aboriginal and Torres Strait Islander people utilise aged care services at a younger age, consistent with poorer health status and lower life expectancy. Of those admitted to permanent or respite residential care during 2003–04, almost 29 per cent are under 65 years of age, compared with fewer than 5 per cent of other Australians. *ABS/AHIW data*

As with all Australians, the number of older Indigenous people will increase as health status improves. It is important that, in the coming decades, the Indigenous population is not marginalised in its access to aged and community care services. *Commonwealth Grants Commission, 2001.*

Indigenous ageing

Aged care policy specific to Aboriginal and Torres Strait Islander Australians requires well-defined targets including:

- culturally appropriate preventative strategies to maintain or restore independence;
- improved community-based care for older Indigenous people to enable them to remain in their own communities;
- access to adequate and culturally appropriate service provision that takes account of differences in the age structure of the Indigenous population; and
- the development of programs capable of meeting the needs of Indigenous carers of the aged – as defined within an Indigenous context.

There appears to be little research in the area of the specific aged care needs of Indigenous Australians to determine appropriate models of service delivery. The results of such research will be important in directing future policy.

The business of aged care in rural areas

Rural areas face a relative shortage of aged care workers and wage rates in the aged care sector are lower than for acute care health professionals.

Because of small populations and the lack of community supports available to assist older people to remain at home, rural aged care providers often have a larger number of residents in 'low level of need' categories. This can impact negatively on their resourcing. In more remote areas, where the demand for aged care is low, provision of services for the small number of people who require them is commercially unprofitable. Furthermore, existing frameworks for raising capital are inadequate, making commercial investment in aged care facilities in many rural and remote areas unattractive.

Achieving more equitable outcomes

1. Governments should work collaboratively with both public and private aged care sectors to make the special provisions that will overcome economic viability and sustainability issues for residential facilities in rural areas.
2. A range of flexible models of aged care should be available that are tailored to meet the needs of local communities. Research and development grants are needed to support the adoption of information and communications technology (ICT), networking, alliances and resource management arrangements that will enhance the economic sustainability of aged care services in country areas.
3. The Australian Government should develop a national aged care workforce strategy giving high priority to addressing the wage differential between the acute and aged care sectors. further addressing
4. Increased investment in patient transport and accommodation assistance schemes would help to provide better access to care for older people in rural and remote communities.
5. Specifically, there should be improved funding arrangements for ambulance use to enable universal free-to-end-user access for people in rural and remote communities.

More information is available in *"Older People and Aged Care in Rural, Regional and Remote Australia"* (2005) jointly produced by the National Rural Health Alliance and Aged & Community Services Australia, available at www.ruralhealth.org.au