Overview

Australia is relatively well-positioned to adapt to societal aging, with one of the healthiest and best-educated older populations in the world.

The country is shifting to a super-aged society within the next two decades, with the share of people age 65 and older exceeding 21 percent of the total population (Figure 1). As of 2017, people age 65 and older accounted for nearly 16 percent of the total population, and the percentage is due to cross 21 percent by the year 2039. While aging at a relatively moderate rate, Australia is in a strong position to compete in the global aging era. In recent years, Australian society has become remarkably engaged at all levels—the federal, state, and community—to actively adapt to demographic change.
Societal aging has drawn significant political attention in Australia, thanks to a compulsory voting system and engaged voters. In 2002, the federal government headed by Prime Minister John Howard introduced the National Strategy for an Ageing Australia, calling for a coordinated national response to the demographic shift. While a systematic follow-up was absent, the Strategy has helped to encourage states and local governments to put in place their own aging plans. Today, there is a growing movement at the city and state levels to cultivate age-friendly communities, with Western Australia joining the World Health Organization’s Global Network for Age-Friendly Cities and Communities in 2017. Political commitment, coupled with a well-developed network of community engagement, is crucial for ensuring that aging populations are well-supported and valued.

**Figure 1. People Age 65 and Older as Percentage of Total Population**

While aging at a moderate rate, Australia is projected to shift from an aged society into a super-aged society within the next two decades.

![Figure 1](united_nations_department_of_economic_and_social_affairs_population_division)
Technological engagement is another area with tremendous untapped potential. While the public and private sectors have endeavored to promote digital inclusion among older adults through various training programs, there is still a lack of development in digital technology and services to accommodate older consumers with significant spending power. As of 2015-2016, the median net worth of people age 65 and older and those ages 55 to 64 was 38 percent and 70 percent higher than the national average, respectively.4

While the health care system in Australia is already one of the strongest in the world, the government has carried out reforms to both the health care and long-term care systems in recent years, with the focus on adopting a person-centered approach to provide coordinated and integrated care for older adults.

One area of weakness is enabling economic potential among older people. Due to decades of stable economic growth and economic necessity, labor force participation of older adults has more than doubled since 2000, but is still below the Organisation of Economic Co-operation and Development (OECD) average at 14.8 percent as of 2017.3 Further engagement with employers to promote age-friendly workplaces and support for senior entrepreneurship represent potential solutions, and the government has indicated its intention to move in this direction in its recent budget proposals.
Ecosystem for Policy and Social Innovation

Aging-related policy and social innovation in Australia are characterized by strong grassroots and state-level engagement, as well as a person-centered approach.

Underlying these attributes are the country’s tradition of civic engagement and its consultative and evidence-based approaches to policymaking. While coordinated actions between the federal and state governments help facilitate policy implementation, a weak political appetite for the top-down approach could undermine the country’s ability to create coherent national solutions.
Key Enablers

Australia’s ability to adapt to the demographic change has been shaped by the value its society, overall, places on citizen participation in governance and a strong preference for consultative and evidence-based approaches. Deep engagement from NGOs and advocacy groups, and coordinated efforts between the federal and state governments, are also essential in facilitating policy and program innovation and implementation.

High-level engagement with stakeholders is a key element of Australia’s public administration. This tradition can be traced back to its introduction of compulsory voting in 1924, emphasizing the importance of all citizens having a say in how they are governed. Today, Australia is one of the few countries in the world that enforces this policy. Meanwhile, the country has a complex history and cultural identity, resulting from a mix of factors, including the historical and physical isolation as an island continent, its British antecedents, the Asian regional location, and high-level multiculturalism. As a result, the government places an emphasis on active communication with the public, which helps to shape a collective understanding of Australian culture and identity.

As such, public consultation has become the norm in policymaking. It facilitates the identification of key issues, the understanding of stakeholders’ interests and needs, and the collection of new ideas. Consultation takes various forms, but is typically undertaken through either established institutions or temporary advisory groups. Two relevant examples are:

- The Productivity Commission is an independent advisory body in the government with a focus on economic and social issues. At the request of the commonwealth government, it conducted a public inquiry on the country’s long-term care—called “aged care” in Australia—system in 2010-2011, consulting older adults, families and caregivers, long-term care (LTC) institutions, and other interested parties. Based on its findings, the Commission submitted policy recommendations that laid the foundation for the latest LTC reform.

- The Primary Care Advisory Group is a temporary working group made up of experts from various sectors related to primary health care. In 2015, the Group took the lead to develop a discussion paper and conduct a wide scope of consultation with both individuals—including older adults with chronic diseases and their families—and organizations to inform policy options to improve primary health care.

“Sometimes the government simply doesn’t have that type of intelligence in house, and by going out and asking for information or insights from relevant stakeholders, its ability to develop policy is strengthened,”
said Kirsty Carr, National Policy and Strategy Advisor at Dementia Australia.  

Complementary to public consultation is an emphasis on evidence-based policymaking. Stakeholders’ feedback obtained through public consultation provides evidence for policy gaps and desired solutions. In addition, the government carries out thematic research to enhance the understanding of important issues and to monitor policy implementation. In its first National Survey of Age Discrimination in the Workplace conducted by the Australian Human Rights Commission in 2014, quantifying the prevalence of age discrimination among older adults created a benchmark to inform policymaking and to measure future progress in ageism.

Evidence-based decision-making is also valued by stakeholders that are actively engaging and collaborating with policymakers, including NGOs, advocacy groups (aka peak bodies), and academic institutions. For example, since 2016, a group of businesses and academic institutions have led the effort to develop the country’s annual Australian Digital Inclusion Index, in order to quantify and monitor the risks of digital exclusion in society and to inform policymaking. In addition, a number of national NGOs and advocacy groups, including Dementia Australia and National Seniors Australia, play an important role in conducting or funding thematic research, coordinating with governments at different levels, and advocating for policy support.

“Sometimes the government simply doesn’t have that type of intelligence in house, and by going out and asking for information or insights from relevant stakeholders, its ability to develop policy is strengthened.”

– KIRSTY CARR, National Policy and Strategy Advisor at Dementia Australia

Coordination between federal and state governments is also essential in shaping Australia’s capacity for policy innovation. While the federal—or commonwealth—government is responsible for the conduct of national affairs, its involvement in services carried out by the states such as health, education, environmental issues, and industrial relations, is mainly through funding.  

To better manage matters of national significance or in need of coordinated action by all Australian governments, the Council of Australian Governments (COAG), in operation since 1992, is made up of the prime minister, state and territory first ministers, and the president of the Australian Local Government Association. “Through COAG, state and local governments come together to work with the federal government to shape and implement policy,” said Kathleen Brasher, Foundation Member of the Strategic Advisory Group for the WHO.
Global Age-Friendly Cities and Communities Network.

To streamline funding from the federal government to state levels, reforms were introduced in 2011 through the Intergovernmental Agreement on Federal Financial Relations. The reforms provide states with increased flexibility in services delivery, and clarify the role and responsibility of each level of government, helping to improve the quality and effectiveness of government services. Under the agreement, detailed arrangements are set out for key issues, and are updated as necessary. One example is the National Affordable Housing Agreement, which was replaced with the National Housing and Homeless Agreement in 2017 with an updated focus on addressing the homelessness crisis, to which older adults are among the most vulnerable.
Attributes in Aging-Related Innovation

Aging-related innovation in Australia places emphasis on the needs of older adults. This is manifest in the government’s latest reforms to the health system. LTC reforms since 2012 have consolidated existing service programs to facilitate access to home-based care and support and have given greater autonomy to older adults to choose their preferred care providers. In primary health care, the government created the test Health Care Home program in 2017, seeking to provide integrated care to people with chronic diseases and improve care quality.

Grassroots engagement is strong and built on collaboration among stakeholders. Community organizations play the central role in many programs targeting older adults. This is manifest in major digital training programs, including the national Be Connected initiative and the Tech Savvy Seniors program in several states. Under these initiatives, community organizations, including libraries, community clubs, and neighborhood centers, are mobilized to provide in-person coaching for older adults. Another example is the national network of Playgroups, non-profit organizations focused on promoting cross-generational support. Considering demographic shifts, they have increased focus on engaging older adults, such as collaborating with LTC institutions to host intergenerational activities.

There is also a growing push from state governments to build age-friendly cities and communities. Without a clear national directive on this issue, several states, including Western Australia, Queensland, South Australia, and Tasmania, have introduced Age-Friendly City and Community (AFCC) initiatives or related strategies, and are creating networking opportunities to promote communication and collaboration among stakeholders, including state and local authorities, academia, and community organizations.

However, a weak appetite for top-down policies among Australian policymakers could inhibit the country’s ability to adapt most effectively. Take the policy effort to promote productive participation of older adults. “Developing a coherent strategy or taking a strongly proactive approach would imply more regulation. It is unlikely that Australia would adopt a coherent labor market regulation like those in the United Kingdom and Germany. It is just not on the political agenda,” said Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne.”
Community Social Infrastructure

Older adults in Australia tend to live happy, independent lives, with higher levels of reported life satisfaction than the general population.

This can be attributed to their access to, and participation in, various social activities, including a national network of intergenerational playgroups that promote cross-generational communication. The growing movement to build age-friendly communities around the country, mainly driven by city and state governments, promises to further improve the well-being of older adults.
Social Connection

Like their peers around the world, older adults in Australia prefer aging at home. As of 2016, 94 percent of people age 65 and older lived in private dwellings. The majority live independently, 48 percent either with a spouse or a partner and 25 percent by themselves (Figure 3). This overwhelming preference for independent living is largely attributed to a strong cultural tradition of individualism. In a 2008 survey studying the reasons for living alone, the most popular answers were “enhances privacy,” “facilitates freedom,” and “promotes independence,” each cited by more than 80 percent of respondents across different age groups.

While living independently, older adults stay active and have relatively frequent social contacts. According to the 2014 General Social Survey, 63 percent of those age 65 and older have face-to-face contact with their family members and friends who live outside the household at least once per week, and 19 percent every day. Nearly 95 percent of them reported they can get support from people outside their household in a time of crisis.

Older adults in Australia are less likely to feel loneliness than the general population. According to the 2016 Australian Psychological Society’s Compass for Life Survey, people age 65 years and older scored 2.4 out of 7 on loneliness, a third less than the average score of the general population. This could be attributed…

Figure 3. Living Arrangements of People Age 65 and Older, as of 2016

to their high levels of participation in community and social activities. In fact, 56 percent of respondents age 65 and older had participated in a sporting activity in the past year and 73 percent had attended cultural events, including those at libraries, museums, and theaters.¹⁷

Despite older adults’ close contact with family members and friends, some societal stereotypes prevent the development of intergenerational bonds outside families. “There has been a longstanding mentality that ‘families’ are solely for the home. Outside of homes, people only engage and interact with people their own age, so there have been fairly closed mindsets when it comes to facilitating ‘family-like environment’ outside of the home.”¹⁸ said Carley Jones, Executive Officer of Playgroup South Australia.

An interesting model, known as intergenerational playgroup, has been widely adopted to break this barrier and to enhance cross-generational ties. The model evolved from the long-lasting, widespread practices of playgroups, which first emerged in the 1960s in Australia, and were originally designed to facilitate community-based support for early childhood development. Today, there are thousands of playgroups across the country, and each of the six states has a non-profit playgroup organization working separately to support local playgroups and coordinate with the government.¹⁹ While a typical playgroup involves parents, grandparents, caregivers, children, and babies who meet and socialize in an informal, relaxed setting, an intergenerational playgroup usually involves at least three or more generations participating.²⁰

Over the past two decades, intergenerational playgroups have gained popularity. “Families are a lot more transient these days. Some don’t have much in the way of intergenerational relationships due to family members moving interstate or overseas for work or study. As a result, families are seeking how to engage their older family members or children in cross-generational activities in organized settings.”²¹ said Jones. Specific practices vary, and one prominent model is intergenerational playgroups offered at LTC institutions (Box 1).²²,²³

“Families are a lot more transient these days. Some don’t have much intergenerational relationships due to family members moving interstate or overseas for work or study. As a result, families are seeking how to engage their older family members or children in cross-generational activities in organized settings.”

– CARLEY JONES, Executive Officer of Playgroup SA
Age-Friendly City and Community

There is growing enthusiasm among local governments for building age-friendly communities in Australia. In 2011, Canberra became the first Australian city to join the WHO Global Network for Age-Friendly Cities and Communities, soon after the network’s establishment. Today, 26 cities—spread across all states and territories—are members of the WHO network, with nearly half having joined over the past three years.

In recent years, the AFCC initiative is gradually moving up to the state level. The state governments of Western Australia and Queensland have launched their own AFCC initiatives, while others have introduced certain strategies related to building an age-friendly environment. Western Australia stands out as a national leader in promoting AFCC. In 2017, Western Australia was the first Australian state to join the WHO network and its early success attributed to:

- Strong political will and support;
- Empowering local governments; and
- Inter-governmental collaboration.

As of 2016, more than 18 percent of the state’s population was age 60 and older, and the percentage is projected to rise to 20 percent by 2021 and to 25 percent by 2041. The Western Australia state government has long recognized the importance of creating age-friendly communities to accommodate the aging population and started to adopt the WHO AFCC framework in 2006 when it was first

Box 1. Intergenerational Playgroups at Long-Term Care Institutions

Intergenerational playgroups at residential care institutions leverage the resource of care institutions to address the rising shortage of venues for playgroups. First piloted in the state of Western Australia in the early 2000s, it was later replicated in other states including Victoria and Western Australia. Typically, parents and their children, including babies, meet weekly with older adults living in care institutions, spending a couple of hours together singing, painting, and telling stories. The institution’s staff is trained to facilitate the sessions. “The practice has shown a positive impact on older adults’ social well-being and children’s cognitive development. In particular, it moves away from the traditional nursing home’s approach of solely ‘reflecting on the past’; instead, it promotes older adults to find purpose at the present in connecting with children,” said Jones.
“At different times of WA’s history of AFCC development, the state government has always been very supportive.”

– KATHLEEN BRASHER, Foundation Member of the Strategy Advisory Group for the WHO Global Age-Friendly Cities and Communities Network

introduced. “At different times of Western Australia’s history of AFCC development, the state government has always been very supportive,” said Kathleen Brasher, Foundation Member of the Strategic Advisory Group for the WHO Global Age-Friendly Cities and Communities Network.

Realizing that local government is in the best position to develop policy tailored to older adults’ needs, the state government has focused on empowering local governments to achieve the best outcomes, mainly through two measures:

- **Providing a small amount of catalyst grants.** Since 2006, the state government has allocated funding through the Age-Friendly Communities Local Government Grants Program to support the establishment of AFCCs. “Western Australia takes a very good approach by giving local governments a small amount of funding and urging them to use it to take the first step to talk and work with local communities to understand their needs and then develop a plan. That really brings the whole community and local government onto the same page so that they can share information and learn from each other,” according to Brasher. The approach has proven effective. Over the period 2006-2017, half of Western Australia’s local governments, numbering 70, received a total grant of over AUD 473,000 (USD 341,000), covering 75 percent of Western Australia’s older adults.

- **Creating networking opportunities with other stakeholders.** In 2014, the state government, through its Department of Communities, collaborated with the Local Government Managers Association WA to establish the Age-Friendly Communities Network, which holds forums and professional development events. “Through the network, representatives from local governments, the state government, academia, community organizations, and other stakeholders come together for workshops to discuss emerging aging issues,” said the Principal Strategy Officer at the Department of Communities.

In addition, the state government has also established the Age-Friendly Interagency Group, the first of its kind in Australia. The Group consists of representatives from 14 state government agencies, as well as the City of Melville and the Wheatbelt Development Commission. “We realized there was a need for better collaboration across agencies. Hence, we developed the Group, focused on trends across Western Australia and with local government, to develop and implement better practices.
The Group meets to share information and develop collaborative solutions,” said the Policy Officer at the Department of Communities.

Despite the growing popularity of AFCC initiatives, challenges remain. According to Brasher, “The [WHO’s] AFCC concept is not well-embedded yet. Sometimes the change of the language within the government—for example, it is referred to as ‘livable community’ in the state of Victoria—can undermine the concept of what we are trying to create.” In addition, a lack of suitable evaluation of AFCC-related initiatives represents another challenge. In light of this challenge, the Western Australia state government is considering different models on how to measure the outcomes and looking to Canada, Japan, and the city of New York for different approaches.

**Housing**

One important component of the WHO’s AFCC framework is housing. However, older adults are facing a growing risk of homelessness, which has drawn considerable attention from the government in recent years. As of 2016, more than 116,000 people were homeless, with older adults being most at risk. Over the period from 2006 to 2016, the number of homeless people age 55 and older increased by 49 percent, more than twice as fast as the growth in the total population at 22 percent. As of 2016, nearly 19,000 people age 55 and older, or 29 in every 10,000 people, were homeless.

A key contributor to the rising rate of homelessness is the significant growth in housing prices since the beginning of the 2000s, reducing access to affordable housing. The median house price in 2017 was more than five times that of 2001, and the median rent has nearly doubled since 2001. As a result, in 2017 an estimated 1.3 million households were in a state of housing need, either unable to access market housing or in a position of rental stress, and this figure is predicted to rise by nearly one-third to 1.7 million by 2025. In addition to the general inflation, drivers for the price hikes include the population growth due to immigration and tightened supply of housing due to restrictions on land use.

Because of the homeless crisis, the government is working to increase the supply of affordable housing and urging states and territories to also commit to reduce homelessness. The government is seeking to stimulate affordable housing supply by introducing new financial incentives. In its 2017-2018 budget, the commonwealth government set aside AUD 1 billion (USD 719 million) over a period of five years to support local governments to develop critical infrastructure, such as transport links and power facilities, which has been a key impediment to creating new housing. In addition, starting in 2018, the government raised the capital gains tax discount from 50 percent to 60 percent for
eligible individuals who invest in affordable housing.\textsuperscript{49} To prompt state/territory-level actions to reduce homelessness, the commonwealth government introduced the new National Housing and Homelessness Agreement (NHHA) in 2017 (commenced in July 2018), establishing a framework for the roles and responsibilities of the commonwealth and territory governments in improving access to affordable, safe, and sustainable housing. The commonwealth government allocated a budget of AUD 8.5 billion (USD 6.1 billion) throughout to the fiscal year 2022-2023.\textsuperscript{50} In particular, more than AUD 600 million (USD 432 million) is dedicated to homelessness services, which states and territories are required to match. Older people are listed as one of the priority groups to receive support, in addition to women and children affected by domestic violence and indigenous Australians, among others.\textsuperscript{51}

The Agreement attempts to address the lack of clear metrics that allowed for ineffectiveness in previous funding schemes.\textsuperscript{52} To secure funding from the commonwealth government, state and territory governments must fulfill a range of conditions, including a homelessness strategy that specifies targeted groups and the indicators of a successful reduction in homelessness. To enable better evaluation of the outcomes, data transparency is required.\textsuperscript{53}

To date, the commonwealth government has signed bilateral agreements with five states and territories under the NHHA framework, and all of them highlight some measures related to older people.\textsuperscript{54} For example, the Capital Territory plans to investigate the support needs of older women who are at risk of experiencing homelessness and explore affordable long-term accommodation options for them.\textsuperscript{55} And the state of Tasmania plans to build a new LTC facility for homeless older people by 2021.\textsuperscript{56}

\section*{Physical Infrastructure}

Australia lags behind many advanced economies on transport infrastructure. It ranked No. 39 in terms of quality of overall infrastructure on the World Economic Forum’s Global Competitiveness Index 2017-2018.\textsuperscript{57} Significant inequality exists in access to transport across regions. The outer suburbs of Australia’s cities and most parts of regional Australia\textsuperscript{58} have underdeveloped public transport services.\textsuperscript{59} With relatively low population density, travel within Australia is dominated by road transport, mainly passenger cars. “Most older Australians prefer to drive, and are driving longer. In fact, current policies essentially encourage people to drive for as long as possible, so there isn’t as much of an emphasis on changing infrastructure and public transport systems,” said Sekhar Somenahalli, Senior Lecturer of Natural and Built Environments at the University of South Australia.

As such, experts contend that Australia could learn from the experience of other aged societies in transport development.
Japan is a potential model, as comparative studies show that Australia’s demographics and aging trends are similar to those of Japan’s approximately 20 years ago. "When Japan changed their laws to discourage driving, and promote better access and affordability of public transport, this shifted their entire national transport system to better meet the needs of older people. Australia’s infrastructure and public transportation systems are currently fragmented, and policies vary between states and territories. To achieve progress in urban infrastructure planning around the needs of an aging population, there should be better national cohesion of policies similar with that of Japan," said Somenahalli.

Fragmentation in the implementation of national legislation also constrains the accessibility of physical infrastructure, which remains a primary challenge for the mobility of older adults. About 20 percent of people in Australia have some form of disability and of those, 40 percent are age 65 and older. This group tends to face mobility barriers in public transport and the built environment:

- About one in five of those living with disability has difficulty accessing public transport. Among them, 40 percent have difficulty in using steps, 25 percent in getting to the stops or stations, and 21 percent face the challenge of lack of seating or difficulty standing.

- Of people ages 15 to 64 who responded to a 2015 survey on inclusion and participation in community living, more than one in four reported difficulty accessing buildings or facilities in the community in the previous 12 months. Although the survey did not cover people age 65 and over, the situation is presumed to be similar or even worse given functional limitation increases with age. Major challenges include stairs, narrow corridors for wheelchair users, and a lack of barrier-free features such as ramps and handrails.

To ensure equal access, Australian lawmakers have been working to strengthen legislation on the national level since the 1990s and have established mandatory standards over time. Australia introduced
the Disability Discrimination Act (DDA) in 1992. The Act stipulated it is illegal to treat people with disabilities unfairly in areas of public life such as transportation, the built environment, employment, and education. Since then, two mandatory standards have been introduced to enforce the DDA in the areas of transportation and the built environment, and both set minimum compliance milestones for every five years until full compliance in 2022.

- **The Disability Standards for Accessible Public Transport** in 2002, mandated accessible features in transport, such as width of paths, length of ramps, and the installment of handrails. The standards cover both existing and new transport vehicles, as well as transportation facilities.

- **The Disability (Access to Premises—Buildings) Standards** 2010 set mandates on barrier-free features in all public buildings, new private buildings, and existing private buildings that undergo renovation.

Despite the legislative effort, implementation remains the key challenge. State governments are responsible for developing action plans to comply with the DDA, and the regulation intensity varies by state. As Somenahalli remarked, “The impact of the Act is lagging because they are not necessarily implemented effectively across states.”

Disconnection between state governments and industry experts can also undermine effective policymaking. “We do have people committed to [improving] the transport and accessibility issues, but there is no interaction between the government and these professionals. For example, in New South Wales, there is a group of professionals with expertise in accessibility that comes together to advise and push for the government’s policymaking, but they are never part of the consultation process of the government,” said Jane Bringolf, Founding Director of Centre for Universal Design Australia.
Productive Opportunity

Older adults have steadily increased their productive engagement in Australia since the early 2000s, widely attributed to both demand for labor and a series of government initiatives tackling barriers for both employers and employees.

Nevertheless, older adults’ labor force participation rate is still below the OECD average, indicating room for further improvement. Senior entrepreneurship is one promising area.

Labor Force Participation

Older people have become increasingly active in the workforce in recent years. As of 2017, the labor force participation (LFP) of adults age 65 and older was 13 percent, more than double the level in 2000. While still below the OECD average at 14.8 percent, the gap is shrinking (Figure 4). “We have 30 years of continuing
growth, and the supply of jobs has been able to keep up with the change of labor. As such, the government doesn’t have to deal with the [labor market] issues like in other countries. In comparison, if you look at the United States, the financial crisis caused many firms to restructure, which burdened older workers in the labor market,” said Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne.

Financial necessity is the primary reason for older adults to remain in the workforce. According to a 2015 survey by Financial Services Council and the Commonwealth Bank, nearly two-thirds of those ages 50 to 75 continue to work for the reasons of “financial security” or “not enough money to retire,” followed by “personal enjoyment.”

Older adults in Australia have one of the highest poverty rates among OECD countries and a surge in housing prices in recent years has exacerbated the situation. More than one-quarter of those age 66 and older live with incomes below 50 percent of the median, twice the OECD average and higher than any other OECD countries except Korea, Estonia, and Latvia.
levels of poverty are tied to the country’s low pension replacement rate, which was 43 percent as of 2017, a third lower than the OECD average at 63 percent.\[77,\[78\]

High mortgages, a result of housing market booms since the early 2000s, are also a burden. The percentage of homeowners age 65 and older that carry mortgage debt has nearly tripled since 2000 and the percentage for those ages 50 to 64 has nearly doubled.\[79\] “Ten to 15 years ago, people in their 50s would have paid off a mortgage. It is different now because of the housing crisis. They can’t pay off [a] mortgage and if they lose their job, they will face extreme financial difficulties,”\[80\] said Greg Goudie, Executive Director at Don’t Overlook Mature Expertise (DOME).

While a majority of older workers today are driven by economic necessity, the government has realized the impact of population aging on labor supply and is keen to promote greater participation. As in other countries, the government has focused first and foremost on increasing the age at which one can receive a pension:

- The Age Pension (means-tested pension funded through general taxation revenue): the normal eligibility age will increase by six months every two years from age 65 in 2017 until it reaches age 67 by 2023;
- Superannuation (mandatory occupational pension): the minimum age for withdrawing the pension (known as preservation age) started to increase from 55 years in 2015 to 60 by 2024 (currently 56).

Despite the changes, the policy of individuals being allowed to withdraw superannuation in a lump sum at the preservation age—almost 10 years earlier than the Age Pension—has an unintended negative impact on retirement decisions. To receive the superannuation pension in lump sums before 60, one must leave the workforce, creating an immediate economic incentive to retire early.\[81\]

---

**Tackling Barriers on the Side of Employers**

Beyond pension sector reform, the government is seeking to address barriers to labor force participation. To address barriers to labor market demand for older workers, the government put in place both anti-discrimination regulation and financial incentives. Building on this framework, but conscious that much more remains to be done, it has recently focused on benchmarking the prevalence of age discrimination at the workplace and creating initiatives to support employers as they create more age-friendly workplaces.

Ageism is as a key obstacle to older people around the world and Australia is no exception. According to the 2015 National Prevalence Survey of Age Discrimination in the Workplace, over a quarter of those age 50 and older reported having experienced
some form of age discrimination on at least one occasion in the workplace in the prior two years. The most commonly experienced forms related to limited opportunities for employment, promotion, or training, as well as perceptions that older people have outdated skills or were too slow to learn new things.82 “Ageism is the last ‘ism’ that is still considered acceptable by many in Australia, and far too often, we are unaware of it due to implicit bias,”83 said Kaarin Anstey, Professor of Psychology at University of New South Wales.

Realizing ageism has an economic cost, the government is seeking to combat ageism in the workplace. It is estimated that Australia loses over AUD 10 billion (USD 7.2 billion) per year as a result of people staying unemployed due to age discrimination.84 In 2004, the government passed the Age Discrimination Act (ADA), stipulating that it is unlawful to treat people unfairly on the basis of their age.85 To enforce the Act, the Australian Human Rights Commission (AHRC), a statutory body funded by the government, is responsible for receiving and conciliating complaints; those that are not resolved are taken to court.86 However, the difficulty in proving a discrimination complaint is a key impediment to the ADA’s effectiveness.87

To both understand the scale and scope of the challenge and to be able to measure progress going forward, in 2014, the government conducted the first National Prevalence Survey of Age Discrimination in the Workplace.88 The report, which was released in 2015, quantified the prevalence of workplace age discrimination of people age 50 and older, and identified its nature and impact. The government intends to use the survey results as the benchmark against which it can judge the effectiveness of anti-ageism programs going forward.

That same year, the government introduced a financial incentive to encourage the employment of older adults. The Restart Program offers up to AUD 10,000 (USD 7,200) to employers that provide jobs to people age 50 and older who have been unemployed for more than six months.89 Although the final evaluation report of the Program has not yet been released, it was not initially well-received among employers. In 2015, fewer than 2,000 older people benefited from this program, accounting for only five percent of the government’s target number of 32,000.90

To explain potential reasons for the low interest among employers, Geoff Pearman, Director at Partners in Change, said, “There is a gap in how to implement age-friendly
practices in the workplace and fulfill the interest of employers, rather than just from the perspective of older people.”

Perhaps recognizing the need for a more user-oriented approach in July 2018, the government established a collaborative partnership on mature-age (i.e. age 50 and older) employment to work directly with employers to create more age-friendly workplaces and to reduce age discrimination. Still at the early stage of assembling members, the partnership is intended to involve the Department of Jobs and Small Businesses, the Age Discrimination Commissioner under AHRC, business peak bodies, universities, and other stakeholders. These members will work together to establish the scope and broad objectives related to age-friendly workplaces, as well as to implement those strategies.

Employer Practices

Even as ageism broadly persists, an increasing number of employers, particularly large companies, are starting to tap into the productive potential of older workers. This change has been driven by two factors:

• Companies are increasingly aware of the challenges they face with an aging workforce and the importance of skill retention and age-based transitions.

• A 2015 AHRC report (the National Prevalence Survey of Age Discrimination in the Workplace) raised social awareness of the prevalence of age discrimination and employers’ legal responsibility.

One prominent example is Westpac Banking Corporation, which was named a 2015 “Inclusive Workplace” by the Australian Human Resources Institute. The company seeks to retain and attract the best talent in the market by offering programs and support for older workers. Since 2003, the average retirement age of its employees has increased from 56 to 62. Westpac’s proven, effective measures include:

• **Flexible working arrangements:** Workers can opt for flexible hours, mobile working, part-time work, and job sharing. More than 71 percent of Westpac’s employees have flexible work arrangements.

• **Training options and support resources:** Workshop sessions are held to help employees plan for their future around issues including finance, health,
An independent study, Senior Entrepreneurship in Australia, found that there is still unmet demand for training, with 82 percent surveyed indicating an interest in free or subsidized start-up training. Today, most entrepreneurship is geared toward younger people. The New Enterprise Incentive Scheme, a longstanding program to support unemployed workers age 18 and older to become self-employed business owners, has no age limits, but the recently established Entrepreneurship Facilitators, who provide practical assistance to individuals seeking to build their own businesses, are currently only available to young people.

Recognizing this gap, the government has articulated plans to fund an additional 20 Entrepreneurship Facilitators available to support older entrepreneurs beginning in January 2019. These Facilitators will offer free mentoring and business support, engage with community organizations to spread information on self-employment opportunities, and refer individuals to the most appropriate assistance.

Another new initiative, which began in July 2018, is Career Transition Assistance, which targets job seekers age 50 and older. Depending on eligible jobseekers’ needs, they will be provided with assistance on job application skills, information on job opportunities, and digital skills training, among other things. The initiative is currently being piloted in select regions, and will be available nationwide from July 2019.

**Entrepreneurship**

While workforce participation remains a challenge, older adults are a force in entrepreneurship. According to a 2015 study funded by the Commonwealth Department of Social Services and National Seniors Australia, senior entrepreneurship is the fastest-growing segment of entrepreneurship in Australia. Thirty-four percent of start-ups are led by people age 50 and older, and more than a third of them are serial/portfolio entrepreneurs. The study also found that maintaining an active lifestyle, enhancing a work-life balance, and achieving personal/family goals are the most important motivations for senior entrepreneurship—each factor cited by 75 percent of survey respondents.


**Gaps Remain**

The distance between the entrepreneurial energy of older adults in Australia and the limited space for positive productive engagement speaks to the tremendous opportunity available to create a holistic approach in empowering older workers.

One area deserving immediate attention is lifelong learning, which currently lacks any specific program targeting older adults. “We don’t have a good integrated lifelong learning policy. The assistance from the government is basically only in the digital realm of skills. We have been calling for four decades [for a cohesive lifelong learning policy]. While there is some momentum, I don’t sense a great appetite from the government for this,” said Catherine Devlin, Operations Manager at Adult Learning Australia.

Overall, while recent efforts are commendable, experts stress the need for a coherent strategy. “Government initiatives have been largely reactive and piecemeal. There is no sense of overarching, coherent strategy policy position to promote growing labor force participation of older workers,” said Gahan.
Technological Engagement

With its low population density and continental scale, information and communications technology (ICT) has the tremendous potential to enhance the well-being of older adults.

Australia has invested in a world-class ICT infrastructure, ranking among the top 20 countries on the World Economic Forum’s 2016 Networked Readiness Index. As such, it is well positioned to harness the power of digital technology to accommodate its aging population. The government has focused on enhancing digital inclusion, including the rolling out of a national digital literacy initiative for older adults in 2017. The growing market of older consumers has also begun to draw interest from the private sector, but there is limited policy support for the development of technology solutions for this demographic.
Digital Diffusion and Inclusion

Older people in Australia are becoming increasingly digitally savvy. The percentage of internet users 65 and older rose by 20 percent between 2011 and 2015, reaching 79 percent. Although still behind the general population, older adults are catching up across all age segments (Figure 5).

Nevertheless, the digital gap persists. Efforts inside and outside of government are mobilizing community partners and providing specialized programs and services for older adults. Some private sector players are further contributing to this effort by developing tools to monitor digital inclusion, with the goal of informing smart policymaking.

The most recent push by the government is the Be Connected initiative, launched in October 2017 with a total budget of AUD 50 million (USD 36 million). Be Connected replaced a national program known as Broadband for Seniors, which deployed internet kiosks at community organizations to facilitate access to the internet and training programs. The new initiative continues to leverage existing community infrastructure and expertise, but also focuses on empowering the broader community to play an important role in promoting the adoption of digital
“Introducing technologies, face to face, is the best way to engage this audience; it’s also important to make sure the education material is culturally appropriate and delivered by a trusted individual from within the community.”

— MARK SULIKOWSKI, Senior Advisor of Indigenous Digital Capability at Telstra

The private sector has long been leading efforts to expand digital inclusion. One prominent example is the Tech Savvy Seniors (TSS) program, built on the partnership between Telstra, an Australian telecom company, and the state governments of New South Wales, Victoria, Queensland, and South Australia. Launched in 2012, the TSS program recruits volunteers to provide free or low-cost, face-to-face tutorials on digital skills to older adults in colleges and in libraries. Since 2014, more than 110,000 people have received training through this program.

An evaluation on the TSS program in New South Wales indicated that nearly nine in 10 trainees found their trainers helpful, training resources clear, and the tutorial at the right pace. The program is particularly helpful for older adults residing in remote areas. According to Mark Sulikowski, Senior Advisor of Indigenous Digital Capability at Telstra, many Aboriginal and Torres Strait Islander people living in remote communities don’t fully realize all the benefits that digital technology can bring. “From our work at Telstra, we know that this audience will be more interested in getting online if they can clearly see
how technology will improve their life. Introducing technologies, face to face, is the best way to engage this audience. It’s also important to make sure the education material is culturally appropriate and delivered by a trusted individual from within the community,” said Sulikowski.

Beyond providing digital training, Telstra has also collaborated with RMIT University, the Centre for Social Impact, and Roy Morgan Research to develop and release the annual Australian Digital Inclusion Index (ADII) since 2016. The ADII is built on a comprehensive set of indicators that measure access to—and the affordability of—digital technology and digital competence among different population groups. It is intended to quantify and monitor risks of digital exclusion, raising social awareness and informing policymaking. According to the 2017 ADII, people age 65 and older are the group most vulnerable to digital exclusion, second only to low-income people, with a digital inclusion score of only 75 percent of the national average (Figure 6).

Figure 6. Digital Inclusion Score, 2017

Source: Australian Digital Inclusion Index 2017

Technology Market Development

As the baby-boom generation ages, it represents a massive consumer market, controlling more than 40 percent of the nation’s wealth. More than 63 percent of boomers own financial assets and investments. They are also spending more on high-end products that are typically marketed to millennials. “There are
continually more older Australians sourcing home care through technology, and there is an understanding that it’s about promoting products and services online in order to be relevant to the 55-plus customer base,” said Neil Herlihy, Head of Gen X and Boomer Segment Experience & Acquisition, Strategic Marketing, Westpac Group.

Lack of understanding of the older consumer segment is a major challenge faced by companies interested in tapping into this market. With few employees in this age group, the instinct is to engage via corporate social responsibility, rather than catering to a consumer base.117 “We have a shortage of older people actually employed in this space to help with marketing to this age cohort. Young millennials in the tech sector tend not to understand how to market to older adults. There need to be more older people working in this area, and employers need to seek them out,”118 said Herlihy.

Although Australia is among the countries most ready to harness the power of digital technology to accommodate the aging population, it has been slower than its European counterparts and the United States to build a research and development infrastructure.119 Some government funds, such as the Dementia and Aged Care Services Fund set up in 2015,120 exist to support innovation related to long-term care, including ICT-based solutions. However, the overall scale and strength of policy support for age-friendly tech solutions are relatively low when compared with other ICT leaders. There is also a lack of national strategy to integrate the development of ICT for aging into the country’s industrial policy.

Nevertheless, interesting business models are emerging, which target the daily needs of older adults. One example is Starts at 60, an online community platform for people age 60 and older. Launched in 2013, Starts at 60 aggregates news and information covering a wide range of topics, including health, lifestyle, technology, and finance, along with opinion pieces.121 Starting in 2016, it moved from an online community into the real world, hosting monthly community meet-ups. The business has grown rapidly, engaging 1.2 million members. Today it claims to be the world’s largest digital community for people in their sixties.
Health Care and Wellness

Already home to one of the world’s healthiest older populations, Australia still grapples with how to respond to the rise of chronic diseases and demand for long-term care.

The government has responded with a focus on enabling older adults to have access to integrated care. This person-centered approach is also adopted in the government’s recent reforms in the LTC system, as it aims to provide consumer-directed care and enhance older adults’ choices of providers.

Health Status and Health Care System

As of 2016, an average adult at 60 was expected to live another 25.6 years—the fourth highest in the world (after Japan, France, and Canada); the average healthspan was 20.4 years, fifth
globally (after Singapore, Japan, France, and Canada). Both life expectancy and healthy life expectancy are well above the regional average (Figure 7). However, as in most countries, the gap between lifespan and healthspan is widening, from 4.8 years in 2000 to 5.2 years in 2016.

Global leadership on health and longevity is attributable to Australia’s effective health care system, which provides affordable and high-quality health care services. In 1984, Australia introduced a universal public health care system, known as Medicare, which is funded in part by a government levy collected through the tax system. Medicare provides free or subsidized access to hospital care, medical services, and pharmaceutical services. In addition to the public scheme, about half of the population is also enrolled in private health insurance. According to a 2014 survey by the Commonwealth Fund, 92 percent of adults age 65 and older reported no cost-related problem in accessing health care in the previous year.

Figure 7. Life Expectancy (LE) and Healthy Life Expectancy (HALE) at Age 60, 2000 vs. 2016, in Years

Note: According to WHO’s classification, Western Pacific Region includes 37 countries and areas, including eastern Asia countries like China, Korea, and Japan; Australia; and New Zealand.

Source: WHO Global Health Observatory data repository
Health care services are also of high quality. In a 2017 study that compared 11 advanced economies, Australia ranks No. 2 on the overall performance of its health care system, following only the U.K. It also stands out in terms of administrative efficiency and care process (covering preventive care, care safety and coordination, and patient engagement). The 2016 Survey of Health Care by the Australian Bureau of Statistics also indicated that 93 percent of older adults reported their health professionals had a good understanding of their health status, health care needs, and preference.

Tackling Chronic Disease

Australia has intensified efforts to tackle chronic disease in recent years to achieve long-term cost savings and improve health outcomes. These efforts are particularly important for older adults. According to the 2014 to 2015 National Health Survey, half of the population has at least one chronic condition and one-quarter of them have two or more chronic conditions, and the prevalence rates are even higher for people age 65 and older—at 87 percent and 60 percent, respectively.

In 2017, the government introduced a National Strategic Framework for Chronic Conditions, built on consultations with a broad spectrum of stakeholders. The Framework provides overarching guidance, including key objectives and associated strategic priority areas, for the development and implementation of policies, strategies, actions, and services to address chronic conditions and improve health outcomes. In particular, it targets older adults as a priority population, in addition to people living in remote or rural locations, those with mental illness, and indigenous Australians. The Framework covers the period between 2017 and 2025 and will be reviewed every three years.

The Framework emphasizes a shift from a disease-specific approach to a systematic, person-centered approach and promotes coordinated care across the health sector. Aligned with this emphasis, one model the government started to experiment with in 2017 is a Health Care Home (HCH), based on a recommendation made by the Primary Health Care Advisory Group, which was charged with identifying options to improve the provision of primary health care (Box 2).

In an HCH, eligible individuals enroll with a participating general practitioner (GP), who will coordinate all their chronic disease management and facilitate their access to integrated care tailored to their needs. GPs will receive a bundled payment between AUD 591 and 1,795 (USD 425-1,291) per year, based on their assessment of a patient’s needs. Together with the patient, the GP will develop a care plan, including:
Box 2. The Primary Care Advisory Group

The Primary Care Advisory Group and its working process demonstrate the Australian government’s commitment to consultative and evidence-based policymaking. The Group was assembled in April 2015 by the Minister of Health and assigned the task of providing short-, medium-, and long-term options to reform the primary health care system. The Group consisted of experts in the field of primary health care from various sectors, including clinicians and nurses, academics, consumer representatives, and state governments, among others. The Group consulted with the public actively, including:

- Releasing a discussion paper that set out the Group’s initial views on opportunities for reform, coupled with a background document, to solicit public opinions;
- Conducting an online survey to collect responses to the discussion paper, which received more than 1,000 responses from over 250 organizations and 770 individuals (including both patients and caregivers);
- Holding 17 public information briefings across all states and territories and a national public briefing, attended by people with chronic diseases, caregivers, practitioners, and representatives of health service organizations;
- Hosting 46 targeted consultation sessions with organizations and primary health networks;
- Holding 10 focus groups with people with chronic or complex conditions and caregivers.

Building on feedback from this broad spectrum of stakeholders, the Group submitted the report “Better Outcomes for People with Chronic and Complex Health Conditions” to the Minister of Health in 2016, outlining a comprehensive set of recommendations, including the model of the Health Care Home program.
• Compiling comprehensive information about the patient’s health, medications, and all the health professionals who care for them;
• Identifying local health care providers that are best able to meet the patient’s needs, and helping coordinate care with these providers;
• Developing strategies to help the patient to manage their chronic conditions in daily life.\textsuperscript{134}

The HCH model is currently in trials in 10 selected primary health network regions,\textsuperscript{135} and more than 170 general practices (including medical centers, clinics, and other general practice providers) have participated. The trial phase will run through November 2019,\textsuperscript{136} at which time it will be evaluated to determine the impact of the new approach on patients’ health, hospitalization, and costs.\textsuperscript{137}

Despite the government’s growing focus on tackling chronic diseases, NGOs active in this area point to gaps, particularly in preventive health care. A report released in June 2018 contends that the National Strategic Framework for Chronic Conditions does not include specific policy options for the prevention and control of chronic diseases and is not attached to any funding.\textsuperscript{138} Currently, there are no national strategies in place targeting modifiable risk factors, including alcohol, nutrition, and physical activity, and the national strategy related to tobacco is due to expire in 2018.

\section*{Long-Term Care}

About one-third of older people benefit from government subsidized LTC known as “aged care” in Australia. During the fiscal year 2015-2016, 7 percent of those age 65 and older received care at residential institutions and 25 percent received some form of care or support at home. In the same year, government spending accounted for nearly 80 percent of the total aged care expenditure.\textsuperscript{139} “We are fortunate to be one of the countries with well-developed long-term care systems. Aged care in Australia is generally affordable and accessible for older adults,”\textsuperscript{140} said Brasher, of the Strategic Advisory Group for the WHO Global Age-Friendly Cities and Communities Network.

Because of an aging and increasingly diverse population, the government has undertaken a suite of reforms to the aged care system since 2012 to ensure its sustainability and quality. The reforms were preceded by a public inquiry conducted by the Productivity Commission, an independent research and advisory body of the Australian government focused on economic and social issues. The Commission consulted widely with stakeholders—including older adults and caregivers, aged care providers, government agencies, and other interested parties—before submitting a final report in June 2011.\textsuperscript{141} The report highlights some weaknesses in the system, including
fragmentation in community-based care services, difficulties faced by older adults and caregivers in navigating the care system, and uncertainty about care availability, among others. It also offers a detailed plan for implementing a new policy framework.142

Base on the Commission’s inquiry report, the government’s reforms have focused on increasing home-based care and support, a cost-effective approach that facilitates older adults’ preference to remain at home. As of 2015-2016, residential care accounted for 70 percent of the government’s aged care spending, with the average expenditure per consumer on residential care three times the expenditure on home care (Figure 8). As such, while the government aims to increase the total number of operational institutions for the provision of care from 113 per 1,000 older people (age 70 and over) in 2012 to 125 by 2021-2022, it has also set a target for home care provision to rise from 27 to 45 and for residential care to drop from 86 to 78 per 1,000 older people.143

Central to these reforms is a consumer-centered approach, which enhances older adults’ choices and enables their access to care that best meets their needs. Measures include:

• **Streamlining consumer access to home care and support.** The government launched the Home Care
Package Program in 2013 and the Commonwealth Home Support program in 2015, consolidating a range of care and support services that had been previously provided under different programs. In addition, a national gateway called My Aged Care was launched in 2013 and functions as the main entry point to the aged care system for older adults and their families (Box 3).¹⁴⁴, ¹⁴⁵, ¹⁴⁶

- **Mandating all home care packages to be delivered on a consumer-directed basis.**¹⁴⁷ Starting in July 2015, all care providers are obligated to work in partnership with consumers to design and deliver services that meet their goals and needs. Providers are also required to provide consumers with information that allows them to make informed decisions.

- **Enabling consumers to direct package funding to a provider that they prefer.** Starting from February 2017, the government’s home care package funding is provided to individual consumers; previously, the funding was awarded to approved providers through an allocation process. Consumers are now able to choose their provider and to change if needed.

Between 2015 and 2016, the annual number of consumers of home support and home care increased by 23 percent and 12 percent, respectively, from the pre-reform levels, while the number of consumers of residential care grew by six percent.¹⁴⁸ An evaluation commissioned by the Department of Health in late 2017 found that 85 percent of consumers were satisfied with the services they received.¹⁴⁹

The government released a public discussion paper regarding future reform efforts in July 2017 to solicit public opinions. Based on feedback, it is currently working with an advisory group established by the National Aged Care Alliance (a representative body of national advocacy groups in aged care) to explore options and to determine the next step of the reform.¹⁵⁰

---

**Combating Dementia**

Almost one in ten older adults age 65 and over in Australia is affected by dementia,¹⁵¹ and, as the population ages, dementia is becoming more prevalent. The number of people with dementia per 1,000 is projected to increase by 48 percent from 14.2 in 2017 to 21.1 in 2037.¹⁵² Both the government and NGOs have been active in tackling the dementia challenge, but with different areas of focus.

Australia claims to be the first country in the world to make dementia a health priority, with its 2005 Dementia Initiative.¹⁵³ Under the Initiative, AUD 321 million was allocated over five years to projects targeting prevention, treatment, and care.¹⁵⁴ In 2014, the government budgeted another AUD 200 million (USD 144 million) to boost dementia research capacity. “Dementia has been a priority of the government and there has been significant investment in research. However, one issue with such focus on
research is that there needs to be a shift translating the research into practice,” said Carr, of Dementia Australia.

NGOs are another primary driving force in this area, and the most active player is Dementia Australia. The organization is active in providing direct services to people with dementia and their informal caregivers, and raising social awareness generally. In addition, it plays a leading role in connecting policymakers with local practitioners and advocating for policy change. “The government makes a lot of funding decisions [but without connection to people working on the ground], it would work in a vacuum,” said Carr. As such, executives of Dementia Australia meet with the government regularly to exchange information, share feedback collected through different channels, and discuss policies.

“Dementia has been a priority of the government and there has been significant investment in research. However, one issue with such focus on research is that there needs to be a shift translating the research into practice.”

— KIRSTY CARR, National Policy and Strategy Advisor at Dementia Australia
Endnotes


7 Interview with Kirsty Carr, National Policy and Strategy Advisor at Dementia Australia. June, 2018.


9 Interview with Kathleen Brasher, foundation member of the Strategic Advisory Group for the WHO Global Age-Friendly Cities and Communities Network. June, 2018.


11 Interview with Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne. July, 2018.


18 Interview with Carley Jones, Executive Officer of Playgroup South Australia. January, 2018.

19 These playgroup organizations are typically funded by membership fees, fundraising, and federal and state government grants.


21 Interview with Carley Jones, Executive Officer of Playgroup South Australia. January, 2018.


23 Interview with Carley Jones, Executive Officer of Playgroup South Australia. January, 2018.


28 Interview with Kathleen Brasher, foundation member of the Strategic Advisory Group for the WHO Global Age-Friendly Cities and Communities Network. June, 2018.

29 Local governments can receive up a grant up to AUD 10,000 for AFCC engagement planning, and a grant up to AUD 20,000 for implementing and delivering AFCC projects. (Source: Government of Western Australia Department of Local Government, Sport and Cultural Industries. (2018). Age Friendly Communities. Retrieved from https://www.dlgc.wa.gov.au/CommunityInitiatives/Pages/Age-Friendly-Communities.aspx)


31 It is a peak body representing local government professionals. In 2015, the organization changed its name to Local Government Professionals Australia WA.


34 Interview with the Principal Strategy Officer at the WA State Department of Communities. February, 2018.

35 Melville was the first WA city to join the WHO’s global AFCC network in 2011. The Wheatbelt Development Commission is the economic development agency (a statutory authority of the WA state government) for the Wheatbelt region in WA, known for its agricultural sector.

36 Interview with the Policy Officer at the WA State Department of Communities. February, 2018.

37 Interview with Kathleen Brasher, foundation member of the Strategic Advisory Group for the WHO Global Age-Friendly Cities and Communities Network. June, 2018.

38 Interview with the Policy Officer at the WA State Department of Communities. February, 2018.


49 To qualify for the 60 percent discount, the housing must be provided to low to moderate income tenants, and the rent must be charged at a discount below the private rental market rate. (source: Umbrella Accountants. (2017). CGT Discount increased for affordable housing investors. Retrieved from https://www.umbrellaaccountants.com.au/cgt-increase-discount-affordable-housing-investors/)


Interview with Sekhar Somenahalli, Senior Lecturer of Natural and Built Environments at the University of South Australia. January, 2018.


Interview with Sekhar Somenahalli, Senior Lecturer of Natural and Built Environments at the University of South Australia. January, 2018.


Interview with Sekhar Somenahalli, Senior Lecturer of Natural and Built Environment at University of South Australia. January, 2018.

Interview with Jane Bringolf, Founding Director of Centre for Universal Design Australia. July, 2018.


Interview with Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne. July, 2018.


The high poverty rate is partly related to the high prevalence of taking superannuation funds (occupational pensions) as lump sums rather than annuities at retirement, which can skew the overall income poverty figure to stand out of OECD countries.


81 Interview with Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne. July, 2018.


83 Interview with Kaarin Anstey, Professor of Psychology, University of New South Wales. March, 2018.


91 Interview with Geoff Pearman, Director at Partners in Change. March, 2018.


93 Interview with Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne. July, 2018.


**Ibid**


Interview with Catherine Devlin, operations manager at Adult Learning Australia. August, 2018.

Interview with Peter Gahan, Director of the Centre for Workplace Leadership at the University of Melbourne. July, 2018.


July 2018


123 Ibid


127 The figure includes those that did not have any health care needs or preferences.


131 Stakeholders include state/territory governments, peak bodies, NGOs, clinical experts, health professionals, academics, researchers, industry, consumer representatives and community members (e.g. people with chronic conditions, caregivers, and families). They provided feedback through a series of scoping and national targeted consultation workshops in 2015, and an online public consultation in 2016.


135 Australia has established 31 PHNs across the country since 2015, with the objective of improving coordinated care, as well as efficiency and effectiveness of medical services. PHNs are funded through grants from the Commonwealth government and work directly with primary care providers, health care specialists, and local hospital networks. (Source: Glover, L. (2016). The Australian Health Care System. Retrieved from https://international.commonwealthfund.org/countries/australia/)


ENDNOTES


140 Interview with Kathleen Brasher, foundation member of the Strategic Advisory Group for the WHO Global Age-Friendly Cities and Communities Network. June, 2018.


144 Interview with Michael Costello, General Manager of Innovation and Gateway Services at HealthDirect Australia. March, 2018.


155 Interview with Kirsty Carr, national policy and strategy advisor at Dementia Australia. June, 2018.

156 Ibid.

© 2018. This report was produced by FP Analytics, in collaboration with and underwritten by AARP. FP Analytics is the independent research and analytics arm of The FP Group.