



National Seniors' Submission to the
Tasmanian Budget
2009-2010

October 2008

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About Us

Background

National Seniors Australia is the country's largest seniors' organisation with over 280,000 members (**including over 5,500 in Tasmania**). We are a not-for-profit community organisation that seeks to: provide economic and social benefits for people 50 years and over; represent our members' views to government at all levels; and make donations and provide service and advice to charitable institutions assisting people 50 years and over.

Our members are broadly representative of the three key ageing cohorts: those aged 50-65; 65-75; and 75+. In addressing the needs of this diverse membership, our policy and advocacy agenda encompasses the issues pertinent to these different age cohorts, as well as seniors from diverse socio-economic backgrounds and geographical locations.

Policy

National Seniors Tasmanian State Policy Group (SPG) was established in 2007 and plays a key role in identifying emerging issues and trends in Tasmania. The SPG also acts as a conduit between National Seniors members in the State, relevant community organisations, and the Tasmanian Government.

National Seniors National Policy Office (NPO), based in Canberra, facilitates the implementation of National Seniors' policy agenda and advocates on behalf of members to government at all levels, to business and to the broader community.

The work of the NPO is further enhanced by National Seniors comprehensive grassroots process, which enables members to contribute to policy development and debate through local branches, regional zone committees, and state, territory and national policy groups. The NPO receives funding from the Commonwealth Department of Health and Ageing under the Community Sector Support Scheme (CSSS). This assists the NPO to:

- grow the operational capacity of the NPO;
- expand communications with the seniors' community; and
- increase engagement opportunities for disadvantaged seniors; and
- act as a conduit for information flow between government and the community in order to draw together seniors' views on issues of relevance and provide a consultative mechanism for the government.

Research

National Seniors Productive Ageing Centre (NSPAC) was established to advance knowledge and understanding into all aspects of productive ageing to improve the quality of life of people aged 50 and over. The NSPAC, also based in Canberra, is co-funded by National Seniors and the Commonwealth Department of Health and Ageing.

Key objectives of NSPAC, are to: initiate, develop and support innovative and high quality research on issues that impact the ability of seniors to contribute productively to the economy and society; inform Government and community on productive ageing matters; and raise awareness of research findings which would be of use to individuals.

Demographic Snapshot

Australia-wide

Over the next 50 years, the ageing of Australia's population will present major challenges and opportunities to government in terms of both social and economic policy decisions. The population aged 50+ will increase from around 30% of the total population today to over 40% in 2050. (ABS 2008).

The growth in the population aged 75+ will be even more marked, and will have a greater impact on demand for essential services such as health and aged care. The proportion of the population aged 75+ will increase from around 6% today to over 12% in 2050 (ABS 2008).

Tasmania

Tasmania currently has the oldest population with a median age of 39.1 years. Additionally, Tasmania also experiences the lowest population growth of all states and territories with a birth rate of only 0.6% (Australian Average 1.5%) (ABS 2008). This low growth in population as well as the affects of population loss due to interstate migration will result in a projected median age of 44 years by 2050.

Figure 1 – State and Territory comparison of median ages at 30 June 2007

TAS	SA	NSW	VIC	WA	QLD	ACT	NT
39.1	38.9	36.9	36.9	36.4	36.2	34.5	31.1

Note: based on ABS 3201.0 – Population by Age and Sex

Population aged 50+

The proportion of older Tasmanians is increasing steadily. By 2020, Tasmania is projected to have the highest proportional population of those aged over 50 and 75 years. Nationally 35% of the population will be aged 50 years or older, however in Tasmania, this proportion will be 40%, higher than any other state or territory.

Over the next four decades, the growth rate of those aged 85 years and over is projected to be greater than for any other age cohort, due in part to the baby boomer generation reaching this age from 2031 (Demographic Change Advisory Council 2007).

Figure 2 – Projected proportion of population aged 50+ and 70+ in 2020

Age	AUS	TAS	SA	NSW	VIC	WA	QLD	ACT	NT
50+	35%	40%	38%	35%	35%	34%	38%	31%	24%
75+	7%	9%	9%	8%	8%	7%	9%	6%	2%

Note: based on ABS 3201.0 – Population by Age and Sex

Future Challenges & Opportunities

Demographic change and ageing of Tasmania's population will present a number of challenges for government, business and the community, as demand for essential services including health and care services will increase accordingly. Decisions made now will greatly impact on the State's ability to adapt to demographic change in the future.

The Tasmanian Government must also recognize the impacts an ageing population presents to both the economy and social structure of Tasmania. Unless government policies change, population ageing will continue to contribute to budgetary pressure in the coming decades, with potentially even lower levels of labour force participation

and productivity combined with higher levels of expenditure on essential health and community services.

Executive Summary

National Seniors welcomes this opportunity to highlight some of the pertinent issues identified in collaboration with the Tasmanian Policy Group. National Seniors has identified five key priorities which are considered to be feasible, and are likely to impact positively on the lives of senior Tasmanians.

Accordingly, on behalf of our **5,500 members in Tasmania** National Seniors is seeking assurances that all priorities contained within this document will be given sufficient consideration in the development of the 2009/2010 Tasmanian State Budget. We will be advising our members of the outcomes of the 2009/2010 Budget and how adequately it addresses our priorities.

1/ Stamp Duty Exemptions

The Tasmanian Government currently provides stamp duty exemptions for First Home Buyers, no such concession exists for senior Tasmanians wishing to downsize their homes. Eventually, many older Australians will move out of their family home in order to live in smaller and more manageable housing. Full exemptions on stamp duty are available to Pensioners wishing to downsize their homes to a median priced unit or house in Victoria and the ACT to the value of \$371, 000 an \$412,000 respectively (State Revenue Office). With Hobart the only capital city to have experienced a significant growth in the cost of unit prices in the last quarter, it is becoming increasingly difficult for seniors especially those on fixed incomes, to downsize their homes.

Area for Action

Provide Pensioner Concession Card (PCC) holders with an exemption from stamp duty when downsizing their homes (up to the value of a median-priced house or unit).

2/ Access and affordability of Oral Health

Recent research suggests that poor oral health is associated with low socio-economic status, living in rural or remote areas and being from an older generation (AIHW 2008). All of these factors associated with poor oral health are significant for Tasmania where 26% of the population depends on government pensions as a primary source of income, and where 35% of the population lives in regional or remote areas. Although free emergency treatment and subsidized general treatments are available for pensioner concession card holders under the Adult Dental Service, the demand for these services often far outweighs the supply. With nearly 10,000 people on the Oral Health Services waiting list and with the lowest rates of practicing dentists in the country, Tasmanians experience considerable delay in receiving public dental treatment.

Area for Action

Take action to address the inaccessibility of dental services by targeting the current shortage of practising dentists.

3/ Problem Gambling

Although for many, gambling presents a relatively harmless recreational activity; approximately 2000 Tasmanians suffer adverse social and economic consequences as a result of problem gambling almost entirely through the use of Electronic Gaming Machines (EGMs). Problem gambling causes significant strain on individuals, families and communities. Of these 'problem gamblers', 41% identify as being aged 50 years or older, a greater proportion than any other age bracket (South Australian Centre for Economic Studies 2008). Although the Tasmanian Gaming Commission exists as an independent body responsible for the regulation of gaming in Tasmania, when compared to similar bodies in other states it does little to promote a socially responsible and accountable gaming industry.

Area for Action

Establish a Responsible Gambling Ministerial Advisory Council reporting directly to the Minister responsible for Gaming, comprising representatives from government, gaming and the community to be responsible for ensuring accountable gaming in the community.

4/ Mature-Age Employment

A tight labour market and the ageing of the population will have adverse consequences for government and business unless they adapt. Tasmania, with the highest proportion of over 50s and a low birth rate will be at a considerable disadvantage unless immediate action is taken to improve the retention of mature-age workers. By supporting mature-age Tasmanians who wish to continue working, positive outcomes can be achieved for both government and business. Business will benefit from the skills, experience and loyalty of older workers and government will benefit from the increases in productivity as well as reduced expenditure on concessions and benefits for retirees.

Area for Action

Encourage business to recognise the contribution mature-age workers make to the workforce and productivity of Tasmania; provide mature-age jobseekers with career information and support; and ensure mature-age workers have access to ongoing training and education.

5/ Qualified Paramedics in rural/regional Tasmania

Population ageing, reduced access to general practitioners and population dispersion to rural and remote areas, have a significant impact on the efficiency of ambulance services. Additionally, rural and remote areas (where adequate medical facilities may be limited) also demand skilled and well trained ambulance personnel. After the Northern Territory, Tasmania has the largest proportion of its population living in regional and remote areas and there is a considerable need for sufficiently qualified (intensive care) paramedics, to work in such areas.

Area for Action

Take immediate action to ensure that progress is made toward reaching Tasmania Together target 4.4.6; improving numbers of qualified ambulance paramedics in rural and regional areas to 100 officers by 2010.

1/ Stamp duty for seniors downsizing

Area for Action

Provide Pensioner Concession Card (PCC) holders with an exemption from stamp duty when downsizing their homes (up to the value of a median-priced house or unit).

What are the issues?

As they age, many older Australians will move out of their family home in order to live in smaller more manageable accommodation. The reasons are many and varied, including proximity to amenities and medical services, family or friends as well as the need for more suitable low maintenance housing in light of their changing physical ability. Downsizing allows senior Tasmanians to enjoy a reasonable lifestyle and standard of living as they age as well as allowing them opportunities to continue to contribute to their communities. For many older Australians, while their homes may be reasonably valuable, they have relatively low incomes, and compared to other age cohorts they are seen as being 'asset rich but income poor'. Downsizing allows seniors to free up some of this property wealth, allowing them to top-up their low fixed incomes and provide themselves with the financial security to meet any unexpected one-off costs.

With Hobart the only capital city to have experienced a significant growth in the cost of unit prices in the June 2008 quarter (APM 2008), it is becoming increasingly difficult for seniors to downsize their homes. Exemptions from stamp duty represent a significant cost relief to seniors.

How does Tasmania compare?

When compared across states and territories, the current rate of stamp duty in Tasmania for typical households is reasonable; however, stamp duty continues to act as a considerable disincentive for seniors wishing to downsize their homes. A senior who is downsizing to a median value unit in Hobart (\$260,000) would currently pay over \$6,300 in stamp duty. (see below) This represents, along with estate agent fees, a significant proportion of the intended savings.

Figure 3 Comparison of stamp duty payable by a pensioner purchasing a median value unit:

SYD	PER	ADE	DAR	HOB	BRI	CAN	MEL
\$11,825	\$11,115	\$9,668	\$9,200	\$6,305	\$3,240	\$20	\$0

What has been done in other States and Territories?

In the ACT and Victoria age pensioners are provided with full exemption from duty for home purchases up to the value of \$412,000 and \$371,000 respectively. In the ACT this initiative was costed by the ACT Government at \$5 million a year.

Is it affordable?

In 2007-2008 the Tasmanian Government raised an actual \$225 million in stamp duty on property conveyances, nearly \$70 million greater than the estimated forecast for that financial year. This value represents an increase of over 215% on revenue from stamp duty since 2000-2001 Tasmania is in a reasonable position to be able to afford stamp duty exemptions for pensioners; the 2008-2009 Budget provided a net operating surplus of more than \$105million. This surplus is predicted to increase across the out-years to 2011-12.

2/ Access and Affordability of Oral Health

Area for Action

Take action to address the inaccessibility of dental services in particular by targeting the current shortage of practising dentists and recognise the relationship between poor oral health and the onset of complex medical conditions.

What are the issues?

The state of one's teeth can be an obvious sign of disadvantage and can have debilitating impacts on every day life including work, relationships and overall general health. Today, tooth decay and gum disease represent the most common health conditions in Australia (Australian Health Ministers Advisory Council 2001). Over 38% of Australians experience untreated dental decay and caries is currently Australia's most prevalent health problem (AIHW 2007). Older people, an increasing demographic – are retaining more of their natural teeth for longer which bring with it substantial increase in the risk of tooth decay.

Although public dental services are available, the waiting times for these services can be years, by which time decay is often so entrenched that the removal of affected teeth is necessary (PHAA). Oral health care services are also expensive: a standard consultation costs around \$100 (compared to about \$60 for a standard GP consultation), and more complicated procedures can be as high as \$500 (AIHW 2007).

How does Tasmania compare?

Poor oral health is associated with low socio-economic status, living in rural or remote areas and being from an older generation (AIHW 2008), all of which are significant for Tasmania where 26% of the population depends on government pensions as a primary source of income, and where 35% of the population lives in regional or remote areas (ABS 2008). More than 13% of Tasmanian adults over the age of 55 experience untreated tooth decay, which compares unfavorably against the national average of 12% additionally, more Tasmanians (24%) over the age of 55 experience difficulty paying a dental bill than the national average (16%) (AIHW 2004-2006).

The Adult Dental Services Clinics provide free emergency treatment and subsidized general treatment for pensioners. However, demand for these services often far outweighs supply. With nearly 10,000 people on the Oral Health Services waiting list and with the lowest rates of practicing dentists in the country, Tasmanians experience considerable delay in receiving public dental treatment.

Figure 4 Comparison of numbers of practising dentists per 100 000 population (2005)

ACT	SA	NSW	WA	AUS	QLD	VIC	NT	TAS
75.4	54.3	50.1	49.7	49.5	47.9	46.7	36.3	31.2

(Source: AIHW 2008)

What has been done in other States and Territories?

State and territory funded programs, such as Tasmania's *Better Dental Care Package* have been uneven, and have failed to fill the gap left by the abolition of the *Commonwealth Dental Health Program* in 1996. The re-establishment of the *Commonwealth Dental Health Program*, which will provide only \$10 million over three years to Tasmania, is unlikely to be sufficient.

Is it affordable?

Poor oral health is known to contribute to the onset of other medical conditions including, pneumonia, pancreatic cancer and heart disease and compromises the wellbeing of patients with chronic conditions. Promoting good oral health, and increasing the number of available dentists will achieve numerous benefits to the State's health economy.

3/ Problem Gambling

Area for Action

Establish a Responsible Gambling Ministerial Advisory Council reporting directly to the Minister responsible for Gaming, comprising representatives from government, gaming and the community to be responsible for ensuring accountable gaming in the community.

What are the issues

Recent ABS data reveals that expenditure on gambling exceeded \$15 billion during 2004-2005, with Electronic Gaming Machines (EGMs) accounting for more than half the total revenue (ABS 2006). Although for many, gambling presents a relatively harmless recreational activity, approximately 2000 Tasmanians suffer adverse social and economic consequences as a result of problem gambling. Of these 'problem gamblers', 41% identify as being aged 50 years or older, a greater proportion than any other age bracket (South Australian Centre for Economic Studies 2008).

Age related circumstances such as loss of a partner, disability, long term unemployment and low annual income are a key factor in the higher levels of motivation toward playing EGMs amongst older people (Southwell, Boreham & Laffan 2008). Providing communities, especially regional communities, with alternative forms of entertainment as well as greater workplace or life long educational opportunities are one way of preventing the onset of feelings of isolation which may lead to problem gambling amongst the elderly.

How does Tasmania compare?

Since the 1970s total gambling expenditure has increased 133% from \$123 million to \$287million in 2006-2007. Although Tasmania experiences lower than the national average annual expenditure on gambling at \$774 per adult this figure is largely due to the lower than average incomes in the State, rather than the inaccessibility of gaming. Presently, Tasmania is not making progress to reduce problem gambling by 2020 in line with the Tasmania *Together* target and in fact rates of problem gambling have actually increased since 2000.

Several harm minimization strategies have been introduced in Tasmania to reduce problem gambling in the State, including;

- Banning of ATMs in gaming venues (excluding casinos),
- Limits on maximum bets
- Banning of 24 hour operating venues.

The Tasmanian Gaming Commission, comprising of just three members, exists as an independent body responsible for the regulation of gaming in Tasmania. However, when this regulatory body is compared to similar bodies in other states it does little to promote a socially responsible and accountable gaming industry. Tasmania remains the only jurisdiction, where the gaming industry regulator is not obligated to foster responsible gambling or to minimize problem gambling in the community.

Figure 5 Net takings from gambling by State/Territory in \$m

NSW	VIC	QLD	SA	WA	TAS	ACT	NT
6195.0	4383.2	2549.7	868.3	746.6	302.4	235.2	179.2

Source – ABS Gambling Services Cat – 8684.0

What has been done in other States and Territories?

In 2006, the Victorian Government implemented the most extensive gaming reforms of any State which saw Victoria's rate of problem gambling drop from 2.1% in 1999 to 1.1% in 2004. Additionally, the Victorian Government established a Responsible Gambling Ministerial Advisory Council of eighteen members to advise the Government on responsible gambling initiatives. A similar advisory body involving members from the community, government and gaming representatives has also been established in Queensland.

Is it affordable?

In the 2008-2009 State Budget, the Tasmanian Government collected \$92 million in taxes from gambling, of which \$55 million, came exclusively from gaming machines. The *Social and Economic Impact Study into Gambling in Tasmania 2008* revealed there is no evidence that the expansion of gaming has contributed positively to the economic growth of Tasmania, and consumer surplus from derived from gambling enjoyment is largely off-set by the excess losses experienced by problem gamblers.

4/ Mature-Age Employment

Area for Action

Encourage business to recognise the contribution mature-age workers make to the workforce and productivity of Tasmania; provide mature-age jobseekers with career information and support; and ensure mature-age workers have access to ongoing training and education.

What are the issues?

Employment opportunities allow older Tasmanians to enjoy a reasonable standard of living and retirement. Long-term unemployment can lead to poverty, stress and impact negatively on relationships. Demographic change, in particular ageing, has the potential to constrain the economic growth and productivity of the State. As Tasmania has the highest proportion of mature-age persons, Tasmania needs to be at the forefront of the mature age employment debate.

Although the unemployment rate for people aged 45-64 is relatively low, once unemployed, older Tasmanians are likely to experience long periods of unemployment, or be forced into early retirement (OSSC 2001). A growing trend of the modern labour market is the recruitment of younger workers. According to the ABS (2004), half of all discouraged jobseekers felt they were considered too old by potential employers. Given the current economic climate mature-age workers may need to continue working in order to make up for losses in savings.

How does Tasmania compare?

Tasmania's labor force participation rate equal lowest with South Australia (ABS 2008). ABS data suggests that Tasmania also has the highest rates of long term unemployment (ABS 2008). In 2001 the Government considered the issue of mature age employment in the paper *Employment Issues Facing Mature Age Workers and Jobseekers in Tasmania (2001)*. A key finding from this report was that negative employer attitudes were the greatest barrier to finding work. Today, there continues to be a need to address entrenched stereotypes about mature age workers which sustain workplace discrimination.

Figure 6 Comparison of participation rates and underutilisation rates across

	TAS	SA	NSW	VIC	AUS	QLD	WA	NT	ACT
Participation rates (Aug 08)	62.3 %	62.3 %	62.4 %	63.9 %	64.9 %	67.0 %	68.8 %	71.7 %	73.1 %
Underutilisati on rates (Sept 07)	1.2%	0.8%	0.7%	0.7%	0.7%	0.5%	0.4%	0.4%	0.2%

(Source: ABS 2008)

What has been done in other States and Territories?

Grandparenting leave for mature-age workers has been introduced in the ACT public service where 52 weeks of unpaid leave is available over 3 years. The arrangements allow for a smoother transition to retirement.

Is it affordable?

Unemployment and in particular long-term unemployment remains a major cause of poverty in Australia. Supporting mature-age workers who wish to continue working, achieves positive outcomes for both government and business. Business will benefit

from the skills and experience of older workers and government will benefit from reduced expenditure on concessions for retirees and increased productivity.

5/ Qualified Paramedics in rural/regional Tasmania

Area for Action

Take immediate action to ensure that progress is made toward reaching Tasmania Together target 4.4.6; increase the number of qualified ambulance paramedics in rural and regional areas to 100 officers by 2010.

What are the issues?

Population ageing, reduced access to general practitioners and population dispersion to rural and remote areas have a significant bearing on the efficiency of ambulance services. Additionally, rural and remote areas (where medical facilities may be limited) also demand well trained ambulance personnel. After the Northern Territory, Tasmania has the largest proportion of its population living in regional and remote areas, which makes the provision of ambulance services difficult.

Currently, Tasmania is not making progress toward reaching the Tasmania Together target 4.4.6; to *increase the number of qualified ambulance officers to 100 personnel in regional and rural areas by 2010*. Failing to reach this target, causes great concern to the ageing demographic, who live in regional areas where they are well connected to their communities, but who are especially vulnerable to sudden changes in health and wellbeing.

How does the Tasmania compare?

Tasmania is in the unique position of having a heavy reliance on volunteers to provide ambulance services especially in rural and remote areas. There are over 500 volunteer officers in Tasmania (Volunteer Ambulance Officers Association of Tasmania 2000). Currently TAS operates 25 units that are entirely staffed by volunteer officers. However, due to their isolation it is imperative that volunteer officers in rural areas, are provided with sufficiently qualified intensive care paramedic officers to support them in times of emergency.

A key measure of the effectiveness of ambulance services is their resuscitation success rates for out-of-hospital cardiac arrests. Unfortunately, TAS is not obligated to keep a record of the resuscitation rates for out-of-hospital cardiac arrests, so there is no real means to evaluate the effectiveness of the service comparatively. However, considering the poor response times in Tasmania, as shown in figure -8, this figure is likely to be poor.

Figure 7 Comparison of survival rates from out-of-hospital cardiac arrests (2004-2005)

SA	VIC	ACT	QLD	NSW	WA	TAS	NT
35.4%	31.3%	23.8%	23.8%	22.1% ¹	14.3%	No data	No data

Figure 8 Comparison of Ambulance Performance Data, response times in minutes

ACT	QLD	VIC	WA	AUS	SA	NT	NSW	TAS
7.5	8.0	9.0	9.1	9.3	9.4	9.5	9.8	10.1

Figures 7 and 8 source: Convention of Ambulance Authorities 2004-2005)

What has been done in other States and Territories?

Ambulance officers in NSW, undergoing certification have recently been assisted with the introduction of a systemic monitoring system which provides guidance and support to officers throughout training, allowing greater monitoring of officers as they improve their skills. In 2004, the NSW ambulance service also commenced an upgrade of the baseline skill set for qualified personnel, improving on techniques for emergency pain management and airway management.

Is it Affordable?

The volunteer ambulance units save the Tasmanian Government an estimated \$6 million a year (VAOAT 2000). However, providing qualified intensive care paramedics to areas with a heavy reliance on volunteers could minimize unnecessary hospital admissions and result in improvements to Tasmania's out-of-hospital cardiac arrest survival rates, thereby improving the health economy beyond the fiscal savings.

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