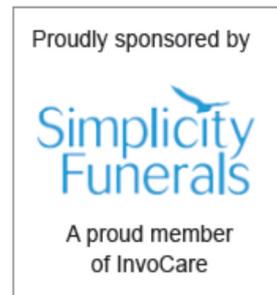




*Older People Speak Out*  
Promoting the value of older people

# LIFE TIMES



Issue 43, June 2015

## Suicide Prevention amongst the elderly

OPSO has been horrified by some recent statistics on suicide by older people. There has always been an increase in suicide rates as people age. What we were not prepared for is that this year suicides among older people in Queensland are running at a rate well in excess of one a day. Of these, about 75% are males.

Why is this? What are the causes? Unfortunately no one really knows.

There has always been speculation about why older people might take their own lives, but rates are now increasing much faster than can be explained away by population growth or the ageing of the population. This significant change highlights the urgent need for research to establish the causes and why males are so much more at risk than females. When

the causes are known, remedial action can be taken. But research currently is focussed almost entirely on youth suicide and its prevention, and while no one would argue that this is not important, it is also increasingly obvious that we need to know why the other end of the age spectrum is also at risk.

Failure to act now and re-focus research to include suicide prevention amongst the elderly could be construed as ageism if not a form of elder abuse. OPSO is calling on the media and members of the public to draw attention to this growing social evil. We want consideration of the older and more vulnerable members of our society as well as those with their lives in front of them.

Tony Townsend

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# AS I SEE IT

By Maida Lilley

## Finding The Way To Consumer Directed Care (Cdc) - A Personal Journey

On the 1<sup>st</sup> of July this year, the Federal Government is to finally launch the often discussed Consumer Directed Care Services (CDC) for 65 year old Australians who are in need of care in order to remain independent. This involves providing assistance for us to 'age in place' in our own homes. Seniors' groups have been encouraged by this prospect – to remain in our own home and in our *own community* with access to all that entails for the continuation of the life we have built. Hopefully, with appropriate or adapted housing, which we are helped to maintain at reasonable cost by Home Assist Secure's own staffs' invaluable service or from its list of recommended professionals who are known to charge manageable fees along with guaranteed results, if the job is beyond their own staff or facilities.

My own story is one example that has worked well up to now.

In my mid-fifties I moved to a ground floor unit from an 1860 three level home with attic when I needed a total knee replacement. I had been injured in an earlier car accident caused by a speeding young driver who ignored stop signs in his large powerful car. In the 1980's total knee replacements were stainless steel and my specialist had warned, 'if it doesn't work, you will be in a wheelchair.' So, a move made sense.

I found a 1970's two bedroom unit, close to hospitals and shops and with a bus stop right outside. Necessity turned out well for me as the unit I purchased is sufficiently roomy for me to have welcomed my family to stay, including grandchildren when they were young. I settled in and hoped to be set for the rest of my life.

For five years after that, I continued to work in education until I was 'urged' to accept redundancy and told, "you could have gone at 55 years!" I was already chairing the body corporate for my building and soon threw myself into volunteering in my near city community, which was undergoing urban renewal. Soon I was given the opportunity to attend the then National Seniors Association's first ever congress held at New Parliament House in Canberra. This led to my becoming a consumer representative on local, state and federal advisory and liaison committees and even research projects on health, housing and transport as they affected seniors. Life was good.

After a decade, my amazing old-time, home visiting GP who had pulled me through a slipped disc, two bouts of pneumonia and various procedures and surgeries, gave me a letter to a local HOME CARE SERVICE who quickly arranged home help for me. This was provided and funded partly by the Federal Government Home and Community Care (HACC) which is to be disbanded by June 30<sup>th</sup> to make way for CDC. Those of us living alone and currently in receipt of home help and sometimes shopping and even transport to doctors' appointments etc have paid a reasonable co-payment set after discussion with our co-ordinator according to the number and type of service provided.

This service arrangement is termed HOME CARE PACKAGE and is expected to continue as it is with the co-payment to be by direct debit from one's bank.

The next step as one ages, and doesn't have the stamina or ability to do necessary home

tasks and so needs further assistance, is for ones GP to arrange for an ACAT (Aged Care Assessment Team) meeting with a suitably qualified team who classify clients into four categories according to their specific needs. This leads to CDC being set up and the Federal Government – as soon as places become available – moves in with funding set for each level, according to whether the over 65 year olds financial status is as an age pensioner, part pensioner or self-funded retiree.

As an example, level one is to be set up as follows:

#### Cost of Current CDC for Level One

- Full pensioner pays 17.5% of basic age pension  
\$776.70 per fortnight = \$136 per fortnight or \$68 per week
- The Federal Government allots \$7,000 towards this CDC

- Part Pensioner pays as above plus up to \$5,000 per year
- Self-funded retiree pays as in 1 above plus up to \$10,000 per year

The other three conditions and federal funding conditions can be provided by your family doctor or service provider with funds through Centrelink. When you reach level 4 that means one moves into residential aged care (formerly a nursing home). Should such critical need arise, we hope well run Aged Care Facilities exist in our own community in our home town, or at least in their district for country people. Choice in life is desirable at every stage but especially so in old age if one becomes frail.

It is to be expected that when CDC 'settles in', our ageing population will be receiving the care they need and certainly deserve in their final years of life as Australian citizens who helped to build our so called 'lucky country.'

**Age only matters when one is ageing. Now that I have arrived at a great age, I might just as well be twenty. -- Pablo Picasso**





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## Old Bird's Eye View of the World – on the self at 100 to 1

This photo – one of my all-time favourites – is of my beloved aunt who was 100 at the time, exchanging glances with my darling one year old granddaughter. And knowing my now nearly 102-year-old Holocaust survivor aunt very well, I'm pretty sure that she would agree with the feelings expressed by Ruth Frith, on the subject of being a centenarian.

At the age of 102, in 2012, Frith (the world's oldest competing athlete at that time) had this to say about identity: "Each year is just another year, and honestly I would say to anyone who is in their nineties that when you reach 100 you're not going to feel any different to when you were 70.



People think because you're 100 you're a different person; you're a different breed of people. Well, we're not! We're just the same; we're just 100!"

She was making the case for centenarians, but her words of wisdom have a much wider span

than that. To me, what she is saying is not about retaining a youthful perspective, but about remaining one's self, at whatever age.

London-based Czechoslovakian, Alice Herz Sommer earned the sobriquet of 'The oldest Jewish Holocaust survivor in the world,' before dying at the age of 110 in 2014.

Her reflections on being her age were of a more general nature. "My life," she said, "has been marked by its highs and lows like other people but to have a life

that is longer than most people's is, I feel, both a test and a gift.

Becoming old is a difficult business but in my heart I am happier today than when I was young. Young people expect great things from life. As an old

person one is very often aware, however, of what is worthwhile and what one can do without. 'Humour is the path to good sense. It helps you understand the nonsense of the past with a smile on your face, and that liberates you,' wrote my brother-in-law, the philosopher Felix

Weltsch, about the humour of his close friend Franz Kafka. 'It is an antibiotic against hatred.'

“‘It’s not so bad!’ a journalist described her as saying ‘in her most dramatic way about her advanced age. “When people come to visit, people much younger than myself, many like to tell me how bad things are, their money problems, their aches and pains. And worst of all they tell me how terrible old age is. ‘It’s so terrible, so terrible.’ And I shock them by disagreeing. ‘It’s not so terrible. And I’m older than you. Rather than dwell on problems, why not look for life’s gifts?’ Every day is a present. Beautiful.”

‘She says that just because she is old in years, she is not irrelevant. And more insistently Alice says, “My mind is young. My emotions and my imagination still young... Of course, I do have some experience.”’

‘Asked what she had learned in her long life, she would reply: “To know the difference between what is important and what is not important.” Her optimism was tempered by only one thing: “I am an optimist in all things except one. People don’t learn, they don’t learn.”

Overall, then, she was both a realist and a perfect model for the outcome of Australian

research into centenarians, conducted by Professor Robyn Richmond. What she reported in 2010 was that older people, of 100 years of age or over, have continued to live full, alert and vigorous lives as centenarians, being ‘optimistic and worry-free’ despite having survived – as she put it – “life stress, loved ones who have died, awful wars, famine and the Great Depression.” Moreover, she concluded from her study that ‘it is personality and lifestyle more than genetic make-up which prolongs life’; and that key factors in longevity were ‘a happy and optimistic outlook, strong family and social connections and maintaining a healthy weight... And although many of us might imagine 100 year-olds as frail and bed-ridden, our oldest citizens are in fact active, fit and mentally alert, having avoided major illnesses, and are often still living independently.’

She did find that about half of those aged 100 or over did live in nursing homes. But in her view, ‘more home-based services would allow a larger number of centenarians to remain in their homes.’

I’m sure that my dear aunt would have benefitted from that. But her personality has indeed remained untarnished and she continues to be a spirited

survivor who takes delight in being with her family, and especially the youngest ones. She is a guiding light for all of us, and shows that it's 100 to one that my happy little

*Anne Ring © 2015*

granddaughter can look forward to being herself through a long life continuously enriched and strengthened by developing knowledge through her experiences.

It is not the critic who counts not the man that points out how the strong man stumbled or where the door of deeds could have done them better

The credit belongs to the man who is actually in the arena

Whose face is marred by dust and sweat

And blood; who strives valiantly; who errs

And comes short again and again because

There is no effort without error and shortcomings, who does actually do the deeds, who knows the great enthusiasm,

The great devotion and spends himself in

A worthy cause; who at the worst,

If he fails .....

At least fails while doing greatly

.....

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But encouragement does more

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