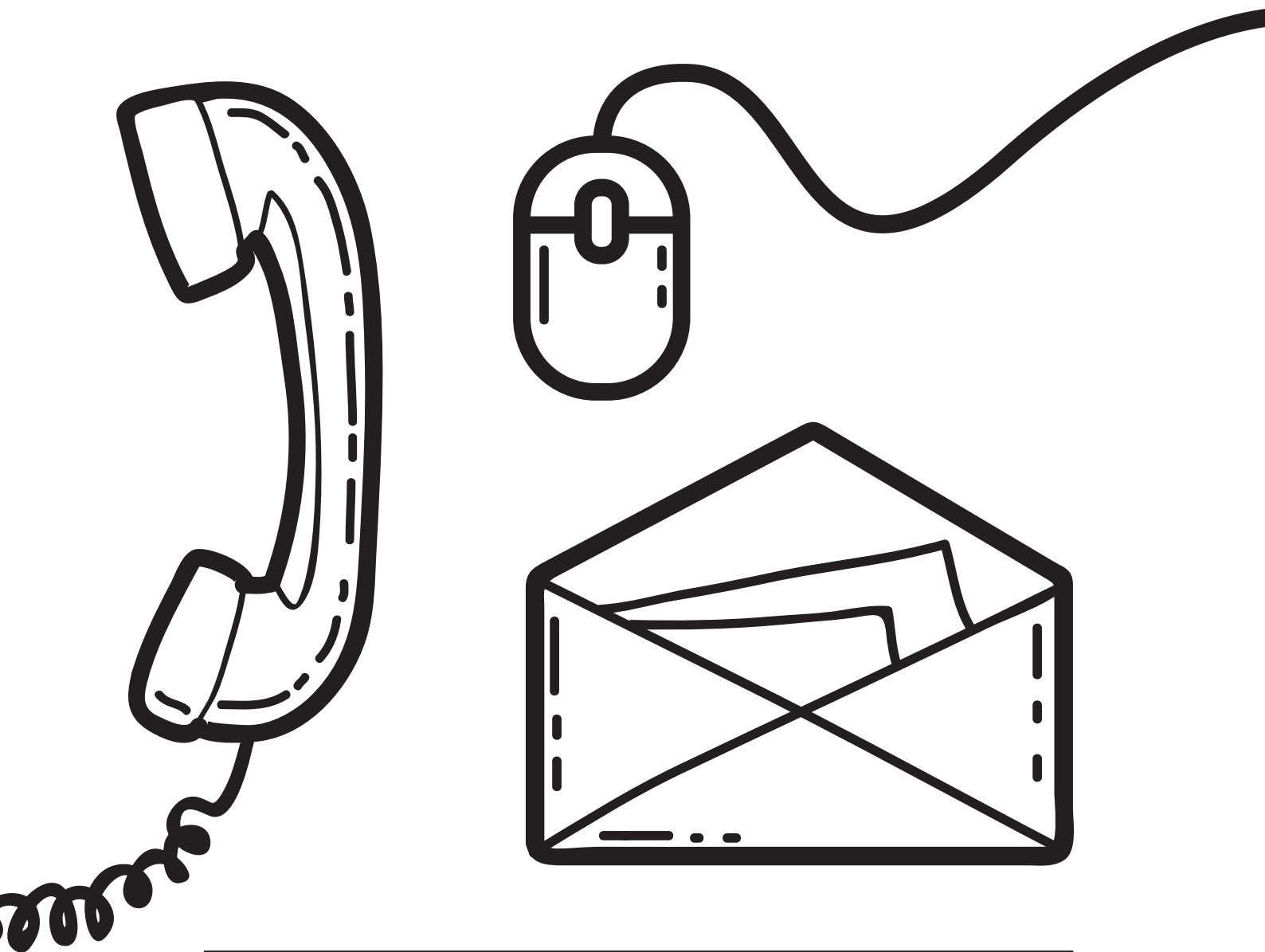


FINDING OUT

*Supporting older people to
access the right information
at the right time*



This initiative is part of the
*Tasmanian Government's
Inclusive Ageing: Tasmania
2012-2014 Strategy* and is
supported by COTA Tas.

COTA
For older Australians




Tasmanian
Government

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Foreword

Today we are in the midst of exponential availability of information, in the world of digital economies, online social networks and the transfer of large amounts of data every day through digital networks across the world.

However, for certain sections of society, this technological environment coupled with other issues actually creates problems and barriers to accessing information. This has been identified as an area of concern in previous consultations with older people, and for this reason the *Finding out: accessing the right information at the right time* research project was one of a suite of projects in the Tasmanian Government's *Inclusive Ageing: Tasmania 2012-2014 Strategy*.

The *Finding out* research looked at insights and experiences of older Tasmanians to identify issues around accessing the right information at the right time.

COTA Tasmania received funding from the Tasmanian Government to support the implementation of this project and a working group comprising government and non-government members with expertise specific to the project provided ongoing direction and advice.

Access to information is an important human rights principle in today's society. The Hon Susan Ryan AO, Age Discrimination Commissioner, in a publication produced by the Australian Human Rights Commission called *Your Rights at Retirement* writes:

Retirement is definitely a time for careful planning and for being well informed about what is available. For many people it is hard to know where to start ... There is income support, health and aged care, senior's cards, financial planning, superannuation, housing and rent assistance to name a few...

Australia is lucky to have so many services and supports for older people. These help us to realise our human right to respect and dignity as we age.¹

Her comments leave us in no doubt that when older people are denied access to information, they are denied the ability to achieve their human right to respect and dignity. Access to information has also been identified as an important consideration in the World Health Organization's *Guide to Age-Friendly Cities* and this reflects some of the themes COTA explores in this research.

However, rising economic costs of doing business in contemporary society mean more reliance on online access to information and automated telecommunications, rather than face-to-face interaction. This is leading to increasing levels of frustration and isolation of people who would in preference deal directly in person with people who know about their issues.

1 *Your Rights at Retirement* p.iii

Whilst there is some acknowledgement in the wider community of the *types of* information older people may be looking to access, it is clear that the *means* of delivery of information is far from ideal for a number of older people, for a variety of reasons.

Freedom of access to information in Tasmania today is not equal. This inequity must be addressed if we are to be a fair and just society. Our research shows that some older people are feeling disenfranchised, and yet they should be feeling empowered in a world where information should be more freely available.

COTA acknowledges that as the Australian population undergoes a period of demographic change and structural ageing, 'Baby Boomers', who have been more exposed to accessing information through digital means, will produce a reduction in some of the issues facing older people currently. However, knowledge is power in today's world, and if we limit access to information to only certain privileged sections of our society we are creating a power imbalance.

This report explores these and other challenges, but also looks at some potential solutions. Our research suggests that it is possible to accommodate the different needs of particular groups of people, such as those over 60 years old who were consulted as part of the *Finding out* project.

COTA acknowledges the support of the older people in Tasmania who participated in this research and this report is a means of making their voices heard. Although there is frustration, there is also optimism that by adopting some simple solutions life will be made significantly easier – older people will be better informed and more socially connected.

COTA urges governments, politicians and policy makers, service providers, businesses, the media, and the general community to consider what people have told us through this research, and to look at better ways to engage with older people, and to create a more equitable Tasmania.

Sue Leitch
CEO, COTA Tas

“

Our research shows that some older people are feeling disenfranchised, and yet they should be feeling empowered in a world where information should be more freely available.

”



Acknowledgements

The Council on the Ageing (COTA) Tasmania firstly thanks all those who contributed to this report. *Finding out: Supporting older people to access the right information at the right time* contains a wealth of data and insights from Tasmanians, aged 60 years and over, who shared their experiences.

COTA acknowledges and appreciates the funding received from the Tasmanian Government to research and develop this report.

COTA acknowledges and appreciates the contribution of the *Finding out* Project Working Group (membership listed in Appendix E).

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Mr Phillip Patman was contracted as a demographic data expert to assist COTA with statistical analysis. Phillip provided assistance with the creation of graphs and tables, and with interpreting the statistical validity of the data. His work is also acknowledged and appreciated.

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Finally, the significant contribution made by numerous COTA Tas volunteers who entered the postal survey data electronically is also gratefully acknowledged.



Graphic design by



Executive Summary

Accessing information has been identified as an area of concern in previous consultations with older people, and for this reason the *Finding out: accessing the right information at the right time* project was identified as an essential part of the Tasmanian Government's *Inclusive Ageing: Tasmania 2012-2014 Strategy*. This research looks at insights and experiences of older Tasmanians to identify issues around accessing the right information at the right time.

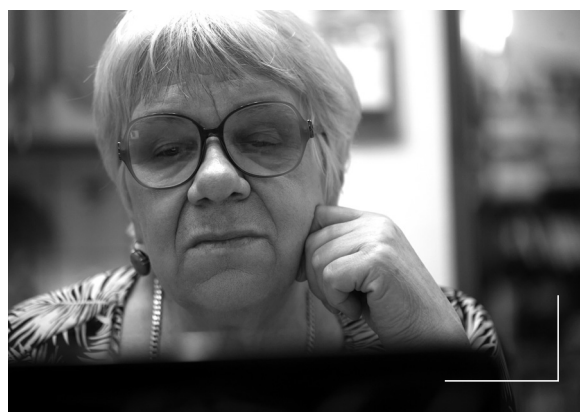
The key objective of the *Inclusive Ageing: Tasmania 2012-2014 Strategy, Finding out: accessing the right information at the right time* project was to improve access to information in order to enable older people to remain independent and socially connected, and to reduce the risk of becoming socially excluded.

In order to achieve this objective, we asked older people via a survey and in focus groups:

- What information do you want and need to know about?
- Where do you currently find out about these things?
- What are the barriers to finding this information? and,
- How can these barriers be overcome?

From the 559 surveys that were completed and returned from across the state, and the feedback from the 67 focus group attendees², we know that older Tasmanians want to be able to find out about ways to stay **living independently** – whether it be for gardening, home maintenance, cleaning or shopping assistance, as well as ways to help to stay

healthy, or deal with health issues, and to participate in social activities. People are also seeking **financial advice** about pensions, government payments, superannuation, investments, and concession entitlements.



Many also want to know how to participate in the **digital space** – to use computer, phone and internet technology competently.

Older Tasmanians recognise that increasingly technology is becoming the main tool for finding the information that they seek.

Unfortunately, older people are encountering multiple barriers to finding information. There are difficulties with communication, both written and verbal. There are problems with physical access to, and use of, services and activities. Telstra and Centrelink were singled out for being particularly difficult in the process of accessing the information required.

² Statistical analysis throughout this report refers to 63 focus group participants. 4 participants did not submit their age and gender, and for the same reason 556 surveys are referred to in the report rather than 559. However, the feedback from these 7 people (written and verbal) is included in the qualitative data analysis.

The findings show that technology presents its own challenges, from computer literacy to internet access and mobile phone use. As expected, mobile phone and internet usage is less common in the older age groups of our participants (75+ years), while a home land line is still frequently in use. In addition, issues of poor network coverage compound barriers to accessing information, and assistance in an emergency.

The cost of new technology, mobile phones, transport and some services for many older people also act as barriers to social connectedness.

Perhaps of greatest concern is the finding that people are struggling with issues of self-confidence and isolation. Social exclusion causes and compounds existing barriers to information.

Thus, *Finding out* demonstrates an existing generational divide that is not only digital or technological, but one that is also, unquestionably, social.

This report contains a range of solutions to overcome barriers, which create problems of social and digital exclusion. Older people who participated in the research made simple, practical suggestions to overcome barriers regarding font sizes, phone manner, clear language instructions, and face-to-face service options. They put forward ideas for improving access to social activities, such as increasing transport options, local activities and library services. Innovative suggestions to enable the easier use of, and access to, technology were also made. These include a home-based service to assist people in ongoing learning about their internet, computer and mobile phone. There may also be opportunities for intergenerational learning and teaching opportunities.



Recommendations

The Report's recommendations responded to the over 600 participants' experiences of accessing information, the barriers they encounter and their ideas for solutions. They have been developed by COTA Tas through analysis of the findings, alongside the consideration of Tasmania's political, social and demographic context. They are also informed by current research in this area.

The Report's recommendations are directed toward everyone who communicates with older people and seeks to do it better – governments, politicians and policy makers, service providers, businesses, the media, other sectors of the community and the public in general.

In the spirit of enabling positive change for older Tasmanians, COTA Tas is pleased to recommend the following.

1. Address age-discriminatory practices that limit older Tasmanians' access to information across all sectors of the Tasmanian community, as a matter of urgency.
2. Increase efforts to address social exclusion of older people, to enable improved access to information, through:
 - Increasing the amount and range of options for social interaction across all Tasmanian local government areas;
 - Improving transport options for seniors, as recommended in the *Blueprint for an Ageing Australia*, Recommendation X, which include transport for people with mobility limitations and aids; and
 - Providing low cost and free socialising options.
3. The Tasmanian Government establish a Communications Advisory Group, comprising Tasmanian seniors, for consultation on matters of access to information, including technology use, written communication, phone-based and face-to-face communication.
4. The Tasmanian Government support the establishment of a Seniors' Information Service, to provide targeted information for older Tasmanians. The Service should be adequately staffed by well-trained persons, including older Tasmanians, to enable face-to-face and phone-based service, along with on-site assistance to access information via the internet.
5. Address Tasmania's digital and social divide by improving access to technology for older Tasmanians – as per Recommendations XI, XII and XIII of the *Blueprint for an Ageing Australia*, including:
 - Expanding the range of training opportunities for older Tasmanians;
 - Providing on-going, home-based technology maintenance and assistance; and
 - Providing intergenerational teaching and learning opportunities – in schools, and other community service organisations.
6. When providing information for older Tasmanians, ensure that alternatives to internet-based information are also provided. Alternatives include: hard copies of forms, telephone numbers, and opportunities for face-to-face contact.

7. Promote and adopt existing communication guidelines, including age-friendly font size, colour and layout, as well as assistance with clear language and respectful listening techniques.
8. Undertake further research to determine whether:
 - Intergenerational programs are being run successfully in Australia and/or overseas;
 - Government or private companies are delivering home-based technological assistance services, and if so how they are received; and,
 - How the *Finding out* findings might best contribute to Tasmania's Emergency Response plans.
9. Implement an agreed communication strategy to promote the *Finding out* findings and recommendations to institutions, organisations and individuals that have the opportunity to improve older people's access to information.
10. COTA Tas and the Tasmanian Government continue to: encourage community participation in project five of the Tasmanian Government's *Inclusive Ageing Tasmania 2012-14 Strategy*, "Improving Access: Age-Friendly Communities"; and, promote awareness of the World Health Organization's Age-friendly communication and information checklist.



Introduction

BACKGROUND

Improving the way we communicate and share information with older people is of vital importance for all levels of our society.

To be a truly civil society the lessons, challenges and opportunities presented by population ageing must be better understood and embraced. As the *Blueprint for an Ageing Australia* states:

*We are now faced with a challenge to create a society that embraces positively the economic and social impact of ageing ... to ensure that ageing is an asset, not a liability.*³

COTA Tasmania's *Facing the Future – A Baseline Profile on Older Tasmanians* demonstrated that on the whole older people are generally living healthy and active lives and participating in our communities. However, it also highlighted issues of social exclusion, which are in part due to lower levels of internet and/or computer use.⁴ This problem is not isolated to Tasmania, but is evident worldwide: "Many older people experience a sense of exclusion because they do not use computers and the Internet"⁵

As in *Facing the Future*, the older persons' responses are varied in terms of age, interests and abilities including physical, mental, cognitive, emotional and functional health and wellbeing, and health service needs.

In light of the breadth and diversity of older persons' data-range, the *Facing the Future* report is presented in terms of young old (60-74 years), mid old (75-84 years) and older old (85+ years). This enables comparison between age cohorts and represents a generalised grouping. This same approach has been used in reporting the *Finding out* data.

Demographic projections for Tasmania indicate that Tasmania has the highest rate of structural ageing of all Australian states and territories.⁶ This means that the proportion of older people as a total of Tasmanians is continuing to grow. Moreover, the 2011 Census reports that 28 per cent of all Tasmanians aged 65+ years are born overseas⁷ which shows that older Tasmanians are also culturally and linguistically diverse.

As a result of these demographic changes, older people are becoming a larger proportion of customer bases. The baby boomer generation is now moving into the 'older' age group, and is increasingly aware of brokering its consumer powers. 'Grey power' is becoming a recognised force in economic consumption, marketing logistics, workforce participation, political polling and voting patterns. As well as being powerful consumers, older people often have more time to dedicate to family, friends, work opportunities and voluntary commitments. This energy can either be harnessed effectively or, if ignored, be a lost commodity.

3 *Blueprint for an Ageing Australia* p.5

4 *Facing the Future* p.143

5 *Global Age-Friendly Cities* p.63

6 *Facing the Future* p.35

7 *Facing the Future* p.63

Access to information and social connectedness – via the Internet and other means – is a right that all older Tasmanians are entitled to. Governments and non-government agencies, service providers and businesses need to communicate more efficiently and effectively⁸ with our growing, and culturally diverse older age groups.



⁸ See Appendix D. List of Useful Resources p.59.

AIMS AND OBJECTIVES

Inclusive Ageing: Tasmania 2012-2014 Strategy (the Strategy) sets out the Tasmanian Government's commitment to a society that is more socially inclusive for older Tasmanians. The key objective of the Strategy is to "increase the capacity for all older people to be fully included in community life, particularly those who are socially excluded or at risk of becoming so"⁹

This project, *Finding out: accessing the right information at the right time*, is the second of six inter-related projects contained in the Strategy. The purpose of *Finding out* is twofold: to improve access to information, and to enable older people to remain independent and socially connected, and thus reduce the risk of becoming socially excluded.

The aims of the *Finding out* report are to:

- Identify the types of information older Tasmanians need and the ways that people prefer to source that information;
- Identify the barriers that prevent older people from getting the information they need, when they need it; and

- Identify the solutions that will improve access to information.

By finding out the answers to these questions, not only can we better support and promote the information needs of older Tasmanians, but importantly, we can also start to address particular aspects of age-discrimination. That is, we can help to ensure that older people's rights to information, knowledge, technology, and to social connection are respected and that, "[i]nclusion, empowerment and accessibility are the major themes that ... guide policy-making"¹⁰

The findings contained in the following pages are based on research involving over 600 older Tasmanians who told of their experiences of finding out about important information. The results provide a wealth of evidence for improving communications and connections for older Tasmanians. The Tasmanian Government and its various departments, Local Governments, hundreds of service providers and businesses will benefit from understanding these important messages from the 'coal face'. This report summarises the research findings and makes appropriate recommendations.



9 *Inclusive Ageing Strategy* p.3

10 *Blueprint for an Ageing Australia* p.7

METHODOLOGY

A purposive, maximum variation sampling technique¹¹ was employed to target Tasmanians aged 60 years and over. Given the research imperative to include vulnerable and/or isolated older Tasmanians who were unable to participate in this study, the sample target group included people aged less than 60 years who worked with, or advocated for these, older Tasmanians.

Two research instruments were used to gather the data for this project: a survey¹² and guided discussions in focus groups settings.

Four data collection methods were used:

- People were invited to complete an online survey using SurveyMonkey software. Older Tasmanians were targeted via a number of distribution lists including COTA Tas' extensive networks.
- 880 printed surveys, (a replica of the online survey), were posted reply paid to Hobart City Council's Mather's Place (a well known activities space and information hub for older Tasmanians) data base.

- 1464 printed surveys were hand delivered to clients (aged 60 years or more) of the LINC Home Library Service. This targeted distribution captured, by definition, a hard to reach group. A large number of recipients of the survey were assisted by LINC volunteers to complete and/or return their completed surveys. Printed surveys were also distributed to various member groups including the Polish Welfare Office, the Launceston Older Persons Reference Group, the West Tamar Seniors Advisory Group and the Tasmanian Association of State Superannuants.
- Six focus groups were held in Tasmania's southern and north western regions.

The survey included a mix of open-ended and closed questions. The focus groups were guided by a leader, and included the survey questions along with many prompts to encourage informal, in-depth discussion. In total, 559¹³ surveys were completed either online or forwarded to COTA Tas, and 67¹⁴ people attended focus groups. Tables 1 and 2 show the breakdown of participants by age and gender.

11 Ezzy and Rice Oxford University Press 2005, definition: searching for cases or individuals who cover the spectrum of positions and perspectives in relation to the phenomenon one is studying, and would include... both extreme and typical cases plus any other positions that can be identified.

12 See Appendix C. Survey, p56.

13 Statistical analysis – in tables and figures throughout – refer to 556 participants, as some participants did not submit their age and gender.

14 Statistical analysis – in tables and figures throughout – refer to 63 focus group participants, as some participants did not submit their age and gender.

Table 1. Focus Group Participants by Age and Gender.

Age group	Female	Male	Not specified	Total
under 60	5	2		7
60–64 yrs	12	2		14
65–74 yrs	13	4	1	18
75–84 yrs	8	3		11
85+ yrs	7	6		13
Total	45	17	1	63

Figure 1. Percentage of focus group participants by age and gender

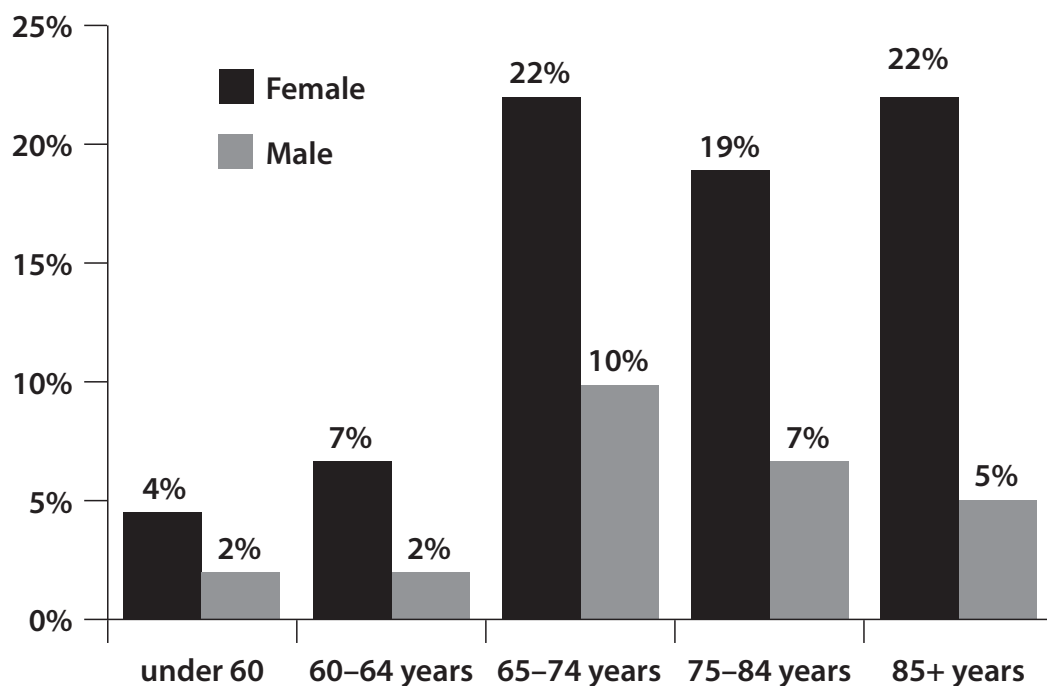


Table 2. Survey Respondents by Age and Gender.

Age group	Female	Male	Total
under 60	25	11	36
60–64 yrs	37	11	48
65–74 yrs	122	55	177
75–84 yrs	105	37	142
85+ yrs	125	28	153
Total	414	142	556

Figure 2. Percentage of survey respondents by age and gender

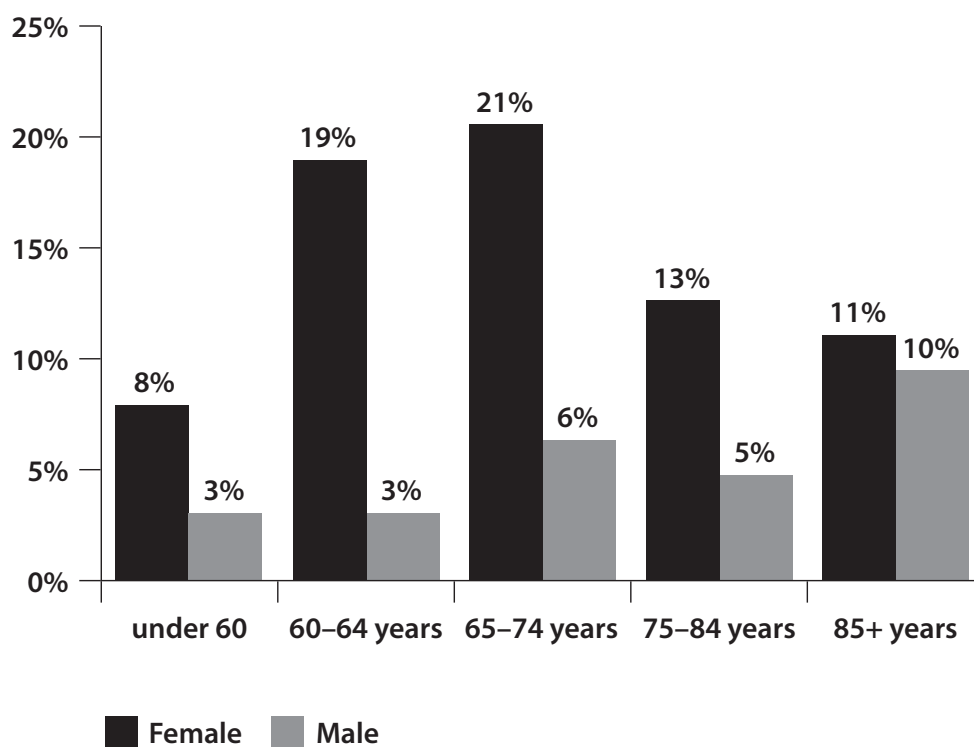


Table 3. Sample Group as Percentage of Age Group in Population.

Age group	Total number of participants	Participants' age group as percentage of sample¹⁵	Age group as percentage of Tasmanians over 60 years¹⁶
Young old: 60-74 yrs	267	45%	68%
Mid old: 75-84 yrs	153	22%	23%
Older old: 85+ yrs	166	23%	9%

Table 3 above demonstrates that the mid-old age group are accurately represented in the sample group, and the young old are slightly underrepresented. The older old are overrepresented, a direct result of the targeting of this age group. Respondents aged 60 years or less are excluded here, as they do not fit the demographic benchmark for 'old.' Their input has however been included throughout the report as expert comment or insights on behalf of older Tasmanians.

All data from the paper surveys was entered onto the electronic database (SurveyMonkey). Focus group discussions were transcribed. Responses to closed questions were entered using SurveyMonkey, Excel and SPSS software. Open ended questions and focus group discussions were coded and analysed in NVIVO software.

Additional demographic data about employment, volunteering, educational attainment, language spoken at home and assistance with daily living is available in Appendix A.

¹⁵ 43 respondents aged 60 years or less are not included in this table. All 43 identified as advocates.

¹⁶ According to the ABS, *Census of Population and Housing*, in 2011, there were 113,440 Tasmanians aged 60+ years.

SCOPE AND STATISTICAL SIGNIFICANCE OF RESEARCH DESIGN

The scope of the research referred to in the Methodology section leads to a discussion of the statistical significance, or validity, of the findings. In surveying over 600 Tasmanians aged 60 or more years, the research design assured a very high confidence interval (or error range) of 3.92% to 4.5%, and this potential variation is the worst case scenario.

This means that when comparing the numbers in Tables 1 and 2 with recent Australian Bureau of Statistics (ABS) population statistics as shown in Table 3, the research sample represents, with great accuracy, the experience of all older Tasmanians.

COTA Tas acknowledges the potential limitations of this research:

- Women participants outnumber men in this research by approximately 3:1. While we know that there are more women than men in the older age groups, this peaks in the over 85 year olds at approximately 3:2.¹⁷
- While a variety of culture and language groups are represented in this research, Polish immigrants comprise the majority of participants with culturally, linguistically and religiously diverse backgrounds.
- The demographic data did not ask whether people lived alone or with others. This limits our capacity for cross-reference analysis with respondents who made comments directly about social isolation.
- The majority of the data that is analysed in this report is survey data. Focus group discussion data is included in such a way as to provide depth and nuance to the survey responses.



17 *Facing the Future*, p.38

Findings and Analysis

1. INFORMATION NEEDS AND ACCESS

1.1 What information do older people need?

Table 4 shows the most common types of information sought by older Tasmanians. When asked what types of information and/or services were needed regularly, responses to this open ended question indicated that people commonly sought information about:

- Ways to live independently, healthily and socially;
- Income and finance needs; and
- Telecommunication and computer needs.

Table 4. Types of Information Sought by Number and Percentage.

Information Sought	Number respondents	Percentage
Home help services	99	26.8%
Health	89	24.1%
Transport	45	12.2%
Social activities	34	9.2%
Government services	19	5.1%
Telecommunications	19	5.1%
Banking/Finances	17	4.6%
Library services	13	3.5%
Weather/road conditions	10	2.7%
Computer skills	5	1.4%
Aged care services	4	1.1%
Local services	4	1.1%
Vision services	3	0.8%
Emergency services	2	0.5%
Food ¹⁸	2	0.5%
Legal services	2	0.5%
Translation services	2	0.5%
Total	369	100.0%

¹⁸ Includes 2 responses for sourcing food.

Many respondents needed multiple types of information and/or services, for example:

Domestic cleaning, shaver, help with food preparation, washing clothes, gardening, hair dresser, nail manicure, podiatrist, library book deliver, hearing aids, macular degeneration.

Table 5 below and Figure 3, on page 21 reveal some variations across age groups and the types of information sought. As people move into the older age groups there is more interest

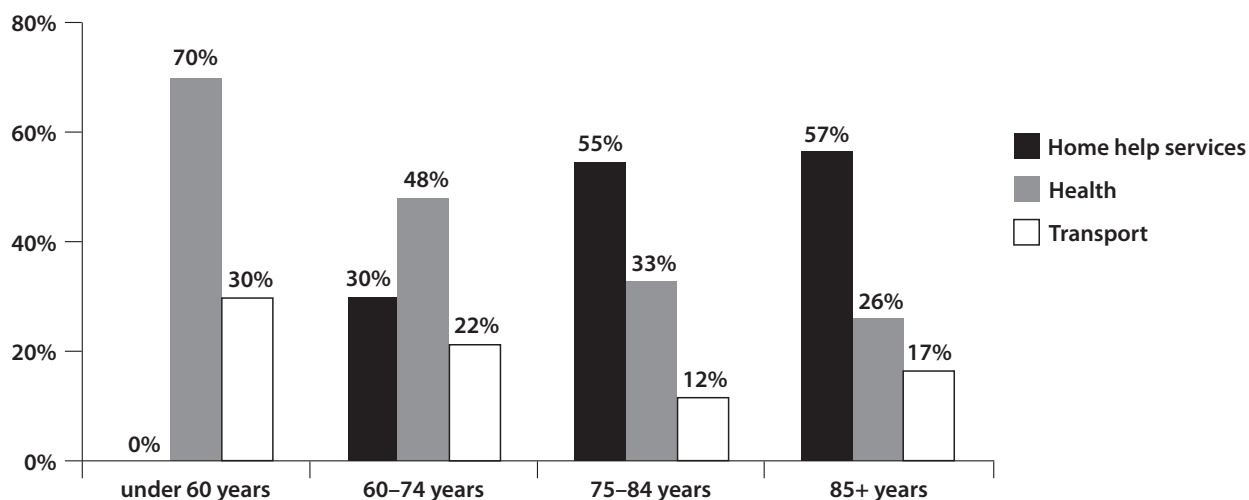
in home help services. Interestingly the trend for seeking information about health and transport declines with increasing age. By way of explanation, a cross reference to Table 7 Common Sources of Information Used by Age Group on page 24, shows that once people reach 85+ years, there is increased reliance on doctors, family and friends. It is a likely inference that these people would use their knowledge and networks to access the information (and/or services) on behalf of the older person. An alternative explanation could be that the effects of increased age coupled with social isolation leads to limited access to information about health and transport.

Table 5. Top three (3) Information Types by Age Group and Percentage.

Information types	Under 60 years	60–74 years	75–84 years	85+ years	Number of responses
Home help services	0%	30%	55%	57%	129
Health	70%	48%	33%	26%	107
Transport	30%	22%	12%	17%	48
Number of responses	10	93	109	72	284



Figure 3. Top three (3) information types by age group and percentage



1.1.1 Living independently, healthily and socially

The most commonly stated type of information needed was for services to enable people to stay living independently and in good health (51%)¹⁹. This includes help with gardening, cleaning, and shopping as well as for health services – GPs, nursing, allied health services such as podiatry, physiotherapy, and vision assistance, and opportunities for physical activities to maintain wellness.

People also commonly sought information about transport options (Metro buses and taxis), and opportunities for social activities, including services in their local area.

1.1.2 Income and finance

Another common need is for information about pensions, Centrelink services, banking and finances, and other types of Government assistance (10%).

1.1.3 Telecommunications and computer skills

People are also seeking information about, and from, internet, computer and mobile phones (6%).

1.1.4 Other

The remaining survey responses noted the need for access to information about reading material and libraries,²⁰ weather and road conditions, food and emergency services, and translation services.

For those who did not indicate a need for information, this was variously attributed to the help of family members, staff in aged care facilities or visiting carers who provided assistance in seeking information.

¹⁹ As shown in Table 4, this includes 26.8% for Home Help Services and 24.1% for Health.

²⁰ This finding may be influenced by the targeting of LINC patrons for the sample group.

1.2 Information access

1.2.1 What sources do people most commonly use?

538 of 556 people responded to this question, a participation rate of more than 96%, and provided a total of 4115 responses.

The question “which of the following sources do you generally use to find out information relevant to you and/or other seniors you know?” referred to a tick list of commonly used sources of information. The sources were carefully chosen by analysing participant feedback provided in 6 focus groups.

Participants were encouraged to tick as many sources as they wished. A blank space was also provided for people to indicate any information sources not referred to in the tick list.

It is clear that television and newspapers are primary sources of information for older Tasmanians with 68% of respondents selecting these as the most commonly sought communication sources.



Table 6. Common Information Sources Used by Number and Percentage.

Information source	Number	Percentage
Television	369	68.6%
Newspapers	366	68.0%
Doctor/s	344	63.9%
Family and/or friends	328	61.0%
Radio	294	54.6%
Pharmacy	254	47.2%
White/Yellow Pages	248	46.1%
Websites	216	40.1%
LINC Tasmania	187	34.8%
Community groups	176	32.7%
Council newsletter	173	32.2%
Centrelink	137	25.5%
Home care/ help	134	24.9%
The Senior Tasmania	126	23.4%
Service Tasmania	126	23.4%
Local Council office	121	22.5%
Seniors Card Directory	109	20.3%
COTA magazine	93	17.3%
Service directory	55	10.2%
Prime Times Tas	50	9.3%
Telephone helplines	47	8.7%
Community house	45	8.4%
Service clubs	39	7.2%
Commonwealth Care Link ²¹	34	6.3%
My Aged Care	32	5.9%
TasCarepoint	12	2.2%

People, unsurprisingly use doctors as information sources and they scored very highly at 64%, as did pharmacies at 47%. Given that doctors and pharmacists are trusted professionals, as are by implication the business settings they operate from, they are important gateways for providing information to seniors. Family and friends (61%) and radio (55%) are other primary sources of information. All other listed sources are included in Table 6.

'Websites' comprise 40% of responses, less than the more traditional sources of newspapers, radio and television. Websites specific to aged care or home help services (last three listings of Table 6) were infrequently used overall and given the evidence gathered in this research project, it is likely that these were used more by younger survey participants.²² It is important to recognise that, due to the research strategy and sampling method that included an email campaign and online survey, this finding could be slightly skewed toward the use of websites.

²¹ Commonwealth Care Link services were ceased in June 2014 and redirected to the My Aged Care phone line and website.

²² Refer to Table 8. Technology Access, p.25.

Table 7. Common Sources of Information Used by Age Group.

Sources of information	Under 60 years	YOUNG OLD 60–74 years	MID OLD 75–84 years	OLDER OLD 85+ years	Response Percentage
Television	14%	15%	16%	16%	68.6%
Newspapers	17%	15%	16%	15%	68.0%
Doctor/s	10%	13%	16%	16%	63.9%
Family and/or friends	12%	13%	13%	15%	61.0%
Radio	15%	11%	12%	13%	54.6%
Pharmacy	6%	10%	11%	11%	47.2%
White/Yellow Pages	7%	11%	10%	10%	46.1%
Websites	19%	12%	6%	4%	40.1%
	100%	100%	100%	100%	

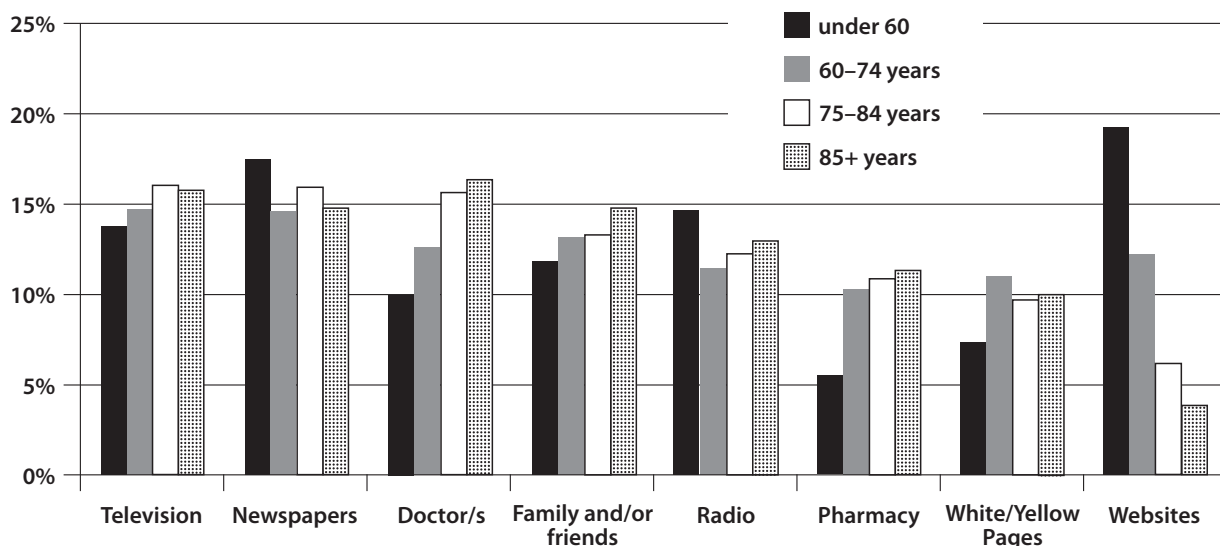
Table 7 demonstrates the variation of information by people aged under 60 years compared to older age groups. Understanding the needs and profiles of the different age groups²³ and aligning these with their information seeking habits will enable better targeting of information to the 'older old' age groups. This is an evidence based opportunity with implications for all planners and communicators (in both public and private sectors) who provide services to older people.

It is of interest that 12% of the 'young old' aged 60-74 years used websites for information gathering, while this declined by half to 6% for the 'mid old' aged between 75-84 years. Importantly this downward trend continues for the 'older old' with only 4% of responses signifying websites as a common source of information.



23 Appendices A and B

Figure 4. Common sources of information used by age group



The research intent included finding out about mobile phone, fixed land line, computer and internet usage – common gateways to sourcing information.

Figure 5 and Table 8 show that the people under 60 years of age surveyed are up to three times more likely than older age groups to have the internet connected at home.

People aged over 75 years are much less likely to use mobile phones or computers than their younger counterparts and notably, have very low internet usage rates. Once again evidence shows the use of more modern modes of technology declines quite sharply, with greater age, and instead there is greater reliance on more conventional tools of communication such as the fixed line telephone.

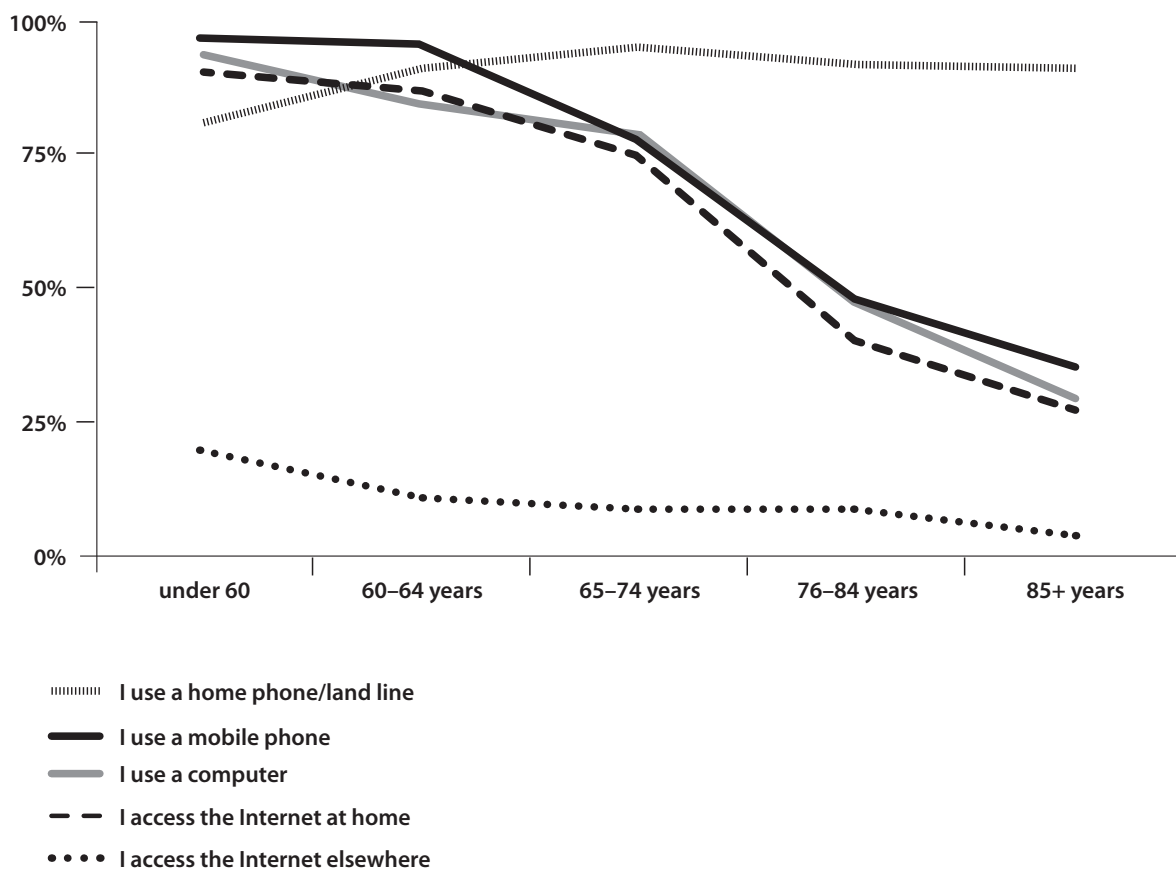
Table 8. Technology Access by Number and Percentage of Respondents.

Technology access	Under 60	60-64 years	65-74 years	75-84 years	85+ years	Number
I use a home phone/land line	81.3%	91.5%	95.3%	92.2%	91.4%	543
I use a mobile phone	96.9%	95.7%	77.8%	48.2%	35.5%	543
I use a computer	93.8%	85.1%	78.9%	47.5%	30.3%	543
I access the internet at home	90.6%	87.2%	74.9%	40.4%	27.6%	543
I access internet elsewhere	20.0%	11.5%	8.8%	8.6%	4.1%	358

This clear trend is also supported by the increased tendency of those in their mid old and older old years to rely more on people (doctors, family friends and pharmacy staff) and the traditional media (newspapers, newsletters, radio, television, pamphlets etc). The tendency seems to be, with increasing age – (75 years or more), to avoid the more impersonal modes of communication such as the computer, internet and voice activated phone prompts.

This statement is well supported in many survey responses to open ended questions and also in the commentary arising from focus groups. This qualitative data is examined in the coming discussion of barriers to using and accessing information.²⁴

Figure 5. Technology access by type and age²⁵



²⁴ Refer to Section 2 Barriers to Using and Accessing Information, p.30.

²⁵ For more information about older Tasmanians' internet, mobile and land line use see *Appendix B*.

It is clear that information and advice about financial matters and telecommunications, living independently, healthily and socially is needed by all older people. A clear understanding of the information seeking habits of the younger old, mid old and older old age groups will help stakeholders and businesses to successfully target these groups with the information they need.

Effective communication will support informed decision making by older Australians and also has the potential to promote independent and healthy living. In turn reliance on residential care and the health system may be reduced.

As our population ages structurally and a greater proportion of the population is aged over 60 years, there will be significant business opportunities for those who listen and respond to the needs of older people in our community.

Older Tasmanians across the board are using a diverse range of sources to access information: they are reading, watching, listening and asking questions of people they interact with, but also using search engines and Government departments.

It is interesting to note the data in Figure 5 and Table 8, Technology Access by Number and Percentage of Respondents, suggests the potentially significant impacts of the loss of access to a fixed phone land line.

For example, the capacity of Emergency Services trying to reach people in their homes in the event of a bushfire could be compromised; also the National Broadband Network (NBN) roll out, may have significant albeit unintended negative impacts on people in the mid old to older old age groups. The intent of the NBN roll out is to enable improved access to the internet, but may have inadvertent consequences, one of which appears to be interference with personal emergency alarms.

The evidence points to the older old age groups' reluctance or resistance to adopting new technology. This will impact on their ability to find the information and support they need when they need it.

1.2.2 Who do you rely on for information in a life-changing event?

In times of a life-changing event people use slightly different sources for information. This was a broad open-ended question, however, family, friends, and medical and nursing staff were overwhelmingly the most frequent go-to points, as Table 9 demonstrates.



Table 9. Sources Relied Upon in a Life-Changing Event.

People rely upon	Number of responses	Percentage of respondents
Family	270	34.5%
Medical or nursing staff ²⁶	201	25.7%
Friends	70	8.9%
Government service ²⁷	45	5.7%
Internet	43	5.5%
Financial advisor	32	4.1%
No one	32	4.1%
Community groups ²⁸	25	3.2%
Aged Care service	23	2.9%
Bank	19	2.4%
Legal guardian	17	2.2%
Accountant	6	0.8%
	783	100.0%

Some respondents provided excellent illustrations of what they did when they found themselves in these types of situations previously:

Hard to answer – keep very well. However, 5 years ago my husband had a heart attack –called ambulance, very good, Royal Hobart Hospital, very good.

Husband died but everything seems to get organised. I was able to attend to financial circumstances and contacted superannuation and Centrelink. No hassles. Perhaps now I would ask family for information.

I am capable of doing my own research but we do have an excellent financial advisor who helped with getting Disability Pension.

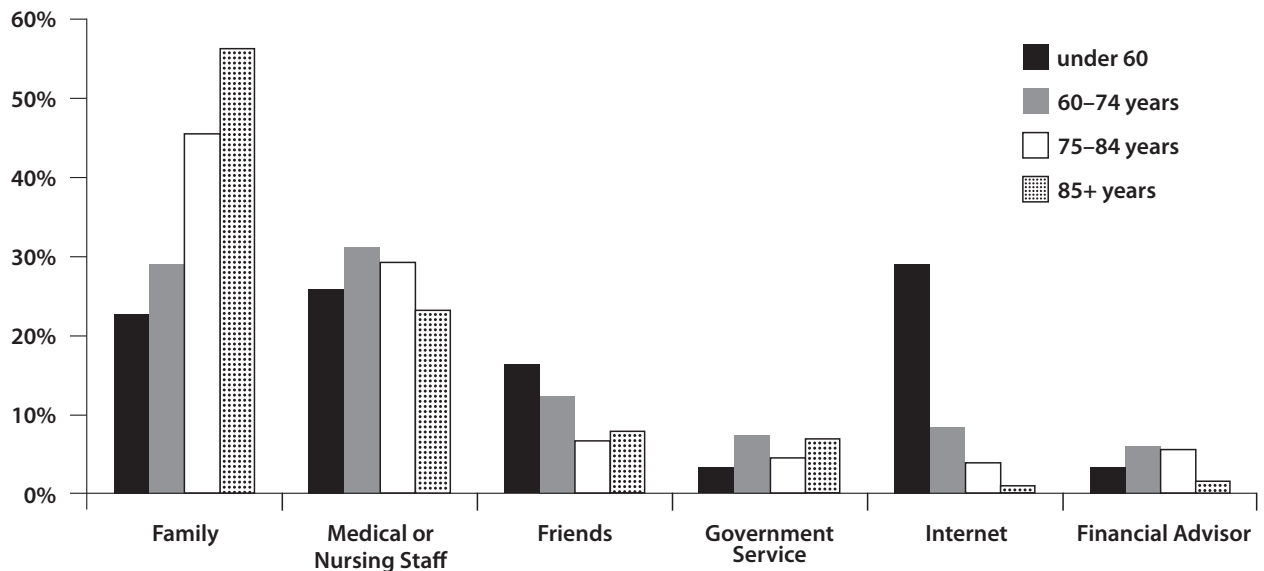
I've probably rung the [Prescriptions] Help Line six times in the past five years about symptoms and allergies, side effects; you get put through to a registered nurse every time – it's fantastic every time. It is a brilliant service. I just got the fridge magnet from my chemist some years ago. I called them again last week for a friend. Probably could do with promoting that help line.

26 The category of Medical or nursing staff includes instances of people relying on Pharmacy and staff.

27 Government services in this instance refers mainly to Centrelink, but also includes services like DVA.

28 Community Groups covers home help services, social groups, meals.

Figure 6. Sources relied upon in a life-changing event by age group



This graph shows the pattern of greater reliance of people aged 75 or more years on family members, medical and nursing staff when they find themselves in the midst of a life changing event. It could be implied that there is a need for a sense of connection. This forms an imperative when life changes are present and as age increases.

Unsurprisingly, persons aged less than 60 years have greater reliance (and potentially trust) in the more impersonal medium of the internet in times of change.

1.2.3 Emergency situations

When asked specifically about how information is accessed in an emergency, people stated they rely on the radio, television, and internet sites, as well as friends and neighbours. For example:

TV – although now with ADSL I can probably look up the Tasmanian Fire Service on my computer.

ABC Hobart radio. Help from neighbours with information if required.

Gas fire alert via iPad.

However, not everyone feels equipped to handle an emergency situation; some just answered, “Don’t know”. One respondent summed up the importance of internet access in this instance:

I am very concerned about this matter. Without the internet I would be unable to receive information. It worries me greatly.

There are potentially issues for older people if they have no land line, not just being socially excluded but potentially making for a life threatening exclusion.

2. BARRIERS TO USING AND ACCESSING INFORMATION

Participants were asked what difficulties they experienced in finding out the information they needed. There were 457 survey responses to the open ended question:

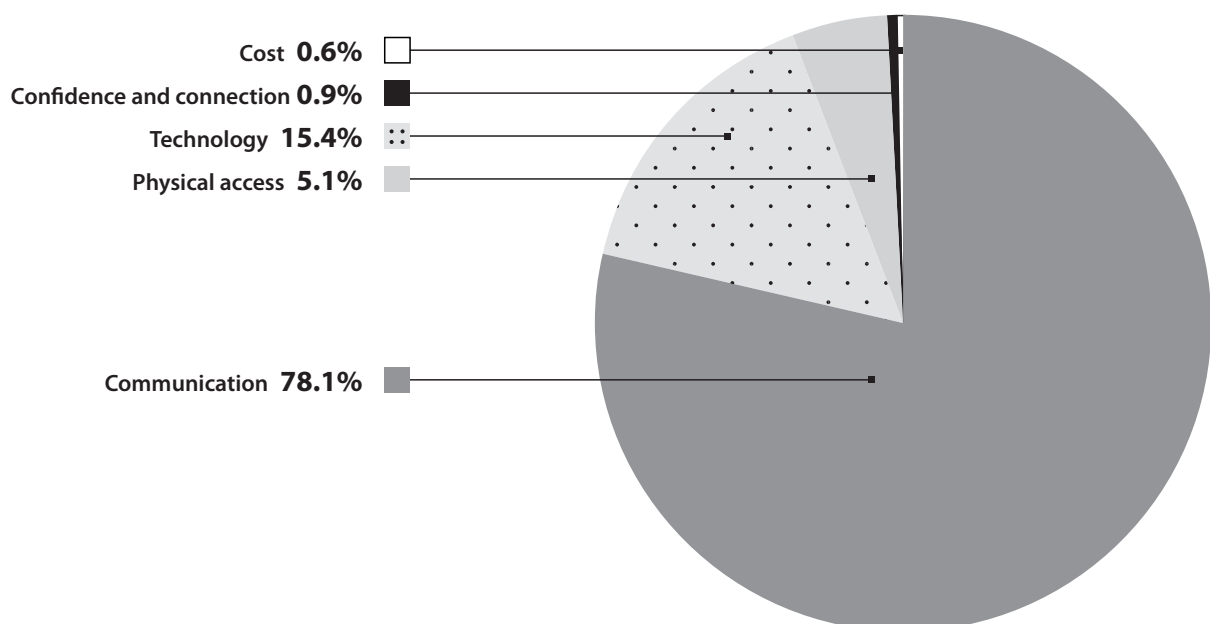
Generally, what difficulties, (if any), do you experience in finding out the information you need?

This question was also put to people in focus group discussions which yielded a wealth of insight that was able to be categorised. Many survey responses to Question 8²⁹ also related directly to barriers people experienced in getting the information they needed and were coded into these categories.

Qualitative coding and analysis helped to identify five main barrier categories:

- Communication (including over the phone and written information)
- Physical Access
- Technology (computer and internet access and use, mobile phones)
- Cost
- Confidence and Connectedness (social isolation and ageist attitudes).

Figure 7. Responses to Question 6 by category³⁰



29 Is there anything else you would like to tell us about how you find out information or any difficulties you face?

30 Additional information provided in Q.8 and in focus group discussions is not represented in this diagram.

Each of these categories is discussed in more detail in the following section.

2.1 Communication barriers

2.1.1 Phone communication

Over-the-phone communication was by far the most common difficulty that older people in Tasmania stated (39%, 215 responses). This issue was also raised as a national issue in the 2014 Commonwealth Ombudsman Report *Investigation into service delivery complaints about Centrelink*.

Three comments from participants in the *Finding out* report capture the frustration that people feel when trying to seek information by phone:

Centralised help lines, long phone waiting times and difficulty in reaching a 'real' person.

Phone prompts! Long waiting times. Call centres! Can't understand the accent and they speak too quickly, even though I explain I have a hearing problem.

Pressing numbers under pressure is difficult and I can make mistakes often due to my arthritic fingers.

As these examples indicate, there are three key problems when communicating by phone:

- Confusing and complex mechanical instructions and prompts;
- Difficulties understanding and being understood; and
- Long waiting periods. Additionally, the potential increased costs of calls using mobile phones is also an issue associated with long waiting periods.

Confusing, complex, and mechanised

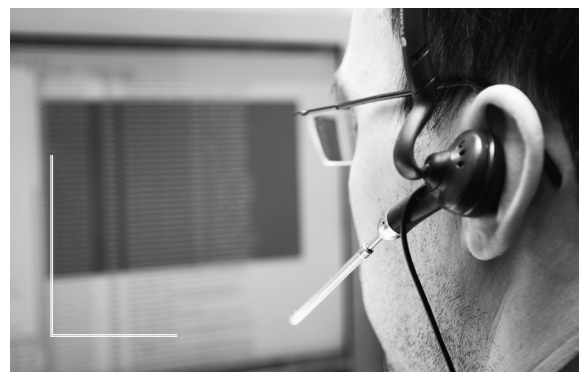
When making a call to find out information, sometimes people cannot get past first base. In many cases, people are encountering automated services delivering instructions that are variously too fast, complex or confusing:

Confusing instructions, too many buttons to press, not enough time to take in info before being required to press button.

That's what I find most difficult – the connection sometimes is voice activated and I hate that. Or press this, and then in the end you just become confused – and I'm of clear mind and sometimes people who are older are slower in their thought processes ... how hard that is for them?

Mum has hearing problems; won't call the help line on phones are too confusing, won't make phone calls as too complicated to ring out from her house phone – dad does all the calls. This is scary in an emergency when we can't help her.

Phone prompts & mechanical phone voices can prove very off-putting, and then you have to start again including the connecting time. For a population of a mere 500,000, I find this SO infuriating.



Difficulties understanding and being understood

For people who do get past automated instructions and can speak with a real person, communication difficulties still arise. Sometimes these are because of unclear or inaudible speech:

Most telephone speech is delivered too fast for an older and possibly deaf person to comprehend readily.

I have a problem hearing and most Telstra and Aurora people don't talk clearly.

At other times, English as an additional language and/or heavily accented English presents problems for both callers and those being called:

A lot of people on phones aren't speaking English plainly enough and I can't understand.

Can't understand accent and speak too quickly even though I explain I have a hearing problem.

English is not my native language and I have difficulty understanding.

People also reported that the person they spoke to was not always equipped to deal with their problem, or was not the appropriate person, and consequently they did not get the information they needed. For example:

It's not [Seniors] who have these difficulties! Many departments are unhelpful & most don't seem to know much themselves! Sad, but true!

Long waiting periods

Being kept on hold was frequently mentioned as a barrier to finding information. Telstra and Centrelink were singled out for being particularly frustrating, as people were regularly kept waiting for long periods of time. Often people gave up, or avoid calling altogether.

Long helpline waiting times – Hydro, bank, Doctor's surgery, Centrelink.

Centrelink is DREADFUL: non-specific internet info; very long helpline waiting times; bad telephone customer service; inaccurate or contradictory information; and for telephone reporting of income earned the demands are impractical.

Have given up on Centrelink phoning – it takes forever. Can't comprehend/stand electronic phone (e.g. press 1, 2 ... 10). I'd rather speak to a person.



2.1.2 Written communication

While written documents (pamphlets, brochures, newsletter, the paper, telephone book) are common go-to sources for information, people experienced problems with particular formatting and styles.

In particular, the barriers to understanding written information are caused by:

- Confusing language
- Small font
- Insufficient contrast between background and text

The following are a few of the examples of the many responses made on this issue.

On readability

Increasing complexity of instructions to operate equipment which are integral in modern living e.g. car, telephone, TV, video, camera, supermarket electronic check-outs, internet, bank transactions.

Government forms need to be in easy wording – cannot understand them.

In some areas, by the time you read the parking instructions it is time to go home.

English as a second language, therefore hardship with reading & understanding.

On legibility

Increasingly more poor type, fainter, smaller and use of coloured background.

Coloured print and/or paper (black on white is best).

Text size too small – I have poor vision. Background colour obscures text.

White pages barely legible; I attempted to request that this be rectified but got pushed around, fobbed off by providers.

I have difficulties with font size especially the newspapers being 75% too small.

Writing too small on medication, but more particularly on food products.

In addition, people expressed a strong desire for improved access to reading material in general:

As a person who has read prolifically for most of my life, I have difficulty finding enough books in LINC Tas Library.

The local newsletter/newspaper is useful, but it is monthly.

“

Coloured print and/or paper (black on white is best).

”

2.2 Physical access

Many people mentioned health restrictions such as poor vision, hearing loss, arthritis, and being unable to walk long distances, as impediments to accessing information. For example, standing in long queues can be very difficult and off-putting:

Service Tasmania: Had to stand in very long queue to get my licence renewed. (Had to leave, back to car get stick as cannot stand very long) lucky not very often, renewed for 5 years!!

Difficulties – not enough or any seats in stores, even MyState bank you stand in long queues in Kingston. ANZ can manage it. I often walk out not accessing the information needed.

Limited transport options create additional barriers to accessing information. In some cases this is due to restricted mobility which means people can no longer drive, in others a lack of affordable, appropriate transport options are available. For example:

All of the above but more important is weekend transport, daily 1 hour bus goes nearby, unable to walk to nearest stop and return how? I'm surprised that so much info goes into newspapers re events etc and no thought of how to get there. Everything shuts down on Sundays and no wonder those able have to mortgage their home to buy another car.

I'm wasting time and effort [on this survey] as not one question mentioned health, availability of walking. Mostly legs are weak. Haven't even been to Ulverstone for over 2 years. The bus system is chronic.

2.3 Technology

How many aged and/or rural Tasmanians have a computer? How many have a) a reliable service, b) the skills to search, or c) the skills, ability and hardware to constantly upgrade as is required with modern computers?

A variety of technology-related barriers to accessing information are identified in this research. While many older people are accessing information via the web (40%, 216 responses), others state they are either unable to access digital information, or have very limited access. Respondents attribute this exclusion from the digital space to a number of factors:

- Limited access to a computer or internet
- Being computer illiterate
- Problems with online instructions and forms
- Problems with mobile phone use

2.3.1 Limited access to computers and/or Internet

An increased emphasis on seeking information via a web address highlights the fact that not everyone has an easily accessible computer:

So many forms or correspondence these days are often printing website addresses. For so many seniors (myself included), we cannot afford or have so few people to contact – even in fact so many of us do not have a mobile phone, also we do not want NBN with the removal of their phones.

For the disabled I know of three already who have lost theirs.

Information I need gets lost or I cannot access it when sent as text messages or the dreaded instruction, check it out at www ... whatever, Or worse, when I get a 'disc' put through the letterbox and I have not got the equipment to use it and find out what's on it.

Invariably one can only reply by automated means which excludes me as I can only phone or write unless I attend the library reference section (Discrimination!).

Some people noted poor internet service in their area, for example: "No access here to wireless broadband. Satellite speed very slow by comparison, so visiting websites takes ages", "Power often out", and "Disgusting internet service".

In Tasmania there are many areas where there is poor to non-existent coverage for mobile phones. In such areas, loss of land lines and transition to mobile technology will create even more disadvantage to all members of the community and particularly those in the older age groups who may have greater need for emergency services.



2.3.2 Computer illiteracy

While some older people are highly competent with computer use, others have little skills or knowledge in this area:

The assumption that everyone is computer literate or has access to a computer is incorrect.

Many people do not realise that we are not all computer literate - often no other options are provided.

There is an expectation that everyone has computer skills plus availability to websites etc. Shortage of classes for older people to learn computer skills.

2.3.3 Confusing instructions for technology

Respondents identified difficulties with both understanding information about technology, and information that comes via technological devices. For example:

A lot of the people teaching are voluntary, and you don't want to say I can't pick it up, and they don't deserve to be picked on if I can't pick it up. They don't understand that you don't understand even the first step of it - you feel silly - they go 'boom boom' and then walk away - got to keep it basic.

Keeping up with the latest technology and constant changes in how things are done is an ongoing and frustrating problem.

Online links that do not take you to expected information but to a succession of other links. I have used computers since 1984. Some official forms do not address issues directly and some fields could be eliminated.

Too much information to find what I'm looking for with internet.

Basically I do not use the web unless I have located an address elsewhere such as an advert. Even then I find many quite difficult to work through and their logic is anything but logical to me.

Constantly changing the layout of information and registration sources in websites (e.g. airlines).

Confusion on where to look for forms on websites.

Similar issues that arose with legibility in printed material, apply also to the internet and online forms: "The font sizes are WAY too small!"

2.3.4 Mobile phone issues

People stated that various issues arose with mobile phone use also. For some, text messages were inadequate sources of information, and they would prefer to speak in person or have a written letter. Others had difficulty working out all the functions of their mobile phone, while others had very poor coverage or limited funds to pay.

2.4 Cost barriers

Sometimes information is expensive, and sometimes being able to get yourself to the source of information is expensive. Either way, cost can be prohibitive and ostracising for some older Tasmanians, as the following responses illustrate.

I face the difficulty of isolation. Although I am very proud of my independence and personal skills, I can see that my situation could be scary in an emergency, and I need to try harder with the computer. But I would not be able to afford the internet so it would not solve the problem.

Half price taxis, if taxi answers phone, but at weekends and holidays it doubles so elderly pensioners are blocked out of another outlet.

Difficulties. Yes, the pension rate for low income non-superannuates like me is disgusting. Making our lives less liveable, and unable to access 'cheaper sources' of services. Most have already been privatised which will only CREATE additional monetary issues. This from a non-smoker, non-drinker, non-travelling (outside Tasmania) and living a very frugal lifestyle like most pensioners.

Everything gives you internet info. Little [use] for folk who have no way of affording these things.

Nowhere to offer cheap info.

Interstate newspapers are very expensive to purchase in Tasmania. Around \$4 for a Melbourne paper and the same for the Sydney Morning Herald.

2.5 Confidence and connectedness

I am lonely! How do you fix that?

When asked if there was anything else people would like to tell us about how they find information, or difficulties they face (Question 8), many respondents articulated links between a lack of confidence, feelings of social isolation and an inability to access information. This is a chicken-and-egg situation: a lack of information leads to feeling less confident and more socially isolated, and vice versa.

Difficulty in having the confidence to find out information through lack of understanding and processing information.

Mum is terrified of change and intimidated by folks in authority – things are too fast, too loud and too confusing.

People look at us oldies as a waste of space.

On occasions I am treated as you would a child because I am elderly. As I still have all my marbles, I object to this treatment.

Discussions with friends are useful but as one ages friends tend to die off, leaving particularly those who have no family, or have to live alone, very isolated & vulnerable.

Keeping up with new technology and use of new media is difficult when you are retired and not in the workforce.

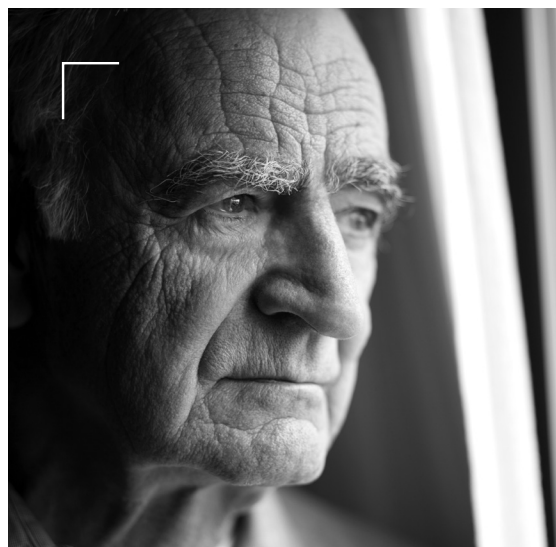
It is unfortunate that I often 'give up' and live with unresolved issues. The alternative is sometimes an endless loop of options or misunderstandings through not having the appropriate buzz word or term which is the key to 'corporate speak'.

Can't afford the Advocate newspaper or to visit friends ... Elder abuse takes many forms. We give up!

“

I am lonely! How do you fix that?

”

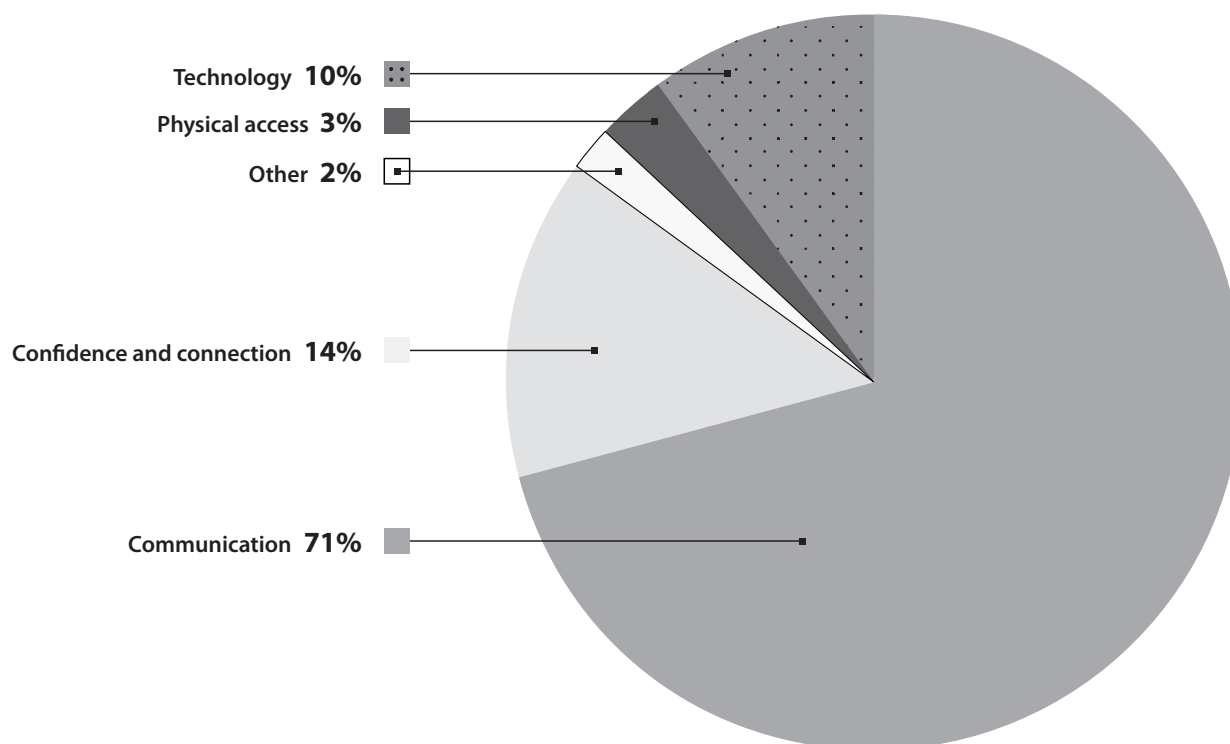


3. SOLUTIONS: WAYS TO IMPROVE ACCESS TO INFORMATION

The survey asked participants for any suggestions they may have to solve the difficulties they were encountering (Question 7). This section details the suggestions offered by older people. Their ideas speak directly to the barriers to social connectedness, wellness and independence in the previous section of this report.

Respondents offered 283 ideas for improving access and usage of information. As Figure 8 demonstrates, over 70% (201) of suggestions concerned ways to improve communication (over the phone, written and face-to-face); approximately 14% (39) to develop social connectedness and self-confidence; and 10% (28) to improve access to technology. The remaining ideas included ways to improve physical access to services, consultation/ involvement with seniors and emergency responses.

Figure 8. Number of suggested solutions by category³¹



31 Data from responses to Q7 only. This excludes Q8, where more ideas were offered.

3.1 Improving communication

I think the key word is acknowledgment – everybody needs to be acknowledged. We need age-friendly communicators.

This quote from one survey participant suggests that an overarching, attitudinal approach is the key to improving communication with older people in general. That is, to have in all areas of communication, communicators who respect the age and abilities of all people: on the phone, writing documents, designing websites and online forms, and behind the front desk.

The importance of this is acknowledged in the April 2014 Commonwealth Ombudsman Report Investigation into service delivery complaints about Centrelink. The recommendations from this report would address many of the complaints raised by the participants surveyed for the *Finding out* report.

3.1.1 Over the phone

Solutions to difficulties with phone communication centred on decreasing the number of prompts, reducing waiting times, and providing training for staff to improve speech quality. Respondents with hearing problems also suggested aids to assist with phone use.

Sample responses include:

Could they be encouraged to offer no more than four options initially then have sub-menus to find out what you actually want to talk about?

I think “speak to an operator” should be about second on the list – once they qualify whether you are on the pension, Centrelink or NewStart then pop you onto an operator who can explain.

Long helpline waiting times on telephone calls have been improved by some organisations e.g. Centrelink will keep your place in line and ring you back.

Access to spoken information needs an alternative whereby it is possible to speak with someone with training in clear speech.

One needs sympathetic, efficient, well spoken and good listeners to their needs.

3.1.2 Written communication

A range of practical solutions to improve the quality of written communication were offered. These include using larger font sizes; printing in black ink on a clear or light background; the use of more “plain language” in documents; and simple leaflets that list selected services to use in times of crisis.

A simple leaflet with departments listed. For example, 1) Who do I get help to have rails put in my home? 2) Someone to trim my trees; 3) Someone to do small painting jobs, small handyman jobs e.g. nail my fence palings; 4) List of reliable plumbers, electricians, etc.

Could anyone organise a small booklet in large print that could specialise in Age Care Assistance, as people can be dead while trying to go through the phone book maze.

I have always believed the information regarding what assistance may be available should be made available BEFORE the event, i.e. an automatic mailing to the individual of a booklet when they are, say, 55-60 years.

Also, that this information book be on every doctor's reception desk. One thing I found most distressing with elderly couples I visited was the obvious fact when the "carer" part of the couple was clearly needing extra help they were loathe to ask, for fear they would be considered not coping and as a couple they may be forced to part (i.e. one went into an aged care facility).

One respondent articulated the need for improved translation services:

We urgently need Greek welfare officer for seniors or social worker to communicate with us, a translator and/or brochures. Also a day centre/respite service/nursing home that is culturally sensitive. There are many Greeks, Italians, Polish and German Senior Tasmanians who have contributed to the wider community. It's our turn to have a rest and enjoy our golden years and not be ignored or marginalised.

3.1.3 Face-to-face

Over 60 responses to Question 7 suggested that difficulties would be solved if people could speak with a person, face-to-face.

I would like them to bring back the seniors departments at Centrelink, the staff were wonderful, they made you feel that your problems were important to them.

Reintroduce special information service just for seniors that used to be provided in Hobart Centrelink branch. It was so easy to obtain a quick bit of information pertaining to one's own personal circumstances where nothing major was required. Now it is practically impossible to get this.

More staff, less automation, less bureaucracy, less centralisation with informants who can respond to local issues, less Gateways, less single entry points, so inefficient to clients.

One stop shop with option to choose appropriate assistance e.g. vacuuming.

More people need to be employed at the front line but they also need to be educated in their job.

With Centrelink, I've had to wait an inordinate amount of time on the phone and get transferred time and time again. I'd rather talk to someone – even if I don't make an appointment, I just go in – I'd rather go in and sit and wait. I want a person to deal with; not go from menu to menu from 4 and then to 7.

3.2 Physical access

Suggestions to improve the physical access to services mainly concerned queue waits, and home delivery options.

Consideration for elderly unable to stand for long periods awaiting attention at counters. Maybe give a number to retain place in queue.

Queues – separate lane/aisle for elderly/infirm.

Home delivery from information services, libraries etc.

Magnifying glass.

Parking. Seniors' parking only is great - not enough in various places (e.g. Aquatic Centre). These places are not monitored – I quite often see people (not seniors) using these spots.

My mother is 95 and has low confidence going outdoors unless the surface is really flat and there are plenty of handrails. Disabled access and bathrooms in public buildings are important.

3.3 Technology

It is extremely frustrating to come up against brick walls when seeking simple information, this is why I feel that those of us whom are more internet savvy end up trying to resolve problems this way than get on a telephone and be pushed from one person to another.

Ideas to improve technology access and usage directly addressed many of the difficulties that were raised earlier in the survey. While some see a need to provide alternatives to internet-only information (to address the lack of computers and computer illiteracy levels), others want opportunities to enter the digital space and participate fully within it.

In short, the messages are:

- Have clearer online instructions (language and font size);
- Provide hardcopy alternatives to online forms;
- Include phone as well as online contacts;
- Provide in-home assistance with computers, tablets and phone; and
- Develop more user friendly websites.

Specific ideas to enable better participation include ongoing home-based support and more training:

Experts who are engaged to explain operation of digital equipment, repair equipment, solve problems with equipment.

Last month of last year I attended a computer- support group session at Glenorchy LINC (free tuition) I would like to see something like that accessible in Hobart – on a PERMANENT BASIS – NOT a computer COURSE, but ongoing assistance with all those annoying 'disempowering' problems!

I am attempting to learn computer. I attend lessons at the community house, but I need home help to gain confidence.

More computer/ iPad classes available – maybe in the home.

With my mum I gave her five steps: turn it on and then press this when you know that – come back to me for more. This took a couple of months and now she says “I want to do this”.

Encourage various governments, NGOs, and service providers to ensure they automatically develop their respective web-sites to ensure they are immediately interactive, readable, have less jargon, and larger font appearances. Too many ‘software hoops’ on most sites - specifically Human Services Departments.

I use Google a lot for general matters. It would be useful to have a central body supplying an overall picture of all the different kinds of senior accommodation available here with costs, conditions, etc. An adequate level of information for each facility e.g. Vaucluse, Clarence Lifestyle Village.

3.4 Confidence and connectedness

The trick is to never give up.

Try to be brief but persistent, and keep repeating until you get a sensible answer – not “should”, “might”, or “see if it’s improved next week”!

As these quotes show, for some respondents the key to finding relevant information is being confident enough to seek and ask for help, and to be determined to get a result.

We know that family and friends are frequently the first to be called upon for information and help (see Tables 6 and 7 of this report). People also stated that the key to accessing information is through interacting with not only friends and family, but also with the wider community. A range of ideas about ways to be socially connected were put forward:

I belong to 2 clubs. Social contacts found there have been very helpful to me, to find out information.

What would be good for older house-bound people is for a visitor group, someone of the same thoughts to visit the house person for a chat.

Rosny LINC is generally satisfactory in terms of services, computers, photocopier etc. Clarence City Council is also open for information gathering.

I love the concerts, and Mathers Place is really good for companionship and activities.

The very best help that I receive is with Red Cross Transport and the Govt Taxi Vouchers. Both very helpful for my mobility issues.

Information and help with difficulties come from my family, especially my Tasmanian daughter, also listening to many lectures and talks on ABC/RN and Radio Australia, the Saturday Age, discussions with friends and staff, and books. I read widely.

I read voraciously; am a member of 5 organisations incl. COTA (which I applaud), study at Monash, what else is there!

Perhaps advertising that there are brochures with information in Libraries, Community Centres and Chemists etc.

Radio is a good source of information; it is always up to date, the latest info – it is immediate.

A sane and caring approach, without reverting to human justifications that it has to be this or that way as dictated by restrictive human perceptions and conceptions. Consideration to every member of society and their particular conditions.

A recent study from the University of Queensland provides evidence to support the wide range of benefits for older people who are socially connected.

“Group engagement optimized health outcomes, and that this was especially the case with increasing age, [this] has important implications for directing community resources to keep older adults mentally active and independent for longer.”³²



32 Haslam. C, Cruwys. T & Haslam. S (2014) “The we’s have it”: Evidence for the distinctive benefits of group engagement in enhancing cognitive health in aging, *Social Science & Medicine*, Volume 120 pp.57-66

3.5 Other

One respondent called upon governments to assist with financial support in better ways:

Can’t understand why governments both state and federal do not take positive steps to maintain our self-owned properties. Our superannuation needs government top up.

With reference to the survey question about emergency information, two specific suggestions were made to improve emergency assistance:

What I feel is needed is for a band of supervised/police checked people to respond to a signal – say a light on in a window to respond quickly. A small fee would be involved.

My main difficulty is with the fire service, and I would appreciate a telephone number or information made available as to where I would evacuate to in the case of a bush fire.

Perhaps at the heart of information access problems is the sense that older people are not consulted enough or involved in determining what information is needed and how it should best be distributed, as these two ideas indicate:

Maybe a community advisory TV and radio service could be organised and run by seniors who understand the difficulties we have sometimes.

Aged care forum inviting older Australians to contribute to a think tank/ problem solving session.

Conclusion

The *Facing the Future* profile highlighted the wide range of skills and abilities of older people living in Tasmania.

However, the *Finding out* report demonstrates that, currently, the factors that limit access to information are contributing to the difficulties many older people face in fully participating in their communities. This demonstrates a social and generational divide that is not only digital, or technological, but also unquestionably social. These findings are consistent with those contained in the World Health Organization's global research into age-friendly cities.³³

The good news is that our findings, like those of the WHO research, suggest that by making a small number of specific changes in policy and practice, we can improve access to information, enable older people to remain independent and socially connected, and reduce the risk of social exclusion. Many of the difficulties that participants have identified are far from insurmountable, and most of the suggested solutions involve small changes to existing systems.

For example, there would be significant benefits for older people if call centres reduced the number of transfer options, repeated the options and always offered an operator, or a call back, as an option.

Written communication could be improved for example by increasing font sizes and using dark print on a light background.

In telephone call centres and diverse telephony environments, adopting more age-friendly, age aware customer service within training systems will make a real and positive difference in older people's access to information.

Businesses, government organisations and services can work to overcome specific barriers to technology use by making sure they provide clear instructions, hardcopy alternatives to online forms, and phone contacts and face-to-face options for providing information to the public.

The *Finding out* report also suggests there are great opportunities for intergenerational connectedness in Tasmania that will improve access to information. There are many opportunities for computer savvy younger people to work with older people who are keen to learn more about technology. There may also be opportunities for Home And Community Care (HACC) to meet older people's requests for in-home, ongoing computer, internet and mobile phone assistance.

The importance of addressing older persons' rights to access to technology cannot be overstated. As the *Blueprint for an Ageing Australia* states:

*Few things today have as much potential to transform the lives of older Australians and maximise their continued contribution to the nation and society as Information and Communications Technologies.*³⁴

33 *Global Age-friendly Cities: A Guide* pp.60-65

34 *Blueprint* p.24



It is crucial, however, that we do not focus solely on addressing the technological needs of older people, and neglect the other important finding in this research – that social interaction plays a vital part in overcoming barriers to accessing information. By enabling, facilitating and encouraging people to be socially connected, information can be shared informally and formally between family, friends and others. Issues of low self esteem might also be addressed.

These changes will require investment in improved transport, technology training and assistance, more local options for getting together and more low-cost activities. Ultimately these are cost-effective measures that will generate an enormous social and economic return for Tasmanians, including those in the older age groups.

The chart which follows summarises the barriers, solutions and corresponding recommendations.

Summary Chart: Barriers, Solutions, Recommendations

This chart summarises the barriers and solutions evident in the findings, and links these to the report's recommendations.

Identified Barrier	Suggested Solutions	Recommendations ³⁵
PHONE COMMUNICATION		
Confusing, fast and complex automated instructions and prompts	Fewer phone prompts, less automation	Recommendation 1 Recommendation 3
Difficulties understanding and being understood	Providing staff training to improve speech quality	Recommendation 4
Long waiting periods	Assistance for people with hearing difficulties	Recommendation 7 Recommendation 9
Centralised help lines	Reduce waiting times	
Unhelpful staff	Provide face-to-face information options Have age-friendly communicators	
WRITTEN COMMUNICATION		
Legibility issues: small font; insufficient contrast between background and text	Formatting and style changes: Use larger font sizes; print in black ink on a clear or light background	Recommendation 3 Recommendation 7 Recommendation 9
Readability issues	Use more plain language in documents	
Not enough reading material in general	Simple information leaflets listing services Improved translation services	
PHYSICAL ACCESS		
Health limitations	Provide seating	Recommendation 1
Queues	Provide home delivery options	Recommendation 2
Limited appropriate, affordable transport	Provide magnifying glasses Barrier-free and enabling spaces Low cost transport, more transport options	Recommendation 10

³⁵ For each of the corresponding recommendations, see pp.9-10.

Identified Barrier	Suggested Solutions	Recommendations
TECHNOLOGY		
Limited access to computer or internet Computer illiteracy Problems with online instructions and forms Problems with mobile phone use Confusing training and information about technology use Style and formatting issues on websites	Clearer online instructions (language and font size), and more streamlined websites Provide hardcopy alternatives to online forms Provide phone number contacts as well as online contacts Provide in-home assistance with computers, tablets and phones Improve training options	Recommendation 1 Recommendation 3 Recommendation 4 Recommendation 5 Recommendation 6 Recommendation 7 Recommendation 8 Recommendation 9
COST		
Expensive information Costly access to the sources of information	Provide low-cost, local activity options Broaden transport options	Recommendation 1 Recommendation 2 Recommendation 10
CONFIDENCE AND CONNECTEDNESS		
Feelings of social isolation Lack of confidence Social disconnection Discriminatory attitudes Unable to keep up with technology changes	Resilience and resolve Access to support from family and friends Improve opportunities for social connectedness	Recommendation 1 Recommendation 2 Recommendation 5 Recommendation 10
CONSULTATION		
Lack of consultation	Improve consultation Forums Think tank	Recommendation 3 Recommendation 4
EMERGENCY INFORMATION NEEDS		
	More information and support for emergency situations	Recommendation 3 Recommendation 9
FINANCIAL ADVICE		
	Specific financial advice and support	Recommendation 4

Further research

The findings from this research indicate the need for further research in the following areas:

- Intergenerational technological activities – are programs being run successfully in Australia and/or overseas?
- Home-based technology instruction and maintenance – are Home And Community Care or private companies delivering these services, and if so how are they received?
- Tasmania's Emergency Response plans – how can our findings obtained about the need for improved information about emergency services be incorporated into emergency response planning?
- A follow up survey into the information needs of older people in three to five years' time.

References

Australian Bureau of Statistics (2011) *Census of Population and Housing*. www.abs.gov.au [Accessed 20 Oct 2014]

Australian Human Rights Commission. (2013) *Your Rights at Retirement* www.humanrights.gov.au/publications/your-rights-retirement [Accessed 1 Oct 2014]

Commonwealth Ombudsman. (2014) *Investigation into service delivery complaints about Centrelink*

Council on the Ageing Tas (2013) *Facing the Future: A Baseline Profile of Older Tasmanians*. COTA Tas: Hobart.

Ezzy, D. & Rice, P. (2005) *Qualitative Research Methods* Oxford University Press

Haslam, C, Cruwys, T & Haslam, S (2014) "The we's have it": Evidence for the distinctive benefits of group engagement in enhancing cognitive health in ageing, *Social Science & Medicine*, Volume 120 Pages 57-66

Per Capita. (2014) *Blueprint for an Ageing Australia* Per Capita Ltd: Australia www.percapita.org.au/_dbase_upl/BlueprintForAnAgeingAustralia.pdf [Accessed 1 Oct 2014]

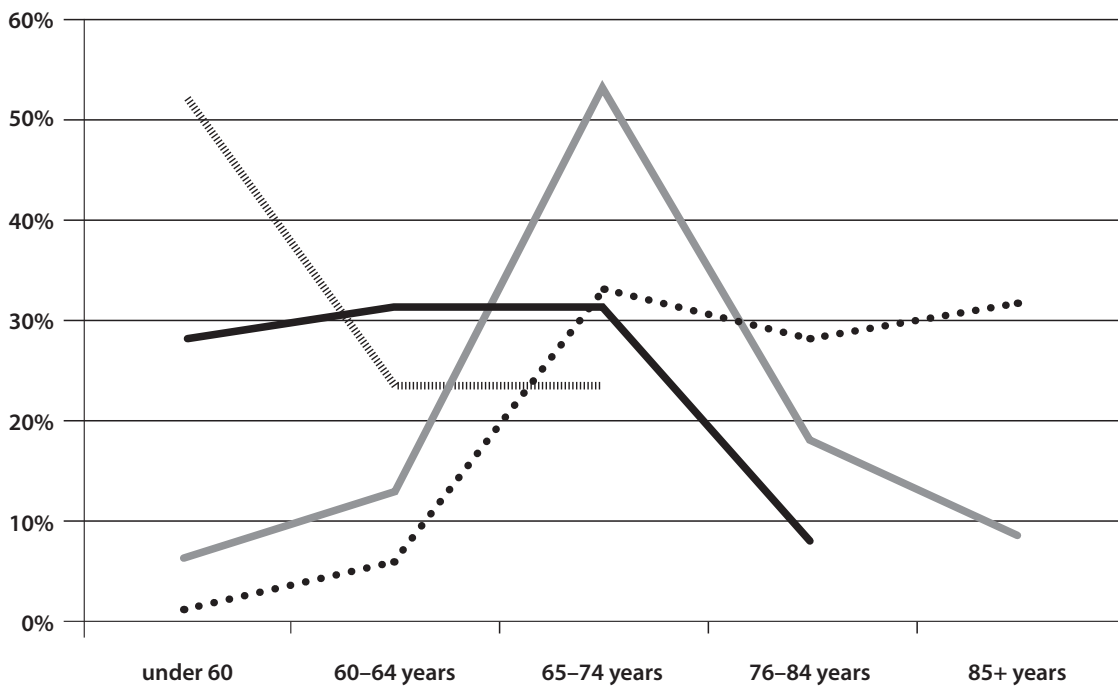
Tasmanian Government Department of Premier and Cabinet. (2012) *Inclusive Ageing: Tasmania 2012-2014 Strategy* DPaC: Hobart www.dpac.tas.gov.au/___data/assets/pdf_file/0005/170987/Inclusive_Ageing_Tasmania_2012-2014_Strategy_Final.pdf [Accessed 1 Oct 2014]

World Health Organization. (2007) *Global Age-friendly Cities: A Guide*. www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf [Accessed 1 Oct 2014]

Appendices

APPENDIX A. ADDITIONAL DEMOGRAPHIC DATA: SURVEY RESPONDENTS

Figure A1. Volunteer/work status of participants by age group

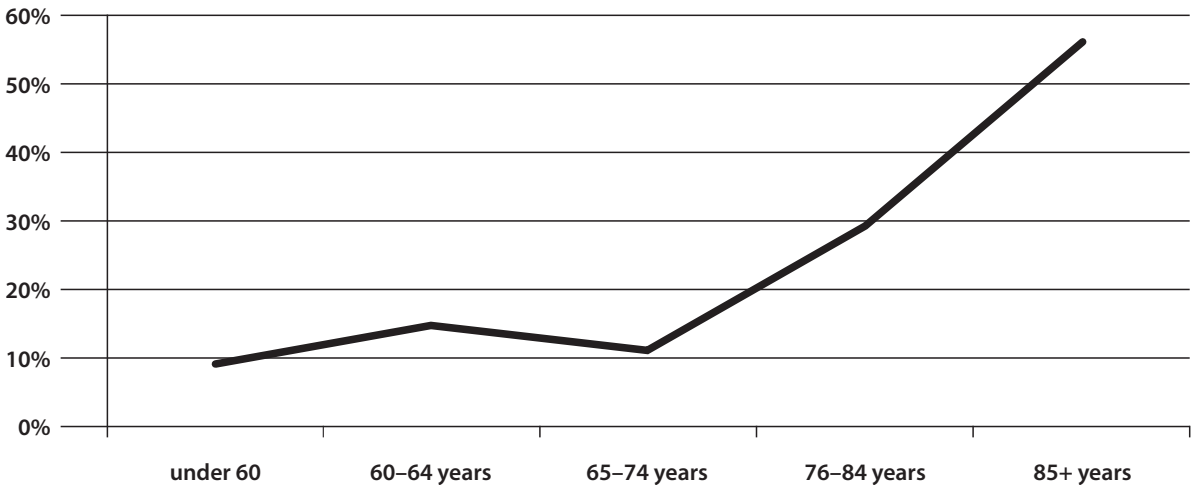


This graph excludes the “looking for work” category³⁶. Respondents also were given the option to respond “other” and to further specify. Many provided details such as type of income source (pension etc), type of employment or interests, and details of disability that precluded working.

- I work full time
- I work part time
- I volunteer
- I am retired

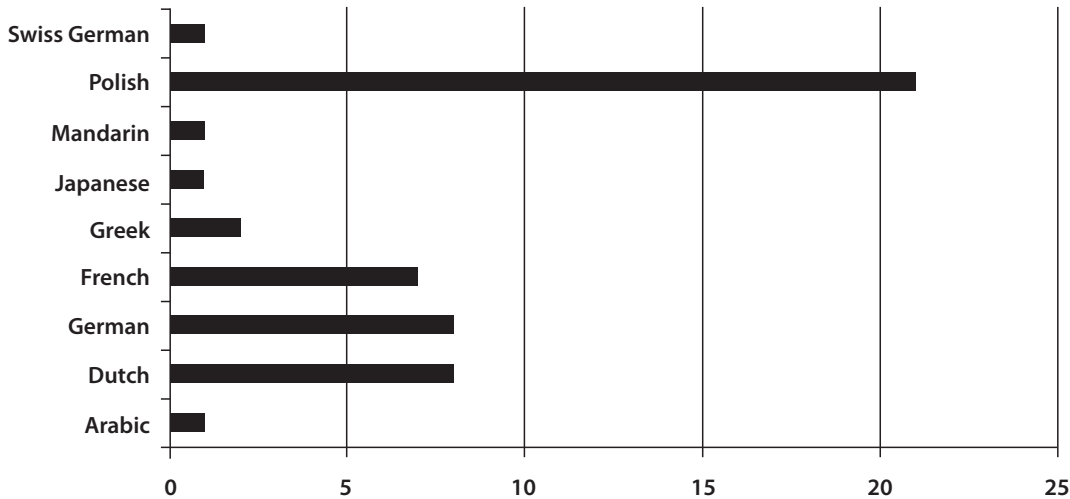
36 Excluded as there was only one respondent, who marked their age group as 60-64.

Figure A2. Assistance required with daily living activities by age group



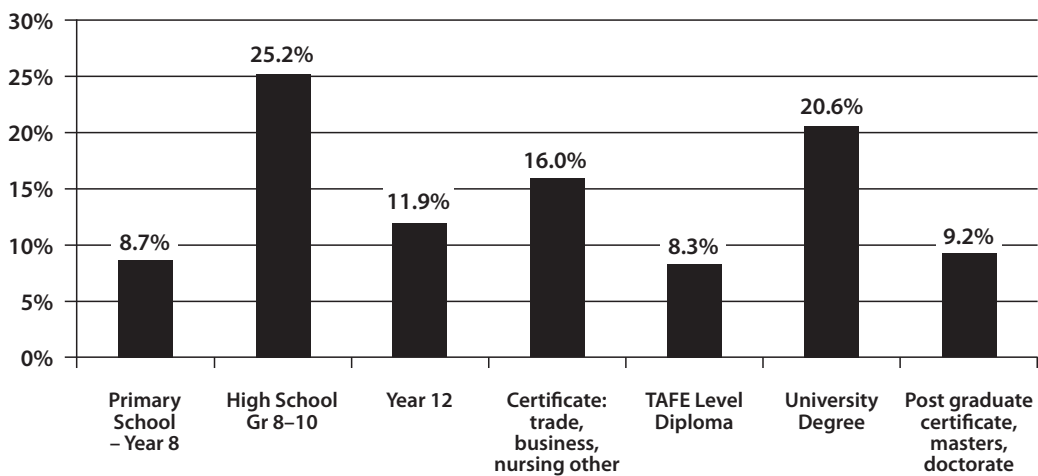
The dramatic increase in the number of people requiring some assistance with daily living activities after the age of 75 foregrounds the importance of providing suitable transport options for people to be able to access social networks. It is also suggestive of the increased need for access to technology in the older age groups, as much information about help to stay independent is now available online.

Figure A3. Language other than English spoken at home by number



The high number of Polish respondents reflects the sampling strategy which targeted COTA member organisations, and elicited a high number of surveys returned from members of the Polish Welfare Organisation.

Figure A4. Educational attainment of survey participants



As this graph shows, respondents represent a broad range of education levels, from primary school through to PhD.

APPENDIX B. FACING THE FUTURE DEMOGRAPHIC DATA

The following information is selected from COTA Tasmania's 2013 demographic profile publication, *Facing the Future: A Baseline Profile on Older Tasmanians*.

- 'young old': 60-74 years
- 'mid old': 75-84 years
- 'older old': 85 years and over.

Age Categories

When compiling and analysing the data contained in the report, COTA adopted the Facing the Future report definitions of age range (or age categories), which are:

Using these sub-categories enables comparison between age cohorts.

From the ABS Census of Population and Housing data, numbers and percentages of older Tasmanians in 2011 were as follows:

Table B1. Number and Proportion of Older Tasmanians.

Cohort	Age group	Number	Percent of Tasmania's population
young old	60-74 years	77,493	16%
mid old	75-84 years	25,696	5%
older old	85 + years	10,251	2%

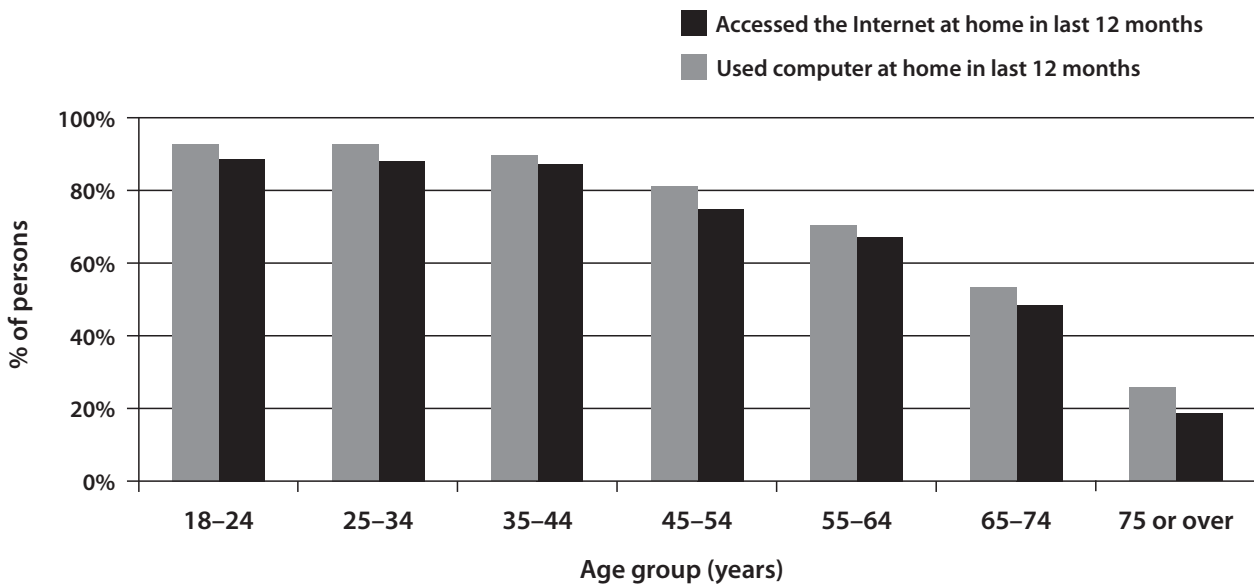
At the 'younger' end of the 'old' spectrum there is the 'baby boomer' generation, many of whom are still in paid work and are actively and meaningfully engaged in their communities. At the 'older' end of the 'old' spectrum there is a marked increase in the number of people aged 85 years and over, (the older old), many of whom are also meaningfully engaged in their communities.

Internet Use and Connection

As Tasmania's Social Inclusion Strategy points out 'the ability to access and use computers and telecommunications technology is becoming increasingly important for participation in modern society ... People without access to these technologies are increasingly at risk of social exclusion as a result – a phenomenon dubbed "digital exclusion"³⁷.

³⁷ Adams, 2009

Figure B1. Use of information technology (% of age group)³⁹

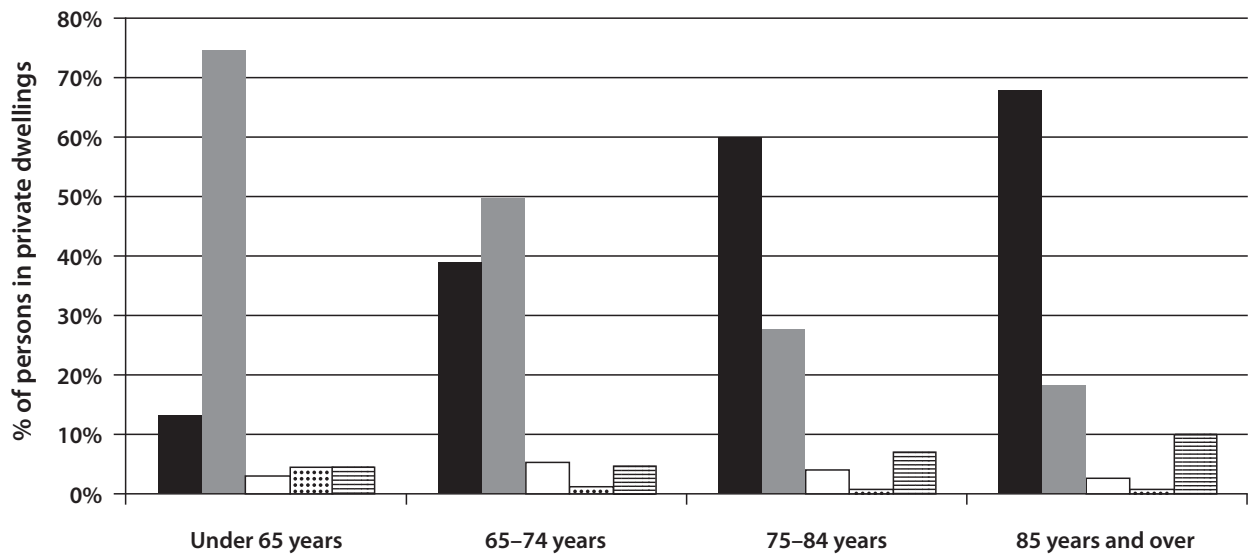


Of the Tasmanians aged 65+ years using the Internet for online shopping, 9% were downloading videos, movies and music, 19% were listening to music or watching videos or movies online and 34% were purchasing good or services online.³⁹

38 Data source: ABS General Social Survey 2010

39 ABS, 2013, Presentation : on 'Who are Tasmania's older people?' using data from ABS Arts and Culture in Australia: A Statistical overview, 2012, (series 4172.0)

Figure B2. Type of household Internet connection (% of persons in private dwellings)⁴⁰



The above table illustrates the decline in household broadband Internet connection, alongside the increase in households with no Internet access with increasing age. It is interesting to note that Tasmanians under 65 years of age were most likely to report 'other' type of Internet connection, while those aged 65-74 and 75-84 years were more likely to have a dial-up Internet connection. This differential access to faster technology may explain lower usage, and will predictably improve with wider access to the National Broadband Network.

- No Internet connection
- Broadband connection
- Dial-up connection
- ▤ Other connection
- ▨ Not stated

⁴⁰ Data source: ABS Census of Population and Housing 2011

APPENDIX C. SURVEY

SURVEY on the Information Needs of Older Tasmanians

We want to know how you find out information and what barriers / difficulties you face in finding the information

If completing this survey on behalf of someone else
please describe your relationship to the person

Male Female

I am 60 – 64 years 65 – 74 years 75 – 84 years 85+ years

Postcode Council/Local Government Area

I have lived at my address for years I have lived in Tasmania for years

Tick as many boxes as apply:

I work full time I work part time I am looking for work I volunteer

I am retired other

Highest level of school completed
OR qualification gained

Which language/s other than English
do you speak at home?

I need assistance with daily living (eg meals, mobility, personal care) YES NO

I get government assistance to support my daily living YES NO

I have family or friends who support my daily living YES NO

1. Your phone, computer and internet use:

a) I use a home phone/land line YES NO

b) I use a mobile phone YES NO

c) I use a computer YES NO

d) I access the internet at home YES NO

e) I don't have the internet at home but I access it elsewhere YES NO

If yes, where do you usually access the internet?

2. Which of the following sources do you generally use to find out information relevant to you and/or other seniors you know? *(Tick as many boxes as apply)*

home care/home help	<input type="checkbox"/>	Seniors Card Directory	<input type="checkbox"/>	Service Tasmania	<input type="checkbox"/>
doctor/s	<input type="checkbox"/>	radio	<input type="checkbox"/>	local council office	<input type="checkbox"/>
pharmacy	<input type="checkbox"/>	television	<input type="checkbox"/>	council newsletter	<input type="checkbox"/>
websites	<input type="checkbox"/>	newspapers	<input type="checkbox"/>	service directory	<input type="checkbox"/>
white/yellow pages	<input type="checkbox"/>	community groups	<input type="checkbox"/>	Centrelink	<input type="checkbox"/>
TasCarepoint	<input type="checkbox"/>	Commonwealth Care Link	<input type="checkbox"/>	My Aged Care	<input type="checkbox"/>
<i>The Senior Tasmania</i>	<input type="checkbox"/>	<i>Prime Times Tasmania</i>	<input type="checkbox"/>	Service clubs	<input type="checkbox"/>
telephone helplines	<input type="checkbox"/>	LINC Tasmania library service	<input type="checkbox"/>	community house	<input type="checkbox"/>
COTA magazine	<input type="checkbox"/>	family and/or friends	<input type="checkbox"/>		
Other/s	<input type="text"/>				

3. When faced with a new and potentially life-changing situation, eg a sudden health issue; changing living arrangements; altered financial circumstances; who or what do you rely on for information?

4. In an emergency situation, eg bushfire, how do you find out what action/s you need to take?

5. What types of information and/or services do you need regularly?

6. Generally, what difficulties, (if any), do you experience in finding out the information you need? eg; text/font size too small; long helpline waiting times; confusing instructions; too many phone prompts; inaccessible online forms

7. If you have listed any difficulties in finding out the information you need (question 6 above), what would solve these difficulties?

8. Is there anything else you would like to tell us about how you find out information or any difficulties you face?

Thank you for completing this survey. Your responses will be useful in working to improve the ways that information is made accessible.

APPENDIX D. LIST OF USEFUL RESOURCES

Articles

DPS News. (2014) Positive Ageing, *Be Social to Reduce Mental Decline*
www.agedcareguide.com.au/news/2014/10/03/be-social-to-reduce-mental-decline/

Bhardwaj, R. AGEWAYS, Practical Issues in ageing and development. (2014) "Communicating Clearly". Issue 82, March, p.7

Thomacos, N. & Keleher, H. (2009) *Health Literacy and vulnerable groups: What works?* Melbourne Department of Health Social Science, Monash University

Communication Tools

Communicate Clearly: A guide to Plain English (2013) 26TEN, Tasmanian Government.

Communication and Health Literacy Toolkit (2013) Population Health Services, Department of Health and Human Services, Tasmania.
www.dhhs.tas.gov.au/pophealth/health_literacy/health_literacy_toolkit

Technology Overview: support options for people with low vision or blindness
www.visionaustralia.org/living-with-low-vision/learning-to-live-independently/using-technology-and-computers

LINC Tasmania technology sessions

LINC Tasmania offers a range of basic technology sessions. There are sessions (free and low cost) which are frequently updated, for mobile phone use, using tablets, internet and email. See the LINC Tasmania website for full details at www.linc.tas.gov.au or phone your local LINC Tasmania service point to find sessions being held in your area.

Reports

Australian Human Rights Commission. (2013) *Fact or Fiction? Stereotypes of Older Australians Research Report*.

Dickins, M. Social Action and Research Centre, Anglicare Tasmania (2014). *Connecting All Tasmanians*. Digital inclusion: taking up the challenge
<https://www.anglicare-tas.org.au/research-library/report/connecting-all-tasmanians>

Web Design Guide

The Australian Government mandates WCAG 2.0 requirements need to be met by all government websites – details of what this means can be found here: <http://webguide.gov.au/accessibility-usability/accessibility>

See also: <http://www.w3.org/WAI/older-users/>

APPENDIX E. FINDING OUT PROJECT WORKING GROUP

Rebecca Moles	Manager, Policy, Communities, Sport and Recreation Tasmania, Department of Premier and Cabinet (DPaC) (Chair of Working Group)
Margaret Kelly	Principal Liaison Officer, Older Persons, Communities Sport and Recreation Tasmania, DPaC
Jo Hall	Policy Analyst, Communities, Sport and Recreation Tasmania, DPaC
Sue Leitch	CEO, COTA Tas
Soula Houndalas	Project Officer – Positive Ageing, Conversations With Our Community, COTA Tas
Jo Beck	Manager LINC's Library Services and Collections, Department of Education (DoE)
Jennifer Jerome	Senior Policy Advisor, LINC Tasmania, DoE
Liz Bingham	Policy Officer Preventive Health – Population Health, Department of Health and Human Services (DHHS)
Mark Randall	Region Manager Southern Tasmania, Commonwealth Department of Human Services
Christine Watson	Community member
Natalie Rose	Coordinator, Individual Support, Veranto
Bev Henry	Manager, Commonwealth Respite & Carelink Centre, Community Based Support South



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