



**2009 - 2010**

**Budget Submission to the**

**Queensland**

**Government**

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### **1. Executive Summary**

National Seniors welcomes the opportunity to highlight some of the pertinent issues identified by the Queensland Policy Group and the broader Queensland membership.

The priorities outlined in this submission are considered by National Seniors to be feasible for Government, and are likely to impact positively on the lives of senior Queenslanders.

This submission focuses on recommendations to the Queensland Government that fit into five (5) policy priority areas, which include: health; financial literacy, support and protection; transport; affordable housing; and grandparenting.

We look forward to a favourable outcome for our members in the 2009-2010 Queensland Budget.

## 1/ Health

In the context of population ageing, government spending is projected to significantly increase, particularly in key areas such as health and aged care. As this will impact on all levels of government, it is essential that the Queensland Government takes responsibility for those areas of health care, which currently fall under its authority. By failing to directly address the causes of poor health, a sole emphasis on primary health care will do nothing to reduce the numbers of people requiring health care in the future. A greater focus on preventative health will assist in containing future health costs for government and improving the quality of life for older Australians.

## 2/ Financial Literacy, Support and Protection

As older people have a lower level of financial literacy and are therefore at an increased risk of fraud and scams, there is a need for legal support services to protect these individuals.

Increased living costs are having an impact on many retirees who are struggling to make ends meet. Many are turning to reverse mortgages to assist with living costs. Therefore, there is need for greater financial literacy education, particularly relating to reverse mortgage products, to enable people to make informed choices.

## 3/ Transport

The previous attempts by the Commonwealth Government to introduce a national reciprocal transport scheme have been unsuccessful, as the perceived cost is a major sticking point. The new Commonwealth Government has stated an intention to introduce national transport reciprocity. National Seniors encourages the Queensland Government to cooperate with the Commonwealth and States and Territories to implement a nation-wide reciprocal travel agreement for seniors card holders.

## 4/ Affordable housing

The decline in housing affordability in Queensland is of particular concern to many older members of the community. Accordingly, any new policies aimed at increasing the availability of affordable housing, should give particular attention to the special needs of older Queenslanders.

To meet the need of older people, there is a need for new developments to include, at a reasonable cost, more modest one- or two-bedroom houses on smaller, low maintenance blocks of land with good access to transport, shopping and other services including medical, dental, recreational and other care and support services.

## 5/ Grandparenting

Grandparents and other relatives are increasingly being called upon to provide care for children, due to a range of often traumatic events, including parents' drug or alcohol abuse, gambling, mental illness, physical illness or death. The decrease in availability of foster carers is also placing increased pressure on grandparents to take on caring roles.

## 2. About Us

### Background

National Seniors Australia is the country's largest seniors' organisation with over 280,000 members (**including over 100,000 members in QLD**). We are a not-for-profit community organisation that seeks to: provide economic and social benefits for people 50 years and over; represent our members' views to government at all levels; and make donations and provide service and advice to charitable institutions assisting people 50 years and over.

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

### Policy

**National Seniors Queensland Policy Group (QPG) was established in 2006 and plays a key role in identifying emerging issues and trends in the State. The QPG also acts as a conduit between National Seniors members in the State, relevant community organisations, and the QLD Government.**

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

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

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

### Research

National Seniors Productive Ageing Centre (NSPAC) was established to advance knowledge and understanding into all aspects of productive ageing to improve the quality of life of people aged 50 and over. The NSPAC, also based in Canberra, is co-funded by National Seniors and the Commonwealth Department of Health and Ageing. Key objectives of NSPAC, are to: initiate, develop and support innovative and high quality research on issues that impact the ability of seniors to contribute productively to the economy and society; inform Government and community on productive ageing matters; and raise awareness of research findings which would be of use to individuals.

### 3. Demographic Snapshot

#### Australia-wide

The ageing of the population over the next 50 years will present major challenges and opportunities and will therefore require an increasing focus for government in terms of both economic and social policy decisions. The population aged 50+ will increase from around 30% of the total population today to over 40% in 2050. This represents an increase of over 115% (ABS 2008).

Over the same period, the population aged 75+ will be even more marked, and will have an even greater impact on demand for essential services such as health and aged care. The proportion of the population aged 75+ will increase from around 6% today to over 12% in 2050, representing an increase of close to 230% (ABS 2008).

#### Queensland

By 2020 the number of Queenslanders aged 65+ is forecast to increase by about 70 per cent, from 530,000 to almost 900,000.

By 2101 the number of Queenslanders aged 50+ is forecast to increase by 167% and those aged 75+ are forecast to increase by 325%.

**Figure 5 - Growth in the population aged 50+ (as a % increase on 2006 figures):**

QLD	WA	NT	VIC	ACT	NSW	SA	TAS	Australia
167	163	150	110	101	91	73	55	115

**Figure 6 - Growth in the population aged 75+ (as a % increase on 2006 figures):**

NT	WA	QLD	ACT	VIC	NSW	TAS	SA	Australia
482	327	325	279	211	186	161	155	227

(Note – Figures 5 & 6 based on: ABS 3222.0 - Population Projections, Australia, 2006 to 2101 – Series B 2008)

#### Future Challenges & Opportunities

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

The Queensland State Government must also recognise that older Australians are a rapidly growing and diverse segment of the State's population. At one end of this spectrum, the 'baby boomer' population bulge is bringing increased numbers and new issues; such as ageing at home and employment flexibility (AIHW 2007). At the other end, increasing life expectancies are supporting marked growth in the numbers of people aged 75+, and associated increases in related care needs and health infrastructure.



## 4. Health

### 4.1 Preventative Health

In the context of population ageing, government spending is projected to significantly increase, particularly in key areas such as health and aged care. As this will impact on all levels of government, it is essential that the Queensland Government takes responsibility for those areas of health care, which currently fall under its authority. By failing to directly address the causes of poor health, a sole emphasis on primary health care will do nothing to reduce the numbers of people requiring health care in the future. A greater focus on preventative health will assist in containing future health costs for government and improving the quality of life for older Australians.

#### ***Mental Health***

Good mental health is fundamental to the well-being of individuals, their families and the community. Conversely, mental health problems and mental illness cause disability, poor quality of life and reduced productivity. Older people with mental health problems are more likely to have high levels of morbidity and mortality, have poor general health and chronic disease and higher rate of death including suicide.

It is estimated that one million Australian adults live with depression. Depression is higher in Aged Care facilities and may be as high as 51% of high care and 30% of low care residents. This raises concern as a differential diagnosis of dementia may hide the treatable condition of depression.

Although organisations such as Queensland Mental Health, the Mental Health Association and Beyondblue actively work to improve awareness of mental health issues, National Seniors believes there needs to be a far greater emphasis on prevention and early intervention.

There is an increasing body of evidence to suggest that continuing physical, mental and social activity is a significant factor not only in maintaining cognitive functioning but in combating the onset of the physical symptoms of forms of dementia including Alzheimer's disease. Modest expenditure on promoting lifelong learning, social engagement, appropriate nutrition and physical activity has the potential to provide substantial savings in the costs of managing dementia. It has been estimated that dementia already costs Australia over \$6 billion or nearly 1% of GDP and may rise to over 3% of GDP by mid-century.

Research has shown that a greater proportion of older Australians will be living alone and women will outnumber men. Community and government should be concerned that this cohort could become socially isolated and disconnected from the community and at risk of developing depression.

#### **Areas for Action**

**An increased focus on preventative healthcare specifically for seniors, in particular: raise awareness of older people's mental health issues.**

## **Oral Health**

There is a need to ensure good oral health for older people, to help maintain high levels of general health, quality of life, nutrition and social interaction. This can be achieved by multidisciplinary approaches to oral health assessment and support for maintenance of oral hygiene.

Poor oral hygiene can have many health implications including the psychological impact of depression and poor self-esteem; the social impact which can result in withdrawal from society leading to social isolation; and the nutritional effects which lead to other medical conditions. Therefore, it is necessary to focus on prevention of these problems. This can be achieved by better oral health education for older people, medical practitioners, and carers of older people.

One of the barriers to good oral care is the cost of dental treatment. Medicare allows 3 dental service visits at \$70 each equaling \$210 (Costa 2007, 15). A standard visit costs approximately \$120 (Choice 2007) and for more complicated procedures such as a common full crown, the cost can be between \$787 and \$1600 (Choice 2007). These charges are not compatible with the aged pension payment rate of \$537.70 (single) and \$449.10 each (couple) (Centrelink 2007).

Many older people are simply not able to access oral care because they lack transport or have limited mobility. Often older people perceive a lack of respect from some oral care providers which humiliates them and takes away some of their dignity. Finally, there is the problem of long waiting lists in Queensland for public oral health services (AIWH 2000; SCOA 2007; Chalmers et al 1999; AIWH 2002).

Barriers on a structural level include the fact that approximately 8% of older Australians over 70 years are living in residential care (Healthy Mouths Healthy Lives 2004). The medical staff and carers in these residential homes have limited, if any, oral care training (APH 1998). This coupled with the reality that dental needs are higher in older people living in residential care compared with older people who live independently (Saub and Evans 2001, 1998) means they get very little if any oral/dental care. This problem is partly due to lack of access to practical and affordable portable dental equipment and lack of dentists to attend functionally dependent older Australians.

It is vital that the Queensland Government develop strategies specifically for seniors that prevent and improve dental health outcomes. In order to achieve this there needs to be a comprehensive and multifaceted approach to oral and dental health.

### **Areas for Action**

#### **An increased focus on preventative health, specifically for seniors:**

- **Establish a dedicated unit that will lead and oversee the implementation of the recommendations contained in the National Oral Health Plan (2004-2013), specifically those that concern older Australians;**

- **Provide additional funding to clear the waiting list backlog for Queensland Public Oral Health Services; and**
- **Develop initiatives to increase the number of dental hygienists available in the public health system.**

## **4.2 Patient Travel Subsidy Scheme**

Queensland Health's Patient Travel Subsidy Scheme (PTSS) has been in operation for many years without adjustment to the levels of subsidy for accommodation. Whilst National Seniors notes that the subsidy for use of a private motor vehicle was increased in 2007/08 from 10 to 15 cents per kilometre, the increase was only minimal and did not include any change to the accommodation allowance. Current assistance includes an accommodation component of \$30 per night for commercial accommodation and \$10 for private accommodation. Non-concession card holders receive no assistance for the first four nights.

Other state and territory governments operate similar assistance schemes to Queensland, to assist patients with travel and accommodation costs incurred when travelling long distances, or staying away from home while receiving specialist medical treatment. Recently, Victoria increased the travel component to 17 cents per kilometre and \$35 per night for accommodation.

Whilst direct comparisons with subsidies paid to approved patients by other state governments is influenced by minor differences in approach, this does not prevent indicative analysis which shows Queensland to be behind other states in relation to the subsidy for accommodation.

Accommodation subsidies provided by Queensland are comparatively low at \$30 per night with no subsidy for the first four nights unless a patient is a concession card holder. An increase to \$50 is sought as is the removal of the four night lead-in. Rental or leased accommodation is generally cheaper and more accommodating for longer term stays, therefore this may be a better option for both the Government and for patients.

All state schemes provide for patient escorts if deemed necessary for medical reasons. Unfortunately, older people are often unable, unaware or too proud to raise this issue with their medical officer. In some instances medical officers may not be aware of the finer points for recommending an escort for the PTSS. Some patients are driving hundreds of kilometres alone when they usually drive only within their local area. Improved awareness is necessary for both the older patient and medical officers. Whilst National Seniors Australia can assist with educating its members, improving medical officers' attention to this requirement can be addressed by Queensland Health.

### **Areas for Action**

- **Increase accommodation assistance to \$50 per night and abolish the four night lead-in for patients without a concession card;**

- **Increase the allowance for kilometres travelled by rural and remote patients to specialist appointments in city hospitals from the present 15 cents per kilometre to 25 cents per kilometre;**
- **Raise awareness amongst GPs, medical officers and patients, of availability of escorts on long trips between home and hospital for seriously ill patients;**
- **Investigate the use of alternative accommodation options under the Patient Travel Subsidy Scheme (for rental and/or leased accommodation for patients requiring longer hospital stays); and**
- **Review the current transportation arrangements for older patients on discharge from hospital who may also have to attend appointments from rural centres.**

### **4.3 Health Consumer Queensland Ministerial Consumer Advisory Committee**

In August 2008 the Health Minister announced the establishment of the Health Consumer Queensland Ministerial Consumer Advisory Committee. The aim of the Advisory Committee is to give Queensland consumers a stronger voice in public health provision.

Although it is acknowledged that the committee has established networks with key health bodies such (Office of the Public Advocate; Adult Guardian and the Health Quality Commission), National Seniors believes it is imperative that the framework which will determine how the committee will represent health consumers is developed as a matter of urgency. Health consumers, particularly older health consumers, need avenues (such as this advisory committee) to raise their concerns with the current health system.

#### **Areas for Action**

- **Provide an annual report to Queensland Health Consumers on the progress of the newly established Health Consumers Queensland Ministerial Consumer Advisory Committee.**

## 5. Financial Literacy, Support and Protection

According to a recent ANZ 2008 Survey of Financial Literacy, older people have a lower level of financial literacy and are therefore at an increased risk of fraud and scams. Therefore, there is a need for legal support services to protect these individuals.

The Department of Communities, initiated a \$1.9 million Seniors Legal and Support Service pilot project across Queensland in 2007-08. The 2008-09 Budget has supported this project for a further \$109 million to continue the pilot project. This project provides information, advice and support regarding elder abuse and financial exploitation. This support service is available in five pilot sites. Following evaluation, National Seniors is calling for the continued funding and roll-out of this service to other areas across Queensland.

### 5.1 Reverse Mortgages

Increased living costs are having an impact on many retirees who are struggling to make ends meet. A recent survey by Deloitte Actuaries found that in the year to June 30 2008, the number of reverse mortgages jumped 27 per cent and that retired single women were the biggest borrowers. Many are turning to reverse mortgages to assist with living costs. Therefore, there is need for greater financial literacy education, (particularly relating to reverse mortgage products) to enable people to make informed choices.

The risk with reverse mortgages is that the amount owed on the loan may be more than the value of the home. This is referred to as 'negative equity.' The loan may affect the eligibility or the amount of pension payments. It may also leave the individual with insufficient funds to pay for residential accommodation.

While many individuals understand the cost and benefits of reverse mortgage packages, evidence shows that an alarming amount do not. A recent *ANZ Survey of Adult Financial Literacy in Australia 2008* (released October 2008), asked all respondents aged 60 years or over if they knew what a reverse equity loan was and, if so, what things they would consider when deciding whether or not to take out a loan of this type. Given that 54% didn't know what a reverse equity loan was and one in three of those who did (another 15% of all those aged 60 years or over) didn't know what to consider when deciding whether or not to take one out, there is a need for greater financial literacy education for older people in the community.

#### Areas for Action

- **Expand the Seniors Legal and Support Service pilot programs (following evaluation);**
- **Provide financial literacy education and support programs for older people, which include greater information on the implications of Reverse Mortgages; and**
- **Continue to fund/support the role of the Elder Abuse Prevention Unit, particularly in the area of financial abuse by families/carers.**

## 6. Transport

### 6.1 National Transport Reciprocity

The previous attempts by the Commonwealth Government to introduce a national reciprocal transport scheme have been unsuccessful, as the perceived cost is a major sticking point. The new Commonwealth Government has stated an intention to introduce national transport reciprocity.

Travel is a particularly important issue for seniors, due to increasing travel costs. The trend towards the mobility of Australian families and increases in family breakdown, all contribute to the wider spread of families across Australia. These aspects combine to exacerbate the isolation of seniors who, without family support, can place increased pressure on already stretched health budgets, far earlier in their life span. Affordable travel for seniors across Australia would benefit not just seniors but the community in general. It would reduce social isolation and encourage greater family cohesion and support.

Introducing a national transport concession scheme is a stated aim of the current Commonwealth Government. Other State and Territory Governments have been proactive with reciprocal arrangements, including Tasmania and the ACT.

National Seniors encourages the Queensland Government to cooperate with the Commonwealth and other States and Territories to implement a nation-wide reciprocal travel agreement for seniors card holders.

#### Areas for Action

**- Proactively engage with the Commonwealth, State and Territory Governments to implement a single interstate scheme for Seniors Card holders across Australia.**

### 6.2 Public Transport

The Translink electronic integrated ticketing system using the 'Go Card' was recently introduced, replacing the previous ten ticket system in Queensland. Seniors and Concession Card holders' fares are half the cost of a full adult fare, which is estimated by the number of zones traveled. There is a further discount for off-peak travel. The 'Go Card' can also be used on the Air Train to the Brisbane Airport however, there are conditions.

By comparison, NSW Sydney Transport and Light Rail have concessional fares such as the Pensioner Excursion. Under the Government 'Fair Fares Plan Card,' seniors concessions cover all day travel around Sydney and Newcastle and has been extended to cover private bus operators in Sydney metropolitan, across city rail, state transport bus and NSW Ferries. The Cost for concession card holders is a flat \$2.50.

Issues with QLD Translink (as identified by National Seniors' members) include: increase in travel costs by up to 25%; disadvantages part-time mature-age workers (as they are ineligible for concessions); the Go Card is not readily available; the Go

Card can not be used on public holidays; and there are technical difficulties with swiping the Go Card for older people with disabilities.

### Areas for Action

- **Retain the ten trip ticket for concession card holders; and**
- **Introduce a fairer Seniors Concession Card which entitles those eligible to low-cost travel of a flat \$2.50 throughout Queensland.**

## 7. Affordable Housing

The decline in housing affordability in Queensland is of particular concern to many older members of the community. Accordingly, any new policies aimed at increasing the availability of affordable housing, should give particular attention to the special needs of older Queenslanders.

The agreed basic definition of “affordable housing” is housing which is suitable for: low-income households (in terms of design, location and access to services and facilities); and that cost less than 30% of household income for occupants in the bottom 40% of household incomes.

The continuing decline in housing affordability in Australia is well documented. In Queensland, the median house price more than doubled from approximately \$160,000 in 2001 to \$325,000 by the end of 2006, far outrunning the rise in household incomes. REIQ figures show that in the 12 months to the end of March 2008, Brisbane's median house price increased by 20.5 per cent to \$470,000. Many major regional centres such as Ipswich, Rockhampton, Townsville and the Atherton Tablelands have experienced similar increases, while Gladstone, Maryborough and a number of centres near mining developments have experienced even higher increases.

### 7.1 Private Rental Housing

The increased house prices, and increased mortgage costs are funneling more and more would-be property buyers into the rental market. The proportion of low-rent homes has fallen by at least 15% and the availability of public housing has fallen by at least 30%. It is estimated that at least 750,000 households now have housing costs above the commonly used affordability benchmark of 30% of household income, and many are paying more than 50%.

There is a need for a new approach to promote the provision of private rental housing. It has been suggested that all new housing developments approvals should be conditional upon the inclusion of a specified proportion, of approximately 10% to 15%, of affordable housing. New initiatives to encourage private investment in affordable housing need to be introduced, such as capital grants or rental subsidies paid to landlords providing housing to low-income households. With suitable subsidies it may be possible to attract investment from such sources as superannuation funds.

### 7.2 Public Housing

It has been estimated that the supply of government housing in Australia is currently at least 100,000 lower than if it represented the same share of total housing stock a decade ago. In Queensland the stock of public housing is approximately 57,000 and there is a waiting list of approximately 38,000 households. Over a third of those in public housing are people with a disability and it is estimated that 30% of those on waiting lists (representing approximately 11,400 households) are pensioners. In addition to increasing the stock of government housing, incentives should be offered to local government councils and non-profit housing organisations to provide affordable housing with similar terms and conditions to government housing.

Affordable housing is everybody's responsibility, and this requires all sectors of the community to work together. Business, industry, not-for-profit, religious, education, healthcare and government representatives must work together to shape an overall plan for Queenslanders to ensure its implementation.

### **7.3 Appropriate Housing**

To meet the need of older people, there is a need for new developments to include, at a reasonable cost, more modest one- or two-bedroom houses on smaller, low maintenance blocks of land with good access to transport, shopping and other services including medical, dental, recreational and other care and support services.

At the same time, despite the shortage of low-cost housing, the sizing and mismatch of the housing stock available or envisaged by developers and rental providers against the needs of the would be occupants continues to be a problem. Some developments have proved unpopular because individual units have been poorly designed or are too small for long-term residents. Queensland based retirement housing developer, Lumina, also reports that some major lenders have refused to finance units of less than 50 sq m. Greater consultation between housing designers and prospective residents is urgently required.

Older residents often decide to move to more suitable accommodation to meet their needs and therefore free up accommodation that may be more appropriate to the needs of larger households. Older home owners relocating to more suitable housing should therefore be supported by the provision of assistance with associated costs such as conveyancing, service connection fees and removal expenses.

### **7.4 Sustainability**

Retirement villages now house some 150,000 older Australians in an increasing range of geographical locations. There is a great diversity of housing designs and levels of support services as well as a great variety of ownership, leasing or rental provisions and associated financial arrangements. There is, however, no example nationally of a seniors rental model that delivers good quality accommodation and achieves healthy returns for investors. There are some seniors rental developments that are almost empty, and many are operating with occupancies of 80% or less because the units are too small (in some instances just 35sq m) making them unattractive for prospective residents.



## Areas for Action

**All policies adopted to increase the supply of affordable housing, should take into consideration the needs of older members of the community. In particular:**

- **Ensure a suitable proportion of the total affordable housing stock is appropriate to the needs of older residents (e.g. location; number and size of rooms; ease of access and maintenance; and safety and security);**
- **Ensure housing for seniors is located in proximity to a range of services, transport and recreational facilities;**
- **Ensure the range of affordable housing provides a choice of housing styles and tenure arrangements (including home ownership; shared equity; cooperative ownership; long lease; and rental) that are covered by strong consumer protection provisions; and**
- **Provide relocation assistance to older residents down-sizing to more suitable accommodation to offset the cost of legal advice, stamp duty, conveyance, service connection fees and removal expenses.**

## 8. Grandparenting

Grandparents and other relatives are increasingly being called upon to provide care for children, due to a range of often traumatic events, including parents' drug or alcohol abuse, gambling, mental illness, physical illness or death. The decrease in availability of foster carers is also placing increased pressure on grandparents to take on caring roles.

According to the latest available data from the Australian Bureau of Statistics, in 2003 there were 22,500 grandparent families with 31,100 children aged 0-17 years in Australia, representing around 1% of all families. Approximately 89% of grandparent families had one or two children in their care, and 11% had three or more children.

Grandparents differ from other adults caring for children. They are often retired or approaching retirement and compared with younger parents have lower financial resources and less physical stamina. They often face difficulties resuming parenting at an older age, particularly significant financial, psychological and social costs (Families Australia 2007).

The transition to being a grandparent guardian can be sudden and can include high initial costs relating to accommodating children (e.g. clothes, bedding, school supplies) as well as ongoing caring costs (e.g. food, health care). The ongoing cost of caring for children may not have been planned for and may affect the sustainability of the grandparent's retirement income (ABS, 2005).

According to the ABS, about half (47%) of grandparent families were lone grandparent families (compared with 21% of other families with children aged 0-17 years being lone parent families). Therefore, support services such as respite care are vital for these grandparents to enable them to have a break from providing primary care and would have significant benefits for grandparents in terms of health and wellbeing and enable greater participation in work, leisure and social activities.

Grandparents from Indigenous and culturally and linguistically diverse (CALD) groups, have particular needs that need to be addressed. Support services for these grandparents need to be culturally appropriate and information provision needs to be available in a diverse range of languages. Grandparent support services should also ensure that there are cultural liaison officers who can assist grandparents from diverse backgrounds with navigating the system and accessing appropriate supports.

An initiative that supports grandparents that National Seniors strongly endorses is 52 weeks of unpaid parental leave for public servants, which has been introduced in the ACT early this year. The ACT was the first jurisdiction in Australia to introduce such legislation, which will assist mature-age workers with grandparenting responsibilities and will assist the Government in retaining mature-age workers. National Seniors believes that the Queensland Government is well placed to provide leadership in the state and should introduce such legislation to allow mature-age workers greater flexibility in remaining in the workforce whilst carrying out caring roles.

#### Areas for Action

- **The Queensland State Government should take a leadership role in providing all Queensland public servants with 52 weeks of unpaid grandparental leave, similar to legislation introduced in the ACT;**
- **Provide payment of the Foster Carer Allowance to grandparents who are providing primary care for their grandchildren because of child protection orders;**
- **Establish grandparent liaison officers within child protection and other support agencies to assist grandparents navigating the system;**
- **Provide greater funding or grants to State and local community groups to enable them to provide greater information and support services (respite care, support services) to grandparents; and**
- **Ensure the needs of Indigenous and culturally linguistic diverse (CALD) grandparents are met by providing services that are culturally appropriate.**