RESULTS OF THE PHYSICAL DISABILITY COUNCIL’S 2008 SURVEY ON THE IMPACT OF AGEING ON PEOPLE WITH A DISABILITY

Context

In 2008 the Physical Disability Council of New South Wales (PDCN) carried out a survey of people with disabilities across New South Wales. In total 551 surveys were commenced and 335 were completed. The broad goal of the survey was to investigate the impact of ageing on people with a disability in a number of key areas: Personal Assistance, Mobility/Transport, Housing, Social Networks, Health/Disability and Financial Security.

Methodology

The survey was developed by people who have physical disabilities associated with the Council and piloted in February in one region. The final survey contained open-ended questions on the current levels of need and the anticipated levels of need and concerns about meeting the need. Survey respondents were only asked to fill in their post code in order to protect confidentiality.

The survey was distributed by mail through existing networks and electronically during March to July 2008 and returned to the Council or accessed electronically.

An overall report was produced to enable identification of key areas of need across New South Wales as well as regional issues.

Findings

About 43 percent of people receive personal assistance from spouse/partner or family members. People expressed concern about the availability of personal assistance in terms of current and future need where the health of family carers could decline.

Most people reported personal mobility through aids, wheelchairs and/or scooters and 43 percent of people drive a vehicle. The lack of accessible parking at shopping and medical centers was evident in the responses. The degree of mobility determines access to social activities, essential goods and services and thus people who are not mobile are restricted to community transport and public transport which
as noted by many people are inadequate owing to the lack of bus services and accessible buses, particularly in some regional (Nepean, Central Coast) and rural areas (Riverina/Murray, Illawarra) but also in urban areas. In addition, community transport arrangements are inadequate in some regions (Central Coast, Hunter). For some people who use wheelchair accessible taxis the cost, availability and reliability of accessible taxis sometimes prohibit the use in times of need. Overall, people spoke of the need for accessible footpaths and seating in public spaces.

About one third of people surveyed live in the family home. Eleven percent of people surveyed reported a need for home modifications as personal mobility decreased. There is also need for affordable and accessible housing for people ageing with a disability and some people expressed concern at the cost and availability of aged care accommodation whereas others expressed a desire to remain at home.

Despite the high percentage of people who live alone (20%) social needs are currently being met through participation in community organizations, recreational or leisure activities, volunteer and paid work, friends, family, religious networks and organizations and specific support services. Overall people expressed concern about the potential for social isolation as their needs increased and the health of family members who provide assistance declines.

People in rural areas identified a need for more medical professionals. Difficulties encountered by people in meeting health needs included inflexible transport arrangements after hours in times of ill health, long waiting times and high costs associated with medical visits. In addition, there is a lack of knowledge about some conditions among medical professionals and a need for specialized clinics and training. The shortage of funding for prosthetics (PADP Program) was also an area of concern.

Most people are concerned about the future in terms of financial security. Some people are concerned about retirement, when they cannot afford to maintain homes and vehicles. Others are concerned about the future costs of aged care housing as the population ages. Particular areas that provoke anxiety about insufficient future funding include health, personal care, housing services and facilities.

Implications for Policy and Practice

• Inter-agency co-ordination and flexible service delivery
• Increased funding for people with disability and their families to meet the costs associated with disability
• Increased funding for personal assistance
• Provision of accessible infrastructure, such as parking, public transport and additional subsidy for wheelchair taxi
• Strategies to maintain driving skills in older citizens.
• Funding for affordable, accessible housing and subsidy for home modification to existing housing
• Funding for more doctors in rural areas, training and specialized clinics.