

THE AUSTRALIA I WANT TO LIVE IN

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WHEN I BECAME AUSTRALIAN OF THE YEAR, I SAID THAT IF I CAN CONTRIBUTE TO ACHIEVING A MORE POSITIVE APPROACH TO AGEING, DELIVERING ON ALZHEIMER'S AUSTRALIA'S FIGHT DEMENTIA CAMPAIGN AND PUTTING THE SPOTLIGHT ON MEDICAL RESEARCH, I WOULD FEEL THAT IN A SMALL WAY TO HAVE LIVED UP TO THE HONOUR I'VE BEEN GIVEN.

OLD IS A WORD MOST PEOPLE FEAR BECAUSE IT'S ASSOCIATED WITH SLOWING DOWN – EVEN BREAKING DOWN, OF MENTAL FRAGILITY; OF BEING TOSSED ON THE SCRAP HEAP; OF FAILING FACULTIES AND ILL-HEALTH AND OF NO LONGER BEING VALUED.

AGEING IS AN UNKNOWN WORLD TO WHICH (IF WE ARE LUCKY ENOUGH TO LIVE THAT LONG) WE ALL MUST TRAVEL BUT BECAUSE IT OBVIOUSLY REPRESENTS CHANGE – A CHANGE IN LIFESTYLE, A CHANGE IN THE THINGS WE ARE ABLE TO DO, A REALISATION THAT ONE DAY WE MIGHT BE DEPENDENT ON OTHERS – PEOPLE FEAR IT.

I NEVER REALLY UNDERSTOOD WHAT IT MEANT TO GET OLDER UNTIL I GOT OLDER.

I NEVER HAD AN ARTHRITIC TWINGE UNTIL I WAS AUTOGRAPHING BOOKS IN MY MID-50s. I COULD HARDLY COMPLAIN – THE BOOK WAS SELLING LIKE HOTCAKES, BUT MY THUMB DIDN'T LIKE THE EXPERIENCE AT ALL.

I NEVER THOUGHT MUCH ABOUT BEING ON MY OWN UNTIL MY CHILDREN LEFT HOME.

I NEVER THOUGHT MUCH ABOUT DYING UNTIL MY FRIENDS BEGAN TO DIE – FROM CANCER – WHEN I WAS IN MY 50s.

I NEVER THOUGHT ABOUT OLDER OLD AGE OR DEMENTIA UNTIL I CARED FOR MY FATHER WHEN HE WAS IN HIS 80s. HE HAD VASCULAR DEMENTIA; HE ALSO HAD MACULAR DEGENERATION.

I ONCE READ A LINE IN A BOOK THAT HAS STAYED IN MY MIND. "IT IS ONLY THE ELDERLY WHO UNDERSTAND THE BREVITY OF LIFE." I DON'T THINK OF MYSELF AS ELDERLY BUT THOSE WORDS DO MAKE YOU STOP AND THINK.

BE THAT AS IT MAY, WE LIVE IN EXCITING YET WORRYING TIMES. WE ARE ON THE BRINK OF MAJOR SOCIAL REFORM IN THE AREAS OF DISABILITIES AND AGED CARE WHILE STILL EXPERIENCING A SENSE OF GLOOM ABOUT THE CONTINUING GLOBAL FINANCIAL UNCERTAINTY AND BUDGET DEFICITS.

AT THE SAME TIME WE SEE POIGNANT EXAMPLES OF DISCRIMINATION AND VIOLATION OF BASIC HUMAN RIGHTS EVERY DAY IN OUR AGED CARE SYSTEM.

I BELIEVE OUR NATIONAL DEBATE NEEDS TO BE MORE ABOUT THE AUSTRALIA WE WANT TO LIVE IN, THE KIND OF SOCIETY WE SHOULD BE AND LESS ABOUT WHAT PROGRAMS NEED TO BE CUT OR THE SIZE OF THE DEFICIT.

I AM PROUD AND *VERY* HAPPY TO LIVE IN A COUNTRY THAT HAS ONE OF THE LONGEST LIFE EXPECTANCIES IN THE WORLD. WE NOW LIVE ALMOST 25 YEARS LONGER THAN AUSTRALIANS WHO LIVED 100 YEARS AGO.

THE QUESTION WE NEED TO ASK OURSELVES IS: HOW DO WE WANT TO SPEND THOSE EXTRA YEARS OF LIFE? WHAT IS OUR VISION FOR AUSTRALIA AS OUR POPULATION AGES?

MY VISION IS SIMPLE. I WANT TO LIVE IN A SOCIETY THAT IS INCLUSIVE AND VALUES THE STRENGTHS AND CONTRIBUTIONS OF ALL MEMBERS OF OUR SOCIETY REGARDLESS OF THEIR AGE, DISEASE OR DISABILITY.

I WANT TO BELONG TO A SOCIETY THAT VALUES CHOICE OVER INSTITUTIONALISATION; THAT PROMOTES WELLNESS AND SOCIAL INCLUSION OVER ISOLATION.

SOME OF AUSTRALIA'S MOST SOCIALLY DISADVANTAGED GROUPS HAVE MADE THE DECISION TO TACKLE THE STIGMA AND SOCIAL ISOLATION THAT THEY HAVE EXPERIENCED FOR SO LONG.

BEYOND BLUE HAS PUT MENTAL HEALTH AND DEPRESSION IN THE FRONT OF PEOPLE'S MINDS AS SOMETHING THAT EVERY AUSTRALIAN SHOULD UNDERSTAND BETTER.

SIMILARLY, THE DISABILITIES MOVEMENT HAS ARGUED FOR MANY YEARS THAT PEOPLE WITH DISABILITIES SHOULD NOT BE DEFINED BY THEIR DISABILITY.

BUT IN SPITE OF THE WORK DONE OVER THE LAST FEW DECADES, STIGMA AND SOCIAL ISOLATION REMAIN.

LAST YEAR, A BEYOND BLUE SURVEY FOUND THAT ONE IN FOUR PEOPLE BELIEVE A PERSON WITH SEVERE DEPRESSION SHOULD JUST "PULL THEMSELVES TOGETHER". ONE IN THREE THOUGHT IT WOULD BE HELPFUL TO STAY OUT OF THE WAY OF SOMEONE WHO WAS DEPRESSED.

A SURVEY OF PEOPLE WITH DISABILITIES FOUND THAT 94 PER CENT OF PEOPLE WITH A DISABILITY FEEL THEY DON'T HAVE ENOUGH MEANINGFUL PARTICIPATION IN THEIR COMMUNITY.

THIRTY-NINE PER CENT SAID IF COMMUNITY ATTITUDES TOWARDS DISABILITY CHANGED THAT IT WOULD MAKE A BIG DIFFERENCE TO THEIR LIVES.

STIGMA IS ALSO ALIVE AND WELL WITH REGARDS TO DEMENTIA. TEN PER CENT OF AUSTRALIANS SAY THEY WOULD ACTIVELY AVOID SPENDING TIME WITH A PERSON WHO HAD DEMENTIA.

MANY PEOPLE ADMIT THEY AVOID SEEKING HELP FOR SYMPTOMS OF DEMENTIA BECAUSE THEY'RE WORRIED ABOUT THE DISCRIMINATION THEY WILL FACE IF THEY GET A DIAGNOSIS. THIS IS JUST NOT ACCEPTABLE.

THERE ARE EXAMPLES OF STIGMA WHEREVER YOU CARE TO LOOK. FOR INSTANCE FORMER BRITISH PRIME MINISTER, MARGARET THATCHER, WHO DIED LAST WEEK, HAD VASCULAR DEMENTIA YET THERE WAS BARELY A MENTION OF THAT FACT ON THE NUMEROUS TV, RADIO AND NEWSPAPER REPORTS OF HER PASSING.

NO ONE SHOULD FEEL ASHAMED TO HAVE DEMENTIA. IT IS NOT A NORMAL PART OF AGEING, IT IS A CHRONIC DISEASE.

BUT IT'S NOT JUST PEOPLE WITH DISEASE OR DISABILITY WHO ARE AFFECTED BY DISCRIMINATION. THIRTY PER CENT OF OLDER WORKERS REPORT EXPERIENCING DISCRIMINATION DUE TO THEIR AGE.

EIGHTEEN PER CENT OF PEOPLE OVER 45 WHO ARE UNEMPLOYED REPORT THAT THE MAIN REASON THEY'RE HAVING DIFFICULTY FINDING WORK IS THAT EMPLOYERS CONSIDER THEM "TOO OLD", OFTEN BEING FOBBED OFF WITH THE EXCUSE – "YOU'RE OVER-QUALIFIED".

THIS IS PARTICULARLY DISTURBING GIVEN THE KNOWN PHYSICAL AND MENTAL HEALTH BENEFITS OF STAYING ACTIVE AND A PART OF THE WORKFORCE AS WE AGE.

IT'S EASY TO BECOME DISHEARTENED BY THESE STATISTICS THAT REMIND US HOW MUCH HARDER WE HAVE TO WORK TO CREATE THE SOCIETY WE WANT TO LIVE IN – ONE THAT VALUES ALL PEOPLE REGARDLESS OF THEIR AGE OR DISABILITY.

GREATER AWARENESS WILL HELP... BUT IT IS NOT ENOUGH, NOT BY ANY MEANS.

WE NEED TO ACTIVELY PROMOTE SOCIAL INCLUSION. LET ME GIVE YOU SOME EXAMPLES WHAT I MEAN BY THAT.

A NUMBER OF CITIES AROUND THE WORLD ARE ADOPTING PRINCIPLES TO CREATE “DEMENTIA-FRIENDLY SOCIETIES”.

IN BRUGES IN BELGIUM, BUSINESSES DISPLAY SIGNS INDICATING THEIR STAFF IS WILLING AND ABLE TO HELP PEOPLE WHO HAVE DEMENTIA. THERE ARE A NUMBER OF COMMUNITY INITIATIVES SUCH AS MEMORY CAFES AND DEMENTIA CHOIRS TO PROMOTE SOCIAL INCLUSION.

WE ARE DOING SOME OF THOSE THINGS IN AUSTRALIA. MANY AREAS HAVE MEMORY CAFES OR OTHER ACTIVITIES TO PROMOTE SOCIAL ENGAGEMENT.

THE IDEA OF A DEMENTIA SYMBOL HAS BEEN DISCUSSED ENDLESSLY – NOT TO LABEL AN INDIVIDUAL BUT TO DISPLAY THAT A BANK, HOSPITAL OR CENTRELINK OFFICE HAVE STAFF TRAINED TO ASSIST PEOPLE WITH COGNITIVE IMPAIRMENT.

AUSTRALIA NEEDS A COMMITMENT LIKE THE ONE MADE IN THE UK LAST YEAR, BY PRIME MINISTER DAVID CAMERON WHO CALLED FOR THE CREATION OF DEMENTIA-FRIENDLY CITIES AS PART OF HIS DEMENTIA CHALLENGE.

HE HAS URGED 20 CITIES AND VILLAGES TO COME FORWARD AND SIGN UP AS DEMENTIA CHAMPIONS BY 2015 AND FOR LOCAL BUSINESSES TO PROVIDE SUPPORT FOR THIS CONCEPT.

SURE AUSTRALIA NEEDS LEADERSHIP FROM OUR POLITICIANS BUT THE ACTIVE PROMOTION OF SOCIAL INCLUSION IS THE RESPONSIBILITY OF US ALL.

THE NEGATIVE ATTITUDES ABOUT DEMENTIA, AGEING AND DISABILITY ABOUND IN OUR CARE AND SUPPORT SYSTEM.

OLDER AUSTRALIANS HAVE CLEARLY STATED THEY WANT TO LIVE IN THE COMMUNITY FOR AS LONG AS POSSIBLE; THEY WANT CONTROL OVER THEIR OWN LIVES, REGARDLESS OF THEIR DISEASE OR DISABILITY.

THE AUSTRALIAN HEALTH AND WELFARE INSTITUTE RELEASED A REPORT JUST LAST WEEK THAT FOUND THAT MORE THAN 90 PER CENT OF OLDER AUSTRALIANS WANT TO CONTINUE TO LIVE IN THEIR OWN HOMES RATHER THAN ENTER RESIDENTIAL AGED CARE.

BUT THIS ISN'T REFLECTED IN OUR AGED CARE SYSTEM, IN SPITE OF DECADES OF RHETORIC ABOUT INCREASING CHOICE AND COMMUNITY CARE. INSTEAD, AUSTRALIA CONTINUES TO LEAD THE WAY WITH THE NUMBERS OF OLDER PEOPLE LIVING IN INSTITUTIONS.

ONLY ABOUT 54 PER CENT OF AUSTRALIANS REQUIRING LONG TERM CARE RECEIVE SUCH CARE IN THEIR HOMES COMPARED TO THE OECD AVERAGE OF 64.5 PER CENT. COUNTRIES LIKE JAPAN, NORWAY AND SWITZERLAND PUT US TO SHAME. THEY'RE PROVIDE MORE THAN 70 PER CENT OF LONG TERM CARE IN THE COMMUNITY TO THEIR CITIZENS.

WHEN WE TALK ABOUT MENTAL HEALTH, DISABILITIES AND AGED CARE, WE KNOW THAT ONE SIZE CAN NEVER FIT ALL. YET WE'VE CONTINUED TO PROVIDE CARE ON EXACTLY THAT BASIS WITH A MINDSET LOCKED INTO INSTITUTIONAL AND RESIDENTIAL CARE MODELS OF THE PREVIOUS CENTURY.

IN OUR EVERYDAY LIVES WE MAKE CHOICES AND WE EXPECT THOSE CHOICES TO BE RESPECTED. IT IS A MARK OF OUR RESPECT FOR ONE ANOTHER.

WHY SHOULD A PERSON WITH MENTAL HEALTH ISSUES, A DISABILITY, OR WHO IS GETTING OLDER BE TREATED ANY DIFFERENTLY?

THE CHANGE IN CULTURE THAT'S REQUIRED TO BRING THE ELEMENT OF CHOICE INTO THE LIVES OF THOSE PEOPLE WHO REQUIRE ASSISTANCE IS HUGE – BUT IT IS THE CHALLENGE WE HAVE TO FACE IN THE AUSTRALIA I WANT TO LIVE IN.

WE NEED TO EMPOWER OLDER PEOPLE, THOSE WITH DISABILITIES OR MENTAL HEALTH ISSUES TO EXERCISE CHOICE IN THE SERVICES AND SUPPORT THEY NEED TO THE EXTENT THEY WISH AND ARE ABLE.

WE NEED GOVERNMENTS TO ADOPT LESS REGULATORY APPROACHES AND TO PROMOTE A PARTNERSHIP APPROACH BETWEEN CONSUMERS AND PROVIDERS.

WE NEED THE COMMUNITY TO BE LESS RISK ADVERSE IN ITS ATTITUDES TO THE PROVISION OF SUPPORT AND CARE.

AND WE NEED SERVICE PROVIDERS WHO RECOGNISE THE INDIVIDUAL REQUIRING CARE AS AN EQUAL PARTNER.

THE REFORMS PROPOSED IN DISABILITYCARE – FORMERLY KNOWN AS OUR NATIONAL DISABILITY INSURANCE SCHEME – AND *LIVING LONGER. LIVING BETTER.* HOLD OUT THE PROSPECT – FOR THE FIRST TIME IN AUSTRALIAN POLICY – OF CONSUMERS HAVING THE POWER TO MAKE DECISIONS ABOUT THE SUPPORT AND SERVICES THAT BEST MEET THEIR INDIVIDUAL GOALS.

I HOPE THE FULL IMPLEMENTATION OF THESE REFORMS WILL RECEIVE UNRESERVED SUPPORT FROM BOTH MAJOR PARTIES AS THE PLATFORM ON WHICH AUSTRALIA SHOULD BUILD FOR THE FUTURE. BOTH WILL BENEFIT PEOPLE WITH DEMENTIA OF ALL AGES.

THE REFORMS IN DISABILITYCARE GO FURTHER THAN THOSE IN AGED CARE.

THEY PROMISE TO TRANSFORM A HEAVILY RATIONED SYSTEM INTO A MARKET IN WHICH FUNDING IS ALLOCATED TO THE PERSON WITH THE DISABILITY AND THEIR FAMILIES ENABLING THEM TO BE ABLE TO EXERCISE CHOICE OVER THE SERVICES THEY RECEIVE.

YOUNGER PEOPLE WITH DEMENTIA ALSO WILL BE ELIGIBLE FOR ASSISTANCE UNDER DISABILITYCARE AUSTRALIA.

THE AGED CARE REFORMS AIM TO CREATE A SYSTEM WITH GREATER CHOICE AND FLEXIBILITY BUT THEY STOP SHORT OF THE ENTITLEMENT APPROACH RECOMMENDED BY THE PRODUCTIVITY COMMISSION. AGED CARE PLACES WILL CONTINUE TO BE RATIONED.

NONETHELESS, *LIVING LONGER. LIVING BETTER* OFFERS THE POSSIBILITY OF:

- **84,000 EXTRA COMMUNITY CARE PLACES BY 2021**

- ALL COMMUNITY CARE DELIVERED ON THE BASIS OF CONSUMER DIRECTED CARE, AN APPROACH THAT MAKES POSSIBLE DECISION-MAKING BY THE OLDER PERSON AND THEIR FAMILIES ABOUT THEIR NEEDS
- GREATER INVESTMENT IN ASSESSMENT AND INFORMATION
- INTRODUCTION OF QUALITY INDICATORS THAT WILL MAKE THE ISSUES CONSUMERS HAVE ABOUT THE QUALITY OF CARE MORE TRANSPARENT

THIS IS GOOD NEWS. BUT WE DON'T WANT TO WAIT FOR ANOTHER FIVE YEARS FOR A REVIEW OF THE OUTCOMES OF *LIVING LONGER. LIVING BETTER.* TO ADDRESS SOME OF THE SERIOUS CONCERNS WE HAVE NOW...CONCERNS SURELY OBVIOUS TO ONE AND ALL.

- WE NEED TO FOCUS ON IMPLEMENTING MORE HIGH CARE COMMUNITY PACKAGES FOR PEOPLE WHO OTHERWISE WOULD HAVE NO OPTION BUT TO MOVE INTO RESIDENTIAL CARE

- **WE NEED TO EXPAND FLEXIBLE DEMENTIA RESPITE SERVICES, TO GIVE CARERS A NEEDED BREAK AND THE PERSON WITH DEMENTIA SOCIAL ENGAGEMENT AND ACTIVITIES THAT INTEREST THEM.**
- **AND WE URGENTLY NEED TO ADDRESS LONG-STANDING DISQUIET ABOUT QUALITY IN RESIDENTIAL CARE, PARTICULARLY FOR THOSE WITH THE SEVERE BEHAVIOURAL AND PSYCHOLOGICAL SYMPTOMS OF DEMENTIA.**

IT IS INEVITABLE THAT SOME PEOPLE WILL NEED ACCESS TO RESIDENTIAL CARE. IT IS IMPERATIVE THAT WE HAVE A HIGH QUALITY RESIDENTIAL CARE SYSTEM THAT RESPECTS THE RIGHTS OF RESIDENTS.

I DON'T BELIEVE THAT IS THE CASE NOW.

SOME FACILITIES PROVIDE EXCELLENT CARE BUT IT SEEMS TO ME THAT THE MAJORITY STRUGGLE TO APPROPRIATELY CARE FOR PEOPLE WITH HIGH CARE NEEDS.

THE FAILURE TO MEET THE STANDARDS THAT WE, AS A COMMUNITY, HAVE A RIGHT TO EXPECT WERE ALL TOO WELL DEMONSTRATED IN A STORY ON ABC'S *LATE LINE* PROGRAM EARLIER THIS MONTH ABOUT HOW SOME AGED CARE FACILITIES MANAGE DEMENTIA.

THE ONLY CONCLUSION I COULD DRAW WAS THAT THE RIGHTS OF BOTH THE CARER AND THE PERSON WITH DEMENTIA HAD BEEN VIOLATED...

THE CARER FACED WITH THE THREAT OF THE PERSON THEY LOVE BEING EVICTED FOR MAKING HER VIEWS KNOWN; THE PERSON WITH DEMENTIA INVOLVED IN THE ALLEGED ASSAULT LEFT WITHOUT THE CARE AND SUPPORT THAT MIGHT ADDRESS THE CAUSE OF HIS SYMPTOMS.

LAST YEAR, DURING CONSULTATIONS ALZHEIMER'S AUSTRALIA HELD ON THE AGED CARE REFORMS WE HEARD THAT WITHIN WEEKS OF ENTERING RESIDENTIAL CARE, MANY CARERS FIND THAT FAMILY MEMBERS AND FRIENDS THEY'VE SPENT YEARS CARING FOR HAVE BECOME UNRECOGNISABLE IN TERMS OF THEIR PHYSICAL, MENTAL AND EMOTIONAL WELFARE.

NEARLY ONE QUARTER OF RESIDENTS ARE CHEMICALLY RESTRAINED WITH ANTI-PSYCHOTIC MEDICATIONS OFTEN WITHOUT THEIR CONSENT, OR THE CONSENT THAT'S LEGALLY REQUIRED FROM THEIR FAMILY.

IT IS UNACCEPTABLE THAT SUCH PRACTICES ARE TAKING PLACE TODAY IN AUSTRALIA.

THESE MEDICATIONS PROVIDE A CLINICAL BENEFIT TO ONLY 1 IN 5, AND ARE ASSOCIATED WITH AN INCREASED RISK OF SERIOUS SIDE-EFFECTS SUCH AS INCREASED COGNITIVE IMPAIRMENT, INCREASED RISK OF FALLS, STROKES AND DEATH.

PERHAPS THERE COULD BE NO BETTER AREA THAN THIS FOR A CLASS ACTION.

IN ADDITION TO AN INCLUSIVE SOCIETY WHERE PEOPLE HAVE CHOICE OVER THEIR OWN LIVES AND CARE, MY VISION ALSO INCLUDES A HEALTH SYSTEM THAT IS ACCESSIBLE AND WORKS FOR ALL AUSTRALIANS REGARDLESS OF AGE, DISABILITY OR DISEASE, AND THAT FOCUSES ON PREVENTION AND WELLNESS AS WELL AS TREATMENT.

WE COULD PREVENT AROUND ONE THIRD OF CHRONIC DISEASE IN AUSTRALIA BY REDUCING TOBACCO SMOKING, BLOOD CHOLESTEROL AND OBESITY, AND BY CONTROLLING BLOOD PRESSURE AND INCREASING PHYSICAL ACTIVITY.

HEALTH EXPERTS SAY THE IMPACT OF PHYSICAL INACTIVITY IS COMPARABLE TO THAT OF CIGARETTE SMOKING.

- **SIXTY PER CENT OF AUSTRALIANS ARE OVERWEIGHT OR OBESE**
- **67 PER CENT ARE SEDENTARY OR TAKE PART IN VERY LOW LEVELS OF EXERCISE**
- **ONLY ABOUT 5 PER CENT OF AUSTRALIANS ARE MEETING THE GUIDELINES FOR DAILY INTAKE OF FRUITS AND VEGETABLES.**

FURTHERMORE, ONLY 50 PER CENT OF AUSTRALIANS KNOW THAT THERE ARE WAYS TO REDUCE THEIR RISK OF DEVELOPING DEMENTIA AND VERY FEW ARE AWARE OF THE LINK BETWEEN DIABETES AND DEMENTIA.

WE NEED TO NOT ONLY PROMOTE PHYSICAL HEALTH BUT ALSO MENTAL HEALTH. A RECENT STUDY COMMISSIONED BY BEYOND BLUE SUGGESTS BETWEEN 10 AND 15 PER CENT OF OLDER PEOPLE LIVING IN THE COMMUNITY EXPERIENCE DEPRESSION.

RATES OF DEPRESSION IN RESIDENTIAL AGED CARE FACILITIES ARE THOUGHT TO BE MUCH HIGHER WITH ANOTHER AUSTRALIAN STUDY SHOWING 35 PER CENT OF AGED CARE RESIDENTS EXPERIENCE DEPRESSION.

THERE NEEDS TO BE A FOCUS ON WELLNESS AND CAPITALISING ON STRENGTHS ONCE A PERSON DOES DEVELOP A DISABILITY OR CHRONIC DISEASE.

THERE ARE STRATEGIES THAT CAN BE PUT IN PLACE TO HELP PEOPLE WITH DEMENTIA MAKE THE BEST USE OF THEIR REMAINING COGNITIVE ABILITIES.

A FOCUS ON WELLNESS IS IMPOSSIBLE HOWEVER IN A SYSTEM WHERE PEOPLE WITH DEMENTIA HAVE TO WAIT AN AVERAGE OF THREE YEARS BETWEEN THE FIRST SYMPTOMS OF DEMENTIA AND A CONFIRMED DIAGNOSIS, AND WHERE HOSPITALS OFTEN DO NOT EVEN RECORD A DIAGNOSIS OF DEMENTIA.

THE AGED CARE REFORMS CONTAIN PROPOSALS TO TACKLE ISSUES THAT HAVE BEEN NEGLECTED IN AUSTRALIA FOR TOO LONG.

THERE IS THE COMMITMENT TO FUNDING INITIATIVES THAT WILL PROMOTE TIMELY DIAGNOSIS, MAKE HOSPITALS SAFER PLACES FOR PEOPLE WITH DEMENTIA AND ENCOURAGE DEMENTIA RISK REDUCTION. BUT THESE REFORMS ARE JUST A START.

LATER THIS YEAR, HEALTH MINISTERS WILL BE CONSIDERING A NEW NATIONAL DEMENTIA ACTION FRAMEWORK.

THIS FRAMEWORK IS AN OPPORTUNITY FOR THE HEALTH MINISTERS TO MEET THE PROMISE THEY MADE WHEN THEY ANNOUNCED DEMENTIA AS THE NINTH NATIONAL HEALTH PRIORITY AREA LAST YEAR.

WE NEED THIS FRAMEWORK TO SET CLEAR, MEASURABLE GOALS THAT ALZHEIMER'S AUSTRALIA IS AIMING TO ACHIEVE IN THE HEALTH SYSTEM FOR PEOPLE WITH DEMENTIA.

FOR EXAMPLE:

- **THAT WITHIN FIVE YEARS NO ONE SHOULD BE WAITING LONGER THAN SIX MONTHS FOR A DIAGNOSIS OF DEMENTIA AFTER CONSULTING THEIR GP.**
- **THAT WITHIN 10 YEARS HOSPITALS SHOULD HAVE SYSTEMS THAT RECOGNISE PEOPLE WITH COGNITIVE IMPAIRMENT AND HAVE TRAINING PROGRAMS FOR STAFF.**

WE MIGHT ALSO SET THE OBJECTIVE OF EMBRACING DEMENTIA RISK REDUCTION WITHIN THE PREVENTATIVE HEALTH CAMPAIGNS FOR HEART DISEASE, OBESITY, ALCOHOL AND SMOKING.

AN IMPORTANT PART OF ADDRESSING HEALTH AND WELLNESS IS INVESTING IN RESEARCH. INVESTMENT IN HEALTH AND MEDICAL RESEARCH THROUGH THE NH&MRC OVER THE PAST 75 YEARS HAS RESULTED IN IMMENSE IMPROVEMENTS IN THE HEALTH AND WELLBEING OF AUSTRALIANS.

IT HAS RESULTED IN AUSTRALIA PLAYING A VITAL ROLE IN DESCRIBING, THEN UNDERSTANDING AND FINALLY DEFEATING PREVIOUSLY ONCE FATAL CONDITIONS

ALZHEIMER'S AUSTRALIA'S *FIGHT DEMENTIA* CAMPAIGN IS FOCUSED ON INCREASING THE FUNDING FOR DEMENTIA RESEARCH IN THE 2013 BUDGET AND BEYOND.

WE ARE LOOKING FOR \$200M OVER FIVE YEARS TO BUILD RESEARCH CAPACITY, TO FUND PRIORITY RESEARCH PROJECTS AND TO SUPPORT INFRASTRUCTURE FOR DEMENTIA RESEARCH.

YES IT IS A LARGE SUM OF MONEY... AND YES I AM WELL AWARE OF THE GOVERNMENT'S BUDGET DEFICIT WARNINGS AND OF THE CUTS THAT WILL NEED TO BE MADE IN SPENDING.

BUT THE HEALTH OF PEOPLE'S MINDS IN AUSTRALIA CANNOT BE CAST ASIDE BECAUSE OF BUDGET CUTS; NO GOVERNMENT SHOULD PLAY RUSSIAN ROULETTE WITH PEOPLE'S MINDS; PEOPLE'S MINDS ARE SACROSANCT.

WE NEED TO BEAR IN MIND THE ENORMITY OF THE CHALLENGE THAT IS FACING US. WE SHOULD NOT BE QUESTIONING THE COST... WE SHOULD BE DREADING THE COST OF INACTION.

WE NEED A GOVERNMENT WITH VISION. AS A SOCIETY WE SHOULD BE WORKING TOGETHER TOWARDS THE GOAL OF A DEMENTIA-FREE WORLD.

WE KNOW IF WE CAN DELAY THE ONSET OF DEMENTIA BY JUST FIVE YEARS WE WOULD BE ABLE TO REDUCE THE NUMBERS OF PEOPLE WITH DEMENTIA BY ONE THIRD.

**WE ALL HAVE TO DIE BUT LET'S ENSURE WE ACHIEVE IT WITHOUT
DEMENTIA!**

**OF COURSE NONE OF US KNOWS WHERE OUR LIFE'S JOURNEY WILL TAKE
US. IF WE WERE TO GET DEMENTIA OR SUFFER A PHYSICAL DISABILITY
HOW WOULD WE WISH TO BE TREATED IN OUR OLDER YEARS? THE
ANSWER IS SIMPLE ISN'T IT...WITH RESPECT AND DIGNITY.**

**AUSTRALIA CAN BE PROUD OF STARTING ON AN AMBITIOUS REFORM OF
THE CARE SYSTEM THROUGH DISABILITYCARE AND *LIVING LONGER,*
*LIVING BETTER.***

**ALZHEIMER'S AUSTRALIA'S *FIGHT DEMENTIA* ELECTION DOCUMENT,
WHICH I AM PLEASED TO BE LAUNCHING TODAY, TOTALLY SUPPORTS THE
IMPLEMENTATION OF BOTH REFORMS BECAUSE THEY PROMISE TO
BENEFIT PEOPLE WITH DEMENTIA OF ALL AGES.**

**WE ARE ASKING BOTH MAJOR PARTIES TO COMMIT OVER THE NEXT
THREE YEARS TO BUILDING ON THE *LIVING LONGER. LIVING BETTER.*
AGED CARE REFORMS BY:**

- **INCREASING THE GROWTH OF COMMUNITY CARE HIGH CARE PACKAGES FOR PEOPLE WHO OTHERWISE WOULD BE FORCED INTO RESIDENTIAL CARE**
- **EXPANDING ACCESS TO FLEXIBLE DEMENTIA-FRIENDLY RESPITE CARE**
- **GIVING PRIORITY TO IMPROVING THE QUALITY OF RESIDENTIAL DEMENTIA CARE**
- **SECURING THE AGREEMENT OF HEALTH MINISTERS TO A NEW NATIONAL ACTION FRAMEWORK ON DEMENTIA**
- **INVESTING \$200 MILLION OVER FIVE YEARS IN DEMENTIA RESEARCH.**

TO ACHIEVE THE VISION OF SOCIAL INCLUSION, CHOICE, AND QUALITY OF LIFE, THAT I'VE SET OUT TODAY, WE NEED A DIFFERENT APPROACH TO AUSTRALIA'S HEALTH AND CARE SYSTEM, ONE THAT FOCUSES ON THE STRENGTHS OF THE INDIVIDUAL AND RESPECTS THEIR RIGHT TO HAVE CONTROL OVER THEIR OWN LIVES.

WE NEED A SHIFT IN CULTURAL ATTITUDES WHICH SEES US STAND READY TO HELP PEOPLE WHO NEED ASSISTANCE, RATHER THAN TURNING OUR BACK AND AVOIDING THOSE WHO NEED US THE MOST.

WE NEED ACTION TO ACHIEVE THIS VISION...

TODAY I ISSUE A CHALLENGE TO POLITICIANS ON BOTH SIDES OF POLITICS.

- **FIRSTLY TO SUPPORT THE FULL IMPLEMENTATION OF DISABILITYCARE AND *LIVING LONGER. LIVING BETTER.***
- **SECONDLY TO EXPLAIN TO AUSTRALIANS HOW YOU WILL WORK TO ACHIEVE A MORE INCLUSIVE SOCIETY WHICH VALUES PEOPLE REGARDLESS OF THEIR AGE, DISEASE OR DISABILITY;**
- **AND THIRDLY, TO ANNOUNCE YOUR PLANS FOR INCREASED INVESTMENT IN HEALTH AND MEDICAL RESEARCH TO MITIGATE THE INCREASING ECONOMIC AND SOCIAL COST OF CHRONIC DISEASE.**

WE ARE ENTERING THE SEASON OF CAMPAIGNING AND ELECTION PROMISES. IT IS EASY TO BECOME CYNICAL AND GET LOST IN THE DEBATE OVER THE SIZE OF THE BUDGET DEFICIT OR THE LATEST CONTROVERSY OVER A POORLY-TIMED JOKE BY A POLITICIAN.

THIS ELECTION NEEDS TO BE ABOUT MORE THAN THE SIZE OF THE BUDGET DEFICIT . IT NEEDS TO BE ABOUT VALUES.

IN THE NEXT FEW YEARS, WE HAVE A UNIQUE OPPORTUNITY TO IMPLEMENT MAJOR SOCIAL REFORMS IN AUSTRALIA, TO BECOME A WORLD LEADER IN A SYSTEM OF CARE AND SUPPORT THAT ENABLES PEOPLE TO ACHIEVE THE HIGHEST QUALITY OF LIFE, AND MAKES THEM WANT TO CONTRIBUTE AND BE A PART OF A SOCIETY THAT VALUES THEM.

WE MUSTN'T MISS THIS ONCE IN A GENERATION OPPORTUNITY TO BRING ABOUT REAL CHANGE IN OUR SOCIETY, TO THE BENEFIT OF ALL AUSTRALIANS AND AUSTRALIA.

THANK YOU.

