The Implementation of the Madrid International Plan of Action on Ageing

Directives in Australia

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Introduction

In 2002, in order to put forth strategies enhancing the lives of older people around the

world, the United Nations (UN) developed the "Madrid International Plan of Action on

Ageing (MIPAA)". The UN called on all its state members to incorporate population

ageing issues into their national development frameworks. It was envisaged that the

policy and the program design would be guided by the UN Principles for Older Persons:

independence, participation, care, self-fulfilment, and dignity (Sidorenko, 2007; MIPAA,

2002).

One decade has passed since the UN members voted to adopt the MIPAA, and it is

therefore timely to ascertain the extent to which its directives have been implemented in

Australia. Budget allocations within the policy framework developed in the "National

Strategy for an Ageing Australia – An Older Australia, Challenges and Opportunities for

All (National Strategy) were evaluated as a means of determining whether the rights of

older persons as espoused by the United Nations "Principles for Older Persons" and by

the MIPAA have been embraced by governments in Australia. The Australian Government has developed the National Strategy to provide a strategic response to

issues pertain the ageing population and to provide a framework underpinning the

1

Government's leadership role in encouraging the development of appropriate economic and social policies (Howard, 2001 in Anderson, 2001, p.5).

Methods

Government budgets are an important indicator of governments' priorities in shaping public policies. In the context of the rights of older persons, governments have legislative powers to protect older persons against breaches of their rights as well as political powers and financial capacity to enact policies that support their rights.

This study examined the content of the Federal Government, Victorian State Government and two Victorian local governments' budgets. These three levels of government constitute the system of governance in Australia. The study analysed the budgets over an 11 year period, beginning from 2001/02, the year in which the MIPAA was adopted and the National Strategy was introduced, and looked at government spending that benefited older people directly and indirectly from initiatives benefiting the whole community.

Results

Eight policy areas, identified in the National Strategy, were dedicated to "health promotion and well-being throughout life". The Commonwealth Government provided supports that directly benefit older people for five of these policy areas. However, none of these policy areas was continuously supported throughout the entire analysed period. With the exception of one initiative funded by the Victorian State Government in 2001/02, 2002/03 and 2003/04, other government bodies did not provide funding to meet the specific needs of older people. However, all three levels of government were more supportive of these policy areas through funding initiatives benefiting the broader community. Out of the eight policy areas identified in the National Strategy, the Commonwealth Government provided support for six, the Victorian State Government for three and one was supported by the Whitehorse City Council.

The following graph illustrates the trends of expense measures allocations over the analysed period by the Commonwealth Government.

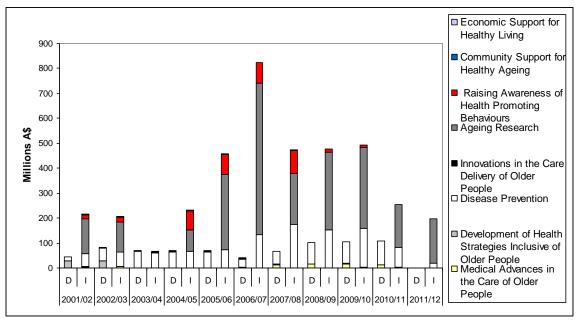


Figure 1: Budgetary Allocations of funding by the Commonwealth Government

Source: Authors own calculations based on the Commonwealth Government's budgets expense measures allocations by functions

Until the year 2009/10, the Commonwealth Government steadily increased its budgetary expense measures allocations, particularly for initiatives benefiting the broader community. However, the level of funding decreased in the last two years of the period and funding of initiatives tailored to the specific needs of older people were not supported in expense measures allocations for 2011/12 fiscal year.

In the year 2009/10, the Commonwealth Government discontinued funding of a number of components of the Australian Better Health Initiative. These components related to promoting healthy lifestyles, supporting risk modification, encouraging active self-management of chronic disease. The Commonwealth Government also reduced grants for physical activity projects in the community programs and the Primary Care Incentive Fund. It was anticipated that the discontinuation of these programs would generate budget savings totalling \$122 million AUD. The government noted that similar programs are funded through other initiatives.

Noteworthy initiatives funded by the Commonwealth Government which were directly benefiting older people were the prevention in falls of older people, Visudyne Therapy, bowel screening scheme for 50, 55 and 65 year olds and the voluntary annual health assessments for older people in order to identify and prevent ill-health. The Commonwealth Government also provided funding for initiatives benefiting the broader community. Providing one-off grants to encourage participation in a physical activity, various types of cancer awareness campaigns and screening programs, Hepatitis C education and prevention and the National Alcohol Harm Reduction Strategy are just a few examples of the Commonwealth involvement in this policy area.

The Commonwealth Government placed significantly more emphasis on preventive health through its new collaborative arrangements with the State governments. However, this initiative is not specifically aimed at elderly Australians, but at improving the healthy lifestyle of the broader community. The following graph depicts the trends in budgetary allocations by the Victorian State Governments, the government body mainly responsible for the provision of funding for health and health related services in Victoria.

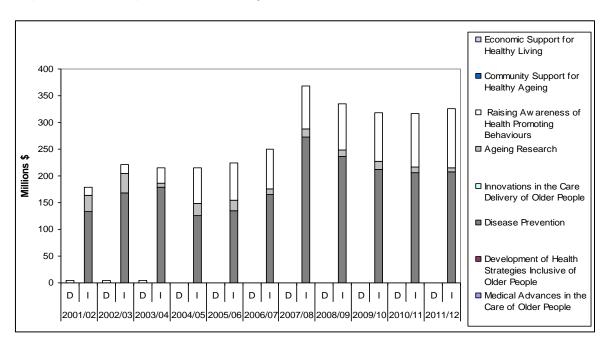


Figure 2: Budgetary Allocations of funding by the Victorian State Government

Source: Authors own calculations based on the Victorian State Government's budgets allocation by functions

The Victorian State Government allocated funding for one initiative, positive ageing, but only in the first three years of the analysed period. This initiative was designed to promote health and wellbeing for older Victorians through various social activities and through the provision of information about the benefits of healthy lifestyle. The Victorian State Government supported initiatives benefitting the broader community throughout the analysed period, and despite reducing its funding towards the end of the period, in the year 2011/12, the level of funding was significantly above of that in 2001/02.

The Victorian State Government allocated funding for a range of health promotion programs including a provision of community information about healthy behaviours and programs designed to encourage all Victorians to minimise the harmful effects of illicit and licit drugs.

Discussion and conclusion

The World Health Organization (WHO) stated that measures to assist older people remain healthy and active is a necessity, not a luxury (WHO, 2002). The results of this study revealed that while Australian governments were supportive of policy areas related to health promotion and well-being, these initiatives were mainly directed to benefit the broader community. Research suggests that older people in Australia still face obstacles and difficulties that discourage healthy lifestyles. The design of shopping centres, nature strips, footpaths and planning of housing estates are not specifically tailored to the needs of older people. Inadequacy of services (particularly in rural areas), the high cost of some of these services, lack of transport (public and private) and safety were also considered as potential impediments precluding older people from participating in physical and social activities that encourage better health and wellbeing (National Ageing Research Institute, 2004; Naughtin, 2008; Stanley et al., 2010).

There is a sufficient body of evidence indicating that a healthy lifestyle and the prevention of the onset of illness can significantly offset the negative effects of ageing on a society (MIPAA, 2002; WHO, 2002; OECD, 2009). To succeed in preparing the Australian society for the challenges resulting from a fast ageing population, more

proactive actions in these policy areas with emphasis on the needs of older people, will be needed from the governments at all levels.

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