

Living Well

Whyalla's Masterplan for Disability and Ageing



2025

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Prepared by Indigo Partners (Australia) Pty Ltd, EconSearch Pty Ltd, and MC Two Pty Ltd for Regional Development Australia Whyalla Eyre Peninsula, working in conjunction with Whyalla City Council and a number of local and regional partners

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Executive summary

A significant growth opportunity

Situated on the western shores of Spencer Gulf 396 kilometres north-west of Adelaide, Whyalla is an important regional minerals port, and a centre for mining and manufacturing services. With a 2013 estimated resident population of 22,600, Whyalla is South Australia's second largest regional city.

Whyalla's age profile is very similar to that of other regional cities, and not dissimilar to South Australia as a whole. However, unlike much of South Australia, Whyalla has been growing strongly since 2005-06, and its growth rate is currently running at 3% per annum.

The rising rate is due to the success of Arrium (formerly OneSteel) through its Project Magnet and the ramp up of ore exports to 6 million tonnes per annum, the subsequent doubling of Whyalla's export capacity to 13 million tonnes per annum, the continuing importance of Santos' Port Bonython plant, and the South Australian minerals exploration boom generally. These developments have provided significant work to Whyalla's engineering services industries, including metal fabrication, machining, electrical, belting, instrumentation, scaffolding, transport, logistics, and other activities.

Whyalla's population will continue to grow through to 2046 under any one of three different scenarios developed by EconSearch. The mid-growth scenario sees Whyalla's population increasing to 23,957 in 2016 (5.2% increase) and 25,153 in 2021, with a projected 2046 population of 30,747.

This scenario is consistent with the growth expected if projects included in the South Australian Government's Major Project Directory were fully developed and operational. Projects include the Port Bonython bulk fuel distribution terminal, the Australian Defence forces Cultana area augmentation, the Spencer Gulf Portlink Port Bonython bulk commodities export facility, and Iron Road Limited Central Eyre iron project. Other major projects included in the Directory involve copper, uranium, gold, silver, iron, lead and zinc ore, coal and kaolin mining. The City should also benefit from the expansion of Santos' Moomba gasfield liquid natural gas production and other unconventional gas projects.

Whyalla also has substantial economic, health, civic and social infrastructure. Excellent transport networks, a modern general hospital, and a Council committed to clearing its infrastructure maintenance backlog provide a basis for significant action to make Whyalla an age-friendly city, and Australia's first—perhaps the world's first—disability-friendly city.

Significant challenges

However, Whyalla also faces significant social challenges. People with a profound or severe disability are defined as those people needing help or assistance in one or more of three core activity areas of self-care, mobility and communication, because of a disability, long term health condition (lasting six months or more) or old age. The proportion of the population with a profound or severe disability in Whyalla in 2011 was 6.0%, higher than SA (5.5%), Mount Gambier (5.7%), Port Augusta (5.3%) and Port Lincoln (5.3%).¹ The rate of growth in the number of Whyalla residents with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.

Whyalla is also looking at significant growth in its 65+ population, from a base of approximately 3,200 in 2011. A relatively high proportion of these persons receive an aged pension, 85% in Whyalla compared to 75% for SA. In comparison, the proportion of persons aged 65 years and over receiving an aged pension was 78% in Port Lincoln and Port Augusta and 81% in Mount Gambier. It can be reasonably assumed that those not receiving an aged pension are fully self-funded retirees. In SA as a whole this comprises 25% of the aged pension cohort (22% in Port Lincoln and Port Augusta and 19% in Mount Gambier) while it is just over half that (15%) in Whyalla.²

The rate of growth in the number of people requiring aged and community care places will be substantially higher than the total population growth rate under all three growth scenarios. Under the baseline scenario, the total number of packages will be required to grow from 181 currently to 199 in 2016, 221 in 2021, and 285 in 2046. If the current shortfall in support allocated to Whyalla is rectified, so that Whyalla is allocated support at the average rate applicable across South Australia, Whyalla needs an allocation of 102 additional packages by 2016, raising the total allocation to 283 packages, rising to 316 in 2021, and 408 in 2046. As noted below, the greatest need for additional support is in community care packages rather than residential aged care places. Under the mid-growth or high growth scenarios, needs are even greater.

The need for a Masterplan

In summary, therefore, Whyalla faces significant challenges:

- a relatively high number of Whyalla residents have a profound or severe disability (6.0% compared with 5.5% for SA)
- a relatively high number of residents receive a disability pension (10% compared with 7% for SA)
- the percentage of such residents is set to grow more rapidly than the population as a whole—even under the baseline scenario, the percentage of residents with disability is projected to grow at twice the rate of the population as a whole

¹ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 11–15, 21–23, based on Australian Bureau of Statistics data.

² Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. pp. 11–15, 24–27, based on Australian Bureau of Statistics data.

- Whyalla also has a large number of residents dependent on an aged pension, and a low number of fully self-funded retirees (15% compared with 25% for SA)
- Whyalla has a significant shortfall in allocated community care packages, requiring an additional 102 packages by 2016 and a further 33 by 2021—under the high growth scenario, even more is required
- Whyalla experiences an average out-migration of 31 persons aged 55+
- residents have limited private capital—58% of Whyalla homes are owned, compared with 68% for SA as a whole; and 39% of Whyalla homes are rented, compared with 28% for SA as a whole; 21% of rented houses are rented through Housing SA, compared with 6% for SA as a whole

Yet Whyalla also faces significant opportunities. Health and community services contributes \$104 million (8.2%) to Whyalla's Gross Regional Product, the third highest of any sector. Employment is also growing in this sector, compared with decreasing employment in manufacturing and trade in percentage terms. It employs 1,299 people (1,094 FTEs, 15.6% of all jobs and 12.6% of all FTEs), making it important not only for total employment, but as a source of casual and part-time work.

And service provision to older people and people with a disability is a significant and growing economic driver, as the service system moves away from residential care to home-based services driven by consumer choice. The service system for people with a disability is also growing through the implementation of the National Disability Insurance Scheme (\$19.3 billion nationally over the next 6 years). As more people receive funding, and choose how to spend it, service provision will become a major opportunity for businesses and not for profit organisations.

Because the needs are significant, and growing, and because there are also significant opportunities, Whyalla must address its disability and ageing care needs strategically, systematically, and in a coordinated way.

Analysis and consultation

Regional Development Australia Whyalla and Eyre Peninsula Inc (RDA WEP), working with a range of local partners, identified the need for a Masterplan in 2012, and a process was commissioned in early 2014.

The process was strongly supported by local media, and included:

- detailed review and analysis of existing reports, plans and strategies
- a search for best practice across Australia and around the world
- eight community workshops, supplemented by general consultation and written submissions
- a community survey—202 responses were received
- face to face and telephone interviews and discussions with service providers and other experts

Goals, objectives and strategies

The Masterplan focuses on three key groups:

- people with a disability—both those younger (0-16 years) and those of working age (16-65 years)
- older residents (65+ years)
- older residents (65+ years) with a disability

Twelve goals have been identified:

1. Vision, leadership, consultation and action
2. Personal and public safety and security
3. Housing and residential care choices
4. Well-maintained roads, paths and access
5. Accessible public transport services
6. Comprehensive health, personal support, and household services
7. A skilled health and care workforce
8. Education, training and personal development programs
9. A wide range of retail and hospitality options and professional services
10. Opportunities for employment and volunteering
11. Well-maintained open spaces, and a range of recreational activities
12. A wide range of social and cultural activities

Each goal is supported by a coherent set of objectives and strategies. These are informed by what is currently in place, and community feedback on where the gaps are, what is working effectively, and what needs to be improved.

Implementation

The Masterplan identifies priority actions over a 10-year timeframe. Leadership responsibilities and potential funding sources have also been identified. Finally, actions are mapped against three time horizons: the short term (1–3 years), the medium term (4–6 years), and the longer term (7–10 years).

Initial actions

By March 2015, it is proposed to:

- form the Whyalla Disability and Ageing Leadership Group (1.1)
- adopt the Masterplan (1.2)
- commit Whyalla to becoming a WHO-recognised Age-Friendly City, apply to join the WHO Global Network of Age-Friendly Cities, and commit to becoming the world's first Disability-Friendly City (1.3)
- adopt a charter for the Leadership Group (1.4)
- investigate funding sources for a Masterplan Implementation Officer (1.5)
- schedule a first Annual Disability and Ageing Forum (1.6)

- agree on a communication strategy (1.9)
- establish two moderated Facebook pages (1.10)
- work with the State Government to allocate additional Skills for All training quota for aged and disability care (7.1)
- become a member of Volunteering SA & NT Inc (10.4)

By June 2015, it is proposed to:

- ask all member organisations to review their access and inclusion plans (1.7); in the case of the Council, this would also include access issues (4.3), facilities for people with a disability and older people in Whyalla's parks and gardens (11.1) and along the foreshore (11.2)
- implement a computer training program for association officeholders and members (1.11)
- implement a program of assisting associations to obtain computer resources (1.13)
- work to remove Whyalla's substantial shortfall in community care packages (3.2)
- review the policing of disabled parking access (4.1)
- review footpaths and trails and develop a 7-year investment plan (4.2)
- provide a fridge magnet with Carelink contacts to all relevant residents (6.1)
- develop a Disability Services Directory for residents (6.2)
- distribute copies of the Seniors Directory and Disability Services Directory to GPs and other service providers (6.3)

By December 2015, it is proposed to:

- review the Community Emergency Risk Management Plan (2.3)
- establish demand for supported accommodation in Whyalla (3.3)
- convene an NDIS implementation forum (6.4)
- convene an NDIS business opportunities forum (6.5)
- incorporate into the Seniors Directory and Disability Services Directory a directory of tradespeople and handypersons (6.6)
- identify opportunities for resurrecting TAFE general interest courses (8.2)
- develop a program to encourage employers to hire employees with a disability (10.1)
- develop a Disability Employment Covenant (10.2)

Other strategic initiatives are scheduled over the years that follow.

Whyalla: a significant regional centre

Situated on the western shores of Spencer Gulf 396 kilometres north-west of Adelaide, Whyalla is an important regional minerals port, and a centre for mining and manufacturing services. With a 2013 estimated resident population of 22,600, Whyalla is South Australia's second largest regional city.

Age profile and population growth rate

19% of Whyalla's population is aged 0-14 years, 65% of the population is aged 15-64 years, and 16% of the population is aged 65 years or older. This is very similar to other regional cities such as Mount Gambier, Port Augusta and Port Lincoln, and not dissimilar to South Australia as a whole (18%, 66%, and 17% respectively).³

Whyalla's crude birth rate of 14.2 births per 1,000 residents is consistently higher than that of South Australia as a whole (12.0), and is higher than Port Augusta (14.0), Mount Gambier (13.5), or Port Lincoln (13.4). Its crude death rate of 7.5 deaths per 1,000 residents is generally below that of South Australia as a whole (8.0), and is lower than Port Augusta (7.7), Mount Gambier (8.0), or Port Lincoln (8.3).

Over the 13 years 2000-01 to 2012-13, Whyalla experienced slow population growth, with the total population increasing by 1.9% (about 400 persons). Over the same period South Australia experienced somewhat faster population growth, with the population increasing by 10.5%.

However, Whyalla's growth rate has picked up since 2005-06, and is currently running at 3% per annum. This represents the first period of population growth in Whyalla since 1976, reversing the declining population trend of the previous 30 years, and holds real promise for the city's future.

The rising rate is due to the success of Arrium (formerly OneSteel) through its Project Magnet and the ramp up of ore exports to 6 million tonnes per annum, the subsequent doubling of Whyalla's export capacity to 13 million tonnes per annum, the continuing importance of Santos' Port Bonython plant, and the South Australian minerals exploration boom generally. These developments have provided significant work to Whyalla's engineering services industries, including metal fabrication, machining, electrical, belting, instrumentation, scaffolding, transport, logistics, and other activities.

³ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 2-8, based on Australian Bureau of Statistics data.

Projected future population growth

For the purposes of this Masterplan three population growth scenarios were developed: a baseline (16.3% population growth 2011-2046, projecting current average rates), medium (35.0%), and high (53.0%). For comparison, projected growth for South Australia as a whole over the 32 years to 2046 is 31.3%.⁴

Under the first baseline scenario, Whyalla's population would increase from 22,768 in 2011 to 23,449 in 2016 (3.0% increase) and 24,103 in 2021, with a projected 2046 population of 26,480.

Under the second mid-growth scenario, Whyalla's population would increase to 23,957 in 2016 (5.2% increase) and 25,153 in 2021, with a projected 2046 population of 30,747.

This scenario is consistent with the growth expected if several of the projects that have been included in the South Australian Government's Major Project Directory were fully developed and operational. Projects include the Port Bonython bulk fuel distribution terminal, the Australian Defence forces Cultana area augmentation, the Spencer Gulf Portlink Port Bonython bulk commodities export facility, and Iron Road Limited Central Eyre iron project.

Under the third high-growth scenario, Whyalla's population would increase from 22,768 in 2011 to 24,461 in 2016 (7.4% increase) and 26,187 in 2021, with a projected 2046 population of 34,824.

This scenario is consistent with the growth expected if a majority of the projects in the region that have been included in the Major Project Directory were fully developed and operational. Major projects over the next decade involve copper, uranium, gold, silver, iron, lead and zinc ore, coal and kaolin mining. The city should also benefit from the expansion of Santos' Moomba gasfield liquid natural gas production and other unconventional gas projects.

Labour force

Whyalla's labour force is estimated at 10,170 persons in June 2014, sharing approximately 8,700 full-time equivalent jobs. Unemployment was at 10.1% in June 2014 (6.7%, South Australia).⁵

The labour force participation rate in Whyalla in 2012-13 was 71%. In comparison, the participation rate in the same year was 82% in Mount Gambier, 75% in Port Lincoln and 69% in Port Augusta. The participation rate is expected to lift with improvements in economic activity. The participation rate was higher for SA as a whole (78%).

Mean taxable income is \$64,800 in 2011-12, significantly higher than the South Australian mean of \$58,900, and also higher than Port Augusta (\$59,000), Port Lincoln (\$56,300), and Mount Gambier (\$53,000).

⁴ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 11–15, based on Australian Bureau of Statistics data.

⁵ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 31–35, based on Australian Bureau of Statistics data.

Residents with disability

People with a profound or severe disability are defined as those people needing help or assistance in one or more of three core activity areas of self-care, mobility and communication, because of a disability, long term health condition (lasting six months or more) or old age. The proportion of the population with a profound or severe disability in Whyalla in 2011 was 6.0%, higher than SA (5.5%), Mount Gambier (5.7%), Port Augusta (5.3%) and Port Lincoln (5.3%).⁶

Whyalla has a higher proportion of persons aged 16-64 years receiving a disability pension, 10% for Whyalla compared to 7% for SA as a whole. This highlights a potential need for higher than average servicing. The proportion of persons aged 16-64 years receiving a disability pension was 10% in Port Augusta, 9% in Mount Gambier and 8% in Port Lincoln.

The rate of growth in the number of Whyalla residents with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.

The proportion of the population providing unpaid assistance in Whyalla is higher than in other regional cities. Of the total population, the proportion of people providing unpaid assistance to a person with a disability was 9.0% in Whyalla in 2011, compared with 9.7% for SA, 8.8% in Port Lincoln, 8.7% in Mount Gambier and 8.2% in Port Augusta. This is probably linked to the fact that Whyalla has a slightly higher proportion of the population with a profound or severe disability.

The rate of growth in the number of people with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.

Under the baseline scenario, the number of people with a profound or severe disability is projected to be 32.6% higher in 2046 than in 2011, compared with 16.3% growth for the population as a whole.

Under the mid-growth scenario, the number of people with a profound or severe disability is projected to be 46.1% higher in 2046 than in 2011, compared with 35.0% growth for the population as a whole.

Under the high growth scenario, the number of people with a profound or severe disability is projected to be 60.1% higher in 2046 than in 2011, compared with 53.0% growth for the population as a whole.

Another aspect of the scenarios that has implications for the Masterplan are the differences between the three broad age cohorts:

- Under all three scenarios the projected number of people with a profound or severe disability in the 65+ cohort is quite similar for 2046: in the range of 941 for the baseline (59% increase) to 1,031 persons for the high growth scenario (74% increase).
- For the working age cohort (15-64 years) the projection range is far greater, from 647 under the baseline scenario (10% increase) to 876 under the high growth scenario (49% increase).

⁶ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 11–15, 21–23, based on Australian Bureau of Statistics data.

Similarly for the 0-14 cohort, the projection range is relatively quite large, from 162 under the baseline scenario (16% increase) to 206 under the high growth scenario (48% increase).

Older residents

The projected 2046 population in the 65+ cohort is similar under all three scenarios, falling in the range of 4,800 (baseline scenario) to 5,400 persons (high growth scenario), from a base of approximately 3,200 in 2011. All three scenarios see the cohort's share of the total population (14% in 2011) growing, in line with demographic trends across Australia. However, the 2046 share of total population will be significantly different under the three scenarios. For the baseline scenario it is expected to increase to 18.2%, whereas for the high growth scenario it will increase to 15.5%.

65 and over cohort share of total population, Whyalla projections, 2011 to 2046

Scenario	2011	2016	2021	2026	2031	2036	2041	2046
Baseline	14.0%	15.1%	16.2%	17.2%	17.9%	18.3%	18.3%	18.2%
Medium	14.0%	14.8%	15.6%	16.2%	16.6%	16.7%	16.6%	16.5%
High	14.0%	14.6%	15.2%	15.7%	15.8%	15.7%	15.6%	15.5%

Source: EconSearch, *Socio-Economic Profile of Whyalla* (2014), Table 3-2.

Whyalla has a higher proportion of persons aged 65 years and over receiving an aged pension, 85% in Whyalla compared to 75% for SA. In comparison, the proportion of persons aged 65 years and over receiving an aged pension was 78% in Port Lincoln and Port Augusta and 81% in Mount Gambier. It can be reasonably assumed that those not receiving an aged pension are fully self-funded retirees. In SA as a whole this comprises 25% of the aged pension cohort (22% in Port Lincoln and Port Augusta and 19% in Mount Gambier) while it is just over half that (15%) in Whyalla.⁷

This data is consistent with the migration data, which shows that there have been more retirement age people leaving Whyalla than moving to Whyalla. It is likely that the lack of retirement and aged care facilities in Whyalla is a factor in this trend.

The rate of growth in the number of people requiring aged and community care places will be substantially higher than the total population growth rate under all three growth scenarios. Under the baseline scenario, the total number of packages will be required to grow from 181 currently to 199 in 2016, 221 in 2021, and 285 in 2046. If the current shortfall in support allocated to Whyalla is rectified, so that Whyalla is allocated support at the average rate applicable across South Australia, Whyalla needs an allocation of 102 additional packages by 2016, raising the total allocation to 283 packages, rising to 316 in 2021, and 408 in 2046. As noted below, the greatest need for additional support is in community care packages rather than residential aged care places.

⁷ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. pp. 11–15, 24–27, based on Australian Bureau of Statistics data.

Under the mid-growth scenario, the total number of packages will be required to grow from 181 currently to 199 in 2016, 221 in 2021, and 296 in 2046. If the current shortfall is rectified, Whyalla needs an allocation of 103 additional packages by 2016, raising the total allocation to 284 packages, rising to 316 in 2021, and 423 in 2046.

Under the high growth scenario, the total number of packages will be required to grow from 181 currently to 200 in 2016, 225 in 2021, and 312 in 2046. If the current shortfall is rectified, Whyalla needs an allocation of 105 additional packages by 2016, raising the total allocation to 286 packages, rising to 321 in 2021, and 447 in 2046.

Indigenous population and employment

Whyalla has a higher proportion of the total population that is Indigenous (4.1%) compared with South Australia as a whole (1.9%).⁸ Whyalla has:

- a lower proportion of the indigenous population that is employed (20%) compared to South Australia as a whole (23%)
- a higher proportion of the indigenous population that is unemployed and looking for work (14%) compared to South Australia as a whole (9%)
- a higher proportion of the indigenous population that is not in the labour force (55%) compared to South Australia as a whole (51%).

Regional migration

Inward and outward migration can be key factors determining growth rates and future demand for aged and disability services. Whyalla has a relatively stable, non-transient population. 86% of those living in the city in 2011 were living in Whyalla 5 years earlier.⁹

Young adults (15-39 cohort) are the most mobile, comprising 31% of the population, but accounting for more than 50% of both inward and outward migration. This is the age group most likely to be affected by changing economic conditions.

The 55+ cohort comprised a significantly smaller proportion of in-bound migrating residents (8%) than of out-bound migrating residents (14%). Significantly more aged residents are leaving Whyalla than moving to it.

Of Whyalla residents with a disability in 2006, 10.1% had moved elsewhere 5 years later. In-bound migrating residents with a disability (same time period) accounted for 8.2% of the total, indicating a small net decline in residents with a disability.

⁸ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 9–10, 36–37; based on Australian Bureau of Statistics, *2011 Census of Population and Housing*.

⁹ Data in this section taken from EconSearch (2015), *Whyalla Socio-Economic Profile*, pp. 16–20; based on Australian Bureau of Statistics, *2011 Census of Population and Housing*.

Economic infrastructure

With an abundance of industrial land, Whyalla is well positioned to support related manufacturing and services activities. Whyalla offers potential developers access to national highway and rail networks, a working industrial port, and high capacity power and water supplies.

Whyalla's Water Reclamation Plant, commissioned in 2006 as part of an environmental improvement program, reduces the total volumetric and contaminant load discharge to Spencer Gulf. The plant treats low salinity wastewater to a quality suitable for reuse. Treated wastewater is recycled by the Council and golf course for irrigation purposes. The Wastewater Treatment Plant treats higher salinity wastewater. The two plants have provided for diversification of water supply, improved environmental performance and enhanced water security within Whyalla.

The city is also supplied with gas, although some upgrading of the network's capacity may be required to support a major development.

The Whyalla City Council owns and operates the Whyalla Airport, providing an accessible service to Adelaide, with 5 or more return flights daily. Council has recently completed a significant upgrade of the airport.

Whyalla has the only regional university campus in South Australia, where the University of South Australia provides a range of undergraduate courses. The Whyalla Campus of TAFE SA also provides extensive trade training. Between the two institutions, Whyalla residents have access to a high standard of training in aged and disability care, nursing and social work.

Civic and social infrastructure

Whyalla's infrastructure grew rapidly in the 1970s and the 1980s, supporting a population of approximately 50,000, and is now ageing. In common with many local government areas across Australia, Whyalla has experienced a historical shortfall in infrastructure maintenance expenditure, resulting in a substantial civic and social maintenance backlog. The Council is now addressing this, with \$7-8 million annually of infrastructure renewal spending, supported by a significantly smaller ratepayer base than when the infrastructure was first laid down.

Major infrastructure projects include the airport, the road and footpath networks, landfill, further development of the industrial estate, an art gallery and a range of community facilities.

Health infrastructure

Whyalla Hospital and Health Services has received a \$69.3 million upgrade, and is now a designated Regional Cancer Centre. The upgrade has been successful in attracting additional visiting specialists and resident physicians. Full details are provided in section 6.

Kimba, Cowell, and Cleve

Regional towns in Whyalla's Eyre Peninsula hinterland look to the city for government health and education services, business services and retail. The most significant of these are Kimba, Cowell, and Cleve.

Kimba is a rural service town 143 kms west of Whyalla. At the 2011 Census Kimba had a population of 670. The average age of residents was 52, 15 years above the Australian average of 37. People aged 65 years and over made up 28.7% of the population.¹⁰

The Kimba Campus serves Kimba and the surrounding rural community. There are 12 beds for patients receiving active medical treatment and 8 aged care beds, Kimba Pioneer Memorial Hostel, an 11 bed hostel for clients requiring a low level of care, and 8 independent living units (ILUs). The ILUs are small, and not suitable for adaptation for lifters or wheelchairs.

Kimba is expected to experience an influx of younger families as mining projects in the nearby area come to fruition—the Kimba Gap iron ore project (Centrex Metals Ltd), the Central Eyre iron ore project between Lock and Warramboe (Iron Road Ltd), and the associated port project at Sheep Hill.

Cowell is a coastal town on Franklin Harbour 111 kms south of Whyalla, at the centre of a wheat, barley, oats, legumes, and sheep farming district. Fishing and oyster farming are also important industries. At the 2011 Census Cowell had a population of 1069. The average age of residents was 44, 7 years above the Australian average of 37. People aged 65 years and over made up 18.8% of the population.¹¹

The Cowell Campus serves Franklin Harbour and the surrounding rural community. There are 20 beds for acute and aged care patients, and a 10 bed hostel for clients requiring a low level of care. Aged care is provided at the 24-bed Franklin Harbour Village, operated by SA Health through Whyalla Eastern Eyre and Far North Health Service.

Cleve is a rural service town 149 kms south-west of Whyalla. At the 2011 Census Cleve had a population of 972. The average age of residents was 48, 11 years above the Australian average of 37. People aged 65 years and over made up 28.6% of the population. Cleve has a modern 20 bed accredited hospital servicing the district with residential general practitioners and physiotherapist, with a number of visiting specialists.¹²

The Cleve Campus serves Cleve, Arno Bay and the surrounding rural community. There are 20 beds for patients receiving acute and aged care, a 20-bed hostel (Crestview Hostel) for clients requiring a low level of care, and 15 independent living units (ILUs).

Health and community services in Kimba, Cowell, and Cleve are delivered by Eastern Eyre Health, which has a community health facility in each town. These services include physiotherapy, social work, community midwifery, early childhood health, youth development,

¹⁰ http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/UCL421019?opendocument&navpos=220

¹¹ http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/UCL421008?opendocument&navpos=220

¹² http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/UCL421005?opendocument&navpos=220

chronic disease self-management, allied health nursing, and home care. Home and community care services are delivered out of the community health facility in each town. There are only 6 people with severe disability across all sites. They receive services through Disability SA.

These services are supported by fortnightly outreach from Whyalla Hospital & Health Inc at an annual cost of \$200,000. These services include speech pathology, occupational therapy, dietetics, and podiatry. An aged care assessment team also operates out of Whyalla. Visiting services at the hospitals include optometry, ophthalmology, audiometry, and mental health.

Eastern Eyre Health advises that facilities are adequate at Cowell and Cleve, where services are delivered from dedicated facilities, either on the hospital site, at Cowell, or on the main street, at Cleve. However, facilities are poor at Kimba. The Health Service needs to borrow rooms at the hospital in order to deliver services. The rooms are located in the nurses' home, which is fully occupied by agency staff. Beds and heavy equipment need to be moved in and out of the rooms as they are used. In addition, the service has three small offices, shared by multiple staff, and one small kitchen. The need to upgrade facilities has been acknowledged by SA Health for some time, but capital funds have not been forthcoming. As the Kimba region mining projects develop, the need for dedicated facilities is becoming more pressing.

The need for a Disability and Ageing Masterplan

Whyalla is in many ways a great place to live. With a healthy location between the sea and the outback, a strong sense of place, a tightly-knit community, high levels of public safety, an abundance of affordable housing, wide roads and light traffic, a general hospital and a wide range of health, personal and professional services, many sporting facilities, an accessible seashore, and conservation parks nearby, a university and TAFE campus, a library, art gallery and museums, many associations, networks and clubs—who could ask for more?

Yet more is needed. On current projections, the population of Whyalla will reach between 24,103 and 26,187 by 2021, and, depending on the scenario adopted, between 26,480 and 34,824 by 2046.

At that point, the modelling outlined in the previous section and detailed in the Socio-Economic Profile¹³ indicates that 10% of the population will be living with some kind of disability, and 20.8% of the population will be 65 or more. Significant extensions to Whyalla's civic, economic, and social infrastructure are required to support the projected increases in residents with disability and older residents.

A relatively high number of residents have a profound or severe disability

People with a profound or severe disability are defined as those people needing help or assistance in one or more of three core activity areas of self-care, mobility and communication, because of a disability, long term health condition (lasting six months or more) or old age. The proportion of the population with a profound or severe disability in Whyalla in 2011 was 6.0%, higher than SA (5.5%), Mount Gambier (5.7%), Port Augusta (5.3%) and Port Lincoln (5.3%). The rate of growth in the number of Whyalla residents with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.

A relatively high number of residents receive a disability pension

Whyalla has a higher proportion of persons aged 16-64 years receiving a disability pension, 10% for Whyalla compared to 7% for SA as a whole. This highlights a potential need for higher than average servicing. The proportion of persons aged 16-64 years receiving a disability pension was 10% in Port Augusta, 9% in Mount Gambier and 8% in Port Lincoln.

¹³ EconSearch (2015), *Whyalla Socio-Economic Profile*, based on Australian Bureau of Statistics data.

This percentage will grow more rapidly than the population as a whole

Under the baseline scenario, the number of people with a profound or severe disability is projected to be 32.6% higher in 2046 than in 2011, compared with 16.3% growth for the population as a whole. Under the high growth scenario, the number is projected to be 60.1% higher, compared with 53.0% growth for the population as a whole.

Whyalla has a large number of residents who are dependent on an aged pension

Whyalla has a higher proportion of persons aged 65 years and over receiving an aged pension, 85% in Whyalla compared to 75% for SA. In comparison, the proportion of persons aged 65 years and over receiving an aged pension was 78% in Port Lincoln and Port Augusta and 81% in Mount Gambier. In SA as a whole fully-self-funded retirees comprise 25% of the aged pension cohort (22% in Port Lincoln and Port Augusta and 19% in Mount Gambier) while it is just over half that (15%) in Whyalla.

The numbers of older residents will grow significantly

Under the baseline scenario, the number of older residents will grow from 3,200 (2011) to 4,800 (2046); under the high growth scenario, the number will grow to 5,400

Whyalla is significantly disadvantaged in terms of its care infrastructure

Whyalla has a total of 181 residential places and community care packages, a rate of 84 places per 1,000 residents aged 70 and over, compared with 116 per 1,000 for SA as a whole, and lower again than Mount Gambier (125), Port Lincoln (137) and Port Augusta (161). A substantial shortfall in home care places is creating significant pressure on older residents and their families. To overcome this shortfall Whyalla would require an additional 102 packages by 2016, and a further 33 by 2021—on a baseline scenario. Mid-growth and high growth scenarios would require even greater allocation increases.

Whyalla experiences significant out-migration

Between 2006 and 2011, 2,687 persons across all age groups left Whyalla. About 14% (376) were aged 55+. Around 41% moved to Adelaide, 34% elsewhere in SA, and 25% interstate. During the same period, about 223 persons 55+ moved to Whyalla, suggesting an average annual net out-migration of about 31 persons. Anecdotal feedback from this age group through the Community Survey (n=205) indicates that limited medical facilities and cultural opportunities have been key reasons for out-migration.

Residents are dependent on public housing

58% of Whyalla homes are owned, compared with 68% for SA as a whole. 39% of Whyalla homes are rented, compared with 28% for SA as a whole. 21% of rented houses are rented through Housing SA, compared with 6% for SA as a whole, higher than anywhere in SA except the Anangu Pitjantjatjara lands.

Aged and disability care is an important industry

Health and community services contributes \$104 million (8.2%) to Whyalla's Gross Regional Product, the third highest of any sector. Employment is also growing in this sector, compared with decreasing employment in manufacturing and trade in percentage terms. It employs 1,299 people (1,094 FTEs, 15.6% of all jobs and 12.6% of all FTEs), making it important not only for total employment, but as a source of casual and part-time work.

The opportunities are also great

Service provision to older people and people with a disability is a significant and growing economic driver, as the service system moves away from residential care to home-based services driven by consumer choice. The service system for people with a disability is also growing through the implementation of the National Disability Insurance Scheme (\$19.3 billion nationally over the next 6 years). As more people receive funding, and choose how to spend it, service provision will become a major opportunity for businesses and not for profit organisations.

Because the needs are significant, and growing, and because there are also significant opportunities, Whyalla must address its disability and ageing care needs strategically, systematically, and in a coordinated way.

Analysis and consultation

Initiation

The preparation of 'Living Well: Whyalla's Masterplan for Disability and Ageing' was initiated by Regional Development Australia Whyalla and Eyre Peninsula Inc's (RDA WEP's) Whyalla Target Team.

The Target Team was chaired by Ms Annette Kirby, and comprised community leaders, executives and service providers from the Whyalla City Council, Whyalla Aged Care Inc, the University of South Australia, Phoenix Society Inc, Country Health SA Local Health Network, Housing SA, and RDAWEP.

After engagement of consultants to facilitate the process, a project plan and communication and consultation strategy were developed in conjunction with the Steering Group. These documents guided the process from that point.

Review and analysis

A search was made of all relevant local South Australian and Australian plans and strategies affecting residents with a disability and older residents of Whyalla. A comprehensive statistical evidence base was also developed. This is included in Appendix 1.

Community workshops

Following development of initial ideas, eight structured workshops were held in Whyalla from 31 March–4 April 2014 to engage the community, civic leaders, business leaders, and service providers to residents with a disability and older residents. These included:

- 1 workshop for the Mayor, elected Members and senior Council staff (Monday 31 March) (7 attendees)
- 3 workshops for community members generally (Tuesday 1 April) (70 attendees)
- 1 workshop specifically for self-funded retirees (Wednesday 2 April) (2 attendees)
- 1 workshop for business owners generally (Wednesday 2 April) (2 attendees)
- 1 workshop specifically for service providers (Thursday 3 April) (22 attendees)
- 1 workshop for the Steering Group and some additional invited thought-leaders (Friday 4 April) (8 attendees)

While workshop content was tailored to each group, they followed a similar outline. Participants were presented with key socio-economic data for Whyalla, with a particular focus on residents with a disability and older residents, and their insights sought. Using a series of headings covering the major issues, participants were asked to identify what was working well

and not working well at present, and what were the major threats or risks and opportunities for the future.

Notes were taken at each workshop. Over the course of the workshops, comments made at earlier workshops were tested on subsequent workshop cohorts. A consolidated summary of workshop commentary is included in Appendix 2.

General consultation and written submissions

In addition to the workshops, an event was held at Westlands Shopping Centre, Whyalla's largest shopping precinct, to engage the broader community. This was highly successful, enabling more than 50 individual discussions with members of the community and their families. Written submissions were also encouraged, and in fact a number of written submissions were received by email.

Community survey

An online community survey was designed and tested in draft. After two revisions, it went live. It was widely advertised through RDAWEP's website, Council and community Facebook pages, and via television, radio and print media. It was also promoted at community consultation workshops and through email campaigns. Hard copy versions were made available to those who requested them.

202 surveys were completed in total. Of these, 194 were completed electronically, and 8 were completed in hard copy, and subsequently entered electronically. This summary report and the attached detailed report includes all 202 reports.

The response rate represents just over 0.9% of Whyalla's population (21,988, according to the 2011 Census). If it is assumed that only one survey was completed per household, it represents 2.3% of Whyalla's households (8,938, also according to the 2011 Census).

Respondents were predominantly female (58.8%), aged 46-65 (42.7%) or 66+ (34.2%), employed full time (29.7%) or retired and living mostly on a government pension (26.2%), not involved with volunteering (52.8%), and living in Whyalla (96.0%) in a regular house or unit (97.5%).

Most respondents indicated that parents, family members or close friends were living in their own home (73.1%). Others indicated that parents, family members or close friends were living in a residential aged care facility (18.6%) or retirement village (11.0%).

A significant minority of respondents did have a significant disability (17.3%), and even more (33.9%) had family members or close friends with a significant disability.

In general, older residents as a group were significantly more positive about their experience of living in Whyalla than residents with a disability and their families. This is seen in their response to the question, "With 10 being excellent, and 1 being terrible, how would you rate Whyalla as a place to live?" Those answering the question with a focus on older residents rated

Whyalla an average of 6.8. Those answering the question with a focus on residents with a disability rated Whyalla an average of 5.4.

A detailed report on and analysis of survey findings is included in Appendix 3.

Interviews

In addition to broad community consultation and workshops tailored to expert participants, an extensive series of face to face and telephone interviews was conducted with service providers from the government, not for profit, and business sectors. The interviews provided an opportunity to explore issues in depth, gain insights, and test strategies as they developed.

Media engagement

Throughout the consultation process the Whyalla media were heavily engaged, and were highly supportive. Advertising was placed in television, radio and print media. Two television interviews were conducted and more than five newspaper articles. The media continue to be interested in the progress and publication of the plan, and keenly await implementation.

The search for best practice

The consultants also undertook an extensive search for national and international best practice. A thorough search was undertaken online and through existing networks, and included:

- the World Health Organization's leadership in this field, published as *Global Age-Friendly Cities: A Guide*
- national disability and positive ageing reports, plans and strategies for Australia, New Zealand, Canada, Eire, the United Kingdom, Northern Ireland, Scotland, and Wales
- state disability and positive ageing reports, plans and strategies for South Australia and Victoria, and further afield from Nova Scotia
- local disability and positive ageing reports, plans and strategies from San Francisco, interstate from the City of Armadale, Colac Otway Shire, Gannawarra Shire Council, Glenelg Shire Council, and Hobart City Council, as well as locally the Adelaide Hills Council, City of Onkaparinga, City of Unley, and Port Augusta

Some relevant academic literature was also reviewed. Full details of reports, plans and strategies consulted are contained in the references section.

It became evident in the course of this search that Whyalla's commitment to being and becoming a positive place for people to live with disabilities, with ageing, or with both, was exceptional. The global discourse about disabilities was focused on adjustment and economic inclusion, with policies being driven largely by justice and human rights concerns. While the concept of 'positive ageing' was widely discussed internationally, in practice the focus of national, regional and local strategies was on the provision of adequate health care and ensuring adequate incomes. The breadth of vision evident in the scope of Whyalla's project was missing elsewhere.

The quest for best practice assisted in the development of the strategies contained in this Masterplan, and enabled benchmarking of strategies as they developed. The Whyalla project is, however, ground-breaking in its comprehensive vision and positive purpose.

Disability: issues and trends

Disability in Australia

4.2 million Australians, or 18.5% of the population, live with a disability, defined as any limitation, restriction or impairment which restricts everyday activities and has lasted, or is likely to last, for at least six months. 6% of the population have severe or profound disability.¹⁴

Many people with disability are able to live independently and participate in society without assistance, or with the help of informal carers. However, others require formal specialist disability services to study, work, interact with the community or carry out everyday activities.

The most common primary or other significant disability of service users is intellectual (33%), followed by physical (32%) and psychiatric (28%). Three-fifths (59%) of disability support service users are male. Most service users needed some assistance in the activities of daily living (52%), independent living (61%) and in work, education and community living (57%).¹⁵

Disability support services are provided under the National Disability Agreement (NDA), including community support (received by 43% of service users), employment (42%), community access (20%), accommodation support (13%) and respite (12%). Around 1 in 4 service users (26%) use more than one type of service.

Disability can impact on opportunities to participate in the labour force. People aged between 15 and 64 years with disability have both lower participation (53%) and higher unemployment rates (9.4%) than people without disability (83% and 4.9% respectively). Lower employment rates, along with the older profile of people with disability, contribute to 48% of people with disability aged 15 years and over living in a household in the lowest two equivalised gross household income quintiles compared with those without disability (22%).

Having a disability can also impact on educational opportunities and participation in social or community activities. People with disability aged 15 years and over living in households are less likely to have achieved a bachelor degree or higher (13% compared with 25%). 60% of those with disability need assistance with at least one everyday activity, of which 61% had their needs fully met. Nearly four in five people with disability aged 15-64 years living in households, participated in a cultural, recreational or sporting activity away from home in the previous 12 months (79%). This was most likely to be attending a movie, concert, theatre or other performing arts event (53%), or participating in physical activities for exercise or recreation (50%).

¹⁴ Australian Bureau of Statistics. *Survey of Disability, Ageing and Carers*. Cat. no. 4430.0. Australian Government: Canberra, 2012.

¹⁵ Australian Institute of Housing and Welfare. *Disability support services: services provided under the National Disability Agreement 2011-12*. AIHW Bulletin 118. Cat. no. AUS 173. Canberra: AIHW, 2012.

133,800 users of disability support services had an informal carer in 2011–12. The number of service users with an informal carer increased by 24% between 2007–08 (108,091) and 2011–12 (133,841), and by 5% between 2010–11 (127,777) and 2011–12.

Action to remove discrimination

The Disability Discrimination Act 1992 makes it illegal to discriminate against people with disability in employment, education, access to premises, provision of goods, services and facilities, accommodation, buying land, activities of clubs and associations, sport, and administration of Commonwealth Government laws and programs.

In addition to the general provisions of the Act, which apply to all government, public and private organisations, many organisations, including individual government departments, prepare Disability Action Plans to promote inclusive workplaces, recruit and retain diverse workforces, ensure access, facilitate access to training and development by employees with disability, and ensure that departmental services are accessible and adjusted for clients with disability.

State Governments and local governments also publish Disability Action Plans. However, many of the plans published on the internet are out of date, with action taken as a one-off process over (typically) a three-year period, and limited follow-up once plans have been signed off as implemented.

A coordinated national strategic approach to the full range of disability issues is provided by the Council of Australian Governments, which in 2011 published the National Disability Strategy 2010–2020. A disability-supportive employment strategy was published by the Department of Education, Employment and Workplace Relations in 2009, the National Mental Health and Disability Employment Strategy.

However, a study published by PWC¹⁶ found that Australia has a significant opportunity to improve in terms of disability-related expenditure, employment performance and relative poverty. Compared with other countries, Australia has a lower level of spending as a share of GDP on long-term care for people under the age of 65. Expenditure is less than half that in the Scandinavian countries of Denmark, Sweden and Norway.¹⁷ People with disability in Australia are only half (50%) as likely to be employed as people without a disability, compared with 70% in the top eight OECD countries.¹⁸ 45% of people with disability in Australia live in or near poverty, more than double the OECD average of 22%.

¹⁶ PWC. *Disability Expectations: Investing In a Better Life, a Stronger Australia*. Melbourne: 2011.

¹⁷ Productivity Commission. *Disability Care and Support*. Productivity Commission Inquiry Report. No. 54. Australian Government: Canberra, 2011.

¹⁸ Organisation for Economic Co-operation and Development. *Sickness, Disability and Work: Breaking the Barriers—A Synthesis of Findings Across OECD Countries*. 2010.

National Disability Insurance Scheme

Recognising that there was a significant level of unmet demand for disability services which impacted upon the lives of people with disability, their families and carers, and the economic cost of under-participation in society by people with disability, the Australian Government asked the Productivity Commission to undertake a review of disability care and support services. A major report was released in 2011.

The Productivity Commission found that better support would result in almost 370,000 people with disability increasing their employment participation by 2050; additional GDP of almost \$50 billion (an increase of 1.4% in GDP), 80,000 carers entering the workforce or increasing the number of hours worked, and a fiscal gain of \$1.5 billion per annum. These numbers meant that the case for better support was not only socially responsible but economically compelling.

The Government subsequently initiated the National Disability Insurance Scheme (NDIS). The Scheme is administered by National Disability Insurance Agency.

The first stage of the Scheme aims to provide reasonable and necessary support for people with significant and permanent disability, and is being introduced progressively across Australia. On 1 July 2013, the NDIS began in Tasmania for young people aged 15-24, in South Australia for children aged 13 and under (on 1 July 2014), and in the Barwon area of Victoria and the Hunter area in NSW for people up to age 65. From 1 July 2014 the NDIS commenced across the ACT, the Barkly region of Northern Territory, and in the Perth Hills area of Western Australia. Roll-out of the full scheme in NSW, Victoria, Queensland, South Australia, Tasmania, the ACT and the Northern Territory will commence progressively from July 2016. The number of people assisted will rise to 20,000 people with disability by 2015.

The Scheme funds reasonable and necessary supports that help a participant pursue their goals, objectives and aspirations, increase their independence, increase their social and economic participation, and develop their capacity to actively take part in the community. The scope includes education, employment, social participation, independence, living arrangements and health and wellbeing.¹⁹

Reasonable and necessary supports take into account any informal supports—as well as other formal supports, such as health and education.

To be considered reasonable and necessary, a support must:

- be related to the participant's disability
- not include day-to-day living costs that are not related to a participant's disability support needs
- represent value for money
- be likely to be effective and beneficial to the participant
- take into account informal supports already available to participants—those informal arrangements that are part and parcel of family life or natural connections with friends and community services

¹⁹ <http://www.ndis.gov.au/document/768>

Funded supports include:

- daily personal activities
- transport to enable participation in community, social, economic and daily life activities
- workplace help to allow a participant to successfully get or keep employment in the open or supported labour market
- therapeutic supports including behaviour support
- help with household tasks to allow the participant to maintain their home environment
- help to a participant by skilled personnel in aids or equipment assessment, set up and training
- home modification design and construction
- mobility equipment
- vehicle modifications

The Scheme does not currently fund assisted accommodation. About one in three public housing tenants have a disability, but due to long waiting lists, many people with disability live in unsafe, substandard, unsuitable housing. There have been calls to give people with disability priority in the National Affordable Housing Agreement to ensure that this problem is overcome.²⁰

International trends

New Zealand published a *Disability Strategy* in 2001, but it appears to be still current. The Strategy has 15 goals:

1. Encourage and educate for a non-disabling society
2. Ensure rights for disabled people
3. Provide the best education for disabled people
4. Provide opportunities in employment and economic development for disabled people
5. Foster leadership by disabled people
6. Foster an aware and responsive public service
7. Create long-term support systems centred on the individual
8. Support quality living in the community for disabled people
9. Support lifestyle choices, recreation and culture for disabled people
10. Collect and use relevant information about disabled people and disability issues
11. Promote participation of disabled Māori
12. Promote participation of disabled Pacific peoples
13. Enable disabled children and youth to lead full and active lives
14. Promote participation of disabled women in order to improve their quality of life
15. Value families, whānau and people providing ongoing support

Individual government departments plan to implement actions under the Strategy annually, and report.

²⁰ <http://www.abc.net.au/pm/content/2013/s3821397.htm>

In 2013 the Office of the First Minister of Northern Ireland published a strategy to improve the lives of people with disability. The purpose of the Strategy is to:

- set out a high level policy framework to give coherence and guidance to the activities of government departments across general and disability-specific areas of policy
- improve service delivery outcomes for persons with a disability
- increase understanding of the needs of persons with a disability, and ensure needs are recognised when policy is developed or initiatives implemented
- improve opportunities for people with disabilities to contribute across society

The Strategy has seven goals:

1. Choice and Control—ensuring that people with disability are supported to make choice and exercise control over their own lives
2. Early Years and Family Support—ensuring that children with disability receive appropriate support and the opportunity to enjoy the same outcomes as children without disability; and that families are supported to enjoy family life, participate in the life of the community on equal terms, and make informed choices that promote the social inclusion of their children
3. Transitions to Adulthood—ensuring that young people with disability can lead confident, enriched lives and be supported to make a seamless transition to a fulfilled adult life in which they can participate socially, politically, culturally and economically
4. Independent Living—ensuring that people with disability are empowered to become active, independent citizens with the freedom to make choices that affect their lives and access services
5. Employment and Employability—improving opportunities for people with disability in the labour market by providing appropriate support, advice and skills development to enhance employability; and obtain, retain and progress in employment; and supporting employers with targeted information and practical guidance
6. Information and Communication—creating a culture where disability considerations are incorporated into the planning, dissemination and provision of information, nurturing participation in public life, and promoting inclusion in the democratic process
7. Bringing About Change—creating a culture where positive attitudes are promoted, the needs of people with disability are mainstreamed, and services are delivered on a rights basis and in an appropriate and supportive way

Eire also has a National Disability Strategy, developed as part of a Ten-Year Framework Social Partnership Agreement 2006-2015. The Strategy addresses seven key issues:

- assessment for, and access to, appropriate health and education services including residential care, community-based care, and mental health services
- education, vocational training and employment opportunities
- National Standards for specialist health services, including a Code of Practice for Sheltered Workshops
- enhancement and integration of supports in line with overall social welfare commitments and targets
- evolving building standards, leading to improvements in the accessibility of the Irish housing stock over time; and a National Housing Strategy for People with Disabilities

- development of information and advocacy services, including the assignment of a personal advocate to a person with a disability who is unable or who has difficulty in obtaining a social service
- accessible public transport services, including the introduction of accessible vehicles and the provision of accessible infrastructure and travel information systems

The United Kingdom published a cross-government Independent Living Strategy in 2008, sponsored by a group of six government ministers styled the 'Life Chances' minister. The strategy includes eleven government commitments:

1. Promote a shared understanding of the principles and practice of independent living
2. Strengthen the evidence basis to inform future policy development and investment
3. Maximise housing opportunities and choices
4. Enhance the mobility of people whose needs cannot be met by public transport
5. Enable disabled people to have choice and control over their non-acute healthcare needs, and enable them to manage their own long-term conditions
6. Enable individuals to remain in employment
7. Support the transformation of social care to focus on timely, preventative and high quality personally tailored services
8. A universal information, advice and advocacy service for people who need support
9. A coordinated, strategic approach to investing in independent living for older disabled people
10. Ensure a seamless transition into adulthood for young disabled people, including those with complex health needs, in all aspects of their life, including housing, transport, employment, education and training
11. Provide timely and flexible support to families affected by parental disability

Ageing: issues and trends

In common with most developed nations, Australia is experiencing a significant demographic shift toward an older population, a result of a sizeable decline in fertility rates since the 1960s, and an increase in longevity through advances in medical technology and public health initiatives.²¹ Today, those aged 65 years or older comprise around one in seven Australians. By 2050, about one in four will be aged 65 years or older.²²

Population projections for Australia indicate that there will be four million people aged between 65–84 years by 2022, and the percentage of the population in that category and in the over 85 age group is increasing.²³

This gives rise to some important social and economic policy questions, and responding to the shift has therefore become a priority for national and state governments.

A series of enquiries and reports have documented key issues and important trends from the Australian perspective. The first major report was produced by the Productivity Commission,²⁴ and this has been followed by many reports sponsored by the government sector or advocacy groups.

The key issues include:

- growing demand for services
- growing diversity in wealth, incomes, and preferences
- changing care needs
- where care is provided: ageing in place
- improving consumer control: consumer-directed care
- improving aged care workforce attraction and retention
- supporting informal care
- adjusting financing models
- alleviating regulatory overhead
- improving the productivity of service providers

Growing demand for services

The need for some form of assistance with personal and everyday activities increases markedly as people move into older age cohorts, particularly for those aged 85 years and

²¹ Productivity Commission, 2008: xvii.

²² Productivity Commission, 2005.

²³ Australian Bureau of Statistics, 2008.

²⁴ Productivity Commission, 2005.

over.²⁵ Reductions in severe and profound age-specific disability rates in coming years will only partially offset the growing demand for aged care services.²⁶

Growing diversity in wealth, incomes, and preferences

Older Australians are becoming more diverse in terms of their wealth, incomes, preferences, and care needs. This affects the qualitative aspects of aged care services—for example, the range of services expected, and the flexibility of service delivery—as well as the cost of these services.²⁷

Baby boomers typically represent the wealthiest households in Australia. Their wealth and income enable them to purchase the aged care services they want, and they expect to do so. Others, however, are more or less reliant on government income support. While the aged care sector is on the one hand facing the challenge of providing improved services for people with high wealth or incomes, on the other hand they must continue to deliver quality services to those unable to purchase services for themselves.²⁸

Older age cohorts will also progressively reflect greater ethnic diversity as Australia's post war migrants age. As a result, the demand for culturally appropriate, flexible and consumer centred aged care services is expected to increase.²⁹

However, the ability of service providers to differentiate their services in terms of price and quality has been highly constrained by regulation. Consumer-purchased extra services have been limited to accommodation, food and other amenities, and do not include personal care, which is effectively rationed by regulation rather than allocated by free market forces.

Changing care needs

As more people live to older ages, the prevalence of chronic diseases increases markedly. For example, the number of Australians with dementia is expected to increase from around 220 000 to over 730 000 between 2007 and 2050. A decade ago, dementia and Alzheimer's disease were the 6th largest causes of death in Australia, accounting for 4,364 deaths in 2002. Today they are the 3rd leading causes of death with the number of deaths having more than doubled to 9,864. Over the same period of time, deaths due to the first and second causes of deaths (heart disease and brain disease) have been decreasing. If today's current trend continues over the next decade, by 2021 dementia and Alzheimer's disease will be the leading cause of death in Australia.³⁰

There will also be a growing prevalence of co-morbidity—people living with two or more diseases at the same time. As lifespans increase, caring for the very frail becomes an important

²⁵ Australian Bureau of Statistics, 2004.

²⁶ Productivity Commission, 2008: xvii.

²⁷ Productivity Commission, 2008: xvii.

²⁸ Productivity Commission, 2008: xviii.

²⁹ *ibid.*

³⁰ McCrindle, 2014.

issue.³¹ In 2012, there was roughly one person aged 100 years old or more to every 100 babies. By 2060, it is projected there will be around 25 such centenarians.³²

Supporting ageing in place

Many older people wish to remain in their homes and supported in the community for as long as they are able.

Japan has enjoyed the world's longest life expectancy for some time, and is experiencing this demographic shift well ahead of Australia. It has invested heavily to support elderly members of its population remaining in their homes for as long as possible. The program has successfully developed the community care sector to provide this support. It has enabled older people to remain healthy and active members of the community and has reduced the need for residential aged care.³³

Improving consumer control: consumer-directed care

The Australian Government is moving toward consumer-directed care (CDC), the principle that recipients and their carers should have greater control and choice over the design and delivery of the services they receive. All new Home Care Packages must be delivered on a CDC basis.

While it has not proved easy for government, service providers, or service recipients to move toward consumer-directed care, there can be little doubt that this is the long-term direction, as it is with disability funding. Consumers and the community service sector will require significant additional support if such packages are to be implemented widely. For many consumers, ageing in place also requires access to support services such as public housing and public transport.

Improving aged care workforce attraction and retention

Care for older Australians is provided by unpaid volunteer carers such as family members, community-based service providers in the home, or the residential aged care sector.

Due to the tight financial situation of the aged care sector, workers are some of the lowest paid in Australia. Service providers have always faced a challenge in attracting and retaining staff. The sector will face stronger competition for paid workers from the acute care sector, especially for nurses.³⁴ As the aged care workforce itself ages, this problem is expected to increase; and consumer demand is expected to outstrip the ability of the sector to supply services by 2040.

³¹ *ibid.*

³² Productivity Commission, 2013: 6.

³³ http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BriefingBook43p/AgedCare

³⁴ Productivity Commission, 2008: xxii-xxiii.

Some suggested solutions include more flexible models of care, so that care can be provided by people with a wider range of skills and qualifications in a variety of settings. Traditional barriers between medical and community-based care may also need to be removed.

In addition, we have an ageing workforce. The care sector has the highest median employee age of all sectors. The median age for a residential direct care worker is 48 and community direct care workers is 50 years, much older than the median age of an Australian (37.3) and of all Australian workers (40).³⁵ The sector needs to significantly boost its ability to recruit, both to replace retiring workers and to address anticipated capacity shortfalls.

Volunteers also play an important role, and the demographic shift is expected to increase the availability of retired or semi-retired volunteers. However, the aged care sector will face competition for volunteers from other community activities; and aged care organisations must make effective use of volunteers and provide them with a rewarding experience.

Supporting informal care

Family members and other informal carers also play a significant role in supporting the elderly; and although they are generally unpaid for their services, they themselves are ageing, and will become less able to provide these services. While the demand for informal carers is expected to rise by 160% between 2001 and 2031, the supply is expected to increase by less than 60%. Such a shortfall could undermine the sustainability of community care and increase the demand for residential care.³⁶

There are five key areas of concern for informal carers of the aged: access to information about support services; financial support; access to respite and other care services; flexibility of their own workplaces; and training and assistive technologies.³⁷

Adjusting financing models

The Australian Government spends around \$10 billion per annum on the aged care sector, with around two-thirds of this expenditure directed to residential aged care.

Those older Australians in residential care who can afford to contribute to the cost of their care are also expected to do so. However, many aged care providers operate at a loss because charges are capped by regulation, and Government subsidies are insufficient to meet the cost of providing care. Even where providers are able to run small surpluses, the low returns discourage investment in new facilities or upgrades or extensions to existing facilities. As care costs rise, finding a solution is becoming more pressing.

Various alternative funding models have been floated, including separation of accommodation costs from the costs of providing care, a move to uncapped, market-based charging, and the increased use of aged care bonds to fund capital infrastructure. The

³⁵ McCrindle, 2014.

³⁶ Productivity Commission, 2008: xxiii.

³⁷ Productivity Commission, 2008: xxiv.

Productivity Commission has floated the prospect of a home equity release scheme, similar to a reverse mortgage, to help consumers pay for services.³⁸ Other proposals include long term care insurance, healthy ageing savings accounts, and vouchers.³⁹

The residential aged care sector is more heavily subsidised than the community care sector. However, care provided in the community typically costs less to deliver. Apart from social community preferences, this financing reality is a key driver for government policy settings that encourage aged residents to remain in their homes as long as possible.

Alleviating regulatory overhead

The Australian Government regulates all aspects of aged care, from determination of planning ratios, the setting of subsidies, the allocation of licenses, and the assessment of older Australians for access to community-based care packages or residential aged care places. The regulations are intended to maintain safety and quality standards, thus protecting the vulnerable; to protect aged care consumers financially; and to control supply and therefore public expenditure.

There is strong pressure to allow more consumer choice and to deregulate service providers. The Government is understandably cautious about deregulation, but the combination of rising expectations and costs with fixed subsidies and capped charges means that some deregulation is inevitable. Structural and regulatory reform will improve the sector's ability to balance supply and demand.

Improving the productivity of service providers

The Hogan Review examined the efficiency of Australia's residential aged care sector. It found that the cost of providing residential services could be reduced by 17% or \$1.1 billion (2002-03) if all providers were to adopt the technical efficiencies utilised by the best performing service providers. The study also suggested that costs could be reduced by a further 7% (or \$470 million) in 2002-03 by consolidating providers and improving scale efficiency. The study recognised that costs are higher and there is less scope for improving productivity in rural or remote locations.⁴⁰

Anecdotal evidence suggests that further productivity improvements can be obtained from:⁴¹

- improving the efficiency of administration and care through information technology;
- increasing the use of assistive technologies;
- improving the flexibility of work practices through enterprise bargaining; and
- restructuring operations, including outsourcing and adjusting the capital/labour mix in service provision.

³⁸ Productivity Commission, 2013: 16–17.

³⁹ Access Economics, 2010: 27–37.

⁴⁰ Productivity Commission, 2008: xxiv.

⁴¹ Productivity Commission, 2008: xxv.

It is acknowledged that current regulatory settings also interfere with productivity. Areas identified include:

- constraints on the supply of aged care services;
- duplication of building certification requirements;
- inconsistency in the application of accommodation bonds across service types; and
- administrative inefficiencies with contract management in community care.

The ongoing reforms are imposing an increased compliance burden on providers. The cost and complexity of implementing information systems to support this activity is making it more difficult for smaller providers, and with an influx of private providers also entering the market, consolidation of providers is now considered a certainty.⁴²

Recent reforms

Three reform packages have been put through the Federal Parliament over the last decade, the most recent being the Gillard Government's *Living Longer Living Better* package.

This consolidated existing community aged care packages into one Home Care program, and increased the number of packages from just under 60,000 to almost 100,000 by 2016–2017. The program provides care at four different levels to accommodate varying needs for care.

The package also made changes to the funding of residential aged care. Consumers are expected to make further payments in addition to the Basic Fee, subject to a means test, annual fee caps, and an annual lifetime care cost limit of \$60,000.

However, the total number of aged care packages is subject to continuing government restrictions, which is expected to cause further problems with demand outstripping supply.

www.myagedcare.gov.au is now up and running as a one-stop source of advice and information for older Australians. Detailed information about the new packages can be obtained from that site.

State Government approaches

With the Australian Government's social and financial responsibility for delivering community-based and residential care services to the ageing, it is understandable that its policy and strategy functions have been focused in this area. State and territory governments such as the South Australian Government have taken a much broader, more holistic view of ageing.

For example, the South Australian Government has developed an Ageing Plan, *Prosperity Through Longevity*.⁴³ Objectives include:

- acknowledge the population's wide diversity

⁴² <http://www.icarehealth.com.au/blog/aged-care-coalition-government/>

⁴³ Government of South Australia. *Prosperity Through Longevity: South Australia's Ageing Plan 2014-2019*. Adelaide, 2013.

- respond directly to the voices of older South Australians
- recognise seniors as vital drivers of the State's social infrastructure and economy
- uphold the right of seniors to safety, security and informed decision making
- promote the participation of seniors in civic life and support opportunities for lifelong learning and social and economic engagement
- support good urban and regional planning for user friendly environments that benefit all ages
- promote the value of intergenerational collaboration

Actions include:

- engaging older South Australians through YourSay, an online hub; annual Conversations with Seniors forums, in partnership with Council on the Ageing; support for National Change Day; and an all-ages-friendly forum
- improved access to transport through removal of age-based driver testing, extension of free Seniors Card holders travel periods in the Adelaide metropolitan area, upgrades to Adelaide's public transport network, and continued support for Community Passenger Networks
- advocacy to address age discrimination in employment, and a greater focus on encouraging environmental volunteers, including volunteers with intellectual disabilities
- promotion of falls prevention, healthy eating in residential aged care, improvements to the treatment of older people with dementia, guidelines for public hospitals and aged care facilities working together, a focus on veterans health, and support for Advance Care Directives
- grants to the Independent Arts Foundation and community radio to involve older South Australians in arts, culture and lifelong learning
- extension of the Age-Friendly Neighbourhoods Guidelines and Toolkit, and development and implementation of reforms to South Australia's Retirement Villages Acts
- empowering seniors to stay safe, including through rebates to purchasers of personal alert systems, and promotion of cyber-safety

Similar approaches have been taken by other State Governments.

Local government approaches

Local governments provide many services to older citizens. These vary from locality to locality, but include important services such as housing, residential care, residential aged care, roads and pedestrian routes, buses and other public transport services, parks, gardens, and other open spaces, recreational and cultural facilities such as swimming pools, public libraries, and art galleries, community halls and social programs. Local government is also a focus for community and civic leadership.

As the population ages, local government has also responded to the demographic shift at the State level through the Local Government Association of South Australia,⁴⁴ and nationally through the Australian Local Government Association, which commissioned an action plan and various tools—for example, development of guidelines for age-friendly built environments—in the early 2000s.⁴⁵ The guidelines focused on:

- promotion of age-friendly built environments
- age-friendly community planning and design
- creation of safe and secure pedestrian environments
- housing choice
- improved mobility options for older residents
- recreation facilities, parks and trails

Supported by State Government, many local governments also took the initiative to invest in the development of positive ageing strategies. Notable South Australian examples include Adelaide Hills Council, City of Onkaparinga, and City of Unley. Other notable examples from across Australia include City of Armadale in New South Wales; Colac Otway Shire, Gannawarra Shire Council, and Glenelg Shire Council in Victoria; and Hobart City Council in Tasmania.

These action plans include a wide range of diverse actions tailored to local needs, but key themes include:

- coordinating policy and strategy between government agencies and key service providers in the local government area
- ensuring that the contributions of older residents to community life are valued, respected and celebrated through annual events
- promoting older residents who are high achievers in arts, sports, community service, and business as positive role models and community champions
- facilitating intergenerational activities
- encouraging service providers to adopt positive approaches to older residents
- encouraging residents to begin planning for their future needs—for example, housing, medical care, and support services—in their 50s
- ensuring the financial viability and high community profile of community centres
- ensuring that older residents are included in community consultation programs
- coordinating opportunities for older residents to engage in volunteering, as well as social and cultural activities
- ensuring that local government itself is setting a good example by integrating age-friendly principles into local government infrastructure, and residential and commercial developments
- advocating for adaptable housing that can be modified as residents age in place
- supporting community transport networks
- work with health and community care providers to ensure adequate coverage in the local government area
- provide physical activity and exercise programs

⁴⁴ Local Government Association of South Australia. *Ageing Strategy 2011 – 2016*. Adelaide, 2011.

⁴⁵ Australian Local Government Association. *Australian Local Government Population Ageing Action Plan 2004-2008*. Deakin, 2004. See also *Age-Friendly Built Environments: Opportunities For Local Government*. Deakin, 2006.

- directly provide or facilitate the provision of home care packages for older people residing at home

International best practice

Like Australia, other sovereign governments around the world are planning for the ageing of their communities. It is difficult to obtain detailed information in English about initiatives being undertaken in nations such as Sweden, Denmark, and the Netherlands, but significant recent work from a holistic positive ageing perspective has been undertaken in New Zealand, Scotland, Ireland, Northern Ireland, and Wales.

The New Zealand *Positive Ageing Strategy* was developed in 2001, but is still current. It identifies ten goals, supported by annual action plans and monitoring processes:

1. Income - secure and adequate income for older people
2. Health - equitable, timely, affordable and accessible health services for older people
3. Housing - affordable and appropriate housing options for older people
4. Transport - affordable and accessible transport options for older people
5. Ageing in the Community - older people feel safe and secure and can age in the community
6. Cultural Diversity - a range of culturally appropriate services allows choices for older people
7. Rural Services - older people living in rural communities are not disadvantaged when accessing services
8. Positive Attitudes - people of all ages have positive attitudes to ageing and older people
9. Employment Opportunities - elimination of ageism and the promotion of flexible work options
10. Opportunities for Personal Growth and Participation - increasing opportunities for personal growth and community participation

Of the British governments the Government of Northern Ireland was first off the mark, publishing *Ageing In An Inclusive Society* in 2005. The strategy identified the key causes of social exclusion as:

- insufficient income
- remote locations
- discrimination, particularly workforce discrimination
- poor health
- limited access to transport

The plan's six objectives aim to:

1. Ensure that older people have access to the financial and economic resources needed to lift them out of exclusion and isolation
2. Deliver integrated services that improve the health and quality of life of older people
3. Ensure that older people have a decent and secure life in their home and community
4. Ensure that older people have access to services and facilities that meet their needs and priorities

5. Promote equality of opportunity for older people, full participation in civic life, and challenge ageism
6. Ensure that government works in a coordinated way across departments and with social partners to deliver services effectively

The Scottish Government already has many initiatives in place to support positive ageing. 50,000 Scots receive free personal care, including remotely through telecare. Health programs include programs specifically providing physical activity for older people, including walking, supporting falls prevention, and providing free eyesight examinations. A Care and Repair program supports older people staying in their homes as long as possible. A Care Commission publishes National Care Standards.

The National Concessionary Travel Scheme subsidises transport services for older people, and the Government also funds Demand-Responsive Transport Services such as dial-a-ride and dial-a-bus, particularly for rural communities. The Central Heating Programme and other fuel poverty programmes assists Scots with lower disposable incomes to stay warm in winter. Safety is addressed through programs acting against anti-social behaviour.

Those who wish to work are supported through a Lifelong Learning Strategy and Workforce Plus. Another program supports continuing involvement in volunteering. A Digital Inclusion Strategy aims to help older people access information technology. Programs in schools address intergenerational relationships. A helpline provides advice and assistance to older people.

In 2006 Scotland's Futures Forum published *Growing Older and Wiser Together: A Futures View on Positive Ageing*. In 2007 the Scottish Executive published *All Our Futures: Planning for a Scotland with an Ageing Population*. The plan's six goals include:

1. Improving opportunities for older people, removing barriers and to create more chances for older people to participate and to be involved in their communities as volunteers; through paid work; in learning, leisure, culture and sport
2. Forging better links between the generations
3. Improving the health and quality of life of older people
4. Improving care, support and protection for those older people who need it
5. Putting in place housing, transport and planning infrastructure
6. Offering learning opportunities throughout life

The planning framework is supported by a National Forum on Ageing, a national stakeholder event, a set of measures and regular reports to Parliament.

The Welsh Assembly Government published a *Healthy Ageing Action Plan* in 2005, and a more holistic plan entitled *Living Longer, Living Better* in 2008. The plan has four themes:

1. Valuing older people—maintaining and developing engagement
2. Changing society—the economic status and contribution of older people
3. Well being and independence—including health, well being, social care and housing services
4. Making it happen—funding, improving services, planning and communicating

Key strategies under the plan include:

- establishing a Commissioner for Older People
- promoting social inclusion
- promoting a more positive image of older people
- setting up forums and networks for engagement with older people
- encouraging intergenerational activities
- counteracting age discrimination
- improving access to road and rail transport
- development of more age-friendly built environments
- helping older people through the digital switchover, and improving access to information technology
- encouraging the recruitment and retention of older workers
- nurturing lifelong learning
- recognising the volunteer contributions of older citizens
- ensuring adequate retirement incomes for older citizens
- promoting healthy ageing, with a particular focus on nutrition
- preserving independence at home through home maintenance and fuel poverty programs
- support for carers
- improvements to the quality and consistency of health and social services
- preserving the dignity and respect of older citizens
- setting standards for those providing services to residents with mental health issues
- raising standards in residential aged care
- putting in place political and administrative structures, partnerships, funding, monitoring and research to enable the implementation of strategies

In a process substantially funded by Atlantic Philanthropies, the Government of Eire developed a *National Positive Ageing Strategy*, which was published in 2013. The strategy sets out four national goals:

1. Remove barriers to participation and provide more opportunities for the continued involvement of people as they age in all aspects of cultural, economic and social life in their communities according to their needs, preferences and capacities.
2. Support people as they age to maintain, improve or manage their physical and mental health and wellbeing.
3. Enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.
4. Support and use research about people as they age to better inform policy responses to population ageing in Ireland.

The goals are supported by more specific objectives.

Like the Australian Government, the Government of Canada is primarily focused on ensuring adequate retirement incomes and good levels of health for older residents, leaving strategies for positive ageing to provincial governments. A good example is the *Strategy for Positive Aging in Nova Scotia*, published in 2005.

The framework contains nine positive ageing goals:

1. Celebrating seniors
2. Financial security
3. Health and well-being
4. Maximizing independence
5. Housing options
6. Transportation
7. Respecting diversity
8. Employment and life transitions
9. Supportive communities

The United Nations Organisation

The issues and trends evident in Australia are reflected in the global outlook for ageing communities; and global organisations are also responding. The United Nations released an *International Plan of Action on Ageing* in 2002 which highlighted the demographic trends in developed and developing nations, and called on member nations to report progress in addressing the plan's three priority directions. These are:

- supporting the continued economic contribution of older persons—key sub-themes include education and training, intergenerational solidarity, poverty prevention and eradication, income security and social security, and disaster management
- advancing health and wellbeing into old age—key sub-themes include access to health care services, HIV/AIDS, mental health, disabilities, and the training of health professionals and care providers
- ensuring enabling and supportive environments—key sub-themes include housing, support for caregivers, protection of older people against neglect, abuse and violence, and promotion of positive images of ageing.

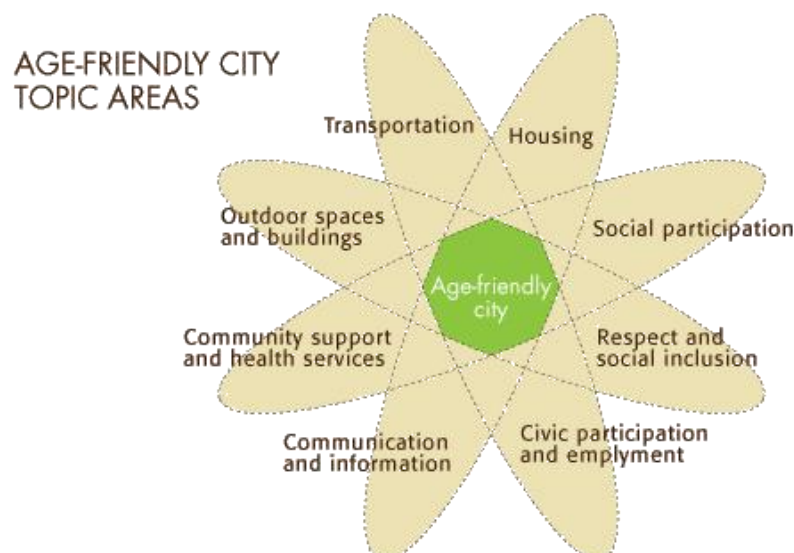
The World Health Organisation

The World Health Organisation (WHO) has also focused the international community on “active ageing”; that is, “optimizing opportunities for health, participation and security in order to enhance quality of life as people age.” The WHO model identifies six determinants of active ageing, in a broader context of gender and culture influences.



World Health Organisation. *Determinants of active ageing*.
Source: <http://wisdom.unu.edu/en/healthy-ageing/>

WHO has also published a guide for the development of age-friendly cities, which identified eight topic areas.⁴⁶ These are summarised in a self-assessment checklist. This checklist has been used as a filter for the strategies developed in Whyalla's Masterplan. Through implementation, therefore, Whyalla will qualify to become a member of the WHO Global Network of Age Friendly Cities and Communities, raising the profile of these issues in the community, elevating the status of the city, and linking it to an important international practice network.



World Health Organisation. *Age-friendly city topic areas*.
Source: <http://wisdom.unu.edu/en/healthy-ageing/>

⁴⁶ World Health Organization. *Global Age-Friendly Cities: A Guide*. Geneva, 2007.

Implications for Whyalla

Despite the challenges facing ageing communities around the world, governments are responding positively with a holistic focus on encouraging economic contribution and social participation from older residents, while supporting them with a living income and good health and care systems. From the many different approaches being adopted across Australia and around the world, the following key themes emerge:

1. The need for vision and leadership from a combination of government, business, and the community sector, in which residents with disability and older residents are themselves actively engaged and consulted
2. The importance of monitoring the implementation of action plans, and considering again what action might need to be taken to remove barriers to full social and economic participation and access to services by residents with disability
3. The importance of advocacy and assistance to navigate the complex systems of support for residents with disability and older residents
4. The need to ensure the safety and security of residents with disability and older people both in their own homes and as they move around the community
5. The importance of well-maintained, affordable and adaptable housing to ensure that residents with disability can live independently, and that older residents can remain in their own homes as long as possible, together with personal support, and household services; and quality residential care when they require a higher level of care than can be delivered in their own homes
6. The importance of access to transport infrastructure and affordable public transport services to ensure social participation and ready access to services
7. The vital importance of access to comprehensive health services, good nutrition, and physical exercise programs to ensure that residents with disability and older citizens are healthy and active
8. The need to confront the challenge faced by the ageing and retirement of the health and care workforce on the one hand, and the growing demand for services on the other, through training and recruitment of a skilled health and care workforce
9. The value of encouraging continuing learning and personal development, particularly with respect to information technology, in order to overcome the digital divide and facilitate the digital switchover
10. The importance of enabling young people with disability to transition seamlessly to adulthood, with full access to services and opportunities

11. The current and increasing importance of economic participation in employment and volunteering by residents with disability, and the need for a community-wide commitment to make that happen across the government and private sectors
12. For those older residents who wish to continue working, or to volunteer, the importance of providing flexible employment and rewarding opportunities for volunteers, tackling age prejudices and discriminatory behaviours, and encouraging older citizens to stay engaged and share their wisdom, experience, knowledge, and skills for as long as possible
13. The importance of constructing built developments, open spaces, and living communities that are friendly for residents with disability and older residents, including ready access to services and amenities, and a wide range of social and cultural activities

These themes, together with those that have emerged from a review of national and international best practice in supporting residents with disabilities, and their families, have informed the strategies included in Whyalla's Masterplan.

Living well: a 2025 vision for Whyalla

Consultation and analysis has led to the development of the following 2025 vision for Whyalla.

An acknowledged national and international leader

In 2025 Whyalla is a member of the World Health Organisation's Global Network of Age-Friendly Cities and Communities (GNAFCC), and is known nationally and internationally as a benchmark age-friendly community. It is also the world's first declared Disability-Friendly City, and is lobbying WHO to establish a similar global network focused on disability.

Unified leadership

An inclusive and dynamic leadership group—encompassing community, civic and regional leaders, local, Commonwealth and State government agencies, not for profit service providers and businesses, and reaching out from Whyalla itself to embrace the towns and settlements of the eastern Eyre Peninsula—is engaged with, listening to, and advocating for residents and their needs through regular annual forums and always-open, two-way communication, supported by information technology.

A shared vision

The leadership group and its partners across the community share a vision for the City and its wider region as a caring, supportive, and vibrant community in which people with a disability and older residents can live positive, purposeful, and fulfilling lives.

First round of strategies implemented, more in the pipeline

And Whyalla has harnessed its independence, resilience and community spirit to make the vision a reality. The leadership group has implemented all of the strategies set out in the first version of the Masterplan, and is well on the way to implementing a second or third round of strategies—more ambitious, even, than the first.

Active service provider forum

Whyalla's leadership group are supported by a service provider forum at management level to ensure efficient and effective delivery of services from all three spheres of government, the community sector, and business.

Strongly positive reputation

Whyalla is seen as a desirable place to move to, raise a family, live, work, play, and retire; where people with a disability or older people can advocate for their needs, promote their ideas, and be heard.

<i>Supportive culture</i>	Disability or age are not used to define any member of the community, or make assumptions about their role, value or potential.
<i>A well-connected, secure society</i>	Residents enjoy a relaxed but productive lifestyle, and a pervasive feeling of peace, safety and security, whatever their personal situation. Well connected to their family, friends, and neighbours, they watch out for each other. A strong sense of community identity and mutual responsibility, underpinned by a prominent but friendly police presence, ensures a low crime rate.
<i>Prepared for emergencies</i>	Robust and inclusive emergency planning, and well-resourced crisis response and emergency services, ensure that Whyalla is well-prepared to help the members of its community through any personal crisis or community emergency.
<i>A range of accommodation choices</i>	A range of accommodation choices are available to all Whyalla residents, depending on personal wealth and income levels, personal preferences, and individual needs; from well-maintained, affordable, energy-efficient housing for older residents on limited incomes, with adaptations in bathrooms and kitchens to ensure that they can live independently in their own homes as long as possible; to specially designed housing for residents with disabilities and their carers; to cluster housing close to amenities; to premium retirement living options along the foreshore; to quality residential aged care facilities for those who require higher levels of care.
<i>Many retail outlets, services and hospitality options, easy to get around</i>	<p>Safe, well-lit streets and well-maintained roads and paths make it easy for Whyalla's residents to be active around the city on foot, on bicycles, wheelchairs, or gophers, or in cars, accessing personal or professional services, shopping at a wide range of retail outlets, sharing a beer or a coffee at one of many pubs, coffee shops, or restaurants, or simply taking the air. Retail precincts, commercial districts, and community facilities all have adequate dedicated parking for residents with special needs.</p> <p>In addition to personal transport, residents move around by bus or taxi; and, as they wish, travel to and from other regional towns, Adelaide, interstate or overseas by road or air, with affordable options available to those who are in a position to plan ahead.</p>
<i>A long life expectancy, supported by a full range of services</i>	Whyalla is a healthy place to live. Residents enjoy more years of healthy life, and the number of people aged over 100 has risen. Residents access a wide range of health services, including a full suite of primary care and allied health services, the modern general hospital, and its wide range of emergency, general and specialist services.

Those with special needs receive funded disability services, delivered by skilled staff who are based locally. The many dedicated personal carers are supported with day care and respite options. Quality community support and household maintenance services are provided to those who need assistance. Services are people-centred, accessible, and available when and where they are required.

Effective education, with bridges to employment

Young people with special needs participate in dedicated primary and secondary education programs, with effective bridges to employment or tertiary study.

Care sector training in partnership with employers

Whyalla's care sector offers abundant and diverse employment. Trainees have ready access to vocational and professional education at a high level through Whyalla's TAFE campus, the University of South Australia, and niche private providers. Even while they study, graduates know that local employment awaits them in well-run, efficient organisations that offer competitive wages and conditions, and a richly rewarding professional career in health and personal care, including many opportunities to develop and grow their skills over time.

A lifelong learning culture

And the learning never stops. Whyalla prides itself on being a learning community; and its residents continually seek to develop their knowledge, skills, and interests through a range of informal development opportunities, in which they actively engage.

People with disabilities and older residents valued in mainstream work

The continual focus on learning has paid off. People with disabilities are welcomed into work suited to their preferences, skills, and needs. Older residents choose to work well past the official retirement age in flexible employment, contributing to the local economy, passing on their skills and experience to younger generations, topping up their retirement savings and travel funds.

Active volunteering

Others are actively involved in volunteering at Whyalla's many community organisations, cultural institutions, social care or environmental groups. Disabled and older workers and volunteers are widely recognised and celebrated for their continuing contribution.

Ready access to information

All residents have ready access to information and the internet, and use them all the time to access authoritative, user-friendly, up to date information and advice, coordinate their activities, and share their ideas.

The healthy outdoors

In their abundant free time, Whyalla residents enjoy the City's well-equipped civic spaces, public parks and recreation facilities, which have made special provision for those with special needs. The foreshore and nearby conservation parks are particular attractions.

*Vibrant membership
networks and cultural
institutions*

Residents with disabilities and older residents can often be seen before work, in the evenings, or on the weekends out and about, walking or exercising to connect with others and maintain their own good health.

Everybody, it seems, belongs to an active network of some kind—if not three or four. Multicultural associations, sporting clubs, interest groups, churches, the Men’s Shed, the ratepayers’ association—all are bursting with active members when they meet in Whyalla’s many community facilities. The Middleback Theatre runs a full program of concerts, live performances and film screenings. The Art Gallery is the pride of the City, and well-known throughout Australia for its vigorous public art programs. The Civic Library has the highest per resident usage rate in the country. Whyalla’s museums are supported by passionate volunteers. These quality cultural facilities, and an active and strongly supported program of community festivals and events are attractive and accessible to all residents, including those with disabilities and older residents.

*Increased tourism
converts to inward
migration*

These are among the many local attractions that have drawn a significant increase in tourists to the City and the wider region. And so enjoyable is the experience that many of them choose to return—to live.

*Living in Whyalla means
living well*

Because no matter who you are, or what your personal circumstances, living in Whyalla means living well.

The Whyalla Way

The Whyalla community is committed to maximising the social and economic wellbeing and participation of every person in the community, including older people and people with a disability.

As a result of implementing the Masterplan, Whyalla will become an even more desirable place, where people with a disability, or older people can:

- advocate for their needs, promote their ideas, and be heard
- influence community outcomes
- feel safe at home and around the city
- live affordably and well
- move around easily
- enjoy good health
- access all the services they need
- continue to learn and grow
- enjoy a range of fitness and outdoor activities
- interact and participate in a wide range of social networks and cultural activities

To achieve these outcomes, Whyalla will demonstrate the independence, the resilience and the community spirit for which it is famous.

We will create a strong and effective partnership between Whyalla's community, civic and regional leaders, local, Commonwealth and State government agencies, not for profit and business service providers.

We will bring together the leadership and the resources required, and work together to provide for needy members of its community.

This will make the City an even better place to live in 2025 and beyond.

Civic and major regional institutions and organisations

Whyalla City Council
Civic Library
Middleback Theatre
Art Gallery
Museums
Regional Development Australia
Whyalla Eyre Peninsula

Community networks and associations

Ratepayer Association
Advancement associations
Business networks
Professional associations
Service clubs
Men's Shed
Multicultural networks
Pensioner associations
Churches
University of the Third Age

Not for profit service providers

Whyalla Aged Care Inc
Calvary Silver Circle
Disability Employment Services
Phoenix Whyalla
Amaroo Lodge/DPI
Orana
Novita
Riding for the Disabled
Centacare Catholic Family Services
St Vincent de Paul Society
Uniting Care Wesley
Mission Australia
Royal Flying Doctor Service

***Living Well –
The Whyalla
Way***

State and Commonwealth Government agencies

Disability SA
DECS
Housing SA
Country Health SA
Local Health Network
Aboriginal Health Service
Eastern Eyre Health & Aged Care
SA Police, SA Ambulance,
MFS, CFS, SES
Parks and Wildlife
Country North SA Medicare Local
Centrelink
NDIA, DOHA
TAFE, University of South Australia

Business service providers

Des's Cabs and Transport
Premier Stateliner
Rex
GPs, allied health service providers,
dentists, pharmacists
OrthoEyre

Private and public media

Whyalla News
Southern Cross Broadcasters
Radio 5CK
Radio 5YYY

Goals, objectives and strategies

The search for best practice, analysis of Whyalla's present needs and future prospects, consultation with the community and with relevant experts identified the issues for Whyalla, and pointed to twelve key goals:

1. Vision, leadership, consultation and action
2. Personal and public safety and security
3. Housing and residential care choices
4. Well-maintained roads, paths and access
5. Accessible public transport services
6. Comprehensive health, personal support, and household services
7. A skilled health and care workforce
8. Education, training and personal development programs
9. A wide range of retail and hospitality options and professional services
10. Opportunities for employment and volunteering
11. Well-maintained open spaces, and a range of recreational activities
12. A wide range of social and cultural activities

Each goal is supported by a coherent set of objectives and strategies. As these developed they were tested in group and individual discussions. Four criteria were applied: were proposed strategies necessary, important, viable, and likely to be effective as responses to the issues identified? Following several rounds of consultation with the Steering Group, the strategies were finalised, and implementation priorities identified.

Implementation

The Masterplan identifies priority actions over a 10-year timeframe. Leadership responsibilities and potential funding sources have also been identified. Finally, actions are mapped against three time horizons: the short term (1–3 years), the medium term (4–6 years), and the longer term (7–10 years).

1

Vision, leadership, consultation and action

Objectives

- A **shared vision** of the City as a caring, supportive and vibrant community in which people with a disability and older residents can live positive, purposeful and fulfilling lives
- An inclusive and dynamic **leadership group** who listen to and advocate for people with a disability and older residents
- A forum for **regular consultation** with people with a disability and older residents
- A shared **community plan** for meeting the needs of people with a disability and older residents, adequately funded, vigorously implemented, and regularly reviewed
- A mechanism to facilitate **coordination between service providers**
- A **community communication system** that is effective in reaching people with a disability and older residents
- An effective **challenge mechanism** to maintain aspiration and stimulate ongoing innovation

Community views

The community did not comment largely on vision, leadership, consultation and action. However, at a practical level, they did indicate that often they found service offerings uncoordinated and disconnected. The community also asked for greater involvement in decision-making.

Analysis and assessment

Vision, leadership, consultation and action come from many sources in the Whyalla community. The Whyalla City Council provides strong civic leadership. Whyalla also has strong business and community networks, which bring community leaders and active members of the community together. These include:

Civic networks

- Residents and Ratepayers Association

Advancement associations

- Advancing Whyalla
- Whyalla First

Business and professional networks and associations

- Whyalla Chamber of Commerce and Industry Inc
- Young Tradespeople and Professionals Whyalla
- Enterprising Women Whyalla

	<ul style="list-style-type: none"> • Whyalla City Plaza Business Traders Association Inc. • Westland Shopping Centre Traders Association
<i>Service clubs</i>	<ul style="list-style-type: none"> • Rotary Club of Whyalla • Rotary Club of Whyalla Norrie • Lions Club of Whyalla Inc • Lions Club of Whyalla Mount Laura Inc • Apex Club Whyalla • Rotary Club of Whyalla • Jaycees • Whyalla Mount Laura Lions Club Inc.
<i>Multicultural networks</i>	<ul style="list-style-type: none"> • Whyalla Multi Cultural Communities Centre
<i>Pensioner networks</i>	<ul style="list-style-type: none"> • Happy Pensioners Social Group • Ladies Probus Club of Whyalla Inc. • Whyalla Norrie Probus Club • South Australian Pensioners Association Inc. Whyalla Branch • Association of Independent Retirees, Whyalla & Districts Branch • Whyalla Senior Citizens Club
<i>Other important networks</i>	<ul style="list-style-type: none"> • Men's Shed

The many government agencies and not for profit service providers with active operations in the city bring important leadership of their own, and Regional Development Australia Whyalla and Eyre Peninsula brings an important regional perspective.

What is imperative is that these many sources for leadership work in a coordinated way to address the opportunities and challenges facing Whyalla from disability and ageing by adopting a shared vision, establishing forums to consult with the community, and supporting the implementation of the Masterplan.

If the community is to be engaged and involved in the process, then it needs access to information, and ways of making itself heard.

Information about services for people with a disability and older residents is widely disseminated through media advertising and community noticeboards. The Whyalla City Council publishes a Seniors Directory that is regularly updated, and new residents receive a 'Welcome to Whyalla' pack which includes information about services for people with a disability and older residents.

However, the internet is increasingly the medium of choice for distributing information about services. Many people with a disability and older residents are uncomfortable with or unable to use the internet, and may not even have ready access to it. As the internet has become the dominant means of publishing information and communicating with the community, it is imperative that the community is helped to get up to speed with using the internet—including

those users such as residents with disability and older residents who may find it more challenging than usual.

Strategies for vision, leadership, consultation, and action

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
1.1. Form the Whyalla Disability and Ageing Leadership Group, co-chaired by the Mayor or a Councillor, and a community representative appointed by RDAWEP, and comprising representatives of key government, not for profit, and business service providers; community advocates for disabled and older residents; major employers and business leaders; and State and Commonwealth Members of Parliament or their representatives	Co-chairs to be appointed by Whyalla City Council and RDAWEP	By March 2015	—
1.2. Formally adopt the Masterplan and its vision for Whyalla	Leadership Group	By March 2015	—
1.3. Commit Whyalla to becoming a World Health Organisation-recognised Age-Friendly City, apply to join the WHO Global Network of Age-Friendly Cities, and commit to becoming the world's first Disability-Friendly City ⁴⁷	Leadership Group	By March 2015	—

⁴⁷ This is a new concept. It is proposed that Whyalla would develop a Disability-Friendly Checklist, based upon the WHO's Age-Friendly Checklist, and covering the eight topic areas of housing, transportation, community support and health services, outdoor spaces and buildings, communication and information, civic participation and employment, respect and social inclusion, and social participation. Having prepared the checklist, Whyalla would review its own status as a Disability-Friendly City, and make adjustments to the Disability and Ageing Masterplan if required. Having committed itself to action, it would then escalate the concept to the WHO in conjunction with the South Australian Government, the Australian Local Government Association, and the Australian Government's Department of Health and Department of Foreign Affairs, for adoption as a global standard that is the disability counterpart to Age-Friendly status.

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
1.4. Adopt a charter for the Leadership Group, including visioning, consultation, advocacy, information sharing, service coordination, planning, funding opportunities, and implementation	Leadership Group	By March 2015	—
1.5. Investigate funding sources for a Masterplan Implementation Officer, to drive communication, fund-raising and implementation projects, and provide a secretariat for the Leadership Group—employed through the Whyalla City Council	Leadership Group, supported by Whyalla City Council, RDAWEP, and private sector	By March 2015	Initial funding to be provided by Council, with support from partners; longer-term funding to be sourced by Masterplan Implementation Officer
1.6. Schedule a first Annual Disability and Ageing Forum for ongoing community consultation	Leadership Group	By March 2015	Not significant
1.7. Ask all organisations who are members of the Leadership Group to review their access and inclusion plans in the light of the Masterplan	Leadership Group	By June 2015	Self-funded
1.8. Review and update the Masterplan	Leadership Group	Annually	Linked to Masterplan Implementation Officer

Strategies for communication

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
1.9. Agree on a communication strategy, including newspaper, radio, television, Facebook, library, and community networks	Leadership Group, with input from media organisations	By March 2015	Developed by Masterplan Implementation Officer

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
1.10. Establish two moderated Facebook pages—one for residents with a disability, and one for older residents	Masterplan Implementation Officer	By March 2015	Implemented and managed by Masterplan Implementation Officer
1.11. Work with existing training providers and networks to train association officeholders and members in the use of email, Facebook and the internet	Coalition of University of the Third Age, Men's Shed, Mission Australia	By June 2015	Through existing channels
1.12. Maintain public access to the internet, at no or minimal charge, in public places such as government offices, community centres and libraries	Whyalla City Council	Ongoing	Whyalla City Council
1.13. Work with associations to obtain technology grants or inexpensive computers for association business	Masterplan Implementation Officer	By June 2015	Association resources and small grants programs

Objectives

- A *pervasive feeling* of peace, safety and security
- A *well-connected and alert* community
- A prominent *police presence*
- A *low crime* rate
- Safe, well-lit *public spaces*
- *Secure housing*, both public and private
- Robust and inclusive *emergency planning*
- Well-resourced *crisis response* and *emergency services*

Community views

In workshops and via the Community Survey, residents indicated that they feel safe and secure generally, although it was acknowledged that women were more vulnerable, and may feel less secure. Older people living alone, or the families of residents with a disability who experience behavioural difficulties may also feel more isolated.

Analysis and assessment

Personal and public safety and security are delivered for the Whyalla community by the Whyalla City Council, Whyalla Hospital & Health Services, emergency service organisations—SA Police, SA Ambulance Service, SA Metropolitan Fire Service, SA Country Fire Service, and the SA State Emergency Service—Housing SA, and Families SA. Neighbourhood Watch also plays a role in community policing, although volunteer support is falling away.

In recent years the Council has been working to improve lighting in streets, parks and other public places; while Housing SA has worked to improve the security of public housing.

Residents are able to access the many medical or personal alert services that operate in Whyalla. Visitation by Meals on Wheels also alleviates loneliness. Individualised crisis response is provided by Centacare Catholic Family Services' Domestic Violence and Homelessness Services.

Personal and public safety and security is very important to vulnerable members of the community, such as residents with disability and older residents. However, there are a number of helpful initiatives in place. Residents acknowledge these programs, and their continuation is important.

The one new strategy that appears called for is a comprehensive review of the Community Emergency Risk Management Plan. This has not been revisited since it was developed jointly by relevant organisations in 2009; and while it was well-canvassed at the time, key groups were not included in the process. A review is an opportunity to improve the Plan's focus on older residents and residents with a disability.

Strategies for personal and public safety and security

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
2.1. Maintain program of improving lighting in streets, parks and other public spaces, and encourage residents to report issues	Whyalla City Council	Ongoing	Whyalla City Council
2.2. Maintain program of improving the security of public housing, and encourage residents to report issues	Housing SA	Ongoing	Housing SA
2.3. Lead all parties in reviewing the 2009 Community Emergency Risk Management Plan, with a particular focus on caring for older residents and residents with a disability	Whyalla City Council	By December 2015	Whyalla City Council

Objectives

- **Affordable housing** for disabled and older residents on limited incomes
- **Supported accommodation** for disabled residents, and other residents with special needs
- A range of quality **retirement living** options
- Sufficient capacity in **residential aged care facilities** to accommodate any residents who require high levels of care

Community views

The Whyalla community raised a number of concerns about the limited supported accommodation for people with disability; limited access to respite care for carers and their families, a problem that becomes more acute as carers age; the difficulty in accessing Home Care Packages due to the limited number made available in Whyalla; and the need for a more upmarket retirement village option. The community was also disturbed by perceptions that there were insufficient residential aged care places in Whyalla. In reality, there are sufficient beds; but those wishing to enter a residential aged care facility do not always require the level of care that would justify admission.

Housing affordability

Residents of Whyalla have a range of accommodation choices, depending on personal wealth and income levels, personal preferences, and individual needs; from well-maintained, affordable, energy-efficient housing for older residents on limited incomes, with adaptations in bathrooms and kitchens to ensure that they can live independently in their own homes as long as possible; to specially designed housing for residents with disabilities and their carers; to cluster housing close to amenities; to affordable retirement living options; to quality residential aged care facilities for those who require higher levels of care.

Whyalla housing is affordable relative to many other locations in South Australia. In 2011, the median monthly mortgage payment was \$1,300 in Whyalla, higher than in Port Augusta (\$1,200/month) and Mount Gambier (\$1,257/month) but lower than Port Lincoln (\$1,305/month) and SA as a whole (\$1,617/month).⁴⁸

⁴⁸ ABS 2012a, *2011 Census of Population and Housing*, Canberra (and previous issues). ABS 2013b, *Perspectives on Regional Australia: Housing Arrangements - Home Rental Rates in Local Government Areas, 2011*, ABS Cat No. 1380.0, Canberra.

There are a number of new housing estates and there has been significant new building and some urban infill with new homes. Housing prices have risen steadily over the last 10 years, but rose quite sharply during 2011-12 on the back of expected demand increases from implementation of multiple major projects, including the proposed Robxy Downs expansion, Arrium's Project Magnet, the hospital redevelopment, the Whyalla electricity substation replacement and Cultana augmentation.

Suburb	Median house price <i>October 2004</i>	Median house price <i>October 2014</i>	Total increase	Average annual increase (compounding)
Whyalla	\$150,000	\$303,000	202.0%	8.1%
Whyalla Playford	\$138,500	\$270,000	195.0%	7.7%
Whyalla Norrie	\$120,750	\$248,000	205.4%	8.3%
Whyalla Stuart	\$128,500	\$264,000	205.5%	8.3%
Whyalla Jenkins	\$165,000	\$350,000	212.1%	8.7%

Source: RP Data Pty Ltd. No data available on units due to low sales volumes.

Nevertheless, Whyalla residents are significantly more reliant on rented housing, including Housing SA and privately owned accommodation. 58% of Whyalla homes are owned, compared to 60% in Port Lincoln, 61% in Port Augusta, 62% in Mount Gambier and 68% for SA as a whole. Conversely, approximately 39% of houses in Whyalla are rented compared to 36% in Port Lincoln and Port Augusta, 34% in Mount Gambier and 28% for SA as a whole. This may be due to lower access to capital, or because much of the workforce is based on short-term mining and construction projects or service contracts. Employees and contractors will naturally be reluctant to purchase accommodation if their work is project-based and short-term.

A pressing issue is the rapid increase in utility charges such as electricity, gas, water and telecommunications. These are very difficult to manage for residents on limited or low incomes, such as pensioners.

Public housing

The proportion of houses that are rented through the state housing authority in Whyalla (21%) is significantly greater than for SA as a whole (6%) and for Mount Gambier (10%), Port Lincoln (11%) and Port Augusta (14%). The percentage in Whyalla is higher than anywhere else in SA except the Anangu Pitjantjatjara lands. Housing SA advise that public housing is limited, and access involves a wait of at least 6 months for most applicants.⁴⁹

⁴⁹ ABS 2012a, *2011 Census of Population and Housing*, Canberra (and previous issues).

Much of Whyalla's housing stock consists of three bedroom maisonettes constructed in the 1940s-1960s, and now 50-70 years old. Housing SA has been working to renew and rejuvenate it through innovative developments such as the Myall Place housing redevelopment, a \$2.6 million urban renewal project undertaken jointly by Housing SA and the Whyalla City Council. It involved the release of 19 allotments for private sale, the construction of 10 energy-efficient dwellings, and the redevelopment of parks and gardens. Proceeds were reinvested in new and upgraded housing retained by Housing SA. The project attracted the establishment of a private retirement village by the McCracken Group. Housing SA has also redeveloped housing at three precincts in Whyalla (at Jacaranda, Menard and McGee Streets).

However, land harvesting—the redevelopment of public housing stock in partnership with private sector developers—is not as effective in Whyalla compared to other locations across South Australia due to relatively low land values. New build, upgrading and extending existing houses is more feasible.

Housing SA has also encouraged a greater commitment to home ownership, offering housing historically using an auction process and currently supporting home ownership through the Affordable Home Program.

Supported accommodation

A limited amount of supported accommodation is available in Whyalla. Disability SA has coordinated a first investment, but this has been immediately filled, and there is a waiting list. More facilities are planned for Whyalla.

Accommodation is also available at Amaroo Lodge, a 30-bed supported residential facility run by Disabled Peoples (Whyalla) Inc for people with intellectual disabilities, older people with low grade dementia, and the frail aged. Nursing is not provided, but Lodge staff do offer medication supervision, and cater for special diets. Amaroo Lodge also offers respite care.

Retirement living

Myall Place Retirement Village, a partnership between McCracken Homes (Marketing) Pty Ltd & Myall Retirement Village Pty Ltd, offers seniors over 55 an independent and affordable lifestyle in a community environment for a weekly rental fee. Due to the liquidation of the McCracken Group, the village is currently on the market, but tenancies are not affected.

Located close to public transport, shopping and medical facilities, and comprising 50 furnished units, the village accommodates both singles and couples. All units are air conditioned, and have a private en suite, furnished kitchenette, and come with some appliances. All units have security screens fitted to all doors and windows.

Meals and a weekly linen service are provided, as is an optional emergency call system. Community car parking is also available. The village has a community and social room with a range of social activities organised by the residents such as bingo and indoor bowls. The village has onsite managers and a maintenance and gardening team.

Whyalla Aged Care Inc operates 11 independent living units situated between Yeltana Nursing Home and Annie Lockwood Court near the foreshore on Newton Street.

There is some demand for a more upmarket retirement village near the foreshore. Whyalla Aged Care Inc has 20 people on a waiting list for retirement units and takes enquiries every week from residents seeking independent living retirement accommodation. Land owned by Whyalla Aged Care Inc adjacent to its foreshore facilities is ideal for this purpose and is under consideration. A development on the site could include up to 36 retirement living units constructed in stages over a 3-5 year timeframe.

The development would also include a multi-purpose Community Centre catering for up to 100 people for various community activities and functions. The Community Centre would also include a kitchen, large function room, common ablutions, computer room, home support offices, reception area and four offices that will be utilised by visiting allied health staff, medical staff, hairdressing, and offices and facilities for other community volunteer organisations. An outdoor entertainment area would provide a space for social functions and include communal barbecues, all-weather shelter, communal vegetable gardens and lawned areas for family functions.

While Whyalla Aged Care has some capital to support the project, additional capital or grant funding is required for the project to proceed.

‘Ageing in place’: a serious funding shortfall

Many older Whyalla residents remain in their own homes, ageing in place. A number of service providers including Whyalla Hospital & Health Services, Whyalla Aged Care and Calvary Silver Circle provide home-based care. However, most houses were not designed or constructed with older residents or residents with a disability in mind. Investment is required to enable residents to age in place.

Even more seriously, the number of Home Care Packages allocated to Whyalla is not sufficient to meet demand. Care places and packages are allocated at a certain rate per 1,000 residents aged 70 and older. Whyalla’s overall allocation rate of 84 places per 1,000 residents aged 70 and over compares with 116 per 1,000 for SA as a whole, 125 for Mount Gambier, 137 for Port Lincoln, and 161 for Port Augusta.

Port Augusta and Mount Gambier service a wider area of population, which may explain their higher allocation rates. Port Augusta also services communities in the Flinders Ranges and the Far North communities of Roxby Downs, Woomera, Oodnadatta, Coober Pedy and the APY Lands. Mount Gambier services many smaller communities without residential aged care or MPS-funded Health Units. Even so, Whyalla’s allocation rate is well below the South Australian average, and the anomaly calls for further investigation.

What is the effect of the shortfall? A superficial analysis points to a deficiency in high care residential places, but experience on the ground in Whyalla shows that this is not a major concern. The notional shortfall in high care residential places is an artefact of the way in which the system allocates places centrally. Whyalla Aged Care Inc advises that all residents who qualify for high care residential places are provided with accommodation within short

timeframes; and it even experiences unfilled vacancies for brief periods from time to time. Furthermore, it is in the process of adding an additional 10 beds at its Yeltana facility, which will more than satisfy local demand.

<i>Funded care program</i>	<i>What Whyalla receives</i>	<i>What South Australia receives</i>	<i>Notional shortfall</i>
Community care packages	19/1,000	23/1,000	8
Low care residential places	43/1,000	44/1,000	2
High care residential places	22/1,000	49/1,000	57
Overall	84/1,000	116/1,000	67

Source: Public Health Information Department Unit, using data from the Department of Health and Ageing, June 2010 and Estimated Resident Population, 2011 and published in the Social Health Atlas of South Australian Local Government Areas, 2014

Note: the distinction between low care and high care was abolished from 1 July 2014, but total beds allocated remains the same at this stage

The real shortfall in care packages is felt most strongly in community care, as the Whyalla community has a strong culture of 'ageing in place'. There is an urgent need to address the obvious care shortfall in Whyalla by negotiating the allocation of more community care packages.

Residential aged care facilities

Older residents requiring higher levels of care are accommodated at Whyalla Aged Care Inc in a mix of independent living units, low care and high care residential places. The facilities are being extended, and 10 additional dementia beds are being added, which will satisfy demand for the foreseeable future.

Whyalla Aged Care Inc is a not for profit, community-owned aged care organisation providing high and low residential aged care, Home Care Packages and independent living accommodation to residents of Whyalla and surrounding communities across the Eyre Peninsula. The organisation was formed as the Whyalla Senior Citizens Welfare Association Incorporated in 1968 to service the needs of an ageing population in Whyalla. In recent years the organisation has experienced exponential growth in demand for services and accommodation to meet community needs.

Whyalla Aged Care Inc operates four facilities, and additionally some community outreach services. Yeltana Nursing Home provides high-care residential accommodation for 48 residents and is situated by the sea on Newton Street, Whyalla. Yeltana provides fully accredited aged care services. Nursing care is provided 24 hours a day. Individualised care plans are developed

to suit the needs of our residents, and include diverse social activities. Leisure and recreational activities are designed to provide optimal social and emotional wellbeing by reducing potential feelings of vulnerability, isolation or boredom and increase feelings of inclusiveness and purpose. A Memory Support Unit is available at the facility, providing specialised care for individuals with Alzheimer's disease or related disorders in a caring, safe and secure environment.

Annie Lockwood Court has 50 permanent places and one respite place. All rooms have their own private ensuite; 15 units have their own kitchenettes and lounge rooms. Annie Lockwood Court has picturesque ocean views, and a central outdoor area to relax with family and enjoy the sun. The facility includes a large multi-purpose hall, and a chapel. Volunteers assist with supporting residents to attend outings, functions, barbeques, fishing, games, craft, bowls, bingo, sing-a-longs and the men's group.

Copperhouse Court is a 42 bed 'Ageing in Place' Residential Aged Care Facility situated on Flinders Avenue, Whyalla Stuart. South Australia. All rooms are single ensuite, with common areas in each house. There are courtyards between each house where the residents can sit and enjoy the weather or entertain guests. Leisure and recreational activities are designed to provide optimal social and emotional wellbeing by reducing potential feelings of vulnerability, isolation or boredom and increase feelings of inclusiveness and purpose. A Memory Support Unit is available at the facility, providing specialised care for individuals with Alzheimer's disease or related disorders in a caring, safe and secure environment. The hostel has two hairdressers which attend the facility weekly, a robust lifestyle program, and a podiatrist who attends the facility every six weeks.

Older residents who no longer have an acute illness requiring hospitalisation, but who are unable to return home due to an increase in dependence are sometimes required to seek residential aged care out of town while awaiting a bed in a Whyalla facility. Whyalla Hospital and Health Services provides assistance to secure a location as close to Whyalla or other family members as possible. Similarly Whyalla Aged Care receives enquiries from hospitals across metropolitan and regional South Australia looking for vacant residential aged care beds when there are no vacancies in their own communities.

Respite accommodation

For residents with disability and their families, Orana provides purpose-built respite accommodation. Respite enables individuals with disability to take a break from their family, enjoy new experiences, and meet new friends, while in a quality care environment. Families and carers receive a break from full-time care, giving them some relief, time for other family members, and assistance with maintaining the stability of the family. The accommodation also provides emergency support.

For older residents, Whyalla Aged Care Inc provides short-term respite accommodation, either low level or high level care, depending on requirements. Respite care is intended to support older residents and their carers while they recover from illness or a difficult period. Those requiring respite may have up to 63 days of respite care in each financial year, and the duration is flexible, from 1-2 days to 2-3 weeks.

Strategies for housing and residential care choices

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
3.1. Maintain existing programs to restructure, renew and adapt public housing	Housing SA	Ongoing	Housing SA
3.2. Work with State and Commonwealth Members of Parliament to remove Whyalla's substantial shortfall and improve access to community care packages	Leadership Group	By June 2015	Existing Federal and State Government programs
3.3. Establish demand for supported disability accommodation in the Whyalla region	Disability SA	By December 2015	Disability SA
3.4. Work with the State Government, Commonwealth Government and National Disability Insurance Agency to highlight the need for supported disability accommodation, and access capital works funding as it becomes available	Leadership Group	By June 2016	Capital works funding to be sourced when announced; Regional Development Fund Community Infrastructure Program; National Stronger Regions Fund
3.5. Invite community housing organisations to tender for construction of more supported disability accommodation on land provided by the community	Whyalla City Council	By June 2016	Whyalla City Council to provide land; community housing organisations to provide development capital

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
3.6. Initiate discussions about a potential pilot efficiency program in a segment of Whyalla's public housing stock, where investments are made in solar power and heating, water savings and gas, and outcomes evaluated for SA's public housing stock generally	Housing SA, supported by Leadership Group	By June 2016	Housing SA
3.7. Attract capital and grant funding to assist in developing a retirement village facility on the Whyalla foreshore	Whyalla Aged Care Inc	By June 2016	Whyalla Aged Care Inc, potentially through a private-public partnership; Regional Development Fund Community Infrastructure Program; National Stronger Regions Fund

Objectives

- A safe, well-maintained **road network**
- **Special parking** for residents with special needs
- Well-maintained **footpaths**, with disabled access
- Well-designed **paths for gophers and wheelchairs**
- A well-connected, citywide network of **bicycle lanes**

Community views

The Whyalla community acknowledged the Council's heavy investment in improving the City's infrastructure. However, many problems remained, particularly with footpaths and trails. These included:

- uneven footpaths undermined by trees
- broken footpaths in need of repair
- footpaths that are steeply sloped, and can tip wheelchairs
- footpath ramps that are too steep
- footpaths that are difficult to negotiated with walking frames or wheelchairs
- gutters and spoon drains that make it difficult to enter or leave a path safely
- asphalt paths that damage wheelchairs and are uncomfortable for wheelchair users

The community indicated that there were some issues with inconsistent, unclear or missing signage, and that disabled parking needed better policing.

The community was very supportive of cycling, both as a means of getting around the City during the week, and as a recreational activity on weekends. However, the City's bicycle lanes were not always connected, limiting the value of the network. The community also noted that the east-west link had been disrupted by construction of the new school.

Analysis and assessment

Roads, footpaths and trails, parking places and signage are the responsibility of Whyalla City Council. Whyalla's infrastructure grew rapidly in the 1970s and the 1980s, supporting a population of approximately 50,000, and is now ageing.

In common with many local government areas across Australia, Whyalla has experienced a historical shortfall in infrastructure maintenance expenditure, resulting in a substantial civic and social maintenance backlog. The Council is now addressing this, with \$7-8 million annually of infrastructure renewal spending, supported by a significantly smaller ratepayer base than

when the infrastructure was first laid down.

The Council has adopted 10-year Infrastructure and Asset Management Plans for each of its asset classes. An infrastructure audit was undertaken in 2012-13 to develop an accurate picture of long-term asset renewal requirements, and long-term asset management plans. In 2012-13, \$42,000 was spent on kerbing; \$1.89 million on Council's capital sealed roads program, including rebuilding the damaged Mullaquana Road bridge culvert; \$231,000 on the upgrading of concrete footpaths; \$220,000 on kerbing and footpath repairs; \$155,900 on spray-pave patching works; \$125,000 on rural and unsealed road maintenance; and \$80,000 on stormwater drainage maintenance. Many footpaths and trails have been upgraded. There is still some way to go with this program, however.

Whyalla is criss-crossed with well maintained roads, and it is very easy to move around the City by car. The Council is developing a city-wide directional signage master plan. The city-wide Local Area Strategic Bike Plan is also being reviewed.

The City has very good disabled access, including ramps to shops, businesses and facilities, and adapted pedestrian crossings.

Strategies for well-maintained roads, paths, and access

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
4.1. Review the policing of disabled parking to assess and improve compliance by the community	Whyalla City Council	By June 2015	Whyalla City Council, SA Police
4.2. Undertake a comprehensive review of footpaths and trails with the needs of older and disabled users in mind, and develop an investment plan over 7 years to ensure that all footpaths are wide, level, surfaced with concrete, and easily accessed	Whyalla City Council	Plan to be developed by June 2015; action through to 2022, then ongoing maintenance	Whyalla City Council
4.3. Take action as required to address access issues identified in the review of the City's access and inclusion plan (1.7)	Whyalla City Council	From December 2015	Whyalla City Council
4.4. Review the City's designated bicycle lanes, and develop a plan to connect them into a coherent network	Whyalla City Council	2016–2017	Whyalla City Council, Office of Recreation and Sport

5

Accessible public transport services

Objectives

- Affordable, *citywide bus and taxi services* with wheelchair and disabled access
- Affordable road and air transport options *to and from Adelaide*

Community views

The ability to travel independently is very important to older people and people with a disability. If they are unable to drive lose they their independence, and with it their sense of self-sufficiency. They can also lose important social connections.

The Whyalla community indicated that they appreciated the bus service, the taxi service, and the volunteer transport services, all of which were responsive and relatively inexpensive.

They pointed to some limitations in the bus services. For example, they are not available on Saturday afternoon or Sunday, a prime time to visit the City's foreshore. They also found it difficult to board buses with walking frames. The Pioneer bus service to Adelaide was also highly regarded.

Many residents complained about the cost and inflexibility of Rex's air link. Some residents on limited incomes had even been known to drive to Port Lincoln so that they could fly to Adelaide via Qantaslink.

Analysis and assessment

As a large regional centre, Whyalla is able to support a public transport system. Des's Transport runs a bus service across Whyalla 5½ days a week, utilising more than 20 buses seating between 21 and 48 persons. The service is government-supported and has recently been renewed for the five years to November 2019. All vehicles will be required to comply with the *Disability Discrimination Act* and the *Disability Standards for Accessible Public Transport*. 80% of the fleet needs to be wheelchair-compliant by 2018, and 100% by 2022.

Des's Cabs, a related business, provides a responsive and inexpensive taxi service. The fleet includes four wheelchair-accessible vehicles that complete about 8,500 wheelchair-specific jobs per year. The taxis are fitted out at the company's cost. The company processes about 72,000 transport subsidy vouchers annually for customers who meet the criteria set by the State Government. However, the company struggles to find suitable taxi drivers to undertake the work.

Disabled Persons Inc, who run Amaroo Lodge, also provides a volunteer transport service specifically for older residents or residents with a disability. DPI has two cars and two buses

fitted with a wheelchair hoist to transport people with disability. Residents are required to become members to use the service, but the membership fee is very small.

Travel to and from Whyalla is available by private car, bus or air. Premier Stateliner runs four services each weekday to and from Whyalla, with services also available on the weekend. With stops, the journey typically takes 5 hours 25 minutes. Rex (Regional Express) runs five flights to and from Adelaide each day from Whyalla's airport, which is owned and managed by the Whyalla City Council.

Air links to and from Whyalla and the eastern Eyre region

Rex has a Disability Access Facilitation Plan prepared in conjunction with the Australian Human Rights Commission, regulators and users with disability. People with disability wishing to travel with Rex book in the usual way, but must indicate their Special Needs during the booking process.

Rex provides a Disabled Passenger Lifter (DPL) (a high lift device) at its regular airports. The DPL is available for customers who cannot board or disembark from the aircraft using stairs. Requests to use the DPL must be made during booking, with at least 48 hours prior notification.

Air Link aircraft cannot cater for all special requirements due to smaller aircraft size. Mobility disabled passengers who require a wheelchair or motorised mobility aid or who require assistance onboard from a flight attendant cannot be carried on Air Link flights and must book a flight on a SAAB340.

Unless Rex is notified of special requirements, Rex cannot guarantee that resources will be available to assist customers. Wheelchair dependent customers who arrive at an airport without prior notification of the special requirement may be denied boarding.

An approach was made to Rex to explore the possibility of a community organisation purchasing blocks of seats in advance, and onselling them to eligible residents. There are a number of reasons why Rex would not consider such an arrangement, which would be unique in their network. As with other major domestic airlines, Rex sells air travel to the public based on a highly structured fare offering using an automated sales system. Tighter trading conditions over the last few years have resulted in a downturn in government, business and private traffic. Rex has responded to these conditions by focusing on operating efficiencies to maintain profitability and services. Low cost fares are available, but do require advanced booking, and come with limited flexibility. As approximately 70% of air travel is paid for by government business and corporates, who are able to pay the high ticket prices, there is little prospect of changing the situation in the short-term. In fact, airlines are likely to seek higher domestic prices to improve the low returns on revenue currently being experienced (for Rex, 3% in 2013–14). For these reasons there is little prospect of setting up a special arrangement with Rex.

Discussions were also held with the Royal Flying Doctor Service. The Service made the following flights out of and into Whyalla and nearby towns during the 2013-14 financial year through its fixed wing operation:

<i>Out from</i>	<i>Centre</i>	<i>Into</i>
390	Whyalla	165
21	Kimba	5
22	Cowell	8
45	Cleve	7

The Service routinely transfers patients in stretchers to and from these towns, and in fact, anywhere there is an airstrip. From time to time hospital patients are also moved by the RFDS by arrangement with the SA Ambulance Service, at the cost of the transferring hospital. Outpatients can also be moved by appointment where stretchers are required. Priority is given to last stage palliative care patients. Individual patients are also able to travel with RFDS by private arrangement, at their own cost, or funded by private insurance; but this travel is prioritised after other emergency needs. RFDS aircraft are unable to take wheelchairs due to space restrictions.

Government support for travel costs

The Patient Assistance Transport Scheme (PATS) is a subsidy program that provides money to pay for some travel, escort and accommodation costs when rural and remote South Australians travel over 100 kilometres each way to see a specialist.

However, the Scheme was criticised for not being sufficiently generous, and an independent review was undertaken by SA Health in 2014. All 15 review recommendations were accepted, and come into effect from 1 January 2015. They include:

- abolishing the requirement for patients to pay the first \$30 of travel costs (fuel or airfares) for each trip
- increasing the Government contribution for accommodation from \$30 per night to \$40 per night
- expanding criteria to accommodate escorts
- allowing claims for travel only (not accommodation) where patients extend stay longer than medically necessary

Strategies for accessible public transport services

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
5.1. Investigate funding for additional volunteer transport vehicles	DPI/Amaroo	2016–2017	Community fund-raising programs; Regional Development Fund Small Grants Program

6

Comprehensive health, personal support, and household services

Objectives

- Accessible *primary care services*
- Well-equipped and well-staffed *hospital, community and allied health services*
- Access to funding for *disability services*
- *Day care and respite facilities* to support those caring for disabled and older residents at home
- Well-funded *community support and household maintenance services* to enable ageing in place
- A mechanism to facilitate *coordination between service providers*

Community views

While the Whyalla community indicated that it is satisfied with the level of primary health and hospital health services it receives, it also indicated that it finds the health and disability systems complicated and difficult to navigate. As a result, people with needs are not always aware of support to which they are entitled, or how to access it.

There are also some pressing service gaps. For example, respite care is very limited, and carers are struggling to support older parents or children with disabilities as they grow older.

Many older single people live in large houses on large blocks, and require support for activities such home maintenance, garden care and odd jobs. Tradespeople to undertake maintenance and repair work are increasingly hard to access, and expensive. Whyalla Hospital & Health Services Home and Community Care program provides subsidised assistance for home maintenance, garden care, and odd jobs to eligible Whyalla residents.

Primary health services

Whyalla residents have access to a wide range of primary care, acute care, specialist and allied health services. Primary care includes 10 general practices, 5 dentists, 1 dental prosthetist and 3 pharmacies. Dental services based at the University of South Australia offer an outreach program to residents in Whyalla Aged Care, and a community service.

There is no nationally recognised 'ideal' medical workforce to population ratio. National increases in the ratio of doctors and nurses to the population over the past decade provide a sign that initiatives to increase supply are having some effect. However, the medical workforce remains unevenly distributed between the states and territories, and particularly between major cities and remote areas.

The number of doctors and nurses compared to the size of the Australian population has increased in the ten years to 2011. Since 2001, the per capita rate of GPs to population increased from 170.5 to 201.9 GPs per 100,000 persons. The rate per capita of specialists increased from 84.6 to 117.9 per 100,000 persons, and the rate of nurses increased from 1,018.2 to 1,195.8 per 100,000 persons. South Australia has the highest rate of GPs per 100,000 persons of all states, with 217.6 (Australia as a whole 201.9).⁵⁰

A strategic approach to primary care is supported by the Country North SA Medicare Local. However, given Commonwealth Government policy changes, its future is uncertain.

Hospital services

Whyalla Hospital and Health Services has received a \$69.3 million upgrade. The upgrade has been successful in attracting additional visiting specialists and resident physicians. General medical and surgical care services include:

- day surgery
- inpatient surgery
- intensive care unit
- palliative care and bereavement
- outpatient services
- pre-admission clinic

Whyalla's mental health facilities include both a specialised Integrated Mental Health Inpatient Unit and a Community Mental Health Rehabilitation Service. The Unit features 6 single patient bedrooms with ensuite bathrooms and a furnished dining and lounge area. The service includes a full time psychiatrist.

Whyalla is the first country community in South Australia to have both services, which enable regional consumers to stay closer to home and to their support networks.

The Community Mental Health Rehabilitation Service is located in Whyalla. Mental health rehabilitation is the process of helping individuals re-acquire old skills or learn new skills so that they can achieve an optimal quality of life in their community of choice. It is for people living in the community or returning home after treatment who may require some targeted assistance to achieve their goal to live independently.

The service uses leased residential properties, fully furnished and suitable to place up to two people in a shared housing arrangement. It is fully supported by a team of local health professionals and other support staff who visit residents on a daily basis.

North Western Country Rehabilitation Service is a multi-disciplinary team that assesses and rehabilitates clients to maximise client engagement and participation in the rehabilitation process, work toward client and family goals utilising a holistic approach, increase functional independence in daily living, and enable clients to return to the accommodation, work and leisure pursuits they participated in prior to injury or illness.

⁵⁰ Australian Bureau of Statistics. *Australian Social Trends: Doctors and Nurses*. Cat. no. 4102.0. Canberra: April 2013.

The Geriatric Evaluation and Management Service supports clients experiencing complex age-related conditions and at risk of an acute medical crisis, to prevent functional decline, maximise health status, and reduce the risk of hospital admission.

The Whyalla Hospital is now a designated Regional Cancer Centre. The Whyalla Cancer Centre includes 6 chemotherapy chairs, outpatient care, counselling, and space for research and training activities, along with an extra 48 medical, surgical and palliative care beds, with 8 high dependency and 19 midwifery/paediatric beds in the existing building, and three new operating theatres.

It is possible to receive medium risk chemotherapy treatment under the care of a visiting oncologist or haematologist. Services include:

- coordination of cancer care
- oral chemotherapy and intravenous infusion treatments in the chemotherapy unit or via slow release pumps
- access to a visiting oncology or haematology clinic
- access to the Digital Telehealth Network equipment, reducing the need to travel for some appointments
- non-chemotherapy infusion centre services including pump disconnects, PICC and port flushes, and blood transfusions

Outpatient and community health services include:

- physiotherapy
- podiatry
- occupational therapy
- speech pathology
- dietetics
- diabetic education
- early childhood health
- youth development
- health promotion
- chronic disease self-management
- Do it For Life – lifestyle advisory
- community health nursing
- child adolescent mental health service
- cardiac rehabilitation
- social work
- exercise groups
- Health in Our Hands
- health promotion/primary health care
- Child Development Unit
- women's health

Domiciliary Care Services include:

- home care/carer respite
- activity program

- Aged Care Assessment Team (ACAT)
- home assist
- day centre
- community care packages

Other services include:

- maternity and obstetrics
- electrocardiography (ECG) and electroencephalography (EEG)
- echocardiography
- respiratory programs
- sleep apnoea

Chronic disease self-management is supported by Health In Our Hands, a community-based organisation that works in partnership with SA Health and the University of South Australia.

Indigenous services

Services for Indigenous people have recently been transferred from Pika Wiya Health Services, based in Port Augusta, to the Nunyara Wellbeing Centre, based in Whyalla.

Nunyara is a support centre for the network of individual agencies and institutions committed to meeting community needs through increased resources, support and learning opportunities for youth, families and members of the Aboriginal community, and provides culturally appropriate primary health care and health promotion programs for the community, as well as education and advice to help families access the services they need from government and mainstream service providers.

There are 928 Aboriginal people living in Whyalla. Nunyara have a total of 1295 clients, including 150 Aboriginal people aged 50 and over. Nunyara has a team of general practitioners, Aboriginal health workers, and Registered Nurses delivering primary health and antenatal health programs. Nunyara is also funded to deliver an Aboriginal Home and Community Care Program, providing:

- personal care
- social support
- domestic assistance
- transport
- counselling support, information and advocacy
- client care co-ordination
- nursing care
- assessment

Nunyara Wellbeing Centre works closely with Whyalla Hospital and Health Service.

Disability support

Government-funded disability support is provided by Disability SA. With the advent of the National Disability Insurance Scheme, significant funds are available to assist people with a disability. However the roll-out of NDIS is proceeding slowly and somewhat inflexibly, and as it is still developing, the rules are not always clear as to who can access funding, and for what purposes. As the total funding is \$19.3 billion over 6 years, and Whyalla's population represents approximately 0.1% of the Australian population, residents should be able to access approximately \$19 million—in principle. This would represent a major opportunity for residents and for service providers.

However, the Scheme is being introduced progressively across Australia. The first stage began on 1 July 2013. In South Australia it is only aimed at children aged 13 and under (on 1 July 2014). Roll-out of the full scheme in South Australia will commence progressively from July 2016. The number of people assisted nationally will rise to 20,000 people with disability by 2015. At this stage it is likely to have only a limited impact in Whyalla, but the situation should be closely monitored, as opportunities will open up as more information is provided about the practical workings of the Scheme.

In the mean time, Disability SA maintains an office in Whyalla, assisting persons with disability to access funding and support services.

Day care respite services

Funded centre-based day care is provided by Country Health SA through Domiciliary Care's Oronga Day Centre. The Day Centre is staffed by Registered and Enrolled Nurses, social workers, occupational therapists, physiotherapists, dietitians and volunteers. It works with older residents, cancer patients, and persons with disability to improve their physical and emotional health, assist them with core activities, and help them resolve family and relationship problems.

Nevertheless, Whyalla has an acute shortage of suitable Day Care Respite Services for elderly people over the age of 65. Whyalla Aged Care Inc intends to run a specialty Day Care Respite Centre from the proposed Community Centre. Initially this would be available 3 days per week for up to 40 elderly people per day. Whyalla Aged Care Inc currently has a waiting list of 25 elderly people requiring regular Aged Care Day Care respite services, specifically dementia services.

Home Care Packages

Whyalla residents also have access to home-based care packages, and services are delivered by Whyalla Hospital & Health Services through Home & Community Care Services. Whyalla Aged Care Inc, Calvary Silver Circle and Nunyara also provide services, including some packages.

Services are delivered only through packages funded by the Australian Government under the Home Care Package scheme. Services include:

- personal care
- housework
- shopping
- transport
- social support
- medication assistance
- meal-time assistance

As discussed (pp. 63–64), Whyalla suffers a significant shortfall in the number of home-based care packages available to residents.

Other support services

Other important household support services are provided by Centacare Catholic Family Services, the St Vincent de Paul Society, Uniting Care Wesley, Mission Australia and Meals on Wheels.

Centacare Catholic Family Services is a mission of the Catholic Diocese of Port Pirie. It provides a range of programs, including Aboriginal programs, care and housing for the aged, family relationship services, financial support, and homelessness services.

The St Vincent de Paul Society focuses particularly on those struggling with poverty, and assists them with income support, housing, addictions, mental health and education.

Uniting Care Wesley assists youth and families with accommodation, education and training, life skills. It assists people with disability to find suitable employment and training, and as a result positively change their lives. It aims to provide a safe and secure environment for homeless people, and those at risk of losing their accommodation, and financial support for people in crisis. Family programs include parenting support and family relationships.

Mission Australia provides youth connections, employment services, and skills for education and employment.

Meals on Wheels provides nutritious meals and relieves isolation through home visits.

Navigating the systems

While navigating the complex system can be difficult, some assistance is provided by the Hospital's Cancer Care Coordinator, Child Health and Development Coordinator, and Country Referral Unit Intake Officers. My Aged Care Gateway is also very helpful for those with access to the internet, providing full access to advice and information about government support programs.

Strategies for comprehensive health, personal support, and household services

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
6.1. Provide a fridge magnet with key services and contact details to all residents with a disability, and all older residents—Carelink's phone number as the first point of call	Whyalla City Council, Carelink	By June 2015	Whyalla City Council, Carelink
6.2. Develop a Disability Services Directory comparable to the Seniors Directory, and maintain a copy in the Civic Library; supplement these hard copy resources with computer-based resources	Masterplan Implementation Officer, Civic Library	By June 2015	Masterplan Implementation Officer
6.3. Ensure that copies of the Seniors Directory and Disability Services Directory are supplied to GPs and other service providers	Whyalla City Council	By June 2015	Masterplan Implementation Officer
6.4. Bring together a representative group of Whyalla residents with disabilities, and their families, current and potential service providers, Disability SA and local NDIS staff to discuss the roll-out of the NDIS program in Whyalla, and identify areas where eligible people are being overlooked	Leadership Group, Disability SA, NDIS, Masterplan Implementation Officer	By December 2015	Not significant
6.5. Facilitate a joint forum between NDIS management and business and not for profit service providers to identify opportunities for local service provision	Disability SA, NDIS, RDAWEP	By December 2015	Not significant
6.6. Include in the Seniors Directory and Disability Directory a list of tradespeople and handypersons who can assist householders with home maintenance and repair tasks	Leadership Group, Masterplan Implementation Officer	By December 2015	Masterplan Implementation Officer

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
6.7. Review the availability of trades in the City, and if there is a continuing service gap, encourage existing or new businesses to establish a COTA-branded trade franchise	Masterplan Implementation Officer, Leadership Group	2016–2017	Masterplan Implementation Officer
6.8. Investigate the option of providing some home maintenance through a secondary school-based Vocational Education Training course	DECS, TAFE	2016–2017	Existing Federal and State programs
6.9. Investigate the option of providing some home maintenance through a supervised Work for the Dole scheme	RDWEP, Centrelink, Men's Shed	2016–2017	Existing Federal programs
6.10. Establish firm numbers of general practitioners, dentists, and pharmacists active in Whyalla, Kimba, Cowell, and Cleve, benchmark against SA averages, and take action to close any staffing shortfall that appears	Leadership Group	2016–2017	Existing Federal and State programs

Objectives

- Ready access to *training in disability and aged care*
- A *steady stream of graduates* ready to work in disability and aged care
- A *range of career options* to facilitate recruitment, retention and ongoing development of trained staff
- Systematic *succession planning* in health and care service providers to ensure service continuity

Analysis and assessment

The health and community services sector contributes \$104 million (8.2%) to Whyalla's Gross Regional Product, the third highest of any sector. Employment is also growing in this sector. It employs 1,299 people (1,094 FTEs, 15.6% of all jobs and 12.6% of all FTEs), making it important not only for total employment, but as a source of casual and part-time work.⁵¹

The Whyalla Campus of TAFE provides entry-level training for those who wish to provide personal care in a community or institutional setting. The three key qualifications are the Certificate III in Aged Care, the Certificate III in Home and Community Care, and the Certificate III in Disability. In the 2013 calendar year 86 students were enrolled in one or both of the first two courses, which overlap to a large degree; and 12 students in disability. In 2014 the Whyalla Campus of TAFE offers only Certificate III in Aged Care, although the other courses can be studied in Whyalla by enrolling at other campuses and then choosing to study off-campus.

Training was funded under the State Government's Skills for All program until recently, but caps on numbers were introduced, and after quotas were filled funding ceased to be available. The course costs about \$4,000, and as this investment is required before starting work, it has been difficult to fill places in the course. RDAWEP funded 20 places in 2014, but it has been difficult to fill all places, and the system may be temporarily saturated.

At present there are sufficient trained workers to deliver community-based and institutional services. However, three factors could create a significant workforce gap: realisation of the more rapid growth projections in this Masterplan; allocation of more community-based care packages to Whyalla (Strategy 3.2); and creation of significant new institutional capacity, something that will eventually be required, but is not an immediate priority. Workers will need to be trained in Whyalla, or recruited from elsewhere. Employers should monitor the situation closely, and work with TAFE to put courses in place if it becomes apparent that present training loads will not meet requirements.

⁵¹ EconSearch modelling. *Socio-Economic Profile of Whyalla* (2014).

The shortage of newly trained staff is creating difficulties for employers. Aged care and disability work places employ high levels of part-time or casual staff, and industry leaders report that it is difficult to keep staff, as the work is emotionally and physically demanding. As trained and experienced staff get older and retire, it is proving difficult to replace them. Employers and educators report their perception that young people do not generally think highly of aged and disability care as a career option, but this perception needs to be tested.

Workforce planning

There is no nationally recognised ‘ideal’ medical workforce to population ratio, but South Australia has established ratios per 100,000 head of population.⁵² Assuming constant ratios, these can be used to project future workforce requirements under the three population growth scenarios:

Baseline

		2014	2016	2021	2026	2031	2046
<i>Profession</i>	<i>Ratio</i>	22768	23449	24103	24686	25203	26480
GPs	217.6	50	51	52	54	55	58
Specialists	134.0	31	31	32	33	34	35
Nurses	1,451.6	331	340	350	358	366	384

Mid-growth

		2014	2016	2021	2026	2031	2046
<i>Profession</i>	<i>Ratio</i>	22768	23957	25153	26312	27439	30747
GPs	217.6	50	52	55	57	60	67
Specialists	134.0	31	32	34	35	37	41
Nurses	1,451.6	331	348	365	382	398	446

⁵² Australian Bureau of Statistics. *Australian Social Trends: Doctors and Nurses*. Cat. no. 4102.0. Canberra: April 2013.

High growth

		2014	2016	2021	2026	2031	2046
Profession	Ratio	22768	24461	26187	27902	29611	34824
GPs	217.6	50	53	57	61	64	76
Specialists	134.0	31	33	35	37	40	47
Nurses	1,451.6	331	355	380	405	430	506

Strategies for a skilled health and care workforce

Action	Leadership	Timeframe	Funding
7.1. Work with the State Government to allocate additional Skills for All training quota for aged and disability care using local industry-based training models	Leadership Group, Whyalla Aged Care Inc, RDAWEP, TAFE	By March 2015	Department of State Development, TAFE
7.2. Work with Whyalla educators to attract another cohort of secondary students into an aged and disability VET program, building commitment to the sector through studying and working together	TAFE, UniSA, DECS, schools	Design during 2015 for implementation in 2016 school year	DECS, TAFE; Nursing and Allied Health Scholarships
7.3. Develop an Employment Extension Program revolving around job redesign to enable older workers to remain in the aged and disability workforce for longer on a flexible basis	Whyalla Hospital & Health Services, Whyalla Aged Care Inc	By June 2016	Whyalla Hospital & Health Services, Whyalla Aged Care Inc
7.4. Work with migrant networks to attract new cohorts of workers into the aged and disability - workforce, and train them	Whyalla Hospital & Health Services, Whyalla Aged Care Inc, RDAWEP, TAFE	2016–2017	Whyalla Hospital & Health Services, Whyalla Aged Care Inc, RDAWEP; Nursing and Allied Health Scholarships

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
7.5. Establish a Learning Hub as a focus for coordinated delivery of city-wide post-graduate and professional development programs for aged and disability care workers, ENs and RNs	University of South Australia, TAFE, Whyalla Aged Care, Whyalla Hospital & Health Services	2016–2017	University of South Australia, TAFE, Whyalla Aged Care, Whyalla Hospital & Health Services; Rural and Regional General Practice Teaching Infrastructure Grants (if linked to GP training)

8

Education, training, and personal development programs

Objectives

- Special *primary and secondary education programs* that meet the needs of disabled young people
- Ready access to relevant *tertiary education programs*
- A range of *personal development opportunities*

Community views

The Whyalla community appreciates the education and training infrastructure that it is privileged to access. However, a significant problem is created by the lack of continuity of services between secondary school and post-school life for young people with intellectual disabilities. Phoenix provides excellent employment programs, but these are not suitable for all young people, and there is little else for them to do.

Access to learning opportunities for older residents is important for purpose, intellectual stimulus, and social interaction. One important area for training is the use of computers, email and internet. Developing these skills will be important for many of the other strategies outlined in this Masterplan, and University of the Third Age have indicated their willingness to coordinate this activity.

Analysis and assessment

Whyalla Special School is a government school that has delivered specialised education from Reception through to Year 12 since 1962, and currently has 44 students. The School teaches English, mathematics, art, health, physical education, society and environment and science and technology. Stage 1 SACE is also available to senior students.

Services are delivered in conjunction with the Department for Education & Child Development and specialist units, Child and Youth Health, and advocacy groups, such as the Down Syndrome Society, the Autism Association, and the Crippled Children's Association. The Phoenix Society (p. 88) also delivers an in-school program. Support personnel include speech pathologists, consultant teachers, psychologists, School Support Officers and health professionals. Their role in the school is negotiated using a service agreement, and families have access to most service providers for informal and formal meetings.

With a new emphasis on partnerships, the community should be more actively involved in designing and delivering these programs.

A wide range of tertiary education programs are delivered by the Whyalla Campus of TAFE SA, and by the University of South Australia, partly through face to face teaching and partly through distance learning. As part of the transition to more distance education, UniSA will extend the Australian Research and Education Network (AREN) super high-speed broadband to Whyalla, enabling delivery of a wide range of learning programs from a distance using such technologies as real-time videoconferencing. This will facilitate access to foundation and bridging courses by older residents wishing to upgrade their skills or return to university, and by students with disability, potentially expanding the number of people who can access a wide range of quality tertiary programs.

Tight budgets are seeing the range of programs and services shrinking at TAFE, which no longer delivers the general interest training programs that it used to—for example, gem cutting, welding, woodwork, and pottery.

However, it is possible that some of this expertise could be picked up and kept alive by University of the Third Age, a not for profit, self help organisation aimed at educating and stimulating retired members of the community. Organised locally, it is a good vehicle for delivering community-based learning and personal development programs to older residents, but is run on a low-cost, self-funded basis, with volunteer program coordinators and lecturers.

WEA, an alternative provider of short courses, have indicated that they are not interested in delivering programs in Whyalla.

Strategies for education, training, and personal development programs

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
8.1. Bring together DECS, Phoenix and other training and service providers to identify continuity issues between secondary education and workforce involvement, and develop strategies to bridge gaps	DECS, Phoenix, other training and service providers	2016–2020	Existing program funding
8.2. Bring together TAFE SA, the University of the Third Age, and the Men's Shed to identify opportunities for resurrecting TAFE general interest courses attractive to retirees	TAFE, University of the Third Age, Men's Shed	By December 2015	Self-funded by participants

A wide range of retail and hospitality options and professional services

Objectives

- Access to a wide range of *retail businesses*
- Access to a range of *hospitality options*
- Access to a wide range of *professional services*

Community views

The Whyalla community enjoys its retail and hospitality options, and access to business and professional services. Some gaps were noted: for example, a limited range of fashion and footwear stores. Some of the larger brands, such as Bunnings, are not present in the town, which has been fiercely loyal to local competitors.

Analysis and assessment

At 30 June 2012 there were 817 actively trading businesses in Whyalla.⁵³ More than 80% were micro businesses employing less than 5 people, and 99.6% were small and medium enterprises employing less than 200 people. Small business is vital to Whyalla's economy, and 11.51% (94) of these businesses were retail businesses. Retail trade is the third largest employer, with 1,013 employed,⁵⁴ about 11 employees per retail business on average.

Whyalla has a good range of retail shops, but like all retailers, these are under pressure from the move to internet retailing and cautious consumer spending, evidenced by a number of recent closures and empty shopfronts about town.

The Westlands Shopping Centre, Whyalla's largest shopping precinct, is undergoing a major extension and refurbishment. The development includes construction of a new Coles Supermarket, an expanded and refurbished Woolworths Supermarket, a new 2000 square metre discount variety store and multiple new specialty tenancies. The \$22 million project began construction during 2012 and is scheduled for completion in April 2015. When completed, the Westlands Centre will be the biggest shopping centre outside the Adelaide metropolitan area.

In addition to these shops, Whyalla has Harvey Norman and Harris Scarfe outlets, and a range of car retailers, electrical appliance retailers, and hardware stores.

Whyalla also has a good range of hospitality options, including fast food outlets (12), restaurants (10), pubs (7), cafés and coffee shops (7) and delicatessens (2).

⁵³ Australian Bureau of Statistics, *Counts of Australian Businesses*, June 2012.

⁵⁴ Australian Bureau of Statistics, *National Regional Profile Employed by Industry*, 2011.

Due partly to the growth in mining and ancillary industries, many business and professional services are also accessible in Whyalla. Whyalla residents have a choice of real estate agents (14), accountants (11), lawyers (8), financial planners (7), banks (7), and conveyancers (3).

OrthoEyre, a specialist provider of disability aids, and two gopher and mobility outlets, provide special services for those with disability and older residents.

Whyalla's business sector is served by a number of important trader and business networks, including:

- Whyalla Chamber of Commerce and Industry Inc
- Enterprising Women Whyalla
- Whyalla City Plaza Business Traders Association Inc.
- Westland Shopping Centre Traders Association

The business sector is supported by a range of business development programs delivered by RDAWEP.

Strategies for retail, hospitality, and professional services

Action	Leadership	Timeframe	Funding
9.1. Maintain support for business profitability and viability through delivery of management skills, innovation and enterprise programs	RDAWEP	As funding is made available	RDAWEP to source from Federal and State programs, or deliver through existing resources

Objectives

- A range of *special employment programs* for disabled people of working age
- Strong support for the *employment of disabled people* in mainstream businesses
- *Respect and recognition* for disabled and older workers
- A range of *volunteering opportunities*

Community views

The Whyalla community profoundly appreciates the presence of Phoenix in the City. However, it is also frustrated by the limited range of disability employment options. It was also disappointed by the limited support from the business community for hiring disabled employees, and discouraged by the perception that volunteering was increasingly bound up in red tape.

There are no obvious barriers to able older people finding employment, but the community indicated generally that after retirement, employment was not desired.

Analysis and assessment

The Phoenix Society in Whyalla provides excellent opportunities for workforce participation by people with an intellectual disability. Phoenix was established in 1958, and now develops over 800 people with disabilities annually through its employment programs, School to Work Transition Program, and Intensive Training Unit.

Phoenix and the Bedford Group have just announced plans to merge, making them the second largest disability enterprise employer in Australia, operating across 14 sites. Bedford operate a broader range of programs than Phoenix—for example, parks management—so if they can be induced to extend that range to Whyalla, it may address some carer concerns about the limited range of employment opportunities available.

The National Disability Coordination Officer and five disability employment services (DES) are active in Whyalla to place people with other disabilities in employment. The DES providers work well together, but employers lack awareness and understanding, and are reluctant to hire people with a disability.

Volunteering is another matter, however. In 2006, it was estimated that volunteering contributed \$4.9 billion to the SA economy. 20.8% of older South Australians volunteer, compared to 17.5% across Australia. About 1 in 6 volunteers are aged 65 years or more⁵⁵ While numbers are not available specifically for Whyalla, there is a strong ethos of volunteering in the City across a range of service organisations, community associations and cultural activities.

However, volunteering has become more complex due to a growing overburden of government regulation. For example, government departments require volunteers to have a Criminal History Clearance, and participate in fire safety and manual handling training. This is intended to protect volunteers, volunteer organisations and people who are served by those organisations. However, it also deters and discourages volunteers, and imposes additional administrative burdens on volunteer organisations. Importantly, it is not transferable; so that training or accreditation undertaken for one volunteer with one organisation must be repeated for any and every subsequent organisation for which the same person volunteers.

Strategies for employment and volunteering

Action	Leadership	Timeframe	Funding
10.1. Develop a program to expose employers to the social and economic benefits of hiring employees with a disability	National Disability Coordination Officer and DES providers, supported by RDAWEP and business associations	By December 2015	Not significant
10.2. Bring together Whyalla's ten largest employers to negotiate a Disability Employment Covenant, with employment targets and commitments	National Disability Coordination Officer and DES providers, supported by RDAWEP and employers	Initial discussions by December 2014; in place by December 2015	Self-funded

⁵⁵ D. Ironmonger. *The Economic Value of Volunteering in South Australia*. Adelaide: South Australia Government, Office for Volunteers, 2011, p. 3.

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
10.3. Establish city-wide awards for employees 65+ and employees with a disability, celebrating both the employer and the employee—awarded on Australia Day	National Disability Coordination Officer and DES providers, supported by Leadership Group	26 January 2016	Whyalla City Council
10.4. Become a member of Volunteering SA & NT Inc, and make planning, training and mentoring resources available to associations	Leadership Group	By March 2015	Masterplan Implementation Officer
10.5. Work with the State Government's Office for Volunteers to promote and invest in initiatives to encourage volunteers, including a possible a Volunteer Passport or White Card pilot scheme	Leadership Group	2016–2020	Office for Volunteers

Well-maintained open spaces, and a range of recreational activities

Objectives

- Well-equipped *civic spaces, public parks and recreation facilities*, with amenities that meet the needs of disabled and older people
- Facilities to enable disabled and older residents to access and enjoy Whyalla's *foreshore*
- *Exercise programs* that maintain good health and encourage social interaction
- Facilities to enable disabled and older residents to access and enjoy Whyalla's *conservation parks*

Community views

The Whyalla community appreciates its many opportunities to be active outdoors. However, facilities do not always operate as they should. The disabled lift at the Leisure Centre is prone to breaking down. The pontoon at the marina is not accessible by people with disabilities, and the stairs to the beach drop off steeply, making access awkward for older people and people with disabilities.

Sporting clubs

About 70% of South Australians aged 65 and over participate in some form of regular physical activity; whether the percentage is this high in Whyalla is not known. However, the City is well endowed with a healthy natural environment and many sporting clubs and associations. These include:

- Croatia Whyalla West Soccer & Social Club Inc
- Dart Club-Whyalla Ladies
- North Whyalla Football Club
- Roopena Football Club Inc
- South Whyalla Football Club Incorporated
- Steel City Sport Fishing Club Incorporated
- Steel United Soccer & Social Club Incorporated
- Weeroona Bay Football & Sports Club Incorporated
- West Whyalla Football Club Inc
- Whyalla Aqualung & Spear Fishing Club
- Whyalla Bowling Club Inc
- Whyalla Croquet Club
- Whyalla Cycling Club
- Whyalla Gliding Club

- Whyalla Golf Club Incorporated
- Whyalla Golf & Bowling Club
- Whyalla Hockey Association Incorporated The
- Whyalla Netball Association
- Whyalla Rifle Club Incorporated
- Whyalla Sport Fishing Club Inc.
- Whyalla Sport Fishing Club Incorporated
- Whyalla Squash Club Incorporated
- Whyalla Surf Life Saving Club
- Whyalla Tennis Association Incorporated
- Whyalla Yacht Club Incorporated

Whyalla has three gym/fitness centres and some informal walking groups. In addition to on-road bicycle lanes, the City has several off-road shared use paths and exclusive use bicycle lanes; and the Council publishes a map of these. At present they are somewhat disjointed, but the Council is reviewing the network with a view to making it more coherent and more useful.

Riding for the Disabled is also active in Whyalla.

Parks and gardens

Whyalla has a number of Council-maintained gardens. Ada Ryan Gardens offer extensive and well shaded lawns and gardens; free barbecue and picnic facilities; a collection of kangaroos, birds, a duck pond and other wildlife; four free tennis courts and a basketball court; playground equipment; and public toilet facilities. The gardens have paved paths throughout, enabling wheelchair access.

Civic Park includes a central garden, playground, and free BBQ and picnic facilities adjacent to a lawned area. Facilities include a soundshell, the centrepiece for annual Christmas carol singing, rock and jazz concerts and festivals. A skate park and dirt bike jump track have been constructed alongside an existing skate bowl, with significant input from local youth. Officially named "RiskIt Park", it can be used for skate boarding, roller-blading and bike riding. Infrastructure includes a fun boy, pyramid and grind rails. The park also boasts a half and full court basketball facility.

The Whyalla Wetlands is both a recreational and educational storm water purification facility developed by the Whyalla City Council. It includes almost 6 hectares of artificial lakes fed by a combination of underground seepage and storm water runoff. A viewing and parking area with a free BBQ, shelter, picnic benches, lawn and landscaping, is accessible from Lincoln Highway. In keeping with the sustainable theme of the wetlands, there are environmentally friendly hybrid toilets (which are virtually waterless). The facility also includes baby change facilities and disabled access wheelchair ramps all the way to the toilets. Other features include extensive pedestrian paths around all lakes, park benches strategically located along the paths and a gazebo atop the central hill. Two disabled access ramps have been constructed from the car park and the BBQ shelter, giving access to paths around the lakes. The Wetlands Walk is part of the Whyalla Heritage Trailways, and interpretive signs are interspersed throughout the wetlands.

Wilson Park provides views extending over the OneSteel Whyalla Steelworks and the more distant Port Bonython and Point Lowly area, free sheltered BBQs and picnic facilities, ample shade and lawns, playground, and 24-hour toilets. Parking for cars, caravans and coaches is readily accessible.

Leisure Centre

The YMCA-run Whyalla Leisure Centre contains a pool and other sporting facilities. A range of fitness programs are run in the air-conditioned health club, including group fitness and aqua aerobics classes. The club also contains resistance and cardio equipment. The Centre includes court facilities for netball, basketball, indoor soccer, squash, badminton, volleyball, and indoor cricket. Regular swimming lessons are offered in the pool.

The Centre is also the focus for a number of programs deliberately designed for residents with disability. Y Options is a day activities program for school leavers and young adults with a disability and minimal to low support needs. Programs are made up of hands-on recreational, educational and life skills activities that teach skills for an active, healthy and inclusive life.

Coastline and conservation parks

The pristine coastline is accessible at the foreshore in Whyalla, and the Council have developed it to encourage greater use. Yoga, tai chi and other free exercise classes are run at the foreshore, and in other places.

The coastline is also accessible north of the City at Point Lowly and Fitzgerald Bay. Whyalla is famous for its giant cuttlefish, who come to the seagrass meadows off the coast to breed in a spectacular annual spectacle.

Four conservation parks are within an hour's drive of Whyalla. The Whyalla Conservation Park is 10 kms to the north. Lake Gilles Conservation Park is 80 kms to the west. Heggaton Conservation Reserve is 90 kms to the south-west. Munyaroo Conservation Park is 50 kms to the south, along the coast. These rugged, peaceful landscapes are ideal for fresh air, walking, camping and bird-watching.

At present, however, the northern coastline has very limited infrastructure for visitors, and the conservation parks also have few facilities for people with disability or older visitors. Further development is a significant opportunity for residents and tourists.

Strategies for well-maintained open spaces and a range of recreational activities

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
11.1. Review facilities in parks and gardens with reference to the Healthy Spaces and Places guidelines, and with a specific focus on access and use by older people and people with a disability	Whyalla City Council and resident advocates	By June 2015, as part of review of Access and Inclusion Plan	Whyalla City Council
11.2. Review the foreshore precinct, including the pontoon, to ensure ease of access and use by older residents and residents with a disability	Whyalla City Council and resident advocates	By June 2015, as part of review of Access and Inclusion Plan	Whyalla City Council
11.3. Encourage Whyalla residents, including older people and people with a disability, to embrace an outdoor lifestyle by developing a program of recreational events linked to community fund-raising—Walk a Mile in My Shoes, Cross the City mass cycling event, etc	Leadership Group, charities, churches	2016–2020	Community fundraising programs
11.4. Engage with National Parks and Wildlife SA to review facilities at the four conservation parks and reserves closest to Whyalla, and develop management plans to facilitate greater access and use by local residents and tourists—including access, facilities, interpretation, and promotion	Leadership Group, NPWSA	2016–2020	National Parks and Wildlife SA
11.5. Work with clubs and associations to review their facilities and programs to ensure that people with disability and older people have full access	Council, clubs and associations	2016–2020	—

As noted on pp. 65–67, city-wide cycling lanes will also be reviewed.

Objectives

- **Active networks and associations** for older residents and residents with a disability, including Indigenous and multicultural networks
- A well-equipped and up to date **civic library**, including facilities and resources specifically for disabled and older people
- Well-equipped **cultural facilities** enabling a wide range of visual arts, music, theatre, craft and cultural history experiences
- **Community facilities** that encourage social interaction through meetings, activities and projects
- An active program of **community festivals and events** that are attractive to disabled and older people

Community views

The Whyalla community values its community networks and cultural institutions, and many older residents are actively engaged in sustaining and developing them.

However, some older residents believe that the City is not making the most of its rich Indigenous and ethnic heritage, or its cultural assets. They are concerned that these assets may not be sustainable into the future unless a plan is developed and implemented to assure their growth and development. They are also concerned that life in Whyalla is limiting culturally, for them or for others, making the City less attractive as a retirement destination.

Networks and associations

Whyalla has a large number of active networks and associations, including service clubs, pensioner associations, and other networks for specific groups.

Active service clubs include:

- Apex Club Whyalla
- Jaycees
- Lions Club of Whyalla Inc
- Lions Club of Whyalla Mount Laura Inc
- Rotary Club of Whyalla
- Rotary Club of Whyalla Norrie

There are also a number of clubs and associations specifically for older residents:

- South Australian Pensioners Association Inc. Whyalla Branch

- Association of Independent Retirees, Whyalla & Districts Branch
- Ladies Probus Club of Whyalla Inc.
- Whyalla Norrie Probus Club
- Whyalla Senior Citizens Club
- Happy Pensioners Social Group

Other important networks include:

- Joan Gibbons House
- Men's Shed
- Whyalla Multi Cultural Communities Centre
- Spanish Union Club Whyalla Inc
- Young Tradespeople and Professionals Whyalla

The clubs and networks vary widely in their focus. Some are brought together by a shared ethnic background; others by a community purpose and a focus on the latest project; still others by a love of travel or educational presentations. The Men's Shed creates a space where men can come, practise their trade skills, and connect.

As noted in section 1, however, the clubs and community networks, which have been such a strong aspect of Whyalla life in the past, have not succeeded in reaching out intergenerationally over time. Rather, they have grown old with their members. They have limited capacity for communication and organisation, and they are not attracting the young members who could regenerate them. Many of them lack any real organisation, and rely on tacit knowledge and informal arrangements to survive. Many of them also have no real means of communicating with their members; everybody just knows to turn up on a certain day of the week, at a certain place.

To ensure the survival of the clubs and community networks for the future, key officeholders and members need to develop skills in using email, social media, and the internet; acquire computers inexpensively; and migrate their communications to these media. Several actions in section 1 serve this purpose.

Cultural assets and institutions

Whyalla has a number of important cultural institutions, including:

- Civic Library
- Middleback Theatre and Whyalla Cinema
- Art Gallery, Whyalla Art Group Inc., and Whyalla Photography Group
- Tanderra Craft Village
- Community Radio 5YYY
- Whyalla Music Association and Whyalla Band Hall
- Mount Laura Homestead Museum
- Whyalla Maritime Museum
- Steel Cap Gallery

Breathing new vigour into the City's cultural life—music, theatre, cinema, arts and crafts, cultural history, festivals and events—could combine with Whyalla's other advantages to make

it a highly desirable retirement location. A number of strategies have been identified in consultation for enhancing their profile, status and value in the community and beyond.

Events and festivals

In and around these organisations is built an annual calendar of events with a community or tourism focus:

- Australia Day celebrations at the foreshore
- OneSteel Fishy Fringe Festival and Australian Snapper Championship over the Easter Weekend
- Whyalla Show (3rd weekend in August)
- Whyalla Pride Week and Pride in the Park (October)
- Whyalla Art Prize (October–November)
- Whyalla Gift, Food and Wine Fair (November)
- OneSteel Christmas Pageant and After-Pageant Fair
- OneSteel Carols in the Park
- Whyalla City Plaza Christmas Street Party

Not all of these events would be attractive to older people or suitable for people with disability; but it makes little sense to build a calendar of events around their special needs. The great value of community events is that they bring diverse people together to enjoy interacting and build a shared sense of identity and belonging. The events need to be designed, of course, to accommodate people with special needs; but their purpose is to bring everybody together.

It is probably timely to open up a conversation with the community generally about what it is looking for in an annual calendar—what it finds most engaging and rewarding—and ensure that included in that discussion are the constituencies that may be overlooked—Indigenous Australians, ethnic networks, older residents, and residents with disability and their families.

Addressing these issues will not benefit older residents and residents with a disability only. Rather, the whole community will benefit.

Strategies for a wide range of social and cultural activities

Action	Leadership	Timeframe	Funding
12.1. Ensure continuing support for the Civic Library as a key cultural asset and information hub	Whyalla City Council	Ongoing	Whyalla City Council

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
12.2. Bring together the clubs, associations and networks of Whyalla to identify common needs, and develop a plan for improving their viability, strengthening their capabilities and their civic contribution	Leadership Group, Whyalla City Council community development program	2016–2020	Not significant initially; funding depends on strategies adopted
12.3. Invest in the redevelopment of the Middleback Theatre and Whyalla Cinema, and the programs delivered through the facility	RDAWEP, Country Arts SA	2016–2020	Country Arts SA
12.4. Work with arts groups to make Whyalla an art-rich city, with a significant number of arts programs and events	Whyalla City Council, Leadership Group, Whyalla Art Group, Whyalla Photography Group	2016–2020	Whyalla City Council
12.5. Develop a plan for moving the Art Gallery to a dedicated facility designed to house a properly curated art collection	Whyalla City Council, RDAWEP	2020–2025	Whyalla City Council
12.6. Extend the City’s civic and private investments in art out into the public space, beginning with the foreshore	Whyalla City Council, Leadership Group, Whyalla Art Group, Whyalla Photography Group	2020–2025	Whyalla City Council
12.7. Develop a plan for linking the museums and history groups into a sustainable network that assures the future of these important cultural assets, and develop a Museum Interpretive Plan	RDAWEP, Whyalla City Council	2020–2025	Whyalla City Council

<i>Action</i>	<i>Leadership</i>	<i>Timeframe</i>	<i>Funding</i>
12.8. Press ahead with development of the Marine Interpretive Centre	RDAWEP, Whyalla City Council	2020–2025	Whyalla City Council; Regional Development Fund Community Infrastructure Program; National Stronger Regions Fund
12.9. Initiate a wide-ranging and inclusive discussion across the Whyalla community to review participation in events, identify opportunities for developing new events or redeveloping existing events to make them more attractive and rewarding to the community, and ensure that groups with special needs are included in that discussion	Whyalla City Council, Tourism Eyre Peninsula	2020–2025	—

Actions noted on pp. 51–55 will strengthen association capabilities and communication networks, and actions noted on pp. 88–90 will strengthen association capabilities more generally.

Timeline

Whyalla's Masterplan has a timeframe of 10 years, 2015–2025. Strategies have been mapped over that timeframe to ensure a sustainable approach to improving the City as a place to live for older residents and residents with a disability.

Three timeframes have been adopted:

- the short-term (1–3 years)
- the medium-term (4–6 years)
- the long-term (7–10 years)

Ongoing and annual commitments

Existing programs which it is important to continue to support and implement include:

- maintaining public access to the internet at the Civic Library and other places (1.12)
- improving public lighting (2.1)
- improving the security of public housing (2.2)
- restructuring, renewing and adapting public housing (3.1)
- maintaining a copy of the Seniors Directory and Disability Services Directory in the Civic Library (6.2)
- maintaining support for business profitability and viability (9.1)
- ensuring support for the Civic Library (12.1)

Every year, it is also proposed to:

- review and update the Masterplan (1.8)

The short-term (1–3 years)

By March 2015, it is proposed to:

- form the Whyalla Disability and Ageing Leadership Group (1.1)
- adopt the Masterplan (1.2)
- commit Whyalla to becoming a WHO-recognised Age-Friendly City, apply to join the WHO Global Network of Age-Friendly Cities, and commit to becoming the world's first Disability-Friendly City (1.3)
- adopt a charter for the Leadership Group (1.4)
- investigate funding sources for a Masterplan Implementation Officer (1.5)
- schedule a first Annual Disability and Ageing Forum (1.6)
- agree on a communication strategy (1.9)
- establish two moderated Facebook pages (1.10)

- work with the State Government to allocate additional Skills for All training quota for aged and disability care (7.1)
- become a member of Volunteering SA & NT Inc (10.4)

By June 2015, it is proposed to:

- ask all member organisations to review their access and inclusion plans (1.7); in the case of the Council, this would also include access issues (4.3), facilities for people with a disability and older people in Whyalla's parks and gardens (11.1) and along the foreshore (11.2)
- implement a computer training program for association officeholders and members (1.11)
- implement a program of assisting associations to obtain computer resources (1.13)
- work to remove Whyalla's substantial shortfall in community care packages (3.2)
- review the policing of disabled parking access (4.1)
- review footpaths and trails and develop a 7-year investment plan (4.2)
- provide a fridge magnet with Carelink contacts to all relevant residents (6.1)
- develop a Disability Services Directory for residents (6.2)
- distribute copies of the Seniors Directory and Disability Services Directory to GPs and other service providers (6.3)

By December 2015, it is proposed to:

- review the Community Emergency Risk Management Plan (2.3)
- establish demand for supported accommodation in Whyalla (3.3)
- convene an NDIS implementation forum (6.4)
- convene an NDIS business opportunities forum (6.5)
- incorporate into the Seniors Directory and Disability Services Directory a directory of tradespeople and handypersons (6.6)
- identify opportunities for resurrecting TAFE general interest courses (8.2)
- develop a program to encourage employers to hire employees with a disability (10.1)
- develop a Disability Employment Covenant (10.2)

By June 2016, it is proposed to:

- construct supported accommodation as capital works funding becomes available (3.4)
- invite community housing organisations to tender for construction of supported disability accommodation (3.5)
- initiate discussions about a pilot efficiency program in Whyalla's public housing stock (3.6)
- attract capital for development of a retirement village (3.7)
- implement the footpaths and trails investment plan (4.2), and implement a plan to address access issues (4.3)
- attract another cohort of secondary students into an aged and disability VET program (7.2)
- develop an Employment Extension Program to enable older workers to remain in the aged and disability workforce (7.3)
- establish city-wide awards for employers, employees with a disability, and older employees (10.3)

The medium-term (4–6 years)

In the 2016–2017 year, it is proposed to:

- continue implementation of the footpaths and trails investment plan (4.2)
- review the City's bicycle lane network, and improve connections (4.4)
- investigate funding for additional volunteer transport vehicles (5.1)
- review the availability of trades in the City, and if necessary, encourage establishment of a COTA-branded trade franchise (6.7)
- investigate VET (6.8) and work for the dole (6.9) options for providing home maintenance services
- assess shortfall in general practitioners, dentists, and pharmacists active in Whyalla, Kimba, Cowell, and Cleve (6.10)
- work with migrant networks to attract and train new cohorts of workers (7.4)
- establish a Learning Hub to coordinate delivery of post-graduate and professional development programs (7.5)

Also in the medium-term, it is proposed to:

- investigate strategies for providing lower cost airfares to residents (5.3)
- develop strategies for bridging gaps between secondary education and workforce involvement for students with a disability (8.1)
- work with the Office for Volunteers to pilot initiatives that encourage volunteering (10.5)
- develop a program of recreational events linked to community fund-raising (11.3)
- develop management and development plans for nearby conservation parks and reserves (11.4)
- develop a plan for improving the viability of Whyalla's clubs, associations and networks (12.2)
- invest in the redevelopment of the Middleback Theatre (12.3)
- work with arts groups to make Whyalla an art-rich city (12.4)

The long-term (7–10 years)

In the long-term, it is proposed to:

- work with clubs and associations to review their facilities and programs to ensure that people with disability and older people have full access (11.5)
- develop a plan for the Art Gallery (12.5)
- extend the City's civic and private investments in art out into the public space (12.6)
- link the museums and history groups, improve sustainability, and develop a Museum interpretive plan (12.7)
- press ahead with development of the Marine Interpretive Centre (12.8)
- initiate a wide-ranging and inclusive discussion across the Whyalla community to review community festivals and events (12.9)

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Appendix 1

Statistical evidence base

Socio-Economic Profile of Whyalla


A report prepared to accompany

Living Well: Whyalla's Aged and Disability Masterplan

Prepared for

RDA Whyalla & Eyre Peninsula

Prepared by

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in association with

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ABBREVIATIONS

ABS	Australian Bureau of Statistics
DEEWR	Department of Education, Employment and Workplace Relations
ERP	estimated resident population
fte	full-time equivalent
GSP	gross state product
GRP	gross regional product
IO	Input-Output (analysis)
LGA	local government area
RDA	Regional Development Australia
RISE	Regional Industry Structure and Employment (impact model)
SA	South Australia

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EXECUTIVE SUMMARY

EconSearch Pty Ltd in collaboration with Indigo and MC Two were commissioned by Regional Development Australia (RDA) Whyalla and Eyre Peninsula to prepare a socio-economic profile of Whyalla to accompany *Living Well: Whyalla's Aged and Disability Masterplan*. The aim of the economic profile is to present a statistical summary of key economic and social information for Whyalla, with a focus on aged care and disability statistics, and to forecast a range of likely future demand for aged and disability services. The key findings are summarised below.

Population Trends

- Resident population growth rate of Whyalla is below the state average and that of other major regional centres over the 13 years to 2012/13.
- Whyalla's growth rate has picked up since 2005/06 predominantly due to regional resource industry development projects.
- The city's age profile is similar to other regional cities but has a lower proportion of working aged residents when compared to the state as a whole. This is likely to increase with sustained improvement in economic conditions.
- Whyalla's crude birth rate is slightly above the state average and its crude death rate slightly below. This means that Whyalla's lower than average population growth rate has been mainly due to the low level of net migration.

Population Projections

- Three population growth scenarios were considered – baseline (16% population growth from 2011 to 2046), medium (35%) and high (53%).
- Under all three scenarios the projected population for 2046 in the 65+ cohort is quite similar, falling in the range of 4,800 (baseline scenario) to 5,400 persons (high growth scenario), from a base of approximately 3,200 in 2011.
- However, even though the number of people in the 65+ cohort will be quite similar by 2046 under the three scenarios, the cohort's share of the total population (14% in 2011) will be significantly different. For the baseline scenario it is expected to increase to 18.2%, whereas for the high growth scenario it will increase but to just 15.5%.
- The rate of growth in the number of people with a profound or severe disability will also be significantly higher than the total population growth rate under all three growth scenarios.

Regional Migration

- Inward and outward migration can be key factors determining growth rates and future demand for aged and disability services.

- Whyalla has a relatively stable, non-transient population – 86% of those living in the city in 2011 were living in Whyalla 5 years earlier.
- Young adults (15-39 cohort) are the most mobile, account for more than 50% of both inward and outward migration but comprise just 31% of the population – this is the age group most likely to be affected by changing economic conditions.
- The 55+ cohort comprised a significantly smaller proportion of in-bound migrating residents (8%) than of out-bound migrating residents (14%) – significantly more aged residents are leaving than moving to Whyalla. Initiatives required to find out why and what needs to be done.
- Of Whyalla residents with a disability in 2006, 10.1% had moved elsewhere 5 years later. In-bound migrating residents with a disability (same time period) accounted for 8.2% of the total, indicating a small net decline in residents with a disability.

Aged and Disabled Care

- The proportion of the population with a profound or severe disability in Whyalla in 2011 was 6.0%, higher than SA (5.5%), Mount Gambier (5.7%), Port Augusta (5.3%) and Port Lincoln (5.3%).
- The rate of growth in the number of people with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.
- Similarly, the rate of growth in the number of people requiring aged and community care places will be substantially higher than the total population growth rate under all three growth scenarios.
- The proportion of the population providing unpaid assistance in Whyalla is higher than in other regional cities. This is likely to be linked to the fact that Whyalla has a slightly higher proportion of the population with a profound or severe disability.

1. INTRODUCTION

EconSearch Pty Ltd in collaboration with Indigo and MC Two were commissioned by Regional Development Australia (RDA) Whyalla and Eyre Peninsula to prepare a socio-economic profile of Whyalla to accompany *Living Well: Whyalla's Aged and Disability Masterplan*. The aim of the economic profile is to present a statistical summary of key economic and social information for Whyalla and South Australia (SA), with a focus on aged care and disability statistics, and to forecast a range of likely future demand for aged and disability services.

This report brings together a wide range of existing Australian Bureau of Statistics (ABS) and some non-ABS data and has been designed, at a broad level, to aid understanding of the composition and economic and social structure of the region¹ with a focus on aged care and disability statistics, to indicate how Whyalla contributes to the state's economy and to help monitor trends in economic growth or decline. Most data are presented for Whyalla and for SA as a whole for the purpose of comparisons. The regional economic and social indicators are categorised under the following headings:

- total population and population characteristics (Section 2)
- population projections for the total and target populations (Section 3)
- migration (Section 4)
- aged and disabled care (Section 5).

The information included in this report is historical, as well as being the latest available at the time of preparation, enabling comparison over time. When analysing the data care needs to be taken as time periods, definitions, methodologies, scope and coverage differ between variables. For detailed information please refer to the relevant source publications that are listed in the References. Additional data on unemployment and the labour force, income and housing, the economic structure of the regional economy and measures of health and developmental status for Whyalla are provided in Appendices 1 to 4.

To show how Whyalla relates to similar sized towns in South Australia statistics, where possible, have also been provided for:

- Mount Gambier
- Port Augusta
- Port Lincoln.

Whyalla is located 396km northwest of Adelaide. The city is the largest town in the Upper Spencer Gulf region, and is located on the western shores of Spencer Gulf.

¹ Defined as the Whyalla Local Government Area.

2. TOTAL POPULATION AND POPULATION CHARACTERISTICS

Key Points

- *Resident population growth rate in Whyalla is below the state average and that of other major regional centres over the 13 years to 2012/13.*
 - *Whyalla's growth rate has picked up since 2005/06 predominantly due to regional resource industry development projects.*
 - *The city's age profile is similar to other regional cities but has a lower proportion of working aged residents when compared to the state as a whole. This is likely to increase with sustained improvement in economic conditions.*
 - *Whyalla's crude birth rate is slightly above the state average and its crude death rate slightly below. This means that Whyalla's lower than average population growth rate has been mainly due to the low level of net migration.*
-

2.1 Population Trends

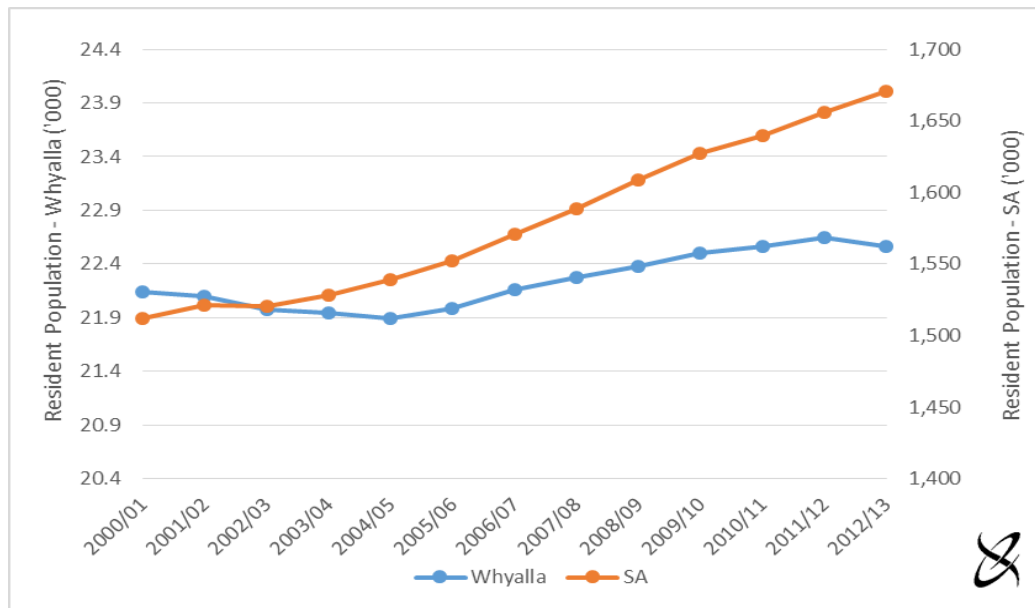
The most comprehensive population count available in Australia is derived from the Census of Population and Housing conducted by the Australian Bureau of Statistics every five years. To provide a more accurate population figure which is updated more frequently than every five years, the Australian Bureau of Statistics also produces "Estimated Resident Population" (ERP) numbers. The ERP adjusts for the net undercount found in Census data, people overseas on Census night, and is updated annually based on the number of registered births, deaths, and an estimate of overseas, interstate and intra-state migration.

Because both Census and ERP data are frequently quoted and referred to, both sets of data with reference back to 2001 are provided in the following sub-sections.

2.1.1 Estimated resident population

The ERP for Whyalla and SA are illustrated in Figure 2-1 for the period 2000/01 to 2012/13. In 2012/13 the ERP in Whyalla was approximately 22,600 persons, representing 1.4 per cent of the state total (approximately 1.66 million persons). Over the 13 years, 2000/01 to 2012/13, Whyalla experienced slow population growth, with the total population increasing by 1.9 per cent (around 400 persons). Over the same period, SA experienced somewhat faster population growth, with the population increasing by 10.5 per cent.

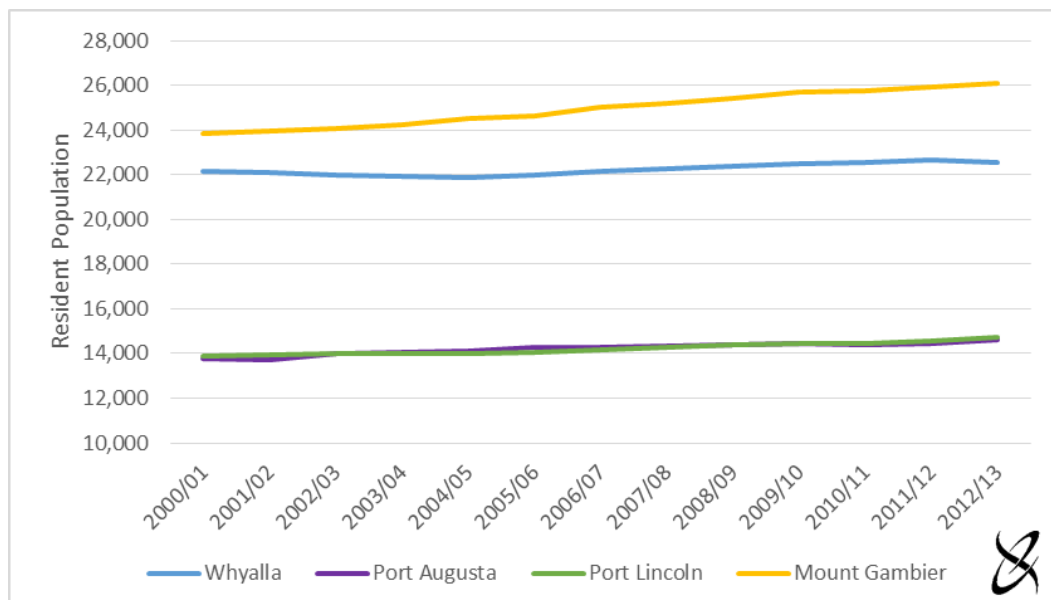
Figure 2-1 Estimated resident population in Whyalla and SA, 2000/01 to 2012/13



Source: ABS (2014a)

The low population growth rate for Whyalla over the period 2000/01 to 2012/13 is highlighted by the fact that similar sized towns have experienced much higher growth rates. As shown in Figure 2-2, the growth rate over the period was 6.0 per cent in Port Lincoln, 6.2 per cent in Port Augusta and 9.4 per cent in Mount Gambier.

Figure 2-2 Estimated resident population in Whyalla, Mount Gambier, Port Augusta and Port Lincoln, 2000/01 to 2012/13



Source: ABS (2014a)

As is clear from Figure 2-1, Whyalla's population followed a declining trend in the five years to 2004/05 but has generally shown positive growth since. This growth can be attributed to a number of factors, but two in particular have stood out. The success of Arrium (OneSteel prior to May 2012), through its Project Magnet and the ramp up towards export ore to 6 million tonnes per annum (and the subsequent doubling of Whyalla's export capacity to 13Mtpa) and the South Australian minerals exploration boom. These factors in turn, have provided significant work to Whyalla's engineering services industries in metal fabrication, machining, electrical, belting, instrumentation, scaffolding, transport, logistics and others.

2.1.2 Census population

The population for Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA for 2001, 2006 and 2011 (Census years) are summarised in Table 2-1. The population totals highlight the difference in population growth rates between Whyalla and SA as a whole. Between 2001 and 2011 the population for Whyalla increased by only 2.5 per cent and actually fell between 2001 and 2006 due to a number of factors including the downsizing of OneSteel and the general loss of services. In comparison SA's population increased by 9.4 per cent between 2001 and 2011. Comparison with Mount Gambier, Port Augusta and Port Lincoln highlight the low growth in population for Whyalla. Between 2001 and 2011 the population increased by 3.8 per cent in Port Augusta, by 6.7 per cent in Port Lincoln and by 11.4 per cent in Mount Gambier (Table 2-1).

Table 2-1 Census population, 2001 to 2011

	2001	2006	2011
Whyalla	21,552	21,417	22,089
Mount Gambier	22,656	23,494	25,247
Port Augusta	13,474	13,874	13,985
Port Lincoln	13,199	13,603	14,086
South Australia	1,458,912	1,514,340	1,596,569

Source: ABS (2012a)

2.2 Age Distribution

The population age structure is summarised on an annual basis for the years 2002/03 to 2012/13 in Table 2-2. A comparison with South Australia highlights some significant differences in changes in the age structure of the state and regional populations, between 2002/03 and 2012/13.

- Proportion of persons aged 0 to 14 years – for Whyalla this category decreased from 22 per cent in 2002/03 to 19 per cent in 2012/13 and for SA it decreased from 19 per cent in 2002/03 to 18 per cent in 2012/13.
- Number of persons aged 15 to 64 years – despite fluctuations in between years the proportion of people in this aged group remained steady at 65 per cent for Whyalla and 66 per cent for SA.

- Number of persons aged 65 years or older – for Whyalla this category increased from 13 percent in 2002/03 to 16 per cent in 2012/13 and for SA it increased from 15 per cent in 2002/03 to 17 per cent in 2012/13.

In 2012/13, 19 per cent of the region's population was under the age of 15 years, the majority of the population (approximately 65 per cent) was aged between 15 and 64 years and approximately 16 per cent of the population was aged over 65 years (Table 2-2).

Compared with the age distribution of the state, Whyalla has a larger concentration of younger people (aged 0 to 14 years), a smaller than average share of persons aged 15 to 64 years and a smaller than average share of people aged 65 and over as well. The 15 to 64 year age group could be characterised as the working-age population.

When compared with similar size regions, namely Mount Gambier, Port Augusta and Port Lincoln, Whyalla has a similar age profile.

Table 2-2 Age distribution of the population, 2002/03 to 2012/13

Age	Year										
	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13
Whyalla											
0 to 14	22%	22%	22%	21%	21%	21%	21%	21%	20%	20%	19%
15 to 64	65%	65%	65%	65%	65%	65%	65%	65%	66%	65%	65%
65 or older	13%	13%	13%	13%	14%	14%	14%	14%	15%	15%	16%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Mount Gambier											
0 to 14	22%	21%	21%	21%	20%	20%	20%	20%	21%	20%	20%
15 to 64	65%	65%	65%	65%	65%	66%	66%	66%	64%	64%	64%
65 or older	13%	14%	14%	14%	14%	14%	14%	14%	15%	16%	16%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Port Augusta											
0 to 14	22%	21%	21%	21%	21%	21%	22%	22%	20%	20%	20%
15 to 64	67%	67%	67%	67%	67%	66%	66%	65%	66%	66%	66%
65 or older	12%	12%	12%	12%	12%	12%	13%	13%	14%	14%	15%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Port Lincoln											
0 to 14	22%	22%	22%	21%	21%	21%	21%	21%	20%	20%	20%
15 to 64	64%	64%	64%	65%	64%	64%	64%	64%	64%	64%	64%
65 or older	14%	14%	14%	14%	14%	15%	15%	15%	16%	16%	17%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
South Australia											
0 to 14	19%	19%	18%	18%	18%	18%	18%	18%	18%	18%	18%
15 to 64	66%	66%	66%	67%	67%	67%	67%	67%	66%	66%	66%
65 or older	15%	15%	15%	15%	15%	15%	15%	16%	16%	16%	17%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Source: ABS (2014b)

2.3 Crude Birth Rates and Death Rates

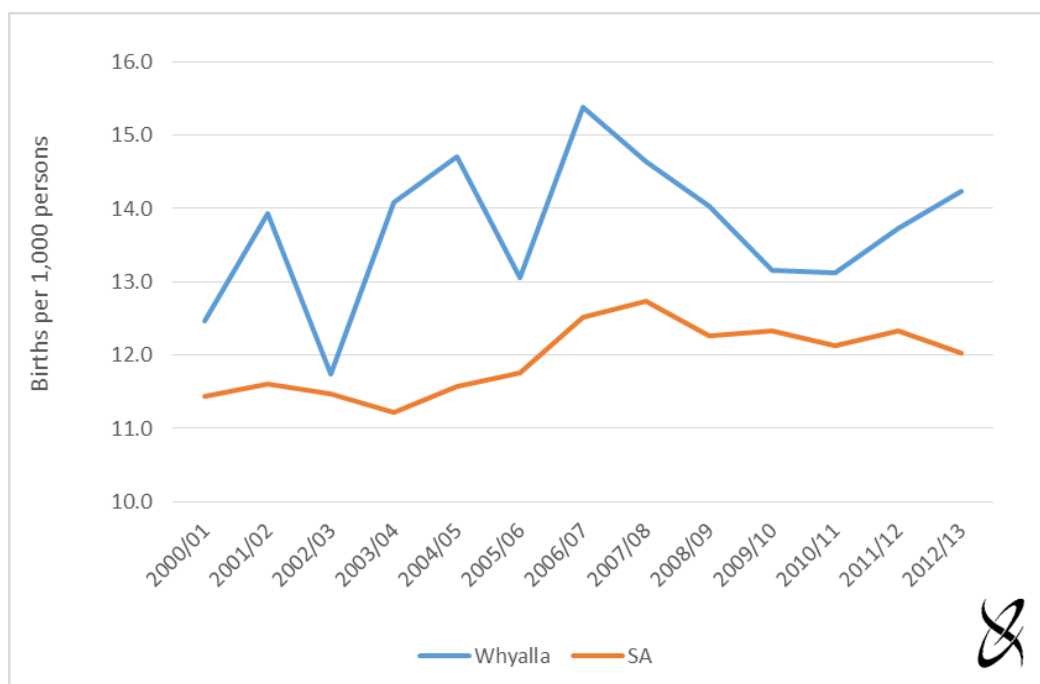
Crude birth rates² are illustrated for Whyalla and SA in Figure 3-1 for the period 2000/01 to 2012/13. The number of births in Whyalla rose from 276 in 2000/01 to a peak of 341 in 2006/07 but has fallen since and was 321 in 2012/13. In SA the number of births rose from 17,281 in 2000/01 to a peak of 20,090 in 2012/13.

The crude birth rate for Whyalla increased from 12.5 in 2000/01 to 14.2 in 2012/13 and remained consistently above that for SA as a whole. The crude birth rate for SA was also higher in 2012/13 (12.0 births per thousand residents) than in 2000/01 (11.4 births per thousand residents) (Figure 2-3).

Crude birth rates are illustrated for Whyalla, Port Augusta, Port Lincoln and Mount Gambier in Figure 2-4 for the period 2000/01 to 2012/13. In comparison to Whyalla, the birth rate over the period 2000/01 to 2012/13:

- decreased slightly in Mount Gambier from 14.0 to 13.5 births per thousand residents
- increased in Port Augusta from 12.4 to 14.0 births per thousand residents
- decreased in Port Lincoln from 15.3 to 13.4 births per thousand residents.

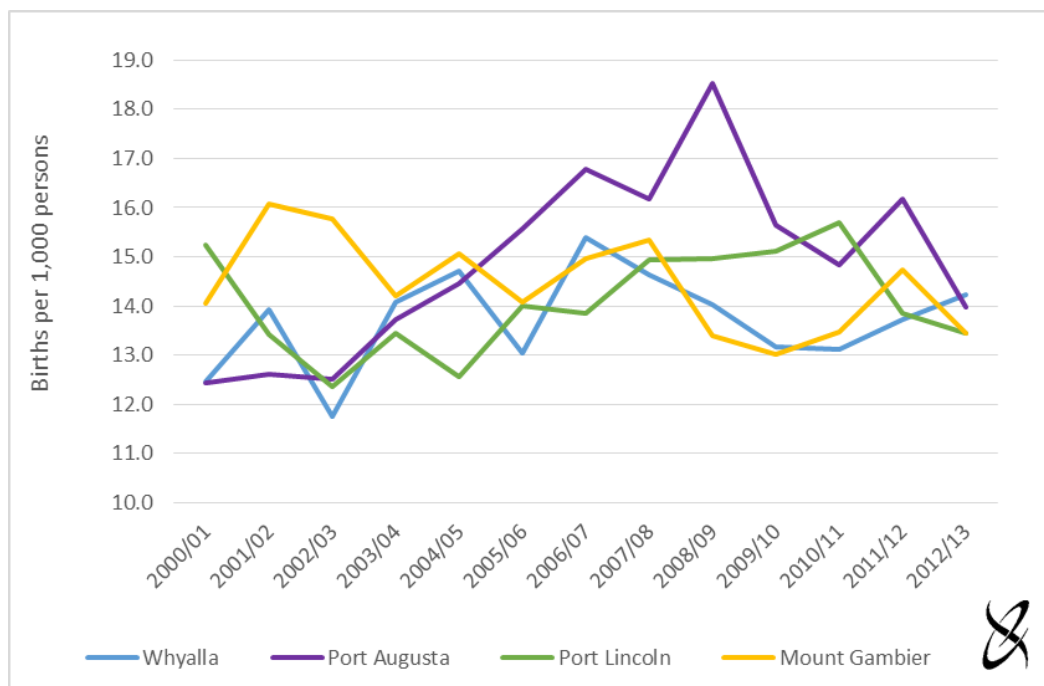
Figure 2-3 Crude birth rates in Whyalla and SA, 2000/01 to 2012/13



Source: ABS (2014a,c)

² The number of births are calculated on the basis of usual residence of the mother regardless of where in Australia the birth occurred. The crude birth rate is the number of live births registered in the 12 months ending 30 June per 1,000 residents. The number of residents is equivalent to the ERP.

Figure 2-4 Crude birth rates in Whyalla, Port Augusta, Port Lincoln and Mount Gambier, 2000/01 to 2012/13



Source: ABS (2014a,c)

Crude death rates³ are illustrated for Whyalla and SA in Figure 3-3 for the period 2000/01 to 2011/12. The crude death rate in Whyalla generally followed a slight decreasing trend over the 12 years but remained generally below that for SA as a whole. The number of deaths in Whyalla was 170 in 2000/01 and in 2011/12, despite fluctuations in between years. As detailed in Section 2.1, the estimated resident population for Whyalla increased marginally over the same period which means the crude death rate fell slightly, from 7.7 in 2000/01 to 7.5 in 2011/12. The implications of increasing population are discussed in Sections 3 and 5 below.

The crude death rate for SA was slightly higher in 2011/12 (8.0 deaths per thousand residents) than in 2000/01 (7.9 deaths per thousand residents) despite fluctuations in between years. The total number of deaths in SA rose from 11,891 deaths in 2000/01 and 13,178 in 2011/12 (Figure 2-5). The rise in the number of deaths was only slightly reflected as an increase in the death rate as the population also increased over this period.

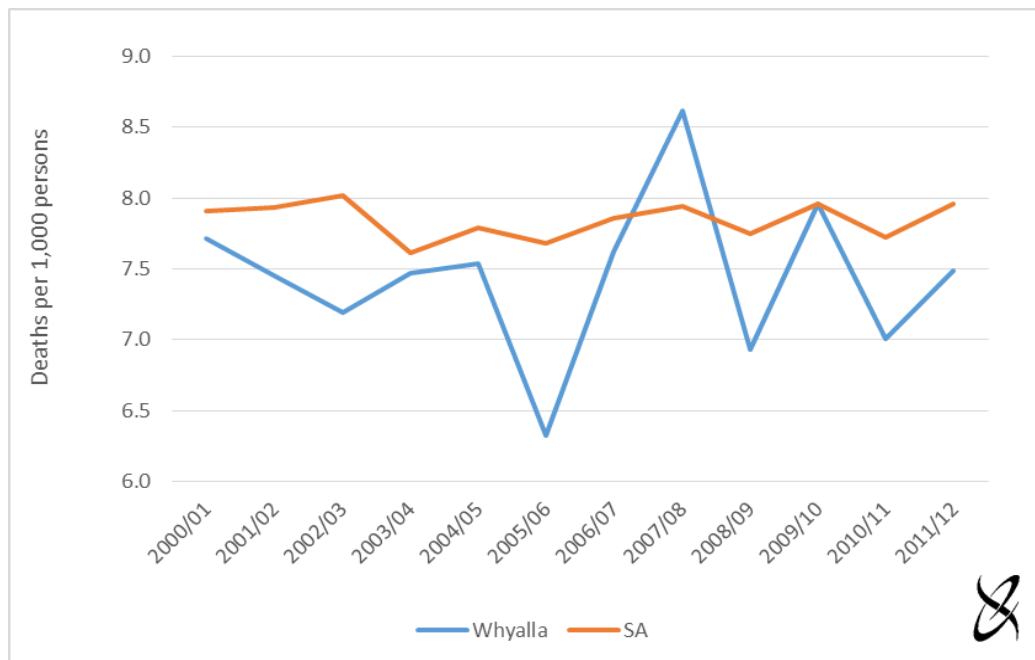
Crude death rates are illustrated for Whyalla, Port Augusta, Port Lincoln and Mount Gambier in Figure 2-6 for the period 2000/01 to 2011/12. In comparison to Whyalla, the death rate over the period 2000/01 to 2011/12 in:

- Mount Gambier increased from 6.7 to 8.0 deaths per thousand residents

³ The number of deaths are calculated on the basis of usual residence of the deceased, regardless of where in Australia the death occurred. The crude death rate is the number of deaths registered in the 12 months ending 30 June per 1,000 residents. The number of residents is equivalent to the ERP.

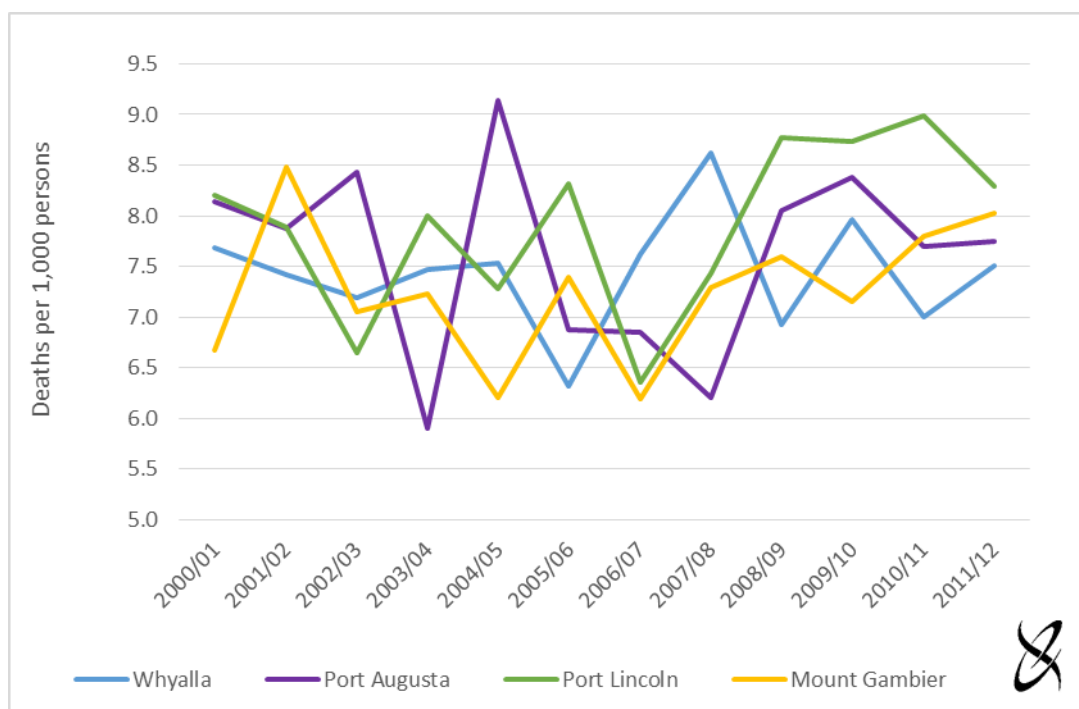
- Port Augusta decreased slightly from 8.1 to 7.7 deaths per thousand residents
- Port Lincoln increased slightly from 8.2 to 8.3 deaths per thousand residents.

Figure 2-5 Crude death rates in Whyalla and SA, 2000/01 to 2011/12



Source: ABS (2013a and 2014a)

Figure 2-6 Crude death rates in Whyalla, Port Augusta, Port Lincoln and Mount Gambier, 2000/01 to 2011/12



Source: ABS (2013a and 2014a)

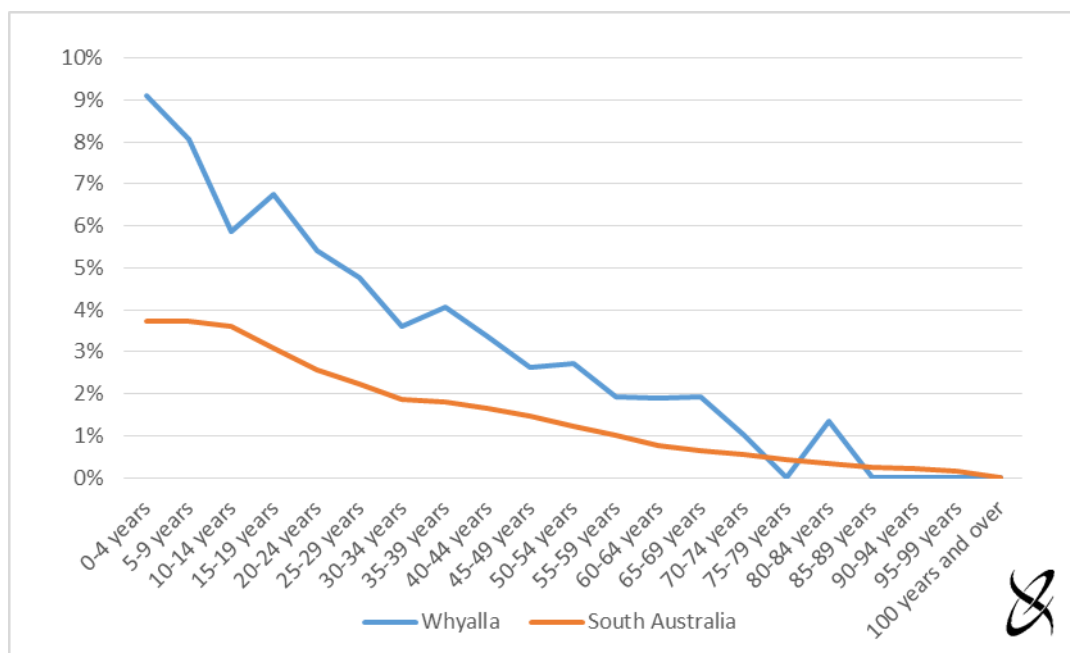
2.4 Indigenous Population

Whyalla has a higher proportion of the total population that is Indigenous (4.1 per cent) compared with SA as a whole (1.9 per cent).

The Indigenous population by age as a proportion of the total Indigenous population at the time of the most recent Census (2011) is illustrated in Figure 2-7 for Whyalla and SA. For all age groups up until the 70-74 year age group Whyalla had a higher proportion of the Indigenous population in these age categories, especially prevalent in the younger year age groups (Figure 2-7).

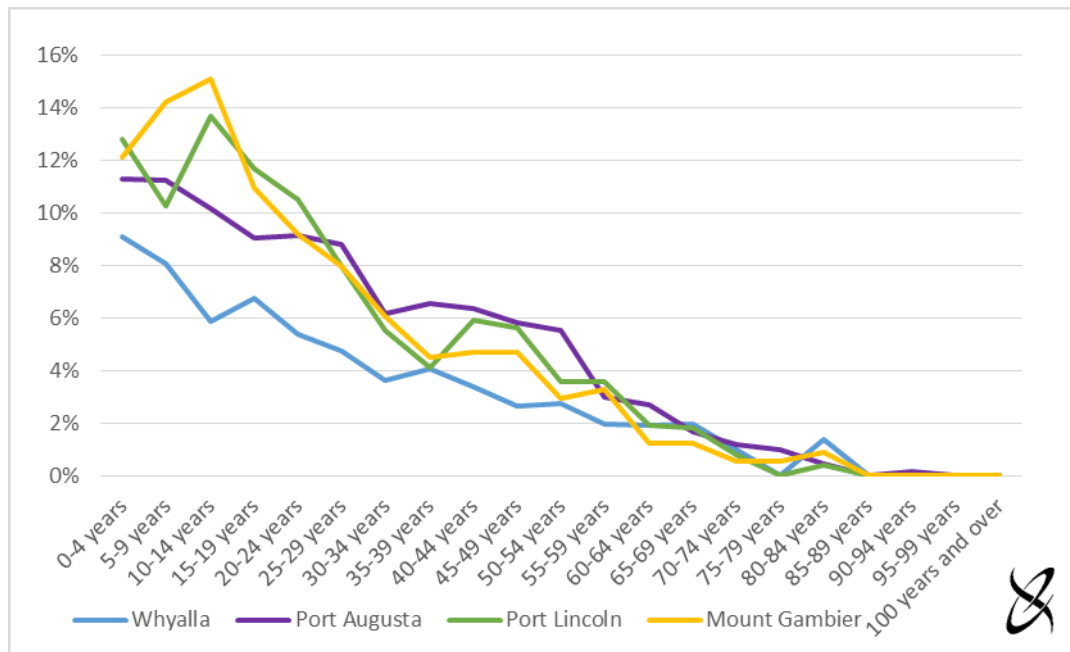
The Indigenous population by age as a proportion of the total Indigenous population in 2011 is illustrated in Figure 2-8 for Whyalla, Port Augusta, Port Lincoln and Mount Gambier. Compared to Whyalla, Mount Gambier, Port Lincoln and Port Augusta all have a higher proportion of the Indigenous population in the younger age groups (0-14 years of age) and of the working age population (15 to 64) but a similar proportion of the Indigenous population in the over 65 years age groups.

Figure 2-7 Indigenous population by age as a proportion of the total Indigenous population, Whyalla and SA, 2011



Source: ABS (2012a)

Figure 2-8 Indigenous population by age as a proportion of the total Indigenous population, Whyalla, Mount Gambier, Port Augusta and Port Lincoln, 2011



Source: ABS (2012a)

Key Points

- *Three growth scenarios identified – baseline (16% population growth from 2011 to 2046), medium (35%) and high (53%).*
 - *Under all three scenarios the projected population in the 65+ cohort is quite similar for 2046, in the range of 4,800 to 5,400 persons.*
 - *However, even though the number of people in the 65+ cohort will be quite similar by 2046 under the three scenarios, the cohort's share of the total population (14% in 2011) will be significantly different. For the baseline scenario it is expected to increase to 18.2%, whereas for the high growth scenario the share will increase but to just 15.5%.*
 - *Rate of growth in the number of people with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.*
-

3. POPULATION PROJECTIONS

3.1 Total Population Projections

Population projections for Whyalla and SA for the period 2006 to 2026 have been published by the Department of Planning and Local Government (2001, 2011). Using the 2011 projections for Whyalla as a starting point (these are broadly in line with the most recent estimated residential population (ERP) and growth rate), the population was projected out to 2046 under three growth scenarios as detailed in Table 3-1 and summarised in Figure 3-1.

The projections beyond 2011 are based on trends in mortality, fertility and overseas and interstate migration. The baseline projections are based on “steady state” economic conditions but they could be significantly different with disruptive changes to the local economy, either negatively (e.g. closure of major employer) or positively (e.g. significant new mining projects).

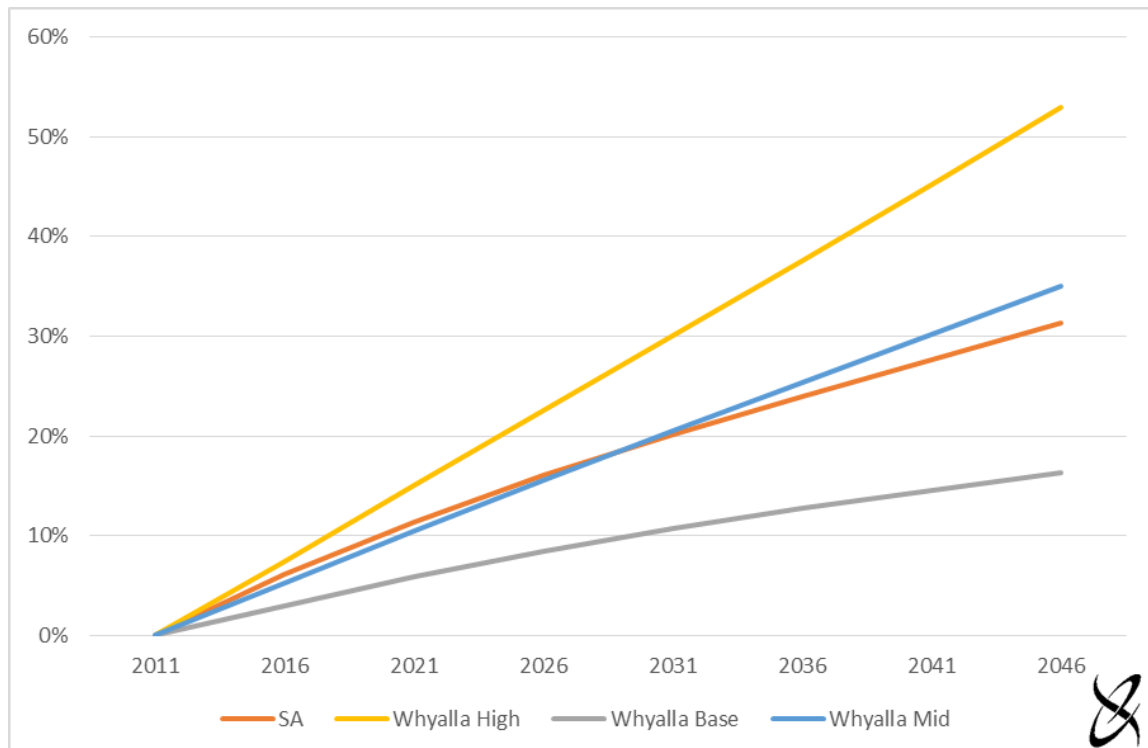
The **baseline (base) growth scenario** for Whyalla is based on continued net in-migration at the average rate of that experienced over the 2006-2011 period, a population gain from net migration of approximately 20 people per annum.

Table 3-1 Population projections for Whyalla and SA, 2011 to 2046

Age	2011		2016		2021		2026		2031		2036		2041		2046	
	Population	Change from 2011	Population	Change from 2011	Population	Change from 2011	Population	Change from 2011	Population	Change from 2011	Population	Change from 2011	Population	Change from 2011	Population	Change from 2011
	no.	%	no.	%	no.	%	no.	%	no.	%	no.	%	no.	%	no.	%
Whyalla Base																
0-14	4,660	0.0%	4,738	1.7%	4,824	3.5%	4,908	5.3%	4,999	7.3%	5,095	9.3%	5,191	11.4%	5,282	13.3%
15-64	14,919	0.0%	15,167	1.7%	15,368	3.0%	15,526	4.1%	15,683	5.1%	15,874	6.4%	16,106	8.0%	16,368	9.7%
65+	3,189	0.0%	3,544	11.1%	3,911	22.7%	4,253	33.4%	4,521	41.8%	4,693	47.2%	4,785	50.0%	4,829	51.4%
Total	22,768	0.0%	23,449	3.0%	24,103	5.9%	24,686	8.4%	25,203	10.7%	25,663	12.7%	26,082	14.6%	26,480	16.3%
Whyalla Mid																
0-14	4,660	0.0%	4,813	3.3%	4,988	7.0%	5,171	11.0%	5,369	15.2%	5,581	19.8%	5,800	24.5%	6,023	29.2%
15-64	14,919	0.0%	15,599	4.6%	16,248	8.9%	16,876	13.1%	17,519	17.4%	18,203	22.0%	18,920	26.8%	19,648	31.7%
65+	3,189	0.0%	3,545	11.2%	3,916	22.8%	4,265	33.7%	4,550	42.7%	4,760	49.3%	4,922	54.3%	5,076	59.2%
Total	22,768	0.0%	23,957	5.2%	25,153	10.5%	26,312	15.6%	27,439	20.5%	28,545	25.4%	29,642	30.2%	30,747	35.0%
Whyalla High																
0-14	4,660	0.0%	4,886	4.8%	5,149	10.5%	5,428	16.5%	5,731	23.0%	6,054	29.9%	6,391	37.2%	6,737	44.6%
15-64	14,919	0.0%	16,000	7.2%	17,052	14.3%	18,103	21.3%	19,194	28.7%	20,342	36.4%	21,523	44.3%	22,700	52.2%
65+	3,189	0.0%	3,576	12.1%	3,986	25.0%	4,371	37.1%	4,686	46.9%	4,928	54.5%	5,143	61.3%	5,386	68.9%
Total	22,768	0.0%	24,461	7.4%	26,187	15.0%	27,902	22.5%	29,611	30.1%	31,324	37.6%	33,057	45.2%	34,824	53.0%
SA																
0-14	297,493	0.0%	315,232	6.0%	332,451	11.8%	339,109	14.0%	356,254	19.8%	369,454	24.2%	382,060	28.4%	393,941	32.4%
15-64	1,104,009	0.0%	1,144,420	3.7%	1,167,925	5.8%	1,190,598	7.8%	1,237,972	12.1%	1,272,818	15.3%	1,306,373	18.3%	1,338,245	21.2%
65+	265,942	0.0%	310,992	16.9%	356,059	33.9%	405,454	52.5%	409,754	54.1%	424,795	59.7%	440,593	65.7%	456,973	71.8%
Total	1,667,444	0.0%	1,770,644	6.2%	1,856,435	11.3%	1,935,161	16.1%	2,003,981	20.2%	2,067,067	24.0%	2,129,026	27.7%	2,189,160	31.3%

Source: EconSearch analysis

Figure 3-1 Population projections for Whyalla and SA, change from 2011



Source: Department of Planning and Local Government (2010 and 2011) and EconSearch analysis

The **medium (mid) growth scenario** is based on higher net in-migration at five times above the (very low) average rate of that experienced over the 2006-2011 period, a population gain from net migration of approximately 120 people per annum. This scenario would be consistent with the growth expected if several of the projects have that have been included in the government's Major Project Directory were fully developed and operational. Projects include the Port Bonython bulk fuel distribution terminal, the Australian Defence forces Cultana area augmentation, the Spencer Gulf Portlink Port Bonython bulk commodities export facility, and Iron Road Limited Central Eyre iron project.

The **high growth scenario** is based on continued net in-migration at ten-fold the average rate of that experienced over the 2006-2011 period, a population gain from net migration of approximately 240 people per annum. This scenario would be consistent with the growth expected if a majority of the projects in the region that have been included in the government's Major Project Directory were fully developed and operational.

Note that the projection for SA is a baseline projection which, as noted above, is based on "steady state" economic conditions.

Under the medium growth scenario, the population in Whyalla is projected to increase by 35 per cent over the 35 years from 2011 whereas the total SA population (baseline) is expected to increase by around 31 per cent (Table 3-1 and Figure 3-1). Medium scenario population projections for Whyalla for persons aged 0 to 14 years indicate that there will be a 29 per cent increase in this age cohort. The working age population (15 to 64 years) is projected to

increase by 32 per cent (2011 - 2046), well above the state projection (21 per cent). The population projections for persons 65 or older indicate that a significant increase of around 59 per cent is expected over the 35 years, although this is below the baseline projection for SA (72 per cent).

Under all three scenarios the projected population in the 65+ cohort is quite similar for 2046: in the range of 4,800 to 5,400 persons. However, for the working age cohort (15-64 years) the projection range is far greater, from 16,300 (baseline scenario) to 22,700 (high growth scenario) (Table 3-1). This reflects the dependence on significant net in bound migration of working aged people to realise the projected populations under the medium and high growth scenarios.

3.2 Population Projections for Target Groups

3.2.1 Population projections for aged population

The population projections provided in Table 3-1 allow calculation of the share of each population cohort in the total population and how that share is projected to change over time. Table 3-2 shows how the share of the 65 and over cohort in the total population is expected to change under each of the three scenarios.

Under the baseline scenario, the 2011 share of 14 per cent is expected to increase to around 18 per cent within 25 years (2036) and stay at that level through to 2046. Under the medium growth scenario the share of the 65 and over cohort is projected to reach 16 per cent by 2026 and then stay relatively steady through to 2046. The high growth scenario has the smallest expected change, with the total population share of the 65+ cohort projected to reach 15 per cent by 2021 but change little in the following 25 year projection period (Table 3-2).

Table 3-2 65 and over cohort share of total population, Whyalla projections, 2011 to 2046

Scenario	2011	2016	2021	2026	2031	2036	2041	2046
Baseline	14.0%	15.1%	16.2%	17.2%	17.9%	18.3%	18.3%	18.2%
Medium	14.0%	14.8%	15.6%	16.2%	16.6%	16.7%	16.6%	16.5%
High	14.0%	14.6%	15.2%	15.7%	15.8%	15.7%	15.6%	15.5%

Source: Derived from Table 3-1.

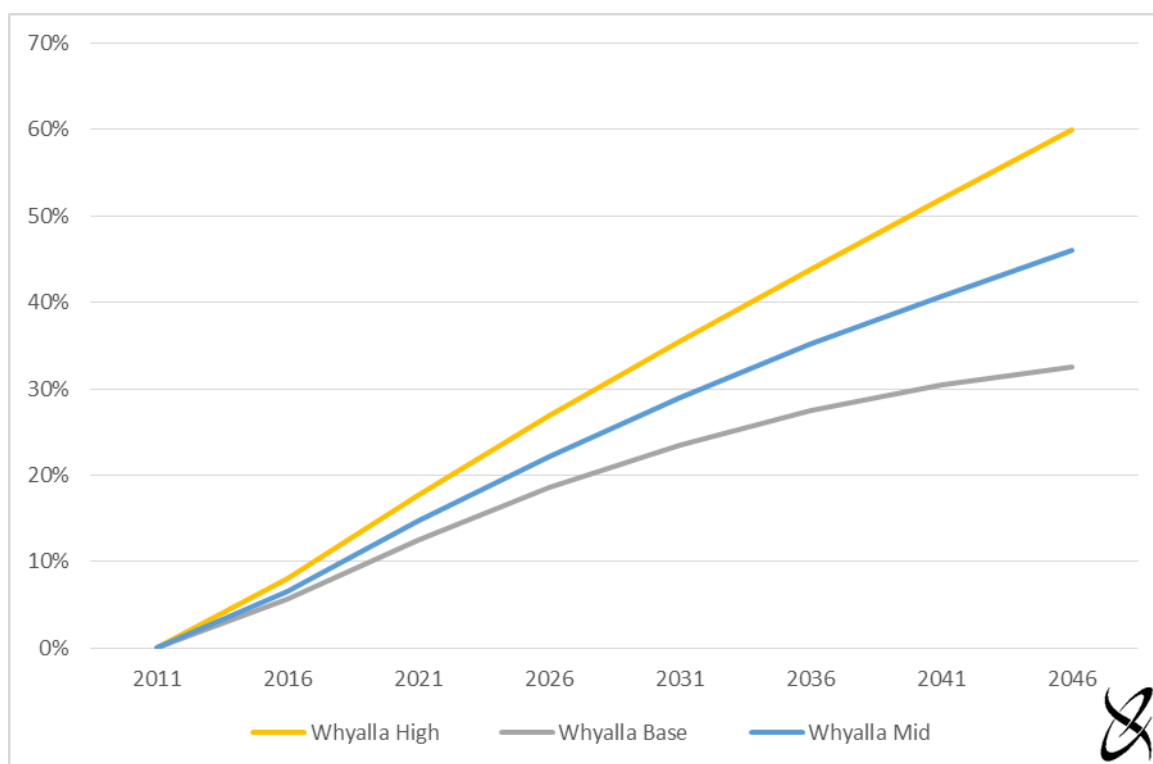
3.2.2 Population projections for disabled population

People with a profound or severe disability are defined as those people needing help or assistance in one or more of three core activity areas of self-care, mobility and communication, because of a disability, long term health condition (lasting six months or more) or old age. The projected change in the number of people with a profound or severe disability living in Whyalla is summarised in Figure 3-2. The projection period is for the years 2011 to 2046.

The data from which Figure 3-2 was drawn are provided in more detail in Section 5.1. However, it is worth noting the general point here that the rate of growth of people with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.

- *Baseline scenario*: population in 2046 is projected to be 16.3 per cent above 2011 level, whereas the number of people with a profound or severe disability is projected to be 32.6 per cent higher.
- *Medium growth scenario*: population is projected to grow by 35.0 per cent, whereas the number of people with a disability is projected to be 46.1 per cent higher.
- *High growth scenario*: total population in 2046 is projected to be 53.0 per cent above the 2011 level, whereas the number of people with a profound or severe disability is projected to be 60.1 per cent higher.

Figure 3-2 Projected change in number of people with a profound or severe disability, Whyalla, 2011 to 2046



Source: Derived from Table 5-2

4. REGIONAL MIGRATION

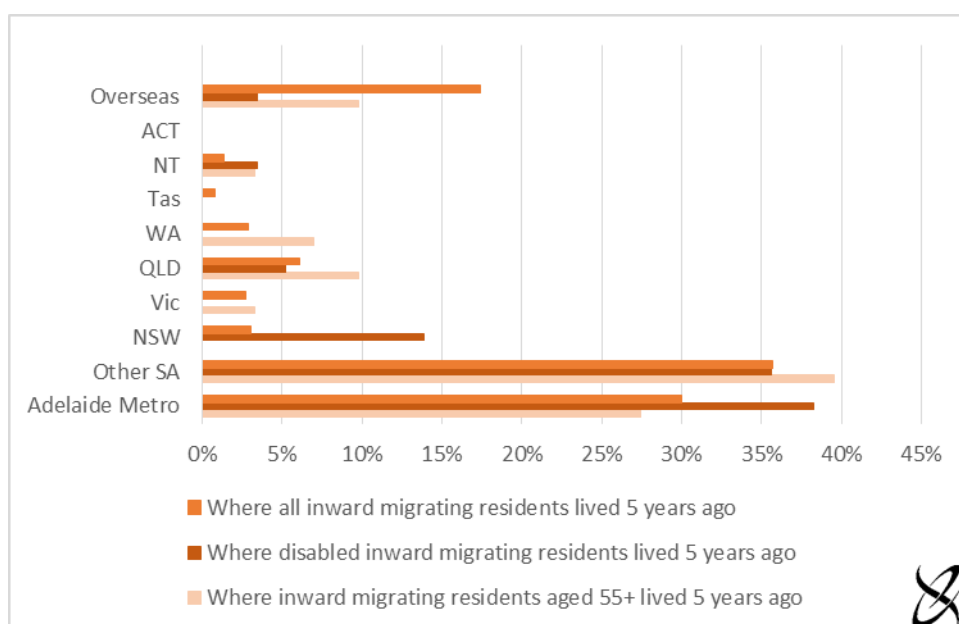
Key Points

- *Inward and outward migration can be key factors determining growth rates and future demand for aged and disability services.*
 - *Whyalla has a relatively stable, non-transient population – 86% of those living in the city in 2011 were living in Whyalla 5 years earlier.*
 - *Young adults (15-39 cohort) are the most mobile, account for more than 50% of both inward and outward migration but comprise just 31% of the population – this is the age group most likely to be affected by changing economic conditions.*
 - *The 55+ cohort comprised a significantly smaller proportion of in-bound migrating residents (8%) than of out-bound migrating residents (14%) – significantly more aged residents are leaving than moving to Whyalla. Initiatives required to find out why and what needs to be done.*
 - *Of Whyalla residents with a disability in 2006, 10.1% had moved elsewhere 5 years later. In-bound migrating residents with a disability (same time period) accounted for 8.2% of the total, indicating a small net decline in residents with a disability.*
-

4.1 In-Migration

The majority of Whyalla residents (86 per cent) were living in Whyalla five years ago (2006, the time of the previous Census). Of those Whyalla residents who have moved into the region, 2,786 persons across all age groups, around 30 per cent came from an Adelaide metropolitan Local Government Area (LGA), 36 per cent from Other SA, 17 per cent from interstate and 17 per cent from overseas (Figure 4-1).

The origin of inward migrating residents 55 years and over is similar to that of the total inward migrating population with a couple of notable differences. There were less from overseas (10 per cent for the 55+ cohort compared to 17 per cent for the total inward migrating population) and there was a higher proportion from interstate (especially WA and Qld). For both groups the proportion coming from elsewhere in SA (Adelaide Metro plus Other SA) is the same (66 per cent) but, compared to the total inward migrating population, the 55+ cohort was slightly higher for Other SA (39 per cent versus 36 per cent) and lower for Adelaide Metro (27 per cent versus 30 per cent).

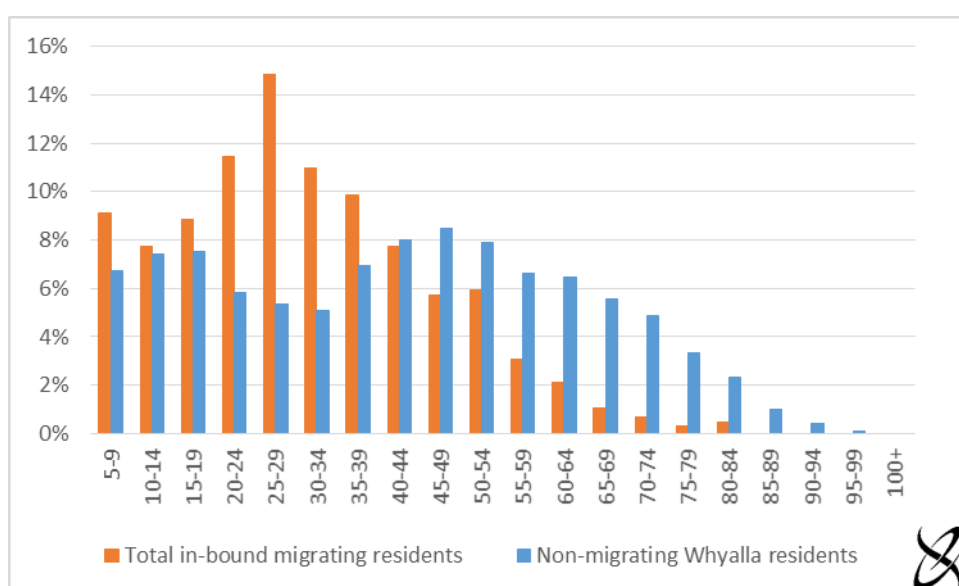
Figure 4-1 Where inward migrating residents lived 5 years ago, 2011 ^a

^a Excludes those Whyalla residents who were living in Whyalla 5 years ago, and not stated.

Source: ABS (2012a)

There were 115 Whyalla residents with a disability who moved into the region between 2006 and 2011. The proportion that came from Metro Adelaide (38 per cent) was greater than that of the total inward migrating population (30 per cent). Other significant differences include less from overseas (3 per cent for people with a disability compared to 17 per cent for the total inward migrating population) and a higher proportion from interstate (especially NSW). Inward migrating residents with a disability coming from elsewhere in SA was similar to that for the total inward migrating population, both around 36 per cent (Figure 4-1).

Figure 4-2 Age profile of in-bound Whyalla residents, 2011



Source: ABS (2012a)

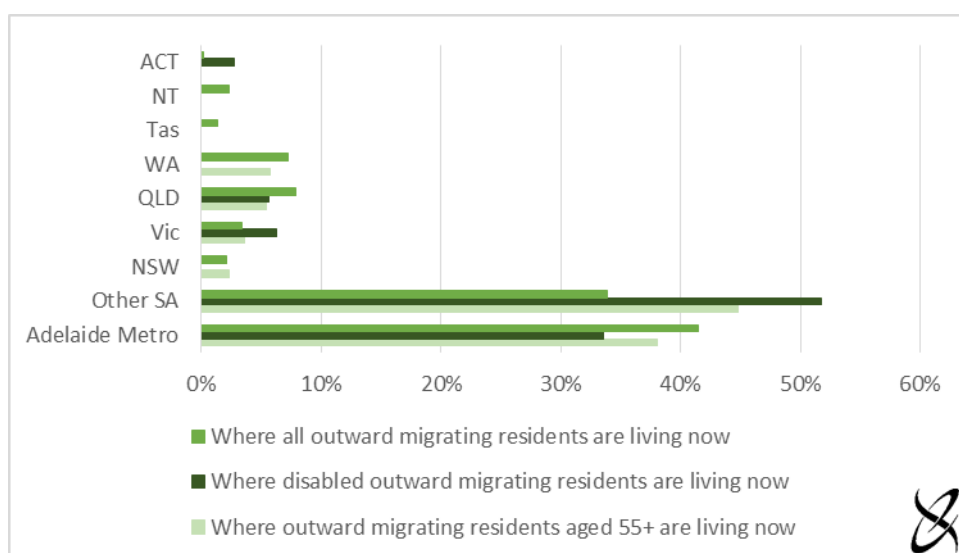
The age profile of those residents who have moved into the region is provided in Figure 4-2 and compared to that of non-migrating residents. The majority of the residents who have moved into the region since the last census fall between the ages of 15 and 39 (56 per cent of inward migrating residents), whereas this age cohort accounts for just 31 per cent of non-migrating Whyalla residents (Figure 4-2).

4.2 Out-Migration

As noted above, the majority of Whyalla residents (86 per cent) who were living in Whyalla five years ago (2006) are still living in Whyalla. Of those Whyalla residents who have moved out of the region, 2,687 persons across all age groups, around 41 per cent moved to an Adelaide metropolitan Local Government Area (LGA), 34 per cent moved to elsewhere in SA and 25 per cent moved interstate (Figure 4-3). For the 55+ cohort, a larger proportion moved to Other SA and a smaller proportion to Adelaide Metro, WA and Queensland.

There were 143 Whyalla residents with a disability who moved out of the region between 2006 and 2011, 24 per cent more than the number of inward migrating residents with a disability over the same period. There was a significantly greater proportion of outward migrating residents who have a disability moving to Other SA (52 per cent) than that of the total outward migrating population (34 per cent). However, there was a lower proportion moving to Adelaide Metro (34 per cent) for people with a disability compared to 41 per cent for the total outward migrating population (Figure 4-2).

Figure 4-3 Where outward migrating residents are living now, 2011 ^a

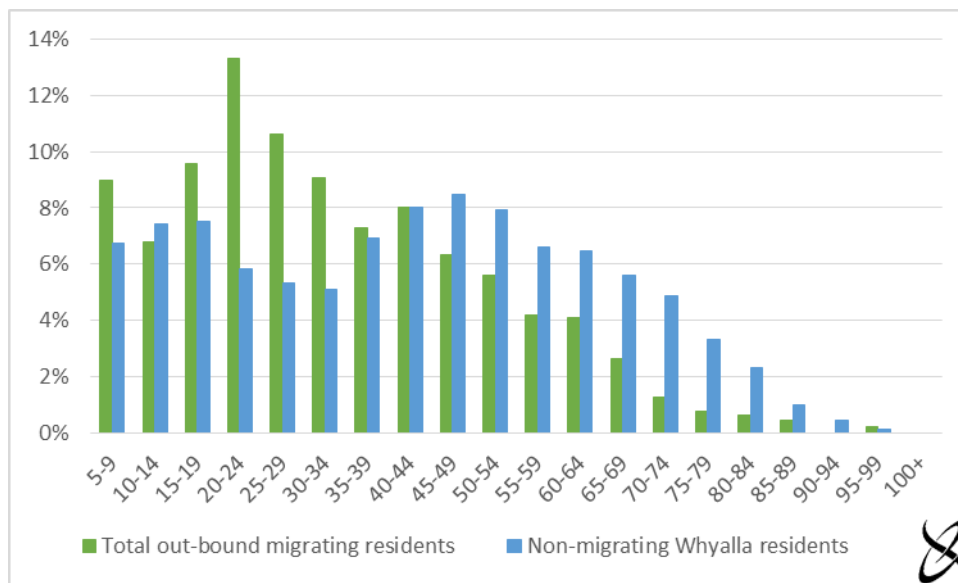


^a Excludes those Whyalla residents who were living in Whyalla 5 years ago.

Source: ABS (2012a)

The age profile of those residents who have moved out of the region is provided in Figure 4-4. Half of the residents who have moved out of the region since the last census fall between the ages of 15 and 39 (50 per cent of outward migrating residents), whereas this age cohort accounts for just 31 per cent of non-migrating Whyalla residents (Figure 4-4).

Figure 4-4 Age profile of out-bound Whyalla residents, 2011



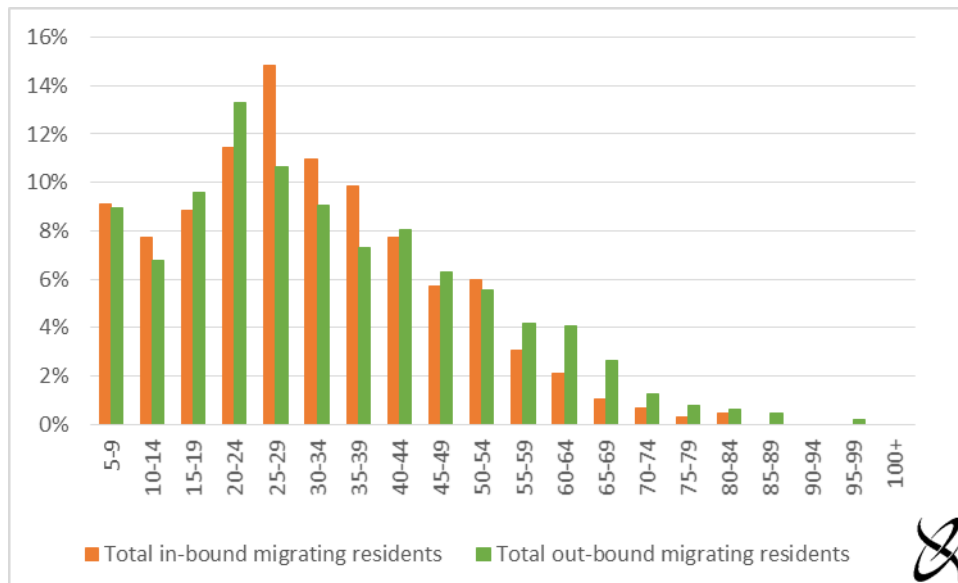
Source: ABS (2012a)

Two previous charts compared the age profile of non-migrating Whyalla residents with in-bound migrating residents (Figure 4-2) and out-bound migrating residents (Figure 4-4). Figure 4-5 compares the age profile of the in-bound and out-bound migrating residents. As noted earlier, between 2006 and 2011 the number of in-migrating residents (2,786 persons) was only marginally above the number of out-migrating residents (2,687 persons). The age profile of the two groups was also similar, but with some notable differences:

- The age group of 15-24 years comprised a smaller proportion of in-bound migrating residents (20 per cent) than of out-bound migrating residents (23 per cent).
- By contrast, there was a greater proportion of in-bound migrating residents (36 per cent) in the 25-39 years cohort than the proportion of out-bound migrating residents in that age cohort (27 per cent).
- Interestingly, the 55+ cohort comprised a significantly smaller proportion of in-bound migrating residents (8 per cent) than of out-bound migrating residents (14 per cent).

Clearly, a higher proportion of people over 55 are leaving Whyalla than moving to the city. It is not immediately clear why this is the case but initiatives to find out why people in this age group are leaving and what needs to be done to convince them to stay are likely to be important for future planning.

Figure 4-5 Age profile of in-bound and out-bound Whyalla residents, 2011



Source: ABS (2012a)

5. AGED AND DISABLED CARE

Key Points

- *The proportion of the population with a profound or severe disability in Whyalla in 2011 was 6.0%, higher than SA (5.5%), Mount Gambier (5.7%), Port Augusta (5.3%) and Port Lincoln (5.3%).*
 - *The rate of growth in the number of people with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.*
 - *Similarly, the rate of growth in the number of people requiring aged and community care places will be significantly higher than the total population growth rate under all three growth scenarios.*
 - *The proportion of the population providing unpaid assistance in Whyalla is also higher than in other regional cities. This is likely to be linked to the fact that Whyalla has a slightly higher proportion of the population with a profound or severe disability.*
-

5.1 People with a Profound or Severe Disability

As noted earlier, people with a profound or severe disability are defined as those people needing help or assistance in one or more of three core activity areas of self-care, mobility and communication, because of a disability, long term health condition (lasting six months or more) or old age. The number of people with need for assistance with core activities in Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA as a whole are detailed by age in Table 5-1.

Of the total population, the proportion with need for assistance in Whyalla was 6.0 per cent in 2011, compared with 5.5 per cent for SA, 5.7 per cent in Mount Gambier and 5.3 per cent in both Port Augusta and Port Lincoln. Although these differences do not seem large, they do mean that for each 1,000 residents there are, in Whyalla, an additional seven residents with a profound or severe disability when compared with Port Augusta or Port Lincoln (60 versus 53).

The projected change in the number of people with a profound or severe disability living in Whyalla is provided in Table 5-2. The projection period is for the years 2011 to 2046.

The general point made in Section 3.2.2 is worth restating here, i.e. that the rate of growth in the number of people with a profound or severe disability will be significantly higher than the total population growth rate under all three growth scenarios.

Table 5-1 People with a profound or severe disability, 2011

	Whyalla	Mount Gambier	Port Augusta	Port Lincoln	South Australia
0-4 years	21	31	12	11	1,231
5-9 years	53	55	31	27	2,992
10-14 years	65	62	24	23	2,990
15-19 years	56	66	21	22	2,196
20-24 years	36	44	13	18	1,783
25-29 years	27	31	19	13	1,679
30-34 years	37	41	10	17	1,762
35-39 years	40	57	27	17	2,266
40-44 years	61	59	37	33	3,213
45-49 years	65	65	41	20	3,859
50-54 years	78	72	53	43	4,532
55-59 years	88	69	50	52	4,933
60-64 years	100	110	67	46	6,363
65-69 years	102	94	67	45	5,335
70-74 years	98	65	52	52	5,584
75-79 years	115	108	63	66	7,355
80-84 years	121	159	82	87	10,431
85-89 years	93	135	40	89	10,738
90-94 years	44	78	28	58	5,870
95-99 years	20	24	7	12	1,763
100 years and over	0	3	3	0	242
Total	1,320	1,428	747	751	87,117
Proportion of total population	6.0%	5.7%	5.3%	5.3%	5.5%

Source: ABS (2012a)

- *Baseline scenario*: population in 2046 is projected to be 16.3 per cent above 2011 level, whereas the number of people with a profound or severe disability is projected to be 32.6 per cent higher.
- *Medium growth scenario*: population is projected to grow by 35.0 per cent, whereas the number of people with a disability is projected to be 46.1 per cent higher.
- *High growth scenario*: total population in 2046 is projected to be 53.0 per cent above the 2011 level, whereas the number of people with a profound or severe disability is projected to be 60.1 per cent higher.

Another aspect of the scenarios projections that has implications for the Masterplan are the differences between the three broad age cohorts:

- Under all three scenarios the projected number of people with a profound or severe disability in the 65+ cohort is quite similar for 2046: in the range of 941 for the baseline (59 per cent increase) to 1,031 persons for the high growth scenario (74 per cent increase).
- For the working age cohort (15-64 years) the projection range is far greater, from 647 under the baseline scenario (10 per cent increase) to 876 under the high growth scenario (49 per cent increase).

- Similarly for the 0-14 cohort, the projection range is relatively quite large, from 162 under the baseline scenario (16 per cent increase) to 206 under the high growth scenario (48 per cent increase).

Table 5-2 People with a profound or severe disability, projections for Whyalla, 2011 - 2046

Age	2011		2016		2021		2026		2031		2036		2041		2046	
	Persons with a disability		Persons with a disability	Change from 2011	Persons with a disability	Change from 2011	Persons with a disability	Change from 2011	Persons with a disability	Change from 2011	Persons with a disability	Change from 2011	Persons with a disability	Change from 2011	Persons with a disability	Change from 2011
	no.		no.	%	no.	%	no.	%	no.	%	no.	%	no.	%	no.	%
Whyalla Base																
0-14	139		144	3.9%	148	6.4%	151	8.3%	153	10.2%	156	12.3%	159	14.4%	162	16.5%
15-64	588		605	2.8%	617	4.9%	622	5.9%	626	6.4%	630	7.2%	638	8.5%	647	10.1%
65+	593		645	8.8%	720	21.5%	792	33.5%	852	43.6%	897	51.2%	925	56.0%	941	58.6%
Total	1,320		1,394	5.6%	1,485	12.5%	1,565	18.5%	1,630	23.5%	1,683	27.5%	1,722	30.4%	1,750	32.6%
Whyalla Mid																
0-14	139		147	5.6%	153	10.1%	159	14.0%	164	18.3%	171	22.9%	177	27.7%	184	32.6%
15-64	588		615	4.7%	640	8.9%	661	12.4%	682	16.0%	707	20.3%	736	25.2%	767	30.4%
65+	593		645	8.8%	721	21.6%	793	33.8%	856	44.3%	906	52.8%	945	59.3%	977	64.7%
Total	1,320		1,407	6.6%	1,514	14.7%	1,613	22.2%	1,702	29.0%	1,784	35.2%	1,858	40.8%	1,928	46.1%
Whyalla High																
0-14	139		149	7.2%	158	13.6%	166	19.7%	175	26.2%	185	33.2%	195	40.6%	206	48.2%
15-64	588		626	6.5%	662	12.6%	695	18.3%	732	24.6%	776	32.0%	825	40.3%	876	48.9%
65+	593		651	9.8%	733	23.7%	813	37.0%	881	48.6%	938	58.2%	985	66.1%	1,031	73.9%
Total	1,320		1,426	8.0%	1,553	17.7%	1,674	26.8%	1,789	35.5%	1,899	43.9%	2,005	51.9%	2,113	60.1%

Source: ABS (2012a) and EconSearch analysis

5.2 Residential Aged and Community Care Places

Data on the number of residential aged and community care places was compiled by Public Health Information Department Unit (PHIDU) using data from the Department of Health and Ageing, June 2010 and Estimated Resident Population, 2011 and published in the Social Health Atlas of South Australian Local Government Areas, 2014 (PHIDU 2014). Table 5-3 provides these data for Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA as a whole.

The total number of residential aged and community care places in Whyalla was 181 in 2010. The rate per 1,000 population aged 70 and over for all residential aged and community care places was 81, significantly lower than for SA as a whole (116). In comparison, the rate was 113 in Mount Gambier, 134 in Port Lincoln and 164 in Port Augusta (Table 5-3). There are a number of points to note:

- The rate per 1,000 population aged 70 and over of high-level residential aged care places in Whyalla (22) is similar to Mt Gambier (24) but less than half the rate for South Australia as a whole (50) and well below that in Port Augusta (53) and Port Lincoln (42).
- The rate of low-level residential aged care places in Whyalla (42) is similar to other regional cities (range 43 to 54) and the rate for South Australia as a whole (43).
- The rate per 1,000 population of community care places in Whyalla (18) is slightly below the rate for South Australia as a whole (23) and well below that in other regional cities (range 46 to 66).

On the basis of the population projections for 2016 to 2046 (Section 3), the required number of aged and community care places have been estimated at the current rates of provision for both Whyalla and South Australia (Table 5-4).

The general point made in Section 3.2.1 is worth restating here, i.e. that the rate of growth in the number of people in requiring aged and community care places will be significantly higher than the total population growth rate under all three growth scenarios.

- *Baseline scenario*: population in 2046 is projected to be 16 per cent above 2011 level, whereas the number of people requiring aged and community care places is projected to be 58 per cent higher (at the current Whyalla rate of provision).
- *Medium growth scenario*: population is projected to grow by 35 per cent, whereas the number of people requiring aged and community care places is projected to be 64 per cent higher (at the current Whyalla rate of provision).
- *High growth scenario*: total population in 2046 is projected to be 53.0 per cent above the 2011 level, whereas the number of people requiring aged and community care places is projected to be 73 per cent higher (at the current Whyalla rate of provision).

Table 5-3 Number of aged and community care places, June 2011

	Number of Places	Population aged 70 years and over	Rate per 1,000 population aged 70 and over
Whyalla			
Residential aged care - high-level care places ^a	48	2,224	22
Residential aged care - low-level care places ^b	93	2,224	42
Total residential aged care places	141	2,224	63
Community care places ^c	40	2,224	18
Mount Gambier			
Residential aged care - high-level care places ^a	67	2,843	24
Residential aged care - low-level care places ^b	123	2,843	43
Total residential aged care places	190	2,843	67
Community care places ^c	130	2,843	46
Port Augusta			
Residential aged care - high-level care places ^a	69	1,299	53
Residential aged care - low-level care places ^b	70	1,299	54
Total residential aged care places	139	1,299	107
Community care places ^c	86	1,299	66
Port Lincoln			
Residential aged care - high-level care places ^a	68	1,612	42
Residential aged care - low-level care places ^b	74	1,612	46
Total residential aged care places	142	1,612	88
Community care places ^c	74	1,612	46
South Australia			
Residential aged care - high-level care places ^a	9,187	184,153	50
Residential aged care - low-level care places ^b	7,978	184,153	43
Total residential aged care places	17,165	184,153	93
Community care places ^c	4,265	184,153	23

^a "High-level care is nursing home care provided when health deteriorates to such a degree that a person becomes very frail or ill and can no longer be cared for adequately in their present accommodation. It provides 24-hour nursing and personal care for the very frail or ill, with support for the activities of daily living - dining, showering, continence management, rehabilitation, medications etc. Allocation is based on availability and the assessment of an individual's needs, as compared with other residents" (PHIDU 2014).

^b "Low-level care is hostel accommodation, offering a greater quality of life for people who benefit significantly from supportive services, companionship and activities, and for whom living without assistance is difficult. Independence is encouraged in maintaining daily living skills. Services provided may include showering, dressing, bed making, room cleaning, supervision of medication, provision of all meals and laundry" (PHIDU 2014).

^c "Community Aged Care Packages offer low dependency level care for older people who are frail and/or disabled, in their own home, whether they live with their spouse, family or on their own. Trained staff provide flexible and coordinated support, which may include assistance with personal care (e.g., showering, grooming); household help (e.g., shopping, cleaning); linking with activities and pursuits in the community; and other assistance as negotiated according to individual need" (PHIDU 2014).

Source: PHIDU 2014

Table 5-4 Projected number of required aged and community care places, Whyalla, 2016 - 2046

		2016 Places		2021 Places		2026 Places		2031 Places		2036 Places		2041 Places		2046 Places	
	Current places	At current Whyalla rate	At current SA rate	At current Whyalla rate	At current SA rate	At current Whyalla rate	At current SA rate	At current Whyalla rate	At current SA rate	At current Whyalla rate	At current SA rate	At current Whyalla rate	At current SA rate	At current Whyalla rate	At current SA rate
Whyalla Baseline Scenario															
Population projections for 70+	2,224	2,439		2,716		2,976		3,202		3,366		3,462		3,507	
High-level care places	48	53	122	59	135	64	148	69	160	73	168	75	173	76	175
Low-level care places	93	102	106	114	118	124	129	134	139	141	146	145	150	147	152
Total residential aged care places	141	155	227	172	253	189	277	203	298	213	314	219	323	222	327
Community care packages	40	44	56	49	63	54	69	58	74	61	78	62	80	63	81
Whyalla Mid Growth Scenario															
Population projections for 70+	2,224	2,440		2,718		2,981		3,216		3,399		3,532		3,641	
High-level care places	48	53	122	59	136	64	149	69	160	73	170	76	176	79	182
Low-level care places	93	102	106	114	118	125	129	134	139	142	147	148	153	152	158
Total residential aged care places	141	155	227	172	253	189	278	204	300	215	317	224	329	231	339
Community care packages	40	44	57	49	63	54	69	58	74	61	79	64	82	65	84
Whyalla High Growth Scenario															
Population projections for 70+	2,224	2,459		2,762		3,054		3,313		3,518		3,679		3,838	
High-level care places	48	53	123	60	138	66	152	72	165	76	175	79	184	83	191
Low-level care places	93	103	107	115	120	128	132	139	144	147	152	154	159	160	166
Total residential aged care places	141	156	229	175	257	194	285	210	309	223	328	233	343	243	358
Community care packages	40	44	57	50	64	55	71	60	77	63	81	66	85	69	89

Source: EconSearch analysis

5.3 Aged and Disability Pensions

Data on the number of people receiving aged care and disability pensions was compiled by Public Health Information Department Unit (PHIDU) using Centrelink data (PHIDU 2011). The number of people receiving the aged pension in Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA is detailed in Table 5-5 and the number receiving a disability pension are detailed in Table 5-6 for 2013.

Whyalla has a higher proportion of persons aged 65 years and over receiving an aged pension, 85 per cent in Whyalla compared to 75 per cent for SA. In comparison, the proportion of persons aged 65 years and over receiving an aged pension was 78 per cent in Port Lincoln and Port Augusta and 81 per cent in Mount Gambier. It can be reasonably assumed that those not receiving an aged pension are fully self-funded retirees. In SA as a whole this comprises 25 per cent of the aged pension cohort (22 per cent in Port Lincoln and Port Augusta and 19 per cent in Mount Gambier) while it is just over half that (15 per cent) in Whyalla (Table 5-5).

These data are consistent with the migration data presented in Section 4 which show that there have been more retirement age people leaving Whyalla than moving to Whyalla. It is likely that the lack of retirement and aged care facilities in Whyalla is a factor in this trend, a point that needs consideration in the development of the Masterplan.

Whyalla also has a higher proportion of persons aged 16-64 years receiving a disability pension, 10 per cent for Whyalla compared to 7 per cent for SA as a whole. This highlights a potential need for higher than average servicing which needs to be addressed in the Masterplan. Comparing Whyalla to other regional cities, Table 5-6 shows that the proportion of persons aged 16-64 years receiving a disability pension was 10 per cent in Port Augusta, 9 per cent in Mount Gambier and 8 per cent in Port Lincoln.

Table 5-5 People receiving an aged pension, June 2013 ^a

	Age pensioners	Persons aged 65 years and over	% age pensioners	% self-funded retirees
Whyalla	2,989	3,511	85	15
Mount Gambier	3,407	4,224	81	19
Port Augusta	1,690	2,177	78	22
Port Lincoln	1,905	2,443	78	22
South Australia	209,141	279,600	75	25

^a People eligible for an Age Pension comprise persons aged 65 years and over: the Department of Veterans' Affairs (DVA) provides a Service Pension (Age) to eligible persons at age 60 years.

Source: PHIDU 2014 and EconSearch analysis

Table 5-6 People receiving disability pension, June 2013

	Disability support pensioners	Persons aged 16 to 64 years	% disability support pensioners
Whyalla	1,435	14,384	10
Mount Gambier	1,408	16,250	9
Port Augusta	909	9,349	10
Port Lincoln	723	9,159	8
South Australia	75,290	1,075,236	7

Source: PHIDU 2014

5.4 Employment

Detailed in Table 5-7 is the total number of jobs and full-time equivalent (fte) jobs in the health care and social assistance sector in Whyalla from the 2011 census. This shows that around 20 per cent of the total jobs in the health care and social assistance sector are classified in the aged care residential services. Interestingly there were no jobs specified in the other residential care services, where care for disabled people would fall under. The age profile of the 212 aged care residential service jobs is detailed below:

- 15-29 years – 23 per cent
- 30-39 years – 10 per cent
- 40-49 years – 24 per cent
- 50-59 years – 38 per cent
- 60+ years – 6 per cent

Table 5-7 Employment in health care and social assistance, 2011^a

	Total (no.jobs)	fte
Hospitals (except Psychiatric Hospitals)	372	292
Psychiatric Hospitals	0	0
General Practice Medical Services	53	47
Specialist Medical Services	10	11
Pathology and Diagnostic Imaging Services	35	35
Dental Services	36	29
Optometry and Optical Dispensing	0	0
Physiotherapy Services	0	0
Chiropractic and Osteopathic Services	20	4
Other Allied Health Services	19	22
Ambulance Services	31	30
Other Health Care Services, nec	37	32
Aged Care Residential Services	212	136
Other Residential Care Services	0	0
Child Care Services	83	61
Other Social Assistance Services	165	128

^a Employment by place of work (i.e. where the jobs are located).

Source: ABS (2012a)

5.5 Unpaid Assistance to a Person with a Disability

The number of people providing unpaid assistance to a person with a disability in Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA as a whole in 2011 are detailed in Table 5-8. Of the total population, the proportion of people providing unpaid assistance to a person with a disability was 9.0 per cent in Whyalla in 2011, compared with 9.7 per cent for SA, 8.8 per cent in Port Lincoln, 8.7 per cent in Mount Gambier and 8.2 per cent in Port Augusta.

Compared with other regional cities, Whyalla has a slightly higher proportion of the population with a profound or severe disability. This is likely to generate greater need for the Whyalla community and so it is not surprising that the proportion of the population providing unpaid assistance is also higher than in other regional cities.

Table 5-8 Unpaid assistance by people aged 15 and over to a person with a disability, 2011

	Whyalla	Mount Gambier	Port Augusta	Port Lincoln	South Australia
No unpaid assistance provided	14,024	16,503	8,228	9,113	1,059,321
Provided unpaid assistance	1,997	2,205	1,154	1,233	154,651
Not stated	1,636	1,292	1,762	866	95,662
Not applicable	4,431	5,248	2,844	2,874	286,935
Total population	22,088	25,248	13,988	14,086	1,596,569
Proportion of the population provided unpaid assistance	9.0%	8.7%	8.2%	8.8%	9.7%

Source: ABS (2012a)

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APPENDIX 1 UNEMPLOYMENT AND LABOUR FORCE

This section reports on the major labour force characteristics relevant to Whyalla and SA. The major labour force statistics include:

- labour force⁴
- number of unemployed persons
- unemployment rate⁵
- participation rate⁶
- indigenous labour force status.

Labour Force

The total number of persons in the labour force is illustrated for Whyalla and SA in Appendix Figure 1-1 for the period 2008 to 2014 (June quarter). The total number of persons in the labour force in Whyalla decreased slightly over the years 2008 to 2014, falling from 10,852 in March 2008 to 10,170 in June 2014. Despite some fluctuations, the labour force in SA increased over the same period, from 803,013 in March 2008 to 857,644 in June 2014, an increase of 7 per cent. In comparison, the labour force, over the same period, increased by 7 per cent in Mount Gambier but decreased by 5 per cent in Port Augusta and by 6 per cent in Port Lincoln.

Unemployment

The number of unemployed persons is illustrated for Whyalla and SA in Appendix Figure 1-2 for the period 2008 to 2014 (June quarter). The number of unemployed persons in Whyalla fluctuated over the period 2008 to 2014. Overall, the total number of unemployed persons in the region increased from 612 in March 2008 to 1,023 in June 2014 (approximately 67 per cent increase). The number of unemployed persons in SA also increased, by around 20,000 persons (approximately 50 per cent), but also fluctuated over the years (Appendix Figure 1-2). In

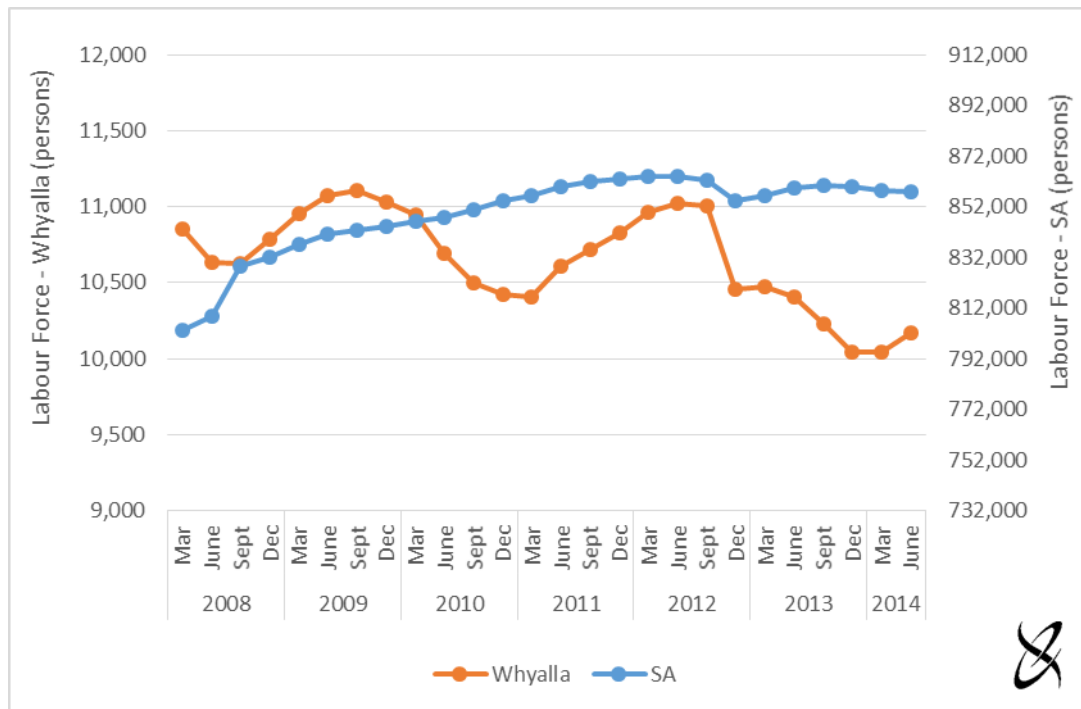
⁴ The labour force is defined as the total number of employed and unemployed persons.

⁵ The unemployment rate is defined as the number of unemployed persons expressed as a percentage of the total labour force.

⁶ The participation rate is a measure of the total labour force as a proportion of the civilian population (persons aged 15 and over) (ABS 2007).

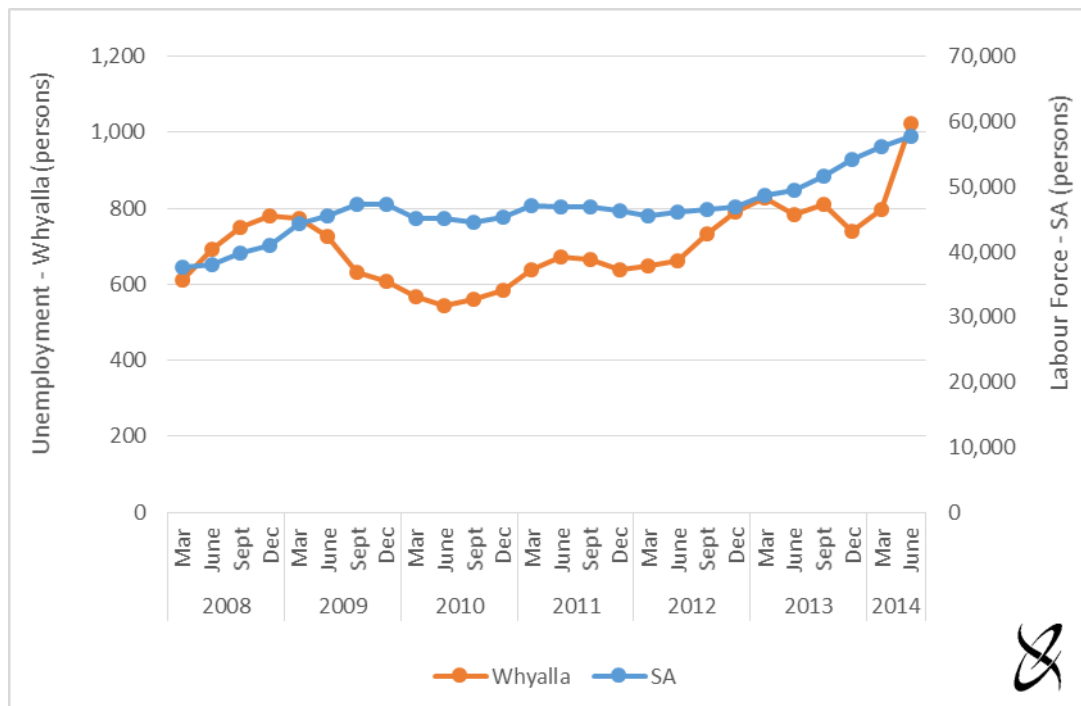
comparison, the number of unemployed persons, over the same period, increased by 69 per cent in Port Lincoln, by 49 per cent in Port Augusta and by 36 per cent in Mount Gambier.

Appendix Figure 1-1 Labour force in Whyalla and SA, 2008 to 2014 (June quarter)



Source: DEEWR (2014)

Appendix Figure 1-2 Unemployed persons in Whyalla and SA, 2008 to 2014 (June quarter)



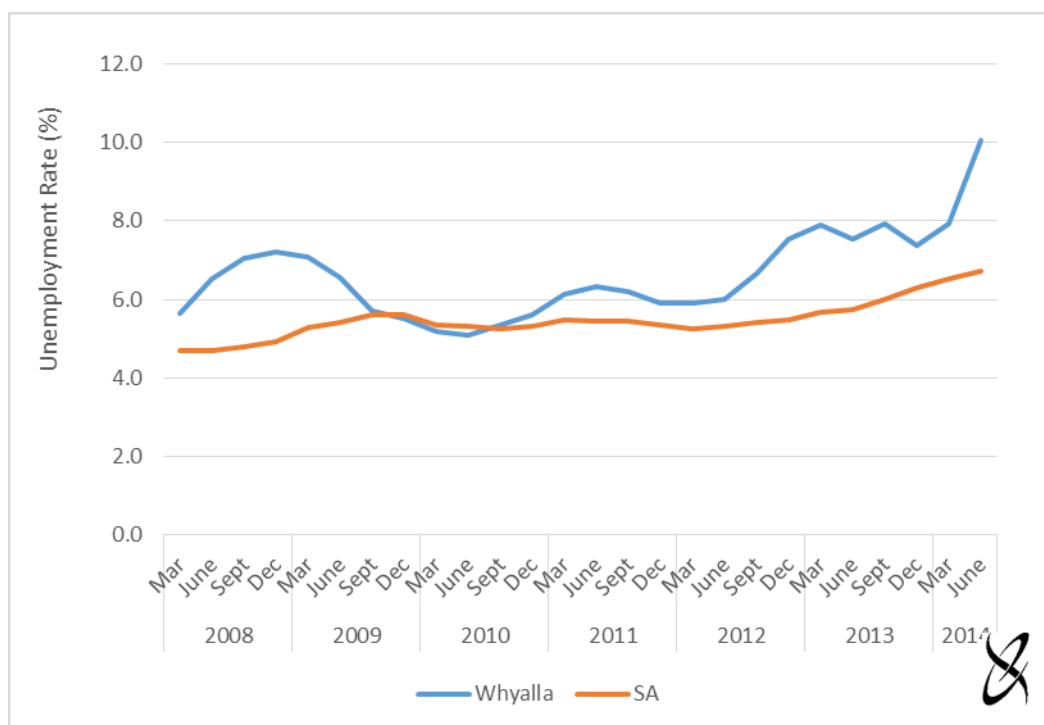
Source: DEEWR (2014)

Unemployment Rate

The unemployment rates are illustrated for Whyalla and SA in Appendix Figure 1-3 for the period 2008 to 2014 (June quarter). The unemployment rate in Whyalla fluctuated over the period 2008 to 2014 and was estimated to be 10.1 per cent in June 2014 (Appendix Figure 1-3). The unemployment rate in Whyalla was, on average, higher than the rate for SA (6.7 per cent in June 2014) over the same 7-year period.

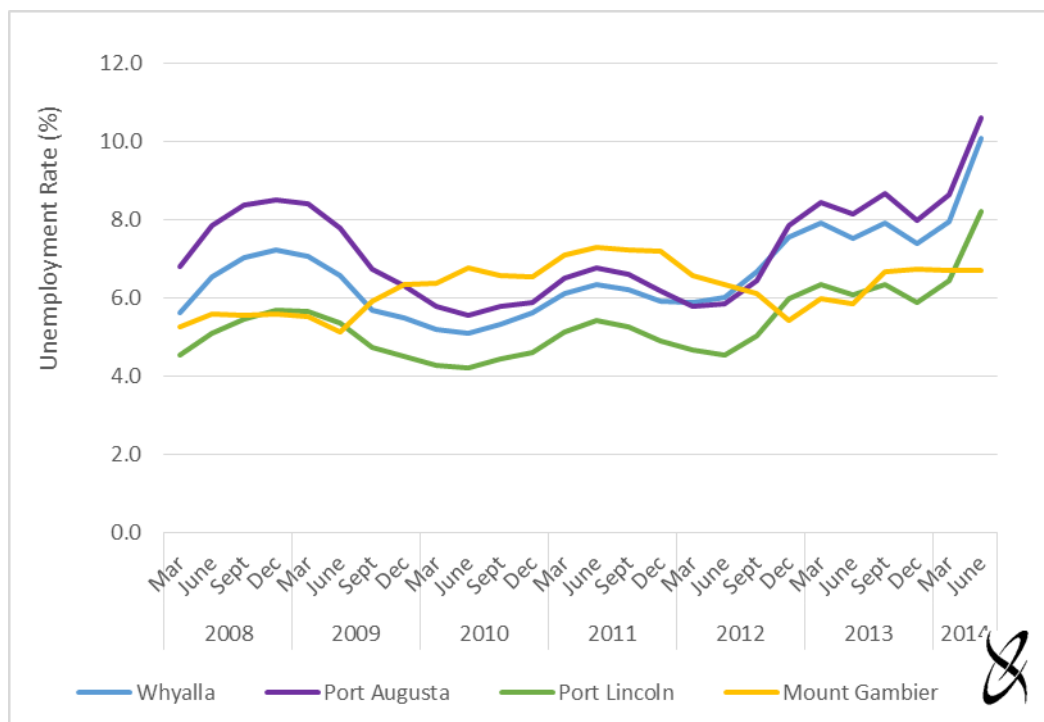
Whyalla's unemployment rate of 10.1 per cent in June 2014 was similar to that in Port Augusta (10.6 per cent) but well above that in Port Lincoln (8.2 per cent) and Mount Gambier (6.7 per cent). Interestingly, the quarterly fluctuations in the unemployment rate of Whyalla, Port Lincoln and Port Augusta are highly correlated, suggesting similar drivers in the respective labour markets but clearly different from those at play in Mount Gambier (Appendix Figure 1-4).

Appendix Figure 1-3 Unemployment rate in Whyalla and SA, 2007 (June Quarter) to 2013



Source: DEEWR (2014) and EconSearch analysis

Appendix Figure 1-4 Unemployment rate in Whyalla, Port Augusta, Port Lincoln and Mount Gambier, 2008 to 2014 (June Quarter)



Source: DEEWR (2014) and EconSearch analysis

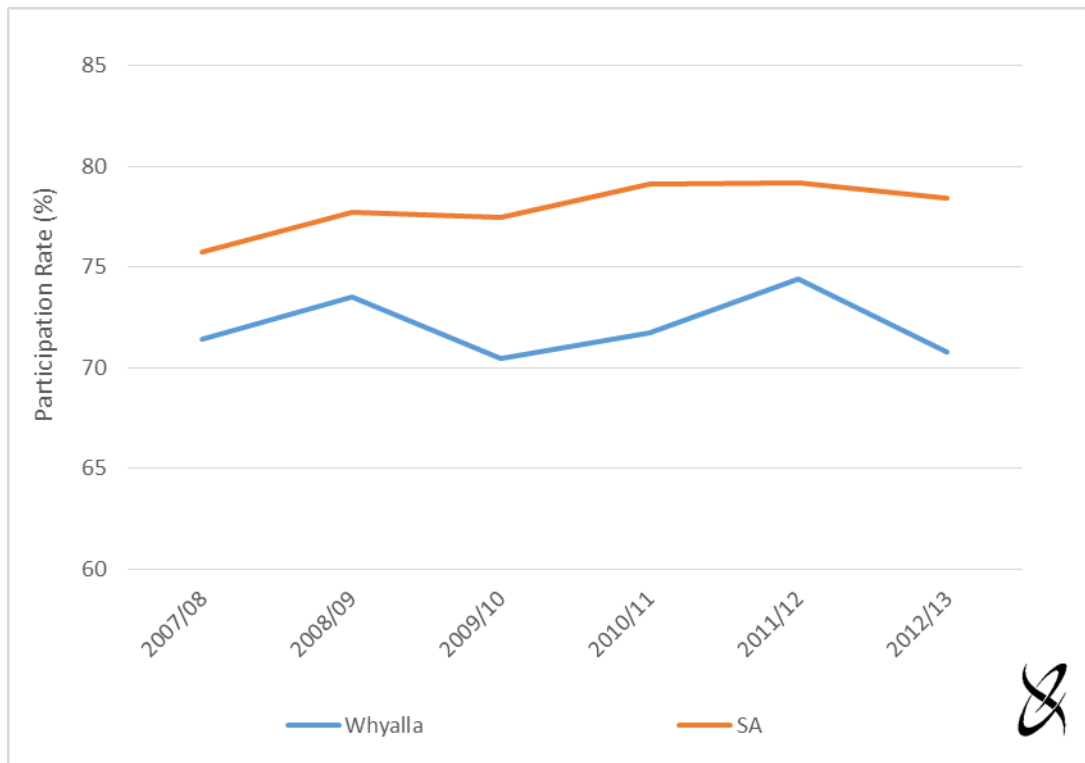
Participation Rate

The participation rate is illustrated for Whyalla and SA in Appendix Figure 1-5 for the period 2007/08 to 2012/13⁷. The labour force participation rate for Whyalla remained steady between 2007/08 and 2012/13. Overall, the participation rate for Whyalla has fallen slightly from 71.4 per cent in 2007/08 to 70.8 per cent in 2012/13 and was below that for the whole of SA. The labour force participation rate in SA followed a slight increasing trend over the same period, ranging between 76 to 78 per cent. In 2012/13 the labour force participation rate was higher for SA as a whole (78 per cent) than for Whyalla (71 per cent) (Appendix Figure 1-5).

As previously mentioned the participation rate in Whyalla in 2012/13 was 71 per cent. In comparison, the participation rate, in the same year, was 82 per cent in Mount Gambier, 75 per cent in Port Lincoln and 69 per cent in Port Augusta (Appendix Figure 1-6).

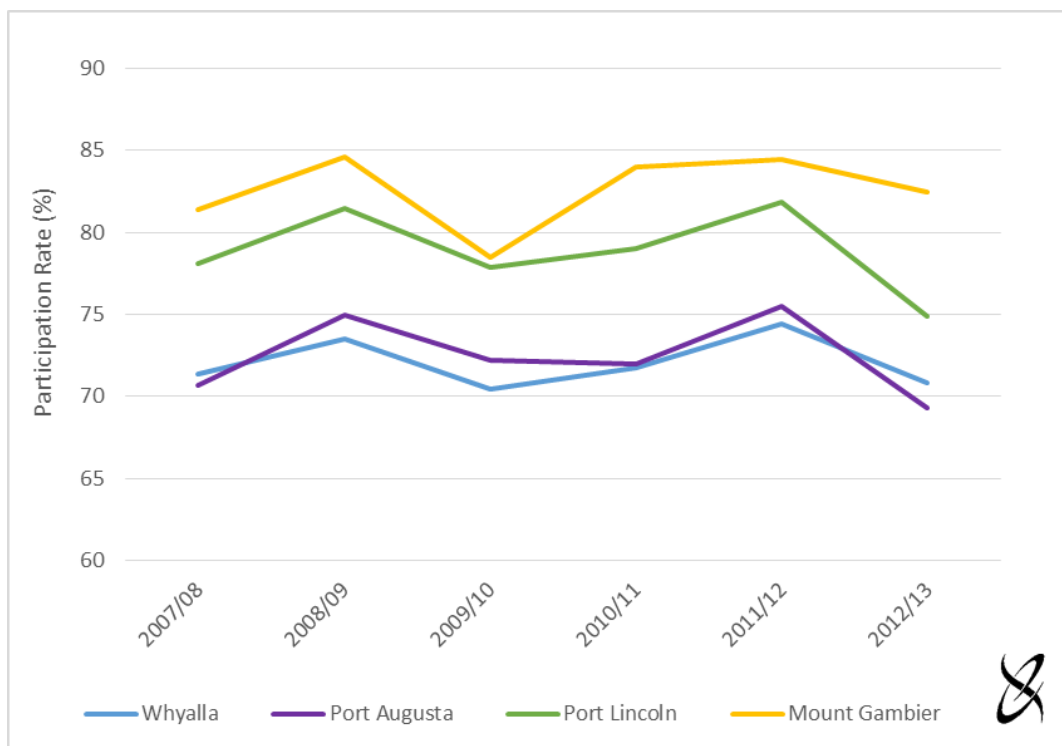
⁷ Because the latest available population by age data (ABS 2014b) is for 2012/13, the participation rate can only be calculated up until 2012/13, despite having employment data up until June 2014.

Appendix Figure 1-5 Participation rate in Whyalla and SA, 2007/08 to 2012/13



Source: DEEWR (2014), ABS (2014b) and EconSearch analysis

Appendix Figure 1-6 Participation rate in Whyalla, Port Augusta, Port Lincoln and Mount Gambier, 2007/08 to 2012/13



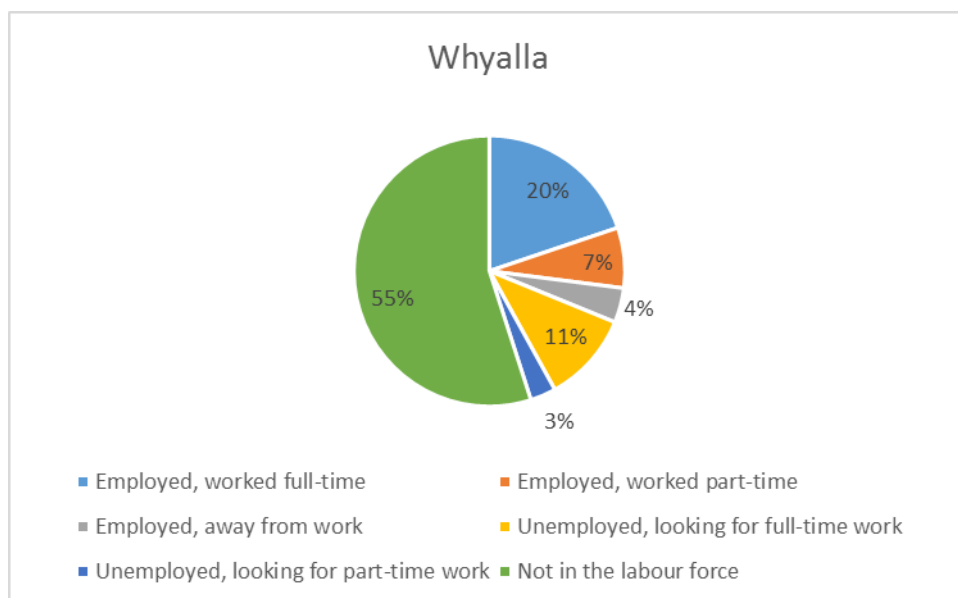
Source: DEEWR (2014), ABS (2014b) and EconSearch analysis

Indigenous Labour Force Status

The labour force status for indigenous residents in Whyalla and SA are illustrated in Appendix Figure 1-7 and 1-8, respectively, for 2011. When compared to the state as a whole Whyalla has:

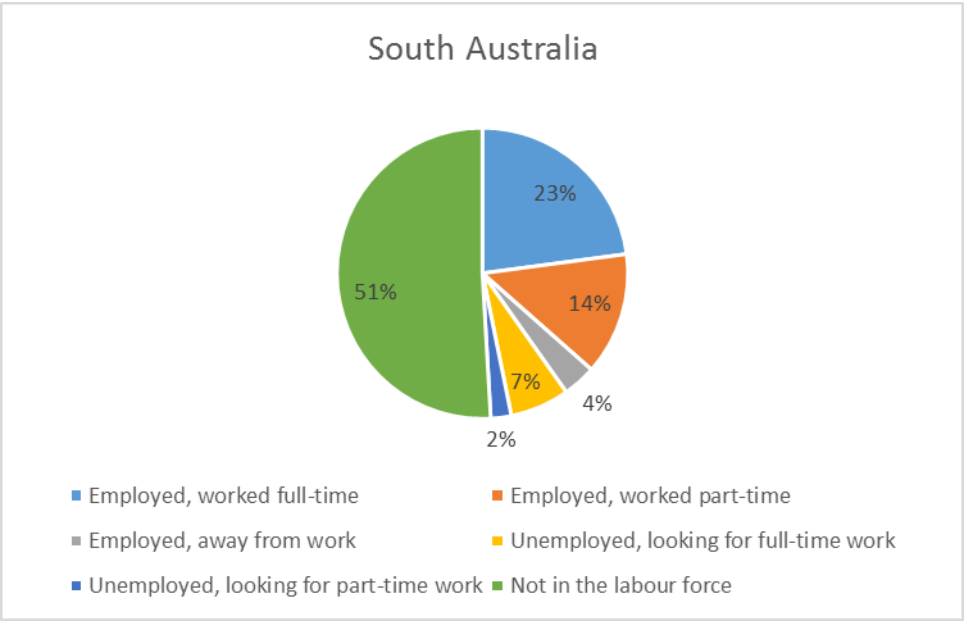
- a lower proportion of the indigenous population that is employed (20 per cent) compared to SA as a whole (23 per cent)
- a higher proportion of the indigenous population that is unemployed and looking for work (14 per cent) compared to SA as a whole (9 per cent)
- a higher proportion of the indigenous population that is not in the labour force (55 per cent) compared to SA as a whole (51 per cent).

Appendix Figure 1-7 Indigenous Labour Force Status, Whyalla, 2011



Source: ABS (2012a)

Appendix Figure 1-8 Indigenous Labour Force Status, SA, 2011



Source: ABS (2012a)

APPENDIX 2 INCOME AND HOUSING

Household Income

This section provides information on average annual income relevant to Whyalla and SA. Data has been also provided for Mount Gambier, Port Augusta and Port Lincoln as a comparison of similar regions.

The proportion of taxable individuals and the mean taxable income are presented in Appendix Table 2-1 for Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA, for the period 2000/01 to 2011/12. The proportion of taxable individuals⁸ (compared to non-taxable individuals⁹) in Whyalla fluctuated over the 12 years, overall decreasing from 81 per cent to 80 per cent. In 2011/12, there were 8,655 taxable and 2,175 non-taxable individuals in Whyalla. SA experienced a larger decrease over the 12 years (from 81 per cent to 77 per cent). This pattern was also similar for Mount Gambier (decreasing from 82 per cent to 77 per cent) and Port Lincoln (decreasing from 82 per cent to 79 per cent). While Port Augusta experienced an increase in the proportion of taxable individuals (increasing from 79 per cent to 81 per cent).

The mean individual taxable incomes in Whyalla and SA for the period 2000/01 to 2011/12 are illustrated in Appendix Figure 2-1 (nominal terms) and 2-3 (real terms). Over the same period, the mean individual taxable incomes in Whyalla, Mount Gambier, Port Augusta and Port Lincoln are illustrated in nominal and real terms in Appendix Figure 2-1 and 2-4, respectively.

Taxable income is the amount remaining after deducting from assessable income all allowable deductions under the *Income Tax Assessment Act 1936*. Taxable income is the amount to which tax rates are applied. Average taxable income in an area is the taxable income per person (calculated by dividing the total taxable income for the region by the total number of taxable individuals).

The mean individual taxable income in Whyalla was higher than the state average, over the period 2000/01 to 2011/12, in both nominal and real terms. In Whyalla the mean individual taxable income increased in nominal terms, from around \$36,100 in 2000/01 to approximately \$64,800 in 2011/12. For SA the mean individual taxable income (in nominal terms) increased steadily over the 12 years from around \$35,200 in 2000/01 to approximately \$58,900 in 2011/12 (Appendix Table 2-1 and Appendix Figure 2-1).

The mean individual taxable income in Whyalla was significantly higher than Mount Gambier (\$53,000 in 2011/12), Port Augusta (\$59,000 in 2011/12) and Port Lincoln (\$56,300 in 2011/12), over the period 2000/01 to 2011/12, in both nominal and real terms.

⁸ Refers to personal taxpayers who submitted a return with net tax payable of more than \$0.

⁹ An individual is considered non-taxable when the net tax payable by the individual is equal to zero.

Appendix Table 2-1 Taxable individuals and taxable income, 2000/01 to 2011/12

	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12
Whyalla												
Proportion of taxable individuals (%) ^a	81%	81%	81%	80%	80%	82%	80%	81%	78%	76%	76%	80%
Mean taxable income - nominal (\$) ^b	36,120	36,995	38,524	40,988	42,935	44,639	49,836	52,421	55,945	57,751	61,720	64,803
Mean taxable income - real (\$) ^c	36,120	35,968	36,073	37,289	38,210	38,291	42,015	42,258	44,418	44,601	45,885	47,600
Mount Gambier												
Proportion of taxable individuals (%) ^a	82%	82%	82%	81%	81%	81%	79%	78%	75%	74%	74%	77%
Mean taxable income - nominal (\$) ^b	33,905	34,733	36,202	38,125	39,332	40,559	43,335	46,387	48,163	50,077	52,458	53,025
Mean taxable income - real (\$) ^c	33,905	33,769	33,899	34,685	35,004	34,792	36,535	37,394	38,240	38,675	38,999	38,949
Port Augusta												
Proportion of taxable individuals (%) ^a	79%	81%	81%	80%	80%	82%	79%	80%	77%	77%	78%	81%
Mean taxable income - nominal (\$) ^b	32,115	33,854	35,932	37,790	39,025	40,240	44,181	46,467	50,110	52,300	55,979	59,017
Mean taxable income - real (\$) ^c	32,115	32,915	33,646	34,380	34,731	34,518	37,248	37,459	39,785	40,391	41,616	43,350
Port Lincoln												
Proportion of taxable individuals (%) ^a	82%	82%	83%	82%	82%	82%	79%	79%	76%	75%	76%	79%
Mean taxable income - nominal (\$) ^b	37,915	37,072	39,940	39,045	41,510	40,537	45,090	47,632	49,718	53,131	54,678	56,290
Mean taxable income - real (\$) ^c	37,915	36,044	37,399	35,522	36,943	34,773	38,014	38,397	39,474	41,033	40,650	41,347
South Australia												
Proportion of taxable individuals (%) ^a	81%	81%	81%	81%	81%	82%	79%	78%	75%	74%	74%	77%
Mean taxable income - nominal (\$) ^b	35,256	36,406	37,857	39,644	41,513	42,778	46,643	48,669	51,932	54,349	57,448	58,933
Mean taxable income - real (\$) ^c	35,256	35,396	35,449	36,067	36,945	36,696	39,323	39,234	41,232	41,974	42,709	43,288

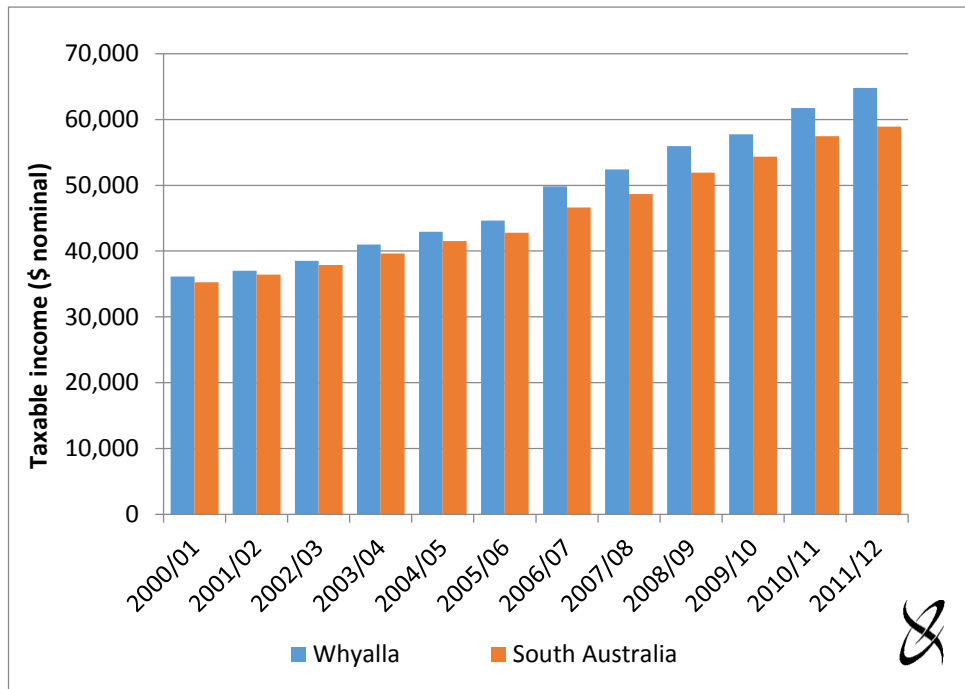
^a Refers to personal taxpayers who submitted a return with net tax payable of more than \$0.

^b Mean (average) taxable income refers only to taxable individuals and is calculated by dividing net taxable income of the region as a whole by the number of taxable individuals.

^c The real mean individual taxable income is the nominal income adjusted by the purchasing power of money. The consumer price index (CPI) has been used to make this adjustment (ABS 2014d). It enables meaningful comparisons of incomes to be made between years.

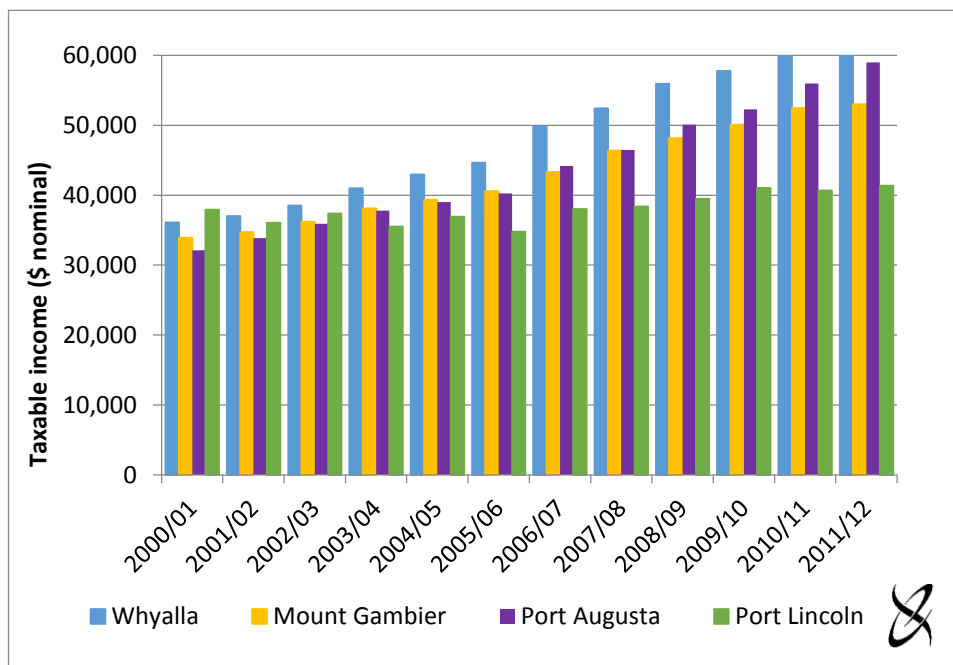
Source: ATO (2014) and ABS (2014d)

Appendix Figure 2-1 Nominal mean individual taxable income in Whyalla and SA, 2000/01 to 2011/12



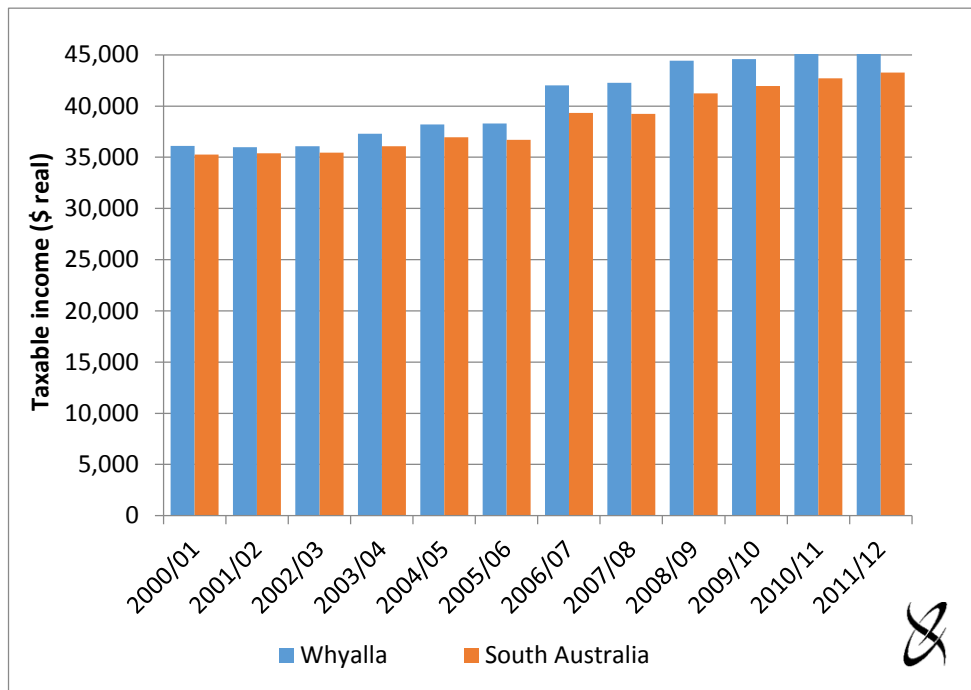
Source: ATO (2014)

Appendix Figure 2-2 Nominal mean individual taxable income in Whyalla, Mount Gambier, Port Augusta and Port Lincoln by LGA, 2000/01 to 2011/12



Source: ATO (2013)

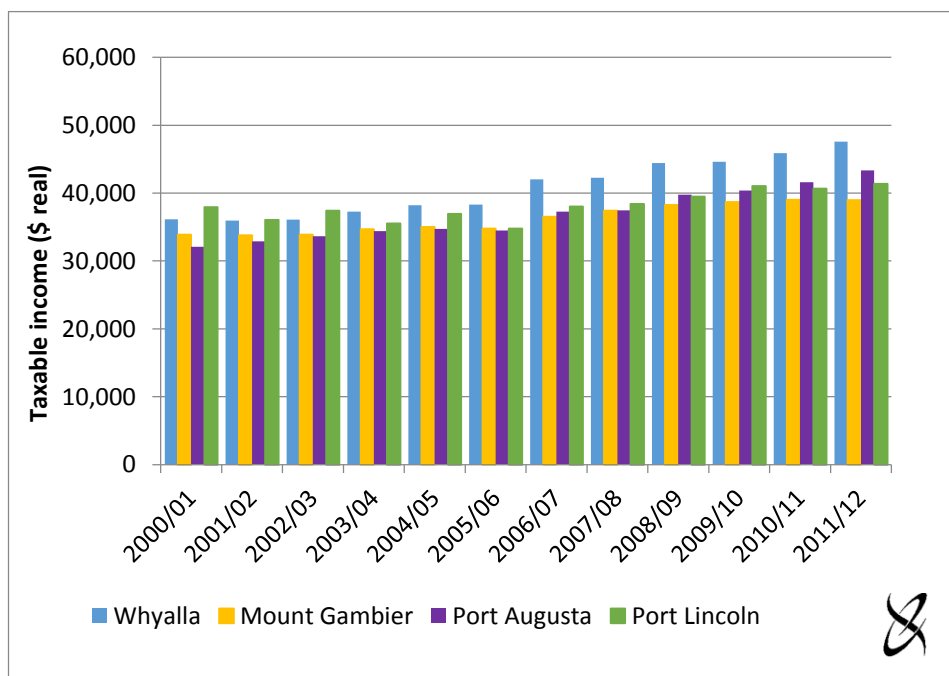
Appendix Figure 2-3 Real mean individual taxable income in Whyalla region and SA, 2000/01 to 2011/12^a



^a In 2000/01 dollars.

Source: ATO (2014) and ABS (2014d)

Appendix Figure 2-4 Real mean individual taxable income in Whyalla, Mount Gambier, Port August and Port Lincoln, 2000/01 to 2011/12^a



^a In 2000/01 dollars.

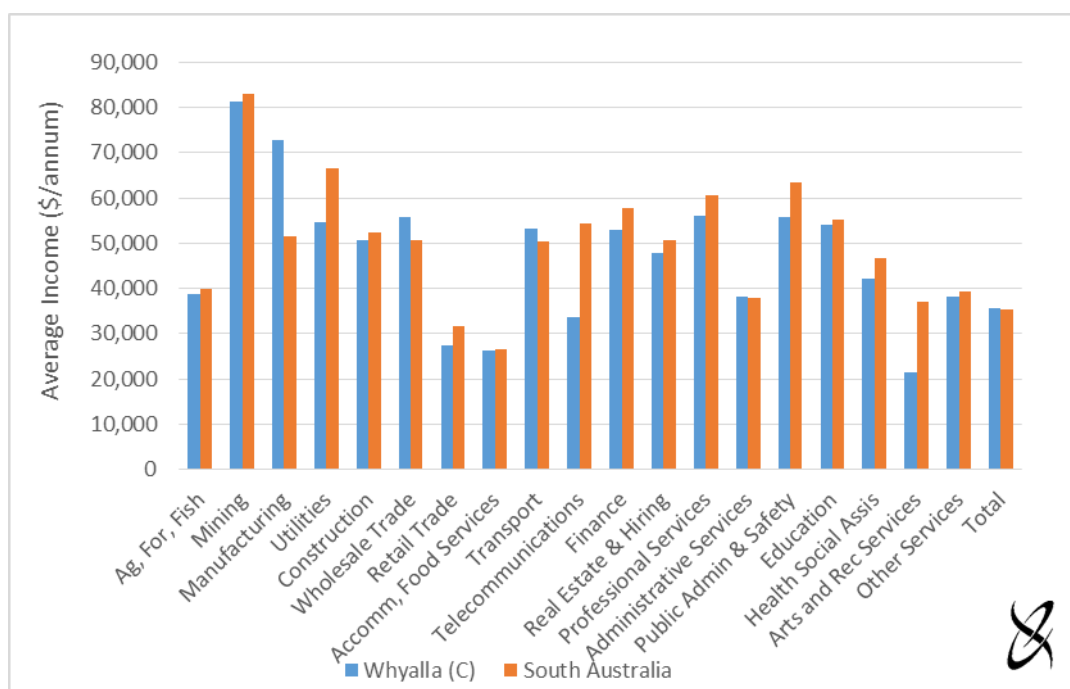
Source: ATO (2014) and ABS (2014d)

Household Income by Industry

The average annual income by industry in Whyalla and SA in 2011 is illustrated in Appendix Figure 2-5. Whilst overall the average annual income for Whyalla and SA do not differ greatly (\$35,657 in Whyalla and \$34,345 in SA) there are industries where significant differences occur. Industries where significant differences occur between Whyalla and SA are:

- Manufacturing, 41 per cent higher
- Arts and recreational services, 42 per cent lower
- Information Media and Telecommunications, 38 per cent lower
- Electricity, Gas, Water and Waste Services, 18 per cent lower
- Public Administration and Safety, 12 per cent lower
- Health Care and Social Assistance, 10 per cent lower
- Wholesale trade, 10 per cent higher.

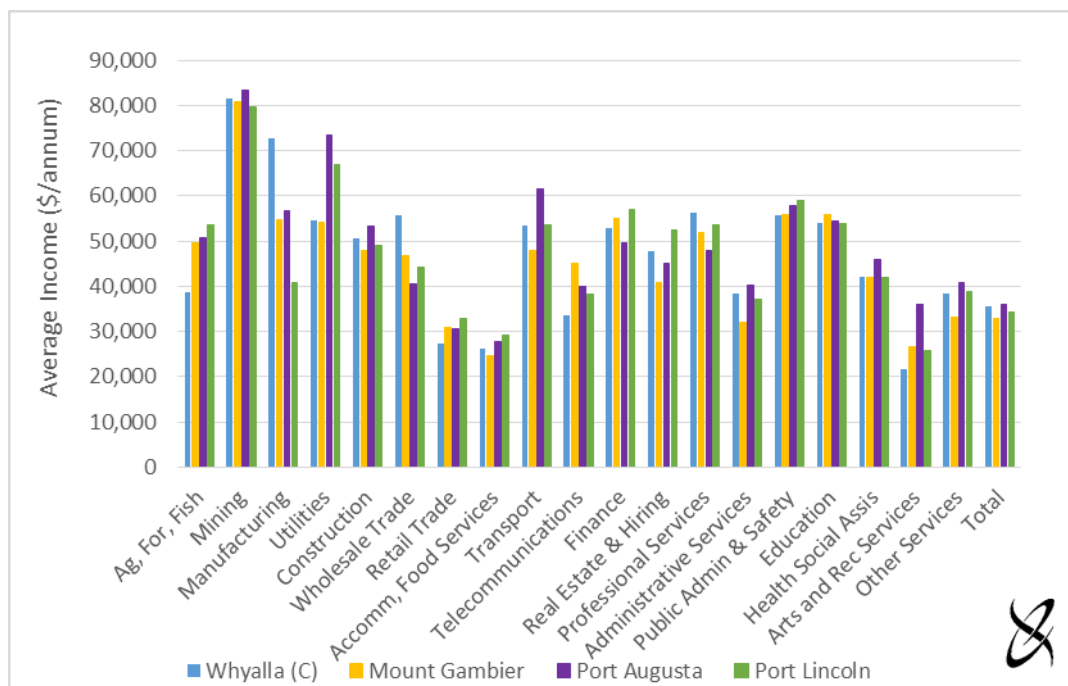
Appendix Figure 2-5 Nominal average individual income by industry in Whyalla and SA, 2011



Source: ABS (2012a)

The average annual income by industry in Whyalla, Mount Gambier, Port Augusta and Port Lincoln in 2011 are illustrated in Appendix Figure 2-6. Industries where significant differences occur between Whyalla and these other regional centres are agriculture, forestry and fishing (lower for Whyalla) and manufacturing (significantly higher for Whyalla) (Appendix Figure 2-6).

Appendix Figure 2-6 Nominal average individual income by industry in Whyalla, Mount Gambier, Port Augusta and Port Lincoln, 2011



Source: ABS (2012a)

Household Tenure Type

The number and proportion of houses owned in Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA are detailed in Appendix Table 2-2 and the number and proportion of houses rented in Appendix Table 2-3. Approximately 58 per cent of the houses in Whyalla are owned compared to 60 per cent in Port Lincoln, 61 per cent in Port Augusta, 62 per cent in Mount Gambier and 68 per cent for SA as a whole.

Appendix Table 2-2 Household tenure type, owned, 2011

	Owned outright		Owned with a mortgage		Owned Total	
	no.	%	no.	%	no.	%
Whyalla	2,154	24	3,037	34	5,191	58
Mount Gambier	2,815	28	3,524	34	6,339	62
Port Augusta	1,527	30	1,555	31	3,082	61
Port Lincoln	1,580	29	1,714	31	3,294	60
SA	202,917	33	218,264	35	421,181	68

Source: ABS (2013b)

Approximately 39 per cent of the houses in Whyalla are rented compared to 36 per cent in Port Lincoln and Port Augusta, 34 per cent in Mount Gambier and 28 per cent for SA as a whole. Interestingly, the proportion of houses that are rented through the state housing authority in Whyalla (21 per cent) is significantly greater than for SA as a whole (6 per cent) and for Mount Gambier (10 per cent), Port Lincoln (11 per cent) and Port Augusta (14 per cent).

cent). While it is the second highest rate of houses rented through the state housing authority in the state behind the Aboriginal community of Anangu Pitjantjatjara (34 per cent), it is well below the rate recorded (25 per cent) at the time of the 2006 Population and Housing Census.

Appendix Table 2-3 Household tenure type, rented, 2011

	Rented through an agent		State or territory housing authority		Privately rented		Housing co-operative, community or church group		Other landlord type or not stated		Rented Total	
	no.	%	no.	%	no.	%	no.	%	no.	%	no.	%
Whyalla	1,007	11	1,890	21	351	4	23	0	218	2	3,489	39
Mount Gambier	1,576	15	1,054	10	523	5	97	1	182	2	3,432	34
Port Augusta	623	12	727	14	241	5	42	1	157	3	1,790	36
Port Lincoln	713	13	597	11	506	9	34	1	139	3	1,989	36
SA	66,977	11	37,888	6	48,339	8	6,737	1	12,096	2	172,037	28

Source: ABS (2013b)

Housing Cost

The median monthly mortgage payments and median weekly rent payments are shown in Appendix Table 2-4 for Whyalla, Mount Gambier, Port Augusta, Port Lincoln and for SA as a whole for 2006 and 2011. In 2011, the median monthly mortgage payment was \$1,300 in Whyalla, higher than in Port Augusta (\$1,200/month) and Mount Gambier (\$1,257/month) but lower than Port Lincoln (\$1,305/month) and SA as a whole (\$1,617/month). The median weekly rent in Whyalla in 2011 was \$150, similar to Port Augusta but lower than Mount Gambier (\$160/week), Port Lincoln (\$180/week) and SA as a whole (\$226/week) (Appendix Table 2-4).

Appendix Table 2-4 Median mortgage and rent payments, 2006 and 2011

	Median mortgage repayment (\$/monthly)		Median rent payment (\$/weekly)	
	2006	2011	2006	2011
Whyalla	737	1,300	104	150
Mount Gambier	900	1,257	128	160
Port Augusta	693	1,200	116	150
Port Lincoln	1,000	1,305	145	180
SA	n.a.	1,617	n.a.	226

Source: ABS (2013b and 2012a)

APPENDIX 3 ECONOMIC STRUCTURE OF THE REGIONAL ECONOMY

Definitions

For the purpose of describing the current level economic activity in Whyalla a regional RISE model was constructed for 2012/13. The detailed profile of the economic structure of the Whyalla regional economy for 2012/13 provided below is consistent with the method and data sources used by the consultants in preparing State and regional economic models for the Department of Premier and Cabinet (EconSearch 2013)¹⁰.

In previous sections of this profile the local government area boundary has been used as the spatial definition of Whyalla. However, because some economic activity, particularly steel manufacturing, occurs outside the LGA boundary the ABS Australian Statistical Geography Standard boundaries for Whyalla and Whyalla-North (both Statistical Area 2) were used for this section of the profile.

Economic activity in the region in 2012/13 is presented in Appendix Table 1-1 to 3-3 in terms of the following indicators:

- employment
- output
- household income
- other value added
- gross regional product (GRP)
- imports
- tourism expenditure
- exports.

¹⁰ The RISE model is the standard tool for used by the South Australian Government for regional economic impact analysis. The first set of South Australian RISE models were commissioned by the Regional Communities Consultative Council in 2004. They were updated in 2007 for the SA Department of Trade and Economic Development, and updated again in 2010 and 2013 for the SA Department of Premier and Cabinet. EconSearch also developed a set of RISE models at the local government area (non-metropolitan) and regional level for the Victorian Department of Primary Industries in 2010. These models were updated in 2013 for the Department of Environment and Primary Industries.

Employment is a measure of the number of working proprietors, managers, directors and other employees, in terms of the number of full-time equivalents and total (i.e. full-time and part-time) jobs. Employment is measured by place of remuneration rather than place of residence.

(Value of) Output is a measure of the gross revenue of goods and services produced by commercial organisations (e.g. farm-gate value of production) and gross expenditure by government agencies. Total output needs to be used with care as it includes elements of double counting (e.g. the value of winery output includes the farm-gate value of grapes) and overstates the real contribution to economic activity.

Household income is a component of GRP and is a measure of wages and salaries paid in cash and in kind, drawings by owner operators and other payments to labour including overtime payments, employer's superannuation contributions and income tax, but excluding payroll tax.

Other value added is another component of GRP and includes gross operating surplus (excluding the drawings of working proprietors) and all taxes, less subsidies.

Gross regional product (GRP) is a measure of the net contribution of an activity to the regional economy¹¹. Gross regional product is measured as value of output less the cost of goods and services (including imports) used in producing the output. In other words, it can be measured as household income plus other value added (gross operating surplus and all taxes, less subsidies). It represents payments to the primary inputs of production (labour, capital and land).

Imports are a measure of the value of goods and services purchased by intermediate sectors and by components of final demand in the region/state of interest from other regions, interstate and overseas.

Tourism expenditure is a measure of the value of sales of goods and services to visitors to the state or region.

Exports (other) are a measure of the value of goods and services sold from the region/state of interest to consumers in other regions, interstate and overseas, net of sales to visitors to the region.

The demographic impact of changes in the level of employment in the region was measured using **population** (i.e. the number of people resident in the region) as an indicator.

A brief summary of the regional economic structure of Whyalla for 2011/12 follows. These data were derived from the regional economic impact model prepared specifically for this

¹¹ Similarly, contribution to gross state product (GSP) is a measure of the net contribution of an activity to the state economy.

project. The economic profile of the regional economy has been prepared in terms of an 18-sector industry classification¹². Economic activity in the region is described in terms of:

- employment
- gross regional product (GRP)
- imports and exports.

Employment by Place of Work

It was estimated that there were almost 8,700 fte jobs (around 8,350 jobs) in the Whyalla region in 2012/13 (Appendix Table 3-1). Estimates of employment are based on ABS 2011 Census of Population and Housing and updated for changes between the August quarter 2011 (time of census) and the four quarter average ABS Labour Force estimates for 2012/13.

A sectoral breakdown of employment, household income and household expenditure for the Whyalla region in 2012/13 is provided in Appendix Table 3-1. The top five contributors to total fte employment in the region in 2012/13 were:

- Manufacturing (25.1 per cent)
- Health and community services (12.6 per cent)
- Education and training (10.0 per cent)
- Mining (9.4 per cent)
- Retail trade (8.5 per cent).

In 2012/13 employment in South Australia was around 705,000 (fte jobs) which means the Whyalla region accounts for approximately 1.2 per cent of the total state employment.

Employment by Place of Usual Residence

Estimates of employment in Section 8.1 are by place of work, i.e. where the jobs are. Estimates of employment in this section are by place of usual residence, i.e. where the employed people live.

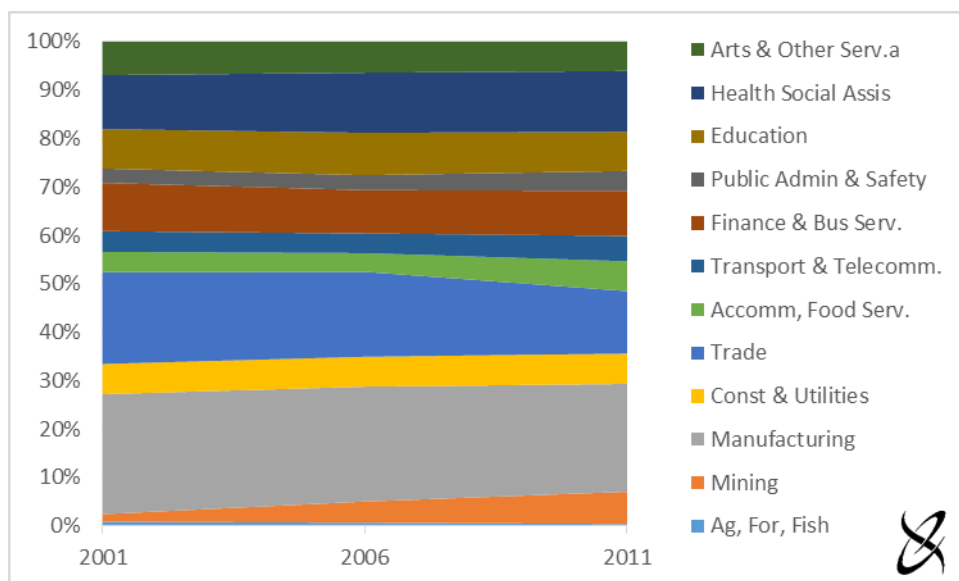
Appendix Figure 3-1 shows employment by industry for Whyalla by place of usual residence. Over the 10 year period (3 census years) the number of employed residents:

- increased in the mining (from 2 per cent in 2001 to 7 per cent of the total employed residents in 2011) sector

¹² The economic profile of the regional economy is available in terms of a 78-sector industry classification if required.

- increased in the health and social assistance (from 11 per cent in 2001 to 13 per cent of the total employed residents in 2011) sector
- decreased in the manufacturing (from 25 per cent in 2001 to 22 per cent of the total employed residents in 2011) sector
- decreased in the trade (from 19 per cent in 2001 to 13 per cent of the total employed residents in 2011) sector.

Appendix Figure 3-1 Employment by place of usual residence by industry, Whyalla, 2001, 2006 and 2011



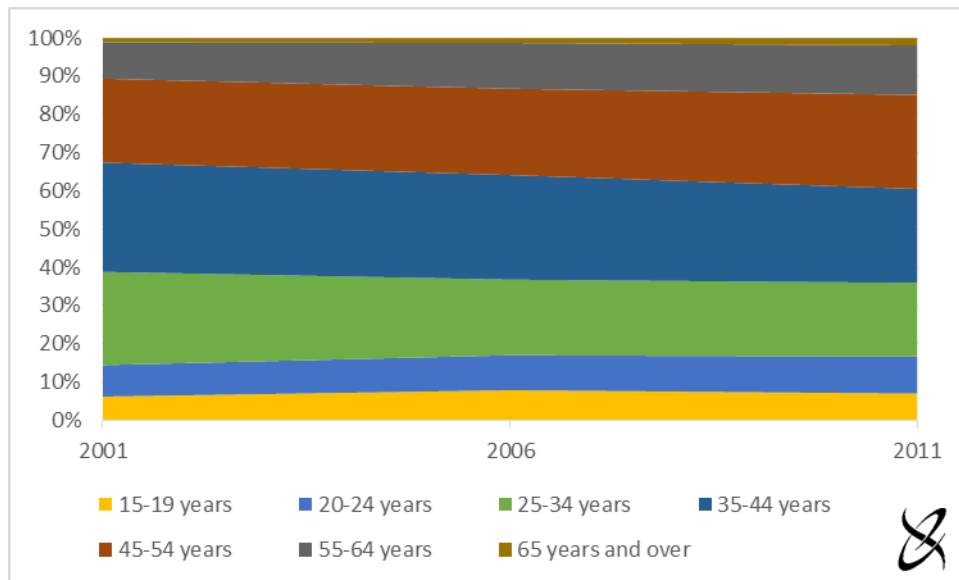
^a Includes 'undefined' and 'not stated'.

Source: ABS (2012a)

Appendix Figure 3-2 shows employment by age for Whyalla by place of usual residence. Over the 10 year period (3 census years) the number of employed residents:

- increased in the 15-19, 20-24, 45-54, 55-64 and 65 and over age categories
- decreased in the 25-35 and 35 to 44 age categories.

Appendix Figure 3-3 Employment by place of usual residence by age, Whyalla, 2001, 2006 and 2011



Source: ABS (2012a)

Gross Regional Product

GRP in the Whyalla region in 2012/13 was estimated to be almost \$1.3 billion (Appendix Table 3-1). The contribution of an individual industry to GRP is calculated as the sum of household income, gross operating surplus and gross mixed income and indirect taxes less subsidies. In 2012/13, the top five contributors to GRP were:

- Mining (20.1 per cent)
- Manufacturing (16.4 per cent)
- Health and community services (8.2 per cent)
- Property and business services (7.0 per cent)
- Education and training (6.4 per cent).

In 2012/13 South Australia's gross state product was \$95.1 billion which means that the Whyalla region accounts for approximately 1.3 per cent of the state economy.

Imports and Exports

A breakdown of the value of imports and exports by industry sector for the Whyalla region in 2012/13 is provided in Appendix Table 3-3¹³. These data were derived from an input-output (I-O) model for the region, developed specifically for this project. Some of the key points to note from these data follow.

- Expenditure by households accounted for approximately 16 per cent of the total value of goods and services imported into the region in 2012/13 from intrastate (i.e. other regions within SA), interstate and overseas.
- Among the intermediate sectors, the top importers in the region in 2012/13 were the manufacturing (24 per cent), mining (7 per cent) and building and construction (6 per cent) and sectors.
- Expenditure by tourists (\$261m) contributed approximately 17 per cent of the total value of exports from the region in 2012/13. The balance (i.e. 'other exports'), almost \$1.3b, represents the value of goods and services purchased by consumers (i.e. households, businesses, governments, etc.) in other regions within SA, interstate and internationally.
- Total regional expenditure by tourists (\$261m) comprised 5 per cent of the SA total expenditure by tourists in 2012/13 (\$5.0b).
- The top contributors to the value of 'other exports' from the region in 2012/13 were the manufacturing (51 per cent) and mining (24 per cent) sectors.
- The trade balance (i.e. exports less imports) in the Whyalla region in 2012/13 was approximately \$141m.

¹³ The economic profile of the regional economy is also available in terms of a 78-sector industry classification if required.

Appendix Table 3-1 Employment, household income and household expenditure, Whyalla region, 2012/13 ^a

SECTOR	Total Employment		FTE Employment		Household Income		Household Expenditure	
	(jobs)	(%)	(fte)	(%)	(\$m)	(%)	(\$m)	(%)
Agriculture, forestry and fishing	11	0.1%	14	0.2%	1	0.2%	0	0.1%
Mining	481	5.8%	820	9.4%	96	12.6%	3	0.6%
Manufacturing	1,750	21.0%	2,186	25.1%	154	20.2%	8	1.6%
Electricity, gas and water	39	0.5%	41	0.5%	5	0.6%	3	0.6%
Building and construction	458	5.5%	559	6.4%	60	7.8%	0	0.0%
Wholesale trade	109	1.3%	151	1.7%	15	1.9%	6	1.3%
Retail trade	977	11.7%	735	8.5%	43	5.7%	41	8.3%
Accommodation, cafes & restaurants	471	5.6%	302	3.5%	20	2.6%	19	3.8%
Transport and storage	395	4.7%	486	5.6%	45	5.9%	7	1.4%
Communication and publishing services	63	0.8%	52	0.6%	4	0.5%	6	1.3%
Finance and insurance	88	1.1%	88	1.0%	15	2.0%	10	2.1%
Ownership of dwellings ^b	0	0.0%	0	0.0%	0	0.0%	71	14.3%
Property and business services	629	7.5%	588	6.8%	76	9.9%	3	0.7%
Public administration and defence	382	4.6%	409	4.7%	37	4.9%	1	0.3%
Education and training	863	10.3%	872	10.0%	72	9.5%	20	4.0%
Health and community services	1,299	15.6%	1,094	12.6%	98	12.8%	22	4.4%
Cultural and recreational services	19	0.2%	10	0.1%	1	0.2%	1	0.1%
Personal and other services	314	3.8%	290	3.3%	20	2.6%	10	2.0%
Total Intermediate	8,350	100.0%	8,698	100.0%	763	100.0%	232	46.7%
PRIMARY INPUTS								
Household Income	-	-	-	-	-	-	0	0.0%
GOS and GMI ^c	-	-	-	-	-	-	0	0.0%
Taxes Less Subsidies	-	-	-	-	-	-	38	7.7%
Imports	-	-	-	-	-	-	227	45.6%
Primary Inputs Total	-	-	-	-	-	-	265	53.3%
GRAND TOTAL	8,350	100.0%	8,698	100.0%	763	100.0%	497	100.0%

^a The economic profile of the regional economy is also available in terms of a 78-sector industry classification if required.

^b The ownership of dwellings sector is a notional sector designed to impute a return to the state's housing stock. Total value of output in this sector is an estimate of rent earned on leased dwellings and imputed rent on the balance of owner-occupied dwellings.

^c Gross operating surplus and gross mixed income.

Source: EconSearch (2013)

Appendix Table 3-2 Components of gross regional product in the Whyalla region by industry, 2012/13 ^a

SECTOR	Household Income		GOS and GMI ^c		Taxes less Subsidies		Gross Regional Product	
	(\$m)	(%)	(\$m)	(%)	(\$m)	(%)	(\$m)	(%)
Agriculture, forestry and fishing	1	0.2%	0	0.1%	0	0.3%	2	0.1%
Mining	96	12.6%	149	38.2%	10	20.5%	255	20.1%
Manufacturing	154	20.2%	53	13.6%	3	5.1%	209	16.4%
Electricity, gas and water	5	0.6%	6	1.5%	1	1.0%	11	0.9%
Building and construction	60	7.8%	5	1.2%	5	9.0%	69	5.4%
Wholesale trade	15	1.9%	8	2.0%	1	2.3%	24	1.9%
Retail trade	43	5.7%	15	3.9%	3	6.7%	62	4.8%
Accommodation, cafes & restaurants	20	2.6%	7	1.9%	4	7.9%	31	2.5%
Transport and storage	45	5.9%	19	4.8%	6	12.1%	70	5.5%
Communication and publishing services	4	0.5%	7	1.7%	0	0.4%	11	0.8%
Finance and insurance	15	2.0%	36	9.3%	2	4.4%	54	4.2%
Ownership of dwellings ^b	0	0.0%	61	15.8%	0	0.0%	61	4.8%
Property and business services	76	9.9%	7	1.9%	6	12.4%	89	7.0%
Public administration and defence	37	4.9%	6	1.5%	2	4.3%	45	3.6%
Education and training	72	9.5%	7	1.7%	2	4.2%	81	6.4%
Health and community services	98	12.8%	3	0.7%	3	6.4%	104	8.2%
Cultural and recreational services	1	0.2%	0	0.0%	0	0.1%	2	0.1%
Personal and other services	20	2.6%	1	0.2%	1	2.9%	22	1.8%
Total Intermediate	763	100.0%	389	100.0%	51	100.0%	-	-
Net Taxes in Final Demand	-	-	-	-	-	-	71	5.6%
Gross Regional Product	-	-	-	-	-	-	1,273	100.0%

^{a-c} See footnotes for Appendix Table 3-1.

Source: EconSearch (2013)

Appendix Table 3-3 Value of imports and exports by industry, Whyalla region, 2012/13 ^a

SECTOR	Tourism		Other Exports		Total Exports		Imports	
	(\$m)	(%)	(\$m)	(%)	(\$m)	(%)	(\$m)	(%)
Agriculture, forestry and fishing	0	0.0%	3	0.2%	3	0.2%	1	0.1%
Mining	0	0.0%	307	24.0%	307	20.0%	99	7.1%
Manufacturing	5	2.0%	645	50.6%	651	42.3%	341	24.4%
Electricity, gas and water	0	0.0%	9	0.7%	9	0.6%	6	0.4%
Building and construction	0	0.0%	30	2.4%	30	2.0%	89	6.4%
Wholesale trade	8	2.9%	4	0.4%	12	0.8%	14	1.0%
Retail trade	41	15.7%	0	0.0%	41	2.7%	27	1.9%
Accommodation, cafes & restaurants	35	13.5%	1	0.1%	37	2.4%	21	1.5%
Transport and storage	7	2.7%	59	4.6%	66	4.3%	46	3.3%
Communication and publishing services	0	0.0%	4	0.3%	4	0.3%	6	0.4%
Finance and insurance	0	0.0%	30	2.3%	30	1.9%	10	0.7%
Ownership of dwellings b	9	3.3%	0	0.0%	9	0.6%	8	0.6%
Property and business services	3	1.2%	25	1.9%	28	1.8%	58	4.2%
Public administration and defence	0	0.0%	14	1.1%	14	0.9%	19	1.4%
Education and training	0	0.0%	32	2.5%	32	2.1%	16	1.1%
Health and community services	0	0.0%	60	4.7%	60	3.9%	29	2.1%
Cultural and recreational services	3	1.0%	0	0.0%	3	0.2%	2	0.1%
Personal and other services	1	0.5%	17	1.4%	19	1.2%	15	1.1%
Total Intermediate	112	42.8%	1,242	97.3%	1,353	88.0%	807	57.7%
PRIMARY INPUTS								
Household Income	0	0.0%	0	0.0%	0	0.0%	-	-
GOS and GMI ^c	0	0.0%	0	0.0%	0	0.0%	-	-
Taxes Less Subsidies	20	7.6%	0	0.0%	20	1.3%	-	-
Imports	130	49.7%	35	2.7%	164	10.7%	-	-
Primary Inputs Total	149	57.2%	35	2.7%	184	12.0%	-	-
FINAL DEMAND								
Household Expenditure	-	-	-	-	-	-	227	16.2%
Government Expenditure	-	-	-	-	-	-	65	4.7%
Gross Fixed Capital	-	-	-	-	-	-	134	9.6%
Change in Inventories	-	-	-	-	-	-	0	0.0%
Tourism	-	-	-	-	-	-	130	9.3%
Other Exports	-	-	-	-	-	-	35	2.5%
Final Demand Total	-	-	-	-	-	-	590	42.3%
GRAND TOTAL	261	100.0%	1,277	100.0%	1,537	100.0%	1,397	100%

^{a-c} See footnotes for Appendix Table 3-1.

Source:

EconSearch

(2013)

APPENDIX 4 MEASURES OF HEALTH AND DEVELOPMENTAL STATUS

In addition to the data relevant to aged and disability care, there are other measures of community health that could, indirectly, affect these data, in particular the incidence of disability in the community. The following sections provide summary data in the areas of children assessed as being developmentally vulnerable, people over 15 years with fair or poor self-assessed health, and people over 18 years with high or very high levels of psychological distress.

Children Developmentally Vulnerable

The number of children in Whyalla assessed as being developmentally vulnerable in one or more domains¹⁴, using the Australian Early Developmental Index (AEDI), was 40 per cent, significantly above the average for SA as a whole (23 per cent) (Appendix Table 4-1). In comparison the number of children assessed as being developmentally vulnerable in one or more domains was 15 per cent in Mount Gambier and 32 per cent in Port Augusta. Data were not available for Port Lincoln.

Appendix Table 4-1 Children developmentally vulnerable in 1 or more domains, 2009

	Children developmentally vulnerable on 1 or more domains	Children assessed in AEDI (first year of school)	% Children developmentally vulnerable on 1 or more domains
Whyalla	84	209	40
Mount Gambier	49	321	15
Port Augusta	40	125	32
Port Lincoln	n.a.	n.a.	n.a.
South Australia	3,534	15,454	23

Source: PHIDU 2014

¹⁴ "In 2009, the Australian Early Development Index (AEDI), which provides a picture of early childhood development outcomes for Australia, was undertaken nationwide. In the 2009 data collection, information was collected on 261,147 Australian children (97.5 per cent of the estimated five-year-old population) in their first year of full-time school between 1 May and 31 July. The initial results from the AEDI provide communities and schools with information about how local children have developed by the time they start school across five areas of early childhood development: physical health and wellbeing, social competence, emotional maturity, language and cognitive skills (schools-based), and communication skills and general knowledge. The AEDI results report on the number of children scoring in the following percentile ranges: 0 to 10th percentile (developmentally vulnerable), 11th to 25th percentile (developmentally at risk), 26th to 50th (on track lower range) and above the 50th percentile (on track higher range)" (PHIDU 2011).

'Fair' or 'Poor' Self-assessed Health Status

The number of persons aged 15 years and over with fair or poor self-assessed health in Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA as a whole between 2011 and 2013 are detailed in Appendix Table 4-2. The proportion of persons in Whyalla with fair or poor self-assessed health was 18 per cent, above the average for SA as a whole (16 per cent). The proportion was lower in Port Augusta (17 per cent) and in Port Lincoln and Mount Gambier (both 16 per cent).

Appendix Table 4-2 Persons aged 15 years and over with fair or poor self-assessed health, 2011-13

	Number	Rate per 100
Whyalla	3,368	18
Mount Gambier	3,405	16
Port Augusta	1,989	17
Port Lincoln	1,871	16
South Australia	213,943	16

Source: PHIDU 2014

High or Very High Levels of Psychological Distress

The number of persons aged 18 years and over with high or very high levels of psychological distress in Whyalla, Mount Gambier, Port Augusta, Port Lincoln and SA as a whole between 2011 and 2013 are detailed in Appendix Table 4-3. The proportion of persons in Whyalla with high or very high levels of psychological distress was 13 per cent, above the average for SA as a whole (11 per cent). In comparison, the proportion was higher in Port Augusta (14 per cent), the same in Port Lincoln (13 per cent) and lower in Mount Gambier (12 per cent).

Appendix Table 4-3 The number of persons aged 18 years and over with high or very high levels of psychological distress, 2011-13

	Number	Rate per 100
Whyalla	2,251	13
Mount Gambier	2,362	12
Port Augusta	1,442	14
Port Lincoln	1,419	13
South Australia	142,889	11

Source: PHIDU 2014

Appendix 2

Workshops

Whyalla Disability and Aged Care Masterplan

Workshop Report

Integral to the consultation process was a series of structured workshops to engage the community, civic and business leaders, and service providers to residents with a disability and older residents.

Eight workshops were held in Whyalla during the five-day period 31 March–4 April, an increase on the original number proposed. These included:

- 1 workshop for the Mayor, elected Members and senior Council staff (Monday 31 March) (7 attendees)
- 3 workshops for community members generally (Tuesday 1 April) (70 attendees)
- 1 workshop specifically for self-funded retirees (Wednesday 2 April) (2 attendees)
- 1 workshop for business owners generally (Wednesday 2 April) (2 attendees)
- 1 workshop specifically for service providers (Thursday 3 April) (22 attendees)
- 1 workshop for the Steering Group and some additional invited thought-leaders (Friday 4 April) (8 attendees)

While workshop content was tailored to each group, they followed a similar outline. Participants were presented with key socio-economic data for Whyalla, with a particular focus on residents with a disability and older residents, and their insights sought. Using a series of headings covering the major issues, participants were asked to identify what was working well and not working well at present, and what were the major threats or risks and opportunities for the future.

Notes were taken at each workshop. Over the course of the workshops, comments made at earlier workshops were tested on subsequent workshop cohorts. A consolidated summary of workshop commentary is attached.

Consolidated Workshop Summary

1. CONTEXT

1.1. Why we need the Masterplan

- Population won't grow naturally given current birth and death rates. To increase population, there need to be drivers to generate inward migration Similarly with population retention—the Masterplan is critical in this regard.

1.2. Important distinctives and trends

- A tolerant, accepting community
- Ageing population
- There has been a strong focus on disabled care in the city in the past, and this needs to be maintained
- Complexity as disabled population becomes older
- Changing technology increasing the sense of disconnection
- Socially isolated slipping through the cracks
- Demand for services is outstripping supply
- Changes in volunteering
- Challenges for the culturally isolated (English not first language)
- An empowered community—people are comfortable in approaching Council and service providers
- Council awareness of disability issues

1.3. Whyalla as a retirement location

- Self-funded retirees are important to the economy
- Low levels of self-funded retirees (12% of retirees cp 24% SA average)—either people in Whyalla are much less well off, or self-funded retirees are leaving on retirement
- Limited accommodation options is a key driver of migration
- High end accommodation for self-funded retirees is lacking
- A range of options for aged care is important

1.4. A vision for the future

- A vibrant city, with a wide range of social activities
- A wonderful natural environment
- A preferred retirement location

- Visionary and effective leadership
- Strong advocacy for those with needs
- Community ownership of the Masterplan

1.5. Gaps in the data

- How do migration rates compare with other regional areas?
- What is the significance of heavy industry?
- What disability types are present in Whyalla?
- Does the high level of services attract disabled residents and their families?
- Are self-funded retirees moving away? Is that why the proportion of pensioners is relatively high?

2. LEADERSHIP

2.1. Advocacy

What is working well

What could work better

Suggestions

- Community involvement in decision-making

- Establish a community structure that can lobby, advocate and plan for older and disabled residents

2.2. Information and communication

What is working well

What could work better

Suggestions

- Distribution of information about services generally
- Seniors Directory—regularly updated
- Advertising in local media
- Welcome to Whyalla package incorporates relevant information for aged and disability access points

- If people are not in the network, they don't know where to start for help
- More face to face consultation
- Often assumed that people have internet and email access, but many older people don't

- One-stop shop—single point of access, offering personal assistance
- Use retail precincts to distribute information
- Assisting people to access the internet
- Greater use of social media
- Enable community groups to distribute information

2.3. Coordination

What is working well

What could work better

Suggestions

- Communication and coordination between services

- A holistic approach to services for those with disabilities

3. PUBLIC SAFETY AND HOUSING

3.1. Public safety

What is working well

What could work better

Suggestions

- Residents feel generally safe and secure
- Low crime rate
- Neighbourhood watch
- Home calls
- Distress service
- Safety improvements in public housing areas—lighting, locks, etc

- Women may feel differently

3.2. Supported accommodation

What is working well

What could work better

Suggestions

- Amaroo Lodge—supported care and transport for the aged and disabled
- Of 19 houses being funded for disabled, 4 are earmarked for Whyalla

- Most houses were not constructed to accommodate the disabled
- Aged and disabled should not be in together
- Limited availability for specialist accommodation, waiting list
- A looming problem for parents unable to care for their disabled any more
- Some younger people with a disability or dementia are in residential aged care

- Construct more supported housing close to services

What is working well

What could work better

Suggestions

- Most people who need disability housing are leaving Whyalla
- Given changes in disability services (NDIS), everything is on hold
- However, NDIS won't fund housing! (at this stage)

3.3. Affordable housing

What is working well

- Large public housing stock (ca. 2,300 units)
- Housing SA have been innovative
- Using auctions for rentals rather than traditional wait-list approach
- Supporting residents with budgeting
- Program of upgrades

What could work better

- Waiting list at least 6 months
- Ageing population on fixed incomes finding it harder to pay costs of owning, running a house—rates, gas, water, electricity

Suggestions

- Construct more affordable housing—Council to supply land as JV partner with a community housing association
- Make Whyalla's housing stock more energy-efficient

3.4. Ageing in place

What is working well

- Housing SA accommodation precinct specially for the aged

What could work better

- Houses themselves are ageing
- Most houses were not constructed to accommodate the elderly
- In home support packages limited

Suggestions

3.5. Retirement accommodation

What is working well

- Village Life—Myall Place Retirement Village for 55+; 50 furnished units for singles, couples

What could work better

- Losing aged people who can't find suitable accommodation

Suggestions

- Build an upmarket retirement village by the beach with parking, gardens, pool, tennis courts, transport links, etc

3.6. Residential aged care

What is working well

- Whyalla Aged Care Inc offers good quality facilities in a convenient location
- Have recently added 10 extra dementia beds

What could work better

- Whyalla does lose some people in care to other locations because there are insufficient places and/or they do not meet high-care criteria – this worsens the condition of some people, especially those with dementia, and is very unpopular with families

Suggestions

- Obtain more bed licences

3.7. Gaps in the data

- Why does Whyalla have far fewer RACF places than would be expected?

4. TRANSPORT

4.1. Roads, signage and parking

What is working well

- Increase passing lanes on the Highway between Port Augusta and Port Lincoln—increasingly dangerous with B-doubles and other heavy vehicles on the road
- Parking generally good

What could work better

- Inconsistent, unclear or missing signage
- Disabled parking needs better policing

Suggestions

- Improve street signage

4.2. Footpaths, public toilets and disabled access

What is working well

- Footpaths have definitely improved
- Very good disabled access, including ramps to shops, businesses and facilities
- Disabled toilet accessible after hours at Tourist Information Centre

What could work better

- Uneven footpaths undermined by trees
- Broken footpaths in need of repair still exist
- Some footpaths not level, tip wheelchairs
- Some footpath ramps too steep

Suggestions

- Improve footpaths to be gopher and wheelchair safe—wide and level
- Have footpaths on both sides of the street
- Correct gutters and spoon drains to allow wheelchair and gopher use

What is working well

What could work better

- Some footpaths difficult with walking stick, wheelchair or walking frame
- Public toilets not always wheelchair accessible
- Heritage buildings do not always have disabled access

Suggestions

- Accelerate the concrete footpath program—paved paths are no good for wheelchairs

4.3. Buses and taxis

What is working well

- Bus service good but limited
- Taxi service good but limited
- Access taxis are available—there are four in Whyalla and demand is growing
- Taxi vouchers available
- DPI services good but limited
- Transport is subsidised

What could work better

- Buses not available on weekends
- Difficult to board buses with walking frame
- No bus service to the beach
- Metro taxi drivers receive \$8-10 on top of flag fall for taking disabled passengers—this payment is not available outside the metro area
- Gophers are too big, and some wheelchairs are not suitable for the bubble car
- Trained drivers not always available
- 80% of fleet compliant for disabled and wheelchair access by 2018—\$15 K cost per vehicle

Suggestions

- Provide bus service to the beach – city's best asset
- Lobby to extend taxi disabled supplement to regional areas, in return for improvements to the service
- Subsidise taxis for Seniors Card holders during quieter times of day (eg 9.00 am–3.00 pm)

4.4. Bus and air travel to Adelaide

What is working well

- Quality bus service to Adelaide
- Direct air link to Adelaide

What could work better

- Airfares are very expensive—some even drive 2.5 hours to Port Lincoln and fly from there

Suggestions

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
	<ul style="list-style-type: none"> • Air travel requires advance notice for special access, not available on every flight • 5-6 hour bus trip is not appropriate for those who are unwell 	

5. HEALTH AND CARE SERVICES

5.1. General comments about services

- There have been critical down turns in the past with closure of the shipyards and curtailment of the steel works but even at these times services were generally maintained to an adequate standard
- Services are of a high standard, but resources are limited, and services can be stretched
- We are generally coordinating and managing services well
- Services should be clustered close to where older and disabled people live
- The trend toward ageing in place means that support has to be available in the home
- Some groups, such as self-funded retirees, are unable to access support funding

5.2. Primary care services

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
<ul style="list-style-type: none"> • GP services • Helpful chemists • Dental services 		

5.3. Hospital services

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
<ul style="list-style-type: none"> • Hospital expansion (\$71 million)—fantastic services • Regional Cancer Centre • Shared health record 	<ul style="list-style-type: none"> • Limited access to specialists (eg urologists) and allied health (eg physiotherapists) • No succession planning for retirement of older visiting specialists • Older consumers find the health system complicated and difficult 	<ul style="list-style-type: none"> • Incentive program to attract young doctors and specialists to Whyalla • Hydrotherapy pool • Burns services • Elective surgery • MRI machine

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
	<ul style="list-style-type: none"> Standard of care is inconsistent 	

5.4. Disability services

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
<ul style="list-style-type: none"> Availability of NDIS (Whyalla approximately \$19.3 million) 	<ul style="list-style-type: none"> Consultation on NDIS very limited in rural areas NDIS not flexible as it is rolled out 	<ul style="list-style-type: none"> Shared plan at the community level to maximise NDIS funding accessed by Whyalla residents and service providers

5.5. Respite

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
<ul style="list-style-type: none"> Orana 	<ul style="list-style-type: none"> Respite for parents of disabled children Carers are getting older—sometimes the caring “child” is 70+ 	<ul style="list-style-type: none"> Expanded respite services

5.6. Home care and household maintenance services

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>

What is working well

- HACC packages available
- Domiciliary care services available
- Many NGOs active in providing services—Centacare, UnitingCareWesley, Mission Australia, Meals on Wheels
- Whyalla Eco-Renovation Information Centre (WERIC)
- Mobility aid services

What could work better

- Shortage of funded packages
- Many single people in large houses on large blocks unable to get services—gardening, home maintenance, odd jobs
- High proportion of elderly on pensions, reduced ability to pay for services
- Maintenance and repair work increasingly hard to access, and costly
- HACC will not support services for self-funded retirees
- Domiciliary Care services are hard to access, and expensive (\$200/month for 5.5 hours/week, huge mark-ups on third party services)

Suggestions

- COTA-certified tradespeople
- Simplify rules for accessing HACC
- Reduce time delays for domiciliary care services
- Hard waste collection service

5.7. Aged and disability care workforce***What is working well***

- High employment in aged care
- TAFE provides competency-based training locally in Aged and Disability Care, Nursing, Social Work
- RDA funding 20 training places for aged and disability care (approx. \$4,000)
- A range of private training providers

What could work better

- High turnover of staff at aged care and disability work places
- Staff getting older and retiring
- Cert III in Aged and Disability Care defunded by Skills for All
- Private providers significantly more expensive
- RDA unable to attract full contingent of trainees

Suggestions

- Need to market aged care in schools at years 9-10, attract cohorts of students who study and work together
- Promote job security in aged and disability care

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
	<ul style="list-style-type: none"> • Aged and disability care not thought of highly as a vocation • Social workers in very short supply, demand increasing 	

6. RETAIL, HOSPITALITY AND PROFESSIONAL SERVICES

6.1. Retail, hospitality and professional services

<i>What is working well</i>	<i>What could work better</i>	<i>Suggestions</i>
<ul style="list-style-type: none"> • Good retail services • Range of hospitality options • Wide range of business services due to growth in mining and ancillary services 	<ul style="list-style-type: none"> • Some curious gaps—limited fashion or hardware stores • Steadily losing retail—no shoe shops • Many empty retail premises 	

7. EDUCATION AND TRAINING

7.1. Primary and secondary education

What is working well

- Whyalla Special School
- New emphasis on partnerships
- Phoenix in-school program

What could work better

- Lack of continuity of services between secondary school and post-school life for the young intellectually disabled

Suggestions

7.2. TAFE and UniSA

What is working well

- TAFE campus
- UniSA campus

What could work better

- Tightly controlled budgets
- Declining programs and services
- Transition to new distance educational philosophy may be an opportunity or a threat

Suggestions

7.3. Other education and training

What is working well

- U3A active in Whyalla

What could work better

Suggestions

- Public education on how to transition to retirement
- Use them to run a community-wide training program—email, internet, online transactions
- Pick up courses formerly run at TAFE that were very attractive to retirees—pottery, welding, gem-cutting, woodwork, etc

8. EMPLOYMENT AND VOLUNTEERING

8.1. Disability employment

What is working well

- Phoenix a great resource

What could work better

- Limited range of disabled employment options

Suggestions

- Develop more programs for purposeful work for disabled people

8.2. Volunteering

What is working well

- Culture of volunteering
- Retirees swelling numbers of able volunteers

What could work better

- Support is decreasing (eg Neighbourhood Watch)
- Volunteers discouraged by perception of significant red tape
- Volunteers (hospital auxiliary) must have police check, first aid certificate, mandated notification training, fire safety training

Suggestions

9. RECREATIONAL AND LEISURE ACTIVITIES

9.1. Physical and outdoor recreation

What is working well

- Whyalla Leisure Centre, and a range of other sporting facilities
- Strength for Life program
- Free exercise equipment/trainer
- Disabled lift at swimming pool
- Riding for Disabled
- Cycle lanes
- A number of lovely parks and gardens, walks and trails

What could work better

- Cross-city cycle path disrupted by recent building work
- No female toilet for disabled at beach
- Pontoon at beach not accessible by disabled people
- Disabled lift at the leisure centre pool not always working

Suggestions

- Better access to beach for elderly, wheelchair users
- Make pontoon at beach accessible for disabled people (like Port Augusta)
- Multi-purpose ring route around the city perimeter and foreshore for walking, cycling, jogging, gophers, wheel chairs
- Revive city-wide cycling plan (1990s)
- Link up network of cycling tracks

What is working well

- Redevelopment of foreshore
- Free exercise programs

What could work better***Suggestions*****9.2. Conservation parks*****What is working well***

- Surrounded by attractive natural areas—Whyalla Conservation Park, Whyalla Wetlands, Point Lowly, Fitzgerald Bay, Eight Mile Creek
- A little further away are Munyaroo Conservation Park, Lake Gilles Conservation Park

What could work better***Suggestions***

- Developmental plans eg toilet facilities, public art

9.3. Cultural facilities***What is working well***

- Middleback Theatre and Whyalla Cinema
- Tanderra Craft Village
- New City Library
- Mount Laura Homestead Museum
- Steel Cap Gallery
- Maritime Museum

What could work better

- Art Gallery, Darling Terrace, is not properly equipped or managed as an art gallery
- No profile for Indigenous and ethnic heritage

Suggestions

- Cultural Plan for the City
- Art Gallery developmental plan, hub for art and craft activity (cp Broken Hill)
- Link museums into a network to ensure a sustainable cultural asset
- Fund storage and digitalisation of historical documents

9.4. Social infrastructure and community associations***What is working well***

- Joan Gibbons House
- Men's Shed
- Wide range of service clubs—Lions, Probus
- Strong network of ethnic and multicultural communities

What could work better

- Capacity of associations for organisation and communication

Suggestions

- Assist associations to organise communication through email and internet
- Assist organisations to access funding for facilities and services

What is working well

- Association of Independent Retirees

What could work better***Suggestions***

- Assist Men's Shed to become sustainable—support for a coordinator, annual grant to cover utilities
- Assist Men's Shed to become a hub for other male-oriented activities eg furniture restoration at Mount Laura Homestead, restoration of steel-making models and equipment at Steel Cap Gallery, etc

Appendix 20

Community Survey

Whyalla Disability and Aged Care Masterplan Community Survey

1. SURVEY PROCESS

An online community survey was designed and tested in draft. After two revisions, it went live. It was widely advertised through RDAWEP's website, Council and community Facebook pages, and via television, radio and print media. It was also promoted at community consultation workshops and during a full-day presence at the Westlands Shopping Centre. Hard copy versions were also made available to those who requested them.

202 surveys were completed in total. Of these, 194 were completed electronically, and 8 were completed in hard copy, and subsequently entered electronically. This summary report and the attached detailed report includes all 202 reports.

The response rate represents just over 0.9% of Whyalla's population (21,988, according to the 2011 Census). If it is assumed that only one survey was completed per household, it represents 2.3% of Whyalla's households (8,938, also according to the 2011 Census).

2. SUMMARY OF KEY FINDINGS

Typical profile. Respondents were preponderantly female (58.8%), aged 46-65 (42.7%) or 66+ (34.2%), employed full time (29.7%) or retired and living mostly on a government pension (26.2%), not involved with volunteering (52.8%), and living in Whyalla (96.0%) in a regular house or unit (97.5%).

Personal experience of old age and disability. Most respondents indicated that parents, family members or close friends were living in their own home (73.1%). Others indicated that parents, family members or close friends were living in a residential aged care facility (18.6%) or retirement village (11.0%).

A significant minority of respondents did have a significant disability (17.3%), and even more (33.9%) had family members or close friends with a significant disability.

Perceptions of Whyalla as a place to live. In general, older residents as a group were significantly more positive about their experience of living in Whyalla than residents with a disability and their families. This is seen in their response to the question, "With 10 being excellent, and 1 being terrible, how would you rate Whyalla as a place to live?" Those answering the question with a focus on older residents rated Whyalla an average of 6.8. Those answering the question with a focus on residents with a disability rated Whyalla an average of 5.4.

2.1. Older residents

Reasons for retiring in Whyalla. Most respondents indicated that they would definitely (38.2%) or probably (40.5%) retire in Whyalla. The most important reasons given were family, friends, a long history of residence, and the Whyalla lifestyle. Also important were:

- the ease of moving around Whyalla
- the lifestyle
- access to recreation, social and other entertainment programs, sporting, community events, theatre and the arts
- access to facilities such as the library, boat ramp, and “places to relax in”
- access to aged care facilities
- access to a range of shops
- the fact that Whyalla is already home
- access to home support services
- access to public transport

Reasons against retiring in Whyalla. On the other hand, 17.4% of respondents indicated that they would probably not (17.4%) or definitely not (3.9%) retire in Whyalla. The most important reasons given were the fact that family live elsewhere, and the perception that medical facilities are limited. Also important were:

- better access to housing options, including a retirement village or aged care facilities
- better social, recreational and entertainment options
- the desire for a sea change or tree change
- better access to support services

Quality of residential facilities. Most respondents indicated that the quality of residential facilities available to older people in Whyalla was good (57.5%) or very good (10.8%). However, respondents criticised the shortage of beds, resulting in long waiting lists and people having to be housed elsewhere, and the apparent shortage of staff. Respondents also commented that there was insufficient choice in the range of facilities available; and insufficient support for people in their own homes. Some respondents called for a quality retirement village or affordable serviced units.

In home support services. Most respondents indicated that the availability of in home support services was good (56.5%) or very good (8.2%). However, respondents criticised inadequate funding, resulting in long waiting lists and limited service provision, and limited or poorly trained staff.

Other services. Most respondents indicated that the range and quality of other services available to older people in Whyalla was good (63.4%) or very good (5.9%). However, respondents criticised limited access to medical services, especially specialist services.

Full time or part time work. Most respondents indicated that there were not enough opportunities for older people in Whyalla to participate in full time or part time work (72.5%), or even that there were no opportunities (15.2%). However, many comments indicated that

respondents were not themselves looking for work, and no respondents indicated that they were looking for work, and unable to find it.

Volunteer work. Most respondents indicated that there were enough (60.0%) or more than enough (25.6%) opportunities for older people in Whyalla to participate in volunteer work. The most significant barrier to greater involvement was seen to be the lack of information or coordination between volunteer skills and resources, and organisations seeking volunteers. Respondents commented that a coordination program or mechanism would help to bridge the recruitment gap.

Social and cultural activities. Respondents were asked to comment on the opportunities for older people in Whyalla to participate in social and cultural activities. These were defined as club membership, art, crafts, music, drama, festivals, and similar activities. Most respondents indicated that there were enough (59.2%) or more than enough (12.1%) opportunities.

Sporting and leisure activities. Most respondents indicated that there were enough (62.4%) or more than enough opportunities (12.7%) for older people in Whyalla to participate in sporting and leisure activities.

2.2. Residents with a disability

Education and training services. Most respondents indicated that the range and quality of education and training services available to people with a disability in Whyalla was poor (45.5%) or very poor (12.4%). However, most respondents indicated that they did not know or were unsure about gaps in services. The most important issue raised by respondents was the perception that there are no education or training services available after high school. At this point, many disabled youth fall through the cracks.

Personal and family support services. Most respondents indicated that the range and quality of personal and family support services available to people with a disability in Whyalla was poor (47.7%) or very poor (14.0%). However, many respondents indicated that they did not know or were unsure about gaps in services. The most common theme in responses was the shortage of funding support, and the consequent shortage of appropriately trained carers. There were also concerns about insufficient respite options.

Other services. Most respondents indicated that the range and quality of other services available to people with a disability in Whyalla was poor (44.7%) or very poor (11.4%). However, most respondents indicated that they did not know or were unsure about gaps in services, and there was no discernible pattern in responses

Full time or part time work. Most respondents indicated that there were not enough opportunities for people with a disability to participate in full time or part time work (83.1%), or none at all (8.9%). Most respondents indicated that they did not know or were unsure about how to create more opportunities, and there was no discernible pattern in responses.

Volunteer work. Most respondents indicated that there were not enough opportunities for residents with a disability to participate in volunteer work (59.8%), or none at all (3.3%). Most

respondents indicated that they did not know or were unsure about how to create more opportunities, and there was no discernible pattern in responses.

Social and cultural activities. Most respondents indicated that there were not enough opportunities (49.1%) for residents with a disability in Whyalla to participate in social and cultural activities, or none at all (3.6%). However, most respondents did not know or were unsure about how to create more opportunities, and there was no discernible pattern in responses.

Sporting and leisure activities. Most respondents indicated that there were not enough opportunities (63.1%) for residents with a disability in Whyalla to participate in sporting and leisure activities, or none at all (1.8%). However, most respondents did not know or were unsure about how to create more opportunities, and there was no discernible pattern in responses.

Understanding of the National Disability Insurance Scheme. Most respondents indicated that, in their experience, people had heard of the NDIS, but knew little about it, and did not really understand it (63.3%). Others commented that most people affected by the scheme had not heard of it (24.8%). Respondents commented on the lack of information about the scheme, and its complexity, particularly given the fact that it was designed for people with a disability, many of whom faced inherent difficulties in accessing the scheme.

2.3. Other issues for Whyalla residents

Access to information. Most respondents indicated that it was difficult (40.7%) or very difficult (14.5%) to receive information about services, activities and opportunities. Some respondents commented that the biggest issue is that “you don’t know what you don’t know”. The most popular medium commented on was online, followed by television, and print.

Moving around Whyalla. Many respondents were positive about the ease of getting around Whyalla. However, just over half of respondents indicated that it was not easy to walk around Whyalla (52.1%). About half of respondents indicated that it was not easy to access public transport (49.3%). Some respondents indicated that it was not easy to drive around Whyalla (22.5%). Some respondents indicated that they require special help with getting around, and do not find it easy to get help (9.9%).

The single most significant issue was footpaths. In addition to general criticisms of the state of the city’s footpaths, respondents commented that footpaths were absent, sloping, uneven, broken, poorly surfaced, raised above the surrounding levels, or on one side of the street only. Respondents also complained that public transport was not available at times required and to places required.

Access to business services and retail shops. Business services were defined as including such services as banking, insurance, tax return preparation, real estate sale, and legal advice. Most respondents indicated that the range and quality of business services and retail shops available in Whyalla was good (63.2%) or very good (16.8%). Many respondents called generally for a greater range of retail options, higher quality and more competition.

Access to household and personal services. Household services were defined as including such services as home maintenance, gardening, or cleaning. Personal services were defined as including such services as haircuts or ironing. Most respondents indicated that the range and quality of household and personal services available in Whyalla was good (60.1%) or very good (8.0%).

3. DETAILED ANALYSIS OF RESPONSES

3.1. Respondents, and their personal situation

Sex (Q1)

58.8% of respondents were female, and 41.2% male. The survey responses therefore reflect an undue preponderance of female responses.

The higher level of response from females is attributed to higher levels of responsibility for family members or friends with disabilities and older parents, higher levels of interest and concern, and a greater willingness to participate in the survey process. However, we have not detected any serious distortion of survey responses as a result of this skewing.

Age (Q2)

Respondents were most likely to be 46–65 years of age (42.7%). 20.1% of respondents were 26–45, and 33.7% of respondents were 66–85.

Income (Q3)

Respondents were in a variety of income-earning situations. Approximately half of all respondents (49.7%) were employed, with 29.7% employed full time, and 20.0% employed part time.

A further 5.6% of respondents were receiving government unemployment of health benefits, and 5.1% were caring for a family member or friend full time.

39.5% of respondents were retired, most likely to be retired and living mostly on a government pension (26.2%) or retired and living mostly on their savings as self-funded retirees (13.3%).

This compares with 2011 Census data that shows 2,835 (12.9%) Whyalla residents retired and living and living mostly on a government pension, and 398 (1.8%) retired and living mostly on their savings as self-funded retirees.

As a result, the survey may have been somewhat skewed by a disproportionately high number of responses from pension-funded retirees, and an even higher number of responses (proportionally) from self-funded retirees. Given the subject matter of the survey, a high response rate from older residents was expected. However, we have not detected any serious distortion of survey responses as a result of this skewing.

19 respondents provided further detail about their income-earning situation, but there was no discernible pattern in these responses.

Volunteering (Q4)

44.5% of respondents were engaged part time in volunteer work, and 2.8% of respondents were engaged full time. 52.8% of respondents were not engaged in volunteer work at all.

15 respondents provided further detail about their involvement with volunteer work. Involvement included Neighbourhood Watch; football clubs and other sporting associations, programs and events; teaching computer skills to older residents; involvement in church organisations; involvement in Rotary; Whyalla Hospital Auxiliary; Scouts; primary and secondary education; and public service through Council sub-committees. One respondent mentioned that they had ceased to volunteer when they became disabled.

Location (Q5)

96.0% of respondents lived in Whyalla, with a further 1.0% living within 30 minutes of Whyalla. 3% of respondents lived more than 30 minutes from Whyalla.

Residence (Q6)

97.5% of respondents lived in a regular house or unit. 1.0% lived in a retirement village, 0.5% in a residential aged care facility, and 1.0% elsewhere. Two respondents added that they lived in housing trust accommodation. As Whyalla does not have a formally identified retirement village, and it would be difficult for almost all residents in Whyalla's residential aged care facility to access and complete the survey, this response pattern is expected.

Involvement with disability (Q19)

82.7% of respondents had no significant disability. This included 53.7% who had no personal experience of disability, but 29.0% who had family members or close friends with a significant disability.

17.3% of respondents had a significant disability. This included 12.5% who had a significant disability of their own, and a further 4.9% who not only had a significant disability themselves, but also had family members or close friends with a significant disability.

14 respondents provided further detail about their situation, but there was no discernible pattern in these responses.

3.2. Retirement

Place of retirement—others (Q7)

Respondents were asked to comment on where Whyalla residents retired, in their own experience. Thus, the responses were inherently subjective. Respondents indicated that, in their experience, most Whyalla residents stay in Whyalla when they retire (66.3%). Some retirees move to other locations in South Australia (22.1%). (Anecdotally, this includes such

areas as the Copper Coast—Kadina, Moonta and Wallaroo.) Some retirees move to Adelaide (19.3%). Others move interstate or overseas (3.3%).

Although this is an exaggerated picture, the overall pattern is in line with Census data, which shows low but significant levels of net outward migration in each cohort from 55-59 years of age and older between the 2006 and 2011 censuses, totalling approximately 4.0% of the population 55+. Those who retire outside Whyalla typically move elsewhere in South Australia (45.0%), to Adelaide (38.0%), or elsewhere in Australia, with the favoured interstate destinations being Queensland (8.0%) and Western Australia (7.5%).

19 respondents provided additional comments, but there was no discernible pattern in the responses.

Personal retirement—intentions (Q8)

Respondents were asked to comment on their own intentions for retirement. Most respondents indicated that they would definitely (38.2%) or probably (40.5%) retire in Whyalla, while 17.4% indicated that they would probably not (17.4%) or definitely not (3.9%) retire in Whyalla.

This question evoked 64 additional comments. Multiple reasons were provided for retiring in Whyalla. The most important reasons were children and other family connections (16/64), friends (7/64), a long history of residence (6/64), lifestyle, including general comments such as “We love it here” (6/64), the smaller size, slower pace, country feel and ease of moving around Whyalla (5/64), and the quality and ease of access to medical facilities (4/64). Other reasons given were Whyalla’s proximity to Adelaide if required (2/64), climate (1/64), and interests and hobbies (1/64). Negative reasons included having a partner who is too old to relocate (1/64), and being unable to afford to move financially (1/64).

Multiple reasons were also provided for retiring elsewhere. The most important reasons were the fact that family live elsewhere (13/64), and the limited medical facilities (3/64). Other reasons given were widely spread, suggesting that they are more person-specific. They included the feeling that it was time for a change (2/64), a desire to travel (2/64), a desire for more entertainment options (1/64), relocation with work or partner’s work (1/64), house prices and rental rates are high for what you get (1/64), the need to get better access to personal assistance (1/64), limited services (1/64), friends live elsewhere (1/64), the lack of coastal development (1/64), the location of the long-term home elsewhere (1/64), availability in Adelaide of supported housing for persons with a disability (1/64), the desire to live in a smaller town (1/64), degradation of the local environment (1/64), and general negativity, including the comment, “There is nothing here to offer people” (1/64).

Retirement in Whyalla—most important factors (Q9)

Respondents were asked to comment on the most important factors that would lead them to stay in Whyalla when they retired. This question evoked 156 responses.

The most important factors were access to and quality of medical facilities and services (55/156), and the presence of family (48/156) and friends (28/156).

Also important were the ease of moving around Whyalla (19/156), lifestyle (19/156), access to recreation, social and other entertainment programs, sporting, community events, theatre and the arts (14/156), access to facilities generally (specifically mentioned were shops, library, boat ramp, “places to relax in”) (12/156), access to aged care facilities (12/156), access to a range of shops (11/156), the fact that Whyalla is already home (11/156), access to home support services (specifically listed were showering, cleaning, meals, escorts, assisted transport, and home maintenance) (9/156), access to public transport (8/156), the low cost of living (8/156), the fact that Whyalla is relatively quiet and small (5/156), its coastal situation (4/156), its climate (4/156), its low crime rates and secure environment (3/156), and its proximity to and availability of transport to Adelaide (3/156).

Other factors were identified, including the close-knit community (2/156), church involvement (2/156), familiarity (1/156), pleasant surroundings (1/156), well-kept and accessible community areas (1/156), and coastal development (1/156).

Negative factors were identified by some respondents, including the cost of relocating (4/156), or inability to relocate due to poor health (1/156).

Respondents also identified some factors not currently present, but where improvement was sought. The most important of these were construction of a quality retirement village (8/156), and access to more disabled services, including support, transport, and residential care for people with a disability (4/156).

Other factors were identified including more opportunities for seniors entertainment such as outings, coach tours or travel (2/156), more diversity in the range of shops and cafés (2/156), cheaper housing (1/156), messy back streets (1/156), protection of heritage buildings (1/156), financial assistance for medical appointments in Adelaide (1/156), a better climate (1/156), coastal recreation areas (1/156), increased policing (1/156), and improved performance of the Council (1/156).

Retirement elsewhere—most important factors (Q10)

Respondents were also asked to comment on the most important factors that would lead them to leave Whyalla when they retired. This question evoked 144 responses.

The most important factors were the desire to move closer to family (63/144), better access to medical facilities and services (49/144), better access to housing options, including a retirement village or aged care facilities (15/144), and better social, recreational and entertainment options (14/144).

Also important were the desire for a sea change or tree change (10/144), better access to support services (8/144), better or more affordable housing, or a lower cost of living (6/144), and the desire to move closer to friends (4/144).

Other factors were identified including better support for people with a disability (2/144), the remoteness of Whyalla, and the desire to move closer to Adelaide (2/144), the desire to move closer to international air links (2/144), limited Council services in Whyalla (2/144), lack of growth within and around Whyalla (1/144), access to better transport (1/144), proximity to a university (1/144), better fishing (1/144), better access to the beach (1/144), better

internet access (1/144), degradation of coastal areas and the marine environment around Whyalla (1/144), and the limited retail sector (1/144).

3.3. Care and other services for older residents

Experience with aged care (Q11)

Respondents were asked to comment on where their parents, family members or close friends were living. Multiple responses were possible. Most respondents indicated that parents, family members or close friends were living in their own home (73.1%). Many respondents indicated that parents, family members or close friends were living elsewhere (38.6%). Others indicated that parents, family members or close friends were living in a residential aged care facility (18.6%) or retirement village (11.0%).

27 respondents provided additional comments, but there was no discernible pattern in the responses.

Quality of residential facilities available to older people in Whyalla (Q12)

Respondents were asked to comment on the quality of residential facilities available to older people in Whyalla. Most respondents indicated that residential facilities were good (57.5%). Other respondents indicated that residential facilities were very good (10.8%), poor (24.0%) or very poor (7.8%).

98 respondents provided additional comments. Of these, 7/98 respondents commented that there was insufficient choice in the range of facilities available; 8/98 respondents commented that there was insufficient support for people in their own homes; and 1/98 respondent commented that there was not enough transitional accommodation between regular housing and a residential aged care facility (for example, serviced units). 15/98 respondents called for a quality retirement village or affordable serviced units.

However, most comments (67/98) related to residential aged care facilities. One respondent commented positively on the new Street and Flinders Avenue residential facilities (1/98). All other comments were critical.

The most important comments included the lack of beds, resulting in long waiting lists and people having to be housed elsewhere (39/98), and the shortage of staff (12/98). Other important comments included the lack of compassion or individual care by staff (7/98), the observation that residential aged care was too institutional (not homely enough, lack of stimulation, need creative décor, interesting activities, computer games, fun—6/98), dated facilities or inadequate attention to maintenance (3/98), and poor food, or poor range of menu choices (3/98).

Other comments included the observation that facilities smell (2/98), that doctors were reluctant to visit (2/98), that the cost was too high (2/98), that there was no control of residents (1/98), that residents were not able to spend time outside the facility (1/98), that there was insufficient access to rehabilitation services in residential facilities (1/98), that staff

were poorly trained (1/98) or bullied (1/98), that there was a shortage of volunteers (1/98), and that facilities were too far from other services such as coffee shops, or the library (1/98).

It should be emphasised that these are community perceptions, and may not be in accordance with the facts. A number of respondents commented that a shortage of government funding was at the root of these perceived issues.

In home support services available to older people in Whyalla (Q13)

Respondents were asked to comment on the availability of in home support services to older people in Whyalla. Most respondents indicated that availability was good (56.5%). Other respondents indicated that availability was very good (8.2%), poor (31.3%) or very poor (4.1%).

83 respondents provided additional comments. However, many comments indicated that respondents were not presently using services and had no active knowledge of them (31/83).

From other respondents, the most frequent comment was that funding was inadequate, resulting in long waiting lists and limited service provision (23/83). This is also reflected in limited or poorly trained staff (14/83). Other comments concerned administration (5/83), an insufficient number of providers (1/83), the quality of services provided (1/83) and the cost (1/83).

Respondents also commented on gaps in services, but few comments were specific. Respondents commented that they were unable to access services on weekends and public holidays (2/83), obtain 24-hour support (1/83), or obtain specialised support for mental health (1/83), aged Indigenous residents (1/83), or older residents with a disability (1/83). They also commented on service limitations due to HW&S rules (e.g., high dusting, moving furniture) (2/83).

Specific services referred to included cleaning and hygiene (4/83), gardening (4/83), maintenance (3/83), food preparation (2/83), personal care (1/83), shopping (1/83), outings (1/83), and other transport (1/83).

The range and quality of other services available to older people in Whyalla (Q14)

Respondents were asked to comment on the range and quality of other services available to older people in Whyalla. Most respondents indicated that the range and quality of services was good (63.4%). Other respondents indicated that the range and quality of services was very good (5.9%), poor (28.8%) or very poor (2.0%).

55 respondents commented on the question. However, many comments indicated that respondents were not presently using services and had no active knowledge of them (13/55).

The library (1/55) and shops (2/55) received positive comments. However, most comments were critical of the range or availability of services. The most important theme was the limited access to medical services, especially specialist services (9/55). Respondents also commented on the shortage of day and overnight respite care (3/55), limited public transport options (3/55), limited availability of home services such as maintenance and painting (2/55),

assistance with shopping (2/55), cleaning (1/55), exercise and community groups (1/55) and prepared meals (1/55), and the inability to access services on weekends and public holidays (1/55).

3.4. Employment and volunteering for older residents

Opportunities for older residents to participate in full time or part time work (Q15)

Respondents were asked to comment on the opportunities for older people in Whyalla to participate in full time or part time work. Most respondents indicated that there were not enough opportunities (72.5%). Some respondents even indicated that there were no opportunities (15.2%). Others commented that there were enough (11.6%) or more than enough opportunities (0.7%).

52 respondents provided additional comments. However, many comments indicated that respondents were not themselves looking for work (20/52). No respondents indicated that they were looking for work, and unable to find it. Some respondents pointed to volunteering as more appropriate for older residents (7/52).

Some comments were by way of suggestions for creating more work opportunities, but there was no strong pattern in the responses. Suggestions included encouraging older residents to mentor younger residents in art, drama, horticulture, environment and local history (3/52), creating more diverse businesses (2/52), encourage employers to look for employees locally first (2/52), reducing business taxes (1/52), increasing wages so that people don't need to work multiple jobs, thus freeing up some employment opportunities for others (1/52), improving education levels (1/52), educating employers in job redesign to provide work opportunities for older citizens (1/52), employing older residents to meet and greet in supermarkets (1/52) or pack in supermarkets (1/52), grouping older people into work teams that would enable them to tackle more physically demanding tasks such as gardening (1/52), providing extra support to DOME (1/52), and encouraging employers to value the experience of older employees (1/52).

Opportunities for older residents to participate in volunteer work (Q16)

Respondents were asked to comment on the opportunities for older people in Whyalla to participate in volunteer work. Most respondents indicated that there were enough opportunities (60.0%). Other respondents indicated that there were more than enough opportunities (25.6%). Others commented that there were not enough opportunities (13.1%) or even none at all (1.3%).

40 respondents provided additional comments. The most significant barrier commented on was the lack of information or coordination of opportunities for volunteering with volunteer skills and resources (9/40). As often, it was commented that some kind of coordination program or mechanism—specific suggestions included an online database, hard copy directory, publicity program or coordination service—would help to bridge this recruitment gap (9/40).

Respondents also commented on the shortage of volunteers, particularly of younger volunteers to succeed older volunteers (5/40). Some suggested that the requirement to undertake extensive training and procure police checks at personal cost were responsible for discouraging volunteers (3/40). Other comments included the need to commit to a regular time slot (1/40), liability issues (1/40) and transport requirements (1/40).

Specific suggestions included extending the home visiting program (1/40), and volunteering to teach craft in schools (1/4). A number of respondents drew attention to the wide range of volunteer-driven organisations to which volunteers could contribute their time.

3.5. Activities for older residents

Opportunities for older residents to participate in social and cultural activities (Q17)

Respondents were asked to comment on the opportunities for older people in Whyalla to participate in social and cultural activities. These were defined as club membership, art, crafts, music, drama, festivals, and similar activities.

Most respondents indicated that there were enough opportunities (59.2%). Some respondents indicated that there were more than enough opportunities (12.1%). Others commented that there were not enough opportunities (28.7%).

24 respondents provided additional comments. Respondents commented that it can be difficult to find out when and where activities will be held (3/24), that transport can be difficult to obtain (3/24), or that activities may be unaffordable (2/24).

Other respondents commented that access is difficult to the beach for people with mobility issues (1/24), that events are designed for young families (1/24), and that activities are difficult to attend on your own, if living alone (1/24).

Respondents called for more advertising to encourage participation (1/24), more exercise and healthy lifestyle classes (1/24), yoga (1/24), tai chi (1/24), and dancing (1/24), and greater support for the Men's Shed (1/24) and University of the Third Age (1/24).

Opportunities for older residents to participate in sporting and leisure activities (Q18)

Respondents were asked to comment on the opportunities for older people in Whyalla to participate in sporting and leisure activities.

Most respondents indicated that there were enough opportunities (62.4%). Some respondents indicated that there were more than enough opportunities (12.7%). Others commented that there were not enough opportunities (24.8%).

23 respondents provided additional comments, especially the cost of transport to and from activities (3/23), and the cost of membership and participation (3/23). They also indicated that it can be difficult for older people to find out about activities (1/23), and pointed out that the availability of activities to residents in aged care is much less (1/23).

Other respondents commented on the need for safer cycling facilities (1/23), and called for more tai chi classes (1/23). They also commented that the swimming pool, spa and sauna is a great facility (1/23).

3.6. Services for residents with a disability

The range and quality of education and training services available to people with a disability in Whyalla (Q20)

Respondents were asked to comment on the range and quality of education and training services available to people with a disability in Whyalla.

Most respondents indicated that the range and quality of services was poor (45.5%), and a further 12.4% indicated that they were very poor. Many respondents indicated that services were good (35.5%), and a further 6.6% indicated that they were very good.

53 respondents provided additional comments, but of these, 28/53 indicated that they did not know or were unsure about gaps in services. The most significant issue raised by respondents was the lack of any education or training services after high school (4/53). At this point, many disabled youth fall through the cracks (2/53). Respondents also commented that it is difficult to get funding information (2/53), or indeed, funding itself (2/53).

Other respondents commented that disability adjustment is not always well thought out—pavers, steps, parking not close to toilets, etc (1/53); services are better for children than for older people (1/53); there are gaps between services (1/53), and limited staff (1/53); there is limited access to speech therapy at school (1/53), and limited support for learning difficulties (1/53); there are no opportunities to gain work experience (1/53); there are few options for disabled employment (1/53), and only one work provider for persons with an intellectual disability (1/53). One respondent called for a facility such as a farm where persons with mental health issues could tend to plants or animals (1/53). Sadly, one respondent commented that they had given up on finding the services they required, and would leave Whyalla (1/53).

The range and quality of personal and family support services available to people with a disability in Whyalla (Q21)

Respondents were asked to comment on the range and quality of personal and family support services available to people with a disability in Whyalla.

Most respondents indicated that the range and quality of services was poor (47.7%), and a further 14.0% indicated that they were very poor. Many respondents indicated that services were good (35.2%), and a further 3.1% indicated that they were very good.

51 respondents commented on the question, but of these, 19/51 indicated that they did not know or were unsure about gaps in services.

The most common theme in responses was the shortage of funding support (6/51), and the consequent shortage of appropriately trained carers (6/51). There were also concerns about insufficient respite options (6/51).

Other respondents commented that care was not always good quality, and was poorly monitored (3/51), that it was hard to access weekend and public holiday services (1/51), that there was limited support for people with mental health issues (1/51), service coordination was poor (1/51), there was limited access to specialists, e.g., speech therapy (1/51). There was also a need for more supported residential places (1/51).

The range and quality of other services available to people with a disability in Whyalla (Q22)

Respondents were asked to comment on the range and quality of other services available to people with a disability in Whyalla.

Most respondents indicated that the range and quality of services was poor (44.7%), and a further 11.4% indicated that they were very poor. However, almost as many respondents indicated that services were good (42.3%), and a further 1.6% indicated that they were very good.

45 respondents provided additional comments, but of these, more than half (24/45) indicated that they did not know or were unsure about gaps in services.

Other respondents commented on the shortage of respite care (3/45), the need for in home and independent living services, especially cleaning (3/45), transport (3/45), medical (1/45), and education services (1/45), difficulties with disabled access due to narrow, sloping or poorly designed footpaths (2/45), service coordination (1/45), inflexibility (1/45), and discontinuity (1/45).

3.7. Employment and volunteering for residents with a disability

Opportunities for residents with a disability to participate in full time or part time work (Q23)

Respondents were asked to comment on the opportunities for residents with a disability to participate in full time or part time work in Whyalla.

Most respondents indicated that there were not enough opportunities (83.1%), and a further 8.9% indicated that there were none at all. Only 8.1% of respondents indicated that there were enough opportunities. No respondents indicated that there were more than enough.

42 respondents provided additional comments, but of these, more than half (24/42) indicated that they did not know or were unsure about how to create more opportunities.

A small number of respondents indicated knowledge of disability employment and volunteered ideas about creating opportunities. Some respondents were aware of Phoenix (2/42) and the National Disability Coordination Officer (1/42), and mentioned that they had seen a disabled person working in a supermarket (1/42). Some respondents also commented

that more incentives for employers (3/42) or work experience programs (1/42) would lead to more employment. It was also suggested that career planning should start early in high school, to facilitate preparation and training (1/42), and that a farm growing vegetables and flowers and tending animals could be a good employment opportunity (1/42).

Opportunities for residents with a disability to participate in volunteer work (Q24)

Respondents were asked to comment on the opportunities for residents with a disability to participate in volunteer work in Whyalla.

Most respondents indicated that there were not enough opportunities (59.8%), and a further 3.3% indicated that there were none at all. However, 33.6% of respondents indicated that there were enough opportunities, and 3.3% of respondents indicated that there were more than enough. The response to this question was significantly more positive than the response to the previous question (Q23) about employment opportunities.

38 respondents provided additional comments, but of these, more than half (22/38) indicated that they did not know or were unsure about how to create more opportunities.

A small number of respondents volunteered ideas about creating opportunities. Of these, some commented that the biggest barriers were workplace health and safety legislation (3/38), the need for support people and systems (2/38), and the absence of disabled facilities such as toilets at some organisations (1/38). Others called for training for volunteers with a disability (2/38), training and support for community organisations (1/38), and more encouragement (1/38).

3.8. Activities for residents with a disability

Opportunities for residents with a disability to participate in social and cultural activities (Q25)

Respondents were asked to comment on opportunities for residents with a disability in Whyalla to participate in social and cultural activities. These were defined as club membership, art, crafts, music, drama, festivals, and similar activities.

Most respondents indicated that there were not enough opportunities (49.1%), and a further 3.6% of respondents indicated that there were no opportunities at all. However, many respondents indicated that there were enough opportunities (42.9%), and others commented that there were more than enough opportunities (4.5%).

34 respondents provided additional comments, but of these, more than half (20/34) indicated that they did not know or were unsure about how to create more opportunities.

There was no discernible pattern in the comments of other respondents. They called for better information (1/34), cheaper transport (1/34), lower participation costs (1/34), better infrastructure (1/34), more support for organisations to take on participants with disabilities (1/34), and better disabled access to hospitality businesses and shops (1/34). One respondent

observed that residents with a disability were often excluded due to concerns about liability, the extra care required, and disabled access, those with mental health challenges being perceived as particularly challenging (1/34).

Opportunities for residents with a disability to participate in sporting and other leisure activities (Q26)

Respondents were asked to comment on opportunities for residents with a disability in Whyalla to participate in sporting and other leisure activities.

Most respondents indicated that there were not enough opportunities (63.1%), and a further 1.8% of respondents indicated that there were no opportunities at all. Many respondents indicated that there were enough opportunities (31.5%), and others commented that there were more than enough opportunities (3.6%).

37 respondents provided additional comments, but of these, more than three-quarters (25/37) indicated that they did not know or were unsure about how to create more opportunities. Several sports were mentioned by respondents, including car racing (1/37), lawn bowls (1/37), and swimming (1/37). Respondents commented that problems included transport costs (2/37), costs of participating (1/37), acceptance by clubs (1/37), who lack the skills, structures and volunteer staff to support participation by people with a disability (2/37), and disabled access (3/37). One respondent commented that clubs were too traditional to support participation by people with a disability (1/37).

3.9. National Disability Insurance Scheme (NDIS)

Understanding of the Scheme (Q27)

Respondents were asked to comment on whether, in their experience, Whyalla residents affected by the introduction of the NDIS understood how the scheme would change the way in which they access disability support services.

Responses were inherently subjective and perceptual. Most respondents indicated that, in their experience, people had heard of the scheme, but knew little about it, and did not really understand it (63.3%). Others commented that most people affected by the scheme had not heard of it (24.8%). A small number of respondents gave it as their view that people affected by the scheme had a general understanding of it, with some gaps (10.3%), and others believed that people had a very good understanding of the scheme (1.7%).

40 respondents provided additional comments, but of these, almost three-quarters (28/40) indicated that they did not know or were unsure about the level of awareness. Some respondents indicated that they had not heard of the scheme (3/40), including one respondent with a disability (1/40).

Respondents commented on the lack of information about the scheme (7/40), and its complexity, particularly given the fact that it was designed for people with a disability (3/40), many of whom faced inherent difficulties in accessing the scheme. Respondents also

commented on Whyalla's inability as a relatively small city to support a market-driven model (1/40), the scheme's inflexibility and restrictions (1/40), and disruptions to existing provider-client relationships, interpreted as a lack of respect (1/40). One respondent commented that some organisations were positioning themselves to provide services (1/40).

3.10. General issues for Whyalla residents

Access to information (Q28)

Respondents were asked to comment on whether it was easy or difficult to receive information about services, activities and opportunities. A majority of respondents indicated that it was difficult (40.7%) or very difficult (14.5%) to receive information. A minority indicated that it was easy (40.7%) or very easy (4.1%) to receive information.

When asked about ways to make it easier, 38 respondents provided additional comments. Some respondents commented that the biggest issue is that "you don't know what you don't know" (5/38). One respondent also commented that computers are difficult for many older people to use (1/38). Several respondents commented on the value of a service coordination point (2/38), or access to a case worker or service coordinator (1/38).

The most popular medium commented on was online (13/38), with others suggesting a link on the Council website, supported by hard copies at the Council in the library (3/38), the Whyalla News community diary (2/38), and social media (1/38).

The second most popular medium was television, either through advertising or a community television bulletin ("like Port Augusta") (5/38).

Least popular was print. Suggestions included regular letter and pamphlet drops (3/38), a quarterly newsletter (1/38), and newspaper articles and advertising (1/38). A stand at Westlands (1/38) was also suggested.

Moving around Whyalla (Q29)

Respondents were asked to comment on the ease with which they could move around Whyalla in various ways. Multiple responses were possible.

Just over half of respondents indicated that it was not easy to walk around Whyalla (52.1%). About half of respondents indicated that it was not easy to access public transport (49.3%). Some respondents indicated that it was not easy to drive around Whyalla (22.5%). Some respondents indicated that they require special help with getting around, and do not find it easy to get help (9.9%).

When asked what makes it difficult to get around, 56 respondents provided additional comments. Many respondents were positive about the ease of getting around Whyalla (24/56). Other respondents were more critical.

The single most significant issue was footpaths. In addition to general criticisms of the state of the city's footpaths (4/56), other respondents commented that footpaths were absent,

sloping, uneven, broken, poorly surfaced, raised above the surrounding levels, or on one side of the street only (9/56). Respondents also commented on overhanging trees (2/56), grids on footpaths that interfered with wheelchair wheels (1/56), and lighting levels (1/56). Respondents claimed that problems with footpaths were forcing pedestrians or gopher drivers onto the road (1/56).

Also significant was public transport. Respondents complained that public transport was not available at times required and to places required (8/56), that buses were not wheelchair-accessible (2/56), and that stops were too far from houses (1/56).

Respondents also criticised the cost of hiring taxis (1/56), waiting times (1/56), and the attitude of taxi drivers (1/56). On the other hand, respondents commented positively on the volunteer drivers provided by DPI/Amaroo Lodge (2/56).

Respondents also commented on disabled access (5/56). They drew attention to limited scooter access in public toilets (1/56), difficult wheelchair access to shopping centres (1/56), difficult beach access for wheelchairs (1/56), the placement of buttons at pedestrian crossings being difficult to reach from a gopher (1/56), and the design and placement of disabled parking (1/56).

While respondents were generally positive about Whyalla's road system, they drew attention to damaged roads, kerbing and verges, and potholes in the roads (3/56), and to faded or absent street signs (3/56).

Access to business services and retail shops (Q30)

Respondents were asked to comment on the range and quality of business services and retail shops available in Whyalla. Business services were defined as including such services as banking, insurance, tax return preparation, real estate sale, and legal advice.

Most respondents indicated that the range and quality of business services and retail shops available in Whyalla was good (63.2%), and others indicated that it was very good (16.8%). Some respondents indicated that it was poor (16.8%), and some even rated it very poor (3.2%).

When asked about the important gaps in business services and retail shops, 29 respondents provided additional comments. Many respondents called generally for a greater range of retail options, higher quality and more competition (11/29). Specific retail sectors mentioned included shoe stores (4/29), menswear (2/29), variety stores (2/29), toy stores (1/29), larger chains such as Big W or Kmart (2/29), chemists (1/29) or a bookshop (1/29).

Other respondents called for more tradespeople, including home electricians and plumbing (2/29), a wider range of hospitality venues (1/29), and a specialist store for disability equipment (1/29).

Respondents also commented on poor disabled access to shops in the older part of town (1/29) and reflected on business rents (2/29). Some respondents compared Whyalla's business services and retail sector unfavourably with Port Lincoln, Port August and Port Pirie (3/29).

Access to household and personal services (Q31)

Respondents were asked to comment on the range and quality of household and personal services available in Whyalla. Household services were defined as including such services as home maintenance, gardening, or cleaning. Personal services were defined as including such services as haircuts or ironing.

Most respondents indicated that the range and quality of household and personal services available in Whyalla was good (60.1%), and others indicated that it was very good (8.0%). Some respondents indicated that it was poor (29.7%), and some even rated it very poor (2.2%).

When asked about the important gaps in household and personal services, 30 respondents provided additional comments. There was no strong pattern in the responses. Respondents commented on gaps (1/30), and the difficulty in getting reliable providers (3/30). Respondents referred specifically to gardening (3/30), cleaning (1/30) and appliance service and maintenance (1/30). They also commented on the difficulty of knowing who to contact for small jobs (2/30), perceptions that people in a wheelchair are charged more (1/30), problems with language barriers (1/30) and costs (1/30).

Whyalla as a place to live for older people (Q32)

Respondents were asked to comment on Whyalla as a place to live for older people, on a scale of 1 (terrible) to 10 (excellent). Respondents rated Whyalla an average of 6.8.

When asked what they would like to change, 48 respondents provided additional comments.

The most important area commented on was the availability of services. A significant number of respondents called for continuing improvements to the availability and range of hospital and medical services (9/48). Other respondents called for greater availability of household and personal services (2/48), and services generally (2/48).

A number of comments related to transport. Respondents called for better access to public transport (8/48). Other respondents sought free access to public transport for concessional card holders (1/48), access to a flexible minibus service (1/48), improved pedestrian footpaths (2/48), safer cycle routes (1/48), lower taxi fares (1/48) and cheaper transport to Adelaide (3/48).

Respondents also commented on housing, seeking more options (2/48), calling for more aged care capacity and beds (5/48), a retirement village (4/48), better home support and more carer support packages for those caring for people with a disability (2/48), and access to residential facilities for disability care (2/48).

Respondents also commented on social and recreational activities. Respondents sought a wider range of activities (5/48) and more events (1/48). Specific requests included museums (1/48), art galleries (1/48), more performing groups (1/48), lawn bowls (1/48), and exercise and wellbeing groups (1/48). Respondents also sought more hospitality options on the foreshore (1/48).

Respondents also commented on disabled access (2/48), including scooter access to public toilets (1/48) and wheelchair access to the beach (1/48).

Respondents also called for a more open, consultative Council (5/48), better personal and household security (1/48), better lighting in the parklands (1/48), coastal and marine conservation (1/48), and development of coastal areas (1/48) and nearby outback areas (1/48) for recreational purposes.

Whyalla as a place to live for people with a disability (Q33)

Respondents were asked to comment on Whyalla as a place to live for people with a disability, on a scale of 1 (terrible) to 10 (excellent). Respondents rated Whyalla an average of 5.4.

When asked what they would like to change, 47 respondents provided additional comments. The three most important areas commented on were accommodation and support for carers, specialist services, and transport.

Respondents called for more support with home care (2/47), more respite or day care (3/47) and supported accommodation for young people with disabilities (2/47).

Respondents also called for more specialist services (6/47). One respondent also asked for services and equipment for the visually impaired (1/47).

Respondents referred to transport issues in general terms (3/47). They called for better footpaths, with more wheelchair access ramps (3/47), better disabled parking (1/47), and better disabled access to buildings (1/47).

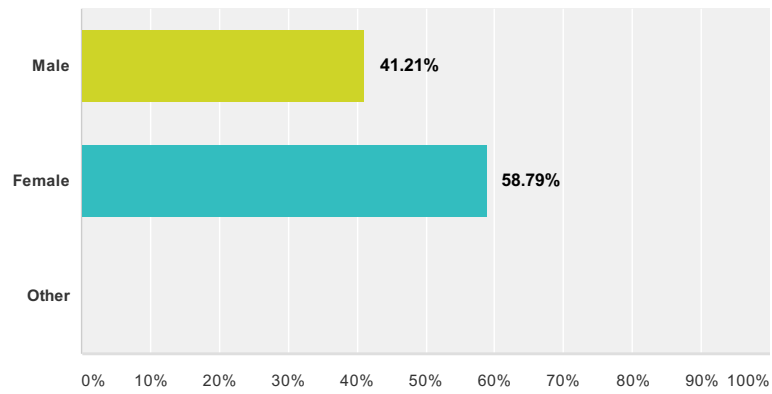
In addition to these issues, respondents called for better support for clubs and associations to include people with disabilities (2/47), more events and social activities (2/47), better planning of events to be more inclusive for people with disabilities (1/47), more information on what is available (2/47), a change to attitudes, and the stigma that sometimes attaches to people with a disability (2/47), more attention to education (1/47), and a Council organisation more attuned to disability issues (1/47).

Michael Edgecombe
Indigo Partners

Whyalla Aged and Disability Care Masterplan

Q1 I am ...

Answered: 199 Skipped: 3

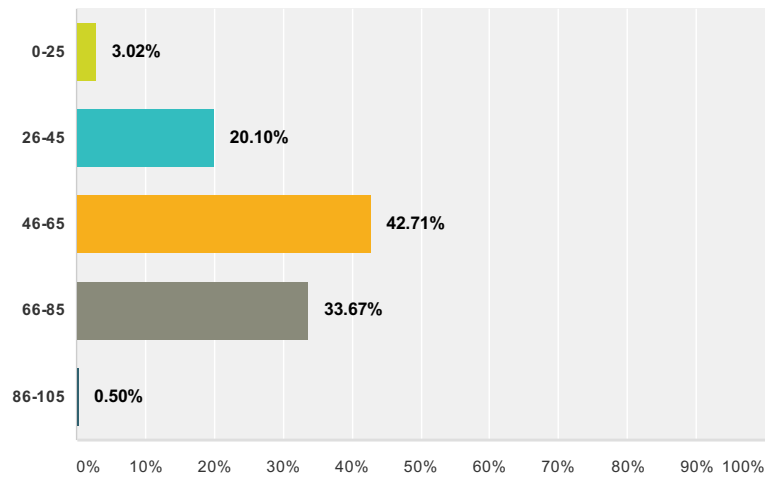


Answer Choices	Responses	
Male	41.21%	82
Female	58.79%	117
Other	0.00%	0
Total		199

Whyalla Aged and Disability Care Masterplan

Q2 My age is ...

Answered: 199 Skipped: 3

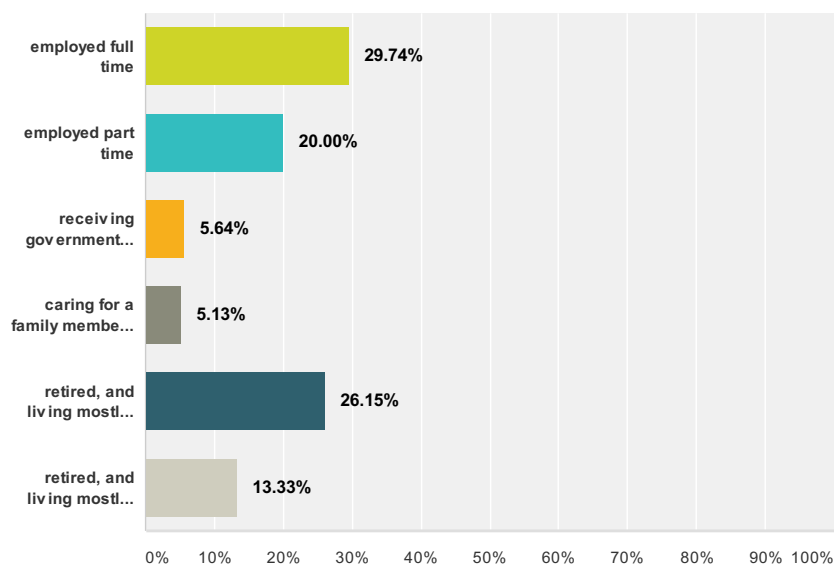


Answer Choices	Responses
0-25	3.02% 6
26-45	20.10% 40
46-65	42.71% 85
66-85	33.67% 67
86-105	0.50% 1
Total	199

Whyalla Aged and Disability Care Masterplan

Q3 Which of the following best describes your situation? I am ...

Answered: 195 Skipped: 7



Answer Choices	Responses
employed full time	29.74% 58
employed part time	20.00% 39
receiving government unemployment or health benefits	5.64% 11
caring for a family member or friend full time	5.13% 10
retired, and living mostly on a government pension	26.15% 51
retired, and living mostly on my savings as a self-funded retiree	13.33% 26
Total	195

#	Comments	Date
1	self employed, part time	4/30/2014 4:57 PM
2	and doing it tough!	4/29/2014 4:44 PM
3	disability pension double am putee	4/29/2014 1:57 PM
4	My son is looking after me	4/28/2014 9:23 PM
5	receiving workcover income support	4/28/2014 1:44 PM
6	None of the above, though I do help care for my father in conjunction with my mum.	4/28/2014 10:50 AM
7	Necessary to spell residents with the apostrophe or not. This last was incorrect. Get it right! It's only English; one would think you're using a foreign language Get only english	4/27/2014 5:51 PM
8	interest rate on savings not a big help on moment, hope Tony Abbott leaves our pension alone!!	4/27/2014 4:47 PM
9	Still work a few hours a week	4/27/2014 3:58 PM
10	Only Just found work, 2009 took package from Onesteel, four years later was looking for work and found nothing, Registered with employment service providers and New start, Then was working until i needed an Major operation, I'm a independent single Male, Went through all the interviews and filled in all paper work to apply for a disability pension, I had done all that was required and more, The stress and emotional pressure i went through due to the governments criteria, was so wrong,, Because i was still able to look after my self,, cook clean ..shop.. i was living in PAIN.. yet still wanted to look after my self.. I had a break down right in Whyalla's Employment Centre,,, i still have not had any one call,,, just to see if i was OK... I know it's not their responsibility, Yet i was still refused a disability payment, I wasn't looking for help... I was looking for a hand up... The Operation has be a success, I'm 12 month free of pain... No thanks to the health system or the disability criteria, I was honest... and now with hindsight,,, and a understanding of how the system works,, Would i tell the truth or lie...???	4/27/2014 2:45 PM
11	Actually the last one almost fits me - I'd say I'm semi-retired, and haven't yet got around to filling in the forms to start on a superannuation flexi-pension.	4/27/2014 1:35 PM
12	I receive a Disability Support Pension for Mental Health and I use a gopher to get around on because I cant walk very far with Back issues	4/27/2014 12:10 AM
13	As further background information which will colour my opinions, I have lived here for 47 years, and I have been on the Board of Whyalla Aged Care for about 20 years	4/23/2014 4:53 PM
14	Working part-time and at University full-time	4/22/2014 10:34 AM
15	There is not enough incentive to be self funded eg Allowances as for pensioners. Would need to be means tested	4/18/2014 1:41 PM
16	disability part pension as wife works partime	4/18/2014 8:31 AM
17	We operate our own business.	4/17/2014 8:31 PM
18	+ small amt Gov pension + own income stream	4/17/2014 8:31 PM

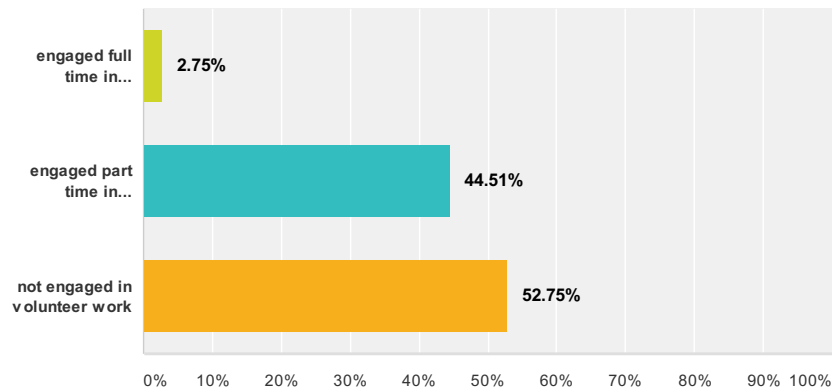
Whyalla Aged and Disability Care Masterplan

19	Employed full time but also full time carer for aged mother in my home	4/1/2014 10:14 AM
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Whyalla Aged and Disability Care Masterplan

Q4 I am ...

Answered: 182 Skipped: 20



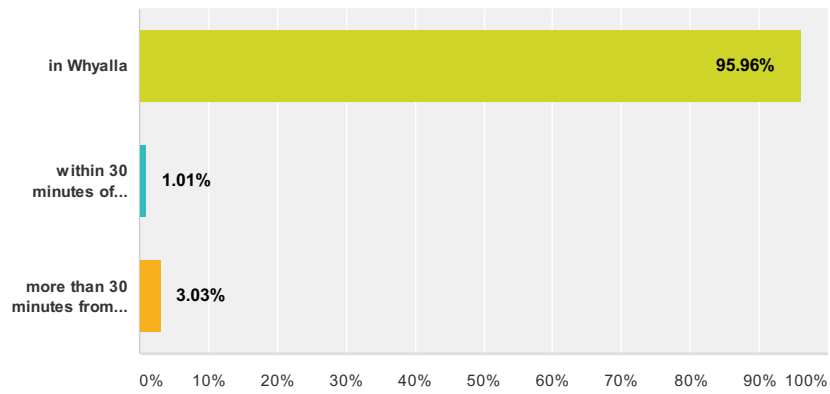
Answer Choices	Responses	
engaged full time in volunteer work	2.75%	5
engaged part time in volunteer work	44.51%	81
not engaged in volunteer work	52.75%	96
Total		182

#	Comments	Date
1	Drive volunteer work for 12 yrs, "sacked" when became disabled	7/14/2014 5:14 PM
2	Not any more	7/14/2014 4:06 PM
3	N.H.W	4/29/2014 1:59 PM
4	in sport	4/29/2014 10:19 AM
5	I am retired and full time carer for my wife	4/28/2014 5:36 PM
6	I Teach Basic Computer to Senior Citizens	4/27/2014 6:52 PM
7	But I am a member of a not for profit organization, doing what I can to keep the mind active.	4/27/2014 4:49 PM
8	I do some voluntary work through our local church and football club.	4/23/2014 12:49 PM
9	volunteer assisting sports club. Previously assisted local Disability Sevice and Councilsub-committees	4/22/2014 5:49 PM
10	Full time wor , previous question	4/19/2014 10:26 AM
11	Assist with rotary tasks and with the hospital auxillary	4/18/2014 1:44 PM
12	help as much a physically able with scouts and childrens school	4/18/2014 8:33 AM
13	I run my own business and serve as an elected member and on numerous committees, no time to squeeze other volunteer work in.	4/17/2014 8:31 PM
14	Voluntary community work	4/17/2014 5:39 PM
15	within the realm of my work	4/17/2014 1:16 PM

Whyalla Aged and Disability Care Masterplan

Q5 I live ...

Answered: 198 Skipped: 4



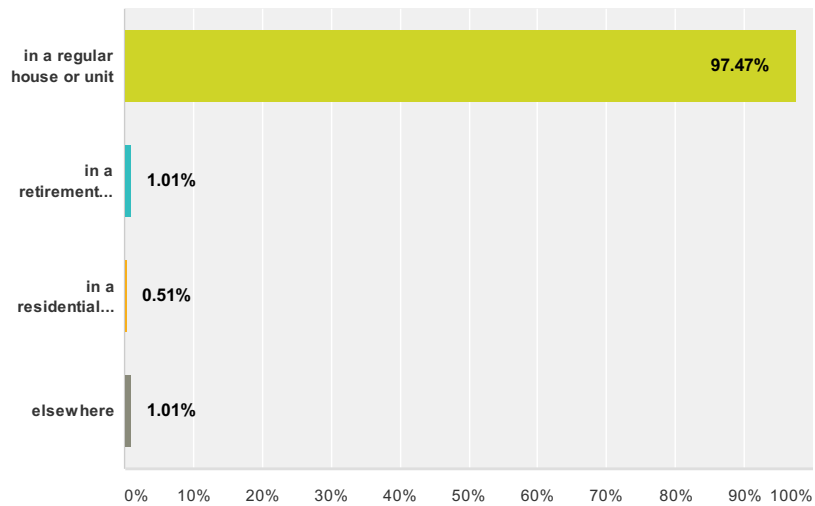
Answer Choices	Responses
in Whyalla	95.96% 190
within 30 minutes of Whyalla	1.01% 2
more than 30 minutes from Whyalla	3.03% 6
Total	198

#	Comments	Date
1	Very happy living in Whyalla - so friendly	7/13/2014 7:13 PM
2	Born in Whyalla and have lived here all of my life	4/18/2014 1:44 PM
3	Have done so all my life and will stay in Whyalla when I retire and use it as a base to travel health permitting.	4/17/2014 8:31 PM

Whyalla Aged and Disability Care Masterplan

Q6 I live ...

Answered: 198 Skipped: 4



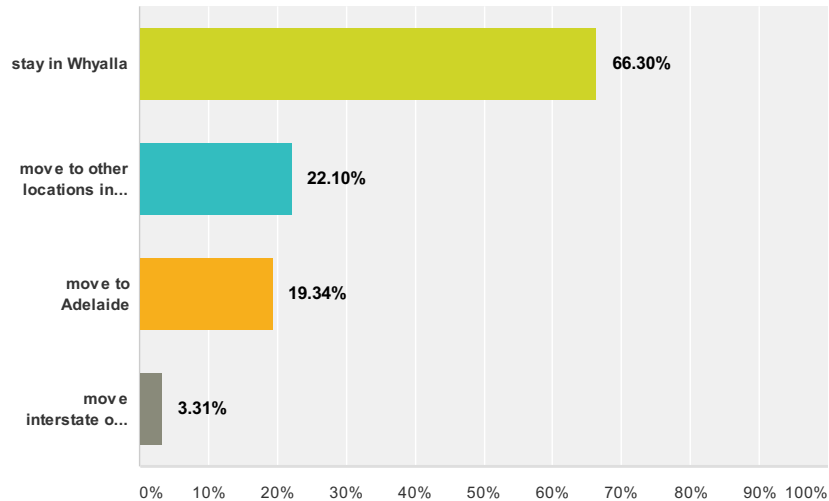
Answer Choices	Responses
in a regular house or unit	97.47% 193
in a retirement village	1.01% 2
in a residential aged care facility	0.51% 1
elsewhere	1.01% 2
Total	198

#	Comments	Date
1	I would like less garden, more cupboards	7/13/2014 7:13 PM
2	Housing trust two bedroom unit.	4/28/2014 11:50 AM
3	we own it!	4/27/2014 5:52 PM
4	Have owned our home for many years now, and hope to keep it that way	4/27/2014 4:49 PM
5	Housing Trust House	4/27/2014 4:09 PM
6	Own our home	4/18/2014 1:44 PM
7	I lived in our current home for 31 years but will in the near future consider down sizing	4/17/2014 8:31 PM

Whyalla Aged and Disability Care Masterplan

Q7 In my experience, when Whyalla residents retire, they generally ...

Answered: 181 Skipped: 21



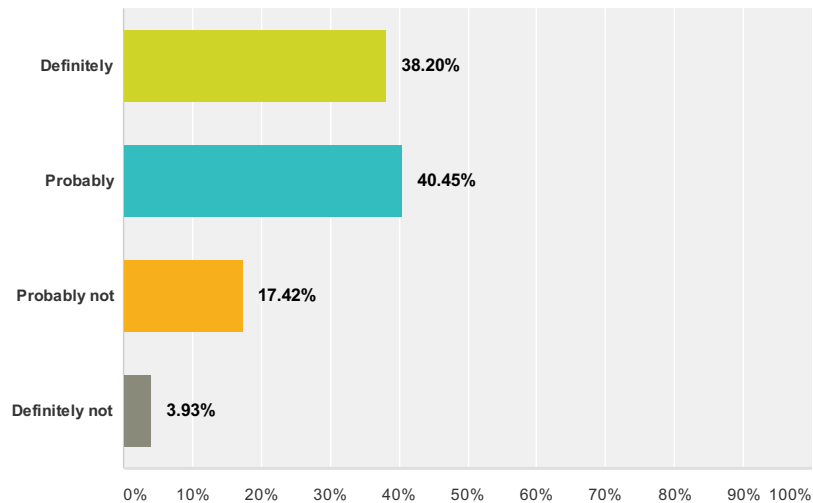
Answer Choices	Responses
stay in Whyalla	66.30% 120
move to other locations in country South Australia	22.10% 40
move to Adelaide	19.34% 35
move interstate or overseas	3.31% 6
Total Respondents: 181	

#	Comments	Date
1	Sometimes other country locations.	7/14/2014 6:51 PM
2	But I choose to stay in Whyalla	7/13/2014 7:19 PM
3	They make a living here, then move	7/13/2014 7:15 PM
4	I moved to Whyalla 4 years ago to live near my son	4/28/2014 9:54 AM
5	there not enough vacants spots, which sadly move from whyalla away from the sounderings and family and friends its so sad.	4/27/2014 9:10 PM
6	whyalla needs more accommodation for older ppl	4/27/2014 7:03 PM
7	Really don't know because I have not been here long enough.	4/27/2014 5:41 PM
8	? I'm not sure of the numbers. I know some who have moved either to Adelaide or other regional locations.	4/27/2014 1:39 PM
9	An increasing proportion retire in Whyalla	4/22/2014 5:49 PM
10	Some that move elsewhere often return to Whyalla	4/18/2014 1:49 PM
11	The answer is 'all of the above'.	4/18/2014 11:15 AM
12	It's quite a split there seems to be more opting to stay in Whyalla and I think that has something to do with today's high price in homes in the nicer areas of Adelaide	4/17/2014 8:37 PM
13	generally moved where their children/grandchildren live which has been mostly Adelaide	4/17/2014 4:35 PM
14	I do not know, I have only lived in Whyalla since August and outside of work, i have met no-one	4/17/2014 10:40 AM
15	They travel around Australia a bit too	4/17/2014 10:26 AM
16	All of the above	4/3/2014 2:18 PM
17	Majority stay in Whyalla however some do go to Adelaide	4/1/2014 3:54 PM
18	Both are true. Depending on whether their children have found jobs in Whyalla.	3/23/2014 6:51 AM
19	Quiet often planned early in life when getting children set up in Adelaide for education Uni	3/21/2014 12:50 PM

Whyalla Aged and Disability Care Masterplan

Q8 Do you intend to stay in Whyalla when you retire?

Answered: 178 Skipped: 24



Answer Choices	Responses
Definitely	38.20% 68
Probably	40.45% 72
Probably not	17.42% 31
Definitely not	3.93% 7
Total	178

#	Why? Why not?	Date
1	I live at Kingston-on-Murray in the Riverland. If my husband dies before me I will move back to Whyalla. My children etc. are here. Also I lived in Whyalla for 40 yrs	7/14/2014 4:12 PM
2	I was bom in Whyalla and I've lived here most of my life.	7/14/2014 4:03 PM
3	Been here for 40 years for my husband's work. I didn't want to come, would like more places for entertainment for seniors	7/13/2014 7:15 PM
4	Family, life style.	5/8/2014 9:09 PM
5	The nature of my partners career sees us move around the country.	5/6/2014 6:23 PM
6	I see my retirement as being a sea change after living all my life in Whyalla.	4/30/2014 8:15 AM
7	Already retired	4/29/2014 4:48 PM
8	I like the people I have met here.	4/29/2014 2:08 PM
9	not originally from here, no family here	4/29/2014 10:20 AM
10	Family lives here	4/28/2014 10:27 PM
11	My husband has lived here all his 75 years and would find it too difficult to move, besides which we have most of our medical needs here. Our family lives here.	4/28/2014 2:10 PM
12	Have family here	4/28/2014 1:13 PM
13	family	4/28/2014 12:54 PM
14	family friends and love it	4/28/2014 11:41 AM
15	My family is here	4/28/2014 11:27 AM
16	Because it's a nice place to live, grown up here and everything I need is here	4/28/2014 10:52 AM
17	I have good friends here, my son lives next door, my unit is manageable and I like living in small country towns where everything is conveniently located within a ten minute drive	4/28/2014 9:54 AM
18	well I dont know my future will be if I had a crystal ball I would know where I be. If they keep increasing retire we all be dying on the job.	4/27/2014 9:10 PM
19	Depends on the affordability and convenience	4/27/2014 8:18 PM
20	whyalla is a over rated dump.. the rental prices here are an absolute joke ! house prices are totally ridiculous . the dumps that they are trying to sell for the prices!! mining boom . what mining boom ,, there was never a mining boom ! i run my own business and every thing has gone up with this none existent mining boom we had !! not every one works in the mines.. ive been her 32 years . stuck with the town when things were bad .. first chance i get . iam out of here !!	4/27/2014 7:03 PM
21	Depends on some family decisions ie children and their families moving here.	4/27/2014 5:41 PM
22	Home is here	4/27/2014 5:12 PM
23	Looking for a sea-change	4/27/2014 4:51 PM
24	Been here a long time, have friends in the town, I like it here	4/27/2014 4:02 PM
25	Assuming my parents die before me I'll not have any assistance if I stay	4/27/2014 3:58 PM

Whyalla Aged and Disability Care Masterplan

26	Love Climate, have many friends, Facilities usually available for my needs as I age	4/27/2014 2:50 PM
27	Im comfitable living in a smaller town and whyalla has everything ineed	4/27/2014 2:28 PM
28	facilities are not good - would have to travel regularly to Adelaide if need medical treatment.. Rather than sending patients to Adelaide, Specialist doctors should travel to whyalla ! more cost efficient to get 1-2 people coming here than 10 going to Adelaide	4/27/2014 2:17 PM
29	At least for a while. Inertia will probably keep us here for a bit. We do have family back in Adelaide, however. We sometimes worry about access to health facilities in our declining years, but they seem to be improving here, and it's certainly a lot easier to get to them than in the city.	4/27/2014 1:39 PM
30	As long as my family (daughter and grand children)are here My wife and I will stay, but should they move, we will probably move to Adelaide	4/23/2014 4:53 PM
31	All my family is here but if my child moves away, I would consider moving also.	4/23/2014 1:00 PM
32	Whyalla has most things we need in the way of services and also we have family that live here. Whyalla is a good place to live.	4/23/2014 12:53 PM
33	Have family in other country areas of SA and would most probably move closer to them.	4/23/2014 12:05 PM
34	I am already retired	4/23/2014 10:59 AM
35	I am not originally from here. I have lived here now for 14 years.	4/22/2014 12:16 PM
36	Lack of coastal development	4/22/2014 11:44 AM
37	We are here for work and will probably live here for the next 5 years or so	4/22/2014 10:48 AM
38	That is a long way away, but my husband's family is here so we will probably stay.	4/22/2014 10:36 AM
39	Too far away at the moment, haven't really thought about it.	4/19/2014 12:11 AM
40	I anticipate I wil move to where my kidsup living g	4/18/2014 6:34 PM
41	I plan to return to Qld, my home state, where I have my retirement unit in Noosa.	4/18/2014 11:15 AM
42	wont have enough money to go else where	4/18/2014 8:36 AM
43	Providing my health doesn't require me to move to Adelaide We love it here in Whyalla, 35 min flight to Adelaide, 4 hour road trip so if one wants to travel Whyalla is well sited.	4/17/2014 8:37 PM
44	Do not know what to do as I have no family living in Whyalla now.	4/17/2014 8:35 PM
45	I like the pace of Whyalla and don't like big cities - I have spent 20 years in remote Australia but Whyalla is close enough to Adelaide if I want to attend anything there.	4/17/2014 12:25 PM
46	Family in Adelaide	4/17/2014 11:16 AM
47	My family are living in Brisbane, this is where my friends live	4/17/2014 10:40 AM
48	I probably would stay, it also just depends on what I have done with my life before retirement	4/17/2014 10:26 AM
49	I will move closer to my family	4/8/2014 10:11 AM
50	most friends have moved to Adelaide more medical facilities in Adelaide. Even with full medical cover still have long wait for specialist in Whyalla	4/7/2014 2:54 PM
51	Family	4/4/2014 4:40 PM
52	to remain near family	4/4/2014 1:57 PM
53	Family reasons	4/3/2014 5:19 PM
54	Family in Adelaide	4/3/2014 11:16 AM
55	There are no provisions or services available for my daughter to live in supported housing in Whyalla, so my husband and I plan to move to Adelaide where these services are available when she leaves school.	4/3/2014 11:08 AM
56	I own my home and my son and grandchildren are here. Ease of movement around Whyalla. Vastle improved medical facilities.	4/2/2014 2:27 PM
57	Unsure	4/2/2014 10:00 AM
58	Don't believe one can follow the family. Have a great supportive friendship circle in Whyalla; own our home; ease of travel within Whyalla; good health services from local GP's and allied health facilities; all interests/hobbies within Whyalla	4/1/2014 3:54 PM
59	Would like to travel and then settle somewhere smaller	4/1/2014 10:17 AM
60	Haven't found anywhere else I'd rather live!!!!!!!!!!!!!!	3/27/2014 6:19 PM
61	Here for work at the moment, have found Whyalla a good place to live and work. Not sure yet if it will be a good place to retire and if accommodation and services will be adequate.	3/24/2014 9:14 AM
62	If we are healthy enough we would like to travel.	3/23/2014 6:51 AM
63	There is nothing here to offer ppl	3/22/2014 1:55 PM
64	We initially were very committed on retirement to staying in Whyalla for life .Over the last ten years the ongoing direction of Local Govt and State Govt to degrade /industrialise the Point Lowly and the Northern coastline has made us unsettled and we continue to actively look at other options.	3/21/2014 12:50 PM

Whyalla Aged and Disability Care Masterplan

Q9 Thinking about your retirement, what are the most important factors that would lead you to stay in Whyalla when you retire?

Answered: 156 Skipped: 46

#	Responses	Date
1	Never thought about leaving, lived here 54 yrs in same house	7/14/2014 5:15 PM
2	I have all my family & friends here	7/14/2014 4:12 PM
3	Don't want to pack up my unit	7/14/2014 4:06 PM
4	I'm familiar with buses, I've friends here	7/14/2014 4:03 PM
5	As above, more outings, coach tours	7/13/2014 7:15 PM
6	Specialists - health	7/13/2014 7:09 PM
7	Good medical facilities, public transport and the climate.	5/19/2014 10:59 AM
8	accessability to health services	5/12/2014 12:46 PM
9	As above.	5/8/2014 9:09 PM
10	Own my own house.	5/7/2014 5:24 PM
11	* Access to a wide range of medical facilities, doctors and specialists. * Easy access to public transport, shops, etc	5/6/2014 6:23 PM
12	Family, Appropriate Health and ancillary services, quality retirement village, accessibility to public transport to Adelaide	4/30/2014 5:00 PM
13	As I have already retired this does not fully apply. But the lifestyle, the ease of moving around, some family living here, has all the facilities we need	4/30/2014 10:59 AM
14	lifestyle, Family , Friends	4/30/2014 9:27 AM
15	Health Services, Hospital	4/30/2014 8:15 AM
16	hospital servises easy access to all i need	4/29/2014 7:32 PM
17	hospital services and short travelling to everything I need	4/29/2014 6:56 PM
18	Family	4/29/2014 4:49 PM
19	Quiet / reasonable services / easy to get around / by the sea	4/29/2014 4:48 PM
20	Friends, and the friendships you make here.	4/29/2014 2:08 PM
21	My family is still living in Whyalla	4/29/2014 1:08 PM
22	Ease of access to health care. Adequate health & aged care services. Availability of public transport.	4/29/2014 11:50 AM
23	support groups, financial aid, hospital (doctor) access	4/29/2014 10:20 AM
24	ease of getting about to all facilities eg library, boat ramp, hospital, doctor, shopping (all within a few minutes without traffic congestion)	4/28/2014 10:27 PM
25	Medical services	4/28/2014 10:27 PM
26	Living with my son.	4/28/2014 9:25 PM
27	already retired	4/28/2014 9:16 PM
28	the people are great, very friendly mostly caring & look after one & other, great place to live	4/28/2014 8:55 PM
29	getting my old age pension and the new hospital	4/28/2014 6:23 PM
30	Whya;;a has all sports to enjoy, in particular lawn bowls for which I enjoy	4/28/2014 5:41 PM
31	Family in Whyalla	4/28/2014 4:56 PM
32	close facilities such as shops, can be anywhere in Whyalla within 10 minutes of home.	4/28/2014 4:19 PM
33	retirement village or similar	4/28/2014 4:19 PM
34	love the area and my friends are here	4/28/2014 2:14 PM
35	Health care facilities, shopping, aged care facilities	4/28/2014 1:13 PM
36	family	4/28/2014 12:54 PM
37	I like the easy going lifestyle and the quiet country atmosphere and the ease of getting from one place to another in Whyalla.	4/28/2014 11:52 AM
38	Ease of moving around the town, my family is here, close to the sea.	4/28/2014 11:27 AM
39	Not wanting to stay in Whyalla	4/28/2014 11:22 AM
40	Family	4/28/2014 10:52 AM
41	ccost of living and health facilities available	4/28/2014 10:21 AM
42	See question 8	4/28/2014 9:54 AM
43	accessible health care, family, recreational social and entertainment options	4/27/2014 11:18 PM
44	firstly I would love a job so I can say I retire, cost of living would be 1. weather there enough services that are needed for the care.	4/27/2014 9:10 PM
45	Affordability Convenience	4/27/2014 8:18 PM
46	cheaper rentals !! cheaper housing .. clean up the back streets of whyalla.. it looks like the bronks	4/27/2014 7:03 PM
47	My Home My Life Long Friends	4/27/2014 6:53 PM
48	Easy to drive around	4/27/2014 5:54 PM

Whyalla Aged and Disability Care Masterplan

49	Easier to get around than Adelaide. Also, family lives interstate .	4/27/2014 5:42 PM
50	I like my house, I like the improvements that are currently being undertaken here, close to beach, lots of facilities, easy shopping, very little traffic.	4/27/2014 5:41 PM
51	Family	4/27/2014 5:19 PM
52	Friends and contacts built up over the years	4/27/2014 5:12 PM
53	We need a good hospital system, which is currently happening, not happy about the 'new' type doctor clinics happening around Whyalla	4/27/2014 4:51 PM
54	Have all that I need	4/27/2014 4:51 PM
55	Good facilities such as shops, businesses and places to relax in	4/27/2014 4:02 PM
56	Appropriate support	4/27/2014 3:58 PM
57	Purchased home. Family	4/27/2014 3:51 PM
58	Having access to aged care facilities especially aged care homes when I need them	4/27/2014 2:50 PM
59	Traveling time to anywhere in Whyalla (not far from anything)	4/27/2014 2:48 PM
60	Good health specialist, option for retirement living near beach, cafes, options for group travel	4/27/2014 2:29 PM
61	Good Aged care facilities that are self sufficient	4/27/2014 2:17 PM
62	hospital and doctors; care when unable to	4/27/2014 2:17 PM
63	Facilities like a hospital that is staffed by MEDICAL PRACTITIONERS, CURRENTLY IT IS ONLY A FANCY FIRST AID CENTRE.	4/27/2014 2:16 PM
64	Better DISABILITY services ie residential care for the DISABLED	4/27/2014 1:40 PM
65	Being able to access needed services; familiarity; network of friends and acquaintances; less traffic and noise to contend with; less worries about people knocking down heritage buildings.	4/27/2014 1:39 PM
66	lifestyle and many friends and acquaintances.	4/24/2014 2:10 AM
67	health and medical care, aged care option	4/23/2014 10:23 PM
68	Family, easy life style, has all that I need and is close enough to Adelaide for major health care and specialist shopping. Also a great home base for travel (Aus or Overseas).	4/23/2014 9:32 PM
69	Family, ease of living.	4/23/2014 4:53 PM
70	If my family were to stay here.	4/23/2014 2:57 PM
71	Cheap and easy access to facilities/services.	4/23/2014 1:00 PM
72	Family and friends being here. Health facilities are available. Church involvement. Shopping is pretty good.	4/23/2014 12:53 PM
73	Significant growth within and around Whyalla	4/23/2014 12:05 PM
74	The cost of shifting	4/23/2014 10:59 AM
75	medical and support facilities being available	4/23/2014 10:27 AM
76	Convenience and family	4/23/2014 9:29 AM
77	Family and lifestyle	4/22/2014 5:49 PM
78	Good health services, pleasant surroundings, well kept and accessible community areas, safe community (low crime).	4/22/2014 4:25 PM
79	Access to medical facilities, access to housing and support services available	4/22/2014 2:55 PM
80	facilities and care	4/22/2014 2:02 PM
81	Age appropriate community programs and clubs to join. Family being in Whyalla, if they are not then the cost of airfares to and from Adelaide should be more affordable.	4/22/2014 1:15 PM
82	Facilities, health, comfort, family	4/22/2014 12:30 PM
83	Cost and availability	4/22/2014 12:16 PM
84	Coastal development & Lifestyle	4/22/2014 11:44 AM
85	aged care, better health care infrastructure and facilities	4/22/2014 11:26 AM
86	plenty of places in the retirement village adequate care	4/22/2014 10:48 AM
87	Family and children	4/22/2014 10:36 AM
88	having a safe, supported community to live in. having access to home support services should the need arise and of course the availability of specialist services in a timely manner.	4/22/2014 10:28 AM
89	a nice retirement village (if required), great health services and most importantly my family	4/22/2014 10:08 AM
90	It would mean I could be close to my family.	4/22/2014 9:41 AM
91	I have lived here most my life - and I enjoy my lifestyle and friendship base here.	4/21/2014 10:59 PM
92	Family and proper medical care	4/21/2014 2:00 PM
93	What benefits Whyalla has compared to other centres.	4/19/2014 10:30 AM
94	Where our children are, our state of health, the quality of medical services available.	4/19/2014 12:11 AM
95	ease of life style	4/18/2014 9:04 PM
96	Appropriate aged care facilities - in that there are enough beds to cater, they are dementia friendly and homely and that I will not be forced to go out of town. I also wish for more retirement villages that are within an aged person's budget, with accessible transport close to it, and a range of in home support services that you do not need to jump through hoops to get	4/18/2014 6:34 PM
97	my family and friends	4/18/2014 3:36 PM
98	Many of our relatives live live in Whyalla and lots of friends	4/18/2014 1:49 PM
99	Necessary accommodation and activities.	4/18/2014 11:15 AM
100	it's the kids home and they might want us here	4/18/2014 8:36 AM

Whyalla Aged and Disability Care Masterplan

101	Fishing and friends	4/18/2014 2:52 AM
102	Proximity of family and friends. Access to beach for launching kayaks and ramp for launching boats.	4/17/2014 9:38 PM
103	A secure independent village type accommadation (nothing to do with or attached to a nursing home facility) similar to that in Moonta , Adelaide suburbs and in a nice location within Whyalla not stuck out around Westlands .,	4/17/2014 8:37 PM
104	Suitable accommodation which would suit my needs.	4/17/2014 8:35 PM
105	Easy access to medical services and a good hospital	4/17/2014 6:08 PM
106	good public bus system a good health system visiting health specialists	4/17/2014 6:01 PM
107	Up-to-date facilities	4/17/2014 5:55 PM
108	Good, close knit community.	4/17/2014 5:44 PM
109	Good Health Services Good Shopping Good Transport & Leisure Services	4/17/2014 5:41 PM
110	by the ocean, close to a hospital although at times you cant get a doctor here when you go to the emergency room	4/17/2014 4:35 PM
111	Access to a nursing village and not being tranferred from Whyalla	4/17/2014 3:15 PM
112	Family, Hospital,	4/17/2014 1:54 PM
113	family	4/17/2014 1:26 PM
114	Quality Hospital services and Doctors. Good Community events and outlets to become a part of such as Oronga.	4/17/2014 1:18 PM
115	all my friends are here and no traffic congestion	4/17/2014 1:03 PM
116	Services medical and recreational	4/17/2014 12:59 PM
117	Access to a retirement village	4/17/2014 12:56 PM
118	Improved hospital / medical services. Full aged care services e.g. home care with showering, cleaning, meals, escorts / assistance to appointments etc Assistance financially to medical appointments in Adelaide	4/17/2014 12:25 PM
119	Activities for the aged. A hospital where you can acquire the services of a doctor/ specialist.	4/17/2014 11:55 AM
120	Suitable accommodation and services	4/17/2014 11:16 AM
121	Friends	4/17/2014 10:53 AM
122	I would not	4/17/2014 10:40 AM
123	I think just the fact its a nice little town, doesnt take you long to get where you need to be.	4/17/2014 10:26 AM
124	support services to live at home	4/17/2014 10:13 AM
125	Have a shack - All Family and Friends live here. Also have a buisness here as well.	4/17/2014 9:50 AM
126	friends, family, facilities	4/17/2014 8:54 AM
127	Know the town and its facilities Cost of living is reasonable Recreational facilities at my doorstep. Health system is improving	4/16/2014 11:37 PM
128	Local community, cost factors	4/13/2014 11:53 AM
129	Medical services Liveability Retail General maintainence services Age care housing and services	4/12/2014 5:48 PM
130	long time resident	4/11/2014 5:47 PM
131	Access to Health Services Transport	4/9/2014 2:30 PM
132	Facilities in health care, home security, decent shopping facilities.	4/8/2014 2:25 PM
133	If my family remain in Whyalla	4/8/2014 10:11 AM
134	Better medical services, not having to wait 10 weeks to see a specialist while paying over 500.00 mth in medical insurance	4/7/2014 2:54 PM
135	Friends are here. I can see the Church, the shopping centre from our house. Doc's surgery is on our street.	4/7/2014 11:13 AM
136	Family, easy access to most services.	4/4/2014 4:40 PM
137	see above	4/4/2014 1:57 PM
138	Better climate. More diversity in shopping stores. Whyalla is limited Improved healthcare facilities. Coastal recreation areas Increased policing Honest, accountable council. More transport for disabled.	4/3/2014 5:19 PM
139	Because we can't afford to leave. The proceeds from the sale of the house would not be enough to buy a house elsewhere	4/3/2014 4:24 PM
140	Close to friends and family. Ease of travel through community, some health services	4/3/2014 2:18 PM
141	The easy pace and lifestyle.	4/3/2014 1:29 PM
142	Good health services. Recreational activities such as golf and fishing. Family nearby.	4/3/2014 12:14 PM
143	Services and support for child with special needs	4/3/2014 11:16 AM
144	Appropriate services for my daughter. We have extended family and a very supportive community in Whyalla but without specific services to support my daughter we would be forced to leave so that she can live independantly from us.	4/3/2014 11:08 AM
145	Appropriate facilities and care for senior residents	4/3/2014 10:51 AM
146	Home & family	4/2/2014 2:27 PM
147	Family, friends, lifestyle, facilities	4/2/2014 10:00 AM
148	Own their home, can't afford to move, family in Whyalla, Friendship circle in Whyalla, activities that they are involved in in Whyalla, good health care services compared to Adelaide; ease of travelling within Whyalla; good weather (mostly!); bus services available to travel to other towns (or plane if one can afford it); affordability; arts & entertainment eg theatre etc visit Whyalla	4/1/2014 3:54 PM
149	Familiar surrounding Friends Family	4/1/2014 10:17 AM
150	The easy lifestyle. Access to medical facilities i.e. I have nearly always been satisfied with my treatment. The climate and friends.	3/27/2014 6:19 PM
151	A good place to live, good amenity relatively inexpensive place to live	3/24/2014 9:14 AM
152	Family	3/24/2014 2:41 AM
153	Family and friends	3/23/2014 12:51 PM

Whyalla Aged and Disability Care Masterplan

154	They own their own home. Their children have jobs here. They are not healthy enough to move.	3/23/2014 6:51 AM
155	Family	3/22/2014 1:55 PM
156	Friends and network established in Whyalla . Country lifestyle with significant health and general services available. They are in Whyalla and time and or cost to move is a burden	3/21/2014 12:50 PM

Whyalla Aged and Disability Care Masterplan

Q10 Thinking about your retirement, what are the most important factors that would move you to leave Whyalla when you retire?

Answered: 144 Skipped: 58

#	Responses	Date
1	I wouldn't want to leave	7/14/2014 4:12 PM
2	None	7/14/2014 4:06 PM
3	Specialists - health	7/13/2014 7:09 PM
4	Lack of the above	5/19/2014 10:59 AM
5	lack of health facilities	5/12/2014 12:46 PM
6	Family moving.	5/8/2014 9:09 PM
7	If my family members were to move elsewhere.	5/7/2014 5:24 PM
8	Location of family, friends and primary support networks.	5/6/2014 6:23 PM
9	unavailability of the above	4/30/2014 5:00 PM
10	Medical treatment	4/30/2014 10:59 AM
11	Sea Change	4/30/2014 9:27 AM
12	Lack of Whyalla council services, Transport	4/30/2014 8:15 AM
13	none	4/29/2014 7:32 PM
14	none	4/29/2014 6:56 PM
15	Being closer to kids	4/29/2014 4:49 PM
16	If anything happens to my family.	4/29/2014 2:08 PM
17	Not being able to access suitable health care locally.	4/29/2014 11:50 AM
18	lack of medical specialists	4/29/2014 10:20 AM
19	if those facilities were not so readily or easily available. Family factors may influence decisions.	4/28/2014 10:27 PM
20	Same as above.	4/28/2014 9:25 PM
21	already retired	4/28/2014 9:16 PM
22	Family, when children were young they had to move to other states for employment.	4/28/2014 5:41 PM
23	Close to facilities.	4/28/2014 4:19 PM
24	housing	4/28/2014 4:19 PM
25	nothing	4/28/2014 2:14 PM
26	Lack of aged care facilities	4/28/2014 1:13 PM
27	health	4/28/2014 12:54 PM
28	If most of my family left I'd follow them.	4/28/2014 11:52 AM
29	Move closer to the sea where land and house prices are cheaper.	4/28/2014 11:27 AM
30	Wanting to move closer to universities and big city with direct flight to South Africa	4/28/2014 11:22 AM
31	Family	4/28/2014 10:52 AM
32	reducton in health facilities	4/28/2014 10:21 AM
33	Can't think of any at this stage unless the water supply ran out	4/28/2014 9:54 AM
34	Closer to children and grandies	4/28/2014 9:36 AM
35	health care, family, recreational social and entertainment options	4/27/2014 11:18 PM
36	My dead husband was going to retire and live in the Barossa Valley, some how I do not think that is going to happen.	4/27/2014 9:10 PM
37	Affordability Convenience	4/27/2014 8:18 PM
38	cheaper accommodation	4/27/2014 7:03 PM
39	NONE	4/27/2014 6:53 PM
40	Frightening the thought of having to drive around	4/27/2014 5:54 PM
41	A reduction in medical services.	4/27/2014 5:42 PM
42	Family, health issues.	4/27/2014 5:41 PM
43	Family	4/27/2014 5:12 PM
44	Family, doctor availability,	4/27/2014 4:51 PM
45	Ill health	4/27/2014 4:51 PM
46	To be near the children and grand children	4/27/2014 4:02 PM
47	Needed support and health services	4/27/2014 3:58 PM
48	none	4/27/2014 3:51 PM
49	Not having accessto aged care homes	4/27/2014 2:50 PM

Whyalla Aged and Disability Care Masterplan

50	Family	4/27/2014 2:48 PM
51	Lack of specialist and retirement living acc	4/27/2014 2:29 PM
52	inadequate aged care facilities	4/27/2014 2:17 PM
53	no family here	4/27/2014 2:17 PM
54	As above	4/27/2014 2:16 PM
55	Accommodation for People with DISABILITIES	4/27/2014 1:40 PM
56	Closeness to family and friends; access to cultural events in the capital; possible particular care needs.	4/27/2014 1:39 PM
57	i would have to be drawn out screaming	4/24/2014 2:10 AM
58	lack of health and medical services.	4/23/2014 10:23 PM
59	Family elsewhere. Maybe desire for somewhere, greener, more affluent and closer to (but not in) Adelaide.	4/23/2014 9:32 PM
60	Family moved away or the need for more specialist medical treatment	4/23/2014 4:53 PM
61	I have 4 children I would like to see things like Roxby Expansion etc be guaranteed so there may be a chance that they would be nearby in the future so we could be close to grandchildren etc, but if they ended up moving for employment we would probably base ourselves in Adelaide to be able to easily fly in and out to visit them and likewise for them. Also with guaranteed employment like Mining etc it improves the Infrastructure around where you live which gives business much chance to be successful etc	4/23/2014 2:57 PM
62	Family or services not available.	4/23/2014 1:00 PM
63	If all my family moved and I needed to be close to one of them for support.	4/23/2014 12:53 PM
64	The continued decline in services	4/23/2014 12:05 PM
65	lack of services or family support	4/23/2014 10:27 AM
66	Health. I would move to an area where the facilities were more efficient for my situation/needs	4/23/2014 9:29 AM
67	limited activities, functions or services	4/22/2014 4:25 PM
68	Access to support services	4/22/2014 2:55 PM
69	health and necessary facilities, family	4/22/2014 2:02 PM
70	Family not being in Whyalla and not having enough to do in the town.	4/22/2014 1:15 PM
71	sea change, family	4/22/2014 12:30 PM
72	Move to somewhere not a mining town	4/22/2014 12:16 PM
73	Seeking Coastal living & laidback Lifestyle	4/22/2014 11:44 AM
74	health and aged care	4/22/2014 11:26 AM
75	Family and children	4/22/2014 10:36 AM
76	sickness or disability and the support not being readily available here.	4/22/2014 10:28 AM
77	same reasons above (if whyalla couldn't provide them)	4/22/2014 10:08 AM
78	Would leave Whyalla only if my children left.	4/22/2014 9:41 AM
79	Family Health issues	4/21/2014 10:59 PM
80	If unable to get proper medical care	4/21/2014 2:00 PM
81	Medical facilities, Local Government and Council keeping a commitment to the aging population.	4/19/2014 10:30 AM
82	Health, and lack of quality health care.	4/19/2014 12:11 AM
83	poor health become reliant on others to look after me	4/18/2014 9:04 PM
84	My children	4/18/2014 6:34 PM
85	healthcare	4/18/2014 3:36 PM
86	We will never leave	4/18/2014 1:49 PM
87	Same as 9 above.	4/18/2014 11:15 AM
88	if the kids move away	4/18/2014 8:36 AM
89	Fishing and grandchildren	4/18/2014 2:52 AM
90	If family needed to move away for work. If beach access for kayaks is not improved or boat ramp launching costs became excessive.	4/17/2014 9:38 PM
91	If appropriate housing wasn't available when I am ready to retire or ill health.	4/17/2014 8:37 PM
92	Greater variety of things to do in the city. Easier for children and grandchildren to visit me.	4/17/2014 8:35 PM
93	if the above were to put	4/17/2014 6:01 PM
94	Cost	4/17/2014 5:55 PM
95	Lack of local access to Health specialists, Health care and accommodation for the aged.	4/17/2014 5:44 PM
96	family	4/17/2014 5:44 PM
97	Unsatisfactory Support Services and Health Services. Poor Internet Services	4/17/2014 5:41 PM
98	if my family has moved from Whyalla	4/17/2014 4:35 PM
99	as above	4/17/2014 3:15 PM
100	Family	4/17/2014 1:54 PM
101	family	4/17/2014 1:26 PM
102	If I found an area close to Whyalla that I preferred with good Facilities like Hospitals and Doctors.	4/17/2014 1:18 PM
103	if cost of living got too high	4/17/2014 1:03 PM

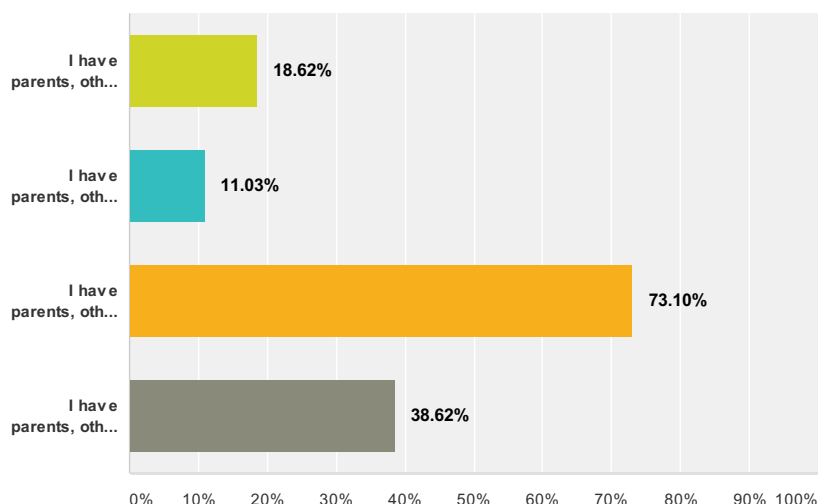
Whyalla Aged and Disability Care Masterplan

104	Services family	4/17/2014 12:59 PM
105	The absence of a retirement village and the necessary health facilities	4/17/2014 12:56 PM
106	Insufficient medical services, lack of financial assistance to choose where I access medical assistance, no available placements in a facility of my choosing for Aged Care	4/17/2014 12:25 PM
107	proximity to family, access to accommodation options and services	4/17/2014 11:16 AM
108	family, better facilities eg hospital /specialists , theatre, restaurants, closer to international airport (plane cost from Whyalla too expensive)	4/17/2014 10:53 AM
109	Friends and family	4/17/2014 10:40 AM
110	Travelling and wanting to see the world. but Im only 19 so if i travel a fair bit in my before I retire, I would like to just stay here	4/17/2014 10:26 AM
111	no appropriate services	4/17/2014 10:13 AM
112	Having to work till Im 70. As we are supporting more Boat people, and People who dont contribute to society. Aborigines - Back and white - No disrespect Intended.	4/17/2014 9:50 AM
113	n/a	4/17/2014 8:54 AM
114	Children living out of Whyalla as with grand children.	4/16/2014 11:37 PM
115	Family	4/13/2014 11:53 AM
116	Lack of items listed above Degradation of coastal areas and marine environment	4/12/2014 5:48 PM
117	If family left Whyalla	4/11/2014 5:47 PM
118	Children	4/9/2014 2:30 PM
119	to be closer to family living interstate, more services including social and sporting	4/8/2014 4:35 PM
120	Family moving away.	4/8/2014 2:25 PM
121	to be closer to family when they move	4/8/2014 10:11 AM
122	Lack of places close to visit for a couple of hours. In Adelaide you have McLaren Vale, Barossa, Victor Harbour etc could do bus tours if not able to drive. River torrens/cafes somewhere to spend a couple of hours during the day if night time is no longer suitable for going out as you age.	4/7/2014 2:54 PM
123	No thought to leave Whyalla. Have bought burial plot here.	4/7/2014 11:13 AM
124	family moving away	4/4/2014 4:40 PM
125	lack of suitable accommodation and moving to be near family if they have moved away	4/4/2014 1:57 PM
126	family Climate	4/3/2014 5:19 PM
127	Being closer to Adelaide	4/3/2014 4:24 PM
128	Lack of all health services. Distance from other communities and entertainment venues. Heavy industry environment.	4/3/2014 2:18 PM
129	Family and/or specialist medical treatment.	4/3/2014 1:29 PM
130	Family too distant from here.	4/3/2014 12:14 PM
131	Being able to help/support family	4/3/2014 11:16 AM
132	see above.	4/3/2014 11:08 AM
133	Lack of suitable health facilities and assistance for aged care.	4/3/2014 10:51 AM
134	Medical facilities, lifestyle	4/2/2014 2:27 PM
135	Family, friends, lifestyle, facilities	4/2/2014 10:00 AM
136	Family; greater choices entertainment/places to visit etc;	4/1/2014 3:54 PM
137	More support facilities and services in the city	4/1/2014 10:17 AM
138	Lack of housing for people to "down-size" with smaller yards etc... Going to live closer to children/grandchildren.	3/27/2014 6:19 PM
139	Inadequate Health services, Lack of good quality retirement accommodation, Lack of good quality aged care accommodation, have heard of people having to leave because of a lack of aged care beds, Limited services for self funded retirees	3/24/2014 9:14 AM
140	Medical and Health Family	3/24/2014 2:41 AM
141	Family	3/23/2014 12:51 PM
142	Their children no longer live here. They want to travel. Health Care in Whyalla is limited.	3/23/2014 6:51 AM
143	Services such as medical specialist	3/22/2014 1:55 PM
144	Change for change sake [grass is greener syndrome]. Get closer to family grand children etc. Availability of social and sports in Adelaide. Fed up with Whyalla image of a dirty industrial city. Lack of service retail sector. Lack of short drive , half day easy access get away escapes from Whyalla city .	3/21/2014 12:50 PM

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Q11 With respect to aged care in Whyalla, the following statements are TRUE.

Answered: 145 Skipped: 57



Answer Choices	Responses
I have parents, other family members or close friends who are living in a residential aged care facility	18.62% 27
I have parents, other family members or close friends who are living in a retirement village	11.03% 16
I have parents, other family members or close friends who are living in their own home	73.10% 106
I have parents, other family members or close friends who are living elsewhere	38.62% 56
Total Respondents: 145	

#	Comments	Date
1	My mother was in aged care in Whyalla (Copperhouse Court) before her death and the care was excellent.	5/19/2014 11:00 AM
2	my family is in Adelaide	4/29/2014 4:50 PM
3	Family living close by.	4/29/2014 2:14 PM
4	none of these	4/28/2014 10:28 PM
5	N/A	4/28/2014 9:19 PM
6	I do not have parents living, and do not know of people that close who live in retirement villages	4/28/2014 5:43 PM
7	Mother lived at home due to unable to get residential care despite being assessed as high dependant needs for over a year due to lack of placements	4/28/2014 1:17 PM
8	They live in South Africa	4/28/2014 11:23 AM
9	They will refuse to go living in a nursing home when the time is right	4/27/2014 9:11 PM
10	My Mother, with help from Aged Care, still resides in her SAHT house.	4/27/2014 4:53 PM
11	Close friends that have to leave Whyalla and be shuttled around because there are no beds in aged care facilities	4/27/2014 2:52 PM
12	I have no relatives in Whyalla.	4/27/2014 1:40 PM
13	I have parents in a nursing home in Adelaide.	4/23/2014 4:53 PM
14	But in answering that they are self-funded retirees and not of the age for an aged care facility as yet.	4/23/2014 2:59 PM
15	2 sons 1 daughter and 1 grandchild in Whyalla 1 son and 1 granddaughter in Melbourne	4/22/2014 5:49 PM
16	all live independently	4/21/2014 2:01 PM
17	Parents in own home Uncle in aged care facility with a disability	4/19/2014 12:14 AM
18	Living still in their family home is by choice, family relation in a nursing home in Adelaide, no choice as my aunt has dementia. Living elsewhere by choice.	4/17/2014 8:44 PM
19	Both sets of parents are deceased	4/17/2014 5:41 PM
20	currently there are no beds available at the aged care facility, many Whyalla residents have had to be placed out of town - which is not acceptable	4/17/2014 10:59 AM
21	I do not have any of the above persons living in aged care/retirement villages.	4/9/2014 12:46 PM
22	parents moved to Adelaide to live with my sister when they could no longer remain completely independent and needed specialist medical care	4/8/2014 10:13 AM
23	Do not have parents	4/3/2014 2:22 PM
24	Two brothers with disabilities who live at Amaroo Lodge in Whyalla.	4/3/2014 12:16 PM
25	Mother in Whyalla; Children out-of town	4/1/2014 4:01 PM
26	Moved my Mother into my home to care for her nearly one year ago.	4/1/2014 10:30 AM

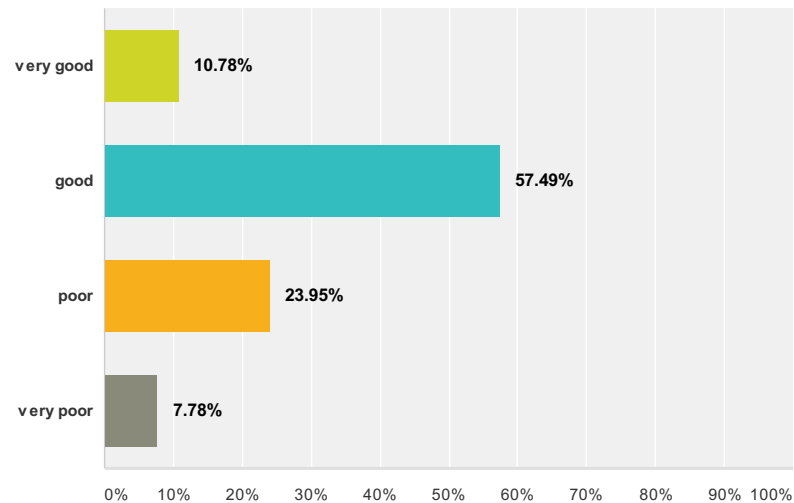
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27	No. 2 They are living in retirement villages OUTSIDE Whyalla No. 4 They are living elsewhere because of family.	3/27/2014 6:29 PM
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Whyalla Aged and Disability Care Masterplan

Q12 I believe that the residential facilities available to older people in Whyalla are:

Answered: 167 Skipped: 35



Answer Choices	Responses
very good	10.78% 18
good	57.49% 96
poor	23.95% 40
very poor	7.78% 13
Total	167

#	What are the important gaps in the facilities available?	Date
1	Stinks, lack of control of residents, minimal doctor's visits to facility.	7/14/2014 6:52 PM
2	Not enough residential facilities for people that do not need care but have to leave their house as it is too big and there is not enough help to maintain it	7/14/2014 5:16 PM
3	Smaller eating places, more private and quiet than at the Westlands, very noisy	7/13/2014 7:15 PM
4	Very little choice of residential facilities.	5/8/2014 9:09 PM
5	Lack of beds shortage of staf and more guv. funding required	5/2/2014 2:59 PM
6	Quality retirement village with home unit independent living and communal facilities (hall or lounge areas, dining room, entertainment)	4/30/2014 5:01 PM
7	not having places available and people needing to go to other towns. I do understand why this happens & I feel the best is done to accommodate these people.	4/30/2014 11:02 AM
8	no high quality low cost retirement villiages	4/29/2014 7:00 PM
9	should expand these facilities	4/29/2014 4:50 PM
10	I think that people in residential care should be able to go out into the community even if it is on picnic in the park.	4/29/2014 2:14 PM
11	Lack of staffing, not that staffing is not provided but that staffing is skeleton staffing only & services are rushed & limited due to funding. Aged care workers do the best they can but are pushed to provide the level of care clients require. I find this survey disappointing in that it focuses on older people requiring care. There should be a facility available where younger people can access full time care facilities, rather than being cared for in aged care eg youngcare. Whyalla is a central location to provide such a facility to local & surrounding communities, even if only for respite. Whyalla could be a leader in providing this care.	4/29/2014 12:29 PM
12	unsure if there is enough secure housing	4/29/2014 10:20 AM
13	no immediate knowledge of any facilities	4/28/2014 10:28 PM
14	N/A	4/28/2014 9:19 PM
15	I believe sometimes people have to be housed in other facilities as there is no room at the time.	4/28/2014 2:11 PM
16	Lack of Availability, very long waiting list	4/28/2014 1:17 PM
17	don't know	4/28/2014 12:55 PM
18	We need a good retirement village in Whyalla for older people. Although I live in a housing trust unit where there are mainly older people living and that's ok too.	4/28/2014 11:56 AM
19	availability	4/28/2014 11:42 AM
20	Provided that the care is available and not having to be sent to towns well outside of Whyalla.	4/28/2014 11:29 AM
21	The one on Newton Street is excellent. Need more like it. There is another one near Viscount Slim Avenue which is like living in a small cell that you can't even see out of. Even the dining room is dark and gloomy. There are other residential units as on Flinders avenue which are also very good. So with one exception my answer to the above question would be Good.	4/28/2014 10:05 AM
22	basically not enough facilities for the elderly, the existing ones are full	4/27/2014 11:22 PM
23	I dont know never been to any sorry	4/27/2014 9:11 PM

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24	No one cares	4/27/2014 6:54 PM
25	Need more beds to stop the backlog into the acute hospitals and sending people out of town while they wait. Lack of supported living retirement villages for the elderly. Poor access to rehabilitation within the residential care facility. No Resusential TCPs in Whyalla.	4/27/2014 6:49 PM
26	The necessity to sell one's property so as to enjoy the benefits of Whyalla's Aged care!	4/27/2014 5:57 PM
27	Not enough beds available. People have to be sent to neighbouring towns.	4/27/2014 5:44 PM
28	No idea because I have not had anything to do with facilities here.	4/27/2014 5:42 PM
29	Very poor communication between one Gov group ie Dom Care to say, Aged care. Having to repeat assessments from our group to another, they can take hours!!	4/27/2014 4:53 PM
30	It is not quality but number that are available	4/27/2014 3:59 PM
31	Lack Of staff ore beds needed for an ageing population	4/27/2014 3:34 PM
32	Beds for aged care-support to stay in your homes longer-there is some but it lacks numbers	4/27/2014 2:52 PM
33	Cant tell,until you live in One	4/27/2014 2:50 PM
34	Not enough options in tpe of acc	4/27/2014 2:30 PM
35	To most of the people who work in the facility -its a job.....needs to be more than a job where they show compassion, walk the extra mile, and CARE for the residents.....Possibly need more Facilities in the future	4/27/2014 2:19 PM
36	need more 'village' type facilities for those still able to care for themselves	4/27/2014 2:18 PM
37	Not enough supported accommodation for younger people with DISABILITIES	4/27/2014 1:42 PM
38	? I don't know a great deal about them.	4/27/2014 1:40 PM
39	general lack of funds	4/24/2014 2:12 AM
40	lack of support to keep aging people at home	4/23/2014 10:24 PM
41	Limited retirement villages, particularly in the 'nicer' areas of the city.	4/23/2014 9:36 PM
42	Lack of variety of options for residential care. A retirement village is required.	4/23/2014 4:53 PM
43	Not enough places available, for people. "waiting lists"	4/23/2014 2:59 PM
44	Capacity, too many aged people have to be cared for at facilities remote from Whyalla	4/22/2014 5:49 PM
45	I believe what is available is good in terms of condition, but from what I have heard availability is an issue. I recently had a family friend who had to be relocated to Adelaide as there were no suitable housing options here. By doing this residents are being taken away from their family and friends and placed where they have not outside support.	4/22/2014 4:30 PM
46	There is not enough available for older people to remain in their own home. I fear that my mother will soon be in an aged care facility because the basic services are not available to keep her at home. for example someone to check on her, help her with her meals and house work, ensure she is taking her medication, helping her with her shopping, getting her out of the house, socialising. There are huge waiting lists and they are difficult to access.	4/22/2014 1:18 PM
47	Unsure	4/22/2014 10:37 AM
48	there aren't enough supported places available so people often have to go elsewhere away from family	4/22/2014 10:29 AM
49	Not enough facilities available in the city which means some old folk are sent to other regional centres for care away from their immediate family.	4/21/2014 11:01 PM
50	Waiting time for a placement is too lengthy.	4/19/2014 10:34 AM
51	Not enough around.	4/19/2014 12:14 AM
52	i don't know	4/18/2014 9:05 PM
53	Being able to get a bed in the first place. I feel they should be more homely too, with creative décor, a exciting menu (not a set rotation), and activities that are of the interest of the residents. .	4/18/2014 6:36 PM
54	but they could do with improvements in places	4/18/2014 3:38 PM
55	Whilst there is good quality care there is not enough capacity for the present let alone for the future demand	4/18/2014 1:52 PM
56	I'm not in a position to comment with good judgement.	4/18/2014 11:17 AM
57	we need more beds available and more trained staff	4/18/2014 8:38 AM
58	The lack of modern facilities e.g. computer games, fun in the care facilities AND the lack of staff and volunteers to help those living there to have access. They don't even fix open busted windows	4/18/2014 2:55 AM
59	High care facilities are under staffed and too many staff do not care enough to administer appropriate health care or stimulation to residents.	4/17/2014 9:44 PM
60	It's not homely, all three facilities smell (whereas my aunties nursing home doesn't smell and is very homely.) Another family member lives in Ashford accommodation and this is like a 5 star hotel/apartment, yes it cost \$K400 but its full its 3 stories and a shame we don't have something like this on a smaller scale in the eastern end of Whyalla .	4/17/2014 8:44 PM
61	Not close to facilities such as coffee shops, library. None offer stimulating community living. I would prefer so, etching like an upmarket backpackers and open to younger people rather than all elderly grouped together.	4/17/2014 8:39 PM
62	More residential facilities are needed, also costs of residing in one are too high	4/17/2014 5:46 PM
63	Lack of age residential accommodation	4/17/2014 5:45 PM
64	Independent Retirement Accommodation	4/17/2014 5:41 PM
65	I actually think that the facilities in Whyalla are average not good, but you don't have this as an option.	4/17/2014 3:16 PM
66	poor staffing and training. Long waiting lists to get care packages and residential living. Many people living with people requiring a lot more care than is being provided by services	4/17/2014 1:29 PM
67	More Retirement Village style accommodation would be valuable.	4/17/2014 1:19 PM
68	as more people get older more facilities will be needed	4/17/2014 1:04 PM
69	The lack of "beds" to cater for older residents needing aged care. At times some residents are moved to other areas for care causing enormous stress to families.	4/17/2014 12:59 PM

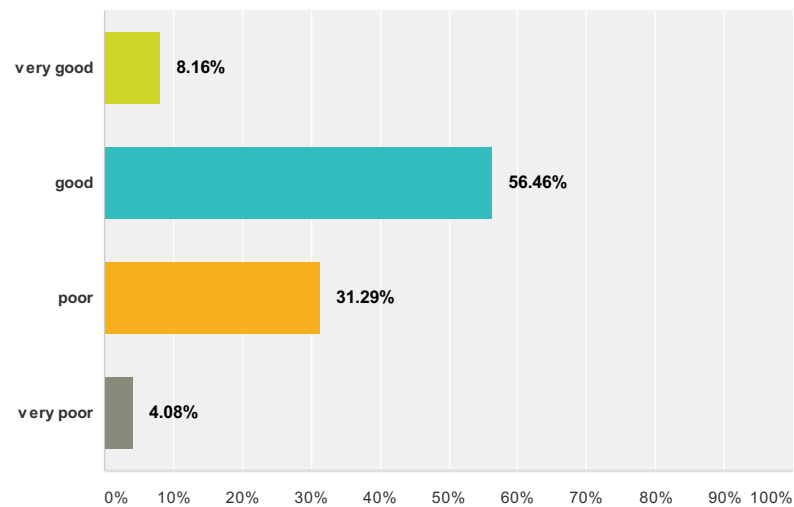
Whyalla Aged and Disability Care Masterplan

70	Staff patient ratios are not good, food provided is poor and no choices available, doctors not happy visiting facilities	4/17/2014 12:27 PM
71	Poor range of options - generally a "one size fits all" model	4/17/2014 11:17 AM
72	Under staffed due to funding - no time to spend with residents - quality time. This is not a reflection on the staff who are under a lot of pressure. This is a Government funding issue, which needs to be addressed. Keeping people at home is another issue, as there are not enough resources put in place to support these people. There are people in our community over 90 years of age, who only receive 2 showers a week - that is the extent of the service provided.	4/17/2014 10:59 AM
73	Average would be closer to my opinion	4/17/2014 10:15 AM
74	Not Sure as never visited.	4/17/2014 9:51 AM
75	Restricted availability in most categories.	4/12/2014 5:54 PM
76	More beds required	4/11/2014 5:48 PM
77	I am not able to say as I have not been in to any of the residential facilities. However I have heard and read that some Whyalla residents requiring aged care cannot be accommodated in aged care homes in Whyalla and have to be sent to other towns which are quite a long distance away from Whyalla, which is not good for the person concerned and relatives that wish to visit that person. I would imagine it would cause a tremendous amount of stress on all concerned.	4/9/2014 12:46 PM
78	affordability	4/8/2014 4:36 PM
79	not enough beds, some carers are in it for the job only	4/8/2014 10:13 AM
80	Not always being able to access the facilities when needed- hear of people being sent to other towns??	4/7/2014 2:55 PM
81	not enough of them	4/4/2014 1:58 PM
82	Very limited. Why do we have to send residents out of town for placements?	4/3/2014 5:22 PM
83	More villages like Village Life is needed	4/3/2014 4:25 PM
84	Not fully familiar with residential facilities. Sufficient support services for home care do not seem to be available to provide care for residents who would like to remain in their own homes.	4/3/2014 2:22 PM
85	Aged care; people need to be able to stay in Whyalla without having first be moved around the state until a bed becomes available.	4/3/2014 1:31 PM
86	Not enough to cater for future needs. Not enough choice.	4/3/2014 12:16 PM
87	A variety of residential options	4/3/2014 11:17 AM
88	I believe that some of the facilities are very tired and out of date.	4/3/2014 11:11 AM
89	not enough facilities, lack of appropriately trained staff, transport, general care and security.	4/3/2014 10:55 AM
90	Too few available.	4/2/2014 2:27 PM
91	More beds in aged care facility OR more intensive home packages to enable people to stay at home as long as possible Desperately need more funding to make aged care more attractive to staff and to employ more staff so they can spend more time with the residents. More cottages such as at Annie Lockwood and Copperhouse for low care people who can still have their privacy and independence Also need more small housing ie 2 bedroom with double garage (car and men's shed) and small back yard.	4/1/2014 4:01 PM
92	We do not have living facilities where people/couples can have their 3 bedroom home, minimal garden; live independently, but have the satisfaction that if something did go awry there would be someone close by that could help. (and would be willing to)	3/27/2014 6:29 PM
93	Good quality accommodation for retirees. I would like facilities like Tumby bay where there is a Marina and good quality modern housing available. There is retirement housing available in Whyalla but this is like much of the existing infrastructure built in the 1960's and 70's and of poor quality.	3/24/2014 9:14 AM
94	Dated and poor design, have not optimised seafront views	3/24/2014 2:43 AM
95	There are not enough residential facilities to cover future needs of Whyalla's "older people".	3/23/2014 12:52 PM
96	There are not enough places!	3/23/2014 6:52 AM
97	Not enough funding to allow the residence to be able to live in these facilities and make it feel like their home, food is disgusting and they don't get a great choice the staff are over worked and/or have been doing it too long and don't see it as an enjoyable job any more just something they do to pay the bills this reflects on the care the staff give to residence, there is a lot of bullying with new staff within whyalla aged care facilities and nothing ever gets done about	3/22/2014 2:00 PM
98	Choice and availability. Choice to move in early and grow into the age care environment rather than leave it until the last minute or until no other option or pushed into aged care facilities. Facilities which would entice /encourage older citizens/couples to move to a nice unit in a nice area with good facilities [shops medical, walks, in the area. Aged care units with a garden for the lady and a shed for the man A little private room to move, a small dog. Maybe room to park/lock up the boat or caravan	3/21/2014 1:00 PM

Whyalla Aged and Disability Care Masterplan

Q13 I believe that the in-home support services available to older people in Whyalla are:

Answered: 147 Skipped: 55



Answer Choices	Responses
very good	8.16% 12
good	56.46% 83
poor	31.29% 46
very poor	4.08% 6
Total	147

#	What are the important gaps in the services available?	Date
1	Don't know as at present can do most ourselves except the garden, but seeing to it	7/13/2014 7:16 PM
2	I know there can be waiting lists. Also it can be difficult for the agencies to find workers as pay is poor and hours are odd.	5/19/2014 11:05 AM
3	Unsure.	5/8/2014 9:09 PM
4	* Lack of federal/state government funding to support in-home service providers. Lack of money means lack of adequately trained service providers to meet demands of the community.	5/6/2014 6:29 PM
5	more needed	5/2/2014 3:00 PM
6	Good when they are accessible to people. eg domiciliary care. I am aware of people who have arranged for domiciliary care services post operative only to have them not arrive.	4/30/2014 5:04 PM
7	Don't know not looked into it	4/30/2014 9:28 AM
8	You would need to look who is doing this support at the moment, and asking them what is in need of.	4/29/2014 2:34 PM
9	no knowledge or experience	4/28/2014 10:29 PM
10	Have not used as yet.	4/28/2014 9:21 PM
11	I do not know	4/28/2014 5:45 PM
12	under 65 affordable short and long time support	4/28/2014 2:01 PM
13	Not enough resources and poor administration	4/28/2014 1:18 PM
14	don't know	4/28/2014 12:56 PM
15	I can't honestly comment on this because so far I haven't needed to use these services.	4/28/2014 11:57 AM
16	availability	4/28/2014 11:43 AM
17	I have marked good but in a lot of cases the support is slow in forthcoming.	4/28/2014 11:39 AM
18	No services on weekends and public holidays	4/28/2014 10:55 AM
19	considering using it shortly but at the present I am going ok	4/27/2014 9:12 PM
20	Need more providers and more packages.	4/27/2014 6:51 PM
21	Some of the carers are wonderful, do a good and thorough job, others leave something to be desired!	4/27/2014 4:56 PM
22	Once again more staff and more money by the government	4/27/2014 3:36 PM
23	Need more regular accessibility to help at home. Maintenance services, food help and general cleaning and hygiene services.	4/27/2014 2:56 PM
24	Needs more staff and time to spend with clients	4/27/2014 2:54 PM
25	Weekends... P/Hdays	4/27/2014 2:52 PM
26	90 plus on waiting list	4/27/2014 2:30 PM
27	need 24hr support	4/27/2014 2:20 PM

Whyalla Aged and Disability Care Masterplan

28	Don't know	4/27/2014 2:18 PM
29	I don't know much about these. I know there is the availability of Meals on Wheels; pharmacy medications review visits; Telecross to call to check on people.	4/27/2014 1:42 PM
30	not enough hours per clients, not all carers are compassionate or suitable for the work	4/23/2014 10:25 PM
31	Not enough packages available in town, consequently I understand there is a waiting list for these services	4/23/2014 4:53 PM
32	Don't know	4/23/2014 2:59 PM
33	However, I believe there is a waiting list for services which is not good. More packages need to be made available to meet our community needs.	4/23/2014 12:58 PM
34	I am not aware of the services available and unable to comment	4/23/2014 12:06 PM
35	small maintenance jobs that are difficult for the elderly, ie changing light globes	4/23/2014 10:28 AM
36	I am not really familiar with all the services that are available	4/22/2014 5:49 PM
37	waiting lists	4/22/2014 1:19 PM
38	mental health support	4/22/2014 10:49 AM
39	Unsure	4/22/2014 10:37 AM
40	mainstream programs are good, however, there isn't enough time in a 'package of care' to support 1:1. Domiciliary care ie: equipment is fair to good. services for aged Aboriginal people are currently poor and people do not receive the same support as they would in mainstream.	4/22/2014 10:34 AM
41	Unaware of what is available.	4/19/2014 10:35 AM
42	I work in community health, definitely a massive shortage in home care packages ACAT level 1 and 2.	4/19/2014 12:18 AM
43	i don't know	4/18/2014 9:06 PM
44	I believe the support they get is great, but I tick poor as there are not enough packages	4/18/2014 6:37 PM
45	you have to wait for to long for support and can only get a few hrs a week if you are eligible.	4/18/2014 3:39 PM
46	There is a need for more in home personal carers	4/18/2014 1:56 PM
47	not enough people to do the work that is needed	4/18/2014 8:39 AM
48	I don't know much about it	4/18/2014 2:55 AM
49	I have a 97 y/o invalid mother living alone and house cleaning is the only service offered. The quality of service is very poor and is not frequent enough. She is expected to move furniture to make it easier for the cleaners and prevent cleaners from straining themselves. What a joke!!! A 97 y/o can do it but not a young healthy cleaner. Why bother at all.	4/17/2014 9:53 PM
50	They don't have enough staff with the growing aged in Whyalla so therefore they cannot offer further services.	4/17/2014 8:45 PM
51	I don,t really know what is available	4/17/2014 8:41 PM
52	could be better	4/17/2014 5:48 PM
53	Could use more in home support services	4/17/2014 5:43 PM
54	Far too expensive-by the time you pay for their help you don't have a lot left for yourself.	4/17/2014 3:18 PM
55	Red Tape	4/17/2014 1:56 PM
56	not enough funding to allow all people that require care to get it	4/17/2014 1:30 PM
57	There is probably gaps in availability of these services, often due to lack of staff.	4/17/2014 1:22 PM
58	Not enough assistance if any for daily living e.g. assistance with shopping, cleaning house or tidying up gardens but mainly transport	4/17/2014 12:28 PM
59	Poorly funded	4/17/2014 11:18 AM
60	Very basic care, as previously mentioned - the gaps currently include: cleaning, meals prep, time spent with person, personal care, gardening, maintenance, organised outings. The services are there, but home support services are not available to everyone due to the huge demand. There are many people in the community waiting for these packages and some only receive minimal support.	4/17/2014 11:07 AM
61	More packages are required for people to remain in home	4/17/2014 10:43 AM
62	Once you have the service it is good, but waiting for the service can take a long time e.g.ramps etc.	4/17/2014 10:17 AM
63	N/A	4/17/2014 9:51 AM
64	My rating is based on limited knowledge,unable to comment on gaps.	4/12/2014 6:00 PM
65	Not aware of these services	4/11/2014 5:50 PM
66	Again I am not able to say as I am not aware of anyone receiving this type of support.	4/9/2014 12:48 PM
67	Not enough funding available.	4/8/2014 2:26 PM
68	additional assistance required for the aged and those with disabilities to assist in remaining independent as long as possible	4/8/2014 10:13 AM
69	Only hear second hand comments at this stage	4/7/2014 2:56 PM
70	I phoned 2 weeks ago for help in the garden, trimming and weeding, no one has come. I have phoned again this morning.	4/7/2014 11:34 AM
71	Once approval has been gained for a "package" services are very good. But until that approval comes through there is much angst among supposed clients and family members trying to cope at home. Approval is slow.	4/3/2014 5:30 PM
72	Not aware of all support services but have had contact with persons having to go into residential care due to lack of support.	4/3/2014 2:26 PM
73	I am not aware of what is available at this stage.	4/3/2014 12:17 PM
74	the services available for aging disabled persons is very limited and not suitable for people who have lived with an intellectual disability. This type of service is specialised and not available here in Whyalla.	4/3/2014 11:14 AM
75	Not enough finance provided to support additional workers.	4/2/2014 2:29 PM
76	I don't know	4/2/2014 10:03 AM

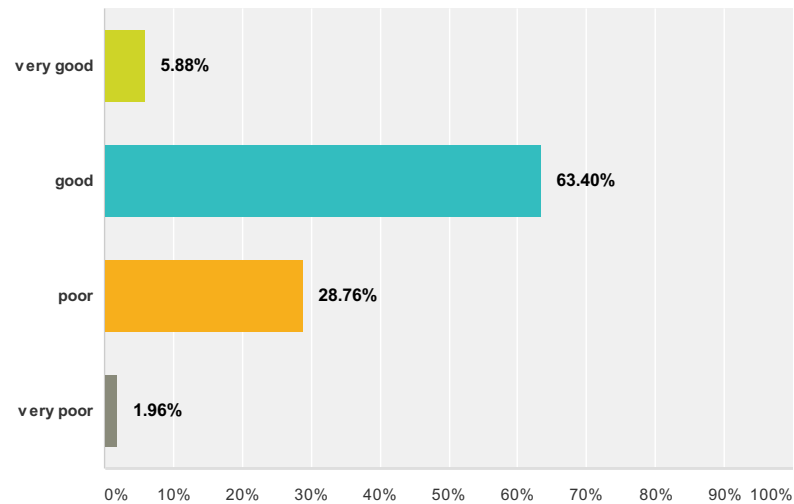
Whyalla Aged and Disability Care Masterplan

77	Limited to what they can do due to WH&S issues eg high dusting etc. Also depends on the person attending though usually they are very caring. Greater amount of time for those needing more help	4/1/2014 4:21 PM
78	Easily accessible short term and short notice respite facilities are lacking	4/1/2014 10:31 AM
79	Don't know	3/24/2014 9:15 AM
80	Not enough services to cover needs of community	3/24/2014 2:43 AM
81	I am not sure what is happening since Council outsourced coordination of support services.	3/23/2014 6:55 AM
82	Not enough staff or funding allowed to be spent on the clients	3/22/2014 2:01 PM
83	Unable to comment	3/21/2014 1:03 PM

Whyalla Aged and Disability Care Masterplan

Q14 Apart from in-home support services, I believe that the range and quality of services available to older Whyalla residents is ...

Answered: 153 Skipped: 49



Answer Choices	Responses
very good	5.88% 9
good	63.40% 97
poor	28.76% 44
very poor	1.96% 3
Total	153

#	What are the important gaps in the services available?	Date
1	Could not get anyone to do maintaince jobs & small painting jobs etc	7/14/2014 5:17 PM
2	Don't know	7/13/2014 7:16 PM
3	Poor public transport system, poor transport to services outside of Whyalla when required, lack of many medical services.	5/8/2014 9:09 PM
4	as above	5/2/2014 3:00 PM
5	not frequent enough	4/29/2014 7:02 PM
6	The Whyalla Library runs a good service to people at home once a every two weeks books tapes and if you are lucky to be home you maybe able to talk to them,as a lot of elderly may like to have a companion.	4/29/2014 2:34 PM
7	no knowledge of this topic	4/28/2014 10:29 PM
8	Cant say.	4/28/2014 9:21 PM
9	AS above	4/28/2014 5:45 PM
10	means of social suport	4/28/2014 2:01 PM
11	Again I have marked good but as to what your question specifically applies to is not very clear. If you refer to access to most businesses and shops for aged and disabled then that is fair to good.	4/28/2014 11:39 AM
12	The biggest problem is on weekends and public holidays, a lot of services are not available then and it creates problems for people who need everyday assistance and they might be left to themselves for a 3 day stretch which could ultimately cause major issues for them	4/28/2014 10:55 AM
13	Some medical support services.	4/28/2014 9:37 AM
14	Need more exercise groups, community groups and day care centres.	4/27/2014 6:51 PM
15	Why should one sell one's home just to enable one family member to access Whyalla's Aged Care if the other member is still in control of his/her faculties?	4/27/2014 6:01 PM
16	Don,t know	4/27/2014 5:13 PM
17	Could be more in home'help, ie, flu injections, podiatry, IMVS (collecting of samples, etc). The WEBSTER PACK has TO BE THE BEST OFFER YET , FOR HOME HELP!	4/27/2014 4:56 PM
18	I make assumptions based on my experiences. I think disabled needs are regardless of age.	4/27/2014 4:01 PM
19	Often lack of money and time and staff limits the services available	4/27/2014 2:54 PM
20	Availability	4/27/2014 2:30 PM
21	I don't know enough to say.	4/27/2014 1:42 PM
22	quality staff	4/23/2014 10:25 PM
23	Don't know	4/23/2014 2:59 PM

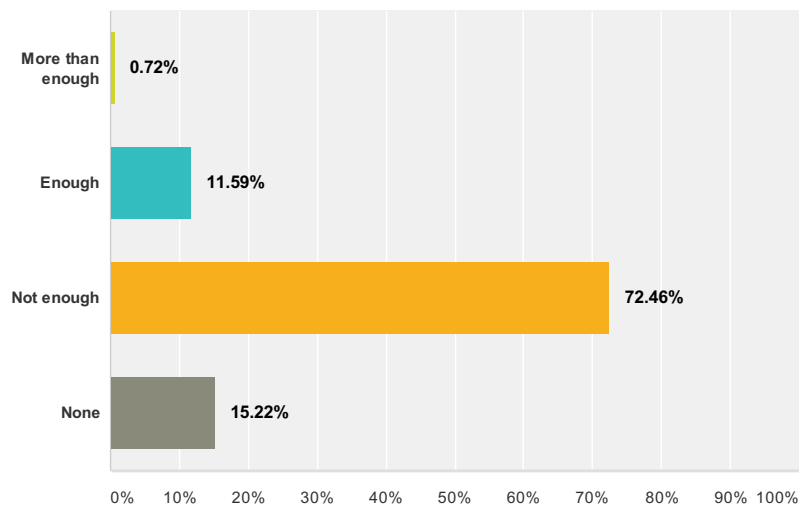
Whyalla Aged and Disability Care Masterplan

24	We are reasonably well catered for in regards to the range of other options ie. residential, independent living units, lifestyle village.	4/23/2014 12:58 PM
25	Unsure	4/22/2014 10:37 AM
26	liaison with GP's and GP's knowledge is poor in relation to aged care. i believe communication and transition of patients to and from hospital to residential could be better	4/22/2014 10:34 AM
27	home maintenance services	4/21/2014 2:55 PM
28	Not enough places due to funding for Community day care centre, Sunshine Club (social intimate club for older clients with dementia), auxiliary care staff to take clients shopping.	4/19/2014 12:18 AM
29	Transport, the variety of food for meals of wheels is shocking,	4/18/2014 6:37 PM
30	Unable to comment	4/18/2014 11:17 AM
31	Don,t have enlightened information to make a comment. I would like to have the information easily available.	4/17/2014 8:41 PM
32	Once again i would have marked AVERAGE, but as specified earlier you don't have this as an option.	4/17/2014 3:18 PM
33	Specialists	4/17/2014 1:56 PM
34	due to OHSW there is a very basic cleaning service which is not done by people that are actually taking notice of what is and isn't being done in the home	4/17/2014 1:30 PM
35	Again we need more facilities, but what we have is rather good.	4/17/2014 1:22 PM
36	a/a	4/17/2014 12:28 PM
37	poor range of services to suit various stages of ageing	4/17/2014 11:18 AM
38	More inhome and overnight respite would benefit consumers	4/17/2014 10:43 AM
39	I beleive that services are unable to meet the need	4/17/2014 10:17 AM
40	N/A	4/17/2014 9:51 AM
41	As above	4/12/2014 6:00 PM
42	As above	4/11/2014 5:50 PM
43	Maybe transport. My mother drives but do see older people waiting for buses etc	4/7/2014 2:56 PM
44	Regarding mental health. All the organisations have given up on my husband. No one comes atall now. They want John to go to their facilities. Too many people is too much for John. John is 81yrs. I am 84yrs.	4/7/2014 11:34 AM
45	current pactive of putting services out around Westlands with have a decent public transpor systemt	4/3/2014 10:33 PM
46	Trying to think what this question refers to specifically. The only other service I know of is the service Provided at Oronga which is very well run and operated. what other services are there other than private operations run the churches?	4/3/2014 5:30 PM
47	Irregular visits from Dom care	4/3/2014 4:27 PM
48	Specialist health care is poorly supported at Whyalla hospital and many residents, some of them very ill regularly have to travel to Adelaide for specialist treatment.	4/3/2014 2:26 PM
49	I don't know	4/3/2014 12:17 PM
50	Transport & health services	4/3/2014 11:18 AM
51	the services available for aging disabled persons in very limited and not suitable for people who have lived with an intellectual disability. This type of service is specialised and not available here in Whyalla.	4/3/2014 11:14 AM
52	I'm not sure of what is available	4/2/2014 10:03 AM
53	Don't know	3/24/2014 9:15 AM
54	Most travel to adelaide as specialists dint come here	3/22/2014 2:01 PM
55	Continuity of medical specialists,staff doctors nuses in private practice and Hospitals	3/21/2014 1:03 PM

Whyalla Aged and Disability Care Masterplan

Q15 How many opportunities are there for older Whyalla residents to participate in full time or part time work?

Answered: 138 Skipped: 64



Answer Choices	Responses
More than enough	0.72% 1
Enough	11.59% 16
Not enough	72.46% 100
None	15.22% 21
Total	138

#	Do you have ideas about creating more opportunities?	Date
1	Have workshops for employees helping them with job design that enables jobs to be written that reduce the risk and liability for the employer and provide safe work for older citizens	7/14/2014 6:38 PM
2	I don't know	7/14/2014 4:12 PM
3	More diverse businesses. But how to get them is the problem.	5/8/2014 9:13 PM
4	* The federal government needs to reduce taxes. Many businesses, especially small businesses, have had to lay off staff in order to save money so that they can pay their taxes. * Wages need to be increased to meet the rate of market inflation. Too many people are having to work multiple jobs just to make ends meet, filling jobs which could be filled by other people. As a result there are more people looking for work then there are jobs available!	5/6/2014 9:53 PM
5	up to the govenment	5/2/2014 3:01 PM
6	I am presuming that there is a gap in opportunities.	4/30/2014 11:05 AM
7	employers giving them a go packing at checkouts in supermarkets as in u.k meet and greet visitors	4/29/2014 7:14 PM
8	volunteering is good for keeping the mind and body active if paid work is not possible	4/29/2014 10:22 AM
9	no knowledge	4/28/2014 10:30 PM
10	Dont know.	4/28/2014 9:28 PM
11	No	4/28/2014 5:47 PM
12	no	4/28/2014 12:57 PM
13	To my knowledge unless you are able to be self-employed the chances of work are slim to none.	4/28/2014 11:39 AM
14	First seek employees by training them from local Whyalla unemployed rather than jumping to outside Whyalla or even from 457 visa!	4/27/2014 8:20 PM
15	why would older ppl want to work. they want to retire and enjoy what they have left.. wake up !!	4/27/2014 7:18 PM
16	State level education is appalling; some cannot even spell or apply basic mathematics.	4/27/2014 6:04 PM
17	I wish I had something to offer. Am working on it.	4/27/2014 5:44 PM
18	More opportunities for older residents to work with older people as they understand their needs	4/27/2014 2:56 PM
19	It's getting harder and harder for everyday people to find work ,,yet alone work that you like,,,and TRUST letting compleat strangers in to your home...??	4/27/2014 2:55 PM
20	there are lost of garden that need up keep including areas that need cleaning.....Older residents can be banded together to do these sorts of jobs depending on their abilities. Have activities not just going to the pub or BINGO!	4/27/2014 2:24 PM
21	I'm not sure. I presume you mean paid work? There are certainly lots of opportunities for voluntary work. Perhaps DOME could get extra support?	4/27/2014 1:47 PM
22	Can not comment as I have not tried for work in town.	4/23/2014 4:53 PM
23	Don't konw	4/23/2014 1:01 PM

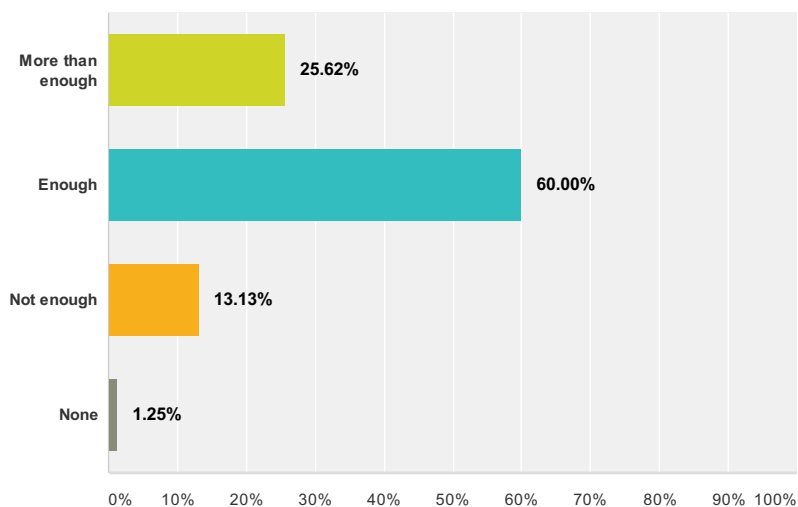
Whyalla Aged and Disability Care Masterplan

24	I think obtaining paid work at any age is challenging, companies appear to be down sizing and unable to complete with online stores or overseas products. I would image IT is one of the only growing industries.	4/22/2014 4:37 PM
25	real job sharing that works for all.	4/22/2014 1:20 PM
26	Unsure	4/22/2014 10:37 AM
27	Personally think it's based on your availability, your mobility and skills.	4/19/2014 10:38 AM
28	you have to make the effort to make something happen in your life there are plenty of positions available	4/18/2014 9:09 PM
29	Employers need to value the experiences of older employees	4/18/2014 2:00 PM
30	Unable to comment	4/18/2014 11:19 AM
31	lets create work for the young not the older residence	4/18/2014 8:41 AM
32	Yes	4/18/2014 2:57 AM
33	We are no different than any other regional area.	4/17/2014 8:51 PM
34	Link older and younger members of the community in art, drama, horticulture, environment and recording local history.	4/17/2014 8:45 PM
35	More encouragement for charitable work assisting in putting their effort assisting charities freely.	4/17/2014 5:52 PM
36	Not enough, there is not a lot of work around for a variety of groups including older residents.	4/17/2014 1:27 PM
37	There are a lot of people out of work, including the young - I have no ideas unless it is to employ those still capable of driving etc to support those not able to	4/17/2014 12:30 PM
38	Establish mentoring type services to assist the development of younger leaders	4/17/2014 11:19 AM
39	Due to the economic climate, there would be very little opportunity for employment opportunities. Shops are closing on a regular basis, eg. Noni-B, automating the checkouts at Woolworths etc. would also add to loss of employment - not create more.	4/17/2014 11:11 AM
40	SA seems to have a wonderfully strong volunteer basis. I always question however how this effects paid job availability for the older person. Perhaps limit this and employ more, there is always the budget issues to think of however.	4/17/2014 10:47 AM
41	Not Sure.	4/17/2014 9:53 AM
42	Volunteering seems to be the way to go for older people.	4/8/2014 2:27 PM
43	I wouldn't know.	4/7/2014 11:39 AM
44	I don't know.....not looking!	4/4/2014 2:01 PM
45	Because Whyalla is a heavy industrial town. And some businesses dismiss people over 55. (For example council) who should be leaders in the field of an experienced workforce.	4/3/2014 5:42 PM
46	This question is too broad. Most retirees do not wish to keep working apart from some minimal hours. Why retire if you want to work? Below the retiree age group, say 55 to 67, it would be very good if employers could arrange for some employees could work a shorter week if mutually agreeable.	4/3/2014 2:35 PM
47	Establish mentoring services to enable older residents to pass on skills/knowledge	4/3/2014 11:20 AM
48	There is a need to develop a strategy which includes resources to employ someone to deliver sustainable outcomes from the strategy.	4/2/2014 10:28 AM
49	Not sure	4/1/2014 4:22 PM
50	not qualified to answer - not something I have looked at.	4/1/2014 10:33 AM
51	Whyalla has an enormous database of KNOWLEDGE from the various retirees in the region. Not everyone that is pensioned off or retired from the workforce needs/wants to leave. These people should be given the chance/opportunity to further their career paths with alternate companies. To much employment is SOURCED from "out-of-towners", when a lot of people living as retirees have the capabilities/knowledge to be able to do the work. RDA needs to have a database of such people on their books which they could access at a moments notice to perform some of these services.	4/1/2014 12:41 AM
52	Increase the diversity and sustainability of work opportunities particularly outside of industry. ie recreational ,tourism retail.	3/21/2014 1:05 PM

Whyalla Aged and Disability Care Masterplan

Q16 How many opportunities are there for older Whyalla residents to participate in volunteer work?

Answered: 160 Skipped: 42



Answer Choices	Responses
More than enough	25.62% 41
Enough	60.00% 96
Not enough	13.13% 21
None	1.25% 2
Total	160

#	Do you have ideas about creating more opportunities?	Date
1	Although the training required - eg child safe environments, safe food handling, volunteer training adds barriers which put people off these roles	7/14/2014 6:38 PM
2	Suggest an online data base listing local organizations which have difficulties encouraging volunteers to join in their activities.	5/7/2014 5:44 PM
3	There are many ways people can volunteer in the community (church groups, Apex, Lions, Mount Laura Homestead, Tanderra, etc.). Many businesses also accept help from volunteers.	5/6/2014 9:53 PM
4	Maybe there needs to be a leaflet that list all the places that are happy to have volunteer help so people can look it up by field and see what interests them	4/29/2014 10:22 AM
5	no knowledge	4/28/2014 10:30 PM
6	Dont know.	4/28/2014 9:28 PM
7	No	4/28/2014 5:47 PM
8	no	4/28/2014 12:57 PM
9	Help with recruitment, organizations are stretched to the limit providing whatever their services and haven't the funds to spare with expensive publicity	4/28/2014 11:45 AM
10	Yes I think there are some very good volunteer support groups within Whyalla for most older residents to partake in if they desire.	4/28/2014 11:39 AM
11	Make more widely known the opportunities that already exist. Some places are crying out for volunteers	4/28/2014 10:08 AM
12	why would older ppl want to participate in volunteer work. they want to retire and enjoy what they have left.. wake up !!	4/27/2014 7:18 PM
13	More public promotion of opportunities.	4/27/2014 5:44 PM
14	Visiting program to be extended	4/27/2014 2:56 PM
15	their needs to be coordination of thisSomeone should be the custodian of where Volunteers are required and Older residents can contact this person/group to get details	4/27/2014 2:24 PM
16	Intergenerational activities - oldies teaching primary children to crochet or other crafts, young ones giving computer lessons to oldies.	4/27/2014 1:47 PM
17	there needs to be a way to volunteer on an ad hoc basis as most retirees I know are into caravanning, travelling etc. There is a concern that you have to commit to a regular time slot.	4/23/2014 4:53 PM
18	Perhaps people aren't aware of the volunteer opportunities. Maybe there needs to be some kind of advertising campaign to let people know of ways they can help through volunteering.	4/23/2014 1:01 PM
19	I think there are enough opportunities however, the procedures for volunteers of any age group are extensive and sometimes do act as barriers.	4/22/2014 4:37 PM
20	employers may be reluctant to hire or use volunteer older people for a range of reasons, mostly I believe it is because of the perception of the liability around supporting that person - ie: re- training, risk of injury	4/22/2014 10:38 AM
21	Unsure	4/22/2014 10:37 AM
22	Need to advertise where people are needed	4/18/2014 2:00 PM

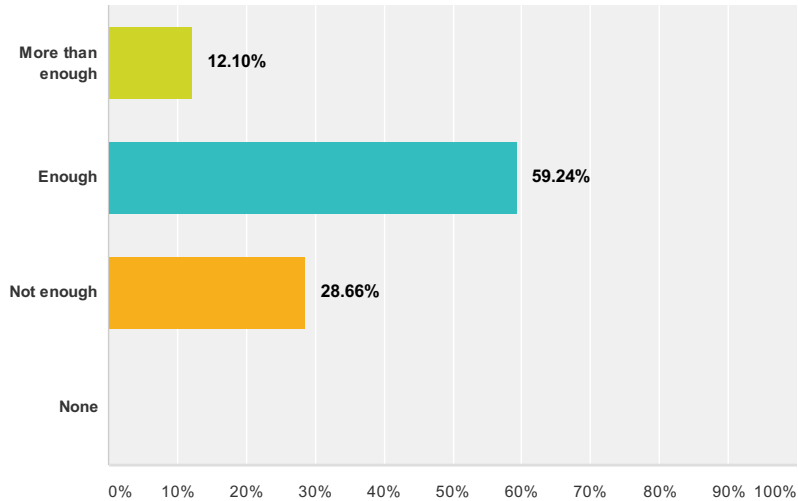
Whyalla Aged and Disability Care Masterplan

23	Look around each neighbourhood and there always elderly people who need help to do little jobs that are beyond their physical or technical ability. Turning mattresses, hanging curtains setting up a video player, computer or smart phone. I do these sorts of things all the time.	4/17/2014 10:02 PM
24	There are volunteer services that have had the same old people assisting for years and they now are ready to give it away but won't because they fear there are not enough Younger 60+ willing to take over.	4/17/2014 8:51 PM
25	Need programs to encourage people to participate	4/17/2014 5:45 PM
26	Perhaps setting up a register of people that want to participate in voluntary work and the particular areas and skills that they possess and a register of positions available and what they entail so that people can be referred to voluntary positions that suit their needs.	4/17/2014 1:27 PM
27	a/a	4/17/2014 12:30 PM
28	I think there is too much see above.	4/17/2014 10:47 AM
29	N/A	4/17/2014 9:53 AM
30	I have heard that there are a lot of older residents that participate in volunteer work and in fact it would appear that there are more older people volunteering than younger people.	4/9/2014 12:52 PM
31	I have many friends in volunteer work.	4/7/2014 11:39 AM
32	There Are plenty of volunteering roles but I don't think a lot of people like to volunteer. Volunteering isn't as easy as it used to be. One has to undergo training courses to be a volunteer and do police checks which can be a costly exercise these days for some people and off putting.	4/3/2014 5:42 PM
33	Transport issues come into play here	4/3/2014 4:28 PM
34	There are dozens of sporting, social, health, U3age, mens shed, fitness, church, Rotary, Lions, and other clubs where volunteers can be used. It may be useful to have some co-ordination of where there are needs in these areas and initial contact to get people started!	4/3/2014 2:35 PM
35	Not enough volunteer. Think they just need to be approached and encouraged to do so.	4/3/2014 12:19 PM
36	There is not enough/or no funding available to implement any existing ideas at a satisfactory and sustainable level. The RDAWEP Business Development Adviser outside core responsibilities has been assisting and encouraging Volunteer SANT to build a Whyalla Volunteer Coordinator Support Network to look at aspects impeding volunteering and volunteering roles and support avenues. The Whyalla City Council Community Services staff are beginning to discuss ways they may be able to assist to develop a communication network using existing avenues - as once again there is no funding available and it is not really their core role.	4/2/2014 10:28 AM
37	People just have to be willing	4/1/2014 4:22 PM
38	There are a lot of "Not For Profit" organisations here in Whyalla, and we have a large percentage of retirees, that just sit on their hands feeling sorry for themselves. There possibly needs to be an advertising campaign of sorts to target this group of people, that outlines their USEFULNESS in the community.	4/1/2014 12:41 AM
39	There are heaps of opportunities for ANYONE to participate in volunteer work. Organisations are crying out for help.	3/27/2014 6:34 PM
40	There seems a variety of volunteer organisations available	3/24/2014 9:18 AM

Whyalla Aged and Disability Care Masterplan

Q17 (Social activities include such activities as club membership. Cultural activities include such activities as art, crafts, music, drama and festivals.) Are there enough opportunities for older Whyalla residents to participate in social and cultural activities?

Answered: 157 Skipped: 45



Answer Choices	Responses	
More than enough	12.10%	19
Enough	59.24%	93
Not enough	28.66%	45
None	0.00%	0
Total		157

#	What are the important gaps in the range of activities available?	Date
1	Access to locations to the beach is very limited for people with mobility issues very few places after 5 pm and on weekends w here people can meet and have coffee	7/14/2014 6:38 PM
2	Dont know.	4/28/2014 9:28 PM
3	It is difficult to participate if one is living alone	4/28/2014 5:00 PM
4	transport and organized activities	4/28/2014 2:03 PM
5	Cost is a major consideration for the elderly, and some of the activities are not for the elderly, they are for young families	4/28/2014 10:58 AM
6	More exercise and healthy lifestyle groups.	4/27/2014 6:53 PM
7	Needs to be more active advertising to assist the elderly to participate.	4/27/2014 4:58 PM
8	Difficult to find out when and where	4/27/2014 2:31 PM
9	Transport may be an issue for some - accessing the things that are available.	4/27/2014 1:47 PM
10	fun activities eg dances, yoga tai chi which is affordable to elderly	4/23/2014 10:26 PM
11	Don't know	4/23/2014 3:01 PM
12	Only job i have previously found available a few years ago was as part time taxi driver. Did driver wheelchair access cab for a couple of years.	4/22/2014 5:49 PM
13	there seem to be lots of little groups of people doing things but they often work in silos. strategies need to be developed to work to assist in the marketing and promotion of the work older people do in the community.	4/22/2014 10:38 AM
14	Unsure	4/22/2014 10:37 AM
15	Pump up things like the uni of 3rd age, and messhed	4/18/2014 6:37 PM
16	as many require you to pay and many don't have the money.	4/18/2014 3:40 PM
17	Transport to clubs is a big issue. Taxi fares are prohibitive for many who need to use them on a frequent basis.	4/17/2014 10:02 PM
18	Not sure	4/17/2014 5:52 PM
19	I am not aware of this aspect of life in Whyalla as yet	4/17/2014 12:30 PM
20	Unsure, have not lived here long enough to answer this appropriately	4/17/2014 10:47 AM
21	Same as Question 16	4/3/2014 2:35 PM
22	I am not really sure what is available	4/3/2014 12:19 PM

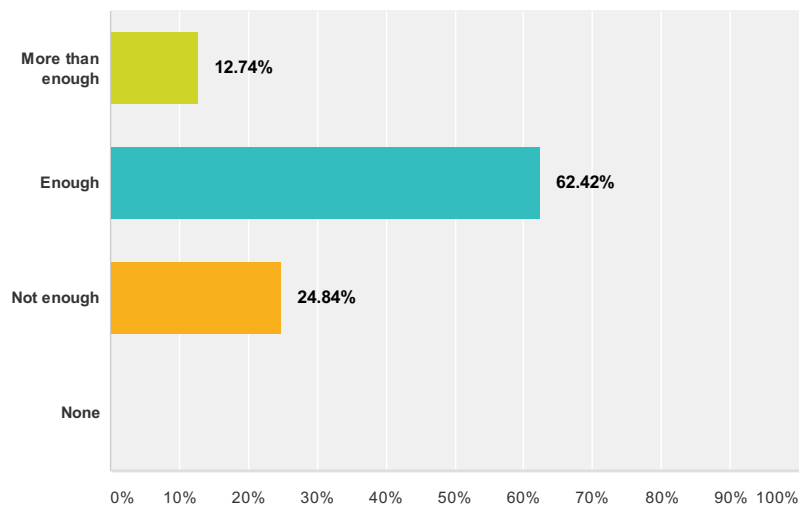
Whyalla Aged and Disability Care Masterplan

23	Have not looked at what gaps there are. This could be looked at in the strategy	4/2/2014 10:28 AM
24	Very limited activities in whyalla	3/22/2014 2:02 PM

Whyalla Aged and Disability Care Masterplan

Q18 Are there enough opportunities for older Whyalla residents to participate in sporting and other leisure activities?

Answered: 157 Skipped: 45



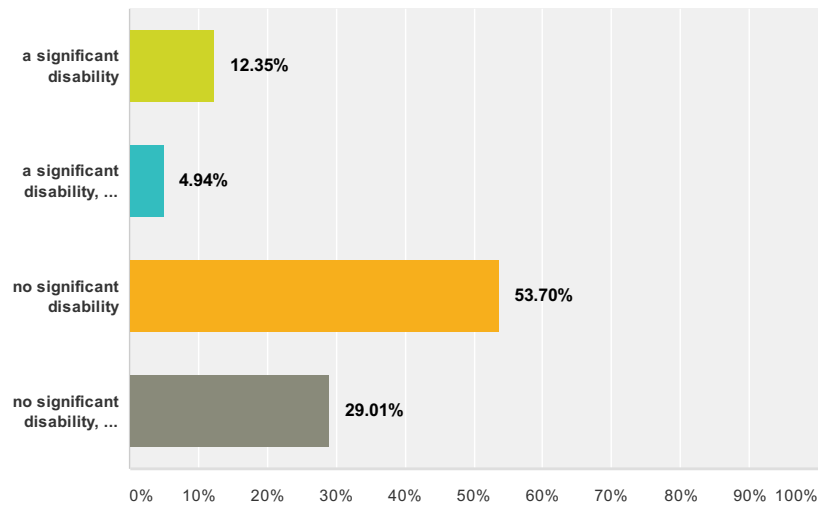
Answer Choices	Responses
More than enough	12.74% 20
Enough	62.42% 98
Not enough	24.84% 39
None	0.00% 0
Total	157

#	What are the important gaps in the range of activities available?	Date
1	When old or disabled you are treated as your brain has gone too	7/14/2014 5:17 PM
2	lack of council attention to the safety of the aged cyclist, focusing all its attention on motor vehicle facilities.	4/28/2014 9:28 PM
3	Costs of membership	4/28/2014 5:47 PM
4	transport organized activities	4/28/2014 2:03 PM
5	More tai chi classes for older people to improve their well being.	4/27/2014 6:53 PM
6	Not sure.	4/27/2014 5:44 PM
7	Often limited because of lack of transport	4/27/2014 2:56 PM
8	Not sure. There are lots of things that people could take up if they were encouraged to do so, depending on the costs, and ease of access. It would be good if interested older people with a passion for a particular sport or activity took ownership of a new initiative, with Council or other forms of support and encouragement.	4/27/2014 1:47 PM
9	Don't know	4/23/2014 3:01 PM
10	Unsure	4/22/2014 10:37 AM
11	Unable to comment	4/18/2014 11:19 AM
12	BUT not in the aged care facilities	4/18/2014 2:57 AM
13	Transport is a big issue. Taxi fares are prohibitive for many who need to use them on a frequent basis.	4/17/2014 10:02 PM
14	There a many art and crafts,mens shed,bowls,pink lady service etc	4/17/2014 8:51 PM
15	I,m not really into sport, but have friends who are involved. I do use the swimi g pool, spa and sauna and feel that is a great facility	4/17/2014 8:45 PM
16	Not sure	4/17/2014 5:52 PM
17	I think there is a variety of sporting and leisure activities in Whyalla , however it can be a daunting task to find these activities for some people and so if there was a list of activities that people may want to be part of that would help people to access them.	4/17/2014 1:27 PM
18	a/a	4/17/2014 12:30 PM
19	Tendency towards the traditional - not much variety	4/17/2014 11:19 AM
20	Same as question 16	4/3/2014 2:35 PM
21	Golf is my major interest. That is good.	4/3/2014 12:19 PM
22	Have not looked at what gaps there are. This could be looked at in the strategy	4/2/2014 10:28 AM
23	The cost of some activities is prohibitive for a lot of people who rely only on the age pension.	3/27/2014 6:34 PM

Whyalla Aged and Disability Care Masterplan

Q19 I have ...

Answered: 162 Skipped: 40



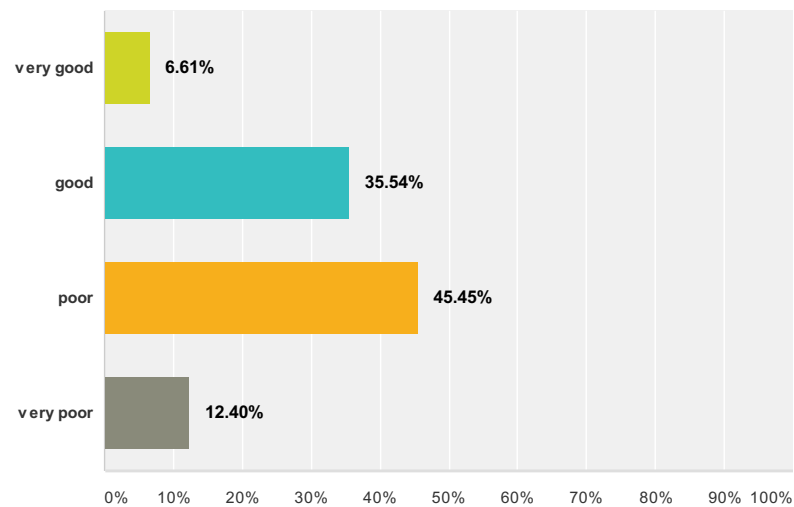
Answer Choices	Responses	
a significant disability	12.35%	20
a significant disability, and so do other family members or close friends	4.94%	8
no significant disability	53.70%	87
no significant disability, but I do have family members or close friends with a significant disability	29.01%	47
Total		162

#	Comments	Date
1	will you even read this?	4/27/2014 6:06 PM
2	Except age creeping up on all of us, it makes me more aware of what's in store for us in the future.	4/27/2014 5:00 PM
3	Not now,,, But had ,,,	4/27/2014 2:57 PM
4	However, I think I may need a new hip at some stage.	4/27/2014 1:49 PM
5	I have a grand daughter who needs extra help. 12 years old	4/23/2014 4:53 PM
6	Not Applicable	4/23/2014 3:03 PM
7	But even a mild disability can prevent the use of some facilities such as the beach where there are no suitable access for kayaks to the beach, wash-down area or trailer parking.	4/17/2014 10:16 PM
8	Myalitis	4/17/2014 8:52 PM
9	I have Asthma under control	4/17/2014 6:11 PM
10	25 year old niece	4/17/2014 5:48 PM
11	Mental health care is not adequate in Whyalla and crisis care is almost non existent, no one wants to know.	4/8/2014 2:29 PM
12	i have 30% disability in my back and 10% in my knee and these will become worse as I age	4/8/2014 10:17 AM
13	I am a Double bilateral Below-Knee amputees confined to a wheelchair	4/1/2014 2:24 AM
14	Thank God!	3/27/2014 6:35 PM

Whyalla Aged and Disability Care Masterplan

Q20 I believe that the range and quality of education and training services available to people with a disability in Whyalla is ...

Answered: 121 Skipped: 81



Answer Choices	Responses
very good	6.61% 8
good	35.54% 43
poor	45.45% 55
very poor	12.40% 15
Total	121

#	What are the important gaps in the services available?	Date
1	Too many pavers, steps, disability parking not close to toilets, etc	7/14/2014 6:43 PM
2	Not able to comment.	5/8/2014 9:15 PM
3	Not sure	4/30/2014 11:09 AM
4	Don't know haven't looked in to it	4/30/2014 9:34 AM
5	Practical work experience for those unable to travel to tafe or university in Adelaide is non-existent here.	4/29/2014 12:27 PM
6	speech therapists at the special school would be good.	4/29/2014 10:23 AM
7	no knowledge	4/28/2014 10:31 PM
8	Cant say.	4/28/2014 9:32 PM
9	I don't know.	4/28/2014 12:00 PM
10	but need expensive publicity for people to know that they exist	4/28/2014 11:47 AM
11	For those with a mild intellectual disability there is no ongoing education past high school.	4/27/2014 6:55 PM
12	Only just about to look into this. Hope there are opportunities.	4/27/2014 5:46 PM
13	Don,t know	4/27/2014 5:14 PM
14	Not applic - I have no knowledge of this	4/27/2014 5:00 PM
15	I've given up . I think I will move.	4/27/2014 4:06 PM
16	Making older people aware of what is available	4/27/2014 2:58 PM
17	Funding and psy rates	4/27/2014 2:33 PM
18	I think it's fairly good for children, and I guess Phoenix provides for some older ones, but I'm not sure how older people get on in this regard.	4/27/2014 1:49 PM
19	funding to support the services providing care and education to all children and youth.	4/23/2014 10:27 PM
20	Based on my experience with my grand daughter there is no where for a person who is not up to main stream and yet is above specila school	4/23/2014 4:53 PM
21	Don't know	4/23/2014 3:03 PM
22	I don't know	4/23/2014 1:05 PM
23	Needs to be an increase in the available courses at a tertiary level	4/23/2014 12:07 PM
24	From what I see in the media it appears that people with a disability are often not catered for.	4/22/2014 4:39 PM
25	unable to answer as I am unsure as to what services there are	4/22/2014 10:50 AM
26	I believe this could be better. gaps occur when people don't fit the 'criteria' and this causes families anger and stress.	4/22/2014 10:40 AM
27	Unsure	4/22/2014 10:38 AM

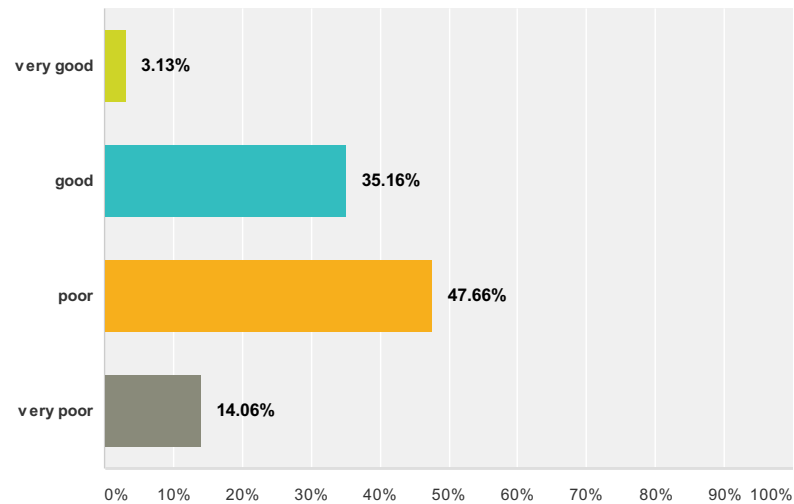
Whyalla Aged and Disability Care Masterplan

28	Persons with qualifications to train disabled persons. Learning handicaps are not catered for to a great degree.	4/19/2014 10:47 AM
29	i dont know	4/18/2014 9:12 PM
30	Terrific services like the Y day options is chronically underfunded and that program is fantastic for young adults.	4/18/2014 6:39 PM
31	Unable to comment	4/18/2014 11:20 AM
32	Knowing and accessing help for those in need who are new to the town if you are not part of the network	4/18/2014 3:01 AM
33	Not just those with disability. The Uni SA and Tafe have a very poor range of courses available.	4/17/2014 10:16 PM
34	Not sure	4/17/2014 8:46 PM
35	I don't know	4/17/2014 6:06 PM
36	Once gain AVERAGE	4/17/2014 3:20 PM
37	Apart from the Special School, there are few options - especially for training - unless your disability is minor	4/17/2014 11:21 AM
38	Unsure here in whyalla	4/17/2014 10:48 AM
39	N/A	4/17/2014 9:53 AM
40	Unable to comment.	4/12/2014 6:07 PM
41	Don't know	4/11/2014 5:53 PM
42	Pheonix is the only provider to my knowledge.	4/8/2014 2:29 PM
43	need more opportunities for people with Mental Health issues - like a "farm" where they can relax from the main pressures of life and still complete worthwhile tasks in tending animals and gardens	4/8/2014 10:17 AM
44	Only had contact with Samaratin College who had a few students over the years. Generally more training services for all Whyalla residents would be good	4/7/2014 3:00 PM
45	Don' know	4/3/2014 4:30 PM
46	Not fully aware of of what is available to persons with a disability.	4/3/2014 2:39 PM
47	Not aware of what if anything is available	4/3/2014 12:20 PM
48	The build of the new Special Education Centre is a huge step in the right direction. Although there is a huge gap in training people with disabilities in preparation for leaving school and when they leave school.	4/3/2014 11:25 AM
49	Training services for skills development post school	4/3/2014 11:21 AM
50	Unsure. Have not looked at what gaps there are. Would only find out if I needed them. Information is not readily available for anyone not really looking.	4/2/2014 10:28 AM
51	Unsure	4/1/2014 4:27 PM
52	Will include a 3-4 page document at the meetings planned for Whyalla Library	4/1/2014 2:24 AM
53	Based on media reports and general discussion in my network , cannot comment with any personal experience	3/21/2014 1:08 PM

Whyalla Aged and Disability Care Masterplan

Q21 I believe that the range and quality of personal and family support services available to people with a disability in Whyalla is ...

Answered: 128 Skipped: 74



Answer Choices	Responses
very good	3.13% 4
good	35.16% 45
poor	47.66% 61
very poor	14.06% 18
Total	128

#	What are the important gaps in the services available?	Date
1	Unable to comment.	5/8/2014 9:15 PM
2	There needs to be more funding for organisations who assist the elderly and disabled. There are currently insufficient carers available in relation to the number of people requiring assistance.	5/6/2014 9:59 PM
3	I do not have any Knowledge of this group of questions, so cannot comment. You do see in the press when some-one is in need.	4/30/2014 11:09 AM
4	?	4/30/2014 9:34 AM
5	no knowledge	4/28/2014 10:31 PM
6	Cant say.	4/28/2014 9:32 PM
7	I don't know.	4/28/2014 12:00 PM
8	but people need to know what is available	4/28/2014 11:47 AM
9	I have said good as there are many people helping but the quality of this help in several instances leaves a lot to be desired particularly in the home help area for disabled people who need daily care..	4/28/2014 11:44 AM
10	weekend and public holiday services	4/28/2014 10:59 AM
11	Really don't know.	4/27/2014 5:46 PM
12	A lot more needs to be done for the depressed....	4/27/2014 5:00 PM
13	I've not noticed available services I could get to or feel welcome at.	4/27/2014 4:06 PM
14	Guv. funds always	4/27/2014 3:38 PM
15	Lack of money, staff for respite care in the homes	4/27/2014 2:58 PM
16	Due to lack of coordinated services and hrs available to those in need	4/27/2014 2:33 PM
17	don't know - SHOULD BE A 'DON'T KNOW' PLACE TO TICK	4/27/2014 2:20 PM
18	Not sure.	4/27/2014 1:49 PM
19	Access to more specialists such as speech therapists	4/23/2014 4:53 PM
20	Don't know	4/23/2014 3:03 PM
21	I have heard recently where some people with disabilities are struggling to get assistance. Carers are not available.	4/23/2014 1:05 PM
22	I can't comment on this I am unsure	4/22/2014 4:39 PM
23	Unsure about this.	4/22/2014 10:40 AM
24	Unsure	4/22/2014 10:38 AM
25	Persons with a disability are not supported to the degree they should be, because of funding reductions.	4/19/2014 10:47 AM
26	Good if you can afford private home help, poor if you rely on the system and can't afford it.	4/19/2014 12:21 AM

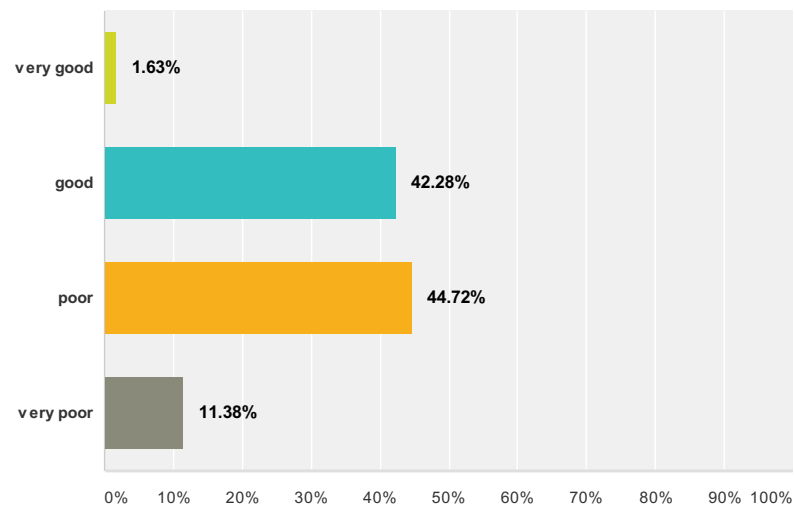
Whyalla Aged and Disability Care Masterplan

27	Parents are in crisis trying to arrange respite and also in home support (eg showering).	4/18/2014 6:39 PM
28	Unable to comment	4/18/2014 11:20 AM
29	How and Where can they be helped when (a) They are kidnapped ... not a joke (b) They are robbed by the staff and social workers ... I believe this.	4/18/2014 3:01 AM
30	Some workers provide a very poor quality of service and the level of monitoring of that service is very poor.	4/17/2014 10:16 PM
31	Not sure	4/17/2014 8:46 PM
32	Refer to Thursday 17th April article in Whyalla News (single mother with two disabled daughters.)	4/17/2014 5:55 PM
33	Not enough respite for parents of disabled family members.	4/17/2014 5:48 PM
34	Once gain AVERAGE	4/17/2014 3:20 PM
35	There is a large gap in services available and appropriate to people with disabilities. Including peoples capacity to engage in community events that are held where there is a lack of disability access areas.	4/17/2014 1:29 PM
36	Poorly funded - staff skills below par	4/17/2014 11:21 AM
37	as above	4/17/2014 10:48 AM
38	There is a need for more respite options and supported residential places	4/17/2014 10:22 AM
39	N/A	4/17/2014 9:53 AM
40	Unable to comment	4/12/2014 6:07 PM
41	But need more	4/11/2014 5:53 PM
42	Sort of ranges from Poor to Adequate.	4/8/2014 2:29 PM
43	not enough workers to provide respite care for families	4/8/2014 10:17 AM
44	Family support is generally good not sure of other support such as respite care.	4/7/2014 3:00 PM
45	Not enough respite care places available to those who need it.	4/3/2014 5:46 PM
46	As in question 20	4/3/2014 2:39 PM
47	There is a huge lack of respite care for families caring for children with disabilities. Families are extremely tired and very under supported, leaving the carers to lean on aging family members for support. Some support from services to assist with some after school care and/or groups to engage the person with disabilities with others would help to relieve some of the responsibility for the family. Family life is often crazy with several appointments, therapies and other additional needs that happen every week including the normal running of the house and work. Some support in the family home would be amazing.	4/3/2014 11:25 AM
48	There does not appear to be very many, if at all, trained, honest people to do the caring. So many of these people with disabilities are not receiving the correct care.	4/3/2014 11:02 AM
49	Unsure. Have not looked at what gaps there are. Would only find out if I needed them. Information is not readily available for anyone not really looking.	4/2/2014 10:28 AM
50	Unsure	4/1/2014 4:27 PM
51	UNable to comment on this question	3/21/2014 1:08 PM

Whyalla Aged and Disability Care Masterplan

Q22 I believe that the range and quality of other services available to people with a disability in Whyalla is ...

Answered: 123 Skipped: 79



Answer Choices	Responses
very good	1.63% 2
good	42.28% 52
poor	44.72% 55
very poor	11.38% 14
Total	123

#	What are the important gaps in the services available?	Date
1	Unable to comment.	5/8/2014 9:15 PM
2	to few funds	5/2/2014 3:02 PM
3	Disability services could be so much better than what there is here .If you are in need of services there is only the Hospital {Disability S.A.) the City Council does not have a Disability service here.	4/29/2014 2:44 PM
4	no knowledge	4/28/2014 10:31 PM
5	Cant say.	4/28/2014 9:32 PM
6	don't know	4/28/2014 12:59 PM
7	I don't know.	4/28/2014 12:00 PM
8	people need to know what is available	4/28/2014 11:47 AM
9	Accessing disability SA funding for carer hours is difficult and limited. Difficulty getting carers locally to do the allocated hours.	4/27/2014 6:55 PM
10	Get a job!	4/27/2014 6:06 PM
11	Really don't know.	4/27/2014 5:46 PM
12	As simple as slopes, not having foot paths wide enough or the same level as surrounding dirt to easily over take	4/27/2014 4:06 PM
13	Needs easier access	4/27/2014 2:58 PM
14	DON'T KNOW	4/27/2014 2:20 PM
15	Not sure.	4/27/2014 1:49 PM
16	respite services	4/23/2014 10:27 PM
17	Don't know	4/23/2014 3:03 PM
18	I know of some services for people with disabilities that are available in Whyalla but I don't know about the quality. Also, I have no idea if they are adequate.	4/23/2014 1:05 PM
19	I can't comment on this I am unsure	4/22/2014 4:39 PM
20	Unsure	4/22/2014 10:40 AM
21	Unsure	4/22/2014 10:38 AM
22	Persons with a disability are not supported to the degree they should be, because of funding reductions.	4/19/2014 10:47 AM
23	i dont know	4/18/2014 9:12 PM
24	Transport, education, in home services, access to appropriate respite, getting a diagnosis, quality ongoing social support for the person with a disability and their family	4/18/2014 6:39 PM
25	Unable to comment	4/18/2014 11:20 AM

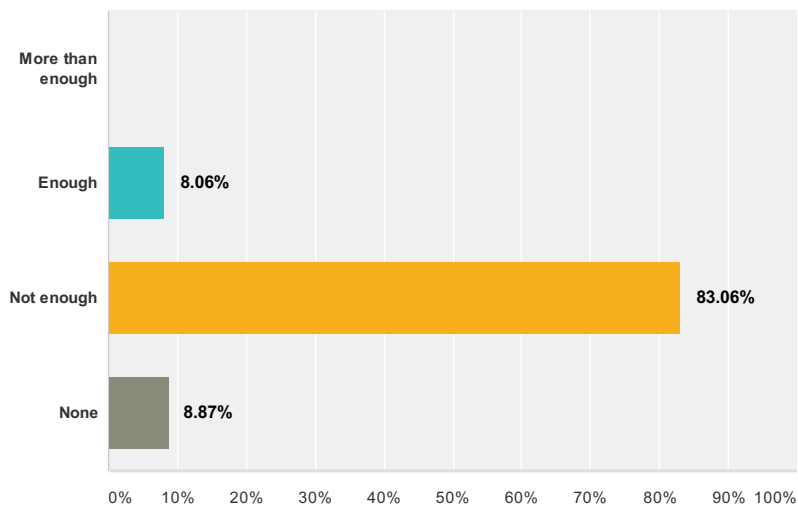
Whyalla Aged and Disability Care Masterplan

26	Reason: I guess I don't know enough about it OR haven't read the details and seen the actions (although I know about the help with disabled sports reps)	4/18/2014 3:01 AM
27	Mum 97. Is blind, deaf and invalid. Cleaning is the only service offered. I'm sure more can be done to ensure she is coping with the level of support she has. Often I feel that more frequent and thorough cleaning would be appropriate.	4/17/2014 10:16 PM
28	Not sure	4/17/2014 8:46 PM
29	I don't know	4/17/2014 6:06 PM
30	Could be better	4/17/2014 5:55 PM
31	To get all the people who provide the different services in Whyalla (to the different types of groupings e.g. youth, disability, aged etc) to get together and identify who does what and is able to do it best and then decide who will do what to reduce the duplication of services and ensure that the client is referred (internally) to the right service so that services aren't reduced but done better	4/17/2014 12:33 PM
32	Respite care	4/17/2014 11:24 AM
33	Underfunded	4/17/2014 11:21 AM
34	as above	4/17/2014 10:48 AM
35	N/A	4/17/2014 9:53 AM
36	Unable to comment	4/12/2014 6:07 PM
37	Don't know	4/11/2014 5:53 PM
38	Travelling to Adelaide because we don't have enough Specialists here	4/3/2014 4:30 PM
39	As in Question 20	4/3/2014 2:39 PM
40	the options for people living with disabilities is dictated by the services available rather than the services that the individual and family require. Support can be in the way of transport assistance, peer support groups, independent living services and respite for both the carer and the person with the disability.	4/3/2014 11:25 AM
41	Lack of longevity or continuity in service personnel	4/3/2014 11:21 AM
42	suitable transport vehicles at an affordable cost. People to assist.	4/3/2014 11:02 AM
43	Unsure. Have not looked at what gaps there are. Would only find out if I needed them. Information is not readily available for anyone not really looking.	4/2/2014 10:28 AM
44	Unsure	4/1/2014 4:27 PM
45	Unable to comment	3/21/2014 1:08 PM

Whyalla Aged and Disability Care Masterplan

Q23 Are there enough opportunities for Whyalla residents with a disability to participate in full time or part time work?

Answered: 124 Skipped: 78



Answer Choices	Responses
More than enough	0.00% 0
Enough	8.06% 10
Not enough	83.06% 103
None	8.87% 11
Total	124

#	Do you have ideas about creating more opportunities?	Date
1	I don't know	7/14/2014 4:13 PM
2	There are probably never enough. I think Phoenix does a good job.	5/19/2014 11:09 AM
3	Unable to comment.	5/8/2014 9:16 PM
4	no knowledge	4/28/2014 10:31 PM
5	Cant say.	4/28/2014 9:33 PM
6	I do not know as I retired with my disability	4/28/2014 5:52 PM
7	no	4/28/2014 1:00 PM
8	I have no idea.	4/28/2014 12:02 PM
9	Aside from Phoenix to my knowledge I'm not sure about other opportunities for the disabled to participate.	4/28/2014 11:50 AM
10	workcover claims	4/27/2014 9:20 PM
11	More incentives for workplaces to employ people with a disability.	4/27/2014 6:56 PM
12	Don't know.	4/27/2014 5:46 PM
13	Find opotuniies for part time work that do not need a potential employee to be able to do what main stream can do	4/27/2014 4:11 PM
14	Once again Money and foreward thinking by the government	4/27/2014 3:41 PM
15	Employers to have incentive to employ a person/s with disabilities	4/27/2014 3:00 PM
16	Attitude and incentives to employ people difficult to get lots of red tape	4/27/2014 2:34 PM
17	work experience opportunities by small business to encourage participation by disability persons	4/23/2014 10:28 PM
18	Don't know	4/23/2014 3:07 PM
19	Unsure.	4/23/2014 1:06 PM
20	Unable to comment	4/23/2014 12:07 PM
21	Not familiar with opportunities	4/22/2014 5:49 PM
22	i'm not sure	4/22/2014 10:51 AM
23	Unsure	4/22/2014 10:38 AM
24	To give you more ideas would require more Government funding or council funding . We all know when you talk money that things GO SLOW.	4/19/2014 10:51 AM
25	i dont know	4/18/2014 9:15 PM
26	Unable to comment	4/18/2014 11:21 AM
27	Not sure	4/18/2014 3:05 AM

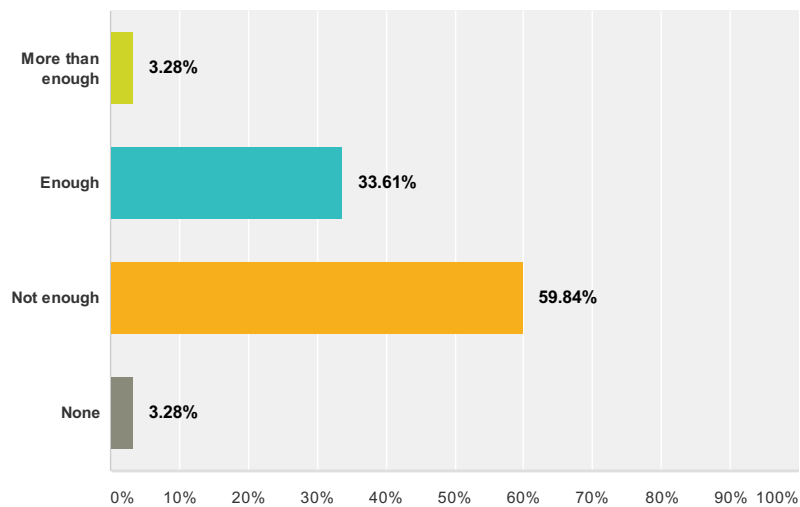
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28	I don't see many people with disabilities working, but maybe they are	4/17/2014 8:48 PM
29	Again there is a lack of available positions or employers that are able to or willing to take on staff members that have disabilities, this is possibly attached to the stigma that they may not have the capacity to perform or that they may need extra time off.	4/17/2014 1:31 PM
30	Not sure about this	4/17/2014 12:35 PM
31	Only if your disability is relatively minor	4/17/2014 11:23 AM
32	N/A	4/17/2014 9:54 AM
33	Unable to comment	4/12/2014 6:10 PM
34	AS previously stated a "farm" like business where people can tend gardens and grow vegetables and flowers and also tend animals such as chickens for egg produce	4/8/2014 10:21 AM
35	Not had the opportunity to discuss this with people with a disability. Have seen a staff member of a local supermarket with a disability working.	4/7/2014 3:04 PM
36	I would not know.	4/7/2014 11:45 AM
37	Don't know	4/3/2014 5:49 PM
38	Unknown	4/3/2014 2:43 PM
39	There is a huge lack of opportunities for employment for people with significant disabilities. Thinking about the types of employment/volunteering that might be suited to the individual child is something that should commence at early senior level of schooling to enable adequate support and training for the individual.	4/3/2014 11:34 AM
40	I have no knowledge, or insufficient to make a valid comment.	4/2/2014 2:32 PM
41	I understand that there is a strategy in place through the National Disability Coordination Officer located in Whyalla. It needs a combined effort of local stakeholders including service providers to develop a substantial marketing approach to businesses and organisations (could include community groups) to increase awareness of the value of people with disability.	4/2/2014 10:28 AM
42	Educate Business	4/1/2014 2:28 AM

Whyalla Aged and Disability Care Masterplan

Q24 Are there enough opportunities for Whyalla residents with a disability to participate in volunteer work?

Answered: 122 Skipped: 80



Answer Choices	Responses
More than enough	3.28% 4
Enough	33.61% 41
Not enough	59.84% 73
None	3.28% 4
Total	122

#	Do you have ideas about creating more opportunities?	Date
1	I don't know about this.	5/19/2014 11:09 AM
2	Unable to comment.	5/8/2014 9:16 PM
3	no knowledge	4/28/2014 10:31 PM
4	Cant say.	4/28/2014 9:33 PM
5	Many clubs don't have disabled facilities eg toilets	4/28/2014 1:23 PM
6	don't know	4/28/2014 1:00 PM
7	I say enough but then again I'm not too sure what is available but I guess that would be up to the individual as to how much they want to become involved.	4/28/2014 11:50 AM
8	as above not enough information on what is available	4/28/2014 11:48 AM
9	but they want you to work, they dont care what your disability is, you must work.	4/27/2014 9:20 PM
10	I think probably but have not looked into it.	4/27/2014 5:46 PM
11	Incentives to empolyers and also educate other volunteers working alongside them	4/27/2014 3:00 PM
12	Due to ohws	4/27/2014 2:34 PM
13	DON'T KNOW	4/27/2014 2:21 PM
14	Not really sure - this may depend on encouragement and support from organisations with which they could volunteer.	4/27/2014 1:50 PM
15	For both this Q24 and 23 it depends on the type of disability. There is also a reluctance to use these people because of the constrictive OHS rules and fear of being sued.	4/23/2014 4:53 PM
16	Don't know.	4/23/2014 1:06 PM
17	Unable to comment	4/23/2014 12:07 PM
18	Unsure	4/22/2014 10:38 AM
19	i dont know	4/18/2014 9:15 PM
20	Unable to comment	4/18/2014 11:21 AM
21	BUT many people are against their involvement	4/18/2014 3:05 AM
22	Not sure	4/17/2014 8:48 PM
23	Proper training	4/17/2014 6:12 PM
24	I don't know	4/17/2014 6:06 PM
25	The insurance may play a part in this, a national insurance scheme to support people may help.	4/17/2014 1:31 PM
26	I am sure there would be if people were in the financial situation where they didn't need to work	4/17/2014 12:35 PM
27	Lack of skills and structures to support participation	4/17/2014 11:23 AM

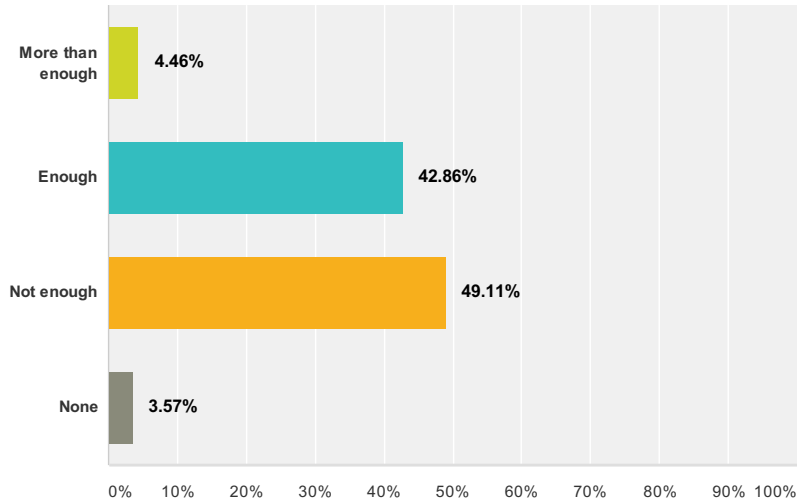
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28	support people are always required to assist	4/17/2014 10:49 AM
29	N/A	4/17/2014 9:54 AM
30	Unable to comment	4/12/2014 6:10 PM
31	I would not know	4/7/2014 11:45 AM
32	Don't know	4/3/2014 5:49 PM
33	Depends on level of disability, i would think that there are some opportunities.	4/3/2014 2:43 PM
34	as above.	4/3/2014 11:34 AM
35	Provide training and support for community organisations re how to support people with disabilities in their activities	4/3/2014 11:24 AM
36	I have no knowledge, or insufficient to make a valid comment.	4/2/2014 2:32 PM
37	Refer to questions 16 and 23	4/2/2014 10:28 AM
38	They just need to be encouraged that their life(style) is not worthless and that there are numerous opportunities exist out there in the greater community for their particular expertise and/or skills experience	4/1/2014 2:28 AM

Whyalla Aged and Disability Care Masterplan

Q25 (Social activities include such activities as club membership. Cultural activities include such activities as art, crafts, music, drama and festivals.) Are there enough opportunities for Whyalla residents with a disability to participate in social and cultural activities?

Answered: 112 Skipped: 90



Answer Choices	Responses
More than enough	4.46% 5
Enough	42.86% 48
Not enough	49.11% 55
None	3.57% 4
Total	112

#	What are the important gaps in the range of activities available?	Date
1	I don't know	7/14/2014 4:13 PM
2	Unable to comment.	5/8/2014 9:16 PM
3	Cant say.	4/28/2014 9:33 PM
4	I don't know.	4/28/2014 12:02 PM
5	The answer here would be the same as the previous question.	4/28/2014 11:50 AM
6	same as 17	4/28/2014 10:59 AM
7	Make them more widely known or in some cases more affordable	4/28/2014 10:12 AM
8	I think you need to be 50 to be welcome	4/27/2014 4:11 PM
9	Again lack of infrastructure may curtail activities	4/27/2014 3:00 PM
10	DON'T KNOW	4/27/2014 2:21 PM
11	I don't know.	4/27/2014 1:50 PM
12	sporting activities, friendships groups, support groups for people and their cares	4/23/2014 10:28 PM
13	Unknown	4/23/2014 1:06 PM
14	Unable to comment	4/23/2014 12:07 PM
15	Unsure	4/22/2014 10:42 AM
16	Unsure	4/22/2014 10:38 AM
17	i dont know	4/18/2014 9:15 PM
18	Not sure No of some people who give up their time to help ..but not sure if organisation related	4/18/2014 3:05 AM
19	Transport to clubs is a big issue. Taxi fares are prohibitive for many who need to use them on a frequent basis.	4/17/2014 10:18 PM
20	Not sure	4/17/2014 8:48 PM
21	I don't know	4/17/2014 6:06 PM
22	Not sure	4/17/2014 5:57 PM
23	Not sure	4/17/2014 12:35 PM
24	Only a few that are run on the goodwill of good citizens	4/17/2014 11:23 AM

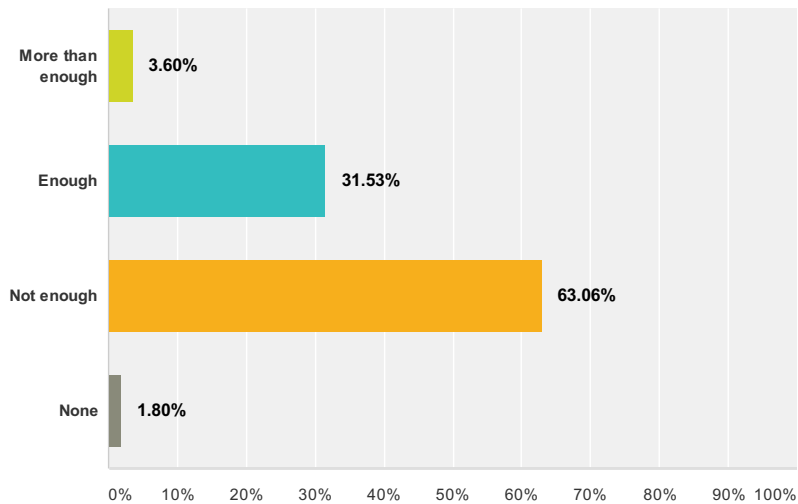
Whyalla Aged and Disability Care Masterplan

25	service providers	4/17/2014 10:49 AM
26	N/A	4/17/2014 9:54 AM
27	Unable to comment	4/12/2014 6:10 PM
28	most social groups do not want to include those with disabilities as they see these people as liabilities and do not always have disabled access to their sites. People are particularly fearful of those with MH issues as they are ill informed of these conditions	4/8/2014 10:21 AM
29	I would not know.	4/7/2014 11:45 AM
30	Don't really know	4/3/2014 2:43 PM
31	.	4/3/2014 11:34 AM
32	General - there is still a lack of support for organisations to take on people with disabilities	4/3/2014 11:24 AM
33	I have no knowledge, or insufficient to make a valid comment.	4/2/2014 2:32 PM
34	Refer to questions 16 and 23	4/2/2014 10:28 AM
35	Access to Hotels, Clubs, Pubs, Gaming Lounges, Cafes, Restaurants, Shops need improving	4/1/2014 2:28 AM

Whyalla Aged and Disability Care Masterplan

Q26 Are there enough opportunities for Whyalla residents with a disability to participate in sporting and other leisure activities?

Answered: 111 Skipped: 91



Answer Choices	Responses
More than enough	3.60% 4
Enough	31.53% 35
Not enough	63.06% 70
None	1.80% 2
Total	111

#	What are the important gaps in the range of activities available?	Date
1	I don't know about this aspect.	5/19/2014 11:09 AM
2	Unable to comment.	5/8/2014 9:16 PM
3	We are not LEPERS we are disabled .There should be more access to places in Whyalla Venues should be accessible toilets people in wheelchairs are unable to access car racing ect.	4/29/2014 2:52 PM
4	Cant say.	4/28/2014 9:33 PM
5	Lawn bowls have disability aids to help disable persons to join in play lawn bowls	4/28/2014 5:52 PM
6	I don't know	4/28/2014 12:02 PM
7	Possibly enough if one has the finances to participate in most instances.	4/28/2014 11:50 AM
8	Again transport	4/27/2014 3:00 PM
9	DONT KNOW	4/27/2014 2:21 PM
10	I don't know.	4/27/2014 1:50 PM
11	disabled access ramps, acceptance by sporting clubs	4/23/2014 10:28 PM
12	I don't know of any	4/23/2014 3:07 PM
13	Don't know	4/23/2014 1:06 PM
14	Unable to comment	4/23/2014 12:07 PM
15	unsure - i would think that people would normally have to go to Adelaide to be adequately supported if they were to do something different or be involved in mainstream sport activities.	4/22/2014 10:42 AM
16	Unsure	4/22/2014 10:38 AM
17	i'm not in to sport so dont know	4/18/2014 9:15 PM
18	Not sure what is available or where to send them to such activities but would like to know to help several residents	4/18/2014 3:05 AM
19	Transport is a big issue. Taxi fares are prohibitive for many who need to use them on a frequent basis.	4/17/2014 10:18 PM
20	Not sure	4/17/2014 8:48 PM
21	I don't know	4/17/2014 6:06 PM
22	Not sure	4/17/2014 5:57 PM
23	Not sure	4/17/2014 12:35 PM
24	Lack of skills and structures to support participation	4/17/2014 11:23 AM
25	i do not know	4/17/2014 10:49 AM
26	N/A	4/17/2014 9:54 AM

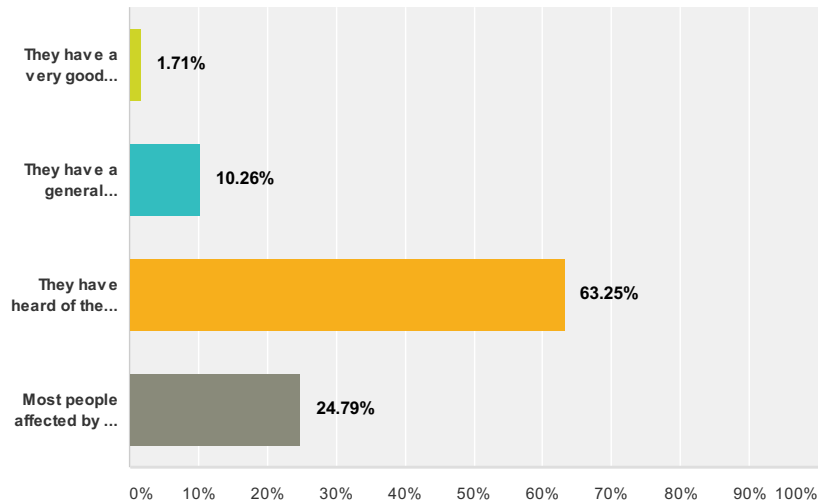
Whyalla Aged and Disability Care Masterplan

27	Unable to comment	4/12/2014 6:10 PM
28	Nothing as far as my knowledge goes.	4/8/2014 2:29 PM
29	Need a lift in the local pool for access in and out of the water, not enough volunteers in other sporting clubs to assist those with disabilities to participate	4/8/2014 10:21 AM
30	Have know of younger people who are now wheelchair bound moving to Adelaide to pursue sporting activies	4/7/2014 3:04 PM
31	I would not know	4/7/2014 11:45 AM
32	Don't know. Why not start some activities if there are none?	4/3/2014 2:43 PM
33	Not sure	4/3/2014 12:21 PM
34	A Special Olympics organisation would be great in Whyalla.	4/3/2014 11:34 AM
35	Sports tend to be the traditional lot - nothing that would support participation by people with disabilities	4/3/2014 11:24 AM
36	I have no knowledge, or insufficient to make a valid comment.	4/2/2014 2:32 PM
37	Refer to questions 16 and 23	4/2/2014 10:28 AM

Whyalla Aged and Disability Care Masterplan

Q27 The Australian Government is in the process of introducing a new scheme to fund disability services, the National Disability Insurance Scheme (NDIS). In your experience, do Whyalla residents affected by the introduction of NDIS understand how the scheme will change the way in which they access disability support services?

Answered: 117 Skipped: 85



Answer Choices	Responses	
They have a very good understanding of the NDIS scheme.	1.71%	2
They have a general understanding of the NDIS scheme, but there are some gaps in their understanding.	10.26%	12
They have heard of the NDIS scheme, but know little about it, and do not really understand it.	63.25%	74
Most people affected by the NDIS scheme have not heard of the scheme.	24.79%	29
Total		117

#	Comments	Date
1	Again, not having someone with a disability close I can't answer this.	5/19/2014 11:10 AM
2	Unable to comment.	5/8/2014 9:17 PM
3	I am unable to comment on other peoples experiences, however, until now I have heard of the NDIS.	5/6/2014 10:03 PM
4	no knowledge	4/28/2014 10:32 PM
5	Cant say.	4/28/2014 9:38 PM
6	Dont know	4/28/2014 9:30 PM
7	So far I know very little about this new scheme and I would suggest more information be made available via local press, TV, radio or the local library.	4/28/2014 11:53 AM
8	more information on what is available and who is eligible is needed	4/28/2014 11:50 AM
9	in my opinion only	4/28/2014 11:00 AM
10	Any change like this introduces a strong element of fear and anxiety. There is not enough available employment and the stress caused to many people will probably add to the already overused and expensive health services	4/28/2014 10:15 AM
11	I am guessing people don't know about it in detail. I am an aware person and I have VERY little understanding of it.	4/27/2014 5:47 PM
12	I am one of those people and I have not heard of this scheme.	4/27/2014 4:15 PM
13	Often the wording and advertising is too lengthy and not geared to the people who need the scheme	4/27/2014 3:01 PM
14	My answer is a guess, though I guess the recent WN article about the Westerman twins may have educated people more.	4/27/2014 1:51 PM
15	this question cannot be answered as I don't know anyone affected	4/23/2014 10:30 PM
16	No idea	4/23/2014 3:07 PM
17	Can't comment-don't know what their understanding of the scheme is.	4/23/2014 1:07 PM
18	I have no idea what understanding people affected by NDIS have.	4/23/2014 9:32 AM
19	It changes so much it is difficult for people to keep up	4/22/2014 1:23 PM
20	I would not have a clue of their level of understanding	4/22/2014 10:51 AM
21	I haven't heard of it.	4/19/2014 10:52 AM

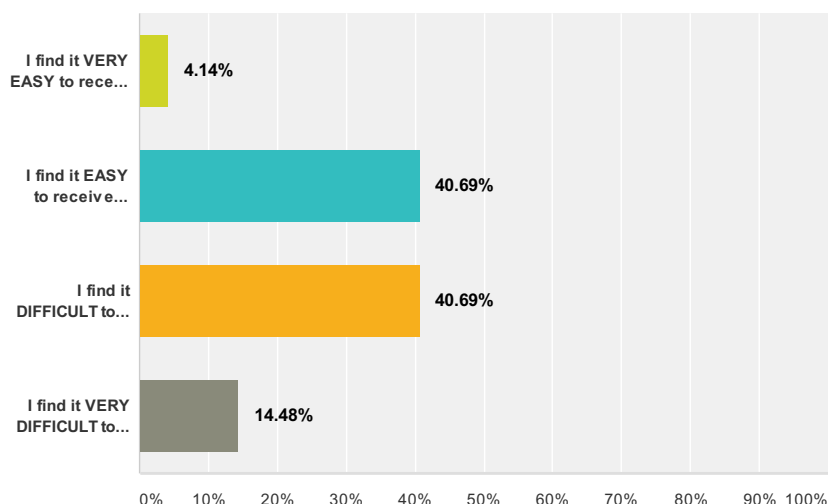
Whyalla Aged and Disability Care Masterplan

22	dont know	4/18/2014 9:16 PM
23	It is a ridiculously complex system in which Whyalla do s not have the breadth of service to cater for a private marketplace model, and realistically the prices the NDIS state will sap up any allocated funding for a person in a heart beat. NDIS also does not cater for changing goals, not does it respect the amazing networks some families and clinicians already have. We also need to remember that NDIS doesn't capture all of our health needs - the undiagnosed, the people who do not access mainstream services, and aged will not benefit	4/18/2014 6:42 PM
24	Unable to comment	4/18/2014 11:21 AM
25	How can this question be answered if the people have intellectual disability	4/18/2014 3:06 AM
26	I don,t know exactly what the NDIS scheme is supposed to do, but I certainly hope it makes lives better	4/17/2014 8:49 PM
27	I don't know	4/17/2014 6:07 PM
28	There needs to be more contact with people in the general community.	4/17/2014 1:32 PM
29	I am not aware of this	4/17/2014 12:35 PM
30	unknown	4/17/2014 10:50 AM
31	no idea	4/17/2014 10:04 AM
32	Unable to comment	4/12/2014 6:11 PM
33	What looked like something good on the adverts turned out to not include anyone in Whyalla?? Too many restrictions to who will be assisted I think it was for under 16yo in Whyalla area	4/7/2014 3:05 PM
34	No Idea.	4/7/2014 11:46 AM
35	like most thing ran with government to many public servants will get jobs and the public will just get screwed	4/3/2014 10:37 PM
36	Don't know	4/3/2014 5:50 PM
37	Don't know	4/3/2014 2:44 PM
38	A few organisations are aware of the opportunities that this change will generate and are positioning themselves early. There needs to be more information/education re how the change will work.	4/3/2014 11:25 AM
39	There is so much 'fine' print to this scheme that would make it impossible for many with disabilities to understand it without a trained honest person to explain the details correctly.	4/3/2014 11:07 AM
40	Unsure of this. I have a family member not living in Whyalla who has not dealt with the previous disability support services (before the NDIS introduction) and did not have any knowledge at all...even though she has been seeking assistance for her young son aged 4 for the past 2-3 years. My partially educated guess is that unless you have already been in the system you don't know anything about it.	4/2/2014 10:31 AM

Whyalla Aged and Disability Care Masterplan

Q28 Which of the following statements is TRUE?

Answered: 145 Skipped: 57



Answer Choices	Responses	
I find it VERY EASY to receive information about services, activities and opportunities.	4.14%	6
I find it EASY to receive information about services, activities and opportunities.	40.69%	59
I find it DIFFICULT to receive information about services, activities and opportunities.	40.69%	59
I find it VERY DIFFICULT to receive information about services, activities and opportunities.	14.48%	21
Total		145

#	How would it be easier for you and others to access this information?	Date
1	Create a link on the Whyalla Council website listing the services and contact details and for those people not accessing the internet have copies in the library and a stand in Westlands	7/14/2014 6:43 PM
2	I don't know. Haven't had to do it yet	7/14/2014 4:14 PM
3	At times	7/13/2014 7:21 PM
4	Whyalla to have a community bulletin on TV like Port Augusta. Whyalla News community diary - good	4/29/2014 4:57 PM
5	Well information days but then we get these days in Whyalla Then bang it goes to the City never mind the COUNTRY, no wonder we feel like LEPERS.	4/29/2014 3:19 PM
6	Cant say.	4/28/2014 9:47 PM
7	Having one aged care department which has access to all health records eg doctor, hospital, Centrecare Dept veterans affairs	4/28/2014 1:27 PM
8	Like everything unless one needs something you do not go out of your way unless it is specific to your needs. General basic information with information on where to go for in depth info should firstly be found at our local library or Council office.	4/28/2014 12:10 PM
9	workshops letter drop pamphlets etc. information sessions	4/28/2014 11:53 AM
10	Unsure about all the resources available	4/28/2014 11:27 AM
11	For those with computers this is probably not hard, but I think the elderly are severely disadvantaged here, born before the IT era.	4/27/2014 5:04 PM
12	To not expect telephone contact to gather information.	4/27/2014 4:14 PM
13	More Advertising on TV	4/27/2014 3:04 PM
14	If you dont have the WWW,,your stuffed,, everything is geared to the net,,,I had a smart phone...and was lucky to have that,,,I still dont have a Home phone line,,, Lucky now th have Ipad..so i can go on line ,,	4/27/2014 3:02 PM
15	Occasional Advert on the TV would help	4/27/2014 2:27 PM
16	Some entries in the phone book aren't where one would expect to find them at first. Sometimes it's easier to google!	4/27/2014 1:54 PM
17	I found this question confusing and wonder why it was asked	4/23/2014 10:32 PM
18	Most people including myself do not know what they dont know. For example how do you find out about something as simple as a Seniors Card, I found out from someone who found out by hearsay. So how do you find out what is available?	4/23/2014 4:53 PM
19	Never had to find these type of services	4/23/2014 3:21 PM
20	It's easy to find information, it's another story if it's followed through.	4/19/2014 11:04 AM
21	I have never looked for services so dont know	4/18/2014 9:21 PM
22	Whyalla council web site could list available services	4/18/2014 2:06 PM
23	Be Nice to know the Whyalla contact point. Several years back the duty officers got paid extra money while the priests rescued people dumped onto the bus in Adelaide with no clothes or goods.	4/18/2014 3:09 AM
24	Available online and the site address regularly seen in ads on TV, Whyalla News or letterbox leaflets.	4/17/2014 8:53 PM
25	I have access to the internet	4/17/2014 6:14 PM

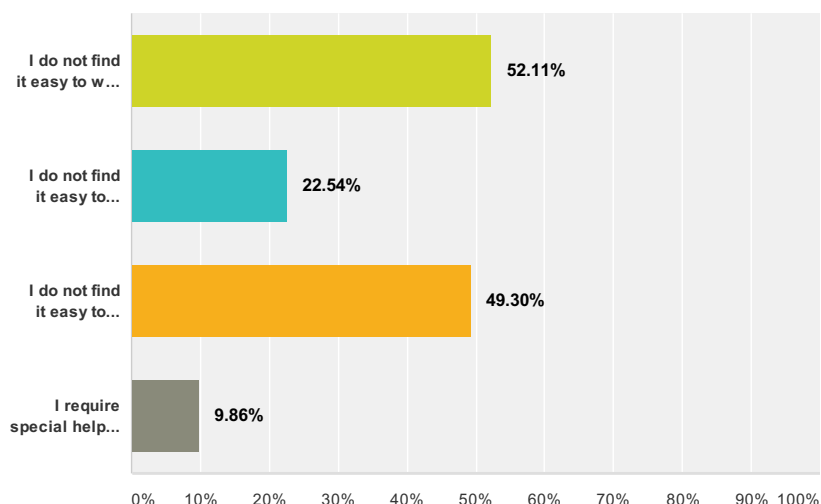
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26	I don't know	4/17/2014 6:08 PM
27	a web specific site helps	4/17/2014 10:51 AM
28	N/A	4/17/2014 10:05 AM
29	Unless you know where to go, its very difficult to access information.	4/8/2014 2:30 PM
30	I don't know how helpful information can be disseminated to those who need it. Even as a past professional I was not aware of all services available. Different groups have access to different information but usually one has to be a part of "the group" to find out information.	4/3/2014 5:58 PM
31	Letter drops telling people what is available	4/3/2014 4:36 PM
32	Having a dedicated Case Worker or service (either face to face or phone) to help over see and advise on services, activities and opportunities would be great.	4/3/2014 11:41 AM
33	By "knowing what I don't know" that is who or where do I get information	4/3/2014 11:27 AM
34	There needs to be a common point to access ALL RELEVANT INFO.	4/2/2014 2:36 PM
35	Some information is easy to find and other info is very difficult unless you know someone who knows. A single central internet based information hub with information that could be printed out when needed would be the best place for access.	4/2/2014 10:44 AM
36	Local Database with disabled/handicapped people and each person is sent out a quarterly newsletter to inform them of ALL activities happening within the next three months. Therefore RDA or whoever gets the task to compile the list needs very good working relationship with all businesses, community groups and the public to have information sent to them	4/1/2014 2:35 AM
37	Central point of information such as a website with activities and services	3/24/2014 9:27 AM
38	Through media - television, newspaper, social media	3/23/2014 12:56 PM

Whyalla Aged and Disability Care Masterplan

Q29 Which of the following statements are TRUE?

Answered: 71 Skipped: 131



Answer Choices	Responses	
I do not find it easy to walk around Whyalla.	52.11%	37
I do not find it easy to drive around Whyalla.	22.54%	16
I do not find it easy to access public transport in Whyalla.	49.30%	35
I require special help with getting around, and I do not find it easy to get that help in Whyalla.	9.86%	7
Total Respondents: 71		

#	What makes it difficult for you or others to get around?	Date
1	I use DPI. I found the taxi drivers are lazy and do not help. Also steps - I need flat ground.	7/14/2014 5:19 PM
2	N/A	7/14/2014 4:14 PM
3	As I have lived in Whyalla, I find it very easy to walk or drive around Whyalla	7/13/2014 7:21 PM
4	Health mostly, but pavements not good. People's garden, overhanging trees.	7/13/2014 7:17 PM
5	None of the above.	5/19/2014 11:11 AM
6	Lack of public transport at times required & to places required.	5/8/2014 9:21 PM
7	There are many streets in Whyalla which do not have any footpaths down at least one side of them, or have footpaths with sections missing. This forces many people to walk (or ride if they are on motor scooters) on the road which is not always safe to do.	5/6/2014 10:11 PM
8	Does not apply	4/30/2014 11:12 AM
9	The footpaths are not good they are on an angle ,I have a gopher and find it very difficult drive on the footpaths as well. Public transport is not accessible. I maybe a lucky person as I have a full time carer	4/29/2014 3:19 PM
10	no difficulties	4/28/2014 9:47 PM
11	No problem moving around	4/28/2014 9:32 PM
12	none of them	4/28/2014 1:02 PM
13	I do not think any of the above statements apply to Whyalla as our most of our footpaths are in good conditional for walking or for the use of gophers. Our roads and the shape of the layout of Whyalla make driving around it quick and convenient although some of the new road features installed leave a little to be desired.	4/28/2014 12:10 PM
14	I find it very easy to do all	4/28/2014 11:27 AM
15	For some who have to use taxis the waiting time can be annoying / inconvenient	4/28/2014 10:20 AM
16	wheels get stuck in the grid things they put in the footpaths, most of the footpaths are rasy, when you think there and end its a drop, lots of pots holes in the road.	4/27/2014 9:24 PM
17	its time the street signs were repainted .. half the time you wouldnt know where you were in whyalla !!	4/27/2014 7:46 PM
18	Comments I have heard from others: Poor wheelchair and scooter access. Limited scooter access in public toilets. Poor footpaths for propelling self in wheelchair. Buses are not wheelchair accessible.	4/27/2014 7:00 PM
19	IT'S EASY!	4/27/2014 6:11 PM
20	Don't know about public transport but for those who drive, it is very easy to get around in Whyalla and access to most places is good. Places like top of Elliot St near lookout are a challenge for those with a disability.	4/27/2014 5:50 PM
21	Disabled parking, especially at Doctors on Playford, absolutely no thought, I don't think the new entrance to Target is going to work either, for wheelchair access.	4/27/2014 5:04 PM
22	The limited transport and assistance to use.	4/27/2014 4:14 PM
23	Buses take forever to get anywhere unless its on the route to town	4/27/2014 3:04 PM
24	None	4/27/2014 3:02 PM

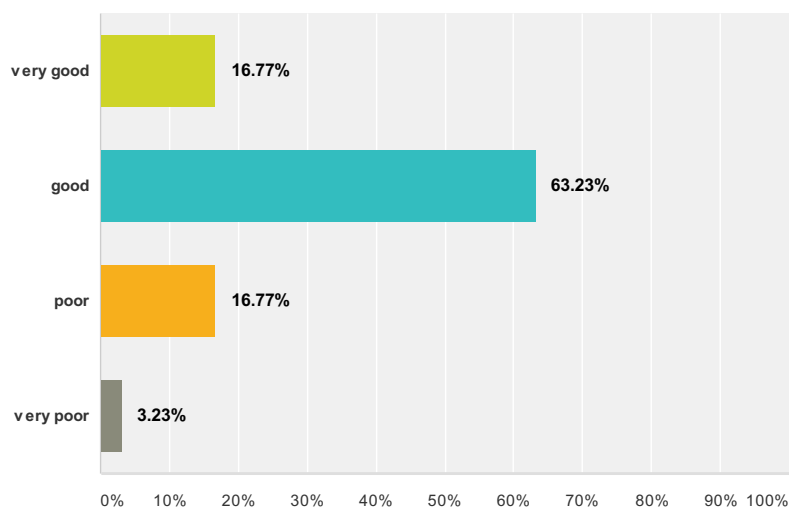
Whyalla Aged and Disability Care Masterplan

25	Lavk of transport systems, routes	4/27/2014 2:36 PM
26	I can't comfortably walk as far as I used to - but I don't suppose you meant circumambulating the whole city. Some uneven footpaths need attention. The thing that annoys me most as a driver is the lack of street signs on many intersections - it's a pain having to get the map out to see which road I'm crossing.	4/27/2014 1:54 PM
27	I have no problems, but know very little about the public transport system.	4/23/2014 4:53 PM
28	Not applicable	4/23/2014 3:21 PM
29	Not applicable.	4/23/2014 9:37 AM
30	Difficult to walk as far as I used to	4/22/2014 5:50 PM
31	Quality of roads, loose dogs	4/22/2014 2:06 PM
32	tripping hazards in the pavements	4/22/2014 1:25 PM
33	I believe that it is difficult for persons who are elderly or have a disability find it difficult to get around Whyalla , due to the number of changing footpath surfaces. and in some cases the distances between footpaths. EG: footpath and main road crossings.	4/19/2014 11:04 AM
34	I don't have a problem, get around	4/18/2014 9:21 PM
35	the paths are shocking in areas and in some areas there is no footpaths.	4/18/2014 3:44 PM
36	The volunteer drivers are great	4/18/2014 3:09 AM
37	I am fortunate to drive my own car otherwise I think it would be very difficult to get around.	4/17/2014 8:53 PM
38	I don't know	4/17/2014 6:08 PM
39	Too many roundabouts	4/17/2014 5:52 PM
40	I don't have any problems getting around whyalla, why is this not an option.	4/17/2014 3:22 PM
41	NA	4/17/2014 1:07 PM
42	N/a	4/17/2014 1:03 PM
43	N/A	4/17/2014 10:05 AM
44	Poor street naming, footpaths varying state of repair, live distance from public transport	4/13/2014 11:59 AM
45	Not applicable	4/12/2014 6:14 PM
46	I think it would be easier to walk around whyalla if council increased funds to their Concrete Footpath Program so that the program is finished quickly so that a safe footpath on both sides of all streets in Whyalla can be constructed and followed up with very regular maintenance.	4/9/2014 1:02 PM
47	not enough buses available and bus stops can be far apart - footpaths are not the best and lighting is a problem in some areas	4/8/2014 10:22 AM
48	No Difficulty.	4/7/2014 11:54 AM
49	try getting a bus on sunday	4/3/2014 10:39 PM
50	Poor footpaths, buttons on traffic lights being too high for a person on a go-kart or something similar	4/3/2014 4:36 PM
51	No appropriate buses with disability facilities and no after working hours public transport other than a taxi or DPI vehicles. Both of which cost most often prohibits the use of these two.	4/3/2014 11:11 AM
52	A good % of footpaths are poorly maintained.	4/2/2014 2:36 PM
53	N/a	4/2/2014 10:44 AM
54	I find it difficult to take Mum out as she has to be in a wheelchair when out and about the footpaths, beach access etc are not good for wheelchairs	4/1/2014 10:37 AM
55	Physical barriers that are unknowingly placed make Whyalla a logistical nightmare for disabled persons wishing to partake in various activities of their choice. Often people think that they are improving something for a disabled person, but in reality it is creating a nightmare for the disabled person(s) to manipulate/traverse	4/1/2014 2:35 AM
56	Many footpaths, curbing and road verges are not maintained uneven with big holes etc. Many footpaths have trees overhanging making it impossible to walk on them.	3/24/2014 9:27 AM

Whyalla Aged and Disability Care Masterplan

Q30 (Business services include such services as banking, insurance, tax return preparation, real estate sales, and legal advice.) I believe that the range and quality of business services and retail shops available to Whyalla residents is ...

Answered: 155 Skipped: 47



Answer Choices	Responses	
very good	16.77%	26
good	63.23%	98
poor	16.77%	26
very poor	3.23%	5
Total		155

#	What are the important gaps in the services available?	Date
1	More shops	7/13/2014 7:17 PM
2	Very little variety in retail shops, generally low quality.	5/8/2014 9:21 PM
3	For the most part Whyalla has a good range of business services and retail shops, however the range of some outlets is lacking (e.g. Shoe Shops, Variety and Toy Stores, etc.).	5/6/2014 10:11 PM
4	I know that a certain amount of people with disabilities need to access shops that have steps needs to be eighty % before ramp is required, or refurbishment .Maybe something could be done to access shops down town	4/29/2014 3:19 PM
5	I think in quite general terms we are well served in most of these services although until recently we lacked a good menswear store supplying a full range of men's clothes.	4/28/2014 12:10 PM
6	we always need more	4/28/2014 11:53 AM
7	We need a Big W or a Kmart, it's a long drive to Port Augusta, Port Pirie or Adelaide.	4/28/2014 10:20 AM
8	no decent mens wear !!	4/27/2014 7:46 PM
9	Poor variety leading to higher prices. Lack of range of meal choices and cafes	4/27/2014 7:00 PM
10	Shoe shops	4/27/2014 4:14 PM
11	Choice	4/27/2014 3:04 PM
12	No bookshop any more; chemists now owned by one owner and not as much competition isn't good; big stores like Spotlight don't stock enough but no competition so have to look elsewhere; most supermarkets on western side of town	4/27/2014 2:25 PM
13	We need more competition, but then we do not have a strong enough population. The real issue as distinct from Pt Lincoln, Pt Pirie etc is that we do not service a hinterland	4/23/2014 4:53 PM
14	The services in the brackets above are sufficient I believe but the retail shops are not, as the opportunity we have just missed out on like getting Kmart in Whyalla is disappointing and the shops here suffer as people seem to shop outside of Whyalla for retail type shops.	4/23/2014 3:21 PM
15	Competition within the market	4/23/2014 12:08 PM
16	the location of the services is the issue. in Whyalla nothing seems central. people struggle if they have an appointment in town to get there and there is a high percentage of households in Whyalla who do not have a car.	4/22/2014 10:44 AM
17	Quality is Ok - range is poor	4/18/2014 6:42 PM
18	access to lighting options, plumbing accessories, tradespersons who will do 'small' jobs	4/17/2014 10:28 AM
19	business services would be better than retail shops this should maybe be two questions	4/7/2014 3:07 PM
20	rents are too dear for small business	4/3/2014 10:39 PM

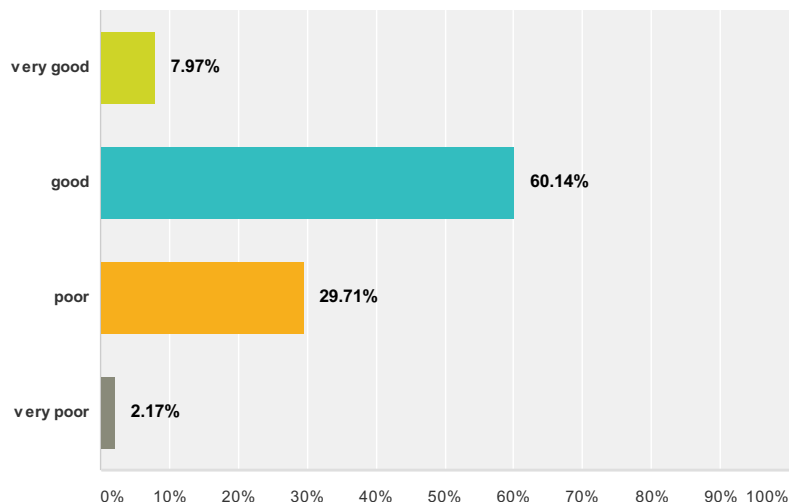
Whyalla Aged and Disability Care Masterplan

21	Adequate Lack of quality shoe shop.	4/3/2014 5:58 PM
22	Another shop like Target	4/3/2014 4:36 PM
23	Declining I think as businesses close. Pt Augusta has more services per head of population.	4/3/2014 12:23 PM
24	these services are good but it is often hard to find out what families/carers need ie legal advice for a carer of a child with disabilities when the child turns 16yo.	4/3/2014 11:41 AM
25	Limited disabled equipemnt on display or able to be trialed.	4/2/2014 2:36 PM
26	Range and quality (in general) of business services is good to very good. Customer service is not always so good though. Retail has some gaps or at least needs competition in some areas to increase variety.	4/2/2014 10:44 AM
27	My answer would be "reasonable" because I believe there is a definite need for retail shops for men and shoes.	3/27/2014 6:39 PM
28	Retail good many trades in short supply or provide poor quality	3/24/2014 9:27 AM
29	Hugh new shopping centre going up and yet stores in the current centre are closing thier doors due to cost of rent somethings not right with that picture	3/22/2014 2:05 PM

Whyalla Aged and Disability Care Masterplan

Q31 (Household services include such services as home maintenance, gardening or cleaning. Personal services include such services as haircuts or ironing.) I believe that the range and quality of household and personal services available to Whyalla residents is ...

Answered: 138 Skipped: 64



Answer Choices	Responses	
very good	7.97%	11
good	60.14%	83
poor	29.71%	41
very poor	2.17%	3
Total		138

#	What are the important gaps in the services available?	Date
1	Unable to comment.	5/8/2014 9:21 PM
2	But why do the people who do the maintenance charge more if you are in a wheelchair I do not own my own home but rent from housing S.A..That is money they are taking from other projects [Double]	4/29/2014 3:19 PM
3	don't know	4/28/2014 1:02 PM
4	Location of some services where they are most needed leave a little to be desired.	4/28/2014 12:10 PM
5	there are gaps and many don't know about or think they wouldn't be eligible, More information and publicity is needed	4/28/2014 11:53 AM
6	dont use them	4/27/2014 7:46 PM
7	The recipients' unwillingness to do some things for themselves	4/27/2014 6:11 PM
8	Yes things are at Target to buy like mos places	4/27/2014 4:14 PM
9	An affordable gardening service as many homes have large gardens in Trust Houses.	4/27/2014 3:04 PM
10	Knowledge of who to contact that are interested in small jobs	4/27/2014 2:36 PM
11	Gardening companies want to make money so they go and work for councils and big companies rather house holders.	4/27/2014 2:27 PM
12	Have had to get tradesmen from Pt Augusta or Pt Lincoln!!!!	4/27/2014 2:25 PM
13	I have had no need to utilise these services YET	4/23/2014 4:53 PM
14	I think there is a service that needs to be looked at is elderly that need help with handling their finances and personal affairs as I recently came across a elderly gentleman who could live in his house as he was being harassed to the point he was to scared to go back there he was sent to Centrecare who sent him to Centrelink who sent him to live a cheap accom at the Spencer this gentleman also had a language barrier he now has some action thanks to a colleague of mine that did not give up and finally had Domicillary Care Social Worker get in contact with him, this man just kept getting turned away at every point and really didn't know what to do or where to turn because of the language barrier I know hope he is able to find the help he needs.	4/23/2014 3:21 PM
15	Have you tried to get a gardener or a cleaner? very few and the standard leaves a lot to be desired.	4/22/2014 1:25 PM
16	The lack of common courtesy to customers. EG: Ring up a local contractor and ask for a quote, you either get rudely told not interested or they don't bother contacting you. THEY FORGET THAT IN WHYALLA WORD GETS AROUND FAST.	4/19/2014 11:04 AM
17	again - quality is there but range is poor	4/18/2014 6:42 PM
18	We only know of services that have to be paid for	4/18/2014 2:06 PM
19	Unable to comment	4/18/2014 11:22 AM
20	I don,t know what services are available, but as I have just had major surgery I may be about to find out.	4/17/2014 8:53 PM

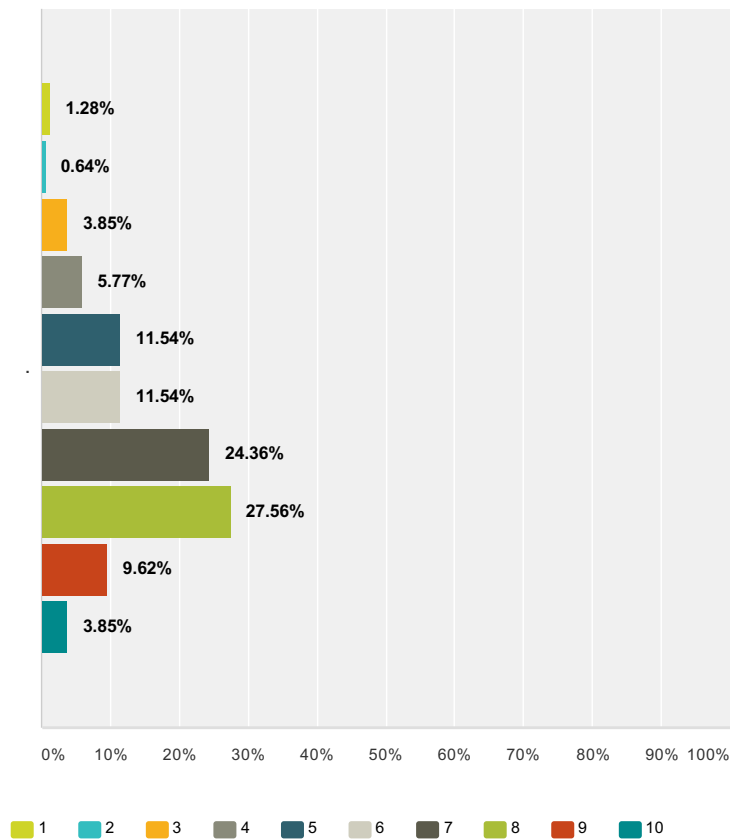
Whyalla Aged and Disability Care Masterplan

21	Not sure, do not use service as yet.	4/17/2014 5:59 PM
22	Difficult to find reliable service providers	4/17/2014 11:24 AM
23	tradespersons who will do 'small' jobs	4/17/2014 10:28 AM
24	Probably not enough staff.	4/7/2014 11:54 AM
25	Suspect that some of these services are available but may be expensive to a Pensioner with limited income. I am not aware of the range of Domicillary Care	4/3/2014 2:47 PM
26	I dont have any experience of this at the moment.	4/3/2014 11:41 AM
27	If you can afford them	4/3/2014 11:27 AM
28	Finance for more support workers.	4/2/2014 2:36 PM
29	Range and quality (in general) of personal services is good to very good. Customer service is not always so good though. Unsure as to what other household services besides rubbish pick up are needed.	4/2/2014 10:44 AM
30	Small appliance white goods service and mtce.	3/21/2014 1:12 PM

Whyalla Aged and Disability Care Masterplan

Q32 With 10 being excellent, and 1 being terrible, how would you rate Whyalla as a place to live for older people?

Answered: 156 Skipped: 46



	1	2	3	4	5	6	7	8	9	10	Total
.	1.28%	0.64%	3.85%	5.77%	11.54%	11.54%	24.36%	27.56%	9.62%	3.85%	156
	2	1	6	9	18	18	38	43	15	6	

#	What would you like to change?	Date
1	Better services and medical and social	7/14/2014 6:55 PM
2	It's there if people want to do it	7/13/2014 7:18 PM
3	Public transport, wider variety of places to visit i.e. museums, art galleries.	5/8/2014 9:23 PM
4	high quality low cost retirement village technicians and equipment to treat all types of chemo and radio therapy to avoid locals patients having to travel to adelaide mri	4/29/2014 7:46 PM
5	The mindset of our community leaders.	4/29/2014 4:59 PM
6	I would like to see town councilors going in wheelchairs, pretending to be blind and deaf. To see what the elderly and disable put up with in Whyalla all so it would give them the experience of the feelings.	4/29/2014 3:26 PM
7	attitudes by authorities concerned in pedestrian & cycling safety. Pedestrian safety would seem to be lagging behind recent development. pedestrian walkways have been hacked thru' this & constant development & no attempt made to repair. Cyclist safety have also been completely ignored in recent road engineering upgrades, the foreshore being a perfect example.	4/28/2014 9:59 PM
8	Whyalla is a working man's town and it always has been but having said that it is also now becoming a town for retirees as well. This particularly applies to family groups now where grandparents tend to be babysitters for working parents and families now play a much more important role in the makeup of Whyalla than in the younger years of the town.	4/28/2014 12:19 PM
9	transport assistance, taxi costs are high	4/28/2014 11:01 AM
10	whyalla has been run down for a lot of years! to expensive to live here . housing / accommodation for average wage eamers is an absolute joke ! its no wonder ppl dont want to stay here ?	4/27/2014 7:47 PM
11	Accessing the community though better public transport, footpaths and toilet access for scooters. More aged care facilities or beds. More aged care packages and TCPs in residential care. More carer support hours for those caring for someone with a disability. More exercise and well being groups. More parklands with safe suitable lighting.	4/27/2014 7:02 PM
12	The Council it does not know that Whyalla does NOT stop at Playford Ave.	4/27/2014 6:59 PM
13	I would love to see the train service resume to Adelaide and flights to places other than Adelaide eg Roxby Downs. We have a number of people living here and commuting to RD and the number seems to be growing. I personally cannot afford to fly to Adelaide because it is too expensive.	4/27/2014 5:52 PM
14	things to do	4/27/2014 4:16 PM
15	As with all governments all they can think about is feathering there own nests and cutting services to the poor and needy and until we stop greedy corrupting influences in government nothing will change	4/27/2014 3:51 PM
16	Have more aged care beds. Better advertising about what is available	4/27/2014 3:05 PM

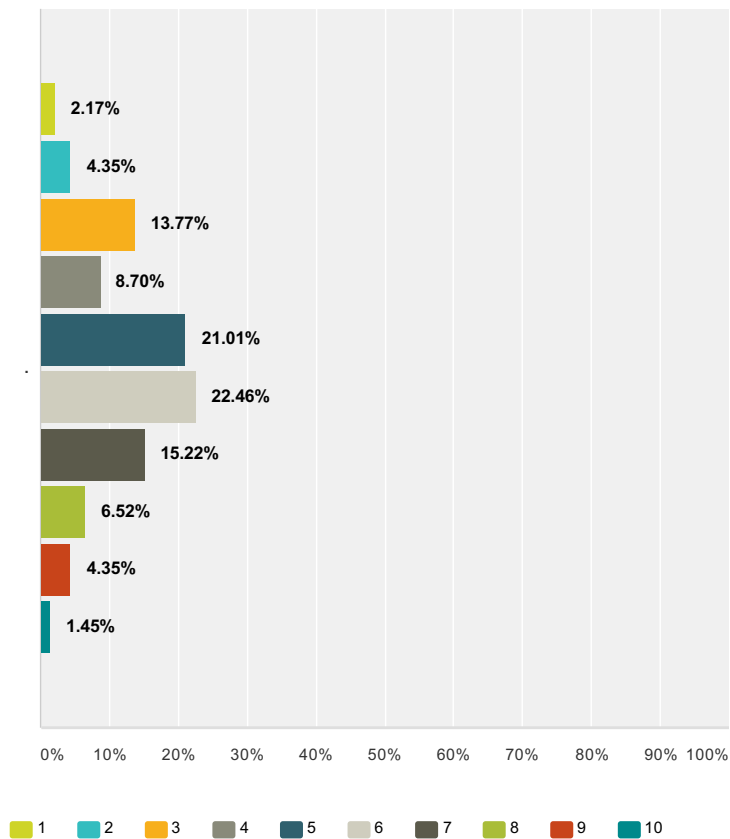
Whyalla Aged and Disability Care Masterplan

17	Home Care...	4/27/2014 3:04 PM
18	Council to understand and act on access issues	4/27/2014 2:37 PM
19	better transport	4/27/2014 2:28 PM
20	Better signage.	4/27/2014 1:55 PM
21	public transport	4/23/2014 10:32 PM
22	More availability of Specialist services so that people don't have to travel to Adelaide for Specialist appointments.	4/23/2014 1:09 PM
23	Improve the transport services, start thinking about the person and not the bus stop. The cost of the airfares make it difficult for older people to travel to adelaide to see their families.	4/22/2014 1:27 PM
24	council	4/18/2014 9:23 PM
25	Lift the liveability standards for the aged and disabled. Better secure independent retirement villages	4/17/2014 8:57 PM
26	A mini bus service that would Pick up people to visit friends, go to movies, doctors, shopping. This service would operate on weekends and allow people to ring for the service, not have to walk to certain stops which is very limiting.not	4/17/2014 8:57 PM
27	cafes etc by the beach, not just one with no change or variety. More lawn bowls and groups performingetc	4/17/2014 1:34 PM
28	As previously stated,	4/17/2014 12:37 PM
29	More services, better housing options better transport	4/17/2014 11:26 AM
30	The Council - Wheel chair access to the Beach - REALLY - When they get to the sand what then ? Cost a fortune and for what?? New Road works and roundabouts - Restricting Driving not making it easier ?? No community consultation. Work for the Dole - Manage people with Council Employees, Drug tests for the Dole as well.	4/17/2014 10:10 AM
31	Improve and increase Aged Care accommodation and Respite Services	4/13/2014 12:02 PM
32	Improved Council Consultation Greater diversity for employment Greater focus on coastal and marine environment conservation.	4/12/2014 6:19 PM
33	Security, night and daytime.	4/8/2014 2:31 PM
34	more social functions and increased specialist services	4/8/2014 10:23 AM
35	quicker access to medical specialists	4/7/2014 3:08 PM
36	free access to public transport for concessional card holders as is available in Adelaide	4/4/2014 4:48 PM
37	the procedure for getting to Adelaide for specialist services not available here	4/4/2014 2:06 PM
38	More aged and disability care villages	4/3/2014 4:38 PM
39	Quality specialist services at Whyalla Hospital	4/3/2014 2:49 PM
40	Need to plan for the future. Not enough retirement homes are available.	4/3/2014 12:24 PM
41	Improve transport options and improve access to healthcare. Improve the range of residential accommodation options	4/3/2014 11:30 AM
42	Health care, home help, transport, social activities, if needed homes built in the best and most pleasant area of Whyalla for these residents with the security of someone being there for them	4/3/2014 11:17 AM
43	Not being older yet - this is my perception	4/2/2014 10:46 AM
44	WHYALLA	4/1/2014 2:37 AM
45	More consultation between the Council and ratepayers before council spend great sums of money on things and then rip them up. To know that when the time comes there might be a facility that I could move to where like-minded people also live. That when something is "put on" more people would take the opportunity to participate. There seems to be quite a bit of apathy in the community.	3/27/2014 6:46 PM
46	need to ensure Whyalla can cope with increasing demand on services and infrastructure for older people living here otherwise they will leave.	3/24/2014 9:29 AM
47	More quality services and activities	3/22/2014 2:06 PM
48	Improved specialist and general health care. A choice in early [55 Or 60 plus] move in attractive aged care accommodation rental or purchase. Development of coastal areas and outback areas close out of town made easier available and more attractive short outing opportunities.	3/21/2014 1:17 PM

Whyalla Aged and Disability Care Masterplan

Q33 With 10 being excellent, and 1 being terrible, how would you rate Whyalla as a place to live for people with a disability?

Answered: 138 Skipped: 64



	1	2	3	4	5	6	7	8	9	10	Total
.	2.17% 3	4.35% 6	13.77% 19	8.70% 12	21.01% 29	22.46% 31	15.22% 21	6.52% 9	4.35% 6	1.45% 2	138

#	What would you like to change?	Date
1	Not enough about education	7/14/2014 6:14 PM
2	more servises and equipement for the vision impaired	4/29/2014 7:46 PM
3	Please see the question above thank you	4/29/2014 3:26 PM
4	more specialist centres and more money for them	4/29/2014 10:25 AM
5	no knowledge to comment	4/28/2014 10:35 PM
6	cant say.	4/28/2014 9:59 PM
7	Better roads and footpaths and more wheelchair access ramps	4/28/2014 1:28 PM
8	Although I have a disability it does not stop me from getting out and around so I base my answer on how it applies to me. We would all like better services but realistically you cannot expect someone else to do everything for you(which some people do) you have to what you can for yourself and in that I think Whyalla is a good place to live.	4/28/2014 12:19 PM
9	lack of information on what is available	4/28/2014 11:55 AM
10	see 32	4/28/2014 11:01 AM
11	All of the above	4/27/2014 7:02 PM
12	The Cuncle and all it's Staff	4/27/2014 6:59 PM
13	I'm not yet in that category, but it may happen in the future. Please look after the older people, the younger ones can work, as we did!	4/27/2014 6:14 PM
14	- things to do - how to get anywhere	4/27/2014 4:16 PM
15	Better access to services and mlre advertising to show what is available	4/27/2014 3:05 PM
16	Home Care...	4/27/2014 3:04 PM
17	better transporty	4/27/2014 2:28 PM
18	Footpaths need upgrading definitely	4/27/2014 2:26 PM
19	More supported accommodation for younger people with DISABILITIES.	4/27/2014 1:46 PM
20	footpaths disabled parking areas to better locations	4/23/2014 10:32 PM
21	More specialist medical personnel	4/23/2014 4:53 PM

Whyalla Aged and Disability Care Masterplan

22	Unable to comment	4/23/2014 12:09 PM
23	I cannot comment on this question. I do not know anyone with a disability to have an opinion on life in Whyalla with a disability.	4/23/2014 9:38 AM
24	Improved qualified staff to provide the services to people in the community. More choice	4/22/2014 1:27 PM
25	Stigma	4/22/2014 10:40 AM
26	dont have an opinon	4/18/2014 9:23 PM
27	The attitude and actions of the people employed, and some volunteers goals and aims.	4/18/2014 3:11 AM
28	Not sure	4/17/2014 8:57 PM
29	I don't know	4/17/2014 6:09 PM
30	More access to facilities, better planning of community event to be more inclusive of disability access.	4/17/2014 1:35 PM
31	need focused groups to fill in time and assist parents and children to have fun and experience different things	4/17/2014 1:34 PM
32	Not sure enough to coment on this	4/17/2014 12:37 PM
33	More and better services - development for clubs and associations to better include people with disabilities	4/17/2014 11:26 AM
34	your survey doesn't allow participants to comment - 'average' or 'I don't know'	4/17/2014 10:29 AM
35	N/A.	4/17/2014 10:10 AM
36	Improve and increase Disability day options, accommodation and Respite Services	4/13/2014 12:02 PM
37	All facilities for people with a disability to be made known and easy to access.	4/8/2014 2:31 PM
38	as above	4/8/2014 10:23 AM
39	public transport should be just as good for those living north of geppes cross	4/3/2014 10:40 PM
40	Limited Specialist care meaning trips to Adelaide	4/3/2014 4:38 PM
41	Unable to comment but would have thought quite reasonable	4/3/2014 2:49 PM
42	More services.	4/3/2014 12:24 PM
43	Services and support for a person living with a disability to live in a supported environment. Increased respite for carers and people with disabilities. The Whyalla is a very caring community and the majority of people do watch out for disabled people.	4/3/2014 11:45 AM
44	Improve the range of support services for people with disabilities and improve the range of support services for community organisations to be better able to incorporate people with disabilities into their activities	4/3/2014 11:30 AM
45	Health care, quality and honest home help, social activities and suitable housing and transport.	4/3/2014 11:17 AM
46	Not living with a disability or someone with a disability - this is my perception	4/2/2014 10:46 AM
47	EVERYTHING - although most disabled would be satisfied with with less things that actually work properly in preference to many things that do not work at all	4/1/2014 2:37 AM

Living Well

Whyalla's Masterplan for Disability and Ageing