

Rural Older Men and Community and In Home Aged Care

Barriers to access and effective models of care

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Older Men and HACCC Services


- ▶ For a variety of reasons health and community services have not traditionally planned for men's use of services
 - ▶ This presentation will use HACCC services as a case study of the consequences of this.
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Older Men and Rural Communities


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- ▶ This presentation will use HACC services as a case study of the consequences of this.



Project Reference Group

- ▶ Noreen Byrne -ADHC
 - ▶ Lucy Moore - ADHC
 - ▶ Pauline Armour - UnitingCARE Ageing
 - ▶ Maja Frölich - Carers NSW
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Rationale

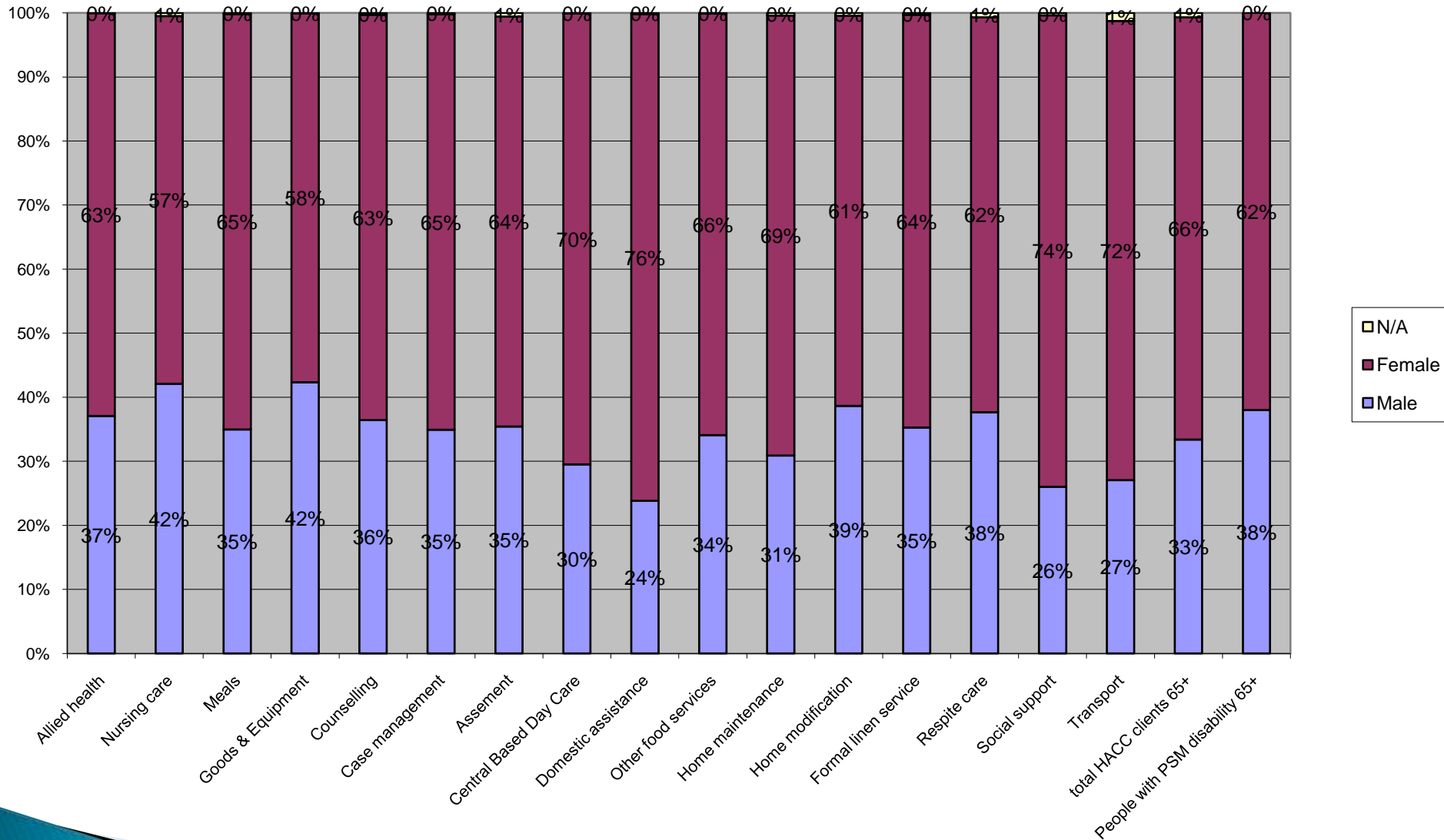
- ▶ A study funded by the NSW Department of Human Service, Ageing, Disability and Home Cares
 - ▶ ADHC staff and HACC service providers had expressed concerns about older male access to services
 - ▶ Other health and human service agencies have approached MHIRC with similar concerns (eg Carers NSW and Alzheimer's Australia concern with older male carers)
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The issue:

- ▶ Older men are not accessing Home and Community Care services at the anticipated level
- ▶ Men aged 65+ are 45% of older population
- ▶ Men aged 65+ are 30%–35% HACC clients (and far less [0–10%] for some services)




Distribution of HACC clients aged 65+ by gender and service type



Notes: HACC client information is sourced from HACC MDS 2008/09 and the data about people with profound, severe and moderate disability is sourced from SDAC 2003.

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Lower male life expectancy

Age Range (years)	Males	Females	Total	% Male
65-69	124,959	129,465	254,424	49.1
70-74	100,549	110,352	210,901	47.7
75-79	85,126	102,965	188,091	45.3
80-84	57,086	83,618	140,704	40.6
85-89	26,162	48,365	74,527	35.1
90-94	8,198	21,267	29,465	27.8
95-99	1,426	5,180	6,606	21.6
100 and over	248	809	1,057	23.5
TOTAL	403,754	502,021	905,775	44.6



Only part of the explanation...

What we know about Barriers to male access to human services



- ▶ Different help seeking behaviours
- ▶ Information access
- ▶ Male unfriendly language and environments
- ▶ Masculinity and independence/self reliance

Understanding the current generations of older men

- ▶ The Oldest –
80 years+
- ▶ The ‘Lucky Generation’
65 years+
- ▶ Characterised by:
 - Independence
 - Self reliance
 - Austerity
 - Prudence
 - Not wanting ‘charity’



Method

- ▶ Survey of service providers: n=126
- ▶ Focus groups with service providers
 - Rural
 - Regional
 - City
- ▶ Interviews with older men, carers and individual service providers

Research design approved by UWS Human Ethics Committee

Barriers to accessing care

In Home services

- Independent generations of men – ‘I can manage myself’
- Embarrassment/reluctance about asking for help
- Unfamiliar/feminised services (social services world)
- Information barriers – not knowing what is available

Community based

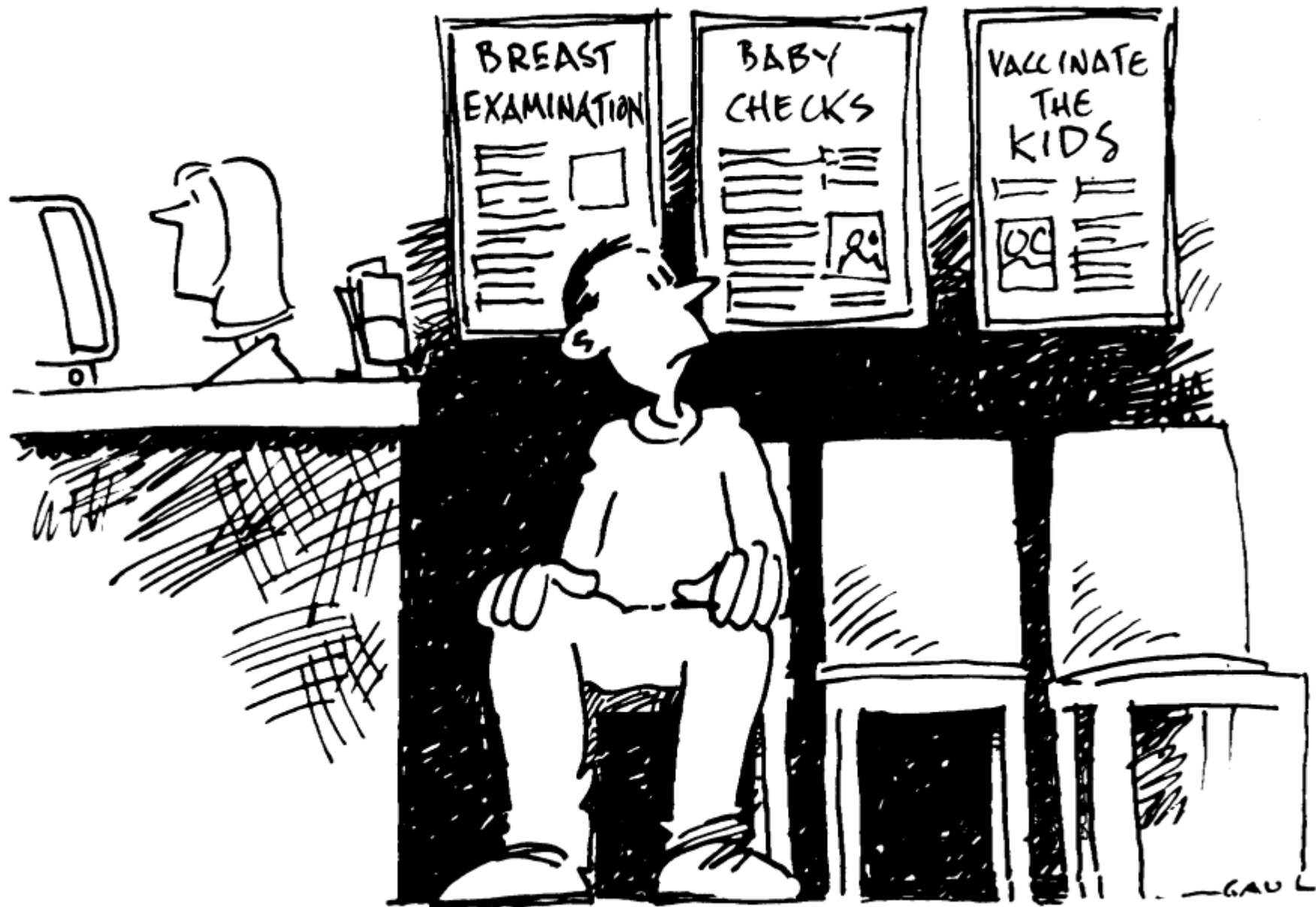
- Activities not of male interest
- Activities female dominated
- Organised activities seen as too formal
- Information barriers

Health and Community Services

*It's a feminised world as far
as that's concerned.*

*The social welfare or whatever you
want to call it.*

Keeping the Balance. (2001)



Rural specific challenges

- ▶ Transport
- ▶ Isolation
 - Widowed
 - living on large properties
- ▶ Information challenges



Strengths of Rural Service Provision

- ▶ SP have lived experience and understanding of rural life and rural men
- ▶ Intimate knowledge of their particular community and the people in that community



*“...anything to do with
machinery or the weather”*

- ▶ Service Providers in the country had a more pragmatic approach to engaging men than services in urban areas.
- ▶ Stressed the importance of understanding and respecting country life, men’s previous roles and masculine culture in the bush.
- ▶ *“They like activities that have anything to do with machinery or the weather.”*

Strategies

- ▶ Incorporate learnings from other successful ways of engaging older men

such as community men's sheds



Ashfield Men's Shed
Mary MacKillop Outreach

Ashfield Men's Shed Mary MacKillop Outreach



Fold Away Shed

Alzheimer's Australia (SA)







Effective models of care

- Male friendly language
- Respectful of generational attitudes
- utilising independence / self reliance
- Use of male staff/volunteers
- Approaching men 'where they are at'
- Using less formal venues – pubs/clubs
- Designing activities of masculine interest / men only
- Designing male friendly environment

Activities older men like

- ▶ “Anything to do with machinery or the weather”
- ▶ Lunch at a local pub or club
- ▶ Using the outdoors, on the veranda, bus trip, chess / boules in the park
- ▶ Develop a ‘men’s space’ in a centre – (with outdoor access for smoking)
- ▶ BBQs at a centre or volunteer’s house



The ideal is to find activities that align with men’s previous activities and interests.

HACC Engagement with Men

Many HACC services ARE effectively engaging with older men,

However...

- ▶ Ad hoc and unorganised
- ▶ Dependent on individual worker and supportive organisations
- ▶ Not supported explicitly by policy or funding directives
- ▶ risks being lost when worker moves on

What next?

Thanks to COTA (NSW) for championing this research and partnering with MHIRC for next stage:

Discussion with ADHC about funding next stage of the project

- ▶ Providing information to men in the community, through Peer Education
- ▶ Capacity Building services

Conclusions

- ▶ Participation ... ask men what they want
- ▶ Build on and embed existing good practice
- ▶ R.M. Williams instead of Laura Ashley
 - Environment
 - Language
 - Respect for masculine qualities
 - Flexibility – one size does *not* fit all

Thank you

Final Report can be downloaded from ADHC and MHIRC websites <http://menshealth.uws.edu.au>

Australian Men's Shed Association (AMSA)

<http://www.mensshed.org/>

Fold Away shed

Behaviour Advisory Service

Alzheimer's Australia South Australia

<http://www.alzheimers.org.au>