

MEET THE TUMSS EXEC. • GETTING TASMANIA'S HEALTH SYSTEM BACK ON TRACK • A CHAT WITH ANNE-MARIE

## Turning grey into gold; the government makes plans for Australia's ageing population

The Federal Government has revealed plans to address Australia's ageing population, suggesting that the growing community of senior Australians should be viewed not as a burden, but an opportunity. The plans were detailed in two documents released by Mark Butler, the Federal Minister for Mental Health and Ageing: the first was the Aged Care Reform Package entitled *Living Longer, Living Better* and the other was a document in response to recommendations made last year in a report entitled *Turning Grey into Gold* compiled by the Advisory Panel on the Economic Potential of Senior Australians (EPSA).

"Too often, older Australians tell me that they're made by our society to feel like a burden rather than a resource – an outsider rather than someone who has spent a long life raising a family, paying taxes and building the nation. The truth is that the average 65 year old today is more roundly educated, much wealthier and vastly healthier than their parents," Mark Butler said last year. The documents outline a need to improve aged care services in the community to prevent an increase in the load on public hospitals, and to allow senior Australians to be more engaged in their communities after retirement.

The demographic make-up of Australia is currently undergoing a major transformation, with the proportion of Australia's population over the age of 65 expected to rise from its current level of 14% to 23% by 2050. The ratio of 'people of working age' to 'people aged over 65' is expected to drop from 5:1 (current)

to 2.7:1 over this period. Australia is not unique in this; while the world's population increases by approximately 1.2 per cent per year, the population of seniors is increasing at more than twice that rate. By 2050 there will be 2 billion people in the world over 60 years of age – ten times as many as in 1950. Tasmania is no exception to this trend; in fact, it is currently the fastest ageing state in the country and has the highest median age (40 years).

So what does this mean? Sure, the statistics sound profound, but what is the impact apart from more knitted jumpers, jigsaw puzzles and apple crumble? Well, the pension age in Australia has remained at 65 since it was set in 1908 – more than one hundred years ago. At that time it was rare to live much past that age; now, we can expect to live twenty or even thirty years longer. It is estimated that there are currently 2 million senior Australians outside the workforce who are interested and able to continue work. In addition to the personal burdens, this costs the Australian economy 10.8 billion dollars per year. No one is suggesting that the pension age be raised by twenty years, but clearly something has to change to ensure senior Australians are better able to engage and participate in society. Last year, Federal Treasurer Wayne Swan stated that our ageing population was one of the three most important changes facing Australia's economy (along with the shift of global economic power from the West to the East and the task of de-linking our economic growth from carbon emissions).

Speaking about life after 65, he said: "Those extra years can be rich, full of meaning and no less valuable than those of traditional working age. A big part of that is making sure seniors who want to work, can."

Further to this is the need for reform of Australia's aged care services. *Living Longer, Living Better* reads: "Australia is at a crossroads in the way our community provides care and support to older people. While the aged care system has served us well, it is not well placed to meet the challenges ahead." To what challenges is it referring? Treatment of older Australians already accounts for a large percentage of Australia's health care services and this is expected to increase. There is a need for more nursing homes and more community and in-home care in order to prevent an increased load on the public hospital system. There is also a shift in the types of medical conditions for which patients require treatment. For example, an increasing amount of medical treatment is being sought for chronic diseases, in particular cancer and cardiovascular diseases. The economic impact of this is twofold; firstly, chronic diseases cost considerably more money and resources to treat in the long run compared to acute illnesses, and secondly, they have a much greater impact on the productivity of our society. It is estimated that 2.63 million years of 'healthy' life were lost by Australians in 2003 due to chronic diseases (ie. the number of healthy years of life lost due to disability and

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## A chat with Anne-Marie (interview by Reuben Sum)

**Who is Dr. Anne-Marie Williams? Quietly spoken, composed, young, approachable...**

**Reuben: Thanks for seeing me on such short notice. I was wondering if you could tell me more about your education and time at university.**

**Anne-Marie:** I studied at the University of New South Wales and did a Bachelor of Science with an anatomy major. After this, I did two years at Chiropractic College, then worked for three years as a chiropractor. At the same time, I did a post-graduate diploma at the University of Sydney in exercise and sports science. In amongst that I had children too. Then I did a PhD at the University of Sydney in anthropology. My other qualification is a post-graduate diploma in teaching and learning for higher education, which I did here at UTAS.

**R: And is this why you've ended up teaching at UTAS?**

**AM:** Well, I was actually teaching anatomy at the University of Sydney, which I had done for about 10 years, to the science and medical students. I saw the job here and thought 'why not?' It was just a spur of the moment decision for a change of scenery.

**R: I understand that you are a forensic anthropologist. Are you currently still in that field of work?**

**AM:** Yes, I am officially the state consultant forensic anthropologist and I work for the DHHS [Department of Health and Human Services] and the state forensic pathologist. When skeletal material comes in, he will ask me to come in to consult and write reports about the material in the morgue. I also work for the police and they often ask me to go to cases, where I work with them in the field.

**R: What made you decide on forensic anthropology?**

**AM:** Well...I like bones (laughs). They don't complain and generally don't smell.

**R: Are things similar to the TV show *Bones*?**

**AM:** No, we don't have lovely labs with blue lights (laughs)

**R: So what do you do in your spare time?**

**AM:** Well, I don't have a lot of spare time. I read a bit. I guess I'm a keen gardener, and I have a vegetable patch, some chickens, two dogs, and two cats. I also have two kids, so they keep me busy most of the time.

**R: You're quite well known here in the school of medicine for your drawings. Could we expect an atlas of histology or anatomy any time soon?**

**AM:** (laughs) I don't know about that. I've been discussing maybe a histology atlas with Jamie [Chapman]. I think it would be interesting to do something, although time would be the factor. These things take a lot of time – particularly to create atlases and textbooks. Anatomy is one of those things where there is already a lot of good material out there. I'd love to do a forensic atlas. I think that would be an interesting thing to do, but it probably won't be of much use to medical students.

**R: And is there anything you'd like to say to the readers of *The Medic*?**

**AM:** Study hard and you'll all be wonderful doctors! I really enjoy teaching medical students. It's a very rewarding career, and it's great to watch you guys develop into young doctors as you go through the system.

**R: Thanks for your time.**

## Getting Tasmania's Health System Back on Track

A \$325 million emergency rescue package for Tasmania's health system has been announced by Federal Health Minister Tanya Plibersek after talks with the State Labor Government and independent federal MP Andrew Wilkie. The funding will be directed towards: elective surgery, walk-in clinics, community chronic disease management, palliative care, medical specialist and allied health training, mental health services, and electronic health records. The Tasmanian Government is required to report monthly on how any of the funding is spent, including under which component of the package the money is spent and the specific services it will provide.

Follow this link to read the full media release: <http://www.health.gov.au/internet/ministers/publishing.nsf/Content/mr-yr12-tp-tp053.htm>

## Mental health primary program underway

More than 700 primary schools are now participating in 'Kidsmatter', an initiative to improve the mental health and wellbeing of the nation's primary school students by identifying challenges in children's social and emotional development so that support can be provided early.



## Turning grey into gold; the government makes plans for Australia's ageing population

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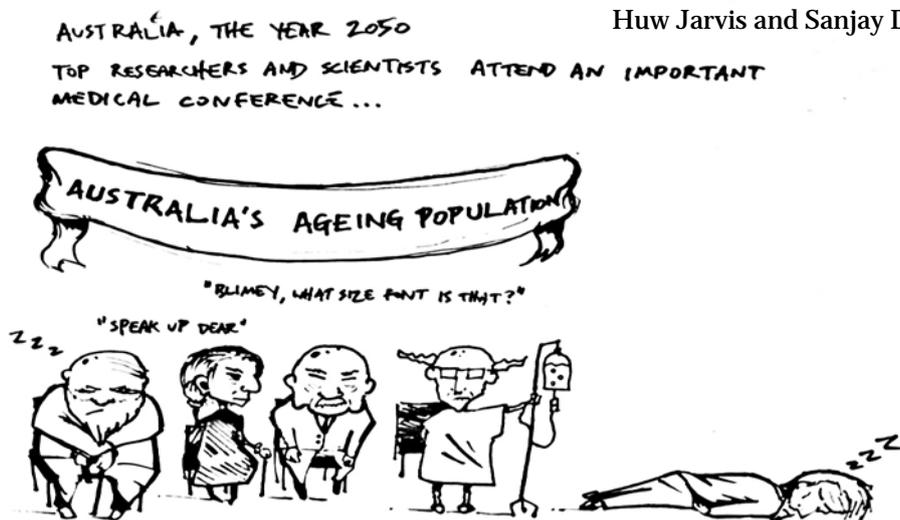
early death). It is clear that the ageing population is causing further strain on an already over-burdened health care system, and the Federal Government should be applauded for investing 3.7 billion dollars in improving our aged care services. Some of the key recommendations to the government have come from the Advisory Panel on the Economic Potential of Senior Australians (EPSA), an expert panel set up in March 2011 by the Federal Government to identify the economic and social opportunities presented by an older population, and to recommend how best Australia can embrace those opportunities. The panel spent several months last year visiting capital cities around Australia, including Hobart (October 27), to hear from peak representative bodies, relevant experts, and members of the public to inform their report, *Turning Grey into Gold*. Tasmanian experts included Professor James Vickers, Head of the School of Medicine at the University of Tasmania and Co-Director of the Wicking Dementia Research and Education Centre. Professor Vickers was consulted by the panel to discuss the value of lifelong learning, for which he used examples from the Tasmanian Healthy Brain Project – a world-first study on the potential for tertiary education later in life to boost brain plasticity and protect against ageing-related cognitive decline. The importance of this contribution proved significant, as the report found that the greatest barrier to harnessing the experience and intellectual capital of our older population is a lack of opportunity for senior Australians to remain engaged in their communities. The Government's response to the report was positive, promising over \$35 million dollars to fund initiatives which will

achieve what it has termed "positive ageing". Plans include the establishment of a new advisory panel (Advisory Panel on Positive Ageing), which will engage with communities across the country to direct Government policy in this area for the next two years. A significant portion of the funding was directed towards reducing ageism and the stereotyping of older people, with extra funding provided to the Age Discrimination Commissioner to help combat ageism in both the workplace and society. In addition, a Jobs Bonus was introduced whereby prospective employers will receive 1000 dollars as a lump sum for each person over 50 that they employ. The new Corporate Champions scheme will see the Government cooperate with a number of employers who have agreed to demonstrate leadership in recruiting and retaining mature age workers to research how best employers can capitalise on the experience of older workers so that this approach can then be utilised by other employers. These plans build on steps taken by the Government last year, which include a boost to the Work Bonus, which allows pensioners to earn up to 6500 dollars each year without having their pensions affected, and the 30 million dollar Experience Plus Program which will up-skill approximately 7500 mature age workers. "In most workplaces, having the word 'senior' in front of your title has positive connotations: knowledge, authority, responsibility, respect," Wayne Swan explained last year. "Why wouldn't we

want to harness those qualities and enhance our workplaces with the clear advantages of seniority?" When asked about the Government's plans, Professor Philip Taylor, Director of Research and Graduate Studies at Monash University and Australia's leading academic on this topic, told *The Medic* that they should be considered with the knowledge that the barriers to establishing a society where Australians continue to work into their 60s and beyond are not only structural but also attitudinal – on the part of the employers who may be prejudiced, and on the part of older people who may prefer retirement. "I believe the Government's 1000 dollar jobs bonus for employers will achieve little. On the other hand, I think investing in employer good practice via the Corporate Champions scheme is a good idea if done properly; the examples and achievements discovered by the scheme should be widely disseminated in society so that other employers can adopt the same approaches," he said.

These measures are only the first steps that need to be taken in order to ensure Australia's aging population is both well looked after and able to continue to contribute knowledge and experience to society. While it is a positive sign that the Federal Government seems serious about taking action, it remains to be seen how many of these measures will become practical changes in the long run.

Huw Jarvis and Sanjay Dutta





## Letters to *The Medic*...

Complaints have been made by clinicians at the Royal Hobart Hospital about the dress standards employed by our medical students, particularly female students in third year. After a call by TUMSS and *The Medic* to the student body for advice on appropriate dress, the general consensus was that if you are going to wear the same outfit to isobar later that night... you've probably missed "appropriate" by a smidge. With this feedback, an anonymous letter was sent to *The Medic* by a mysterious writer calling themselves "Medic Monitor (walking the line between sartorial splendour and fashion fiasco)". Enjoy.

What's up, Frock?

While the minds of our generation are being taken up ruminating over the implications of an economic power shift to the East, the future of the Two-State Solution and a world beyond Carbon, countless important issues are laying on the scrap heap. Foremost amongst these, naturally, is the changing patterns in clinical dress codes for Medical students, and where Chomsky fears to tread, today we shall.

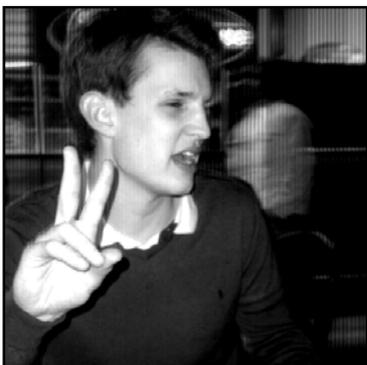
The recent developments of clinical dress can be neatly expressed by tie fashion history - from skinny, to mass weight gain, to the current fad diet of skinny once more. In the interim between fat and skinny the 2nd, the tie made a mass exodus from the wards. This didn't merely represent a fashion trend, but points to a broader socio-cultural phenomenon - postmodern deconstructive structuralism; market everyone as uniform, and everyone fits in, no feelings hurt.

But the thing is, patients still want a doctor that looks professional, while doctors are vigilant not to do anything that looks like something - hence the discarded tie. And this is our post-modern conundrum. How do we keep the baby while tossing the bathwater?

The answer, I feel, lies in the gaiety of youth. Colours must be reclaimed, ties donned, skirts flourishing, and summer brought to pass once more. This is not to say, however, that hemlines must rise, even we have our standards, but the drab banality must be discarded. So, as Horace one said, carpe diem - but no guarantees it'll look good.

## Meet the exec.

Who sits on the TUMSS Executive Committee and what is their role? There are ten of them in total. Last edition, *The Medic* introduced you to the Treasurer, Alistair Park, and the I.T. Officer, Alex Ling. Here we get to know two more (introductions by fellow Committee members)...



### Ben Hunn: AMA REP

Ben Hunn, B. MedSc (Hons), is a former president of TUMSS and an all-round poster boy for the UTAS School of Medicine. He features prominently on the UTAS brochures, has saved

lives in Sudan and is currently our student representative on the AMA Council, ensuring our views are heard. There is some rumour that he nominated himself for the TUMSS Award last year, however he probably deserves it, being approachable, conscientious and a valuable member of the medical student body.



### Nabil Chherawala: SPONSORSHIP

For an international student who anxiously took his Passport to Woolworths the first time he bought groceries in Australia, Nabil Chherawala has come a long way in his 3.5 years Down Under. When he's not sculp-

ting his mesmerisingly trimmed facial hair, Nabil is frantically running around the Clin School Library signing a contracts so that TUMSS has enough mullah to run amazing events for all. If you're lucky, you may even get to join his exhaustingly large sub-committee. Favourite Colour: Yellow; Favourite quote: "why girls from Stockholm be so fresh"; Favourite musician: Mariah Carey.