Valuing the role of care in ageing societies

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1. Introduction
Since the 1980s Australian governments have embraced the neo-liberal agenda which privileges market solutions, microeconomic reform and a reduced public sector role (Raskall, 1993). Macroeconomic policy has been reduced to manipulation of interest rates to achieve target inflation rates, while fiscal policy, the instrument of Keynesian demand management to ensure full employment, has become increasingly passive. Supply-side policies have dominated labour market policy, marking a fundamental shift from recognising unemployment as a consequence of insufficient labour demand, to labelling it a consequence of labour market regulation, bargaining arrangements, welfare state policies and individual inadequacies of the unemployed relating to education, skills, motivation or behavioural traits (Layard, Nickell and Jackman, 1991).

Labour market policies to combat unemployment shifted from attempts to increase labour demand through job creation and wage subsidies to focus on supply-side attempts to rectify the inadequacies of the unemployed. The progression of supply-side programmes can be broadly characterised as moving from concentration on vocational skills, to general skills such as literacy and numeracy and job search assistance, then finally mutual obligation, including Work for the Dole (WfD). The result of this transformation of labour market programmes is summarised by Lafer (1999: 123-124):

> No longer are they to provide the skills or education that might enable participants to gain greater leverage in the labour market. Instead they are intended to lower the sights and aspirations of participants, producing a disciplined class of low-wage workers.

At the same time population ageing and demographic changes that have resulted in a greater proportion of the elderly living alone or without familial support means that there will be an increasing need for aged care services, particularly services provided to assist the elderly remain in the community.

This paper examines the potential to address the needs of the elderly while providing meaningful employment for the unemployed. Section 2 outlines the Job Guarantee proposal to provide jobs for the unemployed to perform socially useful work that enhances the quality of life of the population. The following section describes the distribution of unemployment and the elderly population in Australia, demonstrating the potential for job creation to meet the employment aspirations of the unemployed and the care needs of the elderly. Section 4 examines the extent of existing unmet need and emerging needs for services to the elderly. The remainder of the paper reports the results of a national survey of local governments to determine the extent of unmet need at the local government level.

2. The Job Guarantee
Research has identified significant economic and social costs of unemployment including loss of output, loss of skills and motivation, adverse health effects, deterioration of personal relationships, family breakdown, homelessness and social exclusion (Mitchell, Watts and Burgess, 2000; Nevile and Nevile, 2003; Allen et al., 2007). This section outlines the Job Guarantee (JG) programme that would provide paid employment at the to all those willing and able to work thereby restoring full employment and eliminating the economic and social costs of unemployment (Mitchell and Mosler, 2002; Mitchell, Cowling and Watts, 2003; Allen, 2005).

Jobs producing socially desirable outputs that are currently under-supplied could be created in environmental protection and rehabilitation as well as a wide range of community services, catering to the employment aspirations and disparate skills and abilities of the unemployed.
The JG would provide meaningful employment and an opportunity for skill enhancement by combining on-the-job training and work experience with formal accredited training to provide a career path for future employment. In order to ensure full employment the quantum of JG positions would increase/decrease as the economy contracted/expanded. Thus the JG buffer stock provides a superior mechanism for price stability than the current method of achieving inflation targets through increases in the unemployment level, with all the negative consequences outlined above (Mitchell and Mosler, 2002; Mitchell, Cowling and Watts, 2003). The JG would make a positive contribution to economic and social infrastructure, enrich community life and contribute to social inclusion and cohesion.

3. The spatial distribution of unemployment and the aged population

The failure of orthodox economic policy to restore full employment is evidenced by the sustained underutilisation of labour resources. Despite sustained economic growth since the early 1990s unemployment remained at 4.2 per cent of the labour force in August 2007. In addition, underutilisation, including those who would like more hours of work and discouraged workers, increased throughout this period to stand at 8.2 per cent of the labour force in August 2007 (CoFEE, 2007).

Importantly, the spatial distribution of unemployment suggests that generalised job creation through economic growth is incapable of producing full employment. Hence, specific strategies to address regional disparities in unemployment are necessary. Table 1 details the 20 Local Government Areas with the highest unemployment rate in March 2006 and the proportion of the population aged 65 and over from the 2001 Census. Of the 20 LGAs with the highest unemployment rate several LGAs have higher than average elderly populations.

Table 1 Twenty highest unemployment areas and proportion of population over 65 years

<table>
<thead>
<tr>
<th>Local Government Area</th>
<th>State</th>
<th>Unemployment Rate March 2006</th>
<th>Population over 65, 2001 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mount Morgan</td>
<td>QLD</td>
<td>20.0</td>
<td>19.4</td>
</tr>
<tr>
<td>Halls Creek</td>
<td>WA</td>
<td>17.7</td>
<td>6.1</td>
</tr>
<tr>
<td>Central Highlands</td>
<td>TAS</td>
<td>13.9</td>
<td>11.9</td>
</tr>
<tr>
<td>Nambucca</td>
<td>NSW</td>
<td>13.7</td>
<td>21.1</td>
</tr>
<tr>
<td>Great Lakes</td>
<td>NSW</td>
<td>13.3</td>
<td>25.4</td>
</tr>
<tr>
<td>Huon Valley</td>
<td>TAS</td>
<td>12.5</td>
<td>11.6</td>
</tr>
<tr>
<td>Perry</td>
<td>QLD</td>
<td>12.2</td>
<td>14.3</td>
</tr>
<tr>
<td>Byron</td>
<td>NSW</td>
<td>12.0</td>
<td>12.2</td>
</tr>
<tr>
<td>Brewarrina</td>
<td>NSW</td>
<td>12.0</td>
<td>8.5</td>
</tr>
<tr>
<td>Kolan</td>
<td>QLD</td>
<td>11.6</td>
<td>10.7</td>
</tr>
<tr>
<td>Playford</td>
<td>SA</td>
<td>11.5</td>
<td>11.4</td>
</tr>
<tr>
<td>Central Goldfields</td>
<td>VIC</td>
<td>11.1</td>
<td>19.4</td>
</tr>
<tr>
<td>Southern Midlands</td>
<td>TAS</td>
<td>11.0</td>
<td>10.7</td>
</tr>
<tr>
<td>Tasman</td>
<td>TAS</td>
<td>10.9</td>
<td>14.9</td>
</tr>
<tr>
<td>Shoalhaven</td>
<td>NSW</td>
<td>10.7</td>
<td>19.1</td>
</tr>
<tr>
<td>Bellingen</td>
<td>NSW</td>
<td>10.7</td>
<td>17.1</td>
</tr>
<tr>
<td>Kempsey</td>
<td>NSW</td>
<td>10.4</td>
<td>16.7</td>
</tr>
<tr>
<td>Carperteria</td>
<td>QLD</td>
<td>10.2</td>
<td>12.2</td>
</tr>
<tr>
<td>Wentworth</td>
<td>NSW</td>
<td>10.2</td>
<td>13.1</td>
</tr>
<tr>
<td>Kyogle</td>
<td>NSW</td>
<td>10.1</td>
<td>14.6</td>
</tr>
<tr>
<td>Australian Average</td>
<td></td>
<td>5.6</td>
<td>12.5</td>
</tr>
</tbody>
</table>

Source: Department of Employment and Workplace Relations Small Area Labour Market data, 2006; ABS Census, 2001
The Productivity Commission (2005) examined demographic change at a regional level between 1981 and 2001 and found there was a higher proportion of aged people in coastal areas and the discrepancy increased over this time. The population share of people over 65 increased in coastal and inland urban areas due to inward migration of older people while ageing resulted from outward migration of younger people in inland rural areas. In contrast, the population became younger in metropolitan and remote areas.

4. Future demand for community aged care services

4.1 Overview

Aged care services are broadly categorised into residential and community care. Residential aged care facilities are subsidised by the Commonwealth government and provided by a range of private and public sector organisations. In 2004-2005, 194,000 people received residential care (Department of Health and Ageing, 2006). Implementation of the Aged Care Reform Strategy 1985 produced a change in the balance between residential and community care in Australia which “reflects a commitment to provide flexible, responsive services, including services for people who would prefer to receive care in their own homes” (Gray, Crofts and Healy, 2001: 35). While residential care accounted for 76 per cent of Australian government expenditure on aged care in 2004-05, funding increased by only $17 million compared to an increase of $189 million for community care (Department of Health and Ageing, 2006).

Three major community care programmes provide support to the frail elderly to remain at home: Home and Community Care (HACC), Community Aged Care Packages (CACP), and Extended Aged Care at Home (EACH). HACC provides the frail elderly and younger people with disabilities with assistance including nursing and allied health care, meals, domestic assistance, personal care, home modifications and maintenance, and transport. The remaining Community Care programmes, CACP and EACH, are funded by the Australian government and have grown significantly in the past decade, expanding from approximately 4,500 in 1995 to over 32,000 by 2005. Both programmes provide an integrated package of services to the frail aged to enable them to remain at home but EACH is restricted to those assessed as requiring assistance equivalent to high level residential care and includes nursing care.

In addition to the effects of population ageing, growth in the demand for community care is driven by preferences of older people to remain at home and availability of informal support provided by relatives and friends. In 2003, of the Australian population needing assistance with daily activities such as mobility, showering, meal preparation and housework, 79 per cent received assistance from family and friends while 53 per cent were assisted through formal community care (ABS, 2003).

4.2 The effect of population ageing on demand

The Australian population is expected to age significantly over the next half century as ‘baby boomers’ reach retirement age. Australian Bureau of Statistics (2006) population projections indicate that the population aged 65 will increase from 13 per cent of the population in 2004 to between 26 and 28 per cent in 2051, while those aged 85 or older will increase from 1.5 per cent to between 7 and 10 per cent (ABS, 2006).

The direct relationship between age and need is reflected in usage of HACC and CACP services. In 2004-05, 50.2 per cent of those aged 85 and over used HACC services compared to 13 per cent of 70-74 year olds (Community Affairs References Committee, 2005). Similarly, 36 per cent of CACP recipients were aged over 85 years in 2001 (AIHW, 2002).
The ABS survey on *Disability, Ageing and Carers* (2003) found that 41 per cent of people aged over 60 years required assistance with health conditions or daily activities, due to disability or age, but the rate increased from 26 per cent for those aged 60-69, to 84 per cent for those aged 85 years or older. Assistance was required with property maintenance, health care, transport, housework, mobility and self care (Australian Bureau of Statistics (ABS), 2003). Approximately half of the 170,000 dementia sufferers in 2005 were residing in the community. Since the number of people with dementia is expected to climb to 730,000 by 2050 there will be a need for additional residential and community care places (Productivity Commission, 2005).

Estimates of future need are generally obtained by determining the proportion of particular age groups currently using various programmes and applying these proportions to estimates of future populations. The Department of Health and Ageing estimated that community care programmes for people over 85 will rise from 81,000 in 2002 to 140,000 by 2019, while the total number of community care clients will increase to 970,000 over this period (Community Affairs References Committee, 2005). The number of people receiving assistance under HACC is expected to increase from 750,000 in 2004-05 to 1,166,000 by 2024-25 and 1,559 by 2044-45, while CACP assistance will more than treble from 30,500 in 2004-05 to 107,000 by 2044-45 (Productivity Commission, 2005).

### 4.3 Unmet need

There is substantial evidence of unmet need for community care services. Research into HACC services in Melbourne by the Brotherhood of St Laurence (2001: v) indicated that due to insufficient services elderly people needed to prove that they were incapable of undertaking activities such as showering and meal preparation and were forced to “advocate strongly and demonstrate a significant need in order to receive a service”. The 2003 ABS Survey of *Disability, Ageing and Carers* found that 25 per cent of those self-identifying a need for assistance with everyday activities felt that their needs were not being fully met, including 50 per cent of those with a profound limitation (ABS, 2003). In some instances it is claimed that services are reserved for those with no family support and the quantum of services rationed to provide assistance to the largest number of people (Community Affairs References Committee, 2005). In addition, community care programmes have been found to be fragmented, inflexible, and provide inadequate levels of service (The Myer Foundation, 2002; Community Affairs References Committee, 2005).

Testimony to the Senate Community Affairs Committee in 2005 indicated that there was a high level of perceived unmet need. The Senate Community Affairs Committee (2005: xii) concluded:

> Community care programmes make a significant contribution in enabling older people to successfully live at home or in the community. While current programmes provide valuable services to older people, significant reform is required to achieve a system that better responds to the needs of consumers, care workers and service providers. The current system is not providing adequate levels of service; services are fragmented; and there is a complex mix of services that are often difficult to access.

The HACC minimum data set 2005-06 quantified service provision and confirmed the low levels of service intensity highlighted by submissions to the Senate Community Affairs References Committee. Three services provided in excess of 1 hour per week. Centre-based day care provided a weekly average of 2.7 hours to some 83,000 users while respite care and personal care averaged 1.55 hours for almost 36,000 users, and 1.1 hours for 65,500 users respectively (Australian Government Department of Health and Ageing, 2007). The
inadequacy of provision is highlighted by Austin (2006) who points out that in 1998 there were 30,000 people being cared for informally who could not be left alone for one hour and 33,800 who could only be left for a few hours, and stressed that access to supplementary formal care is essential to the health and well-being of carers. Users of other services achieved even lower service levels. Domestic assistance averaged less than 36 minutes per week for 220,278 clients and home maintenance, less than 10 minutes per week for 114,569 clients. Home meal deliveries averaged just over 2 meals per week for 99,048 clients and transport services less than 0.7 trips per week for the 125,621 passengers (Australian Government Department of Health and Ageing, 2007).

An insight into the extent of unmet need for HACC services in NSW is provided by the Auditor General’s (2004) report that stated only 53 per cent of eligible clients were assisted in 2002-03 and this fell to only 26 per cent in 2003-04. The reduction in client numbers was attributed to prioritisation of those with complex needs requiring more hours of assistance, combined with a policy of replacing only one of each four clients exiting the programme, to prevent budget overruns (NSW Auditor-General, 2004).

4.4 The Impact of Informal Care

The role and availability of informal care is also likely to be an important determinant of future need for formal care. Of 2.3 million carers in Australia in 1998 approximately 450,000 were primary carers (Community Affairs References Committee, 2005). The ABS (2003) Disability, Ageing and Carers survey found that informal care constituted the primary assistance used even though 61 per cent of people over 60 years used some form of formal care. Most informal care was provided by partners (47 per cent) and almost half of these were aged 65 or over.

Access to informal care is expected to fall due to changes in family structure, increased labour market participation by women and population ageing (Donato and Scotton, 1998). The Productivity Commission (2005) survey of future availability of informal care indicates that in the over 65 year age group couple families will represent less than half of all families, and need for assistance will increase by 160 per cent between 2001 and 2031, outstripping expected growth of informal carers of 57 per cent. In addition, carers aged over 65 will increase by 110 per cent while those aged under 65 will increase by only 19 per cent (Austin, 2006).

5. Potential for creation of socially meaningful employment: survey results

5.1 Description of method

A survey with local government social planners was undertaken in order to investigate services provision and potential for creation of socially meaningful employment across the Australian landscape. A fifty per cent sample of Local Governments throughout Australia was selected by means of a stratified random sampling technique, using categories derived from the Australia Classification of Local Governments (ACLG) schema, initially developed by the Department of Transport and Regional Services (DOTARS). The survey applied an open-ended, semi-structured approach, mediated through a telephone interview. The sample of local government social planners/community development officers were invited to participate in a half hour telephone interview that sought to investigate unmet need for community development within their locality. The interviewer posed the participant three tasks:

1. Identify unmet for community development within your LGA;
2. Of the needs identified, which could be met through the employment of low skill workers or trainees? What activities would they be engaged in?

3. And finally participants were asked to estimate the number of low skill workers or trainees that could be employed full time per annum to meet the identified needs.

Participants were asked to comment on unmet need for community development for five categories, namely:

1. Transport Amenity,
2. Public Health and Safety,
3. Recreation and Culture,
4. Community Welfare Services,
5. Other Community Development.

A WWW site was developed to serve as an additional information resource for participants while completing the telephone survey. The website outlined subcategory definitions, local area statistics including various unemployment statistics by LGA, SEIFA index and LGA demographic composition. Also included were vignettes developed from research findings from the ABS and Productivity Commission that related to the five aforementioned subcategories. This information resource was developed for practical purposes, and attempted to overcome the heterogeneity of the sample by ensuring all participants had access to various local area statistics and demography in an accessible reference format.

While participants gave a fairly comprehensive list of unmet needs for community development in their LGA, the data gathered through this methodology was not exhaustive. The limitations of the survey relate to both time constraints that limit participants’ responses, breadth of participant knowledge and also relate to the constrained funding paradigm; that is the competitive and non-committal character of contemporary funding regimes that are applied to local governments and many other community development initiatives in Australia. Subsequently results should be augmented with various comparative data and variegated methodologies to guide further investigation into issues associated with gaps in service provision across space, to build the case for responsible approaches to governance of regional development.

For the purpose of this paper, the findings from the survey are isolated to comments relating to need for aged care related services, and include consideration of housing appropriate for elderly populations, provision of domestics support and assistance to facilitate independent living, transportation systems to meet the needs of an ageing population and activities to facilitate community engagement and prevent social isolation of ageing communities. Closer examination of particular issues that emerge from the survey data reveals much about the successes and failures of government to provide services within communities. Here it is important to emphasise that if needs are unknown or data is extremely fragmented, demand for government action and development of policies to address pertinent issues may be absent. Furthermore, fragmented sources of information may also allow unclarified assumptions relating to the adequacy of service to be drawn, which may or may not be representative of the contextual setting. This paper brings together multiple sources of data, with the purpose of building more penetrating insight into the narrative of aged care provision, to develop a thoroughly contextualised understanding of the issues at hand.
5.2 Description of response

The survey population consisted of 665 local governments throughout Australia (excluding Torres Strait Islands off the coast of Queensland). 328 local governments, selected through a stratified randomised sampling technique were invited to participate in the study. 46 per cent of the sample (151) completed the entire survey. The rate of response is comparable to other contemporary telephone survey response rates (see Figure 1).

Figure 1 Description of national survey response

Responses varied by state. New South Wales and Tasmania had the highest response for full survey completion, at 68.42 and 71.43 per cent, respectively. Responses were lowest for Western Australia, the Northern Territory and Queensland (between 30.14 and 38.71). The lower response rate for these states can be largely attributed to the higher number of local governments classified as ‘remote’ or small rural local governments, where staffing is limited and populations are small and sparse. Recent political reforms, including the federal government’s intervention in the Northern Territory and the reform of local governments in Queensland also contributed to lower response rates in those states.

Potential for creation of socially meaning work nationally (excluding the Northern Territory) as identified by the sample participants, accounted for 40 per cent of all people unemployed at March 2006 according to the Department of Employment and Work Relations quarterly Small Area Labour Markets data. Predominant areas for jobs creation that would be suitable for low and unskilled workers are concerned with construction of public housing, provision of additional teacher’s aides and home support care for the elderly. Possible employment that could be generated concerning provision of aged care services accounts for 19.87 per cent of all socially meaning employment positions that participants estimated could be created immediately to fill gaps in service provisions that exist under the genre of community development within their local area. Results indicate that there is considerable potential for expansion of employment in provision of domestic care services, which accounts for 49 percent of potential employment opportunities in the aged care industry, as reported by survey participants. Opportunities involving low/unskilled workers to address deficiencies of current service provision in this industry are, however, quite diverse and include roles for horticultural labourers, administrators, construction workers, as outlined below (see Figure 2).
The following sections explore in more detail the deficits in social and basic care services and how these gaps could possibly be filled.

5.3 Transport

When asked to comment on existing need within their municipality in regard to transport amenity, participants broadly comment that public and community transport systems were poor, especially outside capital cities and there were substantial backlogs in road upgrading and maintenance activities, as well as expansion and maintenance of footpaths and cycleways. In regard to services for elderly people, participants commented that there was need for expansion of flexible community transport services and ‘dial-a-ride’ community transport services to assist with independent living needs (weekly shopping trips, participation in social cohesion programs), as well as services to take the elderly to various medical appointments. Participants suggested that considerable jobs could be created for low skill workers to drive cars and/or mini-buses, provide administrative assistance and personal care assistance to help fill some of the gaps in service provision and better meet the transport needs of the elderly (see Figure 3). Possible creation of employment in these areas accounted for 2.7 percent of all potential job opportunities suggested. Interesting transport services for elderly people were the most poignant issue for community development in the Northern Territory, perhaps reflecting the isolation from social services that many of those communities face. The public sector currently provides some services in these areas, but often they are undertaken by teams of volunteers or are not at a scale appropriate to community need. Further access to these services often entails various applications and assessments to be undertaken, which deters many in need from utilising services to which they are entitled.
5.4 Community welfare services

Participants indicated considerable unmet need for people to perform basic care tasks to promote independent living of the elderly. In general, many organisations providing services to the elderly and frail are external to local government, and thus in many cases participant information relating to the demand for these services was incomplete. However, the adequacy of these services was a consistently noted concern of study participants.

Jobs identified by local government social planners associated with community welfare services in aged care accounted for 13.54 per cent of all jobs identified that could be undertaken by low/skilled workers. Such work would entail provision of general household assistance, including cleaning, basic meal preparation, basic personal care assistance, yard maintenance, basic handyman assistance including activities such as changing light bulbs and painting (see Figure 4). As work in these areas entails visitation services, benefits relating to reduction of elderly social isolation and strengthening of society’s ‘social fabric’ may be positive consequences of aggregate increases in employment in aged care services. Results for such services varied over states, and reflected various policies in place, and also lifestyle and locational factors. For instance, the metropolitan areas of New South Wales indicated greater need for provision of long day care services for elderly people, to provide support for those families working full time and caring for their ageing parents. Rural and remote areas, particularly in Western Australia, noted that preventing social isolation was a critical concern, and thus results featured greater numbers of jobs associated with visitation and social support, in additional to personal care services. Provision of personal care and home support services were consistently noted areas of need, which would require substantial employment investment to bring service provision in line with demand.
Results from the study also documented need for investment in residential aged care accommodation. This would entail construction of different types of aged care facilities, including nursing homes, unit complexes, and retirement villages. Results from Victoria emphasised the need for public housing in general, rather than residential aged care facilities specifically. Responses from NSW were much more focused on service provision to enable independent living, rather than provision of transitional accommodation. Participants emphasised the need for services and appropriate residential aged-care accommodation and facilities to exist locally, thereby allowing elderly citizens to maintain social networks and familiarity in their retirement. Employment to meet such needs would naturally require the contribution of workers across a wide spectrum of skill, including skilled tradesmen, engineers, and architects. However, for the purposes of this study, inquiry focused on potential opportunities for employment of low/unskilled workers. Jobs appropriate for low/skilled workers in construction of accommodation suitable for the elderly accounted for over three percent of all jobs identified by the sample. Interestingly, general expansion of public housing accounted for a further 26 per cent of possible jobs identified. Disinvestment in public housing and the current housing affordability crisis further compound the need for decisive government policy to act on a backlog of needs relating to changes in societal composition.

Assistance to food preparation and delivery services, or ‘meals on wheels’ was also a need many participants referenced. These organisations, which provide a vital service for frail elderly citizens, are typically run on limited budgets and are largely staffed by volunteers. Currently many of these organisations face dire problems associated with volunteer recruitment and meeting service delivery demand, as the population in need of these services increases. In general these agencies run external to local government bodies, and thus participants’ knowledge of need for these services was limited. Further, the volunteer culture of these agencies also revealed itself in various preconceptions amongst study participants, relating to the differences between paid work and volunteering. Many study participants
suggested that these agencies would welcome additional volunteers, but were unsure of the role of paid workers in such programs. Despite these ideological barriers, the study found need for these services could offer employment to 1.2 per cent of the unemployed population across Australia (excluding NT).

5.5 Public Health and Recreation

The remaining areas of need for aged care services and the elderly population related to social support programs to provide recreation and culture for the elderly, as well as public health or preventative health campaigns. Survey participants, especially those from Victoria, were concerned about the health needs of their ageing population and suggested need for strategies to engage or facilitate physical activity or body movement of these groups. Support of a seniors walking club was one area that could utilise low/unskilled workers to promote public health. Other roles for low/unskilled workers to promote socialisation include assisting social clubs with administrative needs, assistance in libraries or community centres to promote computer literacy, promotion of upcoming activities (maintain notice boards, letter box drop) and provision of assistance to art/craft activities at a range of aged care settings. Potential employment in these areas represented less than one percent of all potential jobs suggested by survey participants as suitable for low/unskilled workers.

6. Creating effective combinations of paid work and training: Pathways for the future

Social services within the area of aged care have high social value. Assisting people to maintain independent living brings dignity, allowing the elderly to maintain access to their social networks, maintains social cohesion while provision of respite affords primary carers necessary relief from their care responsibilities. However, many services currently designed to provide society with these benefits have stringent eligibility criteria, long wait lists, are inappropriately funded or operate only with the assistance of community volunteers, who receive little or no remuneration for their valuable contribution (NSW Auditor-General, 2004). Further, Australia is currently facing a volunteer crisis, as volunteer pools go unreplenished, and the volunteers themselves are the population now in need of such service provision. Policy solutions need to move beyond consideration of aggregate totals and allocations, and come to grips with the realities facing the ageing population and their families (Courtney et al, 1997).

The extent and nature of unmet need in the aged care industry indicates that there are substantial roles that could be undertaken by low/unskilled workers to help meet these needs. There are also substantial needs for skilled workers within this industry. Currently, workers across the entire skill spectrum are over tasked and unable to provide the quality of care that is needed to ensure our elderly citizens dignity in their twilight. This indicates substantial need for employment investment. Further, national skill development strategies need to be aligned with the socio-spatial demands of our demographic composition to ensure the labour force of the future is equipped to maintain a society that is equitable and prosperous.

Solutions are needed, which can contribute to current unmet needs and future growth in demand. The distribution of unemployment and the elderly population in Australia, demonstrate the potential for job creation to meet the employment aspirations of the unemployed and the care needs of the elderly. An employment guarantee or Job Guarantee approach offers a coherent strategy for reengaging the most marginalised, discouraged members of society back into the labour market by offer employment that is intrinsically valuable and socially meaningful.
Table 2 demonstrates the potential of the JG, not only to provide employment opportunities and deliver socially valuable work, but also to make a significant contribution to national skill development by combining paid work and accredited training that would enable JG workers to progress to higher skilled jobs in either the private or public sector. There are several courses currently available that would provide training relevant to the work undertaken by JG workers, including Certificate II and Certificate II courses in Community Services, Aged Care, Disability, and Home and Community Care. For example, JG workers providing services to the elderly or disabled in the community could complete a Certificate III course in Aged Care, Home and Community care or Disability Work. These qualifications would enhance their ability to secure employment in a range of occupations in residential or community care settings and articulation to a Certificate IV course in Aged Care or a Certificate IV in Service Coordination (Aged Care or Disability), thereby providing career development opportunities.

Areas of unmet need identified by social planners throughout Australia indicate possibilities for a multitude of career development pathways in direct care and auxiliary care positions. The challenges that are facing both communities and individuals require effective employment investment solutions. Job Guarantee, a new paradigm in regional employment policy, draws upon international best practice to inform its strategic approach by combining paid work and training, to engage people in socially meaningful employment. Importantly the program entails an increase in aggregate employment, while providing training. This subverts substitution effects of programs that simply focus on training, and also ensures that Job Guarantee workers have coherent exits strategies, for employment in other sectors that offers enhanced remunerations. Job Guarantee offers an effective means for enhancing essential service provision, while also eradicating labour underutilisation. Such a program offers a viable long-term solution for achieving community development and social justice outcomes, as communities are supplied with a set of tools for remediating deficiencies that are specific to the locale.
Table 2 Accredited training courses for Community Service, Aged and Disability Care

<table>
<thead>
<tr>
<th>National Curriculum Code and Course Name</th>
<th>Occupations</th>
<th>National Curriculum Code and Course Name</th>
</tr>
</thead>
</table>
| CHC20202 Certificate II in Community Services Work | • Care Service Employee
• Catering Assistant
• Domestic Assistant
• Grounds Person/Cleaner
• Housekeeping Assistant
• Laundry Assistant
• Maintenance Officer | CHC30802 Certificate III in Community Services Work CHC40902 Certificate IV in Community Services Work CHC50702 Diploma of Community Welfare Work CHC60302 Advanced Diploma of Community Services Work |
| CHC20102 Certificate II in Community Services Support Work | | |
| CHC30102 Certificate III in Aged Care Work | • Transport Coordinator
• Carer /Care Assistant
• Nursing Assistant
• Community Care Worker
• Community Support Worker
• Disability Service Officer
• Disability Support Worker
• Family Support Worker
• Food Distribution Officers
• Food Service Assistant
• Home Care Assistant
• Home Maintenance Officer/Worker
• In Home Respite Worker
• Personal Care Assistant
• Planned Activity Assistant
• Residential Aid
• Residential Care Officer
• Residential Care Support Worker
• Accommodation Support Worker
| CHC30202 Certificate III in Home and Community Care | | |
| CHC30302 Certificate III in Disability Work | | |
| CHC40302 Certificate IV in Disability Work | | |
| CHC50102 Diploma of Disability Work | | |
| CHC60102 Advanced Diploma of Disability Work | | |

Source: (Community Services and Health Industry Skills Council, 2005)
References


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