Chapter 2
Australian Developments in Ageing: Issues and History

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2.1 Introduction

The experiences and social constructions of ageing and older people have changed significantly over the lifetimes of people now entering later life. The profound truth is that our images of ageing and the life chances of ageing people are inseparable from the periods of history in which they have lived their lives. These realities are obscured as we continue to misinterpret the ‘facts of ageing’ as intrinsically a matter of biology (and hence largely inevitable), discounting what is recognised increasingly by researchers as the malleability of ageing experiences. The optimistic implication here is that constructive actions improving socio-economic circumstances and healthy ways of living have good potential for improving experiences of ageing over the entire life course.

The most remarkable post-World War II (WWII) development on ageing arguably has been the substantial extension of later life. For millennia, the maximum lifespan had been considered to be the biblical ‘three score and ten’. A century ago, the average life expectancy in Australia was only in the 50s with death rates highest for babies and young mothers: the relatively few older people at the time were in some senses ‘fortunate survivors’. Over the post-war years, however, life expectancy at birth has increased steadily. In an unexpected historical turn since the 1980s, this increase in life expectancy has been greatest for those from 60 years of age (Australian Bureau of Statistics (ABS) 2011; Australian Institute of Health and
Welfare (AIHW) 2014). These gains have been much greater for higher socio-economic groups and much less for Indigenous Australians, thus heightening social inequalities. We have yet to fully recognise, let alone respond to or plan very effectively, for the radical consequences of living longer for reshaping later life.

This chapter considers individual ageing, including the ‘new’ life course, quality of life and life chances as goals for an ageing Australia, as well as looking at the increasing diversity, social inequalities and disadvantaged populations that are important foci for potentially improvable aspects of ageing. It also considers societal ageing and social change, including processes of cohort succession with an emphasis on the large baby boom cohort. It then turns to issues of intergenerational equity and outcomes for disadvantaged groups. The chapter concludes with an overview of post-war policy developments on ageing and recent political aspects of ageing.

2.2 Change over the Life Course

2.2.1 The New Life Course

The ‘new’ life course for most people now includes several decades of life after the age of 60 years. In 2012, men aged 65 years could expect another 9 years without disability and another 15 years without severe core activity limitations; comparable expectations for older women were 10 and 16 years, respectively (AIHW 2014). Women had a longer expectation for life with a severe disability, 6 years versus 4 for men, with high levels of dependency likely only for a limited period near the end of life. From the late 1990s, the increases have been greater for disability-free years than for years with disability for both men and women during later life.

The encouraging news is that there also have been expectations for more years without perceived poor health, without activity limitations and also without limiting health conditions. Nonetheless, there also have been increases in the expected length of time with long-term health conditions, disabilities and with core activity limitations in daily living (AIHW 2014). For people aged 60–64 years, the improved expectancies without activity limitations are notable, as they have amounted to more than 2 years for both men and women from 1998 to 2012 (AIHW 2014). The mixed findings indicate some increased capacities to work longer and to participate in social life on entry to later life, but also more years with needs for assistance in later life.

In 2003, the Prime Minister’s influential Towards Healthy Ageing Working Group (Prime Minister’s Science, Engineering and Innovation Council (PMSEIC) Independent Working Group), comprised of health and policy experts, set a national vision for ‘an additional 10 years of healthy and productive life expectancy by 2050’ (PMSEIC 2003, p. 2). The Working Group outlined a research agenda which guided development of the National Health and Medical Research Council (NHMRC)/Australian Research Council (ARC) Ageing Well, Ageing Productively
Research Program to inform strategies for improving ageing well and other positive outcomes. To achieve this ambitious national vision in an equitable way, it will be particularly important to achieve better outcomes for Aboriginal people (see Chap. 7) and those in lower socio-economic groups as they are lagging behind the health improvements being seen for more advantaged groups.

There has been a notable re-shaping of the life course along with the lengthening lifespan. There have been increasingly extended periods of education, later entry to the workforce and later marriage and childbearing (Gong and Kendig 2016). In midlife, there has been increasing variability in forming and disbanding relationships and households, more complex patterns of workforce participation and a notable rise of chronic disease from middle age onwards. Fundamental to the massive post-war changes has been the reduction in the fertility rate from 3.5 to 1.9 births per woman, along with women’s increasing educational attainment, workforce participation and conceptions of their place in society. Across virtually all spheres of the life course, patterns have become more complex over recent decades in terms of gender, ethnic and socio-economic variations.

Changes in labour force participation in mid- and later life have been one of the most significant developments for an ageing Australia. Labour force participation from 1979 to 2007 for men aged 55–64 years fluctuated but overall remained relatively steady (68%). However, for women at these ages there was remarkable change, with the rise from 20% to 49% as more women stayed in the workforce or returned after childbearing (Taylor 2010). The economic downturn after the 2007 Global Financial Crisis had serious impacts on older people on the verge of retirement from paid work, inducing adaptive responses such as working longer; those who had recently retired with suddenly reduced value in superannuation and other assets found their standards of living seriously challenged (Kendig et al. 2013; O’Loughlin et al. 2010).

The Australian Institute of Health and Welfare (AIHW 2015) has provided a comprehensive report on developments in ageing and related population and social topics over recent years. Facts and implications are examined for welfare expenditure, labour force participation and caregiving among other topics important for ageing. The report documents the increasing age of the workforce, life expectancies, aspects of aged care, ageing in the ‘welfare system’, mental health and palliative care.

Life history research on the individual lives of ageing baby boomers has examined the consequences of diversity earlier in life—notably in terms of education and health and then in terms of occupations, childbearing and caregiving through middle age (Kendig et al. 2016). These early and mid-life experiences have had continuing influences on workforce participation and its income and social participation benefits on entry to later life (Majeed et al. 2015). With labour force participation increasing for women in middle age, the stresses of work and caregiving—and choices between them—are particularly acute for women in middle and older age (O’Loughlin et al. in press). Limitations on family support for frail older parents arise mainly from women (and men’s) high labour force participation in mid-life, often occasioned by financial necessity, notably the costs of buying housing and self-funding retirement.
Leading overseas work complements Australian research on challenges and opportunities of ageing. Phillipson’s book *Ageing* (2013) reviews international developments in the social constructions and inequalities arising from the new ‘third age’ and the lengthening of the late ‘fourth age’. He makes a case for ‘rebuilding our institutions’ in order to enable new and better pathways for later life. Paid work and family care policies have been compared for Australia, Canada and other countries highlighting the stresses on caregivers and the value of flexible working arrangements, carer leave provisions and other supportive responses (Kröger and Yeandle 2013). *The Sage Handbook on Social Gerontology* (Dannefer and Phillipson 2010) provides a comprehensive international review of ageing topics and policies including contributions from Australia and New Zealand. A Special Issue of the Journal of Cross-cultural Gerontology (in press) on ‘Older Workers and Caregiving in a Global Context’ (O’Loughlin and Phillips in press) brings together researchers in ageing from Africa, Australia, Canada, China, New Zealand, Singapore and UK to examine the impact on those taking on extended caring roles within the family as a consequence of population ageing.

### 2.2.2 Quality of Life and Life Chances

Public conceptions of ageing continue to revolve largely around vulnerabilities to poor health, low income and losses of family and other social support. These limitations and responses to them are important and will be examined in the challenges of ageing in following chapters in this book. Yet, as we will explore further in Chap. 3 on attitudes, the negative aspects of ageing that predominate notably in the health field serve to reinforce ‘problem-focused’ public policy. It is important to appreciate that the negatives of ageing are only part of the story: understanding of positive, aspirational dimensions of ageing are necessary to better balance knowledge and outcomes on ageing.

A central message on ageing is the fact that, in Australia, older people consistently emerge as happier and report higher levels of subjective well-being than other age groups (Fig. 2.1). The happiest group is comprised of those over age 76, living with a partner and in good health with average or higher living standards. Poor health, low income and limited social support do reduce levels of subjective well-being for older people, but this proves to be the case for people at other ages too (Cummins et al. 2013). Overall, people in a wide variety of circumstances, including those in late life, have capacities to maintain their subjective quality of life, making adjustments during times of adversity (Cummins 2014).

The normally high levels of subjective well-being among older people relate to the processes of subjective well-being homeostasis (Cummins 2014), modest expectations as well as stability, manageable stress and mature coping capacities in daily life. It can also reflect ‘successful ageing’ in so far as processes of life review, and comparative assessments can enable older people to positively assess their lives *in their own terms*. There is increasing Australian evidence that well-being and life
satisfaction in later life (as well as earlier in life) are enhanced by a sense of control and choice in decision making in a variety of contexts including retirement from paid work (de Vaus et al. 2007; Quine et al. 2007); moving into supportive housing (Gardner et al. 2005); living at home with community care support (Brooks and Kendig 2004) and availability of health and care programs (see Chap. 14; Kendig and Browning 2016).

Our qualitative and quantitative research demonstrates the high value older people place on what has been termed ‘ageing well’, conceptualised in terms of ongoing psychological well-being, good self-rated health, independence in daily life and remaining in their own homes (Kendig et al. 2014). While health declines and eventual death are inevitable, our longitudinal research and related studies demonstrate that ageing well can persist through most of later life. Moreover, personal resources and healthy life styles can make a critical difference in not only ageing well but also enabling the independence, participation and contributions that are so highly valued by older people themselves. A ‘sense of purpose’ is an important psychological resource for ageing well as demonstrated by a major Adelaide study (Windsor et al. 2015). At the core of adaptations in ageing is the striving to maintain lifelong identities and continuity notwithstanding the transitions and personal challenges of ageing.

Life history research on Australia’s baby boomer cohort, now entering later life, has examined determinants of quality of life and life satisfaction inclusive of higher order outcomes such as perceived self-realisation, control and personal autonomy (Kendig et al. 2016). The health and socio-economic resources that people bring to later life emerge as the most significant factors for well-being, but behind these more immediate influences are social factors and life events tracing back through midlife to childhood. The findings underscore the value of a lifespan approach in understanding ways in which personal and social resources can be built throughout

Fig. 2.1  Subjective well-being by Age Groups (N=58,493). Source: Cummins et al. (2013: 156)  
(Note: The Personal Wellbeing Index (PWI) comprises seven domains rated on satisfaction. All results from the Index are standardised into a scale from 0 to 100)
life and recovered after life setbacks. These capacities and resilience yield social as well as individual benefits at each life stage including eventual ageing well and productive ageing.

Outcomes in later life thus reflect the systematic accumulation of economic and social advantage or disadvantage as people progress through social structures over the life course (Dannefer and Settersten 2010). Social class-related opportunities and resources from childhood onwards are crucial to educational and occupational attainment and their consequences for income and wealth; these resources can have compounding effects on health, family stability and almost all dimensions of life. Home ownership and public housing are particularly important resources as both provide security and low housing outlays in later life; however, there have been few studies of socially disadvantaged groups from their own perspectives, such as older homeless men in Sydney (Russell et al. 2001). It is important to recognise the ways in which age and ageing differences interlock with other dimensions of social structures—including gender, area of residence, ethnicity and migration—as they influence multiple vulnerabilities of disadvantaged groups in later life.

Gender is fundamental to understanding variations in ageing experiences. For example, older men are more likely to view health as central to continuing physical capacities, while older women are more likely to view health as a capacity for continuing social connectedness (Kendig et al. 2014). The health promoting actions important for ageing well and threats to ageing well vary between older men and women and also between singles and couples: it is important to appreciate ‘his’, ‘hers’ and ‘their’ experiences and views of ageing. The social processes that generate difference and inequalities extend beyond individuals and households to embrace multiple generations of privilege or deprivation in family lineages. These intergenerational processes extend from the transmission of social class opportunities early in life through to family inheritances typically received in late middle age.

Bengtson and Kuyper’s (1971) now classic term ‘generational stakes’ recognises that older generations value highly their continuity with the next generations and that they can care more about the futures of their children and grandchildren than themselves. By most forms of social accountancy, older Australians (as with their counterparts in other countries) in fact provide more support down the family generations than they receive upwards from younger relatives (Kendig and Lucas 2014). The long-term trend towards separate households and mobility among the generations reflects rising real incomes of older people and patterns of ‘intimacy at a distance’ rather than the caricature of ‘family abandonment’. Some families and lineages, however, have little capacity for this intergenerational support as a result of multi-generational deprivation that can be very difficult to address (Gong and Kendig 2016).

A national study examined social factors in productive activities across age groups (Loh and Kendig 2013). From midlife onwards, people were found to have high rates of productive activities with the balance shifting from paid work towards caregiving and volunteering in later life. Consistent with human capital theory, productive activities were higher among those having more resources in terms of good education and good health. Analyses of the baby boomer cohort, when they were in middle age, found that productive activities were also associated with having higher
incomes and higher status occupations. Women were particularly likely to be making contributions across several spheres of life. The findings underscore the contributions made by ageing people beyond the paid workforce—volunteering, caregiving, child care and domestic work—and the value of investing in human capital across the life course.

In assessing our knowledge on ageing, it is important to appreciate the paucity of ‘critical’ research in Australian gerontology. Aberdeen and Bye (2013) argue that our research has generally accepted and worked within a research context that has not been critical of the policy framework of positive ageing in which economic and medical perspectives predominate. Further, there is a dominance of survey research funded by governments which perhaps inevitably have a conservative, ‘problem’ focus (Kendig and Browning 2016). We have a long way to go in the multidisciplinary understanding of how positive individual and social action at a societal level can improve outcomes in later life.

2.3 Social Change and Outcomes for Social Groups

2.3.1 Cohort Life Chances

Australia’s massive socio-economic development over the post-war era has yielded enormous benefits, as well as some social costs, and we should recognise that the consequences of change have fallen differentially on age groups and other social groups. The concept of cohort succession is central to understanding ageing and social change because younger groups generally take up emergent social opportunities, while older people are more likely to retain social positions established when they themselves entered adulthood. Over the post-war years as a whole, successive cohorts generally benefited economically from rising real incomes, more dual income households and increases in the value of owner occupied housing.

The continuing influence of the past is further revealed in how our images and assumptions regarding ageing and older people, as well as their resources through life, have been shaped by their social experiences over the post-war era. We can begin with those who are currently in advanced old age (say aged 80 years and older), recognising that these people, born before WWII, have largely paved the way in our current understandings of ageing. As a broad group generalisation, they are notable for:

- Lifelong attitudes and life directions set in childhoods during the Depression of the 1930s and WWII war years—hence their characteristic stoicism which reflects earlier life experiences as well as age-related vulnerabilities and perspectives in their now being very old
- Entry into adulthood before the educational and other opportunities that emerged for young adults in the 1960s and 1970s (broadly disadvantaged by their birth cohort)
• Generally, steady employment and rising real incomes through the post-war economic boom, albeit with great variation between social groups, with entry into home ownership early enough to benefit from housing asset increase from the 1980s (advantaged by their birth cohort)
• Late-middle age during the early 1990s economic recession, with subsequent precarious employment, particularly for older workers, and limited accumulation of the superannuation benefits that did not become widely available until the 1990s

The large baby boomer cohort that is now beginning to enter later life has had a dominant influence on Australian society and public policies throughout their lives. Their large numbers mean that they place pressure on aspects of Australian society as they enter each age group, be it on suburban housing and schools during their childhoods from the 1950s, through to emerging workforce shortages and pressure on income support, as they are now reaching what has traditionally been ‘retirement age’. Through the mid-twenty first century, the baby boom cohort will dominate the landscape of ageing, as Australia becomes one of the oldest countries (see international context in Chap. 1).

In addition to the impact of their sheer numbers, the baby boomers are already beginning to transform fundamental realities and assumptions concerning later life. Their cohort as a whole has been at the forefront of social progress since the 1960s as indicated by: increasing educational and employment opportunities; the rise of the feminist movement; reduced (but continuing) gender discrimination in employment; choice over fertility and accumulation of superannuation. Their lifelong orientations, opportunities and resources have increased—with widening variability and inequalities—the personal and socio-economic resources of older individuals. They are challenging traditional assumptions of passive and dependent ageing, which has resulted in concepts such as active ageing and productive ageing being developed and promulgated as baby boomers approached later life.

The younger generations of today, variously termed Generations X and Y, are facing an apparent reversal of what had previously been a steady and seemingly inexorable rise of economic fortunes. There is increasing recognition that more recent birth cohorts are facing much of the brunt of downturns of employment markets, expensive entry into home purchasing and the prospects of decreasing public benefits and services together with likely increases in taxation. While governments continue to forecast rising real incomes over the longer term, which would advantage these younger cohorts, at present older people retain a dominant share of Australia’s wealth, primarily in home ownership.

A report by the Grattan Institute (Daley and Wood 2014) demonstrates that the boom in house prices and changes in government spending patterns are the main reasons why older households have had substantial wealth increases from 2003–2004 to 2011–2012, while younger households had reductions of wealth over this same period. These historic changes in economic fortunes caution against assumptions that older people are necessarily disadvantaged relative to younger people in terms of their birth cohort as well as their increasing age.
Baby boomers and the cohorts that follow them reflect the changing patterns of ageing and intergenerational relationships. With the life time prospects of younger generations becoming more uncertain, there has been a notable rise in the popular press against what have been termed ‘selfish baby boomers’ who are said to have had privileged lives (Hamilton and Hamilton 2006). The Global Financial Crisis of 2007 arguably accentuated this key turning point in perceptions of intergenerational relations given its impacts on opportunities for younger people.

### 2.3.2 Disadvantaged Groups and Life Chances

The Productivity Commission has provided an account of social disadvantage in Australia as a multidimensional concept, including poverty, deprivation, socio-economic capabilities and social exclusion (McLachlan et al. 2013). It is important to recognise that these disadvantages represent intense levels of hardship that are at the extreme lower levels of living standards.

- A small proportion of Australians—between 5% and 10% of all adults—were reported to experience ‘deep and persistent’ disadvantage, with major factors being long-term health conditions or disability and low education.
- Indigenous people and public housing residents were heavily overrepresented among the disadvantaged population.
- People aged 65 years and older were included among the vulnerable groups, but compared to the others they had lower rates of ‘relative income poverty’ (13%), ‘multiple deprivation’ (8%), ‘deep social exclusion’ (8%) and ‘persistent social exclusion’ (6%).
- Single older Australians were noted for their high rates of poverty and low income, while many older people were noted as having wealth that they could draw on in retirement.

The authors comment on the impact of education as a key factor in social disadvantage and its importance as an early life investment in productivity and well-being over the life course.

### 2.4 Age and Intergenerational Equity

Intergenerational equity is arguably the major issue ahead for an ageing Australia. A definition developed in the UK (Piachaud et al. 2009) distinguishes four types of intergenerational equity: equity between different living generations (e.g. government benefits age groups); equity between living generations and those not yet born (e.g. environmental issues and burdens of public debt); private transfers between generations (e.g. financial support and caregiving) and public transfers between generations (e.g. government debt, taxes and pension costs inherited by younger generations).
Authoritative evidence on the overall resource flows between age groups, which clarifies this ideologically laden issue, is available from National Transfer Accounts based on labour incomes and consumption (Rice et al. 2014, p. 11).

The findings can be summarised as follows:

- Younger people, up to age 21 years, as well as older people over 60 years, on average consume more than they produce while those in the middle years are net contributors.
- Levels of consumption rise through the childhood years and then remain relatively stable through adulthood before rising again in the late 70s as people approach the end of life.
- Productivity, as indicated by labour income, rises quickly from age 21 years, as people enter the workforce. It then rises steadily further to the early 50s, before declining steadily from the late 50s, to very low levels by the time they reach age 70 years.
- From 2003–2004 to 2009–2010, the most notable changes were significant increases in productivity for the 50s and older age group and also increases in their consumption; children up to 15 years had comparable rises in consumption.

To understand the economic and policy implications of demographic dependency ratios, it is important to take account of the income and consumption patterns of the age groups (Rice et al. 2014). In 2010, private incomes and transfers within households were the main funding sources for consumption by those in middle age and also for those aged 65–75 years. While reliance on public funding increases in the older age group, it is not until the 75 years and over age group (and also for those aged 0–15 years) that consumption is funded mainly by public taxes and household transfers. Private savings were significant in funding consumption at ages 45–64 years, but they were very small for the two older age groups.

### 2.5 Social Change and Public Policy Developments in Ageing

An historical perspective enables us to appreciate that many societal views and social structures retain outdated images of ageing grounded in earlier historical circumstances. The eminent American gerontologist Matilda White Riley drew on the concept of ‘cultural lag’ in her interpretation that outdated and inaccurate views on ageing are major impediments in constructively responding to population ageing (Riley et al. 1994). In Australia, the evolving social and policy treatment of older people over the post-war era has created ongoing legacies of interests and cultural vestiges that are still apparent today. Views of ‘needy and deserving’ old people were underpinned by beliefs that age-related vulnerabilities were not the ‘fault’ of people themselves and that support had been ‘earned’ through earlier contributions in war, taxpaying and nation building.

Contemporary accounts of Australian developments in ageing, as summarised below, are available in earlier compendiums on ageing including Howe (1981), Kendig and McCallum (1986, 1990) and Borowski et al. (1997, 2007).
• In the 1940s and 1950s, older people were seldom represented in public affairs except in relation to some residual health and welfare matters, motivated by (inaccurate) perceptions of family abandonment of ‘the aged’. Responses in the Menzies period of government (1949–1966) were free public hospitals and modest pensions as well as age-specific accommodation augmenting efforts by church and other charitable bodies.

• The 1960s saw greater recognition of systemic old age poverty, along with the notable growth of subsidies for the provider-driven nursing home industry that has led public conceptions of not only aged care but also more widely of ageing and older people generally.

• The short, comparatively radical Whitlam Labor government in the early 1970s further recognised older people as ‘needy and deserving’ while building a foundation of universal health, income and care programs.

• The Fraser Coalition government of the late 1970s and early 1980s actually expanded public expenditure with few policy redirections on ageing, notwithstanding concern for government deficits and some policy reviews that became influential in later years.

• The still influential Hawke era of Labor government in the 1980s set a basic foundation for the mainstream health, income, care and superannuation policies as reviewed in later chapters of this book. Notable initiatives were aged care reforms (aimed partly at restricting expenditure growth), improved/restored universal health funding and historic employer and public-funded superannuation schemes that aimed to improve retirement incomes and ‘age proof’ Australia’s public expenditure.

• During the Recession of the early 1990s, the Keating Labor government set new directions with income support and care programs combined with tighter means testing. Targeting public resources to the most needy, along with modest tax reform, set economic rationalist approaches to maintaining social equity as well as restraining public expenditure.

• The Howard Coalition government (1996–2007) shifted policy most conspicuously towards extending tax subsidies for superannuation (benefiting most those with more private resources), while the Rudd Labor government (2007–2010) increased pensions and relaxed means testing on the pension during the political aftermath of the 2007 Global Financial Crisis.

• The Abbott Coalition government’s (2013–2015) avowed priorities of (eventually) reducing public debt, through restraining expenditure growth while continuing existing taxation arrangements, have set the current policy context (and contests) that have wide-reaching significance for individual and population ageing. Ageing has now emerged centre stage as a public issue as discussed in the chapters in this book.

Throughout these post-war developments, there was relatively little explicit leadership within government on behalf of older people, while pensions and nursing homes dominated in government thinking. Although earlier portfolios included responsibilities for ‘the Aged’ in various combinations with housing and health, it was not until 1988 that a Minister of Aged Care was established, and then a Minister
on Ageing was designated from 2001 to 2010. Labor then established a Minister on Mental Health and Ageing, elevated to Cabinet, while a returned Coalition government subsequently established a junior Ministry for Disability and Ageing within the Social Services portfolio from 2013. As of late 2015, the Minister for Health was also designated as Minister for Aged Care.

In the 1980s, a Commonwealth Office on Ageing played a leading part in bringing consumer interests into Labor’s aged care reforms. Under the Coalition, the Office was responsible for the ambitious National Strategy on Ageing 2001, although the Strategy had little subsequent impact on policy development. The Office continued with variable responsibilities until it was disbanded by the Coalition government in 2013. Various offices in State governments, notably in Victoria, have been more significant in bringing grassroots involvement into active service development and coordination (Encel and Ozanne 2007).

There has been increasing involvement of peak advocacy groups around ageing and aged care including: ‘consumer’ organisations, notably the Council on the Ageing (Australia) (COTA) and National Seniors Australia (NSA); ‘provider’ lobbies (Aged and Community Services Australia and Leading Age Services Australia); professional bodies (nursing and other professions) and special purpose advocates such as Alzheimer’s Australia and Carers Australia (Encel and Ozanne 2007). The National Aged Care Alliance currently has a key role in bringing these diverse interests into a valuable coalition that relates closely to government. Mark Butler (2015), as a former Minister of Mental Health and Ageing, provides an astute overview of the political activity and contributions to policy development of COTA, NSA and other advocacy groups. The Australian Association of Gerontology (AAG) is Australia’s peak national body working to expand knowledge on ageing and linking professionals working across the multidisciplinary fields of ageing.

### 2.6 Political Directions

Ageing has had relatively little political prominence in Australia so far over the post-war era in contrast to the ‘age and generational politics’ that are so prominent in Europe and the USA. A useful review of developments through the 1990s concluded that the politics of ageing and mobilisation of older Australians had largely followed, rather than led policy developments (Encel and Ozanne 2007). Butler (2015) made a case that current and recent generations of older voters have had strong party identifications that have not changed much over time. He also noted that Australia’s compulsory voting system limits the power of older Australians relative to the voluntary USA voting system, where older people have a high turnout relative to younger people.

In the 2013 election of the Abbott government, voters aged 65 years and over were strong supporters of the Liberal-National parties (56%) in contrast to voters aged under 25 years (35%), 25–44 years (42%) and 45–64 years (45%) (Bean and McAllister 2014). McAllister (2011) noted the stability of voting patterns over time.
and the lack of much evidence supporting either ageing effects (in which people would become more conservative with age) or major cohort effects (continuing political identities formed when people came of age). However, over recent elections both baby boomer and younger voters have evinced less identification with major parties, relative to their counterparts from earlier cohorts. Butler (2015), drawing on separate evidence, noted that the baby boom cohort had come of age mainly during the Labor governments of the Whitlam/Hawke/Keating era. He further noted that this cohort could present challenges for conservative parties, although boomers’ votes could become more contestable in the future.

### 2.7 Conclusion

The longevity revolution and cohort succession have raised new challenges and opportunities for ageing individuals and an ageing Australia. This chapter has aimed to provide an overview of the social, economic and political developments of an ageing Australia over the post-WWII era. It has examined ways in which the lives of diverse groups of ageing people have unfolded during periods of considerable social change. One of the most important insights is that ageing is a social process which, over the life span, can be improved by positive action. Another is that ageing is highly variable with an accumulation of advantage or disadvantage for different groups over their lives. Uncertainty over Australia’s social and economic future adds to the complexity and stakes in actions on ageing.

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Ageing in Australia
Challenges and Opportunities
O'Loughlin, K.; Browning, C.; Kendig, H. (Eds.)
2017, XII, 290 p. 37 illus., 6 illus. in color., Hardcover