

COVID-19:

# COTA Tasmania Community Conversations

MAY 2021





## About COTA Tasmania

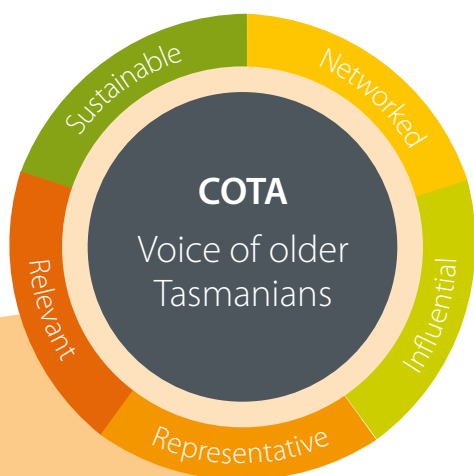
COTA Tasmania (Council on the Ageing [Tas] Inc) is a not-for-profit organisation, operating as a peak body for a wide range of organisations and individuals who are committed to encouraging our community to think positively about ageing. This involves promoting and encouraging social inclusion and championing the rights and interests of Tasmanians as they age.

The vision of COTA Tas is that ageing in Australia is a time of possibility, opportunity and influence.

For further information or advice regarding the content of this document please contact:

### SUE LEITCH

Chief Executive Officer, COTA Tasmania  
'Westella', 181 Elizabeth Street  
HOBART TAS 7000  
Phone: (03) 6231 3265  
Mobile: 0448 281 897  
Email: [suel@cotatas.org.au](mailto:suel@cotatas.org.au)



## Contents

Background	2
COTA Tasmania: responses to COVID-19	3
Where did we go?	3
What did we hear?	4
What did we see?	4
Volunteering	5
What did people say were the greatest challenges of the past year since the COVID-19 outbreak?	6
What were the 'silver linings' or positives to come from COVID-19?	6
Feedback from organisations	6
Key findings	7
What can we learn from older people's experiences?	7
Thank you	8
Other issues raised by older Tasmanians	8
References	8

## Acknowledgement to Country

COTA Tasmania acknowledges the traditional owners of the land in which our offices are located, as well as the land we travelled and visited to collect stories and experiences of older people in our communities. We acknowledge with deep respect the wisdom, resilience and knowledge of the Tasmanian Aboriginal community and we stand for a future that profoundly respects and acknowledges Aboriginal perspectives, culture, language and history.

# Background

---

COTA Tasmania, like many organisations, saw considerable changes to the delivery of our services and support during March 2020-March 2021. We were acutely aware that at a National as well as local level, older people had been impacted considerably by the restrictions placed on them in order to maintain public health and safety, at times this increased social isolation and their access to services and support. As borders closed and COVID-19 cases increased, we saw community organisations rearrange their service provision in different ways in order to maintain the health and safety of their staff, whilst also continuing to support community members.

Alongside this, older people were being reported in the media as being of higher risk due to their age, increasing the prevalence of ageist stereotypes and increasing anxiety and worry.

---

***‘It is important to consider the language used when discussing age and COVID-19 to ensure it doesn’t perpetuate negative stereotypes. Remember that ‘people over 60’ is a very broad group, spanning well over four decades.’<sup>1</sup>***

Media reports and messaging around risk created additional stress on older people and their families as they grappled to take stock of the constant information and the growing narrative that older people were at higher risk than the general population. Older people were often portrayed as a homogenous group, all frail and in need of extra protections.

---

***‘Efforts to protect older persons should not overlook the many variations within this category, their incredible resilience and positivity, and the multiple roles they have in society, including as caregivers, volunteers and community leaders’.<sup>2</sup>***

COTA Tasmania heard many concerns from older people and their families about the conflicting messages at this time, unsure whether there was increased risk for their age demographic and feeling a sense of disempowerment over the initial months of the outbreak.

We took the approach when interacting with older Tasmanians during this time of providing consistent messaging based on public health advice, encouraging people to utilise government resources as the reliable source of information and advice.

---

***‘During the lockdown and border closures, many older Tasmanians have had limited contact with family and friends and usual social activities have been on hold. This has increased feelings of anxiety and loneliness and many struggle to re-engage with group activities as they recommence. The COVID-19 pandemic has exacerbated social isolation and loneliness and increased anxiety and issues with mental health’.<sup>3</sup>***

In October 2020 we participated in the Mental Health Council of Tasmania’s roundtable discussion in relation to Older People’s Mental Wellbeing and have maintained strong connections to other peak bodies and health agencies throughout the pandemic, ensuring collaborative efforts in the response and recovery strategies and resources developed.

As the pandemic grew, so did the various measures to support communities and key industries affected. We were pleased to see the Older Persons COVID-19 support line launched in April 2020, a collaboration between Council on the Ageing (COTA) Australia, National Seniors Australia, Older Persons Advocacy Network (OPAN) and Dementia Australia. This was followed in February 2021 with The Multilingual Older Persons COVID-19 Support Line.

Given that many community members we hear from indicated they rely on their phone or the news as the main source of access to information about COVID-19, it is vital that such support lines are maintained as we continue to roll out vaccinations as a means of older community members and their family having support and access to clear meaningful information. This is especially so in rural and remote areas, where access to face-to-face support and information and reliable internet access may be limited.



# COTA Tasmania: responses to COVID-19

Alongside our existing programs and work, COTA Tasmania was funded to support messaging and build connection to older people across Tasmania during 2020. COTA staff worked to create several publications that we distributed through key partners (Meals on Wheels, Community Transport, Politician & local council offices, peak bodies, neighbourhood houses) as well as being available to send out to individuals.

COTA flyers developed:

- **Living Well @ Home**
- **Eating Well @ Home**
- **Staying Strong @ Home**
- **COVID-19 postcard**
- **IT Help sheets – How to use Zoom** and **How to use Messenger**

We also provided COVID-19 related messages and health related information via our website and social media channels throughout this time.

With many community sector programs and activities back up and running, we felt it a good time to reach out to communities in the more rural areas, to see how the recovery process in those regions was going as well as to speak to community members directly about their experiences of the previous 12 months since COVID-19 pandemic entered our lives.

COTA Tasmania undertook to visit community organisation over the months of March and April. In total we visited 5 community-based services. Whilst we acknowledge the small sample size, the experiences we heard were reflective of many other conversations COTA Tasmania staff have had with service providers, community members and volunteers over the past 12 months.

## Where did we go?

We connected with community organisations and participants of their programs in:

- Ouse Community Health Day Centre, Ouse
- Geeveston Community Centre (GeCo), including the Dog House Men's Shed
- Scrubby Hill Farm, Geeveston (volunteers and customers)
- Karadi Day Centre, Goodwood
- St Helens Neighbourhood House, St Helens

Over the course of our visits, we spoke to approximately 55 community members and volunteers (including 15 staff) about their experiences. We participated in activities being run at the centres to keep discussion informal and were welcomed positively at each visit. Older participants were keen to talk, to be heard and to let us know how they had coped with the additional measures and stress the pandemic had caused.

The mix of health and community neighbourhood centre participants provided a broad age range and combination of abilities and experiences, with a larger proportion of female participants and staff providing input.

## Why did we visit these locations?

We wanted to capture the voices of communities in more rural / remote areas, as well as to re-engage with neighbourhood houses that have been so central to providing ongoing support during COVID-19 whilst services were on hold and organisations closed. We were interested in hearing how communities that have more limited access to services and amenities in rural areas managed or coped and capture the views of staff working within neighbourhood centres.





## What did we hear?

Overwhelmingly, we heard from older people that they have been resilient and adapted well during these complex times. One community member noted **'We've done what's been asked of us'** (GeCo participant), with an overarching theme of pulling together in rural places **'we rallied together.'** (GeCo participant)

In the more rural areas, community members spoke of being used to greater isolation than those in urban areas, feeling that the adjustment to restrictions and measures was not felt as greatly in their community **'it's not been that different for us than it was previously.'** (Ouse participant)

In all locations, people spoke of life being 'slower' and 'quieter' with some experiencing issues initially in getting groceries and other essentials, but that very quickly services and friends kicked in to support them.

**'I had to get neighbours/friends to help for a while, as was told not to go out.'**  
(Ouse participant)

**'It was hard at first, but we have all we need here in town.'** (St Helens participant)

However, amidst this was a definite sense of loss, social isolation and disconnection from family members and friends.

**'I miss seeing the other people in our group – now the group is split in 2 for social/physical distancing.'** (Ouse Participant)

**'I missed seeing people in person.'**  
(Karadi participant)



**'I have been keeping myself busy, but I wouldn't have wanted lockdown to continue any longer!'**  
(Ouse Participant)

Staying in touch via phone was repeatedly talked about as a way that the older people we saw kept in touch and minimised social isolation during the peak months when COVID-19 started to restrict our access and ability to move about the community.

Many spoke also of the radio being a strong source of information and connection, tuning in to hear updates and current advice, especially where confidence and access to computers and the internet was low.

In terms of accessing more formal supports, no one we spoke to within the communities visited acknowledged or identified they had accessed the additional supports organised as a response to COVID-19 (e.g., The Tasmanian Line, telehealth appointments for mental wellbeing). We got a very clear sense in all locations we visited that the trust of existing relationships to services and local groups within their community is an important factor for older people's wellbeing and recovery from COVID-19. This is an important consideration for government and funding bodies to ensure is included in planning for and implementing recovery-based strategies for any future pandemics, and equally for responses to natural disasters.

**'Our members trust and know us, we wanted to be there to offer what was needed.'**  
(St Helens Neighbourhood Centre staff member)

## What did we see?



In all locations and organisations visited we saw a strong sense of community, of connection to one another and to the local services provided within the community. People felt a desire to 'stick together' with lots of creative ideas attempted in order to tackle the issues that came with restrictions and social distancing measures. In the more rural communities, there was often expressed a natural ability to adapt and be resilient with the changes that came with COVID-19: **'We know we can manage, we've got through the bushfires, which were harder to deal with mentally.'** (GeCo participant)

We saw and heard a real sense of confidence in the community's ability to support one another and work out ways to cope and adapt during times of change.

Notwithstanding this ability to adapt, we also saw a sense of frustration surrounding the messaging around COVID-19, especially in relation to the vaccination program. There was a clear desire to be heard, and to have information provided clearly and in formats older people feel confident in (radio, tv, newspaper first – not all channelled through the

internet). People felt content to wait for the vaccine, often reporting that they were **'Happy to wait until more people have had it'** (Karadi participant) with several conversations about hesitancy based on myths around the fast output of vaccines **'How do we know if vaccine will be ok?'** and concerns about storage of the vaccines, that some need to be stored at very low temperatures – **'how will they do that?'** (Ouse participant).

This uncertainty in some cases meant people were relieving the anxious feelings experienced when COVID-19 first hit, in the sense of not knowing what was ahead and how to find out accurate information to guide you.

Each time we discussed the COVID-19 vaccines and the preferences older people had in how to get their information about this we were told over and over that the community GP and health practice were the trusted source.

And we saw commitment and genuine dedication of the staff and volunteers supporting older people in the communities we visited, many who were grappling with their own stress and need to adapt in the private lives.

~~~~~  
**'Day centre staff were wonderful – visiting and dropping food off.'**  
(GeCo participant)



## Volunteering

---

**'We are social beings – volunteering is a way of protecting and strengthening our emotional well-being and mental health.'**<sup>4</sup>

During COVID-19 many people stopped actively volunteering, in line with government advice to not be out in public unless for essential activities (health appointments, groceries, physical activity). Coupled with the unhelpful messaging around additional risks for older people based on age, (not on individual circumstances), has meant that many older people have been hesitant to return to regular community activities, volunteering included.

~~~~~  
**It has also been suggested that volunteering can affirm one's social identity, important when other roles have diminished (e.g. after retirement, losing a partner, children growing up). By**

**extending their networks through volunteering, people can feel part of a community that increases their social capital (e.g. resources or contacts they can turn to for assistance).**<sup>5</sup>

For many older Tasmanians, volunteering provides not only the opportunity to 'give back' but also offers social connection, a sense of contribution and purpose and the ability to support local organisations using skills acquired and developed over their lifetime.

Locally here in Tasmania, it is estimated that between February and April 2020 there has been a reduction of at least 240,000 hours every week in volunteering hours in Tasmania.<sup>6</sup> This has not only an impact on the social wellbeing of volunteers but also on those that rely on the support services from smaller not for profit organisations who have a high proportion of their workforce as volunteers. Without volunteers returning to active contributions to these organisations, some are worried about the future viability of their programs.

~~~~~  
**'There is a risk to our aged volunteers. Many may retire after this, or our programs may not exist given that our volunteer base is aged.'**<sup>6</sup>

Scrubby Hill Farm is a new social enterprise arm of GeCo, and we visited their farm gate market whilst in Geeveston. There was a strong sense of vibrant community spirit amongst the staff, volunteers and customers - each contributing to the farm's success. We spoke to several volunteers, all keen and excited to be back supporting organisation and **'doing something again.'**

Many reported they volunteered across several local organisations and commented on the impact that suddenly not being able to attend regular volunteer activities had on their wellbeing and mental health in 2020. Whilst at St Helen's neighbourhood centre we heard similar stories of local community members re-engaging with volunteer support roles and activities. Volunteering gives older people a sense of contribution and engagement, and without it increased their sense of social isolation and connection.

Given the feedback and conversations we had during our visits, it would be interesting to investigate further whether rural and regional areas are impacted on a lesser scale than urban centres in relation to the reported decreases in volunteer engagement in both Tasmania and Australia.

## What did people say were the greatest challenges of the past year since the COVID-19 outbreak?

Undoubtedly for all communities we visited, managing uncertainty and the increased isolation that came with COVID-19 were the greatest challenges that impacted on mental wellbeing and physical access and inclusion within their local areas.

***‘The strongest predictor of impacts on mental wellbeing is the subjective, felt experience of loneliness or perception of lack of social support.’<sup>7</sup>***

Having strong connection to the organisations we visited, as well as the feeling of being closely connected to that organisation appeared to have acted as supportive factor that acted to combat this risk.

The pace and change of the COVID-19 situation and keeping up with information (especially for those not using digital technology) proved stressful for many, and frustration by some who felt they were missing out on information ***‘Not all of us are on Facebook.’*** (Ouse participant)

57% of Australians 70 years and older have low to no digital literacy and of the Australians over the age of 50 62% have never made a video call and 58% have never chatted on social media.<sup>8</sup> It is extremely important for the Government to remember this when designing any communication campaigns, ensuring that not only key health literacy principles are utilised, but that there are alternatives to online information delivery and support mechanisms in place to ensure people are supported to receive and comprehend this information.

Again, clear messaging and information provided in a timely way is important to ensure older people feel aware and empowered to make choices about their actions and interactions during a pandemic. One size does not fit all!

## What were the ‘silver linings’ or positives to come from COVID-19?

Several community members spoke of increased notions of gratitude both for the COVID-19 response to date, of our relatively low rates of infection and outbreaks, and of our state’s geographical location. Some spoke of having spent more time on projects/ clearing out tasks – that they’d been putting off.

***‘How lucky we are to be here in Tasmania.’***  
(GeCo participant)



A sense of community connection and opportunities to re-think what it means to be involved in community was also spoken of. One person commented that COVID-19 ***‘...is a wake-up call – people are too interested in individual rights and themselves.’*** (Dog House Men’s Shed participant)

## Feedback from organisations

Whilst arranging the community conversations, it was clear very quickly just how much work the community and health sector had undertaken in order to continue offering support, connection and much needed service in their communities. COTA Tasmania staff were welcomed and encouraged to visit, all whilst maintaining social distancing measures and number restrictions.

Many staff commented that the initial stages of COVID-19 were their busiest ever, with services needing to be reconfigured or at times closed, and outreach efforts including emergency food relief increased to higher levels (some services also reporting new community members seeking support that they previously had no relationship with before COVID-19). Now, 12 months on, demand remains, and organisations find themselves now looking to government to continue the increases in funding, especially in the wake of job seeker payments finishing up.



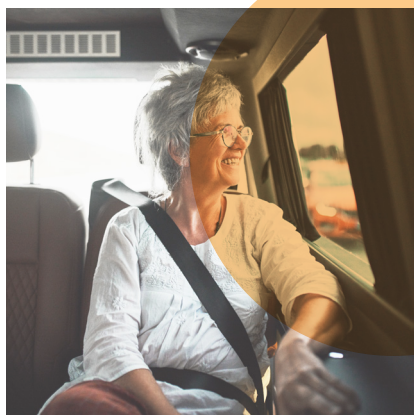
Several organisations commented on having to take on the role of educator, assisting older people to both be aware of and also adhere to social distancing measures they needed to comply with. At times this meant also navigating their communities upset over changes and restrictions whilst also supporting their staff who were working under considerable stress and worries of their own.

***‘Activities and classes are not back to ‘normal’ – we can’t go on the day trips we used to e.g., Theatre trips, due to continued restrictions on numbers allowed on the bus.’ (Ouse participant)***

In one location visited, there appeared to be mixed messages across regions with some services appearing to make different decisions about how soon to recommence services. This made it hard for a day centre coordinator to share information and ideas with colleagues in different locations, in order to work together ***‘I am a bit frustrated with the variation in decisions within the THS regions.’ (Ouse staff)***

At Karadi, GeCo and St Helens Neighbourhood House, the Eating with Friends programs continue to be modified, due to issues with space and meeting social distancing restrictions. Community members have found ways to stay connected despite this, with a GeCo staff member commenting that ***‘many members collect for them and one other, then go visit and eat together – so they are finding ways of making it work during COVID’.***

The resilience theme carries over to organisations too, who showed great flexibility and adaptability ***‘we’ve had to modify what we do, but it’s going ok’ (Karadi staff)*** and a genuine commitment to ensure their older community members were supported and connected.



## Key findings

- 1. Clear messaging is vital** – trusted, reliable sources, variety of mediums, with support to navigate information for individual needs.
- 2. Connection is important** – social isolation has increased during COVID-19 and creativity is key to ensuring connections are maintained and also created in new ways.
- 3. Digital literacy and inclusion** – is a real issue in Tasmania and an added impact for consideration in communication and messaging strategies. Investment in further 1:1 supports for older people to increase confidence with technology is recommended.
- 4. Don’t underestimate people’s strength and resilience** – ask them what they need, what they are managing well themselves, and let communities support one another.
- 5. Placed based responses are key** – in line with the recommendations in the recent PESRAC report (specifically recommendation 35).<sup>9</sup>

## What can we learn from older people’s experiences?



It is important not to forget that older adults have lived experience of navigating change over their lifetime and want to be involved in forming ideas and plans that impact on them. Older people are individuals, and we should not be labelling all older Tasmanians as vulnerable or less valuable.

Older people we spoke to clearly had a high level of resilience and in the communities we visited appeared to have managed well during the COVID-19 pandemic. Their no-fuss approach to needing to alter routines, accept lockdown measures, and find ways to stay connected was empowering and we heard many times that ***‘we just want to know what to do, then we’ll do it.’ (GeCo participant)***

Clear messaging with strong reasoning behind decision making is important, especially as many older people commented they do not have access or feel confident to access computers / internet to search for additional information.

Responses to COVID-19 and future recovery strategies need to include the thoughts and views of older people and the impact on their lives, access to services, connection to community and needs around digital inclusion.

COTA Tasmania looks forward to continuing to work with older Tasmanians to ensure their voices are heard and respected as we navigate the ongoing recovery process and the contribution older members of the community continue to make as they age is valued and visible.

## Thank you

To the community organisations and their staff for organising and welcoming us during our visits. To participants who generously chatted through their concerns, positive experiences and learnings of the past 12 months, we appreciate your openness to share.

## Other issues raised by older Tasmanians

Whilst undertaking our visits many older people, volunteers and staff at the community service organisations we visited raised other key issues of concern to them. We value these insights and want to honour these views by including below:

- **Housing** – increased concerns about lack of affordable housing. This was felt in most areas visited, and we were alarmed to hear of the high rental fees being charged in rural areas, many on par with Hobart rental prices.
- **Aged Care** – access to this and the expectations and knowledge about the processes involved. Several people commented on the recent Royal Commission, of the shock to hear about the systematic issues within the current model and concerns about entering that system themselves.
- **Access to quality health care** – in Geeveston there is no GP located at the local Council run clinic. Community members therefore have to travel to Dover or Huonville and for many older people who do not drive this adds an additional pressure and worry. It also means that people living in the Geeveston area do not have a trusted source to provide reassurance on health messages and information related to COVID-19 and the vaccination rollout.

## References

1. *Ageism and COVID-19*, Hon Kay Patterson, Age Discrimination Commissioner 5 May 2020 <https://humanrights.gov.au/about/news/ageism-and-covid-19>)
2. UN Policy Brief: The Impact of COVID-19 on older persons, May 2020 [https://www.un.org/sites/un2.un.org/files/un\\_policy\\_brief\\_on\\_covid-19\\_and\\_older\\_persons\\_1\\_may\\_2020.pdf](https://www.un.org/sites/un2.un.org/files/un_policy_brief_on_covid-19_and_older_persons_1_may_2020.pdf)
3. 2021–2022 State Budget Community Consultation Submission, COTA Tasmania
4. *PESRAC Workshop 8 : Community Development & Civic Society:pg3*
5. *Volunteering during the COVID-19 pandemic: What are the potential benefits to people's well-being?* Stephanie Tierney and Kamal R Mahtani, Oxford COVID-19 Evidence Service, 23<sup>rd</sup> April 2020 <http://www.cebm.net/oxford-covid-19-evidence-service/>
6. *Submission to the Premier's Economic and Social Recovery Advisory Council*, Volunteering Tasmania [https://www.volunteeringtas.org.au/covid-19\\_forsubmissionreport/](https://www.volunteeringtas.org.au/covid-19_forsubmissionreport/)
7. *Submission to the Premier's Economic and Social Recovery Advisory Council*, Volunteering Tasmania [https://www.volunteeringtas.org.au/covid-19\\_forsubmissionreport/](https://www.volunteeringtas.org.au/covid-19_forsubmissionreport/)
8. *Exploring the impacts of social distancing on older adult's webinar*, Dr Belinda Cash, Charles Sturt University, May 2020
9. e-Safety Commissioner 'Social distancing without the isolation: helping older Australians connect online' 18<sup>th</sup> March 2020.
10. *PESRAC Report* <https://www.pesrac.tas.gov.au/reports>





**COTA TAS Inc**

"Westella"

181 Elizabeth St, Hobart TAS 7000

Phone: (03) 6231 3265

Email: [admin@cotatas.org.au](mailto:admin@cotatas.org.au)

[www.cotatas.org.au](http://www.cotatas.org.au)