



Australian Government  
Department of Veterans' Affairs

AUSTRALIAN VETERANS AND WAR WIDOWS

# Your lives, *your needs*



5<sup>th</sup> Edition

Findings from the 2006 *Survey of Entitled Veterans, War Widow(er)s, SRCA Clients and their Carers* commissioned by The Department of Veterans' Affairs

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# Foreword

It is my pleasure to present to you, *Your Lives, Your Needs 2006*. This booklet provides a summary of the lifestyles, health and well-being of the veteran community based on the findings of the *2006 Your Lives Your Needs Survey* conducted by the Department of Veterans' Affairs.

The Survey provides relevant, accurate and timely information that assists the Department in policy development, so that veterans' changing needs can be met in the best possible way. This information will enable ongoing improvement in our provision of services to veterans.



The Survey of the veteran community is very useful in the review and development of programs and activities that target the needs of the veteran community. For example, the 1997 and 2003 Surveys contributed to the development of key programs such as Veterans' Home Care, HomeFront and discharge planning policies to assist veterans after they leave hospital. The results of the 2006 Survey will be used as a guide in defining the future needs of the veteran community and finding the best possible way to ensure their needs are met.

This is the first Survey to include clients receiving incapacity payments under the *Safety Rehabilitation and Compensation Act 1998* and their carers.

This Survey also tells us what is being done well and where programs are meeting the needs of the veteran community and making a positive difference to their everyday lives.

I would like to thank all veterans and war widows and their carers who took part in this Survey. Their assistance has provided both the Department of Veterans' Affairs and myself with a valuable insight into the current and future needs of the veteran community.

I am sure you will find this report interesting and informative.

Alan Griffin



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# Introduction

In February 2006, the Department of Veterans' Affairs (DVA) commissioned The Nielsen Company to carry out a survey of Repatriation Health Card holders (Gold Card for all health care conditions or White Card for specific health care conditions), SRCA clients (clients receiving incapacity payments for more than 13 weeks under the Safety Rehabilitation and Compensation Act 1988 (SRCA) – included in the study for the first time in 2006) – and their carers. Although not all health card holders or SRCA clients were interviewed, enough were included in the survey to allow the results to be representative.

This is the fifth such survey to be conducted by DVA, the last being conducted in 2003. The aim of this survey was to identify the needs of the veteran community and develop ways for DVA to better meet those needs. In particular, the survey aimed to:

- measure the health of veterans, war widows and SRCA clients, and their level of independence;
- assess the influence of existing programs on improving veteran health and lifestyle;
- identify the service and support needs of veterans and war widows; and
- identify ways in which DVA could assist veterans, war widows and SRCA clients to achieve a healthy and more comfortable life.

The survey excluded those veterans, war widows and SRCA clients who live outside of Australia, and those living in a nursing home, residential aged care facility or in hospital.

Two questionnaires were used in the survey:

- The first questionnaire related to housing, community services, health, lifestyle, caring for others, and assistance and care requirements. 10,675 veterans and war widows and 2,142 SRCA clients were invited to participate and face-to-face interviews were carried out with 2,131 and 406 respectively (response rates of 20% and 19%).
- The second questionnaire related to providing care, respite services and coping as a carer. It was used in face-to-face interviews with 247 carers of veterans or war widows and 89 carers of SRCA clients.

This booklet presents some key findings from the 2006 survey and, although the same questionnaires were used for both the veteran and war widow card holders and SRCA groups, distinctions are made where the findings for these participant groups were found to have differed significantly.

# Veterans and War Widows

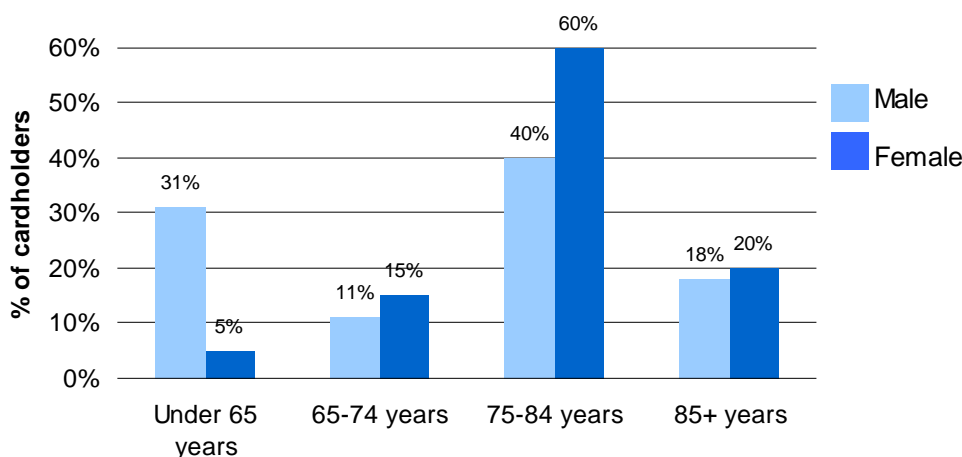
## Personal Information

This section provides a profile of veterans and war widows, including age, gender, geographic location, marital status, Defence Force service and health card type. Where reference is made to war widows, this includes war widowers.

### AGE AND GENDER

More than 3 in 5 of the veterans and war widows surveyed were male (61%). The following graph shows the distribution of males and females by age group.

**FIGURE 1: AGE AND GENDER**



The distribution is skewed towards the older age groups, with two-thirds (67%) aged 75+ (19% are aged 85+). A further 12% are aged between 65 and 74 years. However, every fifth card holder is aged under 65 (17% are aged 45 to 64 and 4% are under 45).

### GEOGRAPHIC LOCATION

The state distribution of veterans and war widows closely reflects the total population's distribution, with the majority living in NSW/ACT (35%), Victoria (23%) or Queensland (22%). Almost three in five (57%) veterans and war widows live in metropolitan areas and Table 1 (overleaf) shows their location throughout Australia.

**TABLE 1: GEOGRAPHIC LOCATION**

STATE	TOTAL % OF VETERANS / WAR WIDOWS			AUS. TOTAL POP. %
	CITY %	COUNTRY %		
New South Wales/Australian Capital Territory	35	54	46	35
Queensland	23	46	54	20
Victoria	22	62	38	25
Western Australia	9	76	24	10
South Australia	8	74	26	7
Tasmania	4	46	54	2
<b>Total</b>	<b>100</b>	<b>57</b>	<b>43</b>	<b>100</b>

### MARITAL STATUS

Half of those surveyed (49%) are married or in a defacto relationship and a large proportion are widowed (44%). Since the last survey in 2003, there has been an increase in those who are widowed, reflecting the ageing veteran and war widow population.

### AUSTRALIAN DEFENCE FORCE SERVICE

Sixty-nine per cent of veterans and war widows surveyed are identified as having Australian Defence Service (of whom 11% are female and 89% are male). The majority served in World War II (53%), one in five are Vietnam veterans (21%) or have taken part in Peacetime service (19%) and almost one fifth (17%) served in Malaysia, Borneo or Far East Strategic Reserve. Very few (4%) have served in the defence forces of a country other than Australia.

### HEALTH CARD TYPE

Most of those surveyed (83%) have a Gold Card which provides cover for all health care conditions. The remaining 17% have a White Card which covers specific health care conditions.



# Living Arrangements

Three in four (74%) veterans and war widows live in a separate house, semi-detached house or terrace. The next most common type of home is a flat, with 16% living in this type of home.

Most of those surveyed share their home with their spouse or partner (48%) followed closely by those who live alone (44%).

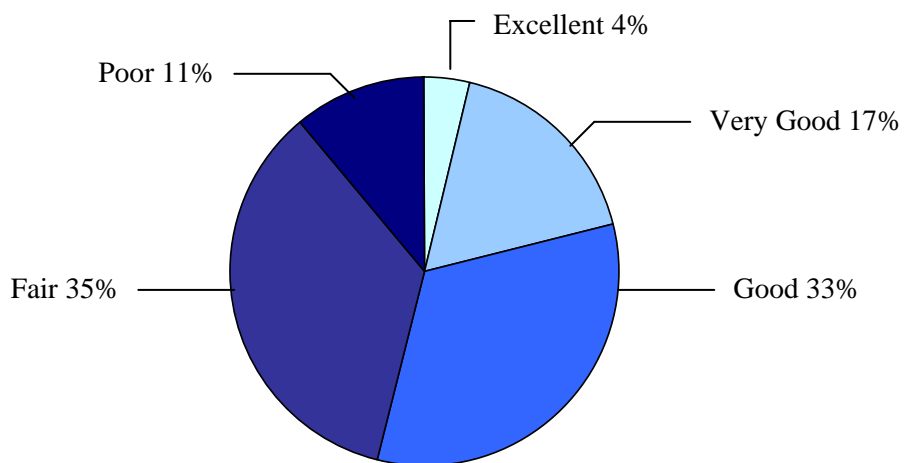
# Health

## SELF-RATED HEALTH

A little more than half of all veterans and war widows (54%) rated their overall health as Good, Very Good or Excellent, as shown in Figure 2. Eleven per cent rated their health as poor.

When asked about activities they do during a typical day, three in four veterans and war widows (75%) reported being limited by their health in undertaking moderate activities (eg vacuuming etc). A further three in four (77%) reported that their health limits them climbing several flights of stairs.

**FIGURE 2: SELF-RATED HEALTH**



## SELF-REPORTED MEDICAL CONDITIONS

The most common medical condition, affecting nine in ten veterans and war widows (90%), is vision problems that are corrected by glasses or contact lenses. Deafness, problems affecting mobility and Rheumatoid Arthritis/ Osteoarthritis are also common, with each affecting more than half of those surveyed (55%, 54% and 51% respectively). Just under half are affected by either back trouble (47%) or high blood pressure (47%) and around two in five suffer from sun spots (43%), mild memory loss (41%) or sleep disturbances/ insomnia (38%).

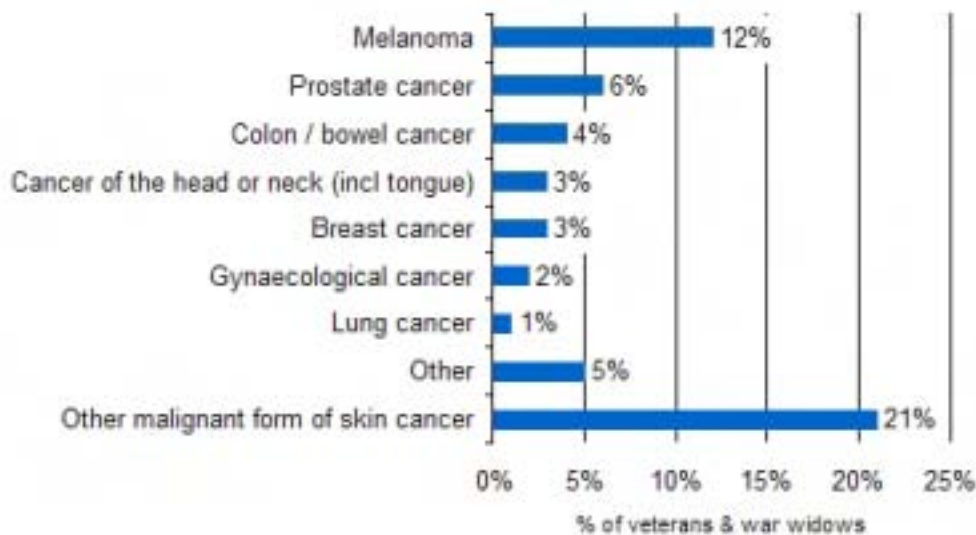


When asked about how they feel and how things have been with them during the past 4 weeks, three in five (61%) veterans and war widows reported feeling calm and peaceful all or most of the time and almost a third (31%) had a lot of energy at least most of the time. However, 13% felt downhearted or depressed all or most of the time. A quarter (24%) reported that during the past 4 weeks their physical health or emotional problems had interfered with their social activities at least most of the time.

## SELF-REPORTED CANCER

Just over two in five card holders (44%) reported they have had or received treatment for some kind of cancer. As Figure 3 shows, the most common form of cancer among those surveyed is a malignant form of skin cancer other than melanoma, as mentioned by one in five (21%) while 12% report receiving treatment for melanoma.

**FIGURE 3: SELF-REPORTED CANCER**



### ANNUAL FLU VACCINATION

Three in four veterans and war widows (75%) reported always having an annual flu vaccination while just under one in five (18%) have never had one.

### PRIVATE HEALTH COVER

One in six veterans and war widows (17%) have private health insurance for themselves. Almost two thirds (63%) of those with private health insurance have family cover and three quarters of card holders (74%) with private health insurance have cover that includes both hospital and extras. The most common reason given for having private health cover is simply because they have always had it (56%).

## Medicines

The vast majority of veterans and war widows (92%) currently take at least one prescription medication. Almost every second person (47%) currently takes between one and four prescription medicines. One in three (36%) take between five and nine medicines, with a further one in ten (9%) taking ten or more. The remaining 8% currently take no prescription medicines.

Two thirds of veterans and war widows (67%) reported having had a medication review in the past 12 months. Moreover, most of these (93%) undertook the review with their GP.

# Hospital Services

Two in five veterans and war widows (38%) have been hospitalised under DVA arrangements at least once in the past twelve months. Two thirds of these (67%) were admitted to a private hospital, with the remainder going to a public hospital (30%), or a private day care procedure centre (2%).

Every second veteran and war widow (52%) hospitalised under DVA arrangements reports that a hospital staff member or doctor discussed their after-discharge care with them. A further 35% who were hospitalised under DVA arrangements received something in writing that outlined the care or services they would need once they left hospital.

# Lifestyle

## IMPROVING HEALTH

Almost half (49%) of veterans and war widows have tried to make at least one change to improve their health in the last 12 months.

Over a third of those surveyed (36%) believe they can change their weight to improve their health, and 75% have tried to do this in the last 12 months. More than a third (35%) believe they can change the amount they exercise to improve their health, and 74% of card holders have tried to do this in the last 12 months.

DVA assisted one in ten (11%) veterans and war widows to make lifestyle changes, mainly through written information (5%) or preventative health care programs (3%).



## ALCOHOL AS A HEALTH CONCERN

Seven percent of veterans and war widows have had their doctor, counsellor or other health professional raise alcohol use as a health concern. Slightly fewer (6%) have themselves raised the issue of alcohol with a health professional in the last 12 months.

## FREQUENCY OF DRIVING

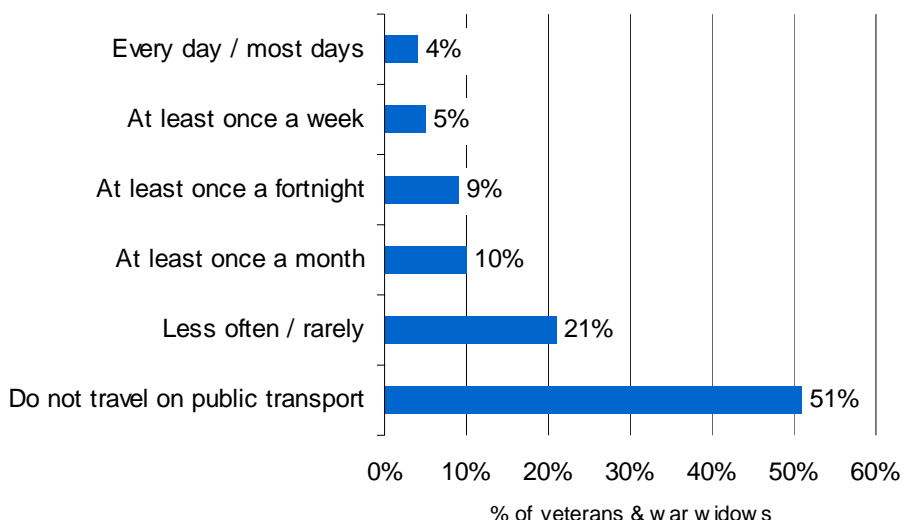
Around three quarters of veterans and war widows (72%) drive a motor vehicle with over half of those surveyed (53%) driving every day or most days, and a further 17% driving at least once a week. Most of those who don't drive say this is due to poor health, poor sight or their age, as mentioned by more than every second non-driver (55%).

## FREQUENCY OF PUBLIC TRANSPORT USE

Half of all veterans and war widows (49%) travel on public transport. The frequency of public transport travel, however, is low. The majority who travel on public transport do so less often than once a month or rarely (42% of those who use public transport, which is 21% of all those surveyed) as shown in Figure 4.

The main barrier for those who don't use public transport is that they simply prefer to drive or be driven (49% of these non-users). Half of those who don't use public transport (50%) said it is not available (28%) or is inconvenient to get to (22%).

**FIGURE 4: FREQUENCY OF PUBLIC TRANSPORT USE**



## FEELING OF SAFETY

The vast majority of veterans and war widows (95%) reported feeling safe in their home at least ‘most of the time’ and almost two thirds (64%) feel safe ‘all of the time’. However, in comparison with this, they feel less safe outside their home, with 84% feeling safe at least most of the time outside their home. These are almost equally divided between those who feel safe ‘all of the time’ (41%) outside their home and those who feel safe ‘most of the time’ (43%).

## ORGANISATION AND CLUB MEMBERSHIP

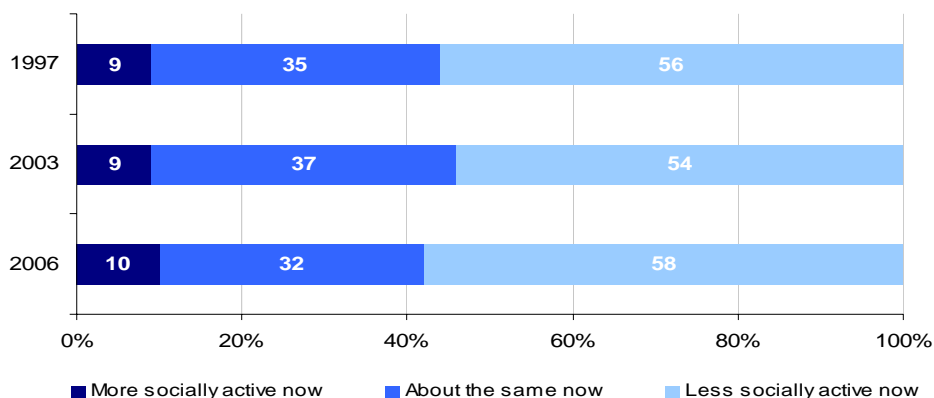
Membership of organisations and clubs is fairly high, with two thirds of veterans and war widows (66%) belonging to a service or ex-service organisation. Membership to a social, recreational or sports club is slightly lower, with 59% of those surveyed belonging to this type of club. However, 22% do not belong to either.

## ACTIVITY PARTICIPATION

Participation in activities is highest for general social activities such as phoning and spending time with family/friends. Nine in ten (89%) veterans and war widows phone family/friends, 78% spend time with family they don’t live with and the same proportion spend time with friends. A high proportion also do household activities such as housework or garden/yard work (75% and 65% respectively). Other activities commonly undertaken include going to restaurants/hotels (61%) and walking (53%).

Three in four veterans and war widows (74%) feel their social activity is about right. Almost one in four (24%), however, feel their social activity is not enough, and very few (2%) feel they have too much social activity.

**FIGURE 5: CHANGES IN SOCIAL ACTIVITY**



## CHANGES IN SOCIAL ACTIVITY

Despite the general ageing of the veteran and war widow population, perceived changes in levels of social activity have altered little over the period of time covered by the past three studies. Figure 5 shows the participants' perceived change in activity levels, between the time of interview and 5 years ago, in each of the studies.

## INTERNET USE

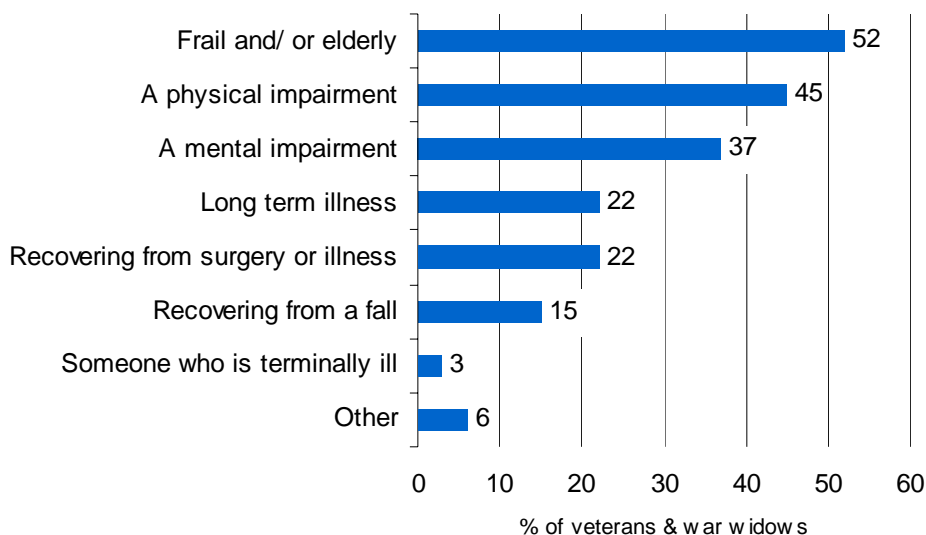
Three in ten veterans and war widows (29%) now use the Internet. The main activities they use the Internet for are emailing (88% of Internet users) or accessing information on the web/education (78% of Internet users). A further one in two users (49%) use the Internet for shopping, paying bills, banking and investing, while nearly one in four (23%) accesses information on DVA entitlements.

# Caring for others

Of those surveyed, eight percent reported that they currently care for someone else. The people these veterans and war widows care for are frail/elderly (25%), physically impaired (23%) or mentally impaired (25%). After being shown a list of possible conditions, participants were asked to nominate all the conditions of the person being cared for. The results are shown in Figure 6.

Just over a third of those who care for someone else (36%) spend over 4 hours doing so per day, with 27% spending over 8 hours each day.

**FIGURE 6: CONDITION OF PERSON CARED FOR**



# Assistance and Care Requirements

## DIFFICULT ACTIVITIES

Veterans and war widows were shown a list of activities, covering personal care, mobility and household management, from which they identified those which cause them difficulty and those with which they receive assistance. The activities identified most commonly as being difficult are shown in Table 2.

Around a half of veterans and war widows reported difficulty performing house maintenance (50%) or with gardening (45%). Around four in five of these receive help with these activities (78% and 86% respectively). Approximately three in ten reported having difficulty with housework (30%), and a similar proportion have difficulty with footcare (27%). The majority of these receive assistance (79% receiving assistance with footcare and 89% receiving assistance with housework).

**TABLE 2: DIFFICULT ACTIVITIES**

ACTIVITY	HAD DIFFICULTY WITH %	HAD DIFFICULTY WITH AND RECEIVED HELP %
House maintenance	50	78
Gardening	45	86
Housework	30	89
Foot care	27	79
Moving 200m or more outside the home	18	36
Household shopping	16	85
Getting in and out of a bed or chair	14	36
Dressing (e.g. help with doing up buttons etc.)	14	61
Bathing or washing	12	63

The proportion of veterans and war widows who reported having difficulty with housework or foot care has significantly increased since 1997, however, they are also more likely to receive help.

Around a quarter of those surveyed (26%) reported that there are no activities that they have difficulty with.

## AIDS AND APPLIANCES

In this section veterans and war widows were asked if they use special aids or appliances for certain activities.

Almost two in five veterans and war widows (37%) do not use any aids or appliances for the activities asked about, however, nearly a third use an aid or



appliance for bathing (32%) or hearing (31%) and one in four (26%) use an aid or appliance for moving 200 metres or more outside the home.

While the majority of card holders who use most of these aids say they adequately meet their needs, this is lower for those using an aid to manage pain (68%) and for those who have an aid or appliance to assist with hearing (70%).

Table 3 shows the percentage that use aids or appliances for certain activities, along with the percentage who reported that the aid does not meet their needs.

**TABLE 3: AIDS AND APPLIANCES**

	USE AIDS OR APPLIANCES	AID/APPLIANCE DOES NOT MEET MY NEEDS
ACTIVITY	%	%
Bathing	32	3
Hearing	31	27
Moving 200m+ outside home	26	6
Toileting	22	3
Moving around home	18	4
Getting in/out of bed or a chair	10	4

## Community Services

Just over half of veterans and war widows (53%) received at least one of the 13 community services asked about, in the last six months. Assistance is most likely to have been received with housework (38%), garden maintenance (29%) or home maintenance (16%) in the past six months.

Only a minority of veterans and war widows who received the specified services said they needed more of them (13% who of those who received home maintenance assistance needed more, 11% of those who received housework assistance needed more of this service, and 10% of those receiving garden maintenance assistance needed more) and almost three quarters (72%) have no unmet needs for the 13 community services asked about. For nearly three in ten (28%), however, there are services which they have needed over the last six months, but have not received.

The most commonly mentioned reason for not receiving the service is a reluctance to ask because of pride, as mentioned by 29% who have unmet needs, or lack of awareness, mentioned by one in four (24%) in this group.

# Carers

## THOSE WHO HAVE A CARER

Fourteen percent of veterans and war widows (14%) reported having a carer (i.e. a relative or friend who provides assistance with personal care or mobility activities). This carer is most likely their spouse/partner (76%), however for 20% of those with a carer, it is their son/son-in-law/daughter/daughter-in-law who performs this role and for 4% it is a friend or other relative.

The majority of veterans and war widows who have carers are males (84%) and aged over 65 years (78%). The majority of these carers are females (91%). Approximately one third of carers are aged less than 60 years (35%), while those aged between 60 and 69 years comprise less than one fifth of all carers (17%). One quarter of carers (25%) are aged between 70 and 79 years, while 22% are aged 80 or more years.



## ASSISTANCE

The main type of assistance provided by carers is helping take medication or dress wounds (74%). This is followed by assisting with housework (69%), household shopping (69%), dressing (66%) and cooking/ meal preparation (66%).

The majority of carers assisting with mobility care, personal care, and household management report that the assistance they provide has increased (either a lot or a little) over the last two years (80% for personal care; 76% for mobility care; 72% for household management).

## HEALTH OF CARERS

Three in ten carers (31%) rate their overall health as either excellent or very good, however three in five carers report being limited by their health when undertaking moderate activities (61%) and climbing several flights of stairs (65%).

Three quarters of carers (74%) suffer from at least one of the medical conditions asked about. Carers are most likely to experience insomnia or sleep disturbances (57%), mild memory loss (31%), anxiety disorders (26%) and/or depression (24%).

# SRCA Clients

## SECTION OVERVIEW

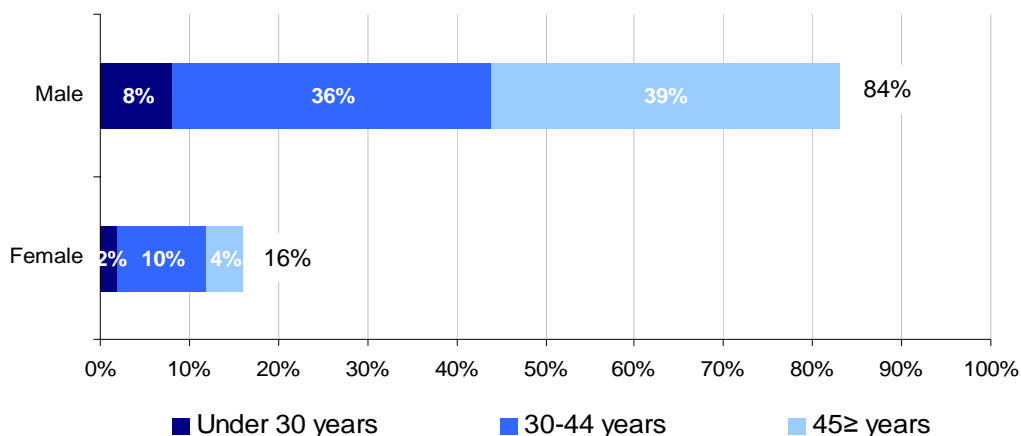
The next section considers the findings of the 2006 survey amongst the SRCA incapacity payment recipients (referred to herein as SRCA clients) and draws out the areas in which this group differs from that of the veterans and war widows.

The survey results demonstrate that there are many areas in which SRCA clients and the veteran and war widow community are similar in terms of their experiences and needs. There are, however, a few key areas in which SRCA clients, their carers and their requirements, are notably different from the veteran and war widow population and these, understandably, mostly relate to issues of health and mobility, which can have broad-reaching impacts on lifestyle, activity and well-being.

## AGE AND GENDER

An even higher proportion of SRCA clients are male (84%) compared with the veterans and war widows group (61% male) but the most noticeable difference is found in the age distribution. Figure 7 shows the age distribution of male and female SRCA clients.

**FIGURE 7: AGE AND GENDER - SRCA CLIENTS**



Unlike the veteran and war widow group, which is skewed towards older age, nine in ten (90%) SRCA clients overall are aged 30 years or more, with almost one in two (47%) aged between 30 and 44 and a further 43% aged 45 and over. However, one in ten SRCA clients are aged under 30 (11%).

### LIVING ARRANGEMENTS

SRCA clients are most likely to live in Queensland (40%), followed by NSW/ACT (25%) and slightly more than half of all SRCA clients (53%) live in metropolitan areas.

SRCA clients are less likely to live alone (30% do so) than veterans and war widows (44% of whom live alone) and are instead more likely to share their home with their spouse or partner (67% of SRCA clients are in this arrangement, compared with 48% of veterans and war widows).

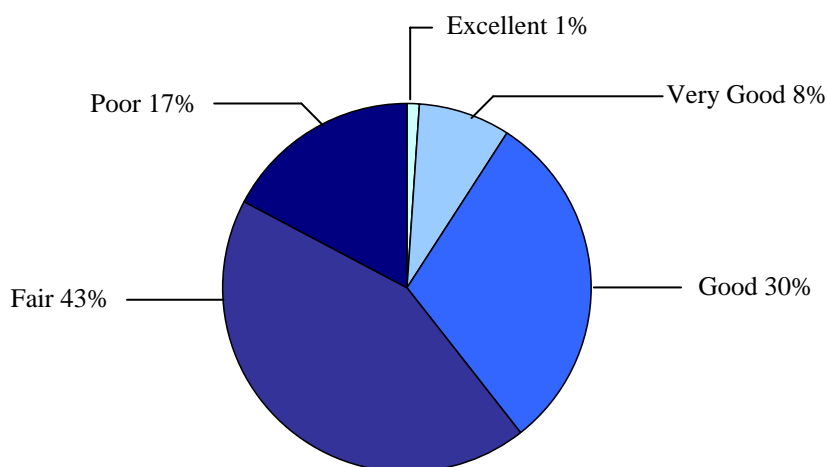
### AUSTRALIAN DEFENCE FORCE SERVICE

Whereas the majority of the veteran and war widow community who were identified as having Australian Defence Service served in World War II, the majority of SRCA clients identified as having Australian Defence service, have Peacetime Service (70%), further illustrating the age difference between the two groups. Around one in ten have taken part in peacekeeping or other hazardous service overseas (12%), served in East Timor (11%), Malaysia, Borneo or Far East Strategic Reserve (9%) or Vietnam (8%). Very few (4%) have served in the defence forces of a country other than Australia.

### SELF-RATED HEALTH

One in ten (9%) SRCA clients rate their overall health as at least very good, however only 1% rate their health as excellent. Three in five (60%) rate their overall health as at most fair, with 17% indicating their health is poor, as displayed in Figure 8 below.

**FIGURE 8: SELF-RATED HEALTH – SRCA CLIENTS**



Eighty five percent of SRCA clients report that pain interferes at least moderately with normal work activities, including both work conducted outside of the home and housework, and interfered extremely for almost a third (30%).

This is significantly higher than for the veteran and war widow community, amongst whom three in five (59%) reported pain interfering at least moderately with normal work activities.

### SELF-REPORTED MEDICAL CONDITIONS

In terms of health issues, SRCA clients experience different medical conditions from veterans and war widows, with the most common medical condition, affecting three in four SRCA clients (76%), being problems affecting mobility. This represents a significant difference from the veteran and war widow community, of whom 54% reported problems affecting mobility and the most commonly reported medical condition was problems with vision (90%).

For the SRCA group, mobility issues are closely followed by back trouble, mentioned by 70%. Almost two thirds (64%) of SRCA clients have fallen or lost balance in the last 6 months, likely to be a mobility related issue.

By contrast, self-reported levels of having had or received treatment for some form of cancer are lower amongst SRCA clients (25%), than among veterans and war widows (44%). This is likely to be age related, as is the substantially lower proportion of SRCA clients (24%) who report always having an annual flu vaccination (compared with 75% of veterans and war widows).

The proportion of SRCA clients who have private health insurance (37%) is more than double that found among veterans and war widows (17%).



### ACCESS TO HEALTHCARE SERVICES

The majority of SRCA clients (87%) have tried to access a GP in the past six months. Every second SRCA client has attempted to access a Specialist (52%), and two in five have tried to access a Mental Health Provider (39%). Just over one in three tried to access a Physiotherapist (36%) and a third have attempted to access a Dentist (33%) or another allied

health professional (32%) in the last 6 months. Very few (9%) have not tried to access any of the listed professionals.

Just under one in ten SRCA clients report having difficulty accessing their GP (9%), mental health provider (8%), Specialist (8%) or Physiotherapist (7%).

Whilst these proportions are low, they are higher among SRCA clients than veterans and war widows.

Those SRCA clients who experienced difficulties attributed these to being unable to afford (34%) them or as a result of the waiting list being too long (24%). A further 17% report not having transport or living too far away as the cause of their difficulties.



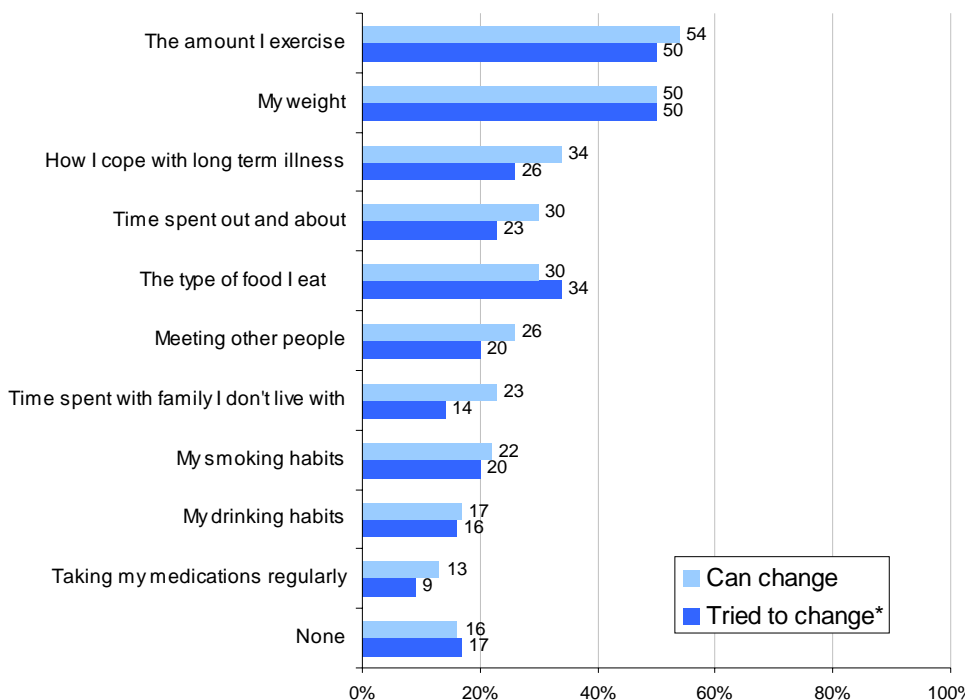
### LIFESTYLE CHANGES

When prompted with a list of possible lifestyle changes that could improve their health, 84% of SRCA clients were able to nominate at least one thing they think they can change. Furthermore, 83% had attempted to change at least one lifestyle area in the last 12 months. Both of these figures were higher than amongst the veteran and war widow group, of whom 60% had nominated a potential change and 49% had attempted to make such a change.

Just over half (54%) of SRCA clients believe they can change the amount they exercise to improve their health, and 50% have tried to do this in the last 12 months. One in two (50%) believe they can change their weight to improve their health, and 50% have tried to do this in the last 12 months. One in three (34%) say they can improve their health by changing the way they cope with long term illness, and one in four (26%) SRCA clients have tried to do this in the last 12 months. Figure 9 shows the lifestyle areas which SRCA clients believe they can change to improve their health and which they have tried to change in the last 12 months.

More than one in five (22%) of the SRCA clients had been assisted by the DVA in making lifestyle changes, mainly through preventative health care programs (11%), written information (7%) and information on the DVA website.

**FIGURE 9: LIFESTYLE CHANGES**



\*Those who have tried to change in the last 12 months are not necessarily a subset of those who believe they can change.

### ALCOHOL AS A HEALTH CONCERN

Almost one in five (18%) SRCA clients have had their doctor, counsellor or other health professional raise alcohol use as a health concern, with male SRCA clients being almost three times more likely than females to have had this issue raised (20% versus 7%). Interestingly however, male SRCA clients are more likely than women to believe they can change their drinking habits (19% versus 7%).

### TRANSPORT USE

Nine in ten (89%) SRCA clients drive a motor vehicle, which is 17% higher than veterans and war widows. However use of public transport is lower, with only 35% of SRCA clients travelling on public transport (the figure for veterans and war widows is 49%).

Frequency of using this form of transport is low for both groups. The majority who use public transport do so less than once a month or rarely (44% of SRCA clients who use public transport, which is 15% of all SRCA clients; 49% of

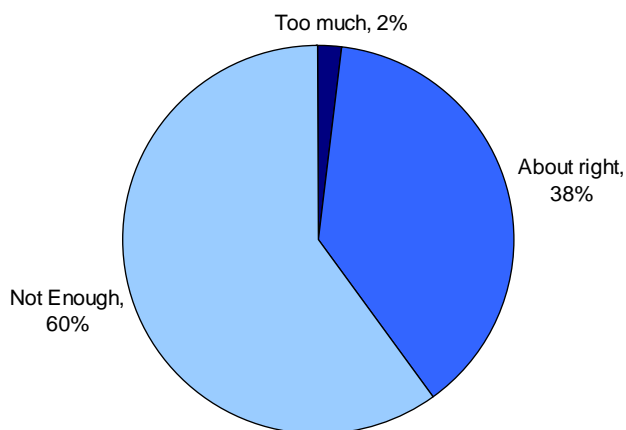
veterans and war widows who use public transport, which is 21% of all veterans and war widows).

### SOCIAL ACTIVITY

Participation in activities is generally lower for SRCA clients than for veterans and war widows, however the most common activities undertaken are similar. Participation is highest among SRCA clients for general social and household activities. Seven in ten (71%) phone family/friends, three in five (59%) spend time with friends and almost one in two (47%) spend time with family they don't live with. Household activities such as housework or garden/yard work are also common (65% and 50% respectively). SRCA clients are, however, more likely to spend time with or caring for young children (43% for SRCA clients; 26% for veterans and war widows).

Perceived level of social activity is notably different for SRCA clients. Whereas three in four (74%) veterans and war widows feel that their level of social activity is 'about right', three in five (60%) SRCA clients feel that their level of social activity is 'not enough', with only two in five (38%) reporting their level of activity being 'about right'. Very few people across all groups (2%) felt that their level of social activity is 'too much', as shown in Figure 10.

**FIGURE 10: LEVEL OF SOCIAL ACTIVITY**



Health is the main barrier for SRCA clients to socialising more, as mentioned by 71% of those who feel that their social activity is 'not enough'.



## ATTITUDES TOWARDS SAFETY



The vast majority of SRCA clients (83%) reported feeling safe in their home at least 'most of the time', and over two in five (43%) feel safe 'all of the time'. They feel less safe outside their home, than in their home. Two in three (65%) feel safe at least most of the time outside their home, however, only one in five (19%) feel safe 'all of the time'. These figures are all lower than their equivalents reported by veterans and war widows.

## INTERNET USE

Four in five SRCA clients (80%) use the Internet, which represents a much higher proportion than found with veterans and war widows, of whom less than one in three (29%) reported Internet use.

The activities which the Internet is used for are similar for both groups though, with the only notable difference being a higher proportion of SRCA clients (67%) than veterans and war widows (49%) using the Internet for shopping, paying bills, banking and investing.

## ASSISTANCE AND CARE REQUIREMENTS

Just over six in ten SRCA clients report difficulty performing gardening or with house maintenance (63% each). Around half receive help with these activities (52% and 46% respectively) although this is lower than for veteran and war widows, of whom 78% and 86% receive help with gardening and house maintenance respectively. Fifteen percent of SRCA clients report that there are no activities that they have difficulty with.

The source of help is also different, with SRCA clients most commonly receiving assistance from a spouse or partner (65% of those who receive help). This is the most popular source of help for all activities.

# Carers of SRCA Clients

## CARER PROFILE

Twenty eight percent of SRCA clients have a carer, (double the proportion of veterans and war widows who have one) and the vast majority (91%) of these carers are their spouse or partner. In line with the SRCA client age profile, their carers are also younger than those of veterans and war widows. Typically SRCA client carers are aged below 65 years (84%), with a small number aged 65 years or older (13%).

The tasks in which SRCA client carers most commonly provide assistance are household shopping (81%), housework (79%), gardening (72%), cooking/meal preparation (70%) and house maintenance (64%).



## CARERS' HEALTH

SRCA client carers provide generally positive ratings about their own physical health.

One third of SRCA client carers (33%) rate their overall health as either excellent or very good, although one in two (50%) report being limited by their health when undertaking moderate activities and more than two in five (44%) report their health limits them when climbing several flights of stairs.

During the past 4 weeks, nearly two in five SRCA client carers (38%) reported feeling calm and peaceful 'all or most of the time' and two in five (40%) had a lot of energy 'all or most of the time'. Conversely, one in five (21%) felt downhearted or depressed 'all or most of the time' in this period.

Almost three in five SRCA client carers (57%) feel that they do not need additional help, however when compared with carers of veterans and war widows (78%) this proportion is relatively low. The three main types of additional assistance considered the most useful by SRCA client carers in need of additional help are garden maintenance (56%), home maintenance repairs (55%) and housework assistance (40%).

# Conclusion

While the majority of veterans and war widows are now aged over 75 years, many report they are fit and healthy. Many also report active social lives focused around friends, family and social organisations. Levels of perceived social activity have changed little over the past 10 years.

It is clear however from the survey findings that along with the ageing of the veteran and war widow community comes a series of health related issues. A large number suffer from chronic diseases that can make communication difficult and limit mobility. The biggest single health factor is problems with vision which can have broad-reaching impact on lifestyle. The relative frailty of the veteran community is also evident, with more than half reporting that they received a community service in the past six months, and one in seven having a carer.

The inclusion in the survey this year of SRCA payment recipients has added an extra dimension to the findings. The results demonstrate that there are many similarities between these new participants and the veteran community in terms of their lifestyle situations and needs. The study also highlights some specific differences though and gives outlines of particular areas in which the availability and supply of services and targeted assistance could be of benefit.

With this group generally being younger – aged predominately between 30 and 44 years - and more likely to be parenting young children, one of the primary issues experienced is that of dealing with their mobility problems. Perceived level of social activity is also significantly lower for this group, compared with the veteran and war widow participants, with health being the biggest barrier.

The dedication of the carers, across all groups in the survey, is evident, yet it is clear from the findings presented in this booklet that there are many aspects of veteran, war widow and SRCA client health and well-being that require continued support. The Department is committed to this and will continue to monitor the changing needs of this community.

