

The Promise of Community Education

Revised from the Presentation at the 2006 ACE Conference, Launceston

By TALENT Third Age Learning Network of Tasmania

1. The Background

The Third Age is the age of older people who are active, independent, involved, living in their own homes but no longer in paid work. Please do not use the word “retirement”, because we are still active and involved in the community; call us the “post-paid work” group of Tasmanians.

TALENT was started by Sheila Given and Rowena MacKean to promote the benefits of Third Age Learning through mental physical and social activities, and to seek recognition and support for Third Age Learning from Government and the community. Sheila and Rowena have experience of being both learning providers and older learners, founding, running and being learners at U3As.

Community Education

This term includes all the education that goes on outside the formal organisations of schools, colleges and TAFEs and the like. The ACE survey released at the conference has listed over 500 community learning organizations. That is almost certainly just the start, since many groups do not yet see themselves as “learning organizations” at all.

Community education is education for “everyone else”, but particularly for older people – the post-paid-workers. And in Tasmania, that’s a lot of people! We have just passed South Australia as the state with the largest percentage of older people; 19.7%, 1 in 5, Tasmanians is aged 60 or over (ABS).

Community-based learning provides many, many benefits; two very important ones for older people (and the only ones covered here) are **health** and **economics**.

2. Health and Economics

Chronic disease and risk factors

A recent DHHS report *Strengthening the prevention and management of chronic conditions*, describes the Big Six chronic diseases: Cardiovascular disease; Cancer; Mental health; Injury; Type 2 Diabetes and Asthma. Together, these 6 diseases account for a huge 70% of the burden of disease.

The same report goes on to list the biggest risk factors for these diseases: Poverty; Low education standards; Social isolation; Unemployment

Older Tasmanians most at risk

Taking those four indicators as a profile, you could apply it to a tremendous number of Tasmanians over 65.

Poverty: over 60% of over 65s rely on the pension as their main income source.

Low education standards; more than 1/3 of over-65s left school at Year 8 or below. The vast majority do not have any tertiary qualifications.

Social isolation: of all single person dwellings in the state, a third are occupied by older people. Social isolation is a factor in depression, obesity and substance abuse.

Unemployment: few older people are in paid work: of those aged 65-69, the figure is only 11.3%. For those over 70, this drops to 3.4% - fewer than 4 in 100.

So the four main indicators for increased risk of chronic disease are all very much present in our older population. But the news isn't all bad.

Most older Tasmanians are healthy

Most older Tasmanians are healthy, active and very useful. Only 7% of over-65s are frail dependent Fourth Agers. The other 93% are still enjoying their Third Age. These Third Agers make a big difference to the community, volunteering over 2.8 million hours of unpaid work every year. (How many people at the conference have granny looking after the kids?)

There is plenty of medical and sociological evidence that it is activity - such as volunteer work, or providing care for a grandchild or relative, or taking part in community groups, or joining in community education, are the very things that are keeping that 93% healthy.

What is meant by health

In the report just quoted, the DHHS has its own definition of health that concurs with this.

Health and wellbeing is not purely the absence of disease, illness, injury or social problems, but attainment of physical, mental, emotional, spiritual, cultural and social wellbeing.

So health is not just being Not Sick – it is being happy, active, stimulated and involved.

The benefits of learning activities

Learning activities, as a form of mental, physical and social activity, provide some very significant benefits for everyone. For older people there are health (as defined by the DHHS) benefits. For the rest of the community, there are benefits from having an active, healthy and useful Third Age group.

Economic benefits

For the economy, there are savings of many millions on healthcare. When older people are healthy, happy and active, they are an asset, not a burden; they provide unpaid volunteer services, and the cost of their health care relatively low.

Fourth Agers on the other hand definitely are a burden. The healthcare system is becoming choked with frail older people, and it is costing a fortune to care for them. Every year, every month, every day that we can extend the healthy Third Age and delay infirmity and dependence, is money in the bank for governments and the community.

So, activity is healthy and learning is a wonderful, low-cost, stimulating activity... It is our contention that ...

Learning is the most cost-effective form of preventive medicine.

3. The learning needs and wants of older people

How do we get older people to learn? The answer is to provide the kind of learning that older people want and need. I know what these needs are, not just from my own experience as a learning provider and older learner, but from forums, discussions and consultations with literally hundreds of older Tasmanians.

Older people need the same things in their learning as they need for their health:
Mental activity – as opposed to inactivity – mental activity through talking, listening, sharing your knowledge and ideas, learning something new – it doesn't matter what you learn or even how successfully you learn it.

Physical activity - through a walking group, a bicycle club, a fitness club or a dancing party.

Social activity Older people prefer activity that involves other people – in a discussion group, a craft group, a community shed, even a political lobby group. There is no social isolation for these learners. Participation and meeting and talking to others is the most important thing, not coming top of the class.

Personal enrichment – emotional, spiritual and cultural. Older people look for the opportunities for self-fulfilment that come with greater leisure, and the renewed self-esteem that comes from sharing the knowledge, skills and experience of a lifetime with their peers, or passing them on to the next generation.

Affordable to people who have haven't got much money. Adult Ed have some great courses, but \$280 for a computing class for instance, and that's the concession price, is a lot when you're on the pension.

Accessible to people who rely on public transport, or who cannot manage stairs.

Consumer oriented - providing what older people themselves say they want to learn, or they won't come. (That is why groups run by older volunteers – who are also learners – are generally successful).

To sum up: Community education must be

Accessible

Consumer oriented

Enjoyable... or they just won't come!

4. The Promise of Community Education

In the Department of Education's policy document *Tasmania, A State of Learning* (2004), a number of strategies are presented that would go a tremendously long way to developing the sort of community education that Tasmanians need, particularly older Tasmanians.

These are: Creating learning communities
Strengthening learning partnerships
Developing local leaders' skills

Unfortunately the document is only a "strategy" and offers no details of budgets, timetables and actual concrete plans. To all those who are concerned with the development of community education in the future, I hope, I strongly hope, that you can get working on putting these strategies into practice, for the benefit of every Tasmanian, and particularly for us older Tasmanians.

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All statistics quoted are from Australian Bureau of Statistics publications.