

2025

VOICES OF OLDER SOUTH AUSTRALIANS

*Evidence and insights into the state
of ageing in South Australia*



December 2025

This report was developed by COTA SA (Council on the Ageing South Australia) through its team at The Plug-in, research and engagement consultancy, who specialise in connecting with and understanding people aged 50+.

COTA SA is an older people's movement and the peak body representing the rights, interests and futures of over 700,000 South Australians aged 50 years and over, who together make up more than a third of our population.

In addition to our range of engagement, policy, and advocacy activities that ensure the voices of older people are influential, COTA SA offers services, programs, and information that connect with over 100,000 older South Australians each year, helping all South Australians age well.

COTA SA is a proud partner in the COTA National Alliance with independent COTAs in each state and territory along with COTA Australia.

Acknowledgement of Country: COTA SA acknowledges and respects Aboriginal people as the traditional custodians of the land of South Australia. We honour Aboriginal peoples' continuing connection to country and recognise that their sovereignty was never ceded. We pay our respects to First Nations Elders past, present and emerging and extend that respect to all Aboriginal people.

Thank You to Our Community

To older South Australians

We extend our heartfelt thanks to all the older South Australians who participated in our engagement activities throughout 2025. Sharing your lived experience directly enables us to advocate on your behalf and your generosity in taking the time to share your stories and experiences with our team is invaluable.

To our partners and funders

We are deeply grateful to partner organisations who support the engagement work of COTA SA that is critical to us ensuring we speak to as many older people as possible across the state.

We thank especially The Wyatt Trust for providing funding to The Plug-in and COTA SA to better understand cost-of-living pressures for older people and what support would help them most.

Foreword

At the heart of COTA SA's work is our engagement with older South Australians from all walks of life, to learn about their experiences and what matters most to them.

As the peak body for older South Australians, our purpose is to listen and engage with people aged 50+ and develop a deep understanding of their concerns so we can advocate for meaningful change.

We developed this Voices of older South Australians report to paint a clear picture of the issues older people are facing today. Over the past year, through research and engagement activities across the state, we have gathered an enormous breadth of insights. This report brings those insights together, strengthening the evidence base that underpins our policy and advocacy work and ensuring the stories and experiences we hear every day shape the decisions that affect people's lives.

Older South Australians tell us that ageing can bring a renewed sense of purpose, freedom and opportunity to live the way they choose. Increasingly though, many older people also feel that life is getting harder for them. They are struggling with the rising cost of living, experiencing barriers to accessing the healthcare they need to age well, and underpinning it all is a sense of feeling "forgotten, ignored and invisible" in the big decisions that impact them.

Through this report, we want to tell the stories of older South Australians, and amplify their voices, so that older people are seen and loudly heard by government and decision-makers across the state.

This report can serve as a resource for many. For older people, it reflects and validates their experiences. For government and decision-makers, it provides clear evidence of where action is needed. For the media, it offers reliable insights and lived experience stories. And for organisations and other groups in the community, it creates a knowledge base that can drive collective action.

The lived experience of older South Australians must be central to the policy decisions that shape their lives. At COTA SA, we aim to ensure that older voices remain at the centre of conversations about their rights, futures and interests.

Miranda Starke
Chief Executive
COTA SA

Executive Summary

This report brings together the voices of older South Australians in 2025 to paint a clear picture of what it means to age in this state today. It reflects the experiences and priorities of thousands of people aged 50+ across both metropolitan and regional South Australia.

Based on continuous, mixed-method engagement led by COTA SA's The Plug-in – including: 'How are you going?' barometer, Listening Posts, targeted workshops, election and budget surveys and a cost-of-living co-design project.

The findings help COTA SA to represent the interests of older people to government, business and community, and inform all COTA SA's policy and advocacy.

Diversity of Experiences

For many older South Australians, ageing is a positive phase of life characterised by greater freedom, autonomy, time to focus on health, learning, friendships and family. This is particularly so in country communities where people often describe their towns as "like family" and places they wish to remain as they age. However, alongside these positives, a growing cohort is struggling. Across all engagement activities, older people describe feeling "forgotten and ignored", particularly in relation to cost-of-living measures.

Priority populations – including Aboriginal and Torres Strait Islander older people, those from CALD backgrounds, victim-survivors of family, domestic and sexual violence, and older LGBTI+ South Australians – face additional and intersecting barriers, such as higher rates of financial insecurity, discrimination, language and information barriers, and difficulty accessing culturally safe and inclusive services.

Cost of Living

Cost-of-living pressures have emerged as the dominant concern. Older people told us that rising costs for essentials (food, energy, insurance, rent) are outpacing incomes, including the Age Pension. Many report they are adjusting their lifestyles by cutting back on social activities, heating and cooling, food, health care, and insurance. These trade-offs directly erode social connection, independence, and health.

Hardship, we heard, is not uniform: people aged 50–66 face particular challenges due to ageism in employment, insecure work and housing, and gaps in eligibility for support services. Among pensioners 67+, housing status (especially renting) is a key determinant for financial security.

Health and Wellbeing

Access to health and wellbeing support is another major concern. Costs, long waits and workforce shortages, particularly in regional areas, make healthcare difficult to obtain, especially for people who are financially insecure. Older people are calling for more affordable preventative and community-based health programs and highlight barriers to "ageing in place" such as the cost and availability of home maintenance, and support at home services – challenges that are intensified in

country regions. South Australia's status as the only jurisdiction without free emergency ambulance transport for full Age Pensioners is seen as a critical equity gap.

Regional issues

Older people living outside metropolitan Adelaide face additional, compounding disadvantages. Regional residents report limited and unstable access to GPs and specialists, heavy reliance on travel to Adelaide for care, and poor or non-existent public transport, including gaps in schemes like PATS and for areas such as the Fleurieu Peninsula. At the same time, the growing shift to digital-only service delivery is leaving many older South Australians without adequate support, making access to essential services, information and social connection more difficult.

The burden of caring

The report highlights systemic vulnerabilities that undermine the ability to age well, including the heavy, often unrecognised, burden carried by older carers, who experience financial strain, emotional exhaustion, and isolation while feeling undervalued and poorly supported.

Dementia is identified as a rapidly escalating issue with multi-generational impacts and significant economic cost, prompting COTA SA's call for a South Australian Action on Brain Health to complement the National Dementia Action Plan.

Conclusion

Overall, the report highlights the growing divide, with vulnerable older South Australians feeling ignored and unsupported. Key imperatives include: recognising and prioritising older people in policy and budget decisions; simplifying and centralising access to concessions and financial supports; continuing to invest in healthcare; addressing regional transport and healthcare inequities; maintaining non-digital paths to services; strengthening support and recognition for carers; implementing a state-level response to dementia; and ensuring culturally competent, trauma-informed and inclusive services for priority groups.

COTA SA is using these lived experiences to shape a policy platform by and for older South Australians, grounded in their voices and focused on making ageing a time of possibility, opportunity and influence for all.



What 2,340+ responses from older South Australians told us



Positive ageing

Ageing brings greater freedom and choice. Many feel positive, active and content, especially in regional SA.



Regional belonging

Strong community ties shape positive ageing in regional SA.

'We are like family.'



Feeling ignored

Many older South Australians feel forgotten. Highest-ever reports of feeling unseen in policy and budget decisions.



Top concerns

- ▶ Cost of living
- ▶ Access to healthcare
- ▶ Regional disadvantage
- ▶ Burden of caring



Government sentiment

Many doubt government decisions will improve their daily lives.

'Nothing in it for us.'



General sentiment

There's a growing shift to 'things are getting harder', especially for people struggling financially.



What's driving concerns among older South Australians



Cost pressures

- 93% Food
- 83% Energy
- 80% Insurance
- 45% Income



Daily trade-offs

Older people are cutting back on basics.

- 48% Social activities
- 46% Heating/cooling



Access to healthcare

- GP shortages + long, costly travel in regions
- Ambulance costs deter 000 calls



Burden of caring

Caring takes a heavy toll.

- 38% report caring, only 29% feel supported
- Carers face financial strain and exhaustion



Systems are too complex

Accessing concessions, Centrelink and aged care is 'a nightmare'. Many miss out because systems are difficult to navigate.



Regional disadvantage

Connection is strong, services are weak.

- Lack of reliable transport
- PATS falls short
- High digital exclusion

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Introduction

COTA SA is proud to present this report that gathers together the voices of South Australians, and to share what they have told us in 2025 about their lives. As the peak body representing South Australians aged 50 and over, we advance the rights, interests and futures of South Australians as we age.

This report aims to distil the issues most frequently raised with us, and to share a vision for a South Australia, where ageing can be a time of possibility, opportunity and influence. It also shares some of the solutions that older people have told us would make a difference in their lives.

The evidence and insights presented in this report are underpinned by an extensive, continuous engagement strategy that ensures COTA SA's policy and advocacy work is supported by both quantitative data and the lived experiences of older South Australians. The information presented here draws on insights from multiple engagement projects over the course of 2025, reflecting consistent policy concerns for older people across the state.

COTA SA continues to use the information gathered to inform all our policy and advocacy.

The evidence base

Engagement is the foundation of what COTA SA's does. All research and engagement work undertaken at COTA SA is led by The Plug-in team, who specialise in connecting with and understanding people aged 50 and over¹. As members of the Australian Data and Insights Association (ADIA), all research undertaken by The Plug-in ensures methodological rigor and the highest level of data quality and evidence integrity.

Our engagement work applies a mixed method approach, incorporating qualitative activities with large-scale quantitative surveys to form a comprehensive understanding of issues affecting older people. We consistently capture a large audience, with over 700 older people completing the continuous 'How are you going' survey and over 700 responses recorded for the Federal Election survey.

This report draws on the following engagement reports, published via the COTA SA website, shared on social media platforms, emailed to our members and e-News subscribers and shared and discussed with state politicians:

- + **Continuous barometer:** Commencing in 2024, COTA SA's ongoing 'How are you going' survey tracks issues for older people over time, providing a consistent measure of their top concerns. To date, the top concerns from over 700 responses include: Cost-of-living, access to healthcare, aged care system.
- + **Listening opportunities:** Regional Listening Posts in Yorke and Fleurieu Peninsulas helped us to understand the in-depth lived experiences of ageing in country SA through casual conversations that were led by community members.

¹ Find out more about The Plug-in: <https://theplugin.com.au/>

- + **Specific engagement to inform COTA SA's 2026 Election Policy Platform:** A targeted engagement plan was implemented generating evidence from regional and metropolitan workshops (46 participants) and 680 online survey respondents (See Appendix 3 for survey questionnaire). The insights from this engagement enabled us to hear directly from South Australians aged 50+ about their challenges and proposed solutions. The rich mix of qualitative and quantitative data provided clear direction to inform our policy platform for State Government action ahead of the 2026 State Election.
- + **Targeted funded project exploring cost-of-living initiatives:** COTA SA's The Plug-in was engaged by The Wyatt Trust to co-design a cost-of-living program with older people in metropolitan and regional SA. The engagement involved conversations with 26 metropolitan and regional South Australians aged 50+ through interviews and workshops to understand why and how older people are struggling financially and to co-design a navigation program.
- + **Event-specific online surveys:** Includes the 721 responses to the 2025 Federal Election Survey and the 100 responses to the 2025-26 State Budget Survey, which capture immediate sentiment and priorities influencing voting behaviour and reactions to policy. Broad engagement is essential to reflect the diversity of older people and ensure policy positions are led by the experiences of older South Australians. The high consistency in responses across engagement activities indicates a shared experience among older South Australians.

COTA SA also works with organisations such as Rainbow Hub SA, Multicultural Communities Council SA, and local governments across South Australia and to ensure that all our research includes a diversity of voices.

Section 1: The experience of ageing in South Australia

1.1. The good, the bad, and the invisible.

The experience of ageing in South Australia is far from homogenous.

We know that for many, ageing is a time of possibility with the majority of older people enjoying a good quality of life.² Older people tell us that ageing has brought them “freedom” and autonomy to live in the way they chose, as they are able to manage their health proactively and engage in lifelong learning. For many, this freedom in later life affords them the ability to focus on building and maintaining friendships and spending time with extended families.

“I have time to look after my health better and just remind myself, if I can't do it today, I can do it tomorrow, I am still learning to slow down and not have so many tasks, which is wonderful.” (Female, 75 - 79 years)³

Many older people living in regional areas love where they live. They feel supported, safe, and socially connected. Despite some challenges, it is the sense of connection and strong relationships with their community that enables them to have a deep sense of belonging: “we are like family”.⁴

Figure 1: Q: What is one positive word to describe the experience of your current phase of life.⁵



² Older South Australians, in general, feel that their quality of life is either somewhat good or very good (66%), one-third (33%) either experience a poor or neutral quality of life. (Q25, State Election engagement survey)

³ Survey response (‘How are you going?’ survey)

⁴ Interview response (Regional Listening Posts, Victor Harbor)

⁵ Survey responses (‘How are you going?’ survey)

While there are many things to celebrate about ageing, we also know that a growing cohort of older South Australians are struggling. The stories of struggle COTA SA heard throughout 2025 reflected a marked shift from previous years. This was particularly evident in the response to the 2025-26 State Budget announcement as COTA SA sent an online survey to older people to understand their reaction to the budget. The survey results indicated a deep disappointment among older South Australians, who felt there was a missed opportunity for meaningful cost-of-living relief and support for older people who are doing it tough. Older people overall felt, there was “nothing good” in the budget for them and they “feel forgotten and ignored” in key government decisions.⁶ This represents the highest proportion to report this sentiment in any of COTA SA’s State Budget response surveys to date.⁷

Overall, there is a sentiment that things are getting tougher for older South Australians,⁸ and this is particularly the case for those older people who may be struggling financially and/or have challenges accessing health and medical services.⁹ Against the backdrop of Australia’s ongoing ‘cost-of-living crisis’ so often spoken about in the media and in politics, COTA SA’s research focused on what can be done to improve equity for these older South Australians.

1.2. Older people feel “forgotten”.

“I have not run my air conditioner or heating at home for 3 years. I cannot afford it. I live rurally, so do not have a warm bus or train to ride. Being aged gets sadder and more of a struggle to simply live. The politicians do not care, and we know it. Does not matter what party. Their attitudes to the reality of life for we ordinary people does not matter until the voting cycle draws close.” (Female, 65-69 years old, Yorke Peninsula)¹⁰

After the 2025 Federal Election, COTA SA asked older South Australians how they felt about the result, and over 700 older people responded to the survey. Although a majority expressed satisfaction with the election result,¹¹ this was tempered by doubt regarding the impact on their lives, with many expressing scepticism that the result would lead to meaningful change for older South Australians.

The pattern was clear that older South Australians feel they do not appear to be on the political agenda, with political focus being “mainly about youth, young adults and housing. Older Australians

⁶ Verbatim survey response. (Q: What do you think is good about this State Budget for yourself and/or older South Australians?, 2025-26 State Budget response survey)

⁷ 56% of respondents stated that there was nothing good in the 2025-26 State Budget for themselves or for older South Australians; compared to 33% in 2024, and 43% in 2023.

⁸ Almost half (44%) of older South Australians, feel that things are getting worse for people aged 50+, 36% are neutral and 17% feel things are getting better. (Q26, State Election engagement survey)

⁹ 46% of the respondents who believe that things are getting worse (Q26) for older South Australians also reported financial insecurity and 31% report accessing health care (Q10) to be extremely difficult. (Q26, Q6, 10, State Election engagement survey)

¹⁰ Verbatim survey response (Q: Do you have any further comments about the 2025-26 SA State Budget that you would like to share?, State Budget response survey)

¹¹ 38% very satisfied; 17% satisfied; 14% Neutral; 7% Dissatisfied; 22% Very dissatisfied. (Q: Please indicate your level of satisfaction with the Federal Election result. 2025 Federal Election survey).

are not valued very highly".¹² Another respondent noted: "I don't think that things will change much for us. It is distressing when you are trying to live on a pension".¹³

1.3. Call to action

- + Older people want to be considered, and their needs prioritised with meaningful Government action. Government should consider the unique needs of older South Australians in policy agendas and budget decisions to address the widespread feeling of being forgotten and ignored.
- + Lived experience matters. Older people should actively engage in advocacy and participation activities (including surveys, forums) and to ensure that their lived experience continues to inform policy positions.

¹² Verbatim survey response (Q: What do you think this Federal Election result means for older South Australians?, Federal Election response survey).

¹³ Verbatim survey response (Q: What do you think this Federal Election result means for older South Australians?, Federal Election response survey).

Section 2. The affordability crisis: Cost-of-living and financial security

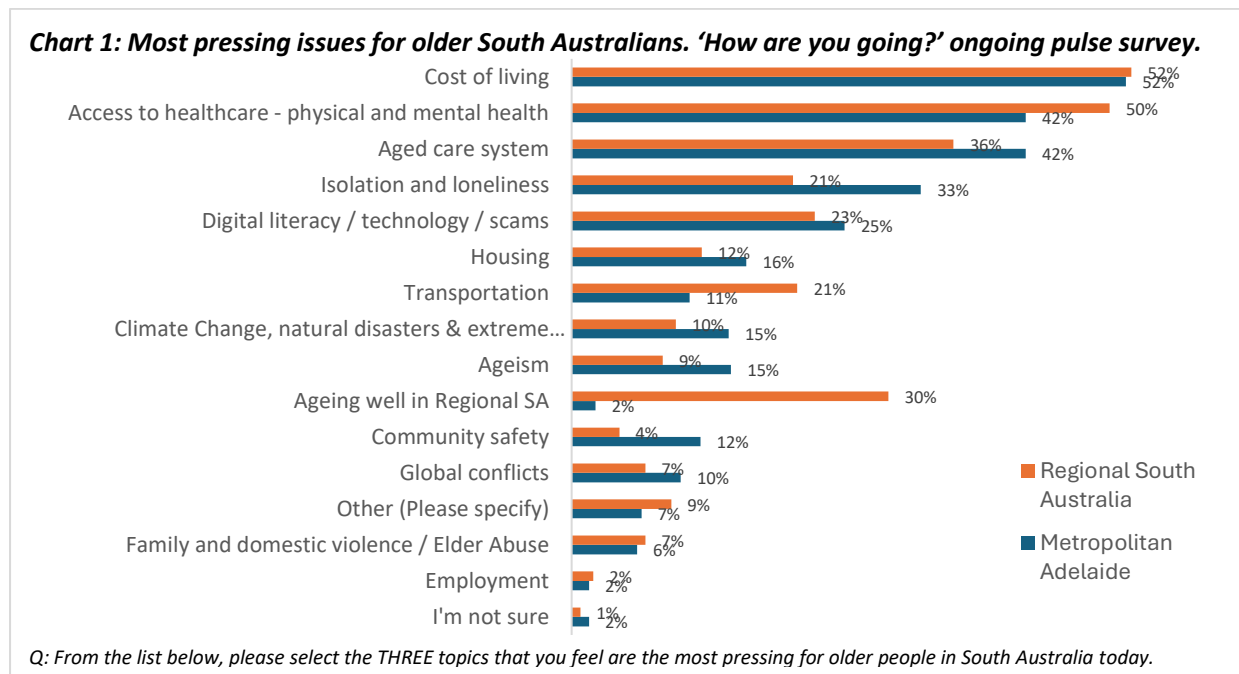
Throughout 2025, COTA SA has consistently heard the cost-of-living struggles that older people are experiencing and the trade-offs they are making just to get by. Older people are not homogenous, and the struggles they face are significantly differentiated based on their age bracket, financial status, and eligibility for support services.

While Australians of all ages may face financial strain, for those aged 50 and over, the challenges are compounded by specific age-related factors, particularly for low-income households and those in insecure housing.

2.1. Cost-of-living as the dominant concern

“The government does not understand pensioners, doesn't understand people on low income... there's no care anymore. And I'm not trying to be negative, but it's a fact - you just can't afford to live. Everything... food... everything's gone up and you can't afford to live.”
(Female, 60 – 64 years)¹⁴

COTA SA’s ongoing ‘How are you going’ survey tracks issues for older people over time, providing a consistent measure of their top concerns. Over an 18-month period, older South Australians in both regional and metropolitan areas have consistently placed ‘cost-of-living’ as their top concern¹⁵ (See Chart 1). Followed by challenges accessing both physical and mental healthcare and navigating the aged care system. Additionally, cost-of-living was identified as the top issue influencing the Federal Election vote for older South Australians.¹⁶



¹⁴ Workshop response (‘Cost-of-living’ targeted workshop)

¹⁵ 52% of survey respondents selected ‘cost-of-living’ as the most pressing issue for them (‘How are you going?’ survey)

¹⁶ 55% of survey respondents selected ‘cost-of-living’ as the issue informing their vote (Federal Election response survey).

In mid-2025, we launched a survey to help us to better understand the financial challenges of older people and what makes these challenges unique and compounding. The survey was completed by 680 older South Australians and paints a bleak picture of reduced disposable income due to higher daily living costs:

- + Almost half (45%) of the respondents suggested that their disposable income has *decreased significantly* over the last 12 months.¹⁷
- + Almost all respondents experienced increases in costs over the past 12 months: 93% reported increased food costs. 83% faced higher energy bills, and 80% paid more for insurance.¹⁸

Survey results also revealed that financial insecurity is directly linked to other aspects of ageing well and living well. 37% of respondents who were financially insecure, reported accessing health care to be difficult. 74% of people reporting poor quality of life and 46% of respondents who felt things were getting worse for older South Australians also reported feeling financially insecure.¹⁹

While the age pension and other income supports are indexed and have seen periodic increases, income (including the age pension) overall has not kept pace with the broader rises in the living costs.

2.2. Adjustments to lifestyle, calculated risks and neglecting basic needs

"We watch our water usage, electricity, food, heating. Sometimes we go without food if we have to. Watching TV, we add more jumpers, more rugs, just to keep warm, because we can't afford to have the heater on in the winter anymore. When it picks up over 35 degrees in summer then we might turn the air-con on, but we can't afford to." (Female, 70 – 74 years old)²⁰

Cost-of-living pressures directly impact the health and wellbeing of older South Australians as financial hardship often results in neglecting basic needs.²¹ For those on fixed or low incomes, there is simply not enough money to cover increases in essentials. The resulting compromises impact health, independence, and social connection: "You start making trade-offs, you have to count your pennies... you have to prioritise your expenses."²²

Nearly half (48%) said they have reduced social activities to save money. Almost as many report cutting back on heating and cooling their homes to reduce energy costs (46%); Still others took action to curtail social spending or reduced what they spent on medical needs or insurances²³ (See Chart 2).

¹⁷ 45% significantly decreased, 42% no change, 13% significantly increased (Q3, State Election engagement survey)

¹⁸ Survey response (Q4, State Election engagement survey)

¹⁹ Survey data (Q6, Q10, Q25 & Q26: State Election engagement survey)

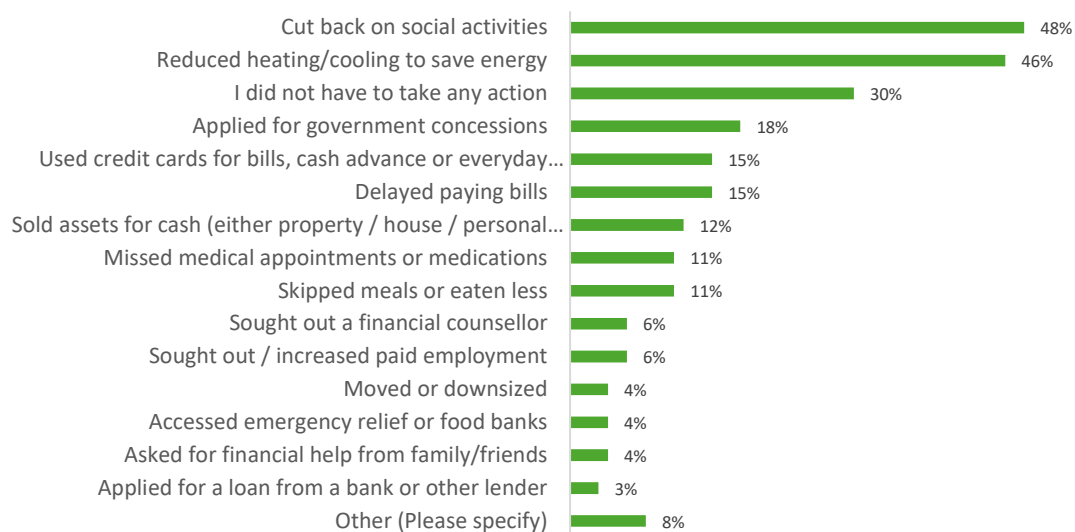
²⁰ Workshop response ('Cost-of-Living' targeted workshop)

²¹ 70% made adjustments to their lifestyle to manage rising expenses. (Q5, State Election Engagement survey)

²² Workshop response ('Cost-of-Living' targeted workshop)

²³ Survey responses (Q5, State Election Engagement survey)

Chart 2: Changes made by older South Australians over last 12 months to manage their finances. State election engagement survey.



Q: Have you had to take any of the following actions in the last 12 months to manage your finances? (Select all that apply)

Through a targeted project exploring cost-of-living challenges, participants shared the impact the “trade-offs” have had on their wellbeing. Socially, the impact is significant as social catchups and memberships are sacrificed to manage tight budgets and connections are lost. The impact of isolation and loneliness on health outcomes is well researched and documented.²⁴

2.3. Hardship is not homogenous: The 'Missing Middle' 50 to 66 and pensioners, 67+

“It's just so upsetting that the government doesn't recognise people as individuals, not everyone's the baby boomers... we're not all in the same boat” (Female, 60-64 years old)²⁵

While older people share common economic pressures, our cost-of-living workshops revealed that the challenges, systemic barriers, and policy gaps faced by those aged 50 to 66 (the “missing middle”) are distinct from those experienced by people aged 67 and over.

For the ‘missing middle’ who face cost-of-living pressures, participants revealed that there are limited resources and supports available. For this age cohort, ageism begins impacting in terms of employment, earning opportunities and securing mortgages. Time taken out of the workforce to support in carer roles also reduces earning capacity and directly impacts annual income and

²⁴ Manera, K. E., B. J. Smith, K. B. Owen, P. Phongsavan, and M. H. Lim, “Psychometric Assessment of Scales for Measuring Loneliness and Social Isolation: An Analysis of the Household, Income and Labour Dynamics in Australia (HILDA) Survey,” *Health and Quality of Life Outcomes* 20 (2022): 40, <https://doi.org/10.1186/s12955-022-01929-3>.

²⁵ Workshop response (State Election engagement workshop)

superannuation. Compounding these factors is the reduced access to support services (such as My Aged Care or NDIS funding).

“I have a disability and [am] unable to work, and I'm raising grandchildren as well, so I feel like I'm just stuck and I don't know how to get out of this financial situation.” (Female, 50-54 years old)²⁶

From pension age, there are differing experiences impacted particularly by home ownership status²⁷. Renters have told us that the housing crisis has led to sharp rent increases which take a significant portion of their pension. Some homeowners receiving the age pension have told us they use the Home Equity Access Scheme to top up their pension income to help them get by. Unexpected events such as increasing health needs, home and car repairs require resourcefulness to manage or are often left unattended due to financial strain. Rent, mortgages and utilities are prioritised over social activities and older people shared they are becoming more socially isolated.

‘Younger older’ South Australians (under 65 years) reported the highest rate of financial insecurity (37%) suggesting that people approaching or just entering retirement may be under more financial pressure, compared with those aged 65–80 years (31%) and over 80 years (24%)²⁸. The lower rates among those aged 65+ reflects the security of being connected into a government system such as the age pension or My Aged Care, or for some, as a result of the safety net of home ownership, or reduced financial obligations later in life.

2.4. Systemic issues in income supports and concessions (navigation and accessibility): A call for simplified, integrated services

There is clear frustration that information, services, concessions, and supports are not centralised and they are difficult to find and apply for. The complexity of systems, like Centrelink and My Aged Care, is often described as a “nightmare”.

A significant barrier is the lack of information about *what* concessions are on offer and *how* to access them. Many find out about available concessions through word of mouth or talking to the “right person” within the system who can direct them to the appropriate support.

“I'd like to comment on the hit and miss nature of finding out... I got an electricity rebate a couple of months ago because I got a nice person on the line. When I enquired, she looked me up. She said ‘Oh, yes, you should have got this ages ago’. Got what? ‘The electricity rebate...’. It was something I hadn't applied for that I should have had in place” (Female, 70 – 74 years old)²⁹

²⁶ Workshop response (‘Cost-of-living’ targeted workshop)

²⁷ South Australian Council of Social Service (SACOSS), *Cost-of-Living Update No. 60: Inflation, Housing and the Cost-of-Living “Crisis,” December Quarter 2024* (Adelaide: SACOSS, 2024), accessed November 19, 2025, <https://sacoss.org.au/wp-content/uploads/2024/12/CoL-Update-60-Crisis.pdf>.

²⁸ Survey response (Q6, State Election engagement survey)

²⁹ Workshop response (‘Cost-of-living’ targeted workshop)

One workshop participant stated that they believe systems "deliberately make it as hard as possible, because if they do that, they don't have to pay out as much".³⁰ This decentralisation and difficulty in navigating information is a missed opportunity for many, who could be accessing relief.

Culturally and Linguistically Diverse (CALD) groups have unique barriers, including language, cultural disconnects, and a lack of interpreters and interpreting services to begin to understand their rights and available services. In our small cost-of-living focused focus group with CALD participants, we learned how significant the information barrier is, particularly for certain cultural groups that may not have well established networks to assist the understanding of available entitlements and support organisations. As one participant shared:

*"Two weeks ago, I sold my gold necklace \$800 to be able to pay my debt. I didn't know of any other options. My first option is to ask people I know to borrow money. One of the people that I borrow money from, they ask for the money back, and I have to sell my necklace".
(Female, 65 – 69 years old)³¹*

These insights highlight the need for centralised information and knowledgeable support workers, such as a navigation-style program to help people more easily access entitled concessions and services through times of financial strain and vulnerability.

2.5. Call to action

- + State Government should address the complexity and accessibility of information regarding available financial concessions. Barriers to accessing concessions creates additional disadvantage and stress for priority populations, particularly when there is a disconnect between State and Federal systems.
- + Older people want recognition of the current cost-of-living challenges they are experiencing. Whilst Government concessions acknowledge the rising cost of essentials (utilities, groceries, insurance costs, rent) for those on fixed or low incomes financial strain directly forces trade-offs in basic needs.
- + For older people struggling with cost-of-living, we recommend contacting the Concessions SA Hotline (1800 307 758) for support to identify and access entitlements.
- + Older people who are on a low income can utilise financial counselling services to access free support and guidance to manage financial concerns - call The National Debt Helpline (1800 007 007).

³⁰ Workshop response (State Election engagement workshop)

³¹ Workshop response with CALD participant, facilitated with an interpreter ('Cost-of-living' targeted workshop)

“What I've learned - you've got to learn to advocate for yourself. One thing that's very important to people which they're not getting is community. People can't afford to go out to see a movie, have coffee with friends, or go out to dinner. So, people's mental health is not good. And so that community is very important, we need it.

And you know, if you have memberships or whatever, you can't do that anymore. You can't, the clubs are charging money. These are important! Advocacy, community and researching and finding out what you can do.

Support is very important, because people are just getting lonely and depressed and don't want to live because they're stuck at home all the time. So that's all I want to say, because this is what I've learned, and this is what I know, community. People need community and aren't getting it. Advocacy, people need it. And to know about the systems, Centrelink and Aged Care. Centrelink and My Aged Care are a nightmare.

I've been more fortunate than others, but that's why I'm very good at knowing what's available, and that people get shocked when I say, oh, yeah, but you can do this, you can do that. It's called lived experience. And a lot of older people, we have lived experience, we should be able to share and help others”

(Female, 60 – 64 years old, 'cost-of-living' workshop)

Section 3: Barriers to health and wellbeing

Despite the intention and supports that exist to enable people to age in place, many older South Australians faced obstacles that felt insurmountable and impacted their ability to take care of their health and to enjoy life.

“I have some health issues that mean that I can't do what I used to do...I am concerned about what will happen as I get older. I have no dependents, a sister who is also elderly. My friends are also elderly and have health issues themselves... I am concerned about what my life will be like when I can no longer drive and am unable to do as much as I do now. I have no one to help me out and would be dependent on aged care carers. I don't want to go into residential aged care...” (Female, 70-74 years old)³²

3.1. Cost as the primary health barrier

For many older South Australians, access to both mental and physical healthcare is an ongoing struggle and a significant issue of concern for both themselves and other older South Australians.³³ Financial hardship acts as a critical compounding barrier to access as it forces sacrifices in preventative, specialist, and emergency medical services. Older South Australians who self-reported as ‘financially insecure’ were almost twice as likely to report finding it very difficult to access health care (43%) compared with those who felt financially secure (24%).³⁴

For those living in regional South Australia, challenges to accessing healthcare are exacerbated by a shortage of GPs and a lack of reliable and available public transport options (see further exploration of regional concerns in Section 4.3).

Across engagement activities, older South Australians agreed that preventative health was crucial as a way of maintaining healthy habits and lifestyle; however, for many, this was widely viewed as underfunded and deprioritised, with participants nostalgic for past community-based health initiatives and calling for their revival. As one workshop participant explained: “I prefer Tai Chi and yoga, but they are so expensive... I can't afford to do those things, and they are the things that make me feel better, enhance my wellbeing and mental health.”³⁵

Older South Australians shared difficulties in accessing health care to address non-emergency related injuries/illnesses with long wait times for public services greatly impacting quality of life and the capacity to continue work. As one participant in her 70's shared:

“[My husband] couldn't go to work with the way his knee was. We couldn't afford private health anymore. He waited three years for a knee replacement! If you've got anything major wrong with you, you're waiting, and you're waiting... well then you can't work every day, you just can't do it.”³⁶

When asked what would make a difference to emergency-related care, a number of older South Australians voiced support for timely alternatives to emergency departments with the concept of

³² Survey response (Q: What is the biggest challenge affecting you right now?, ‘How are you going?’ survey)

³³ ‘Access to healthcare’ was the top concern for 42% of regional participants and for 50% of regional participants (Q: From the list below, please select the THREE topics that you feel are the most pressing for older people in South Australia today, ‘How are you going?’ survey)

³⁴ Survey response (Q6 & Q10, State Election engagement survey)

³⁵ Workshop response (State Election engagement workshop)

³⁶ Workshop response (‘Cost-of-living’ targeted workshop)

Urgent Care Clinics welcomed. For some particularly vulnerable older South Australians, access to emergency care depends on the ability to pay:

“Free ambulance would have been a positive [in the state budget announcement]. A few years ago, I had bad chest pains and didn't call an ambulance for fear of high cost that I knew I could not afford. Luckily a neighbour took me to hospital...” (Male, 80 – 84 years old)³⁷

South Australia remains the last Australian jurisdiction that does not offer free emergency ambulance transport for full age pensioners.

3.2. ‘Ageing in place’ and maintaining a home

We consistently hear of the strong desire for older South Australians to stay in their own homes and communities for as long as they are able. For many, this is viewed as essential for independence, identity, and comfort, but it is increasingly hampered by challenges in maintaining their homes or accessing healthcare where they live – particularly acute for older people living in regional areas.

In workshops focussed on exploring cost-of-living needs, multiple participants shared the challenge of home maintenance costs to support ageing in place. When it comes to prioritising finances, there is little to no support for structural issues which forces private interventions that are unaffordable. A regional participant shared her growing concerns for the future:

“I can't tell you the last time I ever used insurance, but of course, they don't cover the cracks in the walls, or the tiles falling off the bathroom. That maintenance would keep me in my house longer. As my house starts falling down around my ears, there's no way that I'll be able to stay here. They are big expenses.” (Female, 70-74 years old, Mannum)³⁸

Older people highlight major challenges in finding qualified tradespeople, managing long waiting times, and the costs for essential home maintenance. My Aged Care is one pathway older people may follow in order to fund age-related changes to their homes.

Older people living regionally, however, are finding it increasingly difficult to access Support At Home (SAH) services in their local area. Namely, basic necessities for safety, such as installing grab rails, ramps, or performing minor home maintenance, are described as “too hard to get” despite being critical for safety. Given the new Aged Care Act has just been introduced, we may hope this brings improvements in time.

3.3. Call to action

- + Access to targeted preventative health and chronic disease prevention programs, along with affordable wellness activities for healthy ageing should be better funded and promoted. Particularly acute for those in the “missing middle” who do not qualify for MAC funding but are unable to afford private options.
- + For older people who are struggling to maintain their homes, financial counsellors may be able to provide information and advice to assist.

³⁷ Survey response (Q: What was missed or is likely to negatively impact yourself and/or older South Australians in the State Budget?, State Budget response survey)

³⁸ Interview participant (‘Cost-of-living’ targeted interview)

Section 4: The regional disadvantage of ‘ageing well’

With almost one in three South Australians living outside metropolitan Adelaide,³⁹ and with the proportion of older people in these areas growing, some of South Australia’s oldest populations are living on the Fleurieu and Yorke Peninsulas. By and large, older people love these locations, and want to age in place, but they tell us that they are being let down by infrastructure and services.

“It actually costs you more to travel... if I want to go from here to Port Augusta, or down to Port Lincoln, you know, it costs quite a bit in a car with petrol. If you have a concession, you can go down by bus and come back by bus, but you need the time to sit on the bus for six hours and you have to go on the days the buses run, it’s just not convenient. And then, of course, if you get an appointment down in Adelaide, you have to drive down there. Yes, you can get reimbursed for your petrol and your accommodation, but they only pay up to a certain amount, and the same with the cost of the fuel as well. Then you’ve got the wear and tear on your car going down and coming back. You know, it’s just all these little things after a while, they start adding up.” (Male, 60 – 64 years old, Whyalla)⁴⁰

When COTA SA travelled to Yorke and Fleurieu Peninsula in early 2025 as part of the Country Listening Posts, we sought to understand what matters most to older people living in country SA, and what helps or hinders people from ageing well in their community. The conversations we had were wide ranging from joy and connection to deep concerns about services, transport and affordability of life expenses.

4.1. Healthcare and Transport: Inequity of access

“I have a GP, but 99% of my appointments are on the phone, and we have to book them three to six months in advance. If something urgently crops up then you have to pay a fee on the day. And I don’t normally have \$120 for an on the day fee. Three times I’ve had to present to the hospital because my asthma was that bad” (Female, 55 – 59 years old, Millicent)⁴¹

For many older South Australians living in country areas, access to the health care they need is not straightforward, and in some cases, it’s not possible at all. Unique and compounded barriers make access to preventative, routine and urgent care significantly more challenging than in metropolitan areas.

Regional residents express deep frustration over the frequent turnover of GPs, meaning they rarely see the same doctor twice, often forcing them to repeat their medical history over and over. The limited availability of bulk-billing services means that when they are able to see a GP, many struggle to afford the visit. In one example from the Yorke Peninsula, a participant was considering moving to Adelaide so her husband could receive appropriate cancer care due to the lack of local medical resources.

³⁹ Australian Bureau of Statistics, “2021 South Australia, Census All Persons QuickStats,” *Australian Bureau of Statistics*, accessed November 19, 2025, <https://www.abs.gov.au/census/find-census-data/quickstats/2021/4>.

⁴⁰ Interview participant (‘Cost-of-living’ targeted interview)

⁴¹ Interview participant (‘Cost-of-living’ targeted interview)

Transport limitations are another widespread concern in country SA, affecting ability to travel to medical appointments, but also independence and the ability to age in place.

Public transport is often described as rare, infrequent, or non-existent. Our State Election survey found that almost a quarter (25%) of older South Australians residing in country SA reported not having a reliable access to public transport compared to just one in ten of those residing in metropolitan Adelaide. This lack of transport results in older people relying on family and friends for transport, particularly for specialist appointments outside their home communities.

Transport after emergency care was another concern: “If transported to a hospital in Adelaide by helicopter or plane I have no way to get home once released from hospital”.⁴²

While support schemes exist, reimbursement limits within the Patient Assistance Transport Scheme (PATS) mean older people are often still significantly out of pocket. The scheme also excludes residents of the Fleurieu Peninsula, including the City of Victor Harbor the oldest demographic region in the state, leaving many without equitable support for essential travel to medical appointments.

4.2. Digital exclusion

The shift to digital services is leaving some older people behind. Country areas score significantly lower on the Australian Digital Inclusion Index and older people remain among one of the most digitally excluded groups in the country.⁴³ As a state, South Australian “access, affordability and digital ability” sits below the national average and we are the second most digitally excluded state in Australia, after Tasmania, in line with the proportion of older people in each state.⁴⁴

Older people feel “forced into the digital world” as in-person options, such as local bank branches and government support services, disappear.

From our conversations in regional areas, digital literacy emerged as a concern. While some participants expressed frustration with the complexity of new technology, others were more focused on the lack of choice.

These conversations show that while digital access is part of modern life, it cannot come at the expense of inclusion, choice, and support especially for older people who value offline ways of engaging with the world. The ‘Keys to the Digital World’ report from SACOSS,⁴⁵ which COTA SA supported by helping connect with Yorke Peninsula community members, shows that the lack of face-to-face services and shopfronts in regional areas leaves many older people without the help

⁴² Interview response (Regional Listening Posts, Victor Harbor)

⁴³ South Australian Council of Social Service (SACOSS), *Digital Inclusion in South Australia: Regional Data* (Adelaide: SACOSS, 2024), accessed November 19, 2025, https://sacoss.org.au/wp-content/uploads/2024/05/211105-Fact-Sheet_-Digital-Inclusion-in-SA-Regional-Data.pdf.

⁴⁴ Thomas, J., A. McCosker, S. Parkinson, K. Hegarty, D. Featherstone, J. Kennedy, L. Ormond-Parker, K. Morrison, H. Rea, and L. Ganley, *Measuring Australia’s Digital Divide: 2025 Australian Digital Inclusion Index* (Melbourne: ARC Centre of Excellence for Automated Decision-Making and Society, RMIT University, Swinburne University of Technology, and Telstra, 2025).

⁴⁵ South Australian Council of Social Service (SACOSS), *Keys to the Digital World: The Critical Role of Regional Libraries and Community Centres in Building Digital Inclusion* (Adelaide: SACOSS, 2023), accessed November 19, 2025, https://sacoss.org.au/wp-content/uploads/2024/07/Keys_To_The_Digital_World_Final_Report-1-1.pdf.

they need to use technology and telecommunications. In many cases, local councils and community libraries are stepping in to assist, helping people troubleshoot new mobile phones and register for government services like Centrelink.

Without action, this digital divide and exclusion will continue to limit access to essential services like telehealth, online banking, and government information, as well as connections with family, community, and social life.

4.3. Call to action

- + For those older people living regionally: actively contribute to local community groups and networks. This sense of community and connection is vital for enhancing health and wellbeing in regional areas.
- + State and local government to prioritise regional transport as a health issue. Invest in accessible, reliable, and flexible local public and community transport options to address the struggle of attending health appointments.
- + Local and community organisations should continue to provide community-led information programs that address specific regional challenges and increase awareness of available supports including transport options and digital literacy guidance.
- + State government to ensure that public services maintain adequate non-digital and in-person support options to serve people who are digitally excluded or have physical barriers to online interaction.

“It's destroyed me. It's taken away a lot of joy. It's fighting in a system that is not supportive.

I couldn't manage to pay my mortgage off. So, with these interest rates, I've been decimated to the point where, yes, I've had to give a lot up, but I've managed.

I've lost my super.

I have not been able to work.

It's a constant struggle.

Nobody wants to know the challenges of what I'm going through, or that my house is falling down around me.”

(Female, 70-74 years old, State Election Engagement Workshop)

Section 5: Systemic vulnerabilities

At COTA SA, we look for opportunities to fix systems that might make it harder for people to age well, and we recognise that not everyone has the same needs or opportunities. We seek to understand the experiences of people who might be having difficulties and explore ways in which those systems might be made easier.

5.1. The challenge of caring responsibilities

Caring was a major and emotionally charged theme across engagement activities. Carers tell us they feel they provide care without formal recognition or adequate financial safety nets. Many older carers felt their contributions remain undervalued.

The strain on carers is significant, with 38% of older South Australians who responded to our State Election engagement survey currently upholding a caring responsibility. The majority of respondents were caring for their partner or spouse (54%), followed by 32% who were caring for an older person, and 17% who were caring for a younger person.⁴⁶ Only 29% of carers reported feeling supported in their caring responsibility, aligning with the national data showing that carers are three times more likely to experience loneliness than the average Australian.⁴⁷ As one woman who is caring for her adult son shared in a workshop: “If there's one thing that you need when you're a carer, is just that respite is so important, otherwise we will fall in a hole”.⁴⁸

Older carers experience significant financial, emotional, and physical strain, often resulting in losses of income and superannuation. Almost a quarter (21%) of carers that are struggling see that financial assistance would make the biggest difference to them feeling supported in their role. Better information and resources were recognised as essential by both “supported” and “unsupported” older South Australians with caring responsibility (See Chart 3)⁴⁹.

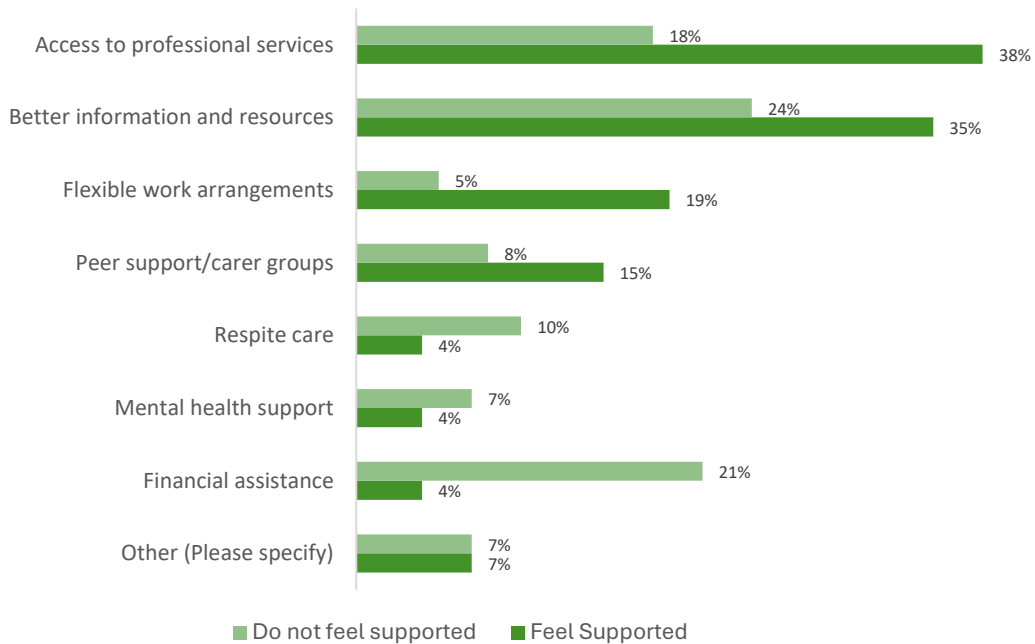
⁴⁶ Survey data (Q21, State Election engagement survey)

⁴⁷ Mylek, M., and J. Schirmer, *Caring for Others and Yourself: Carer Wellbeing Survey 2024 Report* (Canberra: Carers Australia, 2024), prepared by the WellRes Unit, Health Research Institute, University of Canberra.

⁴⁸ Workshop participant (State Election engagement workshop)

⁴⁹ Survey data (Q23, State Election engagement survey)

Chart 3: Key elements deemed necessary by older South Australians to support with caring responsibility. State Election Engagement Survey.



Q22, Q23

5.2. Dementia care has multi-generational impacts and stress

Dementia has just been revealed as the leading cause of death in Australia, overtaking heart disease. Its impacts extend well beyond those living with the condition, with an estimated 1.7 million people involved in the care of someone with dementia, whether partners, parents or other family or community members. The costs to the economy are also significant, with the Australian Institute of Health and Wellbeing suggesting that \$3.7 billion was spent on the diagnosis, treatment and care of people with this condition in 2020-2021.⁵⁰

Dementia Australia data tells us that there are currently more than 35,000 people living with dementia in SA, and that by 2054, that number is likely to be more than 55,600. Two thirds of people with dementia are living in the community.⁵¹ The Australian Institute of Health and Welfare research shows that people living with dementia face discrimination and stigma because of a lack of understanding about the condition. Dementia Australia's research shows it is one of the most feared health conditions, and that this fear is amplified by a lack of understanding about the condition, and negative portrayals in the media.

In 2024, the Commonwealth released the National Dementia Action Plan 2024-2034, providing a national framework for coordinated action across all governments. COTA SA is calling for South

⁵⁰ Australian Institute of Health and Welfare, *Dementia in Australia* (Canberra: AIHW, 2025), accessed November 19, 2025, <https://www.aihw.gov.au/reports/dementia/dementia-in-aus>.

⁵¹ Gill Livingston, Jonathan Huntley, Kathy Y. Liu, Sergi G. Costafreda, Geir Selbæk, Suvarna Alladi, David Ames, et al., "Dementia Prevention, Intervention, and Care: 2024 Report of the Lancet Standing Commission," *The Lancet* 404, no. 10452 (2024): 572–628, [https://doi.org/10.1016/S0140-6736\(24\)01296-0](https://doi.org/10.1016/S0140-6736(24)01296-0).

Australian Action on Brain Health, a state-specific, pragmatic and action orientated approach to the long- and short-term impacts and opportunities.⁵²

5.3. Priority population challenges

As a final note, but definitively not an afterthought, COTA SA wants to acknowledge that specific populations of older South Australians can face compounded challenges.

- + In the ‘cost-of-living’ specific engagement, 35% of participants reported a history of family, domestic, and sexual violence (FDSV), which contributes to compounded financial hardship and health impacts.⁵³
- + 100% of Aboriginal and Torres Strait Islander survey respondents reported reduced disposable income (75% significantly), and 75% felt financially insecure, compared with 29% non-indigenous respondents. These results point to deeper economic pressures linked to structural and historical disadvantage.⁵⁴
- + CALD groups face additional barriers in accessing health care services and in understanding and applying for financial entitlements due to language and difficulty accessing suitable translation services. 38% of respondents who self-identified as CALD reported accessing healthcare to be “very difficult”, compared to 25% of the general population.⁵⁵
- + These insights were echoed in the ‘Cost-of-living’ focus group, supported by a translator, where two Iranian women shared their challenges in accessing information and translation services when interacting with government services and GPs: “Anywhere or anything I want to do, I need an interpreter, which is not always available”. They were unaware of many supports and services that other English-speaking participants had some understanding or knowledge of.⁵⁶
- + Further development is required to fully capture the scope of lived experience for older South Australians from LGBTI+ communities as state-wide data is limited. Rainbow Hub SA represents voices of older LGBTI+ South Australians.⁵⁷ COTA SA champions the work done by Rainbow Hub SA and its advocacy for addressing the systemic disparities and challenges faced by older LGBTI+ South Australians.
- + For LGBTI+ people who are victim-survivors of violence – they are far less likely than the broader population to find support services that meet their distinct needs. Older South Australians who identify as LGBTI+ may experience many barriers to accessing help as victim-survivors of violence that are shared with the general older South Australians including, but

⁵² Australian Government Department of Health and Aged Care, *National Dementia Action Plan 2024–2034* (Canberra: Australian Government, 2024), accessed November 19, 2025, <https://www.health.gov.au/our-work/national-dementia-action-plan>.

⁵³ Workshop and interview participants (‘Cost-of-living’ targeted workshops and interviews)

⁵⁴ Survey data (Q1 & Q2, State Election engagement survey)

⁵⁵ Survey data (Q10, State Election engagement survey)

⁵⁶ Workshop response with CALD participant, facilitated with an interpreter (‘Cost-of-Living’ targeted workshop)

⁵⁷ Find out more about Rainbow Hub SA: <https://rainbowhubsa.com/>

not limited to, the fear of not being believed, shame related to being a ‘victim’ and not recognising behaviours (in particular non-physical forms) of violence or abuse.^{58,59}

We note that in our interactions, we endeavour to employ trauma-informed practice and advocate for all services and supports to work compassionately and with flexibility to meet the diverse needs of older people.

5.4. Call to action

- + Older carers feel undervalued and unrecognised. Supports and services do exist, but these are fragmented. Governments needs to streamline supports to ensure they serve users. This would better enable carers, who are often time-poor, to navigate complex systems.
- + Dementia is now the leading cause of death in Australia. State Government needs to develop comprehensive strategies to complement the National Dementia Action Plan, to support people with the condition and their carers to live well in their communities in South Australia.
- + Health care providers must remove language barriers for older people. Providing easy access to culturally competent interpreter services across healthcare settings and translated information and guidance on financial concessions should be immediate priorities.
- + Governments should collaborate with Aboriginal community organisations to develop and fund programs that directly address the high financial insecurity experienced by older Aboriginal and Torres Strait Islander South Australians.
- + Community and government-funded support services staff must be equipped and trained (in partnership with organisations like Rainbow Hub SA) to meet the distinct needs of older LGBTI+ South Australians, particularly victim-survivors of violence.
- + Older South Australians from priority groups, especially those facing language barriers, can improve their practical knowledge of financial supports and services that could help them, when referred and connected into cultural, community, and peer networks. Government and NGO support organisations should encourage growth of these networks and maintain a register to assist clients.

⁵⁸ Department of Social Services (DSS), *The National Plan to End Violence Against Women and Children 2022–2032* (Canberra: DSS, Australian Government, 2022), accessed November 19, 2025, <https://www.dss.gov.au/national-plan-end-gender-based-violence>.

⁵⁹ Toivonen, C., and C. Backhouse, *National Risk Assessment Principles for Domestic and Family Violence*, ANROWS Insights, 7 (2018).

Section 6: Elevating older voices: A call to action

This report has gathered together the voices of older South Australians to understand the complexities of the challenges they are experiencing in 2025. These insights, heard through COTA SA's engagement activities, provide the evidence needed to shape effective policy and advocacy to better the lives of all South Australians aged 50 and over.

By listening to older people, and understanding their concerns and challenges, we are able to identify what could make a difference to their everyday lives now and in the future. While COTA SA seeks to empower and support older people to be in control of their lives, individuals are limited in the amount of change and improvement they can reasonably effect. Government action is needed to make system change, and action by community organisations can have an impact at a local level.

In this section we help older people, Governments, and community organisations, to apply the learnings from this report so they can take action.

For individuals and older South Australians

- + Lived experience matters. Older people should actively engage in advocacy and participation activities (including surveys, forums) to ensure that their lived experience continues to inform policy positions.
- + For older people struggling with cost-of-living, we recommend contacting the Concessions SA Hotline (1800 307 758) for support to identify and access entitlements.
- + Older people who are on a low income can utilise financial counselling services to access free support and guidance to manage financial concerns - call The National Debt Helpline (1800 007 007).
- + For older people who are struggling to maintain their homes, financial counsellors may be able to provide information and advice to assist.
- + For those older people living regionally: actively contribute to local community groups and networks. This sense of community and connection is vital for enhancing health and wellbeing in regional areas.
- + Older South Australians from priority groups, especially those facing language barriers, can improve their practical knowledge of financial supports and services that could help them, when referred and connected into cultural, community, and peer networks. Government and NGO support organisations should encourage growth of these networks and maintain a register to assist clients.

For State, Local and Federal Government

- + Older people want to be considered, and their needs prioritised with meaningful Government action. Government should consider the unique needs of older South Australians in policy agendas and budget decisions to address the widespread feeling of being forgotten and ignored.

- + Older people are often mentioned in the context of ageing being a negative or a burden. State Government needs to ensure that in all its communications that older people can see themselves and feel included, including in imagery. The Office for Ageing Well has prepared a language guide to assist in eliminating ageist language.⁶⁰
- + Older people want recognition of the current cost-of-living challenges they are experiencing. Whilst Government concessions acknowledge the rising cost of essentials (utilities, groceries, insurance costs, rent) for those on fixed or low incomes financial strain directly forces trade-offs in basic needs.
- + State Government should address the complexity and accessibility of information regarding available financial concessions. Barriers to accessing concessions creates additional disadvantage and stress for priority populations, particularly when there is a disconnect between State and Federal systems.
- + Access to targeted preventative health and chronic disease prevention programs, along with affordable wellness activities for healthy ageing should be better funded and promoted. Particularly acute for those in the “missing middle” who do not qualify for MAC funding but are unable to afford private options.
- + State and local government to prioritise regional transport as a health issue. Invest in accessible, reliable, and flexible local public and community transport options to address the struggle of attending health appointments.
- + State government to ensure that public services maintain adequate non-digital and in-person support options to serve people who are digitally excluded or have physical barriers to online interaction.
- + Older carers feel undervalued and unrecognised. Supports and services do exist, but these are fragmented. Governments need to streamline supports to ensure they serve users. This would better enable carers, who are often time-poor, to navigate complex systems.
- + Dementia is now the leading cause of death in Australia. State Government needs to develop comprehensive strategies to complement the National Dementia Action Plan, to support people with the condition and their carers to live well in their communities in South Australia.
- + Health care providers must remove language barriers for older people. Providing easy access to culturally competent interpreter services across healthcare settings and translated information and guidance on financial concessions should be immediate priorities.
- + Governments should collaborate with Aboriginal community organisations to develop and fund programs that directly address the high financial insecurity experienced by older Aboriginal and Torres Strait Islander South Australians.

For the NGO and Community sector

- + Community organisations play a vital role in sharing advice and insights about the experiences and challenges faced by older people and their communities. This input helps ensure that system changes are informed and effective. COTA SA values collaboration and

⁶⁰ South Australian Department of Human Services, *Age Positive Communication Toolkit* (Adelaide: Government of South Australia), accessed November 19, 2025, https://dhs.sa.gov.au/__data/assets/pdf_file/0009/179964/Age-Positive-Communication-Toolkit-Language-checklist.pdf.

welcomes feedback from other organisations to strengthen its policy and advocacy work. If you are not yet connected with COTA SA, we encourage you to reach out.

- + Local and community organisations should continue to provide community-led information programs that address specific regional challenges and increase awareness of available supports including transport options and digital literacy guidance.
- + Inclusive language is critical to ensuring that older people feel seen and heard. Local and community organisations should consider the representation of older people in all their communications. In addition to the Office for Ageing Well language guide mentioned above, the National Ageing Research Institute has a resource available online.⁶¹
- + Community and government-funded support services staff must be equipped and trained (in partnership with organisations like Rainbow Hub SA) to meet the distinct needs of older LGBTI+ South Australians, particularly victim-survivors of violence.

COTA SA continues to use the information gathered in this report as a rich evidence base for our policy and advocacy activities. You can find more about our work and our submissions to Government by visiting the Policy and Advocacy section of our website.

⁶¹ National Ageing Research Institute. Strategies for combatting ageism through age positive language. Melbourne: National Ageing Research Institute. Accessed November 19, 2025. <https://www.nari.net.au/Handlers/Download.ashx?IDMF=6817e345-ce42-4f05-8510-ed42b124db14..>

Additional resources

Age positive language guide

Drawn from SA Health 'Age Positive Communication Toolkit'.⁶²

Language guide	Example
If possible, use the word 'people' on its own, without age-related qualifiers.	"People in Adelaide told us that they want more opportunities and a variety of access options to easily remain connected with loved ones."
If it is relevant and important to include age-related qualifiers, start with the word 'person' or 'people'. (everyone is a person first, not a condition, an age group or a description).	"People in later life told us that they would like the option to access support to remain living independently at home."
If required, use 'older people' as the preferred general term. (use with caution - be aware that a catch-all description for all older people will almost always be too general)	"Older people in South Australia are contributing as much to society as any other age group."
If you are talking about people who have particular conditions or needs, and mentioning them is relevant, use the phrase 'a person living with...'	"As a person living with dementia, Jane has unique experiences to share in helping to co-design services."

Dementia Australia language guide

'When talking about people with dementia', drawn from Dementia Australia 'Dementia Language Guidelines'.⁶³

People with dementia are individuals first, and their diagnosis should not be regarded or referred to as the defining aspect of their life.

The following terms/phrases are preferred when talking about a person with dementia:

- a person/people with dementia
- a person/people living with dementia
- a person/people with a diagnosis of dementia.

⁶² South Australian Department of Human Services, *Age Positive Communication Toolkit* (Adelaide: Government of South Australia), accessed November 19, 2025, https://dhs.sa.gov.au/__data/assets/pdf_file/0009/179964/Age-Positive-Communication-Toolkit-Language-checklist.pdf.

⁶³ Dementia Australia, *Dementia Language Guidelines* (Canberra: Dementia Australia, 2023), accessed November 19, 2025, <https://www.dementia.org.au/sites/default/files/2023-10/Dementia-language-guidelines.pdf>.

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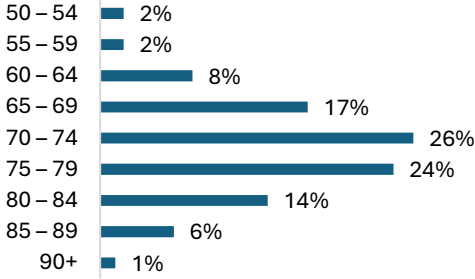
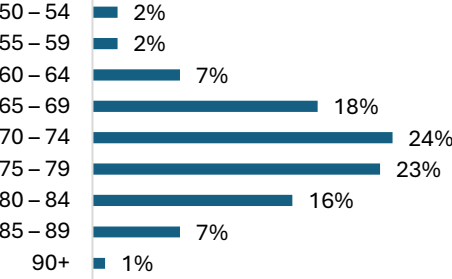
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Appendix

Appendix 1: Demographic data for quantitative activities

Survey	Response rate	Distribution	Data collection	Age	Gender	Priority populations																				
'How are you going' pulse survey	739	Online Mailed to COTA SA 'offline' members Distributed via in-person events	Ongoing: June 2024 – November 2025	<table border="1"> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>50 – 54</td><td>3%</td></tr> <tr><td>55 – 59</td><td>2%</td></tr> <tr><td>60 – 64</td><td>9%</td></tr> <tr><td>65 – 69</td><td>16%</td></tr> <tr><td>70 – 74</td><td>18%</td></tr> <tr><td>75 – 79</td><td>24%</td></tr> <tr><td>80 – 84</td><td>14%</td></tr> <tr><td>85 – 89</td><td>9%</td></tr> <tr><td>90+</td><td>5%</td></tr> </tbody> </table>	Age Group	Percentage	50 – 54	3%	55 – 59	2%	60 – 64	9%	65 – 69	16%	70 – 74	18%	75 – 79	24%	80 – 84	14%	85 – 89	9%	90+	5%	Female: 65% Male: 33% Non-binary or 'Other': 1%	Aboriginal or Torres Strait Islander: 2% CALD: 1% LGBTIQ+: 2% Carer: 3% Mobility challenges, sensory issues or vision impairment: 3%
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State Election engagement survey	680	Online Distributed via in-person events	September – November 2025	<table border="1"> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>50 – 54</td><td>1%</td></tr> <tr><td>55 – 59</td><td>3%</td></tr> <tr><td>60 – 64</td><td>8%</td></tr> <tr><td>65 – 69</td><td>15%</td></tr> <tr><td>70 – 74</td><td>26%</td></tr> <tr><td>75 – 79</td><td>25%</td></tr> <tr><td>80 – 84</td><td>15%</td></tr> <tr><td>85 – 89</td><td>7%</td></tr> <tr><td>90+</td><td>1%</td></tr> </tbody> </table>	Age Group	Percentage	50 – 54	1%	55 – 59	3%	60 – 64	8%	65 – 69	15%	70 – 74	26%	75 – 79	25%	80 – 84	15%	85 – 89	7%	90+	1%	Female: 65% Male: 33% Non-binary or 'Other': 1%	Aboriginal or Torres Strait Islander: 1% CALD: 4% LGBTIQ+: 7% Mobility challenges, sensory issues or vision impairment: 30%
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Federal Election Survey	721	Online	May 2025	 <table border="1"> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>50-54</td><td>2%</td></tr> <tr><td>55-59</td><td>2%</td></tr> <tr><td>60-64</td><td>8%</td></tr> <tr><td>65-69</td><td>17%</td></tr> <tr><td>70-74</td><td>26%</td></tr> <tr><td>75-79</td><td>24%</td></tr> <tr><td>80-84</td><td>14%</td></tr> <tr><td>85-89</td><td>6%</td></tr> <tr><td>90+</td><td>1%</td></tr> </tbody> </table>	Age Group	Percentage	50-54	2%	55-59	2%	60-64	8%	65-69	17%	70-74	26%	75-79	24%	80-84	14%	85-89	6%	90+	1%	<p>Female: 65%</p> <p>Male: 33%</p> <p>Non-binary or 'Other': 1%</p>	Not recorded
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State Budget Survey	102	Online	June 2025	 <table border="1"> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>50-54</td><td>2%</td></tr> <tr><td>55-59</td><td>2%</td></tr> <tr><td>60-64</td><td>7%</td></tr> <tr><td>65-69</td><td>18%</td></tr> <tr><td>70-74</td><td>24%</td></tr> <tr><td>75-79</td><td>23%</td></tr> <tr><td>80-84</td><td>16%</td></tr> <tr><td>85-89</td><td>7%</td></tr> <tr><td>90+</td><td>1%</td></tr> </tbody> </table>	Age Group	Percentage	50-54	2%	55-59	2%	60-64	7%	65-69	18%	70-74	24%	75-79	23%	80-84	16%	85-89	7%	90+	1%	<p>Female: 62%</p> <p>Male: 36%</p> <p>Non-binary or 'Other': 1%</p>	Not recorded
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Appendix 2: Demographic data for qualitative activities

Activity	Number of participants	Data collection period	Locations	Age	Gender	Priority populations																
Country Listening Post conversations	Unspecified	March - April 2025	Moonta Kadina Walleroo Yorketown Victor Harbor Goolwa	Intercept surveys therefore not recorded	Intercept surveys therefore not recorded	Intercept surveys therefore not recorded																
Cost-of-living focussed workshops and interviews	26	April – August 2025	Marion Walkerville CALD group Online regional Interviews: Millicent, Port Pirie, Saddleworth, Mt Barker, Mannum, Whyalla	<table border="1"> <caption>Age Distribution for Cost-of-living focussed workshops and interviews</caption> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>55 – 59</td> <td>6%</td> </tr> <tr> <td>60 – 64</td> <td>17%</td> </tr> <tr> <td>65 – 69</td> <td>17%</td> </tr> <tr> <td>70 – 74</td> <td>33%</td> </tr> <tr> <td>75 – 79</td> <td>22%</td> </tr> <tr> <td>80 – 84</td> <td>6%</td> </tr> </tbody> </table>	Age Group	Percentage	55 – 59	6%	60 – 64	17%	65 – 69	17%	70 – 74	33%	75 – 79	22%	80 – 84	6%	Female: 88% Male 8% Non-binary or 'Other': 4%	Family, Domestic and Sexual Violence (FDSV) - 35% Culturally and linguistically diverse – 8%		
Age Group	Percentage																					
55 – 59	6%																					
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70 – 74	33%																					
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State Election engagement workshops	46	August - September 2025	Morphett Vale Salisbury Online for regional participants (Barossa Valley, Clare Valley, Mount Gambier, Naracoorte, Tanunda, and Victor Harbor)	<table border="1"> <caption>Age Distribution for State Election engagement workshops</caption> <thead> <tr> <th>Age Group</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>50 – 54</td> <td>4%</td> </tr> <tr> <td>55 – 59</td> <td>6%</td> </tr> <tr> <td>60 – 64</td> <td>11%</td> </tr> <tr> <td>65 – 69</td> <td>11%</td> </tr> <tr> <td>70 – 74</td> <td>28%</td> </tr> <tr> <td>75 – 79</td> <td>22%</td> </tr> <tr> <td>80 – 84</td> <td>17%</td> </tr> </tbody> </table>	Age Group	Percentage	50 – 54	4%	55 – 59	6%	60 – 64	11%	65 – 69	11%	70 – 74	28%	75 – 79	22%	80 – 84	17%	Female: 61% Male: 33% Non-binary or 'Other': 6%	LGBTIQ+: 6% Mobility challenges, sensory issues or vision impairment: 28%
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State Election engagement forum	26	September 2025	Victor Harbor	Not recorded	Not recorded	Not recorded																

Appendix 3: State Election engagement survey questionnaire

1. Please select your age group:
 - Under 50
 - 50 - 54
 - 55 - 59
 - 60 - 64
 - 65 - 69
 - 70 - 74
 - 75 - 79
 - 80 - 84
 - 85 - 89
 - 90+

2. Do you live in...?
 - Metropolitan Adelaide
 - Regional/remote/rural South Australia
 - Outside of South Australia
 - Prefer Not to Say

3. On the scale of 1 to 5, which of the following best describes how your disposable income has changed over the last 12 months? *By disposable income we mean, the money you will have left after spending it on necessities like housing, food and fuel and after paying tax.*
 - i. Significantly decreased
 - ii. Slightly decreased
 - iii. Neither increased nor decreased
 - iv. Slightly increased
 - v. Significantly increased

4. Please select which of the following areas you have experienced an increase in costs in the last 12 months (*Select all that apply*)
 - No increase
 - Food/Groceries
 - Energy bills (Gas, Electricity, etc.)
 - Rent/Mortgage
 - Transport/Fuel
 - Healthcare/Medication
 - Social Activities
 - Council Rates
 - Insurance
 - Water bills
 - Strata fees
 - Other (Please specify)

5. Have you had to take any of the following actions in the last 12 months to manage your finances? (*Select all that apply*)
 - I did not have to take any action
 - Reduced heating/cooling to save energy
 - Skipped meals or eaten less
 - Missed medical appointments or medications
 - Delayed paying bills
 - Cut back on social activities
 - Asked for financial help from family/friends
 - Accessed emergency relief or food banks
 - Moved or downsized
 - Sought out/increased paid employment
 - Applied for government concessions
 - Sold assets for cash (either property / house / personal items)
 - Applied for a loan from a bank or other lender
 - Used credit cards for bills, cash advance or everyday needs
 - Other (Please specify)

6. On a scale of 1 to 5, how secure do you feel about your finances (income from all sources and savings) being able to meet your needs currently and looking forward?
 - i. Very insecure
 - ii. Slightly insecure
 - iii. Neither insecure nor secure
 - iv. Slightly secure
 - v. Very secure

7. Are you aware of any cost-of-living concessions (one-off-cost-of-living concession or other household concessions) from the South Australian Government?
- Yes, I am aware but not receiving any concessions
 - Yes, I am aware and I receive concessions
 - No, I am not aware
 - Any additional comments?
8. Are there any additional cost-reduction initiatives or subsidies, or concessions, that you believe the South Australian government should consider that would help alleviate the financial burden of the cost-of-living for older South Australians? *(Optional)*
9. In general, how satisfied are you with the health and medical services you have used in the last year?
- Completely dissatisfied
 - Slightly dissatisfied
 - Neutral
 - Slightly satisfied
 - Completely satisfied
10. How difficult, if at all, is it for you to access the health and medical services you need? This could be due to personal, physical, financial, or any other reasons.
- Extremely convenient
 - Somewhat convenient
 - Neither difficult nor easy
 - Slightly difficult
 - Extremely difficult
11. Which, if any, of the following difficulties do you have in accessing the health and medical services you need? *(Select all that apply)*
- | | |
|---------------------------------------------------------------------|-----------------------------------------------------------|
| <input type="radio"/> I do not experience any difficulties | <input type="radio"/> Telehealth |
| <input type="radio"/> The cost of medicines | <input type="radio"/> The cost of services |
| <input type="radio"/> The distance I have to travel | <input type="radio"/> Lack of suitable services available |
| <input type="radio"/> Concern / embarrassment about asking for help | <input type="radio"/> Cost of or access to transport |
| <input type="radio"/> Technological access to services such as | <input type="radio"/> Public health system wait times |
| | <input type="radio"/> Other <i>(Please specify)</i> |
12. In the past year, which of the following, if any, services have you sought out but been unable to access? *(Select all that apply)*
- | | |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="radio"/> I have been able to access all the services I needed | <input type="radio"/> Emergency surgery |
| <input type="radio"/> Elective (non-emergency) surgery | <input type="radio"/> Hospital care for an acute (i.e. short term) health condition |
| <input type="radio"/> Hospital care for a chronic (i.e. long term) health condition | <input type="radio"/> Podiatry (foot) services |
| <input type="radio"/> A GP or nurse at a medical centre | <input type="radio"/> Optical (eye) services |
| <input type="radio"/> Home visits by GP or nurse (including via Commonwealth Home Support Program) | <input type="radio"/> Hearing services |
| <input type="radio"/> Dental Services | <input type="radio"/> Physiotherapy/occupational therapy |
| | <input type="radio"/> Mental health services |
| | <input type="radio"/> Any other services <i>(Please specify)</i> |
13. What improvements would you like to see made to the South Australian health care system to work better for you personally? *(Optional)*
14. Have you interacted with the aged care system (e.g. My Aged Care, aged care providers and services) in the past year? *(Select all that apply)*
- Yes- for myself
 - Yes- for someone else (family/friend/neighbor)
 - Yes- in a professional capacity

- No
- I am not sure / I don't know

15. What best describes your current housing situation?

- Renting in a private rental
- Renting in public or community housing
- Owner / occupier
- Retirement Village living
- Residential Parks
- Residential aged care facility
- No fixed address
- Others (*Please specify*)

16. Who do you currently live with?

- By yourself
- Dependent children
- Adult children
- Partner / spouse
- One or more parent
- Friend / housemate / student
- Other (*Please specify*)

17. How secure do you feel in your current housing?

- Not secure at all
- Somewhat insecure
- Neither secure nor insecure
- Somewhat secure
- Very secure

18. How much do you agree or disagree with the following statement: "My current living arrangement meets my need as I age".

- Completely disagree
- Somewhat disagree
- Neither agree nor disagree
- Somewhat agree
- Completely agree

19. Do you have reliable access to transport when you need?

- Yes
- No
- Sometimes

20. Are there particular changes that you would like to see what would improve your access to reliable transport? (*Optional*)

21. Do you currently provide care / support to another person in your life? (*Select all that apply*)

- Yes – I care for an older person (someone aged 50+ years or older than me)
- Yes – I care for a younger person (Someone aged <50 years or younger than me)
- Yes – I care for my spouse / partner
- No
- Other (*Please specify*)

22. How supported do you feel in this carer role for the older person in your life?

- Not supported at all
- Somewhat unsupported
- Neutral
- Somewhat supported
- Very supported

23. What are the key supportive elements or what support would make it easier to provide care for the older person in your life (*Select all that apply*)

- Flexible work arrangements
- Access to professional services
- Financial assistance
- Mental health support

- Respite care
- Peer support / carer groups
- Better information and resources
- Other (*Please specify*)

24. Thinking ahead to when you are the same age as the older person you are caring for, where do you think the biggest improvements could be made to support you to age well?

- Social connections
- Financial security
- Housing security
- Transport services
- Healthcare system
- Aged care system
- Community education
- Ageism
- Societal attitudes
- I am not sure
- Other (*Please specify*)

25. How would you rate your overall quality of life at the moment?

- Very poor
- Somewhat poor
- Neither poor nor good
- Somewhat good
- Excellent
- Prefer not to answer

26. Thinking more broadly, do you think things are generally getting better or worse for Australians aged 50+?

- Much worse
- Somewhat worse
- Neither worse nor better
- Somewhat better
- Much better
- Prefer not to answer

27. Which of the following options would have the biggest impact on your ability to age well? (*Select up to three*)

- Secure housing
- Access to local health services
- Affordable energy bills
- Social opportunities
- Adequate pension / support payments
- Access to public transport
- Access to home adaptations
- Access to digital / tech support
- Access to aged care support / services
- Employment / volunteer opportunities
- Access to preventive health programs or services
- Connection to community
- Other (*Please specify*)



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