Medical Research Future Fund's Dementia, Ageing and Aged Care Mission - National Consultation on the Roadmap and Implementation Plan

AAG Response to Consultation Questions

Submitted 23 Apr 2021 via survey available at:
https://consultations.health.gov.au/health-economics-and-research-division/mrff-daac-mission/

1. What is your name?

James Beckford Saunders

2. What is your email address?

If you enter your email address then you will automatically receive an acknowledgement email when you submit your response.

jbeckfordsaunders@aag.asn.au

3. What is your organisation?

Australian Association of Gerontology (AAG)

4. Residential state or territory

(Required)

All states and territories, but survey only let us select one so head-office location of Victoria was chosen.

5. Are the priority areas for investment identified in the Implementation Plan the most effective way for delivering on the Mission's goal and aims? (Max 300 words)

AAG welcomes the focus on a life-course, preventative approach to ageing under Aim 2 and the holistic biopsychosocial approach promoted in Aim 3.

AAG welcomes the shift away from the first Mission Goals related to dementia released for consultation in February 2020 which had a focus on diagnosis to promoting wellbeing and quality of life for those living with dementia.

AAG supports the specific aims that address dementia (aim 1) versus ageing more broadly (aims 2-4). AAG suggests that it should be explicitly stated that aims 2-4 exclude dementia-related research.

Otherwise there is a risk that dementia-related research will be disproportionately funded over other ageing-related research, as has been the case in the past. This is a problem given that:

1. Dementia and ageing are not inextricably linked for all people,
2. There are many other common conditions and diseases that affect older people, and
3. This may lead to a preventative, life-course to healthy ageing in the broadest holistic biopsychosocial sense approach being underfunded.

AAG notes that there tends to only be a focus on preventative life-course approaches in relation to a specific disease or condition, rather than as a holistic model applicable to all older people. The MRFF has an opportunity to address this through funding novel research programs that improve the ageing experience without being disease/condition specific.

AAG supports the language shift from the Mission draft in February 2020 from "end user" or "patient" to "people" and "older people".

The third Aim should be expanded to promote human rights in both the context of particular research investigations and also as a research topic in itself. Potential wording for an additional dot-point under 3.1 could be:

> "identify how the human rights of older people can be protected."

6. Are there existing research activities which could be utilised to contribute to the Dementia, Ageing and Aged Care Mission Roadmap and/or Implementation Plan aims and priority areas for investment? How can these be leveraged? (Max 200 words)

Research at AAG's Collaborating Research Centres:

Aged Dementia Health Education & Research (ADHERe)

Ageing Futures Institute, University of New South Wales

Ageing, Work and Health Research Group, University of Sydney

ARC Centre of Excellence in Population Ageing Research (CEPAR)

Bolton Clarke Research Institute

Centre for Education & Research on Ageing (CERA), University of Sydney/Concord Repatriation General Hospital

Centre for Research on Ageing, Health and Wellbeing (CRAHW), Australian National University

Colloquium for Ageing Perspectives and Spirituality (CAPS), Charles Sturt University, including project "Dementia in the Australian community: beyond the bio-medical paradigm."

Curtin Ageing Research Network (CARN)

Dementia Collaborative Research Centres (DCRCs), UNSW /ANU / QUT

John Richards Centre, Latrobe University

La Trobe University Healthy Ageing Research Group (HARG)

Lincoln Centre for Research on Ageing, Latrobe University

[National Ageing Research Institute (NARI)](#)

[Priority Research Centre for Generational Health & Ageing (RCGHA), University of Newcastle](#)

[Rehabilitation Ageing and Independent Living (RAIL) Research Centre, Monash University](#), including 1. Supporting and enhancing the health and wellbeing of older carers of older people and 2. Implementing and evaluation of physical activity approaches targeting older people with mild balance dysfunction.

[Western Australian Centre for Health & Ageing (WACHA)](#)

[Wicking Dementia Research and Education Centre, University of Tasmania](#)

7. Are the 'Evaluation approach and measures' appropriate for assessing and monitoring progress towards the mission's goal and aims? (Max 200 words)

Overall, focus on "strategies" rather than "tools" as there are many tools available already. "Developing new tools where existing tools do not meet the evaluation needs" could be referenced.

Aim 1 dot-point 3 requires 'quality of life' definition. AAG's Feb 2020 response to the MRFF DAAC Mission notes 'quality of life' is a somewhat vague concept, and it could be helpful to state measures in a way which reflects concepts expressed in WHO definition of 'health' and 'healthy ageing'.

Aim 2 dot-point 2 requires a more specific definition of "healthy life expectancy" to be measurable. For example, are we talking about number of years with no chronic conditions, a reduced number of chronic conditions, or a reduction in activity of daily living the person needs assistance with? See also AAG's Feb 2020 response to the MRFF DAAC Mission which notes more appropriate biopsychosocial definitions of 'health'.

It is unclear if Aim 3 dot-point 1 refers to the adoption of a comprehensive and complete list of key components of high-quality care across the aged care spectrum, or just the adoption of those components identified through the funded research. The latter is a more realistic goal, especially considering dot-point 2.

8. Do you consent to components of your submission being made publicly available? (Required)

 Yes