

Demographics: the Arts and Ageing

The most significant imminent and certain change in the Australian population is the increase in the number of "ageing" or "aged", and their representation as a proportion of the total. This change is so dramatic that it warrants some special attention within this general discussion of demographics.

On past stereotypes, the implication is that a larger number of people, exhausted by a life of hard work, will sink thankfully into lassitude, constrained in any case in their choice for an active life by low fixed incomes of declining real value, and by failing strength and health. For their active leisure, such as it is, they would be satisfied by the occasional game of bowls, cards or bingo. If this stereotype were to be translated into reality as the proportion of ageing people expands, the consequence for the arts is that by 2011 a modest extra 2% (but by 2031 an extra 10%) of the population would move from being young and active to old and inactive and the potential number of arts participants would decline accordingly. If applied also to those in the 50 - 64 year group - and given the large number of early retirees, there are arguments for doing so - the effects begin almost immediately.

There is statistical evidence, cited later in the chapter, that arts attendance rates decline for the population aged 55 or over as compared to younger generations, and fall even more markedly for those aged 65 or more. Whether this pattern will continue in a world undergoing such radical change is open to speculation. There are intimations that it may not. The very fact that more people are living to an advanced age suggests an increase in their health and thus capabilities.

But an increase in physiological capability is not the only determining factor. It may be that the arts consumption patterns of the cohort which will enter the over 65 year age group over the next 15 years, are different - probably more developed - than those of the preceding generation. Whatever they are, will those patterns persist into retirement? Will the release from employment and access to so much free time encourage new types of arts participation? Will early-retiring baby boomers take the initiative to develop new cultural patterns for the aged? How will these affect the general perception of life's possibilities as age advances?

Deciding on the subject group.

In Chapter 4, projections were given for the age cohorts who will be over 65 years and over 80 years in 2011. While the numbers in these categories are of interest, the significance for arts planning purposes really lies in the behaviour of the people within them. We can hypothesise that behaviours change with advancing age, but such changes could be influenced by many other factors, some of which will be considered in this chapter. There are reasons also to look at early retirees, and at the younger cohort that will arrive at the door-step of the ABS's official aged category by 2010.

Perhaps our perceptions of the aged, especially the aged male, are mingled almost inextricably with notions of retirement. Some decades ago, when the official retirement age was not greatly different to the average male life-span, it might have been expected that a retired person would be depleted and infirm. Now that average male life expectancy is 76 years and rising, and the female expectancy some seven years more, a much greater distinction can be made between the concepts "aged" and "retired", and we understand very well the idea of *active* retirement. A retired aged person has the time available to do all those things he or she could not do when obligated to employment. These things might include arts attendance or production.

But is this not also true of a retired younger person? And does not the class, retired younger persons, assume some significance these days with early retirements forced on many workers, opportunities for early retirement taken voluntarily by others, and the possibility under the superannuation scheme to take superannuation as early as 55 years of age?

The publication *Retirement and Retirement Intentions Australia* (ABS Catalogue No. 6238.0, Commonwealth Government Printer, Canberra 1993) reveals some rather astonishing numbers. It reports on the 5.235 million Australians aged 45 and over in 1992 and their history and intentions regarding full time work.

Of this 45 years-plus population, 455,000 (9%) had never worked full time and did not propose to do so. Another 2.8 million (53%) people had retired from full time work.

From the latter group, 1.08 million had retired before the age of 45, and another 1.2 million had retired early, before the official retirement ages of 60 for women and 65 for men. 70% of men had retired before they reached 65. Only 500,000 people had continued to work to the full retirement age. Less than 4% were engaged in part time paid employment after retirement.

Of the 1.975 million still in full time employment, 12% or 235,000 did not intend to retire (4% of the total cohort). 522,000 of the remaining 1.74 million intended to retire early.

So of the total aged cohort of 5.235 million, only 1.526 million (29%) have worked or intend to work until the official retirement age. Put that in your protestant work ethic! And added to those who have been given leisure through achievement of the official retirement age, there were in 1992 another 2.28 million retired people of less than the retirement age (i.e. around 13% of the total Australian population), for whom employment therefore is no impediment to a substantial involvement in the arts.

About half of the men and a quarter of the women who had retired early gave injury or ill health as the reason. Presumably, their health could also constrain their options for other activities during retirement.* More than 20% had "decided not to work any more", and the most common reason given was to have more leisure time. On the other hand, about a third of those who had reached the compulsory retirement age would have liked to continue working, and perhaps would be especially likely to direct their energies in new ways, including arts participation.

While in this chapter special attention will be paid to the aged, conventionally defined, there could be benefit in looking at the "ageing", especially ageing

* This group therefore represents about one half of the entire older population. Curiously, in another study of 277 older people, only 4.8% reported "poor" health, with 30.5% reporting "average" health. (Australian Pensioners and Superannuants Federation (APSF): *Arts and Older People*. Unpublished paper for the Australia Council, 1994. p.7) The study group was self-selected, and so perhaps this result is distorted. Or perhaps people feel more unwell when they think of work.

retirees. Into this group will shortly enter the early guard of the baby boomers, whose proclivities could make a difference to the way old age is lived. They might give a hint in their 50s of their likely activities in their 60s and beyond, beginning around 2010.

A basic precondition: physical well-being

The capacity of the aged population to engage in arts activities will depend on a number of factors, not least their state of physical well-being. What is the situation now, and what developments might be expected by 2010?

It is difficult to draw any conclusion from the high proportion of early retirees blaming injury or ill-health, as to whether they are then incapable of any arts activity. The APSF results were more optimistic, but suggested some physical limitations of age. In addition to the 4.8% of its sample reporting poor health and the 30.5% reporting average health, 42.6% and 19.1% respectively reported good, and excellent, health. (Op. cit) However, many respondents conveyed a sense of caution or frailty, consistent with a sense of good health but also of the limitations imposed by age. For instance, many disliked going out, or driving, at night. They were concerned for their safety, or the physical access to venues, or a lack of companionship on these outings.

APSF surveyed arts attendances in correlation to a self assessment of health as excellent, good, average, or poor. As might be expected, those in poor health attended arts events much less than those in better health, with the exception of the use of libraries. One quarter of those in excellent health attended a dance or ballet performance, but none of those in poor health. Three quarters in excellent health attended the theatre, but only one quarter in poor health. In many categories, a higher percentage of those in poor health attended a category of arts venue or event once or twice in a year than did those in excellent health, but the balance was reversed for frequent attendances. (Ibid, p.32)

The prospects for increasing health

We might suppose that an extended longevity and personal sense of physical well-being are primarily a consequence of medical advances to date, and that continuing medical innovation will bring

further improvements over the next fifteen years. But according to one writer "... there is, surprisingly, little or no evidence that modern doctors, pills or surgery have improved people's overall state of health. The increase in Americans' average life expectancy from 63 years in 1940 to 76 today has been ascribed more to increased wealth, better sanitation, nutrition and housing, and the widespread introduction of the refrigerator than to modern medicine...In 1992 the World Health Organisation (WHO) concluded that the world's population is not getting any healthier. The WHO study showed that people are reporting more frequent and longer-lasting episodes of serious and acute illness than they did 60 years ago". (Alexandra Wyke: "The Future of Medicine," *The Economist*, March 19, 1994, p. 3)

Given the time limits on preparing this study, it is not possible to explore the detail of the WHO discoveries, and its relevance to the Australian population. We might speculate that with a longer average life-span, degenerative diseases associated with old age are more prevalent, and that is a factor in the WHO figures.

Still, there is a growing population living well beyond the age at which death would formerly have been expected. Stiff, but only in the joints, and still able to reach for the price of a book or a theatre ticket. One is not surprised any more to discover people who are active in their 60's much as in their earlier decades, albeit perhaps taking advantage of maturity, accomplishment and the option for "retirement" to redirect their interests or take life at a more relaxed pace. How often has one heard from a retired person "I'm busier and more short of time than ever before"?

Whatever one's experiences of older people now, this study is intended to consider the circumstances fifteen years ahead in 2010. According to Ms. Wyke, on the medical front they will be much changed. Let us outline a few of her predictions, if only because they are so interesting in their own right.

- Better, cheaper health care should be available to the individual, and therefore more broadly accessible, simply because the information revolution will catch up with the medical profession. At present, on the one hand doctors record information on pieces of paper which go into mountainous files which are expensive to maintain, house and access, while on the other there is a vast potential for the assembly and integration on computer of all manner of information about patients and treatments, easily and cheaply stored and above all accessed, searched and, if desired, transmitted across vast distances. Furthermore, software is being developed which will provide computerised diagnostic protocols for self-administration by patients, and at a more complex level, by doctors. These and other interventions by computerised information, management and communications systems will permit enormous cost-savings, at a time when those who pay for health care, from governments to insurers to private patients, are insisting on lower costs and seeking to choose between providers to get demonstrable health outcomes at the best price

- New surgical techniques will widen the possibilities for surgical intervention, and because they are so much less intrusive and abusive of the body, patients will be less traumatised, less prone to side-effects, and able to recover very much more quickly. The need for hospital stays will be greatly reduced or in many cases eliminated, with consequent cost reductions. The procedures themselves often will take much less time, with further cost efficiencies and reduced pressure on doctors. (p.12) (This is not to say that any doctor has been heard to predict that appointments will be kept on time.)

Surgery by knife will be replaced in considerable measure by much less invasive procedures, such as image-guided therapy and robotics. X-ray computerised tomography (CT) and magnetic resonance imaging (MRI) techniques will be used in extraordinarily complex configurations to allow surgeons super-vision below the visible surface of skin or organ, and super-control of surgical instruments; they will be able consequently to operate with great delicacy and precision and minimal invasion of tissue on the path to, and around the surgical target. Other techniques of what is called "trackless" surgery will achieve their ends without touching the body at all, for instance through the use of ultrasound to destroy tumours. (pp.8-11)

Surgical robots are being designed to do surgical tasks with far greater precision than would be possible for the human surgeon - e.g. the hollowing out of a special cavity in the thigh bone to take the prosthesis for a hip replacement - a task handled by the robot 20 times more accurately than could be achieved by hand. "Mini-robots are another possibility. Electric motors less than a millimetre in size, made by etching tiny gears and mechanisms on a silicon crystal, power tiny surgical devices or tractors

bearing cameras. Such a miniature battalion can be swallowed and, when instructed by remote control, perform delicate operations in the gut, eliminating the need for invasive surgery." These devices in fact are being developed here in Australia.

- Genetic engineering is in the process of becoming a major industry. Such is its promise that it is predicted to grow ten-fold by the year 2010 to around US\$100 billion.

There are some 4,000 known disorders each attributable to a single genetic flaw. Most are rare, but some such as cystic fibrosis are common. It will be possible to use genetic screening to identify these flaws before a disorder develops and to intervene to prevent it. Gene therapy will also be used to cure or halt disorders that have already developed.

By 2010, probably the entire structure and function of all the genes in the human genome will be understood. Gene scientists probably will have found therapies for most diseases caused by single gene defects, and in the following few decades most common diseases will also be curable by gene therapy. (p.15) There will also be possibilities in the ethically treacherous area of human genetic engineering to enhance "good" traits in offspring. For instance, a French study of people over 100 years old isolated a number of genes which are seen as related to longevity. If these were administered to increase life-expectancy, the baby-boom bulge could carry through for another 25 years and the implications of the ABS's projections of the expanding number of old people could be multiplied many times over.

In sum, Wyke's study suggests that whether or not there is a further extension of the average life-span, medical advances could assist people increasingly to live into their old age more free of disease and other physical debilitation, whether through preventive or medical treatment. This would enhance their opportunity to live an active life in their 60's and beyond. A higher proportion of the larger number of ageing people could opt for participation in the arts.

The probability of this happening depends not only upon these technological advances, but also on access to health care, and for most people, that in turn will depend upon government health care expenditures.

Public expenditures on health care for older people

Per capita expenditures are higher for older people. In 1989-90, according to Clare and Tulpule (*Australia's Ageing Society*. Economic Planning Advisory Council/Australian Government Publishing Service, Parkes, ACT, 1994, p.35), about one third of public health care expenditure (\$7.1 billion, with another \$2.5 billion in private expenditure) was spent on people aged over 65 years, an amount about equal to that spent on old age pensions (\$8.2 billion), and well beyond their share of the population.

Real health care expenditures per person for the whole population have been increasing at about 1.8% per year since 1975. Of this amount only about one half per cent is accounted for by ageing, so there is a general upward pressure on health expenditures which has yet to be contained by the efficiencies predicted by Wyke. Coupling a general expenditure increase per capita with a projected increase in the aged population as a proportion of the whole population leads Clare and Tulpule to predict an increase in total health care expenditures from \$29 billion in 1989-90 to \$126 billion in 2051. Per capita spending increases from a base of \$1,710, to \$4,150.

The increase in total expenditures to 2011 is not as marked, since, as noted elsewhere, the most dramatic increase in the number of aged comes after 2011. Nevertheless, there is a substantial 1 million increase in the aged population to the year 2011 to 2.92 million, partly accounting for an overall per capita increase in health expenditures from \$1,710 to \$2,330, and a health care expenditure increase of \$10 billion to a total \$39 billion. (Ibid. p. 36) (Clare and Tulpule's book was published before the ABS's recent downwards revision of its population projections, but for this population sector, the discrepancies in the two projections for 2011 are small.)

Clare and Tulpule point to an array of factors which could influence their health expenditure projections. ' Among these are the technological advances which have been responsible for an increase in health spending associated with purchase and operation of very expensive equipment etc., but also in efficiencies such as reduced hospital costs associated with surgery. Wyke was not attempting to quantify expenditures, but her implication that various pressures will combine to contain or reduce costs

are not confirmed in Clare and Tulpule's figures, which presumably have adopted a view about the likely balance of all the various factors.

Accepting the general thrust of their estimates, clearly there could be some constraints on the broad delivery of the array of procedures described by Wyke. They anticipate that the cost pressures will be met by various measures to rein in spending, possibly through decisions about where to apply resources - read restrict services. A lot of money is spent on heroic procedures to prolong the lives of aged people nearing death. It is argued that resources might be better applied to ensuring that life can be lived to the full in the preceding years, as suggested by the slogan of the Gerontological Society of America: "Add life to years, not years to life". (Ibid. p.73) But these are very difficult ethical issues. To withhold such procedures from a person who clearly is choosing life over death is not simply an economic decision.

Place of residence and the availability of the arts

We have decided which age groups are under discussion, and the potential for arts participation arising from probable increased physical well-being of older people in coming years. We now attend briefly to two aspects of the question of where older people will be found, and the needs and opportunities for arts services in those places.

Internal migration.

There is a trend for retirees to move to a) the sunshine, if they live in southern climes or b) the coast, if they live inland. The net internal migration to Queensland and Western Australia is partly explained by this trend. Figures published in *Population Growth and Distribution in Australia* (ABS Catalogue No. 2504.0, 1990) show net interstate migration into Queensland for people 60 years and over of 10,900 people, with net emigration from Victoria and NSW respectively of 7,300 and 4,100. The same states contributed most of the 31,300 net immigration to Queensland by people aged 35-59. Unfortunately, the publication does not provide a further age breakdown. It might be noted that Queensland also gained at a comparable rate across all age categories.

These statistics are themselves ageing, but informal impressions suggest that the trend has continued. The ABS gives figures suggesting high net immigration by older people to a number of NSW coastal centres. The proportion of the NSW population aged over 50 years is 25%. But the percentage in a number of these coastal towns is much higher:

PROPORTION OF POPULATION AGED 50 AND OVER IN CERTAIN NSW COASTAL CENTRES, 1986

Ballina	32.0%
Byron	28.0
Coffs Harbour	26.1
Hastings	34.6
Greater Taree	29.5
Kempsey	27.3
Great Lakes (Port Stephens)	38.7
Shoalhaven	31.7
Bega Valley	28.3
Eurobodalla	35.8

It is said that many of the older Queensland immigrants gravitate to the Gold Coast, and ABS figures show the population aged over 50 counts for 31-32% of the total on the Gold and Sunshine Coasts.

This influx creates particular problems and opportunities in the provision of infrastructure and services. Taking the positive approach, there is a great opportunity for the provision of arts services suited to the interests of such populations.

Special residences for the aged.

With the contraction of the traditional family, there is a growth in provision of special residential facilities for the aged, ranging from retirement estates and "villages" to hostels to nursing homes. With the imminent increase in the ageing population, a proliferation of such facilities can be anticipated.

Among the retirement villages are those in which the accumulated life savings of the middle class or wealthy residents have been put to use. They often are abundantly serviced with recreational facilities, including those for crafts production. Opportunities for professional artists are easily conceivable, for instance in crafts instruction or even residencies, or in touring small theatrical or musical productions of a style and content appealing to the residents. *Prima facie*, these could be financially self-supporting. Similar productions might be taken to less affluent residences and to social facilities such as senior citizens clubs, perhaps with some state subsidy. There are opportunities also for developing special community arts programs for senior citizens. The author once had a part in establishing a senior citizens' theatre company, in which the plays were developed by the participants to elucidate various aspects of life for older people. It was extraordinarily successful in attracting the interest of its intended audience - so much so that the ageing Katherine Hepburn actually joined it for one production, which was shown on San Francisco public television!

For more dependent people in nursing homes, arts therapy has become an important aspect of the social provision. It can be very successful in enriching the lives of people who have lost some of their younger physical or mental competence. We say that the arts are central to life, and nowhere more than in such circumstances can this be so. Arts therapy services are more easily available in some states than others, and some attention might be paid to equalising the opportunities.

Educational attainments of older people

In the previous chapter, it was shown that the educational level of the population is rising rapidly, with higher retention rates in secondary schools and continuing increase in enrolments at tertiary level, and that there is high correlation between attainment of a tertiary qualification and arts participation.

Older people who grew up in times when a tertiary education was more uncommon cannot be assumed to have thrown in the towel educationally. While most of the increase in tertiary enrolments depends on young people, the participation by older age groups has shown a steady increase. It is predicted that the number of tertiary students among those older than 60 years will rise from 3% in 1986 to 10% early in the next century. Those who will be in the aged cohort by 2010 increasingly were seeking additional education in middle age. Between 1977 and 1988 the number of students aged 40 years or over more than doubled, and the number of students aged 30-39 increased by half.

A more informal continuing education is available to older people in Australia through the University of the Third Age. The courses are run entirely by older volunteers and are open only to older people. Fees are minimal, there are no eligibility requirements, the environment is welcoming, and the course offerings are completely flexible. The "University" is flourishing, and is likely to assume even greater importance for older people with the increasingly vocational orientation of TAFE.

Educational level presumably correlates with arts participation by older people as with the population as a whole. However, the author has not seen any statistical study to show whether it remains a dominant factor in a predisposition to arts activity in the face of the physical consequences of ageing. Presumably such a treatment would be possible from figures already available in a number of studies.

Income as the enabler or inhibitor of arts activity

Physical well-being and the availability of arts services affect the level of arts participation by older people. Are there particular considerations concerning the incomes of older people in Australia which could affect their participation in the arts? Chapter Four offered statistical evidence that arts participation varies with income size. Retirement brings a gain in leisure time, but at present, for most people, a loss of income which might be applied to exploit this new freedom. What projections can be made about the income of aged people in 2010? Is there a prospect of higher incomes which could overcome this constraint?

Decreasing dependence on the age pension

In 1990, about 76% of people aged over 65 depended upon government pensions or benefits as their main source of income, receiving on average 90% of the full rate, (Clare and Tulpule, *ibid.* p.49) while the remainder relied on private income, either from their own resources or those of a partner.

From another source, we discover that the proportion of the population of pensionable age receiving an age pension has declined from 85.6% in 1983 to 77.2% in 1993. "This shows that an increasing number of retirees are self-funding their retirement, and indicates the trend to increasing incomes among retired older people." (APSF, p. 20). About 4% were still actively working. Around half of the aged receive the full pension.

The current government policy is to set the pension at or above 25% of male average weekly earnings. This standard was achieved for the first time as recently as 1990. In 1993, the actual level was at about 26%. This formula maintains a relationship of sorts to current living standards.

Perhaps a better indicator of the adequacy of the pension is its relationship to the "Henderson poverty line". Currently, the pension for single people is about 118% of the income set by the Henderson poverty line, and that for married couples is 128%. Nevertheless, after housing costs are taken into account, about 7% of those primarily dependent on the pension were living below the poverty line in 1989-90. At least half the aged population is living close to the poverty line.

It could be noted that the financial predicament of the aged is somewhat ameliorated by their release from various costs faced by younger aged groups. They do not have to cover employment-related expenses, and their children have become self-sufficient,. Over 70% of people aged over 65 own or have equity in their own homes - a fact which probably accounts for a large portion of the estimated \$200 billion in assets of the aged. There are special government provisions to subsidise travel and health care. Therefore the income necessary to continue at the level of comfort when employed is less. However, it is apparent from the above figures that a very large proportion of the aged population depends upon an income barely adequate to sustain it, and discretionary expenditures, including any for arts participation, are hardly conceivable.

To add point to this observation, the actual pension for a married couple in September 1993 was \$263.70 in aggregate per week. Two tickets for the theatre, symphony, opera or even the cinema might be paid for only by food or clothing foregone.

Because of the impending increase in the aged population and the difficulties envisaged in providing for it, coupled with a change in philosophy common among Western governments away from welfarism and towards support for individuals to help themselves, the Australian government has moved to contain the costs of providing for the aged by introducing the mandatory Superannuation Guarantee Charge on employers. For each employee a capital fund is built which will be used as the basis of post-retirement income support.

The superannuation scheme is still young and the effect is slowly cumulative. And indeed, into the medium term, superannuation will not have the effect of reducing the percentage of the population which calls upon the aged pension. However, it will reduce the level of dependence.

Retirement incomes will increase

Modelling undertaken for EPAC has projected future retirement incomes, based on a number of assumptions, including an average 1% increase in real income per worker per year, a continuation of current tax arrangements for superannuation funds, an average 4.5% real return to the funds, and age pensions continuing according to present policy settings. The projections assume also a traditional family structure with the wife earning 67% of the income received by the husband, with each contributing to a superannuation scheme for 30 years and 40 years respectively. Unfortunately for the purposes of this study, the source of these statistics (Clare and Tulpule) gives projections for 2031 and 204 but not for 2011. However, in this instance the trend is perhaps more important - and dependable - than the precise projections.

In 2031-32 a household, in which the principal earner before retirement had a salary equal to average equal earnings, would receive pension payments of only 56% of the maximum rate. Combined with an annuity from superannuation, total income would be 59% of pre-retirement income. These figures improve progressively over time, so that by 2041-2 total income for such a household would be

62% of pre-retirement income. The proportion of household income attributable to the age pension would be 30% in 2031 and 25% in 2041.

"The age pension becomes an instrument for assisting income replacement rather than directed mainly at poverty alleviation. As the 21st century progresses, those households able to benefit significantly from the superannuation scheme are likely to be much better off than today's retirees in relative terms, given that their incomes are likely to be more than half of their income just before retirement." (Ibid p.62) Given the lower expenses of the aged alluded to above, "most such households would be able to have a comfortable lifestyle similar to their pre-retirement lifestyle."

The effects change with the level of pre-retirement income and superannuation contributions, so that the post-retirement income of a household which had earned twice the average weekly earnings will be 48% of the earlier level, with very modest call on the pension. The effects of the scheme thus are progressive. All participants are better off, but the means-tested application of the aged pension has something of an equalising effect.

The benefits from the scheme are tied directly to contributions to it. It applies only to persons in employment, and the longer the period of employment the greater the benefit. The self-employed are covered only by voluntary participation. Many may choose to accumulate assets in other ways, and these assets might be used to support retirement; others may be imprudent and so reach old age entirely dependent upon the aged pension. Since women tend to be a part of the work force for a lesser portion of their lives, and often work only part-time, they would contribute less and receive lesser benefit. These are problems that need to be addressed.

These projections show that the financial means of the aged will improve progressively as the effects of the superannuation scheme are felt. Those not covered by the scheme will not be worse off, and indeed, since pensions are tied to the general standard of living, and this is assumed to be rising at around 1% per year, they might expect to be 17% more comfortable by 2011. Eventually, those whose retirement is covered by superannuation can expect a level of material comfort comparable to that before retirement, and so will have some level of discretionary income which can be applied to explore their new access to free time. There is a potential that these resources can be turned towards arts participation.

Arts attendances by age

Health, educational level, income, the availability of arts services are all predisposing factors for arts participation by older people. What then is known of their present arts attendance patterns?

The ABS has published figures for year 1991 attendances at selected venues for eight categories of cultural activity. (*Attendances at Selected Cultural Venues. Australia, June 1991*. Australian Bureau of Statistics Catalogue No. 4114.0, 1992) (See chart)

PERSONS ATTENDING CULTURAL VENUES/ACTIVITIES BY AGE **12 MONTHS ENDING JUNE 1991**

Age group	Library	Art gallery	Museum	Popular music	Dance	Musical theatre	Theatre	Classical music
18 - 24	43.5	21.7	27.4	53.6	11.8	19.0	17.8	5.8
25 - 34	37.3	23.7	33.9	35.0	11.4	17.5	20.1	6.2
35 - 44	42.9	26.9	37.7	27.6	13.6	22.0	21.2	10.2
45 - 54	31.7	26.2	30.3	22.2	11.6	25.6	18.0	10.2
55 - 64	29.4	24.7	26.1	15.7	10.0	21.0	14.4	9.3
65 plus	30.6	19.0	18.5	9.7	7.1	15.8	11.6	7.7

Accounts for persons attending in each category at least once during the year.

In the ABS presentation, the current 35 - 44 year age group shows the highest participation rate in six of the eight categories of activity. The two categories which escape the norm are popular music concerts, where by far the highest attendances comes from young adults aged 18 - 24, declining rapidly thereafter through all age groups, and music theatre performance, where the ascent in participation rate peaks gently with the next oldest category, the 45 - 54 year-old group. Library participation rates showed a pattern of decline from the early years where there is a high rate of use by students, except for a spike in use for the 35 - 44 year group. Nevertheless, more than half as many again people in the oldest age bracket use libraries as attend any other class of venue or activity: presumably the daytime opening hours are more convenient and the reading itself is mostly done at home.

Age-related interest in some art forms

It seems apparent then that interest in some art forms is strongly age-related. For instance, the most obvious construction to put on the attendance pattern for popular music concerts is that they present an art form a main purpose of which is to bind together and represent to the rest of the world an age group whose members are confronting the task of discovering or building personal identity. As this group passes into its mid-20s, perhaps that task is partly completed, and also therefore the need to assemble *en masse* for mutual confirmation. The participation rate drops by about one third. Of course, most people who will take out a tertiary qualification will do so by the age of 24; perhaps there are other types of maturing which come later in life to those with that advantage.

Classical music possibly is a form to which one tends to come later in life . (This certainly is the writer's personal impression concerning chamber music.) There is a more marked increase from younger age groups to the 35 - 44 year group in attendance at classical music concerts than at other arts events. This activity then persists with less decline through the remainder of life than is the case with other arts, notably excepting library use. Perhaps some of those who no longer attend pops concerts later discover classical music, or feel free to attend classical concerts as, growing older, they escape the disdain of youthful peers (the peer assessment from Hell). Or perhaps there may have been educational and promotional campaigns which somehow reached the current 35-year group but later lost effectiveness.

Peak attendance at music theatre performances comes ten years later in life than for all other categories except library. This might be attributable to the inclusion of opera in the musical theatre category. Opera attendance is expensive, and perhaps more affordable to an older age group, 45 - 54, whose children are less dependent. Now whereas in the other categories participation rates fall from the 35 - 44 to the 45 - 54 age group, classical music participation is sustained at a plateau of 10.2%. Perhaps the opera (i.e. classical music) loving component among the music theatre attendees grows to counter a fall in the number of attendees which could be hypothesised for popular music theatre. On the other hand, perhaps the older music theatre repertoire (*South Pacific, Guys and Dolls* etc.) is attractive to people for whom it was the popular music of their youth.

Participation rates of the baby boomers

To return to the main pattern registered by these attendance figures: the highest participation rate was found generally in the 35 - 44 year group - the baby boom group which will fall into the 55 - 64 year group in year 2010. For the purposes of this study, we should speculate on the reasons for this rate, and whether they are such that we could expect it to be maintained into later life, against the current normal pattern of decline.

Among the reasons for the peak participation rate might be the following:

- this is the age group for which earning power has increased to a level which can provide the discretionary income needed to pay for cultural attendances;
- children of the older members of the cohort have reached an age at which they can assume financial independence, again with the result of parental income newly available to apply to discretionary uses;
- this age group, more than those which preceded it, has a higher percentage of members with tertiary qualifications or advanced schooling
- this age group, for whatever reasons, has a more positive attitude to cultural participation than those which preceded it.

Comparative figures from the USA: the 65-74 yearold group attends most!

The Faucett study in the USA shows that 41% of the total population aged 18 years or more attended at least one of the benchmark activities, but that from these attendees only 20% of those aged 75-96 participated. However, the Multiple Classification Analysis produces an adjusted attendance figure of 35% for this group, and shows that the lower attendance can be "explained" almost entirely by other factors, especially education. The raw figures show the 45-54 year group had the peak attendance rate of 45%, followed by a decline to 40% for 55-64 year group and to 37% for the group aged 65 to 74. However, when all other variables are excluded, the 65-74 group, along with the 18-24 year-olds, has the highest adjusted attendance rate at 44-45%. If this were to apply also in Australia, remembering the higher educational levels of younger generations and the voluntary education now undertaken by older people, there will be a high potential for arts participation among the aged population.

The effect of attitudes: baby-boomers and new concepts of old age

Futurists distinguish between probable and possible futures. For some futurists the probable is a pale creature compared to the possible, the desirable. Their view is that we should fantasise a preferred future and then set about creating it. In this scenario the probable might be an assistance, but almost by definition it will also define obstacles to be overcome on the way to the preferred.

On one view, the baby-boom generation saw beyond the received wisdom of the previous generation to its own preferred future and set about engendering broad social change. Boomers grew up in post-War peace and affluence and were not afflicted by the loss of courage which can follow economic disaster. They gained access to tertiary education with ease and in numbers never before seen. Whatever the retrospective reservations about those years, and if it is possible to generalise about a generation, it was that generation which fought for civil rights, opposed the Vietnam War, empowered feminism, decriminalised homosexuality and produced the popular music which thirty years or more later still takes a large part of commercial radio time.

In 2010, the oldest of the baby boomers will be approaching 65, and most will be over 50. On present indications, many baby boomers will have been forced out of work before the usual retirement age. Others, successful financially, or perhaps independently of their financial circumstances, may well choose retirement from regular employment to follow other life goals. Their view of life at 50, 60, 70 may again breach old customs and constraints and build a different expectation.

The task, style and opportunities of life for older people have long been at issue. The establishment of Senior Citizens Centres in Australia, the emergence of the Grey Panthers and the Grey Power movement, the writings of psychologists such as Erik Erikson, and more popular books such as Gail Sheehy's *Passages* (1974) all are evidence of concern over recent decades with the position of ageing people in society and the impediments and opportunities in their personal lives. Of course, such matters also are implicit from much earlier times in the special roles assigned to the elders in traditional societies. If there is a new development in this area, it is the persuasive force being brought to bear by proselytising writers like Germaine Greer and Betty Friedan - and the possibility that their target audience, more than its predecessors, may be inclined by its history, numbers and wealth to hear the message and take action.

Friedan, now in her sixties, might be regarded as a sort of advance party for the baby-boomers. In 1994 she visited Australia to promote her new book, *The Fountain of Age* (London: Jonathon Cape 1993). Friedan rails against the defeatist stereotype of old age. She sees old age as a time in life which carries its own psychic and social tasks and values.

She recounts the findings of Margaret Clark, of the Langley Porter Neuropsychiatric Institute in San Francisco, who interviewed eighty people over the age of sixty, half of whom had not had any treatment for mental or emotional problems in their lives, and the other half of whom had been institutionalised for psychiatric disorders after the age of 60. "The self-esteem of the healthy older group seemed linked to 'the fruitfulness of a search for meaning in one's life in the later years,' as compared to the mentally ill, who were still pursuing the values of their youth. The healthy group had 'a broader perspective, which they call by different names: wisdom, maturity, peacefulness, or mellowing. They feel released and freed in some basic sense from earlier social imperatives. The mentally ill group are still driven to compete; ambition is a central value, and failure to achieve leads to self-recrimination.'

The healthy people 'were able to substitute a new set of achievable gratifications and sources of pride to replace old ones which were no longer available to them.' The mentally ill sample, on the other hand, failed to perceive alternatives, which left them with merely a retrospective or deteriorative view of the self.'" (Ibid, p.84)

Australian society endorses the values and motivations of youth. The middle managers fired from their jobs in their 50's while younger people are retained, are likely to find themselves in that position through the action of a decision-maker even older than they. Our aged are not respected and given a place as wise elders, perhaps even by each other.

Their lagging currency with new knowledge and technology as elements of economic power and influence leave many older people at a disadvantage with the young, lean and hungry. While they may be handicapped by their newly outmoded practices or indeed, their own inflexibility, older people are not acknowledged for success in embodying the values of the elder. Society generally does not seek to take advantage of these qualities, but relegates the aged to its periphery for failing the values of youth. Even continuing competence and accomplishment may be irrelevant; one can be guilty by reason of chronological age. (Poetic justice awaiting the baby boomers, who once never trusted anyone over 30.) A feature writer in *The Australian* in April 1994 berated the baby boomers for hanging on to their jobs during the recession, instead of stepping aside for the frustrated jobless of Generation X. Only in their 40's and 50s, they were already "past it", their duty to fall politely on their swords and drop from sight.

Margaret Clark's "sane"/"insane" methodology produces a rather polarised picture. But it does suggest that to force upon the ageing a requirement to maintain the motivations of an earlier age can be so inappropriate to their nature as to cause serious dysfunction. They have a different task.

Says Friedan in her book: "Just as in their 'late style' artists and scientists, creators and great thinkers seem to move beyond the tumult and discord, distracting details and seemingly irreconcilable difference, to unifying principles that give new meaning to what has gone before and presage the agenda for the next generation, so it seems to me age can free us all, personally - and our aging society politically - to a new wholeness, previewing in the serious or the seemingly irrelevant efforts of our late years new dimensions of life for the next generation. It's as if we need to break out of the very rubrics of our previous thinking about both love and work ... It's as if, both personally and politically, we have to move beyond concepts of life hinged to the childhood fantasies, traumas, and sexual obsession of which we have seemd to be helpless victims ... to a new wholeness of approach." (Ibid, p.589)

Well, it might be said, this is only a book. How can it change the living style of a generation? But Betty Friedan is not the only singer of this song, and judging by book sales and public notice, there is an audience. No doubt change is engendered by the broad conditions of a culture, but it can only be hastened, eased, by the public articulation of the possibilities - or description of the actualities, depending on one's view of the process. (See Perls' "paradoxical theory of change", Chapter 9) The baby boomers will not be interested merely in the ideas. It is their lives which will be at stake, just as they were twenty and thirty years ago when their leaders articulated the arguments against the Vietnam War or for feminism. But now, changes they envisage can be supported not only by their political and personal convictions but also by their accumulated wealth and their power as a large, and in due course aged, voting block.

In April 1994, there was an article in the magazine section of *The Australian* titled "The Baby Boomers of 1994". The writers, Mike Safe and Mark Whittaker, seemed either to be marketing specialists or very much influenced by the marketing world view. While there is much to dislike in this approach, one thing can be said about marketing people: their mistakes are going to cost someone a lot of money, and it is very much in their interests to get it right. We conclude this chapter with two quotes from that article.

"..The boomers want balance... Their state (is) like a pendulum that is now half way between the conservatism of the fifties that they once rejected outright and the excesses of the eighties that they have also left behind...(I)t will continue to hover about where it now is and that the generation will be an agent of change in society...This does not mean that they are suddenly going to put their feet up and sink into old age: They're still motivated, they're not slacking off into the slippers and cardigan set. They're people who do things...They do not see themselves as being old...They haven't given up on youth. ...the baby boomers have made 40 fashionable. They will only start to see themselves as old

when their bodies won't let them think otherwise. Then they'll admit it." (Malcolm Rankin, quoted on p.16)

"If you think the current over-50's are a bit more willing to stand up and say 'Hey, pay attention to me', well just imagine what will happen when your classical baby boomers get over 50 and start to feel ignored because they're supposed to be past it. They're not going to take it, certainly not quietly and lying down. They've never taken anything quietly and lying down and they're not going to start just because they turn 50, or even 60. They're going to stay noisy. And when they've got time again and spare money -- they're going to re-engage and if I knew what they are going to re-engage with I could make a lot of money out of it." (Don Porritt, p. 18) Onya Don.

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