



Caring Futures Institute Launch – Judith Leeson AM Speech

Ministers, distinguished guests, and friends.

For the past 65 years I have been a practical evangelist for caring communities focussing on early childhood, disability, and career development, serving people who are vulnerable, marginalised, and disadvantaged.

An experienced teacher, I graduated as a mature age student from Flinders University in 1984 while concurrently lecturing, and directing an on-campus, early intervention program, partnering with parents of children with Down Syndrome.

Flinders University, then, as now, encouraged innovation, creativity and community engagement, and has been a powerful agent for change since its establishment.

If any organisation can provide a catalyst for positive change in community perception and practice for our aging population through a new research institute, it is Flinders University.

The words "Caring" and "Community" prompted me to make a checklist for my own future support and any eventual acceptance into what society euphemistically calls 'aged care', and for brevity I have decided to focus on the c-words.

So, this is my personal manifesto, whether I am in an acute hospital ward, visiting my GP, going to live in a residential care home or ideally continuing to live at home supported by the care I need and value.

Compassion – I will thrive with your unconditional acceptance of me as a unique human being, with a rich history of love and loss, relationships, learning (formal and informal), paid and unpaid work, leisure, interests, achievements and experience. I am not "tabula rasa".

Collaboration – please work with me in partnership to explore my goals, extend my capabilities, and continue to maintain my independence. We are a team, and you will gain immense satisfaction as a facilitator when I achieve mastery.

Co-operation – this is a joint effort, and you will ensure that I retain some control through consultation, intervening tactfully and respectfully when I express my preferences, or need assistance.

Communication – you will promote my sense of being valued and not being judged through deep listening, respectful responses, and insightful language.

Creativity – use your lateral thinking skills to apply evidence-based solutions to my dilemmas and acknowledge that I can still be part of the process. Be mindful that crass commercialism is no substitute for person-centred solutions.

Credibility – invest in your ongoing learning, access to research evidence, development of competence, and remember at all stages of our interaction that I could be you, so treat me with kindness.

Challenge – reinforce my ability to accept challenges, and assist me to develop strategies to overcome barriers of perception and stereotype.

Choice – over my lifetime I have made hundreds of thousands of considered choices and also been responsible for the consequences. Please allow me the dignity of choice in my care and daily living experiences – what I wear, what I eat, and when, how I spend my day, and when I go to bed, as these decisions reflect my values, my preferences, my life-long choices, and my source of satisfaction.

These significant dimensions reflect some of the elements of person-centred care delivered by exemplary professional health and social care-workers. Sadly, It's pretty invisible in most of our public systems; paid lip-service in many policy documents; and referred to sparingly by politicians (they are much more interested in the financial bottom-line health dollar). Surely, if everyone in this room is able to commit to the investment in 'caring futures', we can transform our health and social care-systems, and the lives of our communities.

And this is the mission of the Caring Futures Institute.

I am very committed to this initiative and I've already volunteered to be part of their research activity. I hope everyone else here is as excited as I am about how we can be a united force for valuing and improving ourselves and our communities through understanding caring better.

And now I want to finish with a short story about myself:

I am aware that older citizens are often invisible, undervalued, and stereotyped. Recently I had an accident that resulted in a depressed fracture of my left eye socket. Most responses to the obvious bruising were couched in sepulchral tones – did you have a fall, dear?

My reply was: "No, I had an accident and fell over the dog, and my name is not "dear". Can you imagine questioning an AFL footballer in those terms?

I am too am a warrior, and demand respect for myself and my fellow elders.

Thank you.