Investigating the over-representation of older persons in Do-It-Yourself home maintenance injury and barriers to prevention.

by
Karen Ashby, Barbara Fox, Joan Ozanne-Smith, Chris Brennan and Johannes Wenzel

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EXECUTIVE SUMMARY

Background

Current Government policy encourages older people to live independently in their homes as long as possible, however, maintaining one’s home can place an older person at risk of injury. The choices for home-owners when faced with a maintenance task are to employ someone to do the task for them, to ask for assistance from family or friends, or to ‘Do-It-Yourself’ (DIY) which literally means undertaking the activity themselves. DIY tasks in relation to home maintenance can range from seemingly simple tasks such as changing light globes, washing windows, gardening and lawn mowing, to more complex or demanding tasks such as roofing repairs, gutter cleaning, carpentry or renovations.

Each year in Victoria there are an average of 8 deaths, 165 hospitalisations and at least 678 emergency department presentations among older Victorians from DIY home maintenance injury (Ashby and Fox, 2003). DIY related incidents account for 1% of all unintentional injury deaths and admissions and some 3% of emergency department presentations in this age group. Persons aged 60 years and older represent 58% of deaths and 42% of hospital admissions for Do-It-Yourself (DIY) home maintenance injury in Victoria, compared with 26% and 28% respectively for all cause injury deaths and hospital admissions. Older persons are represented prominently in ladder related DIY home maintenance injuries at all levels of severity, as well as gardening and saw related injury hospital admissions. Rising trends of injury rates among older people suggest that these rates will increase further as the population ages.

Existing DIY home maintenance injury prevention solutions strongly emphasise use of personal protective equipment and ensuring safe and appropriate work practices are undertaken. Such solutions are valuable in addressing the range of eye and hand injuries observed in younger persons. However, their applicability to the circumstances under which older persons are injured during DIY home maintenance tasks is less clear. Surveillance data shows that DIY home maintenance injury patterns vary with age. Anecdotal evidence suggests that the reasons why older persons undertake DIY home maintenance activity also differ and, if the scope of the problem differs, so too may the solution.

This report represents the findings from the first Australian study to investigate why older persons undertake high-risk DIY maintenance activities, to determine what would constitute a low-risk alternative and to determine whether these alternatives are feasible and acceptable.

Methods

The qualitative study involved 118 persons (52 male and 66 females) aged 60 years and older, who either reside or participate in local seniors groups in the Cities on Monash and Greater Dandenong, or received treatment for a home maintenance injury at Monash Medical Centre or Dandenong Hospital in the 18-months prior to the study. Focus group methodology was chosen as it allows the capture of a range of experiences, attitudes and opinions within the population of interest. Fifteen focus groups were conducted between November 2004 and March 2005. A themed question list consisting of 14 pre-tested, open-ended questions sought to elicit responses that covered the following topics:

- What type of activities do you undertake and how frequently?
- How fit do you feel to undertake tasks?
- Have you been injured doing home maintenance in the past and what were the repercussions of an injury?
- Why do you undertake DIY?
- What would make you stop doing DIY?
- Do family and friends assist with DIY?
- Would you be willing to pay for assistance with home maintenance?
• Where would you look for assistance with home maintenance?
• What DIY alternative services have you used and have you been satisfied with the service?
• What are the most important factors in choosing an alternative to DIY?
• What is your best alternative to DIY?

Summary of key findings

Why older persons undertake high-risk DIY maintenance activities?

DIY home maintenance is not without benefit for older persons. Many of the focus group participants in this study reported feelings of pride and satisfaction in having done tasks themselves. In addition, some participants reported using DIY to keep fit. However, as people age and health problems and functional impairments accumulate, the efforts involved in household maintenance becomes greater and more burdensome. Participants in this study reported that the types of DIY they still undertake include gutter cleaning, lawn mowing, gardening, toy making, changing light bulbs, painting, carpentry, chopping firewood, repairing structures such as the verandah, pruning and car maintenance.

Working from heights, such as on a ladder, becomes more dangerous as persons age due to reduced flexibility, mobility and reaction time, and poorer balance. Our study participants also reported that the jobs that had become most difficult were those that required them to work from a height eg. cleaning guttering or roof maintenance, usually involving ladders. Despite how challenging some tasks have become there are factors: lessening physical abilities; limited access to, and uncertainty of, DIY alternatives; and restrictions on the ability to pay for expensive assistance, that mean that some older Victorians continue to engage in unsafe DIY practices as a means of continuing to manage their home repairs/maintenance.

The question “Why do you undertake DIY?”, revealed four classes of focus group participants, distinguishable mainly by their attitudes to doing DIY. There were a group who were keen to do DIY for as long as they were able and were resistant, even defensive, to any suggestions that they should cease DIY activity just because they were “older”. Members of this group were often men who were ex-tradesmen, or had a background in a safety related field. Another group may have lacked the formal experience of these men but were no less keen to undertake DIY as a means of maintaining their independence and fitness. A third group were still keen to do what they could, but were realising that health concerns, age related deteriorations and size of their properties were factors that were impeding or effecting their ability to continue to do DIY. Lastly, there was a group who had simply become unable to undertake their own DIY.

Participants were encouraged to think of their DIY in terms of a sliding scale from ‘choice’ or ‘necessity’. Some saw DIY as a simple choice, based on one’s own assessment of ability to do the specific task at hand. If the task was within their capabilities then they would give it a go, conversely, if it were out of their expertise e.g. electrical repairs, they used a tradesperson. For those who mainly saw their DIY activity as a choice, the pride/satisfaction and enjoyment gained from DIY and the fitness offered by DIY were the main reasons for doing DIY. For others DIY was a necessity, mostly because the alternatives are too costly. Most retirees find themselves on fixed incomes or pensions, an actuality that may result in real, or perceived, financial barriers to undertaking even minimal home safety improvements when an outside service provider is required. Focus group participants expressed that budgeting to fit all required maintenance jobs into a limited incomes means that older persons may be forced to tackle maintenance jobs that they may not be able to do.

There comes a time when even the most competent DIY’er becomes unable to complete jobs that were previously accessible. Participants in this study suggested that the catalysts that would make them give up DIY were associated with: fear of injury or physical consequence of doing too much; changes in balance, stability and strength; slowing of reaction times; increasing frailness; lack of confidence in
their own ability; decreases in eyesight; increased consequence of medical conditions, including increased medications; and just plain commonsense. At the time of this realisation, an acceptable alternative to DIY needs to sought and accepted.

**What would constitute a low-risk alternative to DIY?**

We asked participants to consider their alternatives to DIY and to share with us where they would look for an alternative and what factors would help them choose a service provider. There were a number of avenues identified for sourcing DIY alternatives; the most common sources were the council, local papers, recommended trades/handymen, and family, friends or neighbours.

The council was a commonly identified source of assistance with home maintenance among both HACC service users and non-HACC user groups. Most HACC service users were happy with the jobs that had been provided by council and that services were reasonably priced. Non-HACC services users had mixed reactions to the usefulness of council in providing assistance with the range of DIY alternatives they may require, however their knowledge of the range of services provided may be limited and based on assumption, rather than experience.

Participants in almost all 15 focus groups were universal in suggesting that the best way to find a skilled and reliable trades/handyperson was by word of mouth recommendation. The notion that a trades/handyperson had been recommended by someone they knew or trusted reassured many of the participants regarding the reliability, honesty and experience of the trades or handyperson. The alternative, if no recommendation could be made, was to use the local paper as a means of finding a tradesman to do a maintenance job. Some had positive experiences using trades or handymen who advertised locally, while others were more sceptical about picking a random tradesperson from an advertisement.

Family, friends or neighbours were commonly raised as DIY alternatives. However, there was mixed enthusiasm for the practicalities of using these unpaid alternatives to DIY versus a paid service provider. Some of the participants in this study were fortunate to have family either nearby who could help, could come quickly when they needed the assistance, or made dedicated time to assist. Others received the same sort of assistance from neighbours and friends, sometimes in lieu of family who do not live in close proximity. Even when this help was available there were some seniors who were disinclined to use it. Reasons for resisting this voluntary help included: a willingness to still do DIY; doubts in helper’s capabilities; inability or unwillingness to wait till the help can be provided; difficulty in negotiating the tasks they want done; and not wanting to be a burden on children who are busy with their own families. Other seniors in our focus groups found themselves unable to access this type of voluntary assistance, commonly because they did not have any family, their family didn’t live in close proximity or they were the youngest members of their neighbourhoods or circle of friends.

After finding out where participants may go to seek alternatives to DIY we then asked them to share what factors were most important to their decisions on whom to choose to provide an alternative to DIY. The main factors that influenced these choice were associated with: cost, including risk of being overcharged; reliability in terms of finding someone to both do the task at hand and to do a good job; security, especially for vulnerable older persons living alone; recommendation from another source; and the general approach of the trades/handy person.

Choosing a tradesperson is price sensitive. “Cost is everything” was a common catchcry among the older persons who took part in this study. Participants relayed fears among the older community that they may be vulnerable to being overcharged for maintenance jobs by commercial service providers. Small jobs in particular, when it may be hard to find a trades/handyperson, may be particularly susceptible to overcharging as the service provider inflates the quote for a job they do not really want. Finding a reliable tradesperson and trusting that they are willing and able to do the required job was a factor of vital importance to our participants.
Are these DIY alternatives feasible and acceptable?

There are a number of available avenues through which older community dwelling Victorians can access home maintenance services as an alternative to DIY. Government services, local council programs, private providers and self-employed small businesses all offer a variety of home maintenance services. We asked focus group participants to consider both the services they already know, and come up with new ideas for their ideal DIY alternatives. We took the ten main suggestions from this ‘think tank’ and considered the advantages and disadvantages of each. We also assessed each for how feasible they are i.e. how would they work in reality, as a good suggestion may not be feasible due to high cost or lack of resources. Similarly, we assessed each suggestion against how acceptable we thought the focus group participants would find them, based both directly on focus group discussions and our own impressions from the sense of the groups.

The most feasible alternatives were family/friends’ assistance, recommendation of trades/handy persons by family/friends, local advertising and HACC program services.

There were several new or novel options that were highly acceptable to focus group participants, however in reality they may not be feasible as they may be resource intensive and administratively complex. Two suggestions, a volunteer force of retired tradespersons, and a council run advisory service to recommend trades/handypersons were highly desirable but not currently in existence.

Advice was perhaps the most valuable commodity sought by our older participants. Advice on what maintenance is required, advice on finding a reliable tradespersons, and advice on what to do when they were not happy with a service received. We found evidence of models of advisory services currently running in Victoria to address each of these needs. However, the issue for each seems not the availability or feasibility of these advisory services but the general community’s lack of knowledge and hence use and uptake.

Therefore knowledge, or lack thereof, appears to be a significant impediment to preventing DIY injury, or accessing DIY alternatives. Focus group participants sought information more than anything else on how to prevent injury and information on available DIY alternatives.

Three valuable pieces of knowledge could assist the older community to either continue to conduct DIY at a reduced risk, or find suitable DIY alternatives. Firstly, seniors need to be provided with more information on high-risk DIY activity and scenarios so they can use this information to avoid riskier activities. Secondly, they should be made aware by doctors of the implications of medications on their ability to work at a height, or operate powered equipment. Thirdly, they should receive information on suitable DIY alternatives.

Recommendations

Intervention and practice

- General practitioners or other health care providers should be made aware of the risks and pass on information about the implications of medications or health related declines to older patients and discuss how their medical conditions may place them at an increased risk of injury.

- Councils could consider information sessions for older constituents, via existing networks, where the profile of DIY safety could be raised and DIY alternatives could be discussed.

- Local councils could improve older householders knowledge of available services including: services offered; eligibility criteria; cost; and application procedures.
• Local councils could survey older residents to determine what DIY home maintenance needs are strongest and consider these results against the maintenance services they currently provide.

• Private service providers could offer themselves as specialists in “seniors” jobs and offer price and security sensitive services.

• Better advertisement of existing schemes such as the Archicentre Home Services Reports is warranted due to the low level of knowledge among study participants.

• All services providers should wear readily validated security information and identify themselves to allay fears of seniors using a DIY alternative.

**Information dissemination and implementation of findings**

• Disseminate the study results to relevant state government departments, local government, HACC service providers, other relevant services and industries.

• Disseminate the findings from this study into existing seniors groups and the broader seniors community.

• Conduct a forum of stakeholders in this issue to present the study’s findings.

• Provide practical findings from this study, particularly regarding available services, to a central location, e.g. Council on the Ageing, so that they can be distributed to the broader community.

• Publication of the research findings in the peer-review literature.

• Place relevant findings for interventions and information on DHS, MUARC and other relevant websites and widely disseminate the links.

• Release the study results to the media to stimulate public debate and awareness of the DIY injury problem and available services to assist with home maintenance.

**Research**

• Monitor DIY injury among seniors for frequency, patterns and trends over time.

• Seek to have questions on DIY participation, particularly for persons aged 60 years and older, placed into a population-based survey to provide baseline participation rates, and monitor this information over time by means of repeat surveys. These data are currently not available.

• Conduct a study to determine what role home maintenance issues play in older persons decision to move into aged or assisted care, and to compare the costs of increased maintenance service provision with provision of aged or assisted care.

• Seek improvements to Victorian Emergency Minimum Dataset (VEMD) data collection to improve the capture rate of DIY injuries presenting to Victorian emergency departments, as the currently reported injuries are probably substantial under-estimates of the true size of the problem.

• Seek refinement of International Classification of Diseases Version 10, Australian Modification (ICD-AM) to be able to better distinguish DIY related injury.
1. BACKGROUND AND METHODOLOGY

1.1 BACKGROUND

Current Government policy encourages older people to live independently in their homes as long as possible (DHS, 2004). However, maintaining one's home can place an older person at risk of injury. The choices for home-owners when faced with a maintenance task are to employ someone to do the task for them, to ask for assistance from family or friends, or to ‘Do-It-Yourself’ (DIY) which literally means undertaking the activity themselves. DIY tasks in relation to home maintenance can range from seemingly simple tasks such as changing light globes, washing windows, gardening and lawn mowing, to more complex or demanding tasks such as roofing repairs, gutter cleaning, carpentry or renovations. This broad range of tasks is implicit in the definition of DIY tasks used in this report.

Australian Bureau of Statistics (ABS) population data shows that for the year ended June 2004, the number of people aged 65 years and over in Australia increased by 58,500 people (2.3%) and reached just over 2.6 million (Table 1). The rate of increase for Victoria (2.1%) was similar to that for the country. Whereas older people comprised 13% of the total Australian population in 2004, they are projected to form almost one-quarter (24%) of the total population by 2051 (ABS, 2004).

Table 1: Australian population aged 65 years or more, proportion and growth, 2004

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>New South Wales</td>
<td>13.5</td>
<td>1.8</td>
</tr>
<tr>
<td>Victoria</td>
<td>13.3</td>
<td>2.1</td>
</tr>
<tr>
<td>Queensland</td>
<td>12.0</td>
<td>3.2</td>
</tr>
<tr>
<td>South Australia</td>
<td>15.0</td>
<td>1.6</td>
</tr>
<tr>
<td>Western Australia</td>
<td>11.6</td>
<td>3.3</td>
</tr>
<tr>
<td>Tasmania</td>
<td>14.3</td>
<td>2.1</td>
</tr>
<tr>
<td>Northern Territory</td>
<td>4.4</td>
<td>6.3</td>
</tr>
<tr>
<td>Australian Capital Territory</td>
<td>9.3</td>
<td>3.5</td>
</tr>
<tr>
<td><strong>Australia</strong></td>
<td><strong>13.0</strong></td>
<td><strong>2.3</strong></td>
</tr>
</tbody>
</table>


The ABS Year Book Australia, Housing and life cycle (2005) reported high rates of home ownership among older people (defined by ABS as 65 years and older), with outright ownership by far the most common tenure type for Australians aged 65 years and over. The benefits of home ownership to older people include lower housing costs, security of tenure, and having an asset that may be realised for future expenditure or passed on to later generations as inheritance.

Table 2 summarises some key findings regarding household characteristics among Australians aged 65 and older. In 2000-01 older persons living in a couple only household (those where the reference person was aged 65 years or over) had very high ownership rates (92%), with 89% owning their home outright. Older lone-person households (which are often formed when a partner dies) had a home ownership rate of 77%, with 74% owning their home outright. Older lone-person households were more likely to be renting than older couple only households (19% compared with 6%) with 9% of older people living alone renting from state or territory housing authorities. The average weekly income of older person households in 2000-01 was lower than for any other life-cycle group.
(reflecting the likelihood that household members had retired). However, average weekly housing costs for this group were also lower than for other life-cycle groups ($23 for couple households and $26 for lone-person households). For the small proportion who were renting, housing payments consumed a relatively large proportion of their incomes. The 7% of older lone-person households that were renting from private landlords spent a very high proportion of their income (36%) on housing costs. For many older people the onset of diminished health and disabilities, and the need for security and ready access to services such as public transport, are often key considerations in their choice of housing, especially after the death of a partner.

Table 2: Selected household characteristics of older Australians, 2000-01

<table>
<thead>
<tr>
<th>Household composition</th>
<th>Units</th>
<th>Couple only, reference person aged 65 years and over</th>
<th>Lone person aged 65 years and over</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tenure type</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owner without a mortgage</td>
<td>%</td>
<td>88.5</td>
<td>73.7</td>
</tr>
<tr>
<td>Owner with a mortgage</td>
<td>%</td>
<td>*3.3</td>
<td>2.8</td>
</tr>
<tr>
<td>Renters</td>
<td>%</td>
<td>5.9</td>
<td>19.0</td>
</tr>
<tr>
<td><strong>Average housing costs as a proportion of income</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owner without a mortgage</td>
<td>%</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Owner with a mortgage</td>
<td>%</td>
<td>*11</td>
<td>*19</td>
</tr>
<tr>
<td>Renters</td>
<td>%</td>
<td>22</td>
<td>28</td>
</tr>
<tr>
<td>All households</td>
<td>%</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td><strong>Proportion of income spent on housing costs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25% or less</td>
<td>%</td>
<td>97.5</td>
<td>89.7</td>
</tr>
<tr>
<td>More than 50%(a)</td>
<td>%</td>
<td>*1.1</td>
<td>*2.0</td>
</tr>
<tr>
<td><strong>Proportion in a separate house</strong></td>
<td>%</td>
<td>88.0</td>
<td>64.1</td>
</tr>
<tr>
<td><strong>Average weekly housing costs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owner without a mortgage</td>
<td>$</td>
<td>19</td>
<td>16</td>
</tr>
<tr>
<td>Owner with a mortgage</td>
<td>$</td>
<td>55</td>
<td>*46</td>
</tr>
<tr>
<td>Renters</td>
<td>$</td>
<td>88</td>
<td>66</td>
</tr>
<tr>
<td>All households</td>
<td>$</td>
<td>23</td>
<td>26</td>
</tr>
<tr>
<td><strong>Total households</strong></td>
<td>'000</td>
<td>569.9</td>
<td>694.6</td>
</tr>
</tbody>
</table>

(a) Includes households with nil or negative total income.


Each year in Victoria there are an average of 8 deaths, 165 hospitalisations and at least 678 emergency department presentations among older Victorians from DIY home maintenance injury (Ashby and Fox, 2003). Persons aged 60 years and older represent 58% of deaths and 42% of hospital admissions for Do-It-Yourself (DIY) home maintenance injury in Victoria, compared with 26% and 28% respectively for all cause injury deaths and hospital admissions. Older persons are represented prominently in ladder related DIY home maintenance injuries at all levels of severity, as well as gardening and saw related injury hospital admissions. Rising trends of injury rates among older people suggest that these rates will increase further as the population ages (Stathakis, 1999).
Existing DIY home maintenance injury prevention solutions strongly emphasise use of personal protective equipment and ensuring safe and appropriate work practices are undertaken. Such solutions are valuable in addressing the range of eye and hand injuries observed in younger persons. However, their applicability to the circumstances under which older persons are injured during DIY home maintenance tasks is less clear. Surveillance data shows that DIY home maintenance injury patterns vary with age (Ashby, 1999). Anecdotal evidence suggests that the reasons why older persons undertake DIY home maintenance activity also differ and, if the scope of the problem differs, so too may the solution.

The Home and Community Care Program is a joint Australian, State and Territory cost-shared Program with the Australian Government providing 60% of funds and the States and Territories providing 40%. Local government and community organisations deliver HACC program services.

The aims of the HACC Program are:

- to provide a comprehensive, coordinated and integrated range of basic maintenance and support services for frail aged people, people with a disability and their carers; and
- to support these people to be more independent at home and in the community, thereby enhancing their quality of life and/or preventing their inappropriate admission to long term residential care.

The HACC budget in Victoria for 2003-04 was about $358.6 million from both governments, including an additional $42 million from the Victorian Government (DHS, 2005). HACC supports over 220,000 Victorians who are frail older people or people with disabilities. HACC services include home care, home nursing, allied health services, property maintenance, meals, respite care and personal care. In Victoria in 2002-2003 some 33,098 HACC clients received assistance with home maintenance (DHS, 2004). Home maintenance services offered may differ between municipal areas but in general, include a home maintenance service for repairs and minor modifications such as cleaning spouting, fixing security locks and installing ramps. Some municipalities offer gardening. All potential HACC service users are assessed for eligibility and their individual need requirements. Fees for HACC services are generally means tested with a low, medium and high rate for service. For home maintenance it is generally an hourly fee plus cost of materials.

In the example of the City of Monash, home maintenance services are provided on an as required basis. Services like home care, personal care and respite care will be provided at a frequency determined with the client on the level of need and available resources. Available hours for the year need to be rationed across the year. If demand drops off, clients may be able to receive some more hours. If demand goes up, the hours have to be shared across a larger number of clients. Waiting periods are effected by these factors. A meals service can be provided almost immediately, but home maintenance may take some time. HACC home maintenance tasks provided by the City of Monash include basic maintenance tasks including installation of safety measures, rails, chair raises, safety locks, gutter and window cleaning. Hourly rates are $9.30 to $13.60, going up to $10.00 to $14.70 from July 2005.

Similarly, in the City of Greater Dandenong eligible citizens are the frail aged (usually over 65, but they do service some younger clients with an aged related disease), and people with a disability, including children. With reference to home maintenance, the City of Greater Dandenong provides the following services: cleaning gutters; cleaning windows; installation of safety rails; installation of locks on windows and doors; and safety gardening only such as clearing moss covered paths or pruning of tree branches blocking entry. They are unable to provide plumbing or electrical work. In addition to home maintenance, the City of Greater Dandenong also provides home care including some cleaning, personal care, and respite for carers and shopping assistance. Current rates are from $6.65 to $10.90 per hour, plus materials.

The Monash University Accident Research Centre (MUARC) has conducted a program of DIY injury research and prevention over 9 years. An all-age data and literature review was conducted in 1995.
(Routley and Ozanne-Smith, 1995), followed by an education intervention in 1998, and an article in the Victorian Injury Surveillance and Applied Research System (VISAR) journal *Hazard* (Ashby, 1999). This work highlighted the over-representation of older persons, aged 60 years and older in DIY injury and targeted further work to this population. The timeline of MUARC’s research program in this area is shown in Table 3.

### Table 3: Timeline of MUARC’s work program on DIY injury

<table>
<thead>
<tr>
<th>Year</th>
<th>Project</th>
<th>Outcome</th>
</tr>
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</table>

In 2001 a MUARC internal grant supported an exploratory literature review and updated data analysis on DIY injury among older persons. This later work revealed that there is an annual average of 8 deaths, 165 hospitalisations and at least 678 emergency department presentations among older Victorians from DIY home maintenance injury. Age-specific hospital admission rates for the year July 2000 to June 2001 highlight the extent of risk for older populations. Rates of hospital admission for DIY ladder falls in the 60-74 and 75+ age groups (22.1/100,000 population and 24.3/100,000 population respectively) are more than 2.5 times the all-age rate for ladder falls (8.7/100,000).

Similarly, age specific hospitalisation rates for DIY injuries associated with powered lawn mowers and powered tools indicate rates in the 60-74 age group are approximately one and a half times the all-age rate for their respective categories. Rising trends of injury rates among older people suggest that these rates will increase as the population ages (Stathakis, 1999), possibly due to increasing levels of physical activity in older persons.

The 2001 literature review (Ashby and Fox, unpublished) identified only one other published work that investigated DIY home maintenance injury in this older population. The report outlined work undertaken by the United Kingdom Department of Trade and Industry on all-age DIY related injury with older persons being one of four sub-groups studied (Speed and Dickson, 2000). To our knowledge, no work of this type has been undertaken in Australia.

A MUARC funded pilot study allowed for the development and testing of a focus group instrument. A pilot focus group with volunteers from the Casey Combined Probus Group was undertaken in 2003. The main themes emerging from the pilot focus group were that the majority of these older people were very keen to do their own DIY tasks as long as they felt they are able to. For the men in the group, satisfaction and pride were major determinants in the choices to do DIY. Loss of physical flexibility was seen as a factor in giving up DIY tasks, and the recognition of the greater impact of injury with increasing age i.e., a longer recovery time. Very few of the group had sustained a DIY injury. Those who had been injured found that the injury impacted on their daily routine activities, even if only for a few days.

The pilot group expressed a general awareness of injuries caused by DIY tasks and acknowledged that these injuries could become more frequent with age. Some of the group identified tasks associated with heights as the tasks that they would most readily give up. Given the predominance of serious ladder related injury this finding is of interest. Other aspects of DIY that the group identified as
associated with DIY injury included the current low cost of DIY equipment, the poor labelling of equipment and the proliferation of DIY shows on TV that made tasks look easy. Some members of the group reacted negatively to personal protective equipment for particular DIY tasks and considered it “often a nuisance”, particularly facial protection eg. masks and eye guards.

Overall there appeared to be reluctance amongst the pilot group members to seek help from family or friends with DIY tasks on the basis these potential helpers were too busy. Outside sources of help had not been used much by the group as a source of help due to factors such as high cost, safety (security), insurance risk, trust and standard of work. There was a perceived lack of ability to readily identify reliable tradespeople by group members. Word of mouth recommendation was seen as the best current solution to finding skilled tradespeople.

Overall the group used in the one-off pilot study consisted of fit, active older persons, who were able to attend regular meetings and participate in-group activities. Therefore care needed to be taken in reaching conclusions from this pilot study, since this group may not be representative of the wider population of older people. This pilot however showed the usefulness of the instrument in obtaining opinions and issues surrounding older DIY and alternatives. It was recommended that the pilot study be broadened to a wider series of focus groups that tap into other subgroups of the older population and thus provide a broader range of information, experiences and attitudes to inform health promotion and DIY injury prevention. This recommendation translates into the current study.

The current study is the first in Australia to investigate why older persons undertake high-risk DIY maintenance activities, to determine what would constitute a low-risk alternative and to determine whether these alternatives are feasible and acceptable. The Department of Human Services Victoria and the Ian Potter Foundation provided funding support for this study. This is a collaborative project between the Monash University Accident Research Centre and Southern Health.

1.2 AIMS

The aim of this research project is to examine three research questions sequentially:

1. Why do older persons, aged 60 years and older, undertake high-risk DIY activities and under what circumstances?
2. What would constitute acceptable low risk alternatives to DIY?
3. Are these alternatives feasible?

1.3 SCOPE

The study participants are persons aged 60 years or older who live independently in the community. Two local government areas were targeted for involvement in this study, the Cities of Monash and Greater Dandenong. These areas were selected for two main reasons. Firstly they are the sites for two major Southern Health campuses: Monash Medical Centre and Dandenong Hospital. These two hospitals are the Victorian public hospitals reporting the highest number of hospitalised cases of older DIY home maintenance injury. Secondly, good support was available from those responsible for community care at the local government level.

Participants were recruited into the study by virtue of being:

- A patient treated at the emergency department of Monash Medical Centre or Dandenong Hospital in the preceding 18-months
- A resident of the Cities of Monash or Greater Dandenong who has used council Home and Community Care Services, or
- A member of a community group in the Cities of Monash or Greater Dandenong which was approached by the researchers for recruitment
1.4 METHOD

A qualitative study using focus group methodology was used. The focus group method was chosen, as it allows the capture of a range of experiences, attitudes and opinions within the population of interest. The detailed methods follow.

1.4.1 Instrument

The focus groups were conducted using a themed question list consisting of 14 open ended questions that had been pre-tested in a study pilot in 2001 (Ashby and Fox 2003, unpublished). The instrument is attached in Appendix 1. The themed question list sought to elicit responses that address the first two research questions and covered the following topics:

Questions 1-7 were asked to examine ‘why older persons undertake high-risk DIY maintenance activities?’ by asking:

• What type of activities do you undertake and how frequently?
• How fit do you feel to undertake tasks?
• Have you been injured doing home maintenance in the past and what were the repercussions of an injury?
• Why do you undertake DIY?
• What would make you stop doing DIY?

Questions 8-13 sought to raise discussion regarding ‘what constitutes low-risk alternatives to DIY?’ by asking:

• Do family and friends assist with DIY?
• Would you be willing to pay for assistance with home maintenance?
• Where would you look for assistance with home maintenance?
• What DIY alternative services have you used and have you been satisfied with the service?
• What are the most important factors in choosing an alternative to DIY?
• What is your best alternative to DIY?

1.4.2 Participants

Focus group methodology generally recommends continuing to run focus groups until a clear pattern begins to emerge and the information becomes repetitive. Hawe, Degeling and Hall (1995) recommend planning 4-6 focus groups within the target population. This study determined to look at three subgroups of persons aged 60 years and older to examine the range of experiences of those previously injured doing DIY, and 2 non-injured subgroups distinguished by their status as HACC service clients, with 4-6 focus groups in each category.

1.4.2.1 Injured subgroup

Recruitment of focus group participants reflected the subgroup in question. The injured subgroup was identified from Victorian Emergency Minimum Dataset (VEMD) data for Southern Health hospitals: Monash Medical Centre and Dandenong Hospital. Non-identified VEMD data is held by MUARC. A search of the VEMD for the 18-month period August 2003 to January 2005 identified 101 potential participants. Following approval by the Southern Health Human Research Ethics Committee, names and contact details for potential participants was sourced. The Director of Emergency Services at Dandenong Hospital sent each of the 101 identified patients a letter inviting participation in one of five scheduled focus groups for this subgroup of the study. Recipients of the letter were asked to take one of two actions:

1. If they wanted to take part in the study they were asked to phone the MUARC recruitment co-ordinator to be booked into focus groups to be held at Monash Medical Centre or Dandenong Hospital.
2. If patients were not interested in the study they had two weeks to return a form to Dandenong ED in a paid envelope indicating their lack of interest in the study.
Thirty-nine patients returned the form to Southern Health indicating that they did not wish to be contacted about the study. Of these, five stated that they were interested in the research but were unable to attend on the allocated session days due to other commitments.

If patients neither returned the form, nor contacted the MUARC recruitment co-ordinator, a Southern Health staff member followed them up by phone and the study was explained to them. Patients were then able to refuse or agree to take part in a focus group. In total, 23 patients agreed to take part in four focus groups held in March 2005, three at Dandenong Hospital, and one at Monash Medical Centre.

1.4.2.2 Non-injured subgroups

i) Council service user group

Council staff members at the Cites of Monash and Greater Dandenong identified persons who had used HACC services. Letters of invitation to participate in the study were prepared by councils and sent to 470 residents of the City of Monash and 200 residents of the City of Greater Dandenong who had used HACC services. Interested participants were then referred to MUARC. Focus groups were held at council venues/offices during November and December 2004. Three focus groups were held in each municipality with a total of 48 local residents involved.

ii) Members of community groups

Local government stakeholders, on-line listings and personal referral identified local community groups. Six community groups were approached to see if they would be interested in having a MUARC speaker come and explain the study to their members, 4 agreed and an information and recruitment session was held at a regular meeting. The 4 groups who participated were: the Association for Independent Retirees; Clayton Probus; Waverly Retirement Activities Group; and Springvale Senior Citizens. Five focus groups were held with the community group members involving a total of 47 people. Focus groups were held at the community group’s local meeting venue.

1.4.3 Focus Group Analysis

Demographic data was collected by brief survey prior to commencement of each focus group (Appendix 2). The focus group discussions were recorded using a digital voice recorder and supplementary notes were taken to highlight key points (sample in Appendix 3). The broad 4-step procedure (organising, shaping, summarising and explaining) outlined by Hawe, Degeling and Hall (1995) was used to guide data management. Each step was undertaken as follows.

Step one: Organising – putting data into a workable order.

Data from all 15 focus groups were fully transcribed by Swing Turnaround, a professional transcription service, as soon as was practicable after each focus group. The transcriber had access to the researchers supplementary notes to assist with accurate transcription.

Step two: Shaping (including data coding).

Hawe et al. provide only broad guidelines on the process of data shaping, which includes coding of data. With the wealth and multitude of data expected to be collected a more detailed process is required to handle the breadth of data collected. Gifford (in Kerr, Taylor and Heard eds. 1997) sets out six steps to rigorous coding of qualitative data:

1. Get a sense of the whole by reading and re-reading the entire set of data. Usually this is where thematic analysis in conducted as a means of assisting development of coding categories
2. Group issues, topics or themes into categories and groups
3. Identify the characteristics or criteria for grouping issues into specific categories outlining what the items in the category have in common and what characteristics excludes items from being placed in this category
4. Assign a code name to each category
5. Go back to a subset of the data and attempt to code using the codeset assigned to each category
6. Code small sets of material using highlighters or coloured flags.

These six steps outlined by Gifford were followed to analyse our data.
1. Transcripts were twice read in full and thematic analysis undertaken, that is, searching for common patterns or threads within the entire set of data collected.
2. Data from each focus group session was grouped under the broad themes associated with the themed question list and others identified by the thematic analysis.
3. Issues were categorised and descriptions of categories determined and written up
4. Code names were assigned for each category (see Appendix 3)
5. Data sorted by each broad theme was coded using the developed coding category
6. Coloured post-it flags were used to identify coded categories in each group of themed data.

*Step three: Summarising the data*

Results were prepared in 4 sections. The first provides a profile of the demographics of focus group participants. Data from the focus group discussions is reported in three sections, one each relating to the three research questions: why do older persons 60 years and over undertake high-risk DIY activities and under what circumstances?; what would constitute acceptable low risk alternatives?; and are the identified DIY alternatives feasible? Within each of the sections data are presented by the themes and categories that emerged during discussions.

*Step four: explaining*

Section 3 of the report provides a discussion of the findings.
2. RESULTS

2.1 INTRODUCTION

Fifteen focus groups were planned and conducted among the 3 subgroups between November 2004 and March 2005. The breakdown of focus group numbers by subgroup as follows:

1. Injured group – persons who received treatment at one of two Victorian public hospital emergency departments in the preceding 18-months (4 focus groups: 23 participants)
2. Council service users group - residents of the Cities of Monash or Greater Dandenong who had used council Home and Community Care Services for home maintenance (6 focus groups, 3 in each LGA: 48 participants)
3. Community group - member of a community group in the Cities of Monash or Greater Dandenong (5 focus groups: 47 participants)

Results from the focus groups will be presented in five sections. The first two sections will provide an introduction (section 2.1) and demographic profile of focus group participants (section 2.2). Sections 2.3 to 2.5 will address each of the three research questions under consideration in this study:

- Why do older persons, aged 60 years and older, undertake high-risk DIY activities and under what circumstances? (Section 2.3)
- What would constitute acceptable low risk alternatives to DIY? (Section 2.4)
- Are these alternatives feasible? (Section 2.5)

2.2 PARTICIPANT PROFILE

118 community dwelling persons aged 60 years or older participated in one of 15 focus groups held between November 2004 and March 2005. Subjects had either presented to Monash Medical Centre or Dandenong Hospital in the preceding 18 months with a DIY injury (n=23) or were users of council HACC/home maintenance services (n=48) or were members of a community group approached by MUARC to participate in the study (n=47).

Table 4 shows the breakdown of broad demographic data by study subgroup. Of the 118 participants in the focus groups, 44% were male and 56% female. In the hospital group, males were highly represented accounting for 70% of this group. Conversely, amongst the HACC users, females were highly represented with 69%.

The minimum age for eligibility in the focus groups was 60 years. The most frequently represented age group was 65-69 years (31% of participants), followed by the 75-79 years age group (23%) and the 70-74 years age group (20%). The most frequent age group for participants who lived alone was 75-79 years (34%), whereas for participants who lived with someone, the most frequent age group was 65-69 years (40%). Participants in the non-injured subgroup were older than the injured group.

Almost all focus group participants owned their property (95%), however the age of the dwelling was significantly higher amongst the uninjured community group (mean 40.6 years) than both the City of Monash HACC users (33.6 years; p=0.03) and the hospital group (28.4 years; p=0.00). No significant differences were observed between other groups. For the participants who lived alone, the mean number of years living in their home was significantly lower (21.95 years) than participants who did not live alone (32.22 years; p=0.001). Years in the home may be a feature of the older population, but may also be effected by the age of the suburb.
Table 4: Demographic profile of focus group participants by study subgroup

<table>
<thead>
<tr>
<th>Age</th>
<th>Injured persons group (n=23)</th>
<th>HACC service users group (n=48)</th>
<th>Community group (n=47)</th>
<th>Total (n=118)</th>
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<th>Community group (n=47)</th>
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</tr>
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<td>N</td>
<td>%</td>
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<table>
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Overall 35% of participants lived alone. For these participants, the mean age of their home was significantly lower (31.95 years) than participants who lived with someone else (37.71 years; p=0.047). Amongst the HACC users, 50% lived alone, of which 92% were female. Within our sample it could be suggested that widowed or single females who live alone are more likely to require HACC help with home maintenance tasks, whereas when a male resides in the house, he is more likely to be involved in DIY tasks. However these results cannot be generalised outside the participants in this study. Within the hospital group just 17% of respondents lived alone. The type of dwelling occupied was most often a separate house (81%), although this figure was less in the HACC user groups (69%) where there were 27% in a flat or unit.

A total of 52% of participants reported having incurred a DIY injury in the past. Not surprisingly this figure was highest amongst the hospital group with 83% reporting sustaining an injury. Males (56%) were slightly more represented than females. Approximately 40% of the HACC users and community group participants who received an injury were treated by their GP with a further 24% receiving no treatment at all. Of the participants with a DIY injury, most were males who don't live alone (48%), followed by females who live alone (26%), females who don't live alone (18%) and males who live alone (8%).

The most common activity when injury occurred was pruning (16%) followed by gardening (13%), woodwork (10%) and cleaning the gutters (8%). Gender differences were observed in gardening (75% female) woodwork (100% male) and cleaning the gutters (80% male) but not with pruning (50% male/female).
In our sample the groups of people most at risk of sustaining a DIY injury were males who live with their partner/spouse, and females who live alone. Males were more likely to be injured whilst undertaking "higher risk" jobs such as cleaning the gutters, painting the house or woodwork, whereas females were more likely to be injured whilst undertaking "safer" jobs such as pruning, gardening or cleaning.

2.3 WHY DO OLDER PERSONS UNDERTAKE HIGH-RISK DIY ACTIVITIES AND UNDER WHAT CIRCUMSTANCES?

Questions 1-7 in the themed question list were designed to address the first research question: Why do older persons (60 years and older) undertake high-risk DIY activities and under what circumstances?

Questions covered issues such as:
- What type of activities do you undertake and how frequently?
- How fit do you feel to undertake tasks?
- Have you been injured doing home maintenance in the past and what were the repercussions of an injury?
- Why do you undertake DIY?
- What would make you stop doing DIY?

Findings from these issues are described below.

2.3.1 Frequency of DIY activity

As an introduction to the topic focus group participants were asked to consider how often they find the need to undertake maintenance jobs around their homes. A broad definition of maintenance was adopted, meaning that maintenance tasks could include a range of recreational DIY e.g. building wooden toys for children, to home upkeep such as cleaning of gutters, replacing light bulbs, and gardening tasks such as lawn mowing and pruning.

The frequency and intensity at which participants in this study took part in DIY varied across the subgroups. Participation in DIY were associated with current health status, including diminishing capacity, feelings of independence and financial consideration.

At this preliminary question, even given a broad definition of DIY, which included “changing a light bulb”, there were a few participants who “never” undertook DIY. Another small group found that DIY played a small part in their daily activities, instead preferring to pay for assistance with home maintenance tasks.

“I do very little “do it yourself”. You know, I’m a bit of a lazy person I guess. My husband died two years ago, so I’m now alone. But because of Second World War injuries and what have you, he had a long period of time where he wasn’t able to do that sort of thing, like cleaning outside windows and what have you. So, we’ve been using Council help for gutters and windows for some years before my husband died. I was quite capable of doing them but he used to say, “well, I don’t want you getting up on ladders” and I could see it would of worried him for me to try and do those things. But I still think that a lot of people I know in my age group who sort of boast about their independence and I’m afraid I sort of think, well there’s a big difference about being independent and about being foolhardy.”  

C10 (female 75-79)

More often though responses regarding the frequency of DIY activity were “every day” or “all the time”. Some participants noted that they undertook DIY weekly, while others indicated more frequent DIY, as often as daily. Some described tackling DIY tasks in an ongoing manner as they arose.
“I say almost daily you’d do something. Like this morning I went under the house and a lock had gone, because the house moved. So, I had to fix the lock but you don’t go around looking for things. There’s always something to be done. Gardening, every day”. D4 (male 75-79)

“Well these days when there are only two of us left in the house and our family are off our hands, I think there’s a general sort of maintenance that’s required all the time. It may be not maintenance in the sense of the word. However, you’re sort of pottering around doing a bit of gardening, or cleaning up the house, or doing something all the time. So, in other words, it’s ongoing maintenance in that respect”. H7 (male 75-79)

“Well, they come in waves actually. Something seems to go wrong and then three or four other things go wrong and you have a nice long break in between. I suppose it would average out at least once a week or a fortnight”. K5 (female 75-79)

Some spoke of their planned routine of conducting DIY either on a short term “I find maintenance things … an overwhelming ongoing thing and so I try to tackle things on a sort of weekly basis” G5 (female 60-64). Others planned their DIY on a much longer term scale.

“Depends on the sequence. Generally painting comes in about once every 10 years. Other maintenance is tiles, various things like pavements and things like that, probably 20 years. I do a lot of woodworking which is probably weekly. So, that’s probably the sequence of my events”. K3 (male 65-69)

2.3.2 Types of regular DIY activity

We asked the participants who reported doing DIY to describe the sort of tasks they regularly perform. A range of DIY was described from mowing lawns and tending gardens to changing light bulbs and painting. Below is a cross-section of quotes representing the range of tasks specified.

- “The problem I have is keeping spouting clean”.
- “Mow the lawn, gardens and do all the house cleaning”.
- “I do a lot of gardening”.
- “Where my DIY lies, you name it, I’ve got to do it at home. Gardening, lawn mowing.
- “I mow the lawns, I change electric light bulbs. I do everything; I do all the maintenance around the house, like tap washers, doors, you know, the general maintenance around the house”.
- “I do the painting, decorating, filling up holes around the garage, everything, except cleaning the gutters”.
- “I do the garden and cleaning and all that kind of stuff. My husband does the light globes”.
- “We had our house bought for us in those years. I’ve been painting it ever since it’s construction”.
- “Painting more recently, carpentry jobs, plumbing jobs, i.e. guttering and downpipes and that sort of thing”.
- “My wife does the garden. She does most of the weeding and that sort of thing. I’ll get my blower out and do the footpaths”.
- “Clean the spouting out. Chop firewood. Or, cut firewood and chop it up”.
- “We’re usually repairing the verandah, or something. Or, cutting down trees because we’ve got about nine fruit trees. And do a fair bit of gardening”.
- “Painting, repairing things, mowing lawns and a lot of little jobs”.
- “All last weekend I was going mad with the chainsaw”.
- “I hate housework but I’d much rather be outside or painting, or something like that”.
- “I spend 95% of time on car maintenance, which is mainly what I do and most of my time, I spend on cars most of the time… 95% of my time. I just work on old cars and that”.

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Interestingly, as participants began to discuss the range of tasks that they undertook, several ‘camps’ of participant began to emerge, distinguishable mainly by their attitudes to doing DIY. There were a group who were keen to do DIY for as long as they were able and were resistant, even defensive, to any suggestions that they should cease DIY activity just because they were “older”. Members of this group were often men who were ex-tradesmen, or had a background in a safety related field. Another group may have lacked the formal experience of these men but were no less keen to undertake DIY as a means of maintaining their independence and fitness. A third group were still keen to do what they could, but were realising that health concerns, age related deteriorations and size of their properties were factors that were impeding or effecting their ability to continue to do DIY. Lastly, there was a group who had simply become unable to undertake their own DIY. The next section describes how these different groups feel about DIY or maintenance of their homes.

Group A: Experienced DIY’ers/tradespersons

A subset of participants, mostly men, described their working history as tradesmen in the building industry, in high-rise construction, and as carpenters or electrical engineers. These men were very enthusiastic DIY’ers who were keen to do DIY for as long as they were able and were resistant, even defensive, to any suggestions that they should cease DIY activity just because they were “older”.

“I look at it this way. If I can’t do a job anymore, I’ll be in the ground”. L6 (male 70-74)

“Nobody’s taking my job out of my hands”. N1 (male 65-69)

“Anytime. I certainly am a product of my environment. I was a tradesperson as a young person and it seemed to me that most people that did trades, reckon they could do any trade. In fact, the environment had it at the times in the 50’s when I was building the home that I still live in and we built the homes too at that stage. And in those situations, anything that happened around the home … you went then and fixed it and that’s what happens now. So, I do almost anything”. J6 (male 75-79)

They also strongly felt that they could still do a better job at their home maintenance than anyone they could pay to do the task at hand.

“I’ve been in the building industry all my life and I’ve done everything except electrical…I’m always doing my own home up and besides that, it costs too much money”. “But I always think I can do it better than they can. I don’t know if that’s true or not”. J9 (male 70-74)

“I bought my own home myself. Weekends, Saturdays and Sundays I’m an electrical tradesman but even now you do your own electrical work, you replace your own spouting, cut your lawns, do your edges. I do the lot because nobody else can do it as good as I would do it”. J4 (male 75-79)

When these men are faced with the reality that they physically cannot do these tasks anymore they noted finding it difficult to accept.

“I find it very frustrating. I was a tradesman and when I finished work I had a decent sort of workshop in the garage. I was called in by family and friends to do this and fix that. And my neighbour, you know, which I didn’t hesitate but you know, I can’t do any of those sorts of things for them. I feel out of place. Let alone, I can’t do it for myself. My workshop’s just cobwebs and dirt and dust and that now”. F7 (male 60-64)

“Well, I’ve basically been a carpenter all of my life. Started off when I was about 13 ½ years old learning as an apprentice and did 4 years in the Air Force servicing aeroplanes and did all sorts of things. I was... into the building, into high-rise contract work. You know, I could...
do anything. I could stand on my hands without any trouble. Many of the things I used to do, I just can’t anymore”. \textbf{A8 (male 80+)}

“It will be a concern to me that I think I’ve reached old age if I have to get somebody in to do the little jobs. It will be a mental thing for me to think I’m past doing all that now and I’m a doddering old fool. It will add a mental thing to me that some of the little jobs that I do now, change a tap washer or put a new lock in the door, I have to pay somebody to do that because it’s beyond me now and that will make me feel old I think”. \textbf{12 (male 65-69)}

**Group B: Enjoyment of DIY and maintenance of independence**

Another group of participants reported being very adept at and keen to continue their home maintenance while it was within their ability to do so. Some mentioned that they found enjoyment in their DIY, especially the gardening.

“I’ve been painting it [my house] ever since it’s construction and also experience in the maintenance of the church as well, property maintenance over those years. So, we’re happy to handle things with our own abilities and ambience. You know, don’t go too far”. \textbf{I4 (male 70-74)}

“I mow lawns in my garden. Sometimes on the ride on but I like the push mower because I regard that as my huff and puff for half an hour at a time and if there’s painting to be done I quite enjoy it. I hate housework but I’d much rather be outside or painting, or something like that. And I come from a background where my parents were… or my father was a handyman. So, it’s just a natural thing where there’s something to be done, you do it around the house and I can’t afford to have people come in anyway.” \textbf{N3 (female 65-69)}

“I love gardening, I’d like to stay all day in the garden. I prefer gardening to housework. So, the house is a mess but the garden’s [good]”. “It’s relaxing too”. \textbf{F6 (female 60-64)}

Others in this group noted that the notion of being able to still do their own DIY helped them maintain a sense of independence, which is something they highly valued.

“Anything that has to be done in the house, I do it because I’m independent and I won’t ask anybody else to come in. I do everything, except I haven’t done painting. Oh, I’ve painted outside but I haven’t painted inside”. \textbf{B7 (female 75-79)}

“My husband died about 30 years ago but my first big drama was he used to not have the same electricity boxes you’ve got now and he had to change fuses. I was so sure I was going to kill myself, I was terrified and I was so proud when I did it and the light came on and I wasn’t dead and I had to run in and tell my neighbour, “I can do that”. That was a huge thing, I had absolutely no idea…. I mean, I had an idea but I was terrified of it and I’d never done it”. \textbf{F3 (female 60-64)}

“When you’re on your own and if you think, well you know, “I’m going to get somebody else to do it”, you’re losing your independence. When I was sick and I think my neighbours come around and they say, “Oh… we’ll take you out”. I said, “Well if I don’t get out on my own, I’m going to stay in this house”. So, I had to force myself to get out and once you’ve [had that] taken away from you, to me, I may as well sit there and vegetate because, I’ve lost all my independence”. \textbf{B7 (female 75-79)}

This group often regarded DIY as a means of exercise and helped them maintain their fitness levels.
“I do a lot of gardening. I think it’s all so important for us to keep as busy and as active as we can and to network. So, anything that we can do safely, we should be doing”. A3 (female 75-79)

“Well, I have to do the lawns regularly because my family are in the country. I mean, I don’t have to but somebody told me it keeps me fit and I should do them while I can.” K6 (female)

“We’re usually repairing the verandah, or something. Or, cutting down trees because we’ve got about nine fruit trees. And do a fair bit of gardening. But I still do it because if you don’t keep fit, then you’re going to be old before your time”. L5 (female 60-64)

**Group C: Adapting tasks as they become difficult**

Another group of participants described how they had adapted the way that they tackled tasks such as the gardening and lawn mowing to accommodate increasing physical limitations or concerns as they aged, or dealt with health concerns and injuries. By changing the way they did tasks, or the way they thought about the task, they attempted to modify the job so they could still attempt it.

“Where my DIY lies, you name it, I’ve got to do it at home. Gardening, lawn mowing. Now, I’ve got a substantial amount of grass that I have to cut and rather than go like a bull at a gate and try and do the whole thing all in one hit, I do a bit today, a bit tomorrow, a bit the next day. Now the 3 days, I’ve cut all the grass. So, I’ve saved my legs. I’ve got crook legs. Both knees need replacing, I’ve got a crook hip. me back’s gone….” A7 (male 70-74)

“Well, I still mow my lawn but I usually do it a little bit each day now. I find that I can’t do the whole lot”. F8 (female)

“I prune. I’ve got a very long drive and I’ve got bushes all the way down. I’ve got a mower but nowadays I have to get the Council to do the top part and I do all my own gardening. It’s not what it used to be.” F6 (female 60-64)

“Well painting. But because of some other problems that I’ve got, I find it very difficult to stand for any length of time. But I’ll still do it until I run out of steam. Splitting wood, stacking it, I can do that for about an hour and then I’ve got to stop. But I suppose one could say, that’s a legacy of age.” L7 (male 65-69)

**Group D: Unable to undertake their own DIY**

There was a last group who were already using DIY alternatives because they had realised that they were unable to do much of their own DIY maintenance. Medical conditions and deterioration in their own capabilities had significantly altered the way this group view their homes and prioritise their home maintenance.

“I can’t do the mowing anymore. You know, I’ve had two big operations and the doctors advised me not to mow the lawns. So, I’ve had to hire a chap to come in once every three weeks. And I find that things are getting expensive because you’ve got to hire these people to do everything”. J8 (female 65-69)

Female participants who lived alone reported being resigned to the fact that the way they viewed their home and the importance of home maintenance was changed forever as they became less and less able to maintain their homes themselves.
“I find I’m no longer house proud, I can’t afford that liberty. I’ve only been walking since January and …. I can’t judge the pavement, I can’t judge the weeds. So, as for those weeds - you know, they look untidy. That doesn’t fuss me so much. It’s that I trip. I can’t bend down. So, there’s no way I can remove them. The lawn man will come with the whipper snipper. The weed is actually..... The roots are actually still there. It’s actually easier to trip once they’ve been whipper snippered because I can’t see them. So, it’s small things like that”. G5 (female 60-64)

“I just know that I can’t climb ladders and I just don’t try to do them anymore now. I have had some Council help and I’ve got no family living in Melbourne now. So, they visit and I save up anything that can be saved up. You know, the house is just falling down around my ears gradually and quietly?” A4 (female 65-69)

2.3.3 Have you been injured doing DIY?

Fifty-two percent of participants answered “yes” in the demographics questionnaire to having previously sustained a DIY related injury requiring medical treatment. In the focus groups, participants were given the opportunity to describe these injuries and the circumstances under which they occurred. The injuries described were associated with a range of DIY maintenance activities including gardening, lawn mowing and use of ladders. Some examples of the injury narratives are listed here.

“I had a long pruning stick with a thing on….I was reaching upward…it’s about 8 or 9 feet long this thing, and I was only pruning light stuff from over the next doors fence and slipped over backwards over the edge of some paving that I had along.... where I was at the back of the garage and sat down. Thump! And tore two tendons in me shoulder and that’s about as far as I could go”. A8 (male 80+)

“Well, I fell off a ladder last year… I was really lucky I didn’t break something and I didn’t but I hurt my back and my ankle and I’m still suffering.” F5 (male 70-74)

“The only thing that I’ve had happen is climbing up an apricot tree and trying to cut it down and the ladder tipped over and I went over and my foot was caught in the tree, the fork of the tree. So, I pulled my foot out of the shoe and then I got up”. I9 (female 65-69)

“I was mowing the lawns one day, it was quite some years ago now and I was trying to get underneath a bush. So, the bush was nearly off the ground, so I got in front of the mower and had the bush up and got in and dragged the mower in behind me and I took the front right out of my shoe and missed my toe by about “that” much”. H4 (male 75-79)

“The ladder was in the bushes, it was a March Bush and the branch broke. The ladder went this way and I went that way and at the end of the tree, my trousers got hooked up on a little stick. So, I was hanging upside down by my trousers. You know, not far off the ground but I couldn’t pull myself up to get the trousers free”. H6 (male 80+)

“I was attaching shade cloth to the house side of the pergola and before I attached it to the other side, I decided to get rid of the creeper that was going in under the roof and I positioned the step ladder very carefully, aware that ladders were funny, so that I could reach the pergola strut as I went up and as I reached up for that, I was only going between the second and third rung, the ladder went sideways and I jumped off. I didn’t fall; I just jumped off and landed safely. But the bottom of the ladder, being wider than the top, caught my leg about half way up the shin and gashed it. I didn’t clear the gutter and the creeper is still there”. N3 (female 65-69)
Well, I was mowing. Trifocals, head down, bum up, crunch. It drove me into the ground I was down on my knees. Oh, Christ. So, I fixed that up, I’ve sawn the limb off”. J9 (male 70-74)

Without prompting from the researchers, the focus group participants began to suggest contributory factors to the injury event, severity of injury or circumstances in which they found themselves after the injury occurred. Several relayed incidents where they were working alone when injured and were trapped or otherwise unable to raise immediate assistance.

“I spend 95% of time on car maintenance, which is mainly what I do and most of my time, I spend on cars most of the time... 95% of my time. I just work on old cars and that. I’ve had a gear box come down on my chest. I was just there and I couldn’t get out either way. I was thinking, “no, no one was home” and I was still trapped under there for half and hour. So, I won’t do that anymore. That was a warning I think.” N4 (male 65-69)

“I had an accident with a car, backing it out of the garage …. and I realised I had a flat. So, I got out and put the jack on… I had my hand on the back of the car and I wound the jack up … the car..rolled forward down this little slope, leaving the jack at an angle and my finger in between it. And I’m stuck there with my finger jammed in between the car and the jack. And there was nobody home”. H6 (male 80+)

Some related their injury to personal error citing “stupidity”, “carelessness”, “over-confidence”, “in-attention” or “complacency” as factors that contributed to the injury occurring.

“I looked after my home, I’ve been there 30 years, new home but I’ve always cleaned the spouting and done all this stuff. I cleaned the spouting, my wife was out with the ladies club ...and I’d been up on the roof with the hose and all, I’d washed everything down. My wife, she said to me, “take the hands free phone out with you”, which I had, it was about 12 feet from where I was working. Came down off the ladder, reckon I’d finished it and I looked up, there was some gum leaves and rubbish hanging on the roof. So, I got a western red cedar [table] and four stools. [I] picked one of the stools up put it on top of the table… I stepped on that [table], I went to step on [stool] that and down I went. And on top of the stool, I now have a metal leg and metal hip. Nobody was home and my next door neighbour’s all go to work ..so, nobody could hear me yelling. I passed out and then I came to I thought, I’ve got to get to that phone” and I bloody couldn’t move. My legs wouldn’t move. I should never have done it. It was my own stupidity; it was my age, because I wasn’t thinking straight. I say, when we get older, I don’t think we think the same way.” C7 (male 80+)

“I snip, cut, bleed, hell and why didn’t I have the gloves on. But, you’ve got the secateurs in your hand and just one little branch that needs cutting. I have to walk all the way up to the shed and back, get a pair of gloves, put them on, snip and take everything back again. Or, I’ll just cut that little thing, it’s like that little thing out here, it’s nice and clear. Oh, while I’m here, the big rose bush needs pruning so I’ll do that. Oh look, I won’t get my gloves. Trouble! I think it’s over confidence. You know, why do you have to go just to cut one thing off but after half an hour of pruning and there’s blood everywhere because you didn’t get the gloves. Because it was only going to be one snip, not a rose prune. That wasn’t your intention”. I2 (male 65-69)

“I managed to take the end off a couple of fingers very neatly with a buzzer, whilst making a toy for my grandson. So, in effect, I was very lucky that it was only that much. It could have been the whole hand easily. Having .. owned the buzzer for coming on 30 years, I should have known better. It was lack of attention. That’s all”. L7 (male 65-69)

“I was cleaning out gutters and unfortunately because the ground was soggy, being in a hurry, being stressed and things like that, being careless basically, put the ladder down and
got on top of it and the ground was soggy. One leg on and one leg off, managed to get onto the spouting but unfortunately that gave way and I landed on top of the ladder. And by luck, I didn’t break anything but my leg was pretty bruised for about five weeks that put me out of action sort of thing. I couldn’t do very much. M4 (male 60-64)

“I placed a ladder against a wall, a step ladder and I put a hammer on top of it. And I was doing something and when I went to remove the ladder, I hadn’t removed the hammer. So, when I moved the ladder, the hammer came down and hit me on top of the head….but just carelessness really that’s what I’ve put it down to and I should know better than this. I was under a lot of stress at this period when I was building the house and a lot of these things were just stupidity”. M4 (male 60-64)

“Me, well I’m pretty handy with my hands. Whatever I do, I do well but sometimes… Like this gentleman said, “just a little bit careless”. I had a long piece of wood, put it over the electric plane and hand a stand on the other side. But at the time the wood went underneath it. I kept on going and it fell down and I went into the electric plane with my finger and cut all that off. I only cut that little bit “here”. But they had to cut all “this” to get the tendons down”. A little bit careless there and I was thinking about something else. But then again, if you get a certain age. You know, I’m nearly 70”. M3 (male 65-69)

Other suggested factors were associated with tiredness or increased used of medications.

“Well, I cut myself a couple of times late in the day, doing a woodwork job down….. I think you’re tired. My philosophy is, never do anything late in the day”. D4 (male 75-79)

“I had a very big history of injuries. I’ve been a builder and a carpenter. Worked for myself about 40 odd years. My first finger, my second finger, one eye”. Just a couple of weeks ago dropped an angle grinder and cut my legs just about off. So, I’ve come to the conclusion why many older people have accidents. I think people who came in their thirties and forties take a note from their parents between nations, especially when you come out here to Australia as migrants. You’re all hard working people when you come out here. I came out here a bit more than 50 years ago and looking at it you take the skills, so you’re determined yourselves to make a success of yourself as a pioneer/migrant, I see it that way. Second thing is, medication when we are at this age with medication. Now, I found a study and I looked at all those sorts of things. The stickers on your medication and it says very clearly, where was it? Co-ordination if affected, do not drive, or use any motor operated machinery and I only found that about three days ago because I was looking at it. My son said the other day, that’s the eldest son, he said, “Dad, I’m coming over and picking up all your electrical tools and taking your lawn mower away and you can get your lawn cut by somebody else”. N1 (male 65-69)

Some noted that their injury was associated with incorrect or misuse of their DIY equipment.

“I had three visits to the Emergency Department in the last 10 years. One was a bit of metal in my eye. I was wearing goggles but someone was using an angle grinder and of course that created a lot of mess that came up. I had a piece of wood fly off a vent saw and hit me in the face. Just missed the eye fortunately. That was the second one. And the last one a few months ago, which was slicing my thumb on a bandsaw, making my Granddaughters Christmas present. I knew there was a risk of that happening and I thought I’d be covered for it but I hadn’t covered for it enough. I was literally sawing through a piece of pine wood with a bandsaw and I hit a knot near the end. It got… So, I had to push harder, it pushed the wood through. The knot saw me through the knot slowly but when it got through the knot, it went through the rest of the wood that I’d allowed so fast that I didn’t have time to… I didn’t allow enough. So, I work now but I allow more wastage doing that sort of task. So, none of them are to do with maintenance but just normal activity I suppose. I wasn’t retired when I had the first two visits to hospital by the way. I’ve only been retired five years”. L3 (male 60-64)
“It was just... I was painting and I didn’t fit the extension ladder up properly and I climbed the extension ladder and got to the second stage and of course it collapsed and down I went and the ankle was chopped up in the guillotine action of the ladder sliding down. And the other one was just recently twelve months ago. Might be two years ago, two years. I’ve got old cars and I was playing with the gearbox and my overalls were open and I turned around and it hooked on the gearshift lever and fell on my foot but didn’t break nothing. I came here and they said, “yeah, well you’re a silly boy”. Go home”. O4 (male 65-69)

A few participants indicated that they thought it may be the age and hence outdated design or condition of their tools or equipment that may have contributed to the injury.

I’ve had a couple of accidents at home. Both of them were my own fault. I’ve got a very old, very temperamental lawn mower and I’m not prepared to replace it because I think a new one would last a lot longer than I’m going to. So, I want to keep this thing going as long as I can. Getting it started is the main problem. Once it has actually kicked on then it’s not bad. And it was just, the strings required to pull on “that” cord. Give it a really strong pull and I actually tore a ligament in my shoulder. So, that put me out of action for a while. So, I’m thinking of getting a man to come to do the lawns”. C4 (male 75-79)

“My experience where I injured myself, I ended up at the Doctor having X-rays [it was from] my extension ladder. The other old wooden one with round rungs and I was painting on it in thongs”. For two days I was on an extension ladder with those round rungs and…my foot was really aching”. I2 (male 65-69)

We also asked participants about the repercussions of the injury for themselves and for the way they do DIY home maintenance. Many noted that since having an injury they were now unable to do further DIY.

“Well, the reason that I don’t do certain things is that I’ve had minor injuries from doing it and I realise that I can’t do that anymore. It’s mainly my back or my shoulders”. A2 (female 75-79)

[Post a fall cleaning gutters] “Very bad, even now. I can’t go up on a step. I can’t risk it, I can’t afford to fall over because I’ve got no bone on the thigh, it’s all metal. Now, if that breaks, not the metal but the bit above that it’s driven down into, the pieces. If that bone breaks, I’ve got no leg and they can do nothing for me”. C7 (male 80+)

“I was going to say that up until a year ago, I used to do most of the maintenance myself. I did the gardening and the gutters and painting. And, through lifting…trees in the garden and trying to prop them up and what have you, I ended up by fracturing my pelvis. I now have to get people in”. K8 (female 75-79)

“I’m missing the end of a couple of fingers. You only know what you can’t do when you lose them. I’ve dropped more things than you can poke a stick at. I’ve put my hands in my pocket to pull something out and it feels like I’m going into broken glass. You can’t feel much”. L7 (male 65-69)

Some participants noted the financial repercussions of their DIY injury, specifically the changes they decided to make as a result of their injury, or the alternative arrangements they had to make for the period of their disablement.

“I was climbing a ladder to do the job which everybody seems to dread, getting up there and cleaning the gutters. Mainly because we had trees all around the house and they were dropping their leaves. So, around every 3-4 months, they used to come there, clean them out and get the hose up the front of the house. Everything would be right until the next time.
Well, one day, I was up on the ladder, right on the top rung, the second top rung. My foot slipped and I came down right on my side. Now, that laid me low for about a month and a half. Badly bruised hip and I was lucky that I missed [the border]. We’ve got a border running around the house of rough rocks and I missed by about “that” much. If I’d of hit it, I would have done a hip completely and as a result, I had the trees taken out around the place and gutter guards put in and the rest of that. I haven’t needed to be up on a roof any where near as often, nor to clean them out. But the removal of the trees and the rest of it, cost us $5,400. It flattened us for a couple of years. So, you know, all for the sake of a few leaves in the gutter”. E5 (male 65-69)

“It’s a point to be taken, what the lady said, because after I broke my ankle, I couldn’t cut grass. So, for three months I was on... _____ did it for me and then somebody said to me, “Oh, why don’t you pay a gardener to cut the grass for you?” I want to do it myself. I want to be occupied”. [But, can you afford to do it?] “No”. L6 (male 70-74)

2.3.4 Why do you do DIY tasks yourself?

We specifically asked focus group attendees ‘Why do you do DIY?’ When answering participants were prompted to think about their responses on a scale from ‘choice’, where DIY is a completely voluntary act, borne out of enjoyment or pride in undertaking the job themselves, to ‘necessity’, where DIY is done for lack of an alternative.

Responses regarding DIY as a choice ranged from participants saying that DIY provides exercise and fitness opportunities, to the pride or satisfaction one obtains from realizing a “job well done”. Some participants indicated that they do DIY simply because they have the time or ability, or, as mentioned before just because they enjoy doing it.

“I feel that if I got someone in to do a half hour job, I’d sit and watch him. So, why not do it yourself? You’ve got the time. You’ve got seven days a week when you retire and you’ve got to fill in seven days a week. So, you’re a bit more prepared to do it because you’ve got the time to do it”. I2 (male 65-69)

“Well, I think when you enjoy doing something, it’s not such a chore if you don’t have to finish something today and there’s always tomorrow because it’s a pleasure what you’re doing and you think, “well yes, I’m not being pressured”. It doesn’t become such a chore and you can take it easy. Depending on your age, you have to gauge how much you can do. I used to work in the garden all day long but I can’t do that now. _____ I had to have a by-pass in my ______ artery 18 months ago and it’s restricted my walking really, in my leg, my knee and I find I can’t get up and down quite as easily, so I knock off a bit earlier, or I don’t do as much. But, when you enjoy doing things and you’re not having to do it to save money, it’s not such a chore at all and I’m in that situation that I’ll leave it until tomorrow, except when you run out of days.” K9 (female 80+)

Some saw it as a simple choice, based on one’s own assessment of ability to do the specific task at hand.

“Well, as I read it, I thought _________ lawn mowing, pruning, cleaning the spouts and painting and that’s the way I took it. But I did say that it was fairly limiting and things like gardening were very important in our age group. I have renovated, to use that word fairly liberally, about every ten years in my house. I have extended it, I’ve built a garage, I’ve done front fences. I’ve done all those things because for me they were an outlet to do but I’ve always been mindful of the safety factor because…. Things like the right tool for the right job and all that sort of thing is very important and the other thing is to plan what you’re doing and if you decide that you can’t do it, then you get somebody else to do it”. D3 (male 70-74)
For those who mainly saw their DIY activity as a choice, fitness and pride/satisfaction were two strongly emerging reasons for doing DIY.

### 2.3.4.1 DIY as fitness
The concept of DIY providing a level of fitness came up in discussions surrounding the type and frequency of DIY, and also in discussion regarding the reasons for undertaking DIY. We explored this issue further by asking group participants “how fit do you feel to undertake DIY tasks?” This question raised a lot of interest, with many seeing their home maintenance tasks as one of their main sources of exercise.

“So, there’s another thing that you’ve got to look at too and that’s fitness. We can’t sit around at the table and drink cups of tea all day, we must be walking. We must be active”.  
A7 (male 70-74)

“But I feel by being in the garden, you keep fit, moving your body around, your arms and muscles rather than sitting around all day”.  
F5 (male 70-74)

“It does keep you fit, pottering around in the garden”.  
F7 (male 60-64)

“When you’re moving around doing something all the time, you don’t feel so bad. I’m[ almost] 65 now and I’m feeling fairly fit for my age”.  
M6 (male 60-64)

“What else are we going to do? I’ve got arthritis all through my body. If I don’t move about and do things”.  
J8 (female 65-69)

“And you do what you can, while you can. One reason is to try and keep a bit fit and the other one is because of the cost of getting someone in to do it”.  
K4 (male 75-79)

“If you give up doing these jobs, you’ll get that way that you loose the incentive and you get stiff and you just can’t do the things. I think if you keep moving at your own pace, you’re far healthier. Otherwise, you get, as I say, if you don’t walk… I don’t do a lot of walking now but I garden and push the wheelbarrow from right down the back to right around the front. You know, things like that, it keeps you fit”.  
K9 (female 80+)

“I’m very good at sweeping leaves. We have showers of gum leaves come down and I can still sweep them…. I don’t mind the sweeping and it’s good exercise I suppose.”  
H5 (female 75-79)

### 2.3.4.2 Pride/Satisfaction
A number of participants identified pride or satisfaction in doing a job yourself as a reason they still undertook DIY for home maintenance. With one or two exceptions these comments were predominantly from men.

Concreting, painting, you name it, I’ve done it. You get a sense of achievement when you do things around the home.”  
D2 (female 65-69)

“But, the other thing with DIY, if you think you’re capable of doing it… You know, I think I’m capable of doing quite a lot of jobs. It gives you a bit of satisfaction. Like, as I say, a person I knew who painted his daughters bedroom and changed two power points, he said, rather to get an electrician in to do it, he did it. And, you know, when you’ve done it all and it all looks nice, he got a lot of satisfaction out of doing it”.  
I2 (male 65-69)
“There’s a lot of job satisfaction with Do It Yourself”. “You think, “I did that job” and you did it, so you feel good about it”. J5 (male 65-69)

“I find there’s a lot of pride associated with this. You hate to feel that you’re not quite as good to do things as you used to do”. J6 (male 75-79)

“I do it because I like doing it and take pride in seeing the things done by me”. J2 (female 60-64)

“It’s part of giving up your independence. You hang on and do it, for whatever you have, as much as you can, for as long as you can”. F3 (female 60-64)

Even when participants acknowledged that the DIY tasks they were undertaking were no longer as easy as they once were, they still expressed a reluctance to relinquish doing them.

“I still think that we undertake tasks that we probably shouldn’t undertake. Because we take a pride, as they’ve all said in what’s going on”. J10 (male 65-69)

“I’ll keep going. I mean, I don’t know whether it’s to prove a point, I just had some old pavers in the backyard for years and years, they’re dangerous in themselves. Ripped them all up, put _____ on it _____, borrowed mixer, concrete, the kids think I’m crazy. I said, “Well, there’s nothing crazy about it. If you’re capable and can do it but I’m not going to get it done in a day”. M2 (male 60-64)

“Well, I find we’re our own worst enemies. Really because things that we used to do 10, 15, 20 years ago, we think if we did them then, why can’t we do them now? And we think we still can and we can’t because we’re not mobile enough now. And as I said, we are our own worst enemies because we say, “Oh yeah, I did that, I cut the tree down and what have you. If I did it then, I can do it now.” A7 (male 70-74)

The third thing is, a person at my age, have too much confidence. We are too confident and think, “I can do that myself”. Especially, being in a trade, nobody’s going to beat me in my trade, I know everything. A bit stubborn and I can do it”. N1 (male 65-69)

Some noted that it was not simply that they took pride in the job that they could do, but also doubted the ability of another to do the job as well as they would themselves, or to the standard they would be happy with.

“I’m about 80% to what I used to be. I’ve got a disc problem, fourth and fifth [discs] down here and I get a bit of angina but as long as I can breath, I’m going to do the jobs. Lop the trees, fix the plumbing, do all the spouting around the place because I’m about 80% to what I used to be. And while I still be, a bit like you take pride in your own ability and skills and you get somebody in to do a job and you want to shut your eyes. The finished job never look at it. Just give him his money and get rid of him and don’t bring him back”. J4 (male 75-79)

“Well, mowing the lawn. He’s the only one that thinks he does it properly but he’s taught my daughter. She does it the way he likes it and now my grandson is being taught. But he races it through to get the money. It’s all he worries about more or less but he’s going to be made to do it properly or he doesn’t get paid, one or the two. So, my husband is just that type of person that won’t stop working. He’s just got to be doing something all the time”. B6 (female 65-69)
Within two focus groups there was debate over whether ‘male pride’ was a contributor to DIY injury risk among older males. Female participants felt that it was harder for men to acknowledge that they may need outside help and that they would have difficulty in asking for this help.

“Are we embarrassed to ask for help? If we are doing these things. You know, “I want to do such and such. Oh, I don’t want to ask anybody to do it”. [Female response- “But I think it’s different for a man to have to ask but for a woman, you just ask”]. “No, no, no, no. We’re persons. We’re not male and female. We’re individuals. Some women are stronger than men. Believe me. I tell you. They are but we’re reluctant to ask for help”. A7 (male 70-74)

“I think it’s harder for a man. Well I’d be very happy to have someone come and do the cooking and the washing, I can tell you that. But I think it can be harder for a male who has done their own home work ”. A3 (female 75-79)

“Can I make a point about the difference between male and female? I don’t know what the percentage of accident’s is but from personal observations I’ve found that men are far more prone to keeping on doing things that they shouldn’t be doing out of a matter of pride. They won’t admit that they can’t do these things anymore. So, they keep on doing them until they do have an accident. Women are not quite so tough about it”. K7 (female 75-79)

At the other end of the scale from ‘choice’ are the persons who undertake DIY because circumstances necessitate it.

“I think there’s a level of necessity but then it becomes the challenge of the budget to fit all those jobs in and the budget is fairly tight now and the older you get, the tighter the budget becomes and the older your home becomes, it requires more maintenance.” O4 (male 65-69)

2.3.4.3 Cost
Prohibitive cost of DIY alternatives was a clear and over-riding factor when it came to persons needing to do maintenance themselves

“Isn’t it all commonsense, the whole thing? Because, each person at a certain age has got the will to occupy themselves, the need to do it themselves because they haven’t got the money and in our aging population in the future, this sort of thing is very important. Where do you go if you haven’t got the money. It’s a money question. It’s a money and ability question… either you have got the money and you employ somebody, or you haven’t got the money and you can’t afford somebody.” L1 (female 60-64)

In almost all focus groups the discussion turned to the expense of getting trade or handypersons to undertake home maintenance jobs.

“I think if you live on your own, there’s no option but a lot of “do it yourself” tasks because the cost to employ somebody are really very, very high”. C4 (male 75-79)

“Yeah. I’ve got to do it because I can’t afford for someone to come in and do it for me”. A7 (male 70-74)

“It all depends on cost and if you know… and that’s only my opinion but it all depends on cost. Because if you don’t have the money to pay, irrespective of what it is. Because if you don’t have the money, you can’t have it done”. F7 (male 60-64)
“I think the cost factor is an area that particularly us males… The ladies can’t do it. So, they’ve got to decide if, or not they can afford to pay $300 for something to be done. Or, $600. So, the cost factor does come into it significantly”. I6 (male 70-74)

“Because it’s too expensive to hire anybody else to do anything”. J8 (female 65-69)

“If you want to get a brick layer, or a carpenter, or a handyman, minimum is $25 an hour and pensioners cannot afford those sorts of things.” N1 (male 65-69)

Some felt that the limited and fixed incomes many seniors are faced with mean that you tackle maintenance jobs that you may not be able to do, because the alternative is too costly.

If there’s something that desperately needs doing, I’ll have a go at it. But what I’ve found is if you want tradespeople, it’s so expensive for them to just set foot inside the door. I’m sure that’s why a lot of people try to do things that they shouldn’t. I’m quite certain that’s the main problem”. K7 (female 75-79)

…I do it not only because I want to but I couldn’t afford to get a concreter in and redo my pavers for me. So, I didn’t worry if it took six months to do the pavers and another six months to relay all the concrete. I couldn’t care less. But I didn’t have the $2,500 to get someone in to do it. It’s the same with going to get your car serviced. You can’t afford to do it anymore, you have to go and do it yourself”. M2 (male 60-64)

“I think that’s why, you know, older people will continue to do their own work at home. They have to. They can’t afford to do otherwise. They can’t from also the fact that you’re doing it for something to do, for some self satisfaction in life that you’re doing something, you’re a useful person and you get a satisfaction out of getting a job well done. Otherwise you might not get it done as well as that in the first place because there’s some ratbags out there I can tell you. But it’s all about money. Everything’s about money“. M4 (male 60-64)

A HACC service user did note that this prohibitive cost of using professionals was the main reason she turned to the council to get tasks done.

“In my case necessity. Because we don’t have all that much money, we can’t get professional people in. It costs far too much money. I get help from the Council, like the guttering and they’re excellent. I can afford that but I can’t get someone in to chop the tree down and he says, “$900”. We couldn’t afford that. We’ve never had riches.” C5 (female 70-74)

As a follow on to this issue we asked participants would they be prepared to pay for someone to do these tasks. Some were accepting of the economic reality that to get these many of the jobs done around the home they need a qualified tradesperson and that those services come at an expense.

“Yes. I was quite prepared to pay… I know plumbers are very expensive. He said to me in the first place, when I rang he spoke to me, “well, I’ll tell you now, it will cost you $150 for me to come” in the first place. I said, “well anyone would charge that I suppose, so that’s alright”’. K9 (female 80+)

The thing is, my mother teach me, you want to save your money for sickness and health. Now, this mean if you need the money and you’ve saved it then you can use it, or you need somebody come and fix something, you’ve got the money to pay.” A9 (female 70-74)

“Well, you have to pay anyhow. So, I’d obviously prefer to pay for someone to do a good job, rather than paying twice for a shoddy job and then the repair of the shoddy job. But, reality is you’re going to be paying”. G5 (female 60-64)
Some others though found it hard to justify the costs of tradespersons on the fixed funds they had available.

“I’m really not prepared to pay because I really don’t have the funds for it. So, when I usually get a tradesperson, I usually get one a month. So, I’ll get the dishwasher fixed next month and then if I can afford it, then I’ll have some other thing fixed and so forth”. D8 (female)

“Because tradesmen are so dear, we tend to only pay tradesmen for the really, really important things. So, the other things get left.” F6 (female 60-64)

“Well, yes. It is a case of how much. Some things you can afford and some things you can’t. But yes. But that’s another part of actually if you can afford it, of keeping that independence thing. I mean, I don’t want to go on about it but I think it’s really important. Because you sort of... Like, I think old age is pretty tragic and one of the things you hang onto is [your home]... I’m still looking after myself, with a lot of help basically and that sort of feeling is good and giving up is horrible.” F3 (female 60-64)

2.3.4.4 Waiting periods
In addition to cost, the long waiting periods to get someone to come to their home and assess the job needed, was a disincentive to many focus group participants.

“Lots of reasons [why you do DIY]. One of them is because it’s cheaper but two, you want to do it now. You don’t want to wait until next week when somebody may be able to come. You don’t want to be paying somebody all the time to be doing things that we think we can be doing ourselves.” H5 (female 75-79)

2.3.5 What DIY tasks do you do less frequently and why?
As a follow on to finding out what tasks focus groups regularly undertake, we also asked what tasks they now do less frequently. Participants identified that there were some tasks that they were previously able to do, that were just now unable to attempt. Health conditions, medication and loss of balance were cited as reasons for the cessation of some tasks.

“A lot of work I have been doing in the past, I’m not able to do it anymore. It’s as simple as that. Mainly because … I’ve got heart problems now and I’ve been on very strong medication, which sort of upsets my balance”. G4 (male 65-69)

“Before, I could do a lot of things, I was a real handyman and I was repairing everything. But, I can’t do it now. Because [of] what they told me now, I can’t go on the ladder because of my knees and through the garden. Very difficult walking you know. Over steps and all that work you know. Especially pruning, or with the trees pruning and all that. And going on the pergola, repairing plants”. E6 (male 80+)

Members of the groups were consistent in stating that the tasks they felt least able to do were ones that involved working from a height i.e. climbing ladders or getting on the roof, which included cleaning the guttering and roof work.

“I’ve got a gardener to do the lawns and I try and do other things like pruning the bushes, which is very difficult. Sometimes I ask the gardener to do it for me and it’s pretty expensive. So, I try and do as much as I can. My son and my daughter occasionally come and help me. Another thing I find very difficult is being so short, I always have to be climbing on ladders. Whilst I was putting up a curtain, I overstretched and I was in terrible agony when I got off
the ladder because I got a sort of sciatica and I was on pain killers for a few months and I had to go to the Physiotherapist. There are so many tasks that I can’t do because I’m so short that it’s a problem.” (E4 (female 75-79)

My major worry is if I’ve got to get up on a ladder. That is the major problem because it doesn’t matter whether you’re 50, 60, 40, or 30. If you get up on a ladder and you feel dizzy, you are liable to fall off that ladder”. A7 (male 70-74)

“I had a hip operation about 18 months ago and I can’t climb ladders. I have to be very careful. I find balance is not good now. So, I couldn’t dream of doing anything like going up on the roof. Although I can recall about 5 or 6 years ago, before I had the operation, I got up on the roof of my house and I couldn’t get down. I lost confidence in getting down. So, I had to sort of get down on my stomach and it was very difficult. So, lifting. I can’t lift as I once could. So, I’ve lost a lot of the power and the strength that I once had and the confidence to do lots of things. That’s the worst thing, that you probably could do it but you just can’t. I mow the lawns still but lifting… Even lifting the grass clippings worries me a little bit”. D4 (male 75-79)

“I bought the paint to paint outside my house about 4 years ago. I did undercoating, I sanded and did the undercoating where it was really bad. So, I got tools, $300 worth of paint sitting there and the house is still __________. Because I just can’t get up the ladder now. So, that was something I thought I’d be able to do. I went out and bought the paint”. F6 (female 60-64)

“When the mower doesn’t start always, I get a little bit frustrated but so far he keeps that up. Getting up on ladders, this year particularly I’ve got a little bit of a worry about getting too high there. So, I prefer not to do those types of jobs. I’m sort of really pushing a few jobs that I might have had a go at last year”. K6 (female)

“No, I was thinking about things like I used to get up on a long ladder and clear the gutters out when my husband was away because we had gum trees and it was a year long thing. And I never thought twice about getting up, even when I was over 70 but I couldn’t do it now”. K5 (female 75-79)

Even one participant who had worked at a height in his working life found ladder work was now beyond his capability.

“I’ve been mostly in building work all my life. High rise concrete work. Wore me knees out. Wore me back out. I’ve been in a back brace for many years. Ever since I’ve stopped work. But I still do a lot around the garden but I’m banned off climbing ladders. Two steps up and it’s too much”. A8 (male 80+)

Reduced finger and hand strength and dexterity had affected the tasks that some participants could no longer perform.

“Painting is one of the things. My fingers have arthritis, crook shoulders and what have you just don’t let me”. B4 (male 65-69)

“Well, I can’t do any of the mowing and things like that. But lifting things as we mentioned, or balancing on anything, I wouldn’t attempt that. So, I know my limitations. But I don’t have as much strength in my hands as I used to. People always handed me something and they’d say, “oh, can you open this?” I’m not quite as strong as I was”. D8 (female)
2.3.6 Factors influencing their choice to stop DIY

We asked participants to think ahead to a time when they may no longer be able to undertake DIY and what they thought might be the factors that would lead to such a decision. Some thought it was something that you just realized, that it is a matter or commonsense.

“It's general feeling, when you realise that you can’t do it anymore, you get somebody else to do it”. B10 (female 65-69)

“Commonsense I think it is”. B8 (male 70-74)

“Wisdom and commonsense”. D3 (male 70-74)

“Some things are absolutely impossible to do and you just have to give up the thought of doing it. Otherwise, there are serious consequences”. E4 (female 75-79)

Themes began to emerge from the dialogue as participants further explored their thoughts about when and under what circumstances they would cease DIY. Issues of ageing, loss of confidence in their abilities, fears, change in health circumstances, the influence of medication and adaptation of maintenance activities were raised.

2.3.6.1 Ageing

Group members discussed how they felt that inevitable age related declines would make them, or were currently making them, reassess doing DIY.

“I think I’ve been in the habit of doing a lot of things myself and you just keep doing them and all of a sudden you realise that age has caught up with you and you just can’t do it”. F5 (male 70-74)

Some noted that they had to consciously remind themselves that they were no longer as young as they once were.

“You have a little talk to yourself. You say, now look, don’t think you’re 25, you’re not. You just like to think you are but you’re not bad, so just work out what you should be doing and what you shouldn’t be doing”. C10 (female 75-79)

“I think you have to seriously consider your age. I mean, you’re active maybe at 70, or over 70. However, something could happen quite quick, like a heart attack, or you fall over, or something like that. So, I think before you do these things, I think you’re age should be considered. Yourself, I mean you’ve got to be more sensible now at 70 than at 50”. H7 (male 75-79)

“By the end of the day when you sort of sit down and you sort of think of the things that you used to do when you were young and what you can do now. It’s unreal.” G4 (male 65-69)

Changes in balance and stability, slowing of reaction times and increasing frailness were of concern to a number of participants.

“You think getting older and your balance being not good and those sorts of things. It’s a bit of a mental worry that you might fall, or do one of those things. You do a lot less”. D4 (male 75-79)
“I think the main thing is we don’t think like we used to when we were young. We’re slower to react and we don’t think these [tasks] through like we may have years ago”. I5 (male 65-69)

“As you get older, you get slower and you think before you act. And I think that’s a very good point. You’ve got to think about these things before you act on them as you get older”. 110 (male 65-69)

“I’m sure we all get a lot slower. I know I have. It takes you longer to do your chores. But I just think, “well, as long as you can still do them. That’s the main thing”. H9 (female)

“[I’m] getting frailer and frailer. I find it now hard to get up to do cupboards out… A couple of weeks ago, I was using the shears and the next day I could hardly move my shoulders and it went away thank goodness. But then, I was up pruning a tree one day and I must have twisted the wrong way and I put my back out and I have to go to a rheumatologist every 3 months. So, the bodies…. What’s that saying, the spirit only______ when the body________.” A2 (female 75-79)

Many participants agreed that they simply lacked the confidence to complete the types of tasks now that they had done in younger years.

“And I find the years are catching up and you’re not as steady, or as confident as I formerly was doing things.” I1 (male 65-69)

“I also think that as you’re getting older, you lose that confidence don’t you with heights?” M1 (female 65-69)

“Well, it’s lack of confidence in your own ability”. H5 (female 75-79)

Some participants indicated that it was when they acknowledged the lost confidence in their abilities that they realized that they should consider giving up DIY and getting assistance.

“When we were young, we had confidence in our own ability because we were young and strong. And I think if we’ve got that lack of confidence, then it is time to say, “ok, maybe I should not do this. Or, not say, “ok, I’m going to be independent. I will do this”. I know an elderly lady who should really be in care and she was determined to stay at home and it’s causing all sorts of problems. So, I think we have to recognise sometimes that we have to accept the fact that we’re no longer capable and get help”. H1 (female 65-69)

“I do the painting, decorating, filling up holes around the garage. Up until recently, I did the guttering also and because of the ladder incident, I used to put my ladder up on a set of four bricks and climb, so that I could get up higher. And then I realised. I mean, the ladder wriggled and all. And that’s when I realised that we need some help. I virtually do everything around the house. The only thing I do not do is I haven’t mowed the lawn, because I haven’t got a lawn mower and somebody comes in to do that for us”. C6 (female 65-69)

“Well, I relate to XX. I think he had trouble getting down off the roof but I find that too. That’s why I’ve stopped doing it, cleaning the guttering. … Getting down is pretty awful.” D6 (female 70-74)

“I had a hip operation about 18 months ago and I can’t climb ladders. I have to be very careful. I find balance is not good now. So, I couldn’t dream of doing anything like going up on the roof. Although I can recall about 5 or 6 years ago, before I had the operation, I got up on the roof of my house and I couldn’t get down. I lost confidence in getting down. So, I had to sort of get down on my stomach and it was very difficult. So, lifting. I can’t lift as I once
could. So, I’ve lost a lot of the power and the strength that I once had and the confidence to do lots of things. That’s the worst thing, that you probably could do it but you just can’t. I mow the lawns still but lifting… Even lifting the grass clippings worries me a little bit”. D4 (male 75-79)

Others had not just lost confidence in their abilities to do certain tasks but had become scared or fearful of trying to do particular things.

“It’s fear that prevents me from doing things. About five or six years ago I had the occasion to get under the house, which doesn’t have much room there, you really have to get on your stomach and sort of crawl. I fear getting under there now in case something ever happens to me. You know, there’s no way out other than to cut a hole in the floor and get me out that way. So, I think fear is the main issue there and I think…..” H2 (male 65-69)

Or, you get half way through something and you feel so damn scared. Like, I changed a light bulb. You know, hideously painful, hideously scary. I will never change a light bulb again. So, now I’ve worked out that I make sure I’ve got two big torches in case…..” G5 (female 60-64)

“You still want to but you get a bit frightened when you realise the impossibilities”. F3 (female 60-64)

“I’m always scared of having a fall because my mother fell when she was putting up curtains and broke her arm when she was ill and it’s sort of worried me that something like that would happen. And when you are on your own, you can’t sort of afford to do that”. F1 (female 70-74)

“Oh yes, makes you afraid to get on ladders. My daughter got me a special ladder that’s got a bar, which I hold onto the bar, get onto the ladder and come down. So, she especially went and looked for that ladder and it’s a very light aluminium ladder. So, I’m not too afraid when I have to go up on that ladder. But anything where I have to stretch out, I’m very scared because that’s what happened”. E4 (female 75-79)

2.3.6.2 Health/Medication

Declines in physical condition and health were also raised as an important impediment to DIY and a reason to give it up. Some noted that their bodies just “told them” when it was getting too much,

“It’s learnt my lesson. That’s when you’ve had enough. Because gardening is not really an easy job when you get onto it. It becomes a pretty hard job when you’ve got a lot of things to do. Your body will tell you when you start to feel tired…and I give it away and that’s it”. F5 (male 70-74)

“Your physical being at any age is probably going to be the more limiting factor than as you get older, because as you get older you realise that you’re not as strong as you used to be and that sort of thing”. H4 (male 75-79)

Some shared the specific health conditions they were suffering that limited their DIY activity or would limit it in years to come.

“Arthritis”. B2 (female)

“Back pain, shoulder, neck”. B1 (female)

“I think your eye sight”. I5 (male 65-64)
“If I’m going to do fiddly little things that I’ll do now but my eyes aren’t too good, I won’t be able to do that”.  **15 (male 65-69)**

“I have bad osteoporosis, so I have to be careful now. I mean it goes against the grain I must admit and I still do things I shouldn’t do but I am a lot more careful than I used to be”.  **K8 (female 75-79)**

“They also found I had Osteoporosis and that’s when I got really scared and thought, “I’ve got to stop myself being foolhardy”. Because I was lying there with a broken leg for two or three days before someone finds me if I’m unlucky”.  **F3 (female 60-64)**

“I’ve had three hip replacements. So, somebody said ______. So, I’ve been forbidden by the Doctors to get on a ladder. So, I can’t stand on anything thicker than a postage stamp.”  **H4 (male 75-79)**

A few participants reported that their medication regimes had a noticeable effect on their ability to undertake tasks.

“A lot of work I have been doing in the past, I’m not able to do it anymore. It’s as simple as that. I think you find as one gets older you get more and more medication and that sort of upsets you too. Because I’m on tablets for my heart, I’m on tablets for cholesterol and I’m on Warfarin and all that ... it upsets my balance. So, I’ve got to make sure that everything is nice and clear. Even, if I step over that block, you know, I’ll land flat on my face”. “Yeah well seek, I’m on Betaloc, which is a very strong tablet and upsets the balance completely. And as I said, you know, sometimes I just don’t know what I’m doing. I pick myself off the ground. That’s why, most of the time... You know, as I said, my wife is home all the time and I’m under constant surveillance. And yet, I like to do things but I can’t do it. You know, because when I was younger, I used to tackle everything. But now, that’s sort of gone by the board now”.  **G4 (male 65-69)**

“Second thing is, medication when we are at this age with medication. Now, I found a study and I looked at all those sorts of things. The stickers on your medication and it says very clearly, where was it? Co-ordination if affected, do not drive, or use any motor operated machinery and I only found that about three days ago because I was looking at it.”  **N1 (male 65-69)**

### 2.3.6.3 Strategies to adapt to changing conditions

Participants began to indicate that they were already adapting the ways they undertook their tasks to enable them to continue their DIY for a while longer. Some planned tasks in advance, sometimes lengthening the time frame of task completion, giving themselves more time to complete the task, or completing it over several days.

“I think as you get older it’s also a matter of pacing yourself and not trying to do as much as you used to be able to do. I mean, my mowing is an example. Half an hour and I’ve had enough but if I do half an hour each day, that achieves quite a lot. Rather than having to push myself to get it done in one day”.  **N3 (female 65-69)**

“I did have an accident on was actually on the ladder when I thought I was one step down and I was two and I fell but that was the result of that. But I’m aware of it usually and because it’s been there for twenty years and I think you learn to live with it. And I have a back problem similarly too. So, I find that if I can’t do it today, I’ll do it tomorrow. I don’t try to push”. “I think it’s the ability to recognise that”.  **J6 (male 75-79)**
“I use a mower and like him I do three different…... break it up into three sections and I’ve got a bit extra to do because I’m on a corner, I’ve got a great long nature strip down, leading into a courtyard, or a court and a front one and it’s a bit of extra grass to grow but I work it down to about three different days, I do the mowing. I’ve turned my veggie garden into a lawn, I don’t dig anymore. My back’s gone and my knees are gone”. A8 (male 80+)

“I have had a few things done with physios and my Goddaughter’s a physiotherapist, a sports person. And she gave me a bit of advice a couple of years ago. She knows that I’ll keep going and do a job and she’s told me, “hey, do it for a couple of hours, back off and then go back onto it”. And that’s one of the things that every now and then I have to say to myself—time for coffee, read book and then go and have another go because you’ve stuffed yourself up.” J9 (male 70-74)

Others undertook physical changes to their environment, or the way in which they conducted the task to ease the burden of the job.

“I’ve moved into a place, in that I’m on my own and as I get older, I have been spending money eliminating things …like the stuff in the spout [to prevent it filling with leaves], the decking instead of lawn.” H1 (female 65-69)

“One of the things is that planning is very important and my wife and I have just got to the stage where she’s 70, I’m 72, and we’re saying, “we like our garden but how much work are we going to do with it?” So, we’ve taken this choice. We’ve realigned the garden slightly differently, we’ve ripped out certain plants and we’ve made choices of low maintenance plants. We’ve had two trees chopped down and replaced [with] trees that will only grow to 4 metres tall and that’s the limit of a tree in our yard, 4 metres, which is about 12 feet and all the garden has been mulched. We got the young people from Church to come over with some enthusiasm and we give them some money. “You buy it and we’ll spread it and cut it”. We’ve now put a nice big thick mulch over and it has made a difference to how we can now control, still enjoy our garden. We still go around and pull out an odd weed but it’s certainly a lot easier than it was before. So, I think some of those things are important. To make decisive decisions about what you’re going to do.” D3 (male 70-74)

“Well, one day, I was up on the ladder, right on the top rung, the second top rung. My foot slipped and I came down right on my side. Now, that laid me low for about a month and a half. Badly bruised hip and I was lucky that I missed…….. We’ve got a border running around the house of rough rocks and I missed by about “that” much. If I’d of hit it, I would have done a hip completely and as a result, I had the trees taken out around the place and gutter guards put in and the rest of that. I haven’t needed to be up on a roof any where near as often, nor to clean them out. But the removal of the trees and the rest of it, cost us $5,400. It flattened us for a couple of years.” E5 (male 65-69)

“I haven’t got anything that I don’t believe I can’t do but at the same time, I have spent I suppose up to $500 on a number of items. Like, I don’t lift anything other than from the back of the car to the trolley and I use the trolley to take it somewhere. I am not good at climbing ladders. So, I bought two trestle ladders with a plank. So, that I only climb up one ladder and I walk backwards and forwards on the ramp. I’ve tried to anticipate my weak links and have tried to get something to help through that system. Window cleaning. I’ve got a couple up high. So, I’ve bought a hose fitting that does that type of thing. As nice as it is to have it done the other way but you have…. I’ve had to make some compromises as well”. D3 (male 70-74)

“The problem I have is keeping spouting clean and I’m always faced with the problem of cutting fingers as you go around. I’ve adopted the idea now of getting the electric blower and getting up on a dry day with rubber shoes on, so I don’t slip onto the roof and blowing leaves
out and picking them up off the ground later. So, that’s a way, or my way of achieving this.”
H2 (male 65-69)

“Well, I’m starting to know my limitations and as you said before, you’ve got to plan in advance what you’re going to do and cut out the bit that you know you can’t do and that’s anything to do with lifting, anything to do with climbing and anything that requires standing for any length of time. So, I sit down to do a lot of things that I stand at the bench to do. So, that’s a great help”. D8 (female)

Some discussed facing the big decision of moving to either a smaller residence where the maintenance tasks were fewer, or reluctantly, moving to a retirement village.

“I moved into a new unit almost 5 years ago. I was recently widowed and I sold up the house and garden and moved into a new unit so there wouldn’t be too much maintenance”. H1 (female 65-69)

“Downsize? But that’s very difficult to do too, downsize. If you feel you want to be in your home, there is a lot to give up”. A5 (female 65-69)

“What would stop me [from doing DIY] is if I follow the advice I get from my daughter and my son to move into a unit”. J9 (male 70-74)

“That’s me too. They want me to move into a unit. I couldn’t stand it I don’t think”. J8 (female 65-69)

“Well my back, my lower three disks are virtually worn out and I’ve been told that if I don’t watch it, I’ll end up in a wheelchair. I’m worried about that but we’ve got a lovely big garden and it’s only a matter of time before we’ll have to leave and move into a unit or a retirement village. Because it hurts to garden and I love to garden.” D2 (female 65-69)

“We’re on 20 acres and my husband’s determined not to move until he absolutely has to. Now, he should really be having knee reconstruction and that sort of thing and he knows when he does that, that perhaps it’s time for us to move and perhaps you need something that tells you it’s time to move to a place that requires less maintenance or whatever”. N3 (female 65-69)

2.3.7 Other DIY injury issues

Throughout the focus group discussions there were items raised regarding general DIY safety and also safety associated with particular DIY tasks or tools.

Some participants thought that greater awareness of DIY related injury issues would help prevent injury.

“I don’t know how it can be operated but they have somewhere where you give information out to people that do it themselves. Like us there. Like, not actually do’s and don’ts but things to watch out for”. J5 (male 75-79)

Another participant wanted to express the need to think carefully about the task at hand, particularly the potential risks involved.

“Think about how you’re going to do the job before proceeding. Think about any possibility which may cause an accident or injury to yourself, or a helper, such as falls, cuts, broken bones, etc. What equipment or tools are you about to use? Is this equipment etc., in good
condition, such as are tools sharp? Have you a strong and safe ladder, goggles or ear protectors? If working under a house, or on a roof make sure there is some person within hailing distance if an emergency should arise. Always notify this person of where you are going to be and what you’re doing. But the main thing is to think before you start, how you’re going to do it, what’s the possibility of an accident? It just takes a little bit to think about it. But when you’re past the do it yourself stage, it doesn’t apply I suppose. But the younger people, you know? They could use this”. H6 (male 80+)

Ladders were raised as a main concern and many discussed ladders and how to use them safely.

“ I’ve had two, or three mishaps on ladders and the most recent of which was about 12 months ago and sort of, my thumb still is a peculiar shape after it. But, I don’t know what else I can say, other than the ladder is a problem, yes!” 11 (male 65-69)

“And make sure the equipment you’re using is right. The other day, I went and bought a new [ladder] right? So, I feel more secure. I’ll still keep the other one just for putting a plank on or something, which the lower part’s alright but not for getting up towards the top of it. So, I think it’s important that the equipment that you’re using is in good condition. That’s very critical. You know, that it’s not damaged or anything like that because that can create another injury later around the track. So, if it’s no good, chuck it out”. M4 (male 60-64)

“This happened to me and I don’t worry about climbing ladders but when I was building my extensions, I had a ladder that folded in half. So, it was a step ladder and you put bolts through on the side to stop it. The only trouble is, I forgot to put it in. Now, I’m up a fair distance and I had all the stumps all in and they had a steel rod, called a special stump they are with a threaded rod and when I was up, the ladder started to fold and I came down in the middle of the stumps and it shook me up but it could have been a lot worse. I could have impaled myself and boy, I’ve never forgotten that. And, I dare say that there’s a lot of people that use ladders that are not very safe I’d imagine”. J9 (male 70-74)

My main concern is of the ladder designs of today. I believe all ladders be the A frame type, or the length type, should have a flat square rectangular base. So, it sits on the bottom. To me I think ladder design has been left over the years”. 110 (male 65-69)

“I think for safety reasons, if you’re using the ladder, we’ve got skylights in the house and they’ve got to be cleaned on a regular basis because you get dust and things filter around. Well, I think somebody’s got to hold the ladder although it’s only a short distance. But I mean, this is a big problem with ladders, they can move easy as I just said”. H7 (male 75-79)

My father-in-law, he was the one that instilled it in me there, that when you use an extension ladder, there’s always got to be two people there. To get up an extension ladder there and that there’s nobody there, well, it’s leaving itself open to an accident. Whereas if you just got somebody even if it’s standing on the ground and they can ensure that they ladders fit properly and all that”. J5 (male 75-79)

Another identified welding as a risky DIY activity.

“But I think welding is one of the riskiest DIY activities really. Particularly, now with electric welders being so cheap and they come with fairly flimsy protective equipment. You’ve got to spend more money on the mask. Especially when people tell you that they know all about it and they know nothing.” L3 (male 60-64)

One man acknowledged that he removed the safety guards from his powered tools to enable him to do more tasks, but he did realise that this was a risky practice.
My machines have guards on them. But some of the guards are taken off because you can’t do certain things. That’s one of the problems: you can get caught by taking guards off machinery. But then again, sometimes you want to get into a shaft corner or something like that and the shaft’s in the road. But, if you do reasonable maintenance with power saws or routers and things like that and put the guards back, you can do a lot of work with the guard on but sometimes you have to take it off.  K3 (male 65-69)

Some noted that it was the age of the tools that they were still using that may be an injury risk.

“The problem with us oldies is that we continue to use our old equipment and don’t buy any new equipment. A lot of us sort of say, “oh well, this year I’ll use it”.  I6 (male 70-74)

“Well I have a ladder which would be now probably 100 years old. It was my fathers and I inherited it and I was scared to use it. So, I cut it in half and used it as a rack to store things on. It was beautiful Oregan timber and it was as good as the day it was made and it probably still is but just the same, I wouldn’t trust myself”.  H6 (male 80+)

Lastly, participants talked of the problems they had with personal protective equipment.

“You see these shows on television about these’ do it yourself’ things. I suppose I break the rules but I cannot work with gloves. A face mask if you’re grinding is not too bad but…And I’ve been in the building trade for 40 odd years, so I’m used to saws and all the rest. Fortunately, it hasn’t affected my hearing, or anything like that. So, therefore I don’t wear ear muffs. On occasions that I have, I seem to have problems because you get tuned to how that piece of equipment is working. Like what the chainsaw’s doing. But if you’re just hearing a dull throb or something, you don’t know what’s going on. So, I’ve got to admit that I don’t use as much safety equipment as could be available.”  M2 (male 65-69)

“Me, I’m pretty handy. I’ve got all my own furniture and that but whatever I do with my hands, I do well…but I don’t wear ear protection… I wear eye protection but my ears, I’m half deaf anyway because I used to work in a ball bearing factory 100 years ago.  M3 (male 65-69)

I’m a model engineer. That’s my hobby, it’s making steam engines and I’ve got a workshop with all sorts of gear, a lathe and a welding machine, all that sort of stuff. I’ve never had an injury there. But one of the problems I find is… I try to use all the protective gear. You know, the cap boots and overalls and things like that but one of my difficulties is getting gloves that are the right size. I’ve got a fairly small hand and I just cannot get a decent pair of gloves that will fit properly and that’s a key thing. I can’t use gloves when I’m working on the lathe for instance because things are likely to get caught”.  L3 (male 60-64)

“So, you’ve got to wear safety glasses. So, they should be supplied with the grinder too. Ideally, if the thing doesn’t work, at least you’ve got your glasses on. That’s the safety factor there.”  A7 (male 70-74)

Some participants had given these safety issues a good deal of thought. Several came to the focus group with pages of handwritten notes about home safety related issues. These notes have been scanned and are in Appendix 5.
2.4 WHAT WOULD CONSTITUTE ACCEPTABLE LOW RISK DIY ALTERNATIVES?

Questions 8-13 in the themed question list were designed to address the second research question: What constitutes low-risk alternatives to DIY?

Questions covered issues such as:
- Where would you look for assistance with home maintenance?
- What are the most important factors in choosing an alternative to DIY?
- Would you be willing to pay for assistance with home maintenance?
- Do family and friends assist with DIY?
- What DIY alternative services have you used and have you been satisfied with the service?
- What is your best alternative to DIY?

2.4.1 Where do you look for DIY alternatives?

In assessing what DIY alternatives our focus groups may prefer we first asked where they may, and do, look to if they need assistance with home maintenance. There were a number of avenues identified for sourcing DIY alternatives including the council, local papers, recommended tradesman, and family, friends or neighbours.

2.4.1.1 Council

The council was a commonly identified source of assistance with home maintenance among both HACC service users and non-HACC user groups. From HACC service users we heard a general consensus that the council HACC services were reasonably priced.

“The Council, their rates are very, very reasonable”. G4 (male 65-69)

“I only recently discovered that the Council would do the guttering and the windows once a year. And that was a Godsend because the charge was reasonable.” C4 (male 75-79)

The only concern raised was the limited number of tasks covered by HACC services.

“They don’t do everything though”. G2 (female 60-64)

Non-HACC services users had mixed reactions to the usefulness of council in providing assistance with DIY alternatives.

“I’ve had the experience once of talking to Monash Council and asking for advice from them. But in the past they didn’t seem to be interested”. H7 (male 75-79)

“Actually, our Council is excellent. I spoke to a lot of people from other areas and we’re very lucky, what Monash do for the citizens is excellent, compared to other municipalities. We get heaps of help, we really do. Not only that, we spend out of our budgeting mainly, a lot of money on aging care…. you compare it to other Councils and we are very lucky”. H3 (female 70-74)

2.4.1.2 Local Newspapers

Almost all groups were universal in suggesting the local paper as a means of finding a tradesman to do maintenance job.

“Local paper. I always go to the local paper first”. D7 (female 65-69)
“I think the local papers have got an area of different advertisements for different tradesmen. I normally get that. Or, I put an ad in the local paper”. L1 (female 60-64)

A number of participants had positive experiences using trades or handypersons who advertised locally.

“Well, [husband] got someone through the local paper, we get the Leader and we get the Journal, and they came and did the leaves for him and they hardly charged him anything because he’s a pensioner. He expected it to be pretty costly.” B9 (female 80+)

“I went to the local paper too in regard to the front porch and the first guy I rang up out of the local paper, he didn’t do that sort of job but when I rattled off the names of the other guys I was going to ring up and get a quote, he said, “well, I wouldn’t have that one, I wouldn’t choose that one, but I would choose that one”. D2 (female 65-69)

“Well, there’s the tradesmen’s section at the back of the local newspaper. I used them quite frequently and if you know who you’re listening to and you can gauge whether he’s talking rubbish, or what he knows what he’s doing. And then, the final line of course, being Scottish, is how much is he going to charge to do this? And, I make up my decision that way. When I’ve had to it and I’ve always found that most of them have been pretty satisfactory”. I1 (male 65-69)

Some though were more sceptical about picking a random tradesperson from an advertisement.

“I do too. But there’s nothing there to say, “he’s a good one”, or “she’s fantastic” and that’s the problem, yes.” D5 (male 65-69)

“I read years ago that you shouldn’t use the local paper, you should use the phone book, because the fly-by-nighters and that, are usually in the local paper”. D4 (male 75-79)

Others recalled difficulties in getting someone who advertises in the local paper to do certain jobs, or to even come to their home to quote the job.

“You look in the paper for ads I suppose but if it’s a small job, they don’t want to come”. G2 (female 60-64)

“We wanted some new front gates and we thought…. well I’ve always believed in giving the local people a go first. But you ring up six or eight people, they tell you they’ll be there tomorrow at 3:00 pm and nobody turns up.” H7 (male 75-79)

“We usually look in the Leader… and then we hope for the best and we ring them. You know, and we say, “well, we are in Springvale, so you’re not that far away. Are you able to come and tell us if you’re not able to come, say so”. It’s no use telling us we are coming, if you don’t want to come.” E7 (female 80+)

2.4.1.3 Recommendation
Participants in several focus groups discussed their preference for trades or handypersons who were recommended by someone they knew or someone they’d heard of by “word of mouth”. This recommendation reassured many of the participants regarding the reliability, honesty and experience of the trades or handyperson.

“Yes. I think recommendation is the best thing. If somebodies done a good job for somebody else”. B3 (female 70-74)
Friends and neighbours were often seen as a good source of recommendation.

“I’d ask my friends. You know, where do you reckon I’d go. Do you know anyone? Do you know an electrician or something?”  G5 (female 60-64)

“Generally speaking, ask your friends and neighbours who they found and who they feel are reliable and trustworthy.”  K5 (female 75-79)

“I think that we should get recommendations from friends. We’ve got one plumber that we’ve had for years. So, I would recommend him to anybody that needs a plumber, I’ve said “go with them, they’re reasonable and good”.  E10 (female)

“I’ve found if I needed someone to do something, which is not very often, I’d prefer to ask a neighbour or someone who would prefer to do so and so. Because what was he like, was he a good job, or reliable, yes or no.”  H6 (male 80+)

Another sought recommendations from a family member who was in the business.

“Well, my son’s in a trade and he just recommends somebody to me. He could do it for me but he’s so busy with his own work, you know, that he just hasn’t got the time… But he’s a plasterer and he knows everybody in the trade. So, I just ring him up”.  J8 (female 65-69)

A resourceful participant found her gardener when he was assisting with the neighbour’s garden.

“Well we get someone who comes and does all the hedging for you. Because we saw him doing the neighbours and he’s very good. He’s been doing [our hedges for] about ten years”.  B11 (female)

Several participants recommended going to see the prospective tradespersons work before offering them the job; this gave them the chance to view the standard of work and even speak with previous customers to see if they had been satisfied with the job done.

“We had a lot of paving done and we asked all the people who gave us a quote to give us some addresses where we could go and have a look at their work. But that was a big job.”  I2 (male 65-69)

“Finding out what other jobs he’s done and if he’s willing for you to see them. You know, it’s like most of these things, if you want to find out what they’re doing and what they’ve been doing, you can go and find out from the other people. If they don’t want you to go and see somebody else, you don’t have them.”  L2 (male 60-64)

“With my brickie, as I say I was very fortunate … he said “look I’ll tell you what I’m going to do, I’ve done four jobs and these are the people’s name’s, go and have a look at them”. I went and had a look and I asked the people what is the job like, “did he clean up, was he on time”. And they said, “he arrived the first day at 7.00 a.m., the next day at 6.00 a.m. and the job was finished by 4.00 p.m. He cleaned up and he went and there wasn’t a skerrick of dirt left and I said, “that’s the bloke I want”. And that’s the fellow I got and I was happy I went to the people and I looked at the job and I spoke to the people and they gave me every confidence in the man and when I left if anybody wanted a brick job, I’d recommend him.”  O4 (male 65-69)

2.4.1.4 Others

Other suggested sources of DIY alternative included The Grey Army, local clubs and community groups, commonly know franchised businesses such as ‘Jims Mowing’ and the phone book.
“I’ll just mention, there’s a group called the Grey Army, they’re good”. I4 (male 70-74)

“Well, when we had that lecture from the Grey Army, Probus I think it was, they said that they met all the people that work for them. They really go into their background and they virtually say, “we recommend them and they trust them”. Because they get them very carefully. So, that’s something you can think about”. K1 (female 75-79)

“The Grey Army are purely a collection of a variety of tradesmen whose work is co-ordinated by a mob called The Grey Army. They’re all ages. But, they will say… The price they will quote will normally be the same or less than a competitor. A competitor or individual tradesman”. “You ring up the Grey Army and say, “I want a plumber”. And they’ll pick a plumber off the list who happens to live around the corner from you and give him the job”. L7 (male 65-69)

“Our verandah steps… We have forty steps that were all timber and after 27 years they all needed replacing. So, I rang around to I’d say at least 40 different companies because I just couldn’t afford it. The prices were outrageous and then I got onto a firm called The Grey Army and I got them out and their quote was under half the price for the bigger verandah, the full verandah”. L5 (female 60-64)

However, some participants found the Grey Army were not as they expected, i.e. not all older tradespersons.

“Well, there is the Grey Army. A friend of mine had success with them. I had a plumber from them …… they didn’t only have what I imagine were nice retired building people. You know, that were doing it in their older age. But they were sourcing their people from… small businesses. A3 (female 75-79)

Three male participants talked of the work they did with local Lions Club’s to help older community members.

“I’m in the Springvale Lions Club here and we’ve got three or four ladies that are on their own and we go and do light things for them [gardening]. Most of them, they just ring up our club and we go and do it. One chap, my friend, he helps me out. He’s got a chainsaw. It’s made pretty easy, we all do bits and pieces. We’ve got three or four we do around the area now. We don’t charge. If they want to give a donation, we’ll accept it but we don’t charge for them. So, that’s one thing, it’s worth trying out”. F5 (male 70-74)

“I was a charity member many years ago of the Caulfield Lions Club and we did a lot of work, many weekends.. for about 18 years. Older people, ladies widowers. We used to go and do the gardening, the pruning, we’d do everything, paint the house, we did all these sort of things. I think it was about 18 years in there. We did one lady’s home, we painted it, we did the garden and everything. There was about eight of us and it took about three days, what we did. A chap came along and he said, “oh, you’ve done a great job fellows” and he gave as half a dozen boxes of beer. I said, “who are you?” He said, “I’m her son” and we never saw him. He never came near the place while it was being done. That ruined it …we never did another thing then after that, that was the end of it.” C7 (male 80+)

“I’m with Oakleigh Lions Club and we approached the Council and we did a survey helping them out. We went around all the streets, seen what was what [with overhanging trees] and what had needed trimming and I think that helped them out quite a bit that way”. Male

Lastly, other suggestions were for Jim’s mowing and the phone books.
“There’s Jims Mower Service and things like that but they’re pretty expensive”. F5 (male 70-74)

“If I wanted a service, I think I’d use the Yellow Pages”. J4 (male 75-79)

“Phone book”. K8 (female 75-79)

2.4.1.5 Family, friends or neighbours

The issue of using unpaid assistance via family, friends or neighbours as DIY alternatives raised perhaps more discussion than any other question from the themed list. Many participants indicated that this form of voluntary assistance offered by family, friends or neighbours would be their most desired DIY alternative.

A number of participants noted that they were fortunate to have family either nearby who could help, or could come quickly when they needed the assistance, or made dedicated time to assist.

“My first step would be family, my son, or daughters, or son-in-law.” M2 (male 60-64)

“Well, my daughter did medicine, so, she’s realistic, she knows that we’re getting on and we need help. So, she rings up and she says, “What are you doing Mum? Are you ok?” And if you’re doing something that we need help with, her husband’s marvellous, he drops everything and he comes over. I think our families need to know that we need help.” A5 (female 65-69)

“I had a son that came over from Adelaide and he had three days to spare last week, the week before. He came over and worked in the garden for three days for me, which was wonderful. To have found somebody to have done that would have cost me a lot of money”. I8 (female 80+)

Others received the same sort of assistance from neighbours and friends, sometimes in lieu of family who do not live in close proximity.

“I’ve got good neighbours. I’ve got a good neighbour man behind me, next door to me but you know, he’s the only active one around. Our fire alarm went off at 3.00 am one morning and there was no way I could get up to do anything to it. So, we plugged our ears and shut the door. So, 9.00 a.m. I went down with him and got the ladder out and he got up and fixed it for me. He said, “anytime!” He did change a light globe at the same time while he was there. So, he’s alright”. A8 (male 80+)

“I’ve got two neighbours now and they are like son and daughter. I go shopping every Wednesday with this one and she’s only in her only 40’s and she’d do anything for us because she’s just like a daughter. The other neighbour over the road, they’re separated from their partners, or their husbands and wives. And of course, now they’re so close to us, they’re like family and we treat them like family”. B3 (female 70-74)

“You can rely on neighbours I think. More so than family, because they’re closer. Perhaps not close in the sense of relationship but they’re handier”. B8 (male 70-74)

“Well, I’m very lucky, I’ve got a neighbour, they’re a couple. Whenever I’m in trouble and things go wrong, I always give him a ring and he does come and help me, like changing the globes and doing the small tasks. I’m very, very lucky to have him as a neighbour. If I didn’t have him, I’d be completely stuck. Because my daughter lives quite a distance from me.” E4 (female 75-79)
“My friend does help. Depends. He’s got a pretty busy life. He’s retired. He’ll come up and do the heavy work. He’s 60 himself. He’s much younger than I am and he can get in and do some of the heavy work and I just help him. You know, that makes a big difference. The family are always busy, they live far away. You know, they’ve always got something to do. So, you’ve just got to resolve to the fact that that’s the way it is. If they lived closer, then maybe they’d help but you can’t expect them to come from a long way away just to help you out with jobs and that”. F5 (male 70-74)

“Well, I only have one daughter, who is living on her own, not married or anything. Neither my husband, or I have brothers or sisters. So, she is my only family. She lives at Elwood. She has to go to work. But I’ve got a wonderful network of friends who help me”. K5 (female 75-79)

Several participants remarked that they had reciprocal arrangements with their volunteer helpers (family, friends or neighbours). Past deeds and kindness or some participants in helping others in their community meant they now had a source of assistance when they found they needed it.

“We have a lot of reciprocal friends and family arrangements where they help, we help”. D5 (male 65-69)

“We lived in Noble Park for 40 years and when I was well and fit, I’d help the neighbours out with different things like cutting the grass, or whatever it is. Well, now I’m incapable of doing little things and they’d do us little favours in return”. G4 (male 65-69)

“Up until June this year … I had done that for other people. I’ve had about five elderly ladies where I have been that tap washer, that light globe. I have found that in doing that, there is a number of other people who are around the suburbs that actually do that for their elderly neighbours. They’re invisible ghosts that do things for people. You know, it’s just about being kind people in the neighbourhood.” D3 (male 70-74)

There were as many participants who were unable to access this type of voluntary assistance, commonly because they did not have any family, the family do not live in close proximity, or are ill or otherwise unable to provide this type of assistance.

“But some of us haven’t got any family”. A2 (female 75-79)

“Well, it depends on the child and it depends how close they live. Now, I have a daughter that little far to get her to come over and I have a son that lives in Point Lonsdale. That’s too far too”. L7 (male 65-69)

“I’ve got two kids. One’s sick, one’s living in Italy permanent. I really don’t have much family here. I have can’t rely on anyone.” A9 (female 70-74)

“Well, I’ve got no family here. My daughter’s in South Australia and my son’s in Queensland. Now, I’ve got nobody.” B7 (female 75-79)

“We don’t use the family; they’ve got their own obligations. In an emergency they always come good but regularly, no”. D4 (male 75-79)

“We don’t ask our family. If we’re desperate they’ll come. They go to work, they’ve got their own lives.” H8 (female 75-79)

Some others however found that they were the youngest members of their neighbourhoods or circle of friends so would not expect assistance from these avenues.
“My neighbours, I’m one of the youngest. My neighbour next door is 85 years old and I’m in an older area, there are no young people. So, I can’t ask my neighbours male or female to climb on my roof”. C6 (female 65-69)

“I’ve only got one of my family living in Melbourne. The others are [in the] Northern Territory and three lots in Queensland but I’ve only one in Melbourne and she’s busy all the time. There’s too much to do. You know? It’s frustrating. Where I live, in a group of sixteen units, they’re mostly older people like me. My next door neighbour is 98. She’s dying, she’s 98. She’s weaker in the legs than I am but there’s no way I could ask her to do something”. G3 (female 80+)

We don’t have children, we don’t have relatives here or anything. The friends we’ve got are our age, or older, so we don’t have to ask them. We’ve got one friend who is .. helpful but she will be 75 next year, so she can’t do much either.” E7 (female 80+)

There were several reasons that those who were able to access this voluntary assistance from family members were less inclined to do so. A few of the male participants noted that even though they knew family were more than willing to provide assistance they resisted asking for it as they were still willing or able to do DIY maintenance tasks.

“I would be reluctant to ask my family to help me but the minute I did, they would be there. I only have to ask but I still like to be a little bit independent”. J4 (male 75-79)

“Mine are very willing now. In fact, they’ve all turned out to be very useful with their hands and they’ll do anything. But I still reckon I’m up to it, so I don’t.”. J6 (male 75-79)

In direct contrast several female participants felt that they should agree to family offers of help for if they did not the offerers may consider that they do not need any help and offers of assistance will be withdrawn.

“I think sometimes you really need to give in. You need to give in because you’re offered help and if you don’t accept it, eventually they will say, “No!””. A5 (female 65-69)

“I’m fortunate to have two daughters who live in Melbourne. Both of them work, therefore I’m careful what I ask them to do. But I do make a point of asking them to do my shopping for me, because as soon as I say, “oh, well no, I’m alright”, well they’ll think I don’t need any help and I will be obliged to use the people from the church who are very kind, or my neighbours. I think family should really take the responsibility first. They like to do it but it’s very easy to forget mum and think she’s ok”. D8 (female)

Several participants appeared reluctant to rely on their families to provide maintenance assistance because they either doubted the family members capabilities, couldn’t wait until the family member could find the time to provide the assistance, or found it was otherwise difficult to negotiate the tasks they may want assistance with.

“I wouldn’t know what to do if he came over and said, “do you want a hand””. Male A

“I wouldn’t let my son near my place”. Male J

“Well, I would [let me son come over] but I’ve got to wait too long”. I5 (male 65-69)

“If you don’t rely on children, I think you’re better off. If they help you, great, but I think it takes too much energy out of my day to tell my daughter to do something for me. If she wants
to do it, so much the better, you’re surprised and you say, “thank you darling, you’re very kind”.  L1 (female 60-64)

“All, the grandchildren, we’ve got grown up grandchildren now and they’re all busy and doing all sorts of things. So, I sometimes think, “Derrick could do that for me”. But I can never catch Derrick. So, no, we don’t rely on the children”. H1 (female 65-69)

Commonly, focus group participants did not want to rely on children, particularly noting how busy their children’s lives were, with their need for home maintenance assistance.

“The family’s grown up now. They’ve got their own things to do. You know, they haven’t got time to drop something and come around and help. So, you get frustrated and say, “right, I’ll do it myself”. That’s what happens”. F5 (male 70-74)

“My son, he’s always travelling. But I don’t even think about asking them”. J9 (male 70-74)

“I’ve got 3 strapping sons, they’re all 5 or 6 feet but to get them there to say “Look Andrew, will you come and do this for me? Do that for me?” They’ve all got their own families, so you’re left to your own devices really. A7 (male 70-74)

“I’ve got a daughter living in Endeavour Hills but I mean, she’s got 4 children. I mean, she’s got her life, she’s working. So, you can’t all the time just depend on them. They have their lives too”. E2 (female 75-79)

“I have a son and daughter-in-law who work in a hospital. It’s quite time consuming. Another son’s got his own business and his got his own children. Nowadays they just seem to cram so much into their lives. They haven’t got room, nor the time”. E8 (female 75-79)

“I don’t think you can rely on your family, they’re usually busy with their family”. L3 (male 60-64)

The kids are great but you cannot take up their time with these sort of timely tasks week after week after week. C4 (male 75-79)

Some were especially concerned about being seen as a nuisance or burden on their families. They particularly were concerned that if they were asking family to provide maintenance assistance that they would be taking away from quality family time.

“I think it’s not really being embarrassed, it’s being more like, “I don’t want to be a nuisance”. A4 (female 65-69)

“I have one daughter who lives in Melbourne who is wonderful. She’s caring and we speak say, every second day on the phone but she’s only quite young and she has a very, very busy life and I don’t want to be another pressure on her. And I don’t want her to feel even more stressed because she thinks she has two houses to maintain and… two house budgets to worry about. She’s my daughter. You know, I’m her mother and I want her to enjoy my company and the children to enjoy coming to see me. “ G5 (female 60-64)

“My son-in-law came once to fix [a dripping tap] and he’s not a tradesman at all but he did it finally but it took him around two hours you know? So, I was grateful for that but like everybody else, my family are all busy, they’re working all the time and my son lives past Geelong and he comes up to see me but I’d rather sit and talk to him and his family you know? Does that make sense?” F1 (female 70-74)
“As with asking family, I’ve only got one of my four living in Melbourne and she has three young children and her husband works, she works and everything. I can’t infringe on their free time. I’m happy for them to come and see me and I’m happy for them to do little things but as to ask them to do a job, no, no way. I’d prefer to bring somebody in and pay for it”. I8 (female 80+)

“If they come to visit, it’s a social visit, you don’t feel like saying, “can you prune the roses while you’re here?” You’d just rather spend social time with them”. I2 (male 65-69)

There were also some traditional stereotypes of gender roles in household tasks that appeared to dissuade participants from asking their available family for assistance or place expectations on what they should be able to do.

“I’ve got a family of five and four of them are girls. You can’t ask them to dig the garden.” A8 (male 80+)

“Well, I’ve got two daughters and no husbands. No men around anywhere. My husband left and I brought up my kids on my own. There’s no man around anywhere to do these things. “ G2 (female 60-64)

“My son does most of mine….I can’t do it because my arthritis is a factor, whereas I’ve got not strength in my hands anymore. So, I just give it to him. When he does it. If you sort of get on his back, he says, “don’t nag, don’t nag”. Like all men, they do it in their own time. But, he’s pretty good. If there’s anything like tap washers that need changing, I’ll say to him you better get onto it before it gets worse because the longer you leave it, the worse it gets. So, he gets onto it eventually”. B3 (female 70-74)

As the discussion of voluntary assistance continued an interesting theme emerged regarding participants perceptions of cultural changes. It was generally agreed that changing family structures and multicultural society have impacted on the level and types of voluntary assistance they have seen or been a recipient of in the past.

In the family context participants stated that their children have different priorities compared to the times when they were children on providing support for their parents.

“With the children, it’s always a bit of a problem because they never have time and we live in a society now, where we haven’t got a support system of the family. You see, in the Southern European countries, you have the support system in old age of the family. Well you see, if you have got a family who is still like that, they’re mostly Italian or Greek, they still stick together and they look after their aged. We haven’t got that now anymore.” L1 (female 60-64)

“Children. They do grow away from you. I know mine do. One time, I had one sitting on each knee but I mean now, sometimes they don’t even come over to visit. They stay home and do their own thing”. B3 (female 70-74)

“I seem to think in our day, as young people, we wouldn’t hesitate to do something for our mum and dad but it’s different [now]. “ F7 (male 60-64)

“I can remember as a lad, I left home at 17 but before that all the kids were working at home, whether it be gardening, cutting the lawns or whatever, the family was well organised”. L7 (male 65-69)

“That’s the trouble with television and computers and things. They haven’t got time”. (Female J)
One male participant noted that roles appeared to be reversed and rather than his children doing tasks for him he was providing the assistance to his children instead.

“At the moment it’s been in reverse. My son-in-law’s saying, “come on, get over here, give us a hand. He’s been brought up in an environment where he never learnt anything because his dad never did anything. So, I’ve taught him a lot, right? So, yes the time will come when I’ll say, “come and give us a hand”.”  M4 (male 60-64)

Concerns of societal changes extended beyond the family to the neighbourhood and a less involved relationship with neighbours compared to times gone by.

“I’ve lived in my house for 30 years. Before when all the children were growing up, we knew the neighbours much more but things change very much and we’ve sort of gone through the cycle and now we’re back to very young families living there. So, I’m like a Granny. There’s all young families around and it’s not always easy to have a lot of interaction. So, they’re all kind people but they really don’t know me and I don’t know them. Their lives are very busy, so we wave but it’s not quite the same as having neighbours you know and share experience and reciprocate kindness to one and other.”  G5 (female 60-64)

“I today’s environment, we sort of live our own life, we don’t have much to do with neighbours to a certain extent. [You used to] just go across the road and say, “can you give us a hand with this will you but now it’s not so much”.  M4 (male 60-64)

Several participants noted that with an ever-increasing multicultural society, language barriers were a potential impediment to having the close relationship with neighbours that they may have had in the past.

“Well, my neighbour, they’ve been there nearly as long as me and they said if I sell up, I’ll sell up...because all around me now is Asians and Indians and they don’t seem to want to connect with you, you know? I mean, I say hello to the ones across the road and that’s it”.  J8 (female 65-69)

“I lived here for like I say, 39 years and they were mostly Australians when I come here. Now, I see nothing, I hear nothing. Very nice people, Asian people but I see nothing and I hear nothing”.  B6 (female 65-69)

“Across the road were Chinese people. You know, I don’t speak the language...so there’s no help from my neighbours.”  G2 (female 60-64)

2.4.2 What factors are important when choosing an alternative?

After finding out where participants may go to seek alternatives to DIY we then asked them to share what factors were most important to their decisions on whom to choose. The main factors that influenced their choice were associated with: cost, including risk of being overcharged; reliability in terms of finding someone to do the task at hand, and do a good job; security, especially for vulnerable older persons living alone; recommendation from another source; and the general approach of the trades/handy person.

2.4.2.1 Price

Price was one of the most important factors influencing choice of DIY alternatives. Participants were very conscious that they, or other older community members, found themselves on fixed incomes making DIY jobs a big financial commitment.
“Cost is everything”. F7 (male 60-64)
“You have to think of the maintenance it’s very expensive and when you’re on a pension, you just don’t have the extra money to sort of call somebody in. They charge exorbitant prices, that’s even if they’ll come. Usually, for little jobs they won’t even bother but you know, I think price is a major factor”. C2 (female 70-74)

“Costs before they [a tradesperson] even comes. Because you get $200 a week. So, if they charge you already $100, $65 just to come out. then they charge you $65 bucks an hour”. M3 (male 65-69)

Others were fearful of being seen as vulnerable and susceptible to being overcharged, especially if it is a small job that the trades/handy person may not really want.

“I think a lot of tradesmen certainly see your vulnerability. They know that you’re desperate and they overcharge”. A10 (female)

“I’ve got quotes starting from $25. But my quotes went up to $85. And whether it’s just a little job and they can’t be bothered, or they just think that can charge the earth if you look a bit vulnerable. I’ve never worked out what it is but…..” F3 (female 60-64)

“But I do think some people over quote in pricing because they really don’t want the job and that’s what I’m always a little bit frightened about”. I3 (female 60-64)

Many strongly suggested the need to get several quotes as a means of working out if the prices offered were reasonable.

“But I have been told, “get a quote first”. Because sometimes they come and they may not charge you much and you get them again and they may charge you twice as much. So, it’s always advisable to ask how much it is going to cost”. K8 (female 75-79)

“Don’t get one quote, get two or three quotes. They don’t like it because everybody wants your job but I strongly recommend get quotes, don’t be frightened, open your mouth. It’s your money, not theirs and the local paper is usually the best because the people that advertise are looking for work and they want to create their jobs bigger and bigger.” N1 (male 65-69)

“Whether they are a registered tradesperson, and the price sounds reasonable, you get a couple of quotes. I mean, some might be $300, another might be $800. “I think, registered person, or a qualified person is the best thing. Regardless of price. I think if you get someone who say, needs $200 and you get someone that says $500 and they’re qualified, I think I’d rather take the one that you pay $500. Somebody who knows what they’re doing”. B8 (male 70-74)

“I got somebody to replace the capping on the roof and the channels… One chap I spoke with was $3,000 around about and another one was $800. My son said, “go for the $3,000 one”, because he’ll do a good job. Anyhow, the $800 for some reason… I don’t know why but I had another chat to him, I told about the $3,000 and he said, “the bloke’s taking you for a ride”. He listed how much it would cost him for the channel, for the water and how long it would take to do the job. He said, “I am making a profit at $800”. The $3,000 I would have paid. D6 (female 70-74)

In addition to overcharging, another participant retold an experience of potential over-servicing.

I needed new handrails, and I had somebody out of the paper come to do them. The man was so rude and unpleasant, and….. once they know that you’re older and on a pension, they
think that you must be stupid as well. And if you question the price, or what they’re saying... they’ll say, “oh, you need this, this, this and this”. Sort of over servicing and I’ll say, “well I don’t really think so. Perhaps…. I don’t need all that done at the time, could you just do what I’m requesting?” And they’ll sort of get quite, not abusive but “Oh, what would you know about it”. Well, you know, it doesn’t make you feel very comfortable doing it”. G5 (female 60-64)

2.4.2.2 Reliability
Finding a reliable tradesperson and trusting that they are willing and able to do the required job was another factor of importance when focus group participants sought a DIY alternative.

“This applied when I was working and getting tradespeople to do work. You need to know how reliable they are and what sort of work they are capable of doing because I couldn’t think of anything worse at home if they come and do a brummy job and I’ve got to look at it for the rest of my life”. J9 (male 70-74)

As previously stated a number said the best way to find someone reliable was to seek recommendation from friends, family or neighbours.

“Generally speaking, ask your friends and neighbours who they found and who they feel are reliable and trustworthy. That’s the first thing I would do”. K5 (female 75-79)

“I would ask someone. Say, “have you ever used such and such””. C11 (female)

“I think that we should get recommendations from friends. We’ve got one plumber that we’ve had for years. So, I would recommend him to anybody that needs a plumber, I’ve said “go with them, they’re reasonable and good””. E10 (female)

“I’ve found if I needed someone to do something, which is not very often, I’d prefer to ask a neighbour or someone who would prefer to do so and so. Because what was he like, was he a good job, or reliable, yes or no. You’re not employing somebody who doesn’t know what they’re doing in some cases.” H6 (male 80+)

“I like using someone that we know. I don’t have a problem with that. But, I always check first. The first thing I do is ask my immediate friends if they’ve used an electrician, or somebody...”. I5 (male 65-69)

Many focus group participants expressed frustrations at finding trades/handy persons who would be willing to come to look at the task at hand.

But, I don’t know how you choose tradesmen, some don’t turn up. Even people who are recommended, sometimes they don’t turn up either. We’ve been trying to get our patio, which we put in ’56, it’s got a slump in it and water just pools there when it rains. We’ve been trying to get somebody to come and do that for six months and it must be a difficult job, no one wants to do it. D4 (male 75-79)

“If they don’t want to do a job, you know, they’ll just say, “that’s alright, don’t worry”. I had someone come to look at storm damage …I had rain coming in the kitchen roof. So, one guy gave me a quote….. it was about $3,000 - $4,000 and then, this other guy came. He obviously didn’t want the job because he just rang the front door bell and I saw him disappear quickly before I could even open the door, put the card in the letterbox and he was off. I caught him before he even got in his car and I said, “oh, you haven’t even looked at my roof” and he said, “oh, it will be alright” and I said, “how can it?” So, he got the ladder out eventually and
then he said, “oh, I wouldn’t worry too much about that you know”. So, he didn’t really want the job to do it anyway.” K6 (female)

“I approached four different people to do the job. Two of them never even turned up. The other bloke turned up and said that he [would] organise it and get back to me and never did.” O1 (male 65-69)

Finding someone to do the small jobs that had become too difficult for a number of focus group participants to do themselves, appeared to be even harder.

“Unless it’s a big job, they’re not interested. I wanted the windows painted outside. Nobody wanted to come to do a two hour job. Unless you want them for two or three days, they’re not interested”. B7 (female 75-79)

“When you have a smaller job, [even if] you have a list of people, they’re all willing to do a small job but when it comes to the actual job, they’re not really interested”. D5 (male 65-69)

“Little jobs, it’s very hard to get somebody for it. They tell you, “oh yes, we do everything small, or large”. They tell you they’re coming and they’re not coming”. E7 (female 80+)

“Well, I have known people… It hasn’t happened to me but I’ve had friends who’ve needed comparatively speaking a small job. They’ve eventually got somebody to come and they don’t want to do it, so they quote an outrageous price so that you’re not going to get them to do it”. K5 (female 75-79)

Some participants noted feeling more secure and comfortable knowing that an over-riding organisation, like the council or the Grey Army, took some responsibility in the way the task was completed.

“With the Grey Army, they tell you exactly how many days it’s going to take and I mean, the man rang up and said, “look I’ve got a shocking cold, I don’t think I can come tomorrow”. I said, well that’s fine with me, as long as you fix the job. So, he was an extra two days but that didn’t worry me because he just rang up and told me and he sounded shocking on the phone. But, they do give you a quote time and the company did ring to say, “is it finished today”. And I said, “no, because he’s been off two days sick” and he’s finishing this week. You know, so they do check on it as well”. L5 (female 60-64)

2.4.2.3 Security

Feeling secure and safe in inviting strangers into one’s home to undertake maintenance tasks was a real concern for focus group participants. They felt that older people in our community are, or are seen as, vulnerable and therefore at risk of being taken advantage of.

“You don’t want to get the wrong message here, there are a lot of good people out in this world that will do these things and help you. But there are a lot of [un]scrupulous people out there. If they know that you are vulnerable, they will take advantage of you. That’s for sure.” A7 (male 70-74)

“Isn’t it a bit of a worry to have strange people in your house sometimes”. L1 (female 60-64)

“I won’t just have a stranger walk in the house. Especially when you’re on your own, you’ve got to be doubly careful and that you let somebody in. So, I won’t go to somebody unless they’re recommended”. B7 (female 75-79)
“When you’re on your own, you can’t trust people”. “Living on your own, I am very conscious of if I ring the local handyman from a newspaper, I don’t know him. Do I trust him? I’m very wary of people. “So, in desperation I might take a name from the newspaper” C6 (female 65-69)

“My husband always says, “they might be coming to check out what you’ve got in here” Of course, he’s very cautious with any strangers, “don’t let them in, don’t let them in”, which I wouldn’t do anyway but you do have to be careful”. C2 (female 70-74)

“Well, I had [a] cracked …. window, so I got the insurance people to send me out a lady, I was covered you know? The chap that came though, I didn’t really like him asking me could he use the toilet. You know, he had three studs in his chest and a couple up on his forehead and he looked so scruffy. Anyhow, I hid my bag under a cushion and gave him a cup of tea and biscuits but I really didn’t want him inside the house”. C9 (female 80+)

“Yes. You don’t know if they’re just sort of casing the joint and then they’ve got associates that they can say, “oh yes, well, you know, there’s this, that and the other in that house, you could go”. K5 (female 75-79)

The participants discussed the strategies they use to try and protect themselves in the situation where a person unknown comes to their homes.

“If you ring up somebody out of the Trading Post, which you’ve never met before, or has not been recommended by someone else, make sure you’re front fly wire is locked and ask his name and where is he from, right? Usually he has a business card, that business card usually corresponds with the advertisement in the paper.” N1 (male 65-69)

A number of participants mentioned that they always ensure that they have someone at home with them when trades/handy persons or other strangers are scheduled to be there. Some even ensure that they give the impression that this other person lives with them permanently.

“Well, what I have done. I have had to have somebody come in and like for cleaning the carpet, you know? But I had a neighbour hang around, they think that person’s living with me. When they [MUARC] handed out that form which said, “are you living on your own”, [demographics questionnaire] it took me a while to write “yes” because you don’t want to [let people know these things].” B7 (female 75-79)

“I wouldn’t have someone coming through the house if I was on my own and there was no one else there”. J2 (female 60-64)

“Even if I had to get somebody in I’d have one of my daughters who just happened to be visiting one day, or something like that”. J5 (male 75-79)

“When I’m in the house, my daughter stay with me too and he told her, he say, “oh, you live with your mum?” and she say, “yes” because I told her, don’t tell him I live by myself. Even people ask me, “do you live by yourself?” “No, I’ve got my grandchildren, or my daughters are with me”, I don’t ever tell people I live by myself. Well, I have to lie sometimes too. Somebody ring me up and he want to speak to my husband and I say, “no sorry, I can’t wake him up because he has had medication and he’s still asleep”. Well, nobody knows what’s going on in the house. Because you don’t know isn’t it. I mean you don’t trust nobody.” B1 (female)

Others ensure that they have another’s voice, often a male family members, on the answering machine recording to give them impression that they are not living alone.
“My son is not with me but I’ve got his voice on my answering machine”. “So, that people don’t know that it’s only me in the house”. B7 (female 75-79)

2.4.2.4 Others

Some participants also noted that they tried to ensure that the tradesperson they were using was properly insured so that they were not liable in case of an injury to that tradesperson.

“There’s a lot of people who are frightened of having some people in because of insurance. I had a chap come in and when he came I said, “Are you a licensed plumber?” He said, “oh no”. I said, “No way. Are you covered for insurance if you slip off that roof?” Well, I could have been liable, this is what you’ve got to be careful of”. C7 (male 80+)

“I think another thing that we’ve got to be careful of at our age is the way the insurance has gone too. If anyone is doing pruning for us, for example, trees or something. We’ve got to make sure that these persons concerned are covered by insurance for themselves and in fact a lot of the advertisements in newspapers say that they are fully covered. Because I mean, you could be up for a fortune [if they were injured]”. H7 (male 75-79)

Lastly, participants identified just wanting someone who was affable and they felt comfortable with.

“It’s how you assess the fellow that comes along and if he looks reasonable, and his quote is reasonable and he seems to know what he’s doing.” L7 (male 65-69)

“I think the approach of the person too that comes, that’s the most important thing. The approach, how good they are. The pressure, whether to put pressure on them, you know? Things like that”. That’s right. My daughter said, “how can you pick a person in five minutes?” I said, “because I’ve been around for a lot longer than you, that’s why”. N4 (male 65-69)

2.4.3 Experience of DIY alternatives?

We asked focus group participants which DIY alternatives they have used, especially paid services, and how satisfied they had been with the service they received. Examples were related from three sources of service providers: council HACC services; trades and handymen advertising in the local paper; and the Grey Army. In each of the three instances there were examples of good and bad experiences relayed. A selection of these is presented here.

Some participants had extremely positive experiences using council home maintenance services.

“Simple tasks are just about out of my grasp now. There’s not enough strength to stand on a step because you can’t lift the other leg up to get onto it and then you realise that it’s not a very good idea anyhow. I’ve found the Council help has been wonderful. I’ve had the windows cleaned, I’ve had someone come and put my handrails in for me and so forth. They’re very useful”. D8 (female)

“Because we don’t have all that much money, we can’t get professional people in. It costs far too much money. I get help from the Council, like the guttering and they’re excellent. I can afford that”. C5 (female 70-74)

“Cleaning the gutters, I go through the Council. Cleaning the windows, I go through the Council. We’ve had them twice, three times now, they’ve cleaned the gutters out. Did a magnificent job. Cleaned the windows inside and out. Great.” A7 (male 70-74)
“I had my windows washed [by the council] as a matter of fact and he said, “make a little list if you want a light globe changed, or the fire alarm, or anything like that. Yes, he said, “put it on a list, little things, because I have to charge you for a whole hour. Be that $60, or something like that. So, that’s quite cheap”. E7 (female 80+)

Not all HACC service users though were satisfied with the completed job.

“The Council [did] my guttering, which I sort of had a complaint with.” A4 (female 65-69)

“I’ve had some maintenance from the Council too, to [do] spouting, and they didn’t do it properly… The 2 young fellows got up and they were there only 15 minutes. Now, I used to get up and do it myself. I know how long it takes. And I didn’t complain to Council because I didn’t particularly want… I mean, they were lovely young blokes but I thought they would be very grumpy with me if they had to come back and do it properly. So, that might be something that has to be considered with home maintenance, when you’re not happy with it”. A3 (female 75-79))

Focus group participants reported using local newspapers to find a broad range of trades and/or home handypersons for a variety of jobs: plumbing; gardening; painting; and bricklaying are a few examples. Varying degrees of satisfaction with the jobs were discussed.

Several participants had plumbing jobs done that turned out to be considerably more expensive than they had imagined.

I had to get a plumber recently. It wasn’t a big job and the man… I got his name out of the local paper. It was a mobile number and he was so nice. He said, “yes, I’ll come straight away”. He came and he said, “I think it’s the big tree, it looks like the tree roots”. It was my laundry… Not my laundry, my bathroom thing was gurgling and I didn’t want it to get bad. Anyway, he dug a hole and he said, “yes, it’s a tree root and I’ll come back tomorrow and fix it”. And he came back and he said, “I’ve got to wait until the thing settles and then I’ll put a concrete top on it”, which he did the next day and gave me a bill for $870. I couldn’t believe it and I said to him, “why so much?” and he said, “Well, I had to come here. I’m from Narree Warren” and I said, “well what are you doing advertising in my local paper?” Yeah, so I’m going to be very careful who I get next time”. K9 (female 80+)

“I had a problem about a month ago where one of those bad winds blew out the pilot light, which I couldn’t relight. And I thought, “well, there’s something wrong with it but I couldn’t see anything wrong with it. So, I had to get help and I rang someone that I’d had before who had been very reasonable and didn’t bother to check. And when the man turned up, they were new people who had taken it over. And it was just that my fingers were rheumatic and couldn’t work and when he charged me $93 to relight my gas heater and I had no comeback, nothing”. F3 (female 60-64)

“Every year, we seem to have some trouble with the plumbing. We’ve got a lot of trees and the roots get into things. We’ve got a man, we latched onto somebody from the paper, he’s very good. It was a couple of weeks ago, my husband rang him up and said, “oh, something’s gone amiss”. So, he came but he said, “I can’t come today”. It was a Friday. He said, “I’ll come tomorrow”. So, my husband had the money ready which was $40 which is the norm. “Oh no, it’s double on a Saturday”. So, it turned out to be $80. But luckily, the time before, the last year, he said it was Yarra Valley Water’s fault. So, we didn’t have to pay anything for it that time. I mean, he’s very good. He comes with this machine quick smart and gets it done but I mean, it’s quite expensive. So, we’ll know not to call him on Saturday”. C2 (female 70-74)
One other man though had a contrasting experience when he was charged less than he expected.

Well, ok I had to have my water pipes changed recently. That was beyond me. So, I hunted around and.. I ended up getting a chap from Ferntree Gully and … he did a good job. He came and quoted right. That’s what it would be. And then, I thought that was quite reasonable. But then, when he’d finished it he said, “oh, instead of being $1,000, it was only $780. And I thought, “thanks very much”. J5 (male 75-79)

There were a mix of positive and negative experiences reported by other participants.

We had a…. You now how doors sort of move with the weather and the front door really wouldn’t close properly. So, a handyman out of the local paper. We ring him, he comes and says, “yeah! I can fix that”. … and he’s doing it and he’s fixing it and he did fix it and he said, “$20”. I said, “well gee”, that’s good. You know we came back the next day and the door was still alright. I thought that was the best service we’ve ever had. I thought, you know, “what a nice man”. C5 (female 70-74)

“So, I got the local paper out and I look down bricklayers. I rang and [he] said to me, “I’ll be there in a hour”. [He] was there in three quarters of an hour and he came along and he said, “your front fence has got to go but before your front fence, you’ve got to fix that tree, because that tree is knocking your front fence about”. And I showed him all the letter I had from the Council and he said, “no worries, I’ll go up and talk to him”. He went up and talked to them and they were down the next day and had a roof drainage and … within a week, the job was finished”. O4 (male 65-69)

“Some of the handymen you get out of the local paper are shocking. I got one awhile back [for gardening]. He was so slow as a snail, you know. He took about three days to do things and he didn’t use a pick or a shovel and he just left the place looking really terrible for the money he charged me. It cost me about $60 altogether. He wasn’t elderly but I thought even with my knee, I could have done a better job than that.” C9 (female 80+)

“Yeah. We had someone come and paint the bathroom and toilet and he was the biggest mess maker you’ve ever seen. Then, he said, “Have you got a radio?” I said, “why?” He said, “I want to listen to the footy”. I said, “no, we haven’t got a little radio”. Well, he made the biggest mess, I was really conned with him, out of the local paper. I wanted very, very soft pink. Well, I got pink and yellow”. C5 (female 70-74)

“I asked a company not that long ago, from a well known van you see, and asked them to come to just weed two border and they had the same experience, they went over everything with a can of poison. Everything was gone”. C6 (female 65-69)

Several focus groups talked of having used the Grey Army for jobs around the home with mixed levels of happiness with the outcomes.

“I have had the Grey Army actually this year to do a few things for me and I’ve found them very helpful. Not terribly expensive and quite satisfactory”. K8 (female 75-79)

“Just a week ago, we developed a wet patch in the ceiling and I thought, “we’ll I’m not getting up on the roof no matter what”. Now, there’s a group called the Grey Army. Now they sent a roof tiler out and he did a good job and he fixed the tiles on the roof but while he was up there he said, “the roof is not in bad condition but it’s not in good either. It will cost you another $1,320, if you want it pointed up, or around”. So, I thought, “oh well, perhaps I’d better get it done because something’s going to go sooner or later”. But he was very good.” E5 (male 65-69)
“I had an unfortunate experience with one of the Grey Army. A tiler came and he was lovely. He did everything from clean and everything. But, this painter, he was a disaster. He had all the doors off and he put them back in the wrong place. Well, you should see it, it’s just brush marks everywhere … and he rinsed all his brushes in my laundry sink. I should have complained really. And, I still look at them [the doors] in horror, you know. And he hung it out for about three weeks, because I gave him lunch everyday. You can get good and bad in everything”. E3 (female 70-74)

“Talking about the Grey Army, I had to get two sets of security locks put up and they never ever bothered to come and do that. So, it wasn’t a small job. I was prepared to wait a couple of weeks, I rang up three or four times and they just couldn’t be bothered. I ended up getting someone to do it.” F5 (male 70-74)

“If you have a bad experience, it make you very weary for next time. I thought it would be good to get somebody from Grey Army to do the pruning for me once and he came in with a chainsaw and just ripped my garden. I just cried. He wrecked the whole garden, he just cut everything off. So, I’d be very weary about just asking someone. I think with painting and things like that too. I’d be afraid they’d do a job that wouldn’t suit me”. C3 (female 70-74)

2.4.4 Best alternatives to DIY

Focus group participants were asked to think about their ideal alternatives to DIY for home maintenance, whether they be something currently available to them, or a new solution or service that they would like to see available to them. There was a range of suggestions made among the groups.

Some identified family or friends as their ideal alternative “Well, family would be mine [best alternative to DIY]”. B6 (female 65-69). While others preferred a reliable recommendation to a tradesperson, as opposed to getting family to do the task:

“Recommendation” “Somebody You Know”. All (B)

“I think that it’s important to have someone that’s recommended and I think that it’s not a good thing to always depend on family. Like, even if you have family who are willing, they may not always be able. There are jobs that you know they’re not capable of doing. So, you know, I think it’s hard anyhow to depend on family to come and do every job. You need to be independent in that way and able to draw on some paid help if you need”. K2 (female 70-74)

“Reliable tradespeople that have been recommended I think because everybody hasn’t got relatives or young people, or family that could come and help. When you have to rely on an outside source and you can get somebody that has been recommended, I think you’re far better off. I think it is important to know who you’re going to get. I won’t be caught again. Well, I hope I won’t. But, that would be a big help. If you have assurance that the person you are going to get is honest and a good tradesman and won’t take you down”. K9 (female 80+)

Participants who were recruited by virtue of having previously used council HACC services identified council as their best DIY alternative, however prices of HACC provided services remained an issue for some.

“I’ve found the Council are great overall. They’re excellent. The support they give. I also do volunteer work and it staggered me the way [they] support these elderly people in their homes. I didn’t realise just how much they do for these people”. D7 (female 65-69)

“Would there be a way of people, you know, that can’t do things, to have some sort of a discount method, from a Council, with people who do these things. I mean, the cost is [too
especially for pensioners, who aren’t getting any money at all. You know, all the wages go up, the pensions don’t go up”.  E3 (female 70-74)

Members of groups who had not previously used council services had some ideas about the way in which they foresaw councils providing assistance with DIY. A council service that could recommend an appropriate tradesperson was a popular suggestion across several such groups.

“It would appear that what is needed is in the area of Local Government and it can’t go any higher other than the State Government anyway could it? But, in Local Government, they should have a list that might help recommend a tradesman. Whether they subsidise them for certain categories of people or not, is open to question. But if the Council had a list of recommended tradesmen and by tradesmen I mean right across the board from home help to however. That’s going to overcome many of the problems.” L7 (male 65-69)

“Another reason why it would be good if the Council employed the people and then you could pay them but the Council covers it. And check them out before they employed them and go through all that. You would still pay the same but you would have the confidence that the Council had checked them out and that they had insurance”. H10 (female)

Other groups suggested that council, or an alternative overriding body, could administer either a volunteer labour force or a labour force of newly retired tradespersons who may be able to provide services for seniors at a discount rate.

All people who owe the community, or want to give something to the community, like Lions or Rotary, or something like that. They have got a lot of time on their hands these guys and they want to help. And tradesmen, each tradesman gives 3 hours a week to their local Council. I’m sure if someone asks them and says, “would you like to do that?” They will feel very comfortable with that. It’s just, you have to ask”. L1 (female 60-64)

“Do Council provide a list of handymen, or people that I suppose are early retirees that might not want to go back into the workforce but just might like to do a little bit of extra money for people that are older but could sort of call them up?” K6 (female)

“Maybe there’s a situation here. I drive on a Thursday for the Volunteer drivers for visiting people in hospital for blood transfusions and all that sort of thing. Perhaps an idea could be that there may be tradesmen around that are people in their younger retired years, who could have a volunteer force to help people out who can’t, you know. It’s just an idea, a suggestion”. I1 (male 65-69)

“A bank of retired, energetic, healthy and fit tradespeople that you could call on and you would have to pay a reasonable amount for the type of job that you get”. A7 (male 70-74)

“One of the other things that could be looked at is you know, there’s a lot of active people around with a lot of experience, over 60, or whatever, they could be employed by the Council at a fairly cheap rate. They could offer their services to help pensioners, right? Whether it’s a tradesman, he might be an electrician, he might be retired but he still wanted to a little bit of work just to help the community. He might be willing to offer his services for $5.00 and hour, or whatever, you know what I mean?” M4 (male 60-64)

As alternatives developed, future groups were asked what they thought of the recommendations for DIY alternatives raised by previous groups. These discussions identified some perceived barriers that could be faced by councils, or other bodies, who may try and administer such a scheme. Identified barriers included cost, legal ramifications of endorsement, issues of insurance and occupational health and safety.
“I think Councils are frightened to put up their hands because anytime anyone mentions a new service, it’s more money and any service they need to provide, or want to provide costs more and then the rates go up and people complain.” J6 (male 75-79)

“That doesn’t work unfortunately under the current social situation. You try it mate. You try it. You try it. The legal ramifications for the Councils to let me do voluntary work is not worth the hassle of doing it to be quite honest. Workcare, blah, blah, blah, blah, blah, you understand. Been there, done that, tried to assist. To be quite honest ______and quite a lot of other general community services that I do but there’s no way known that I would get involved in any of these other so called schemes. They just don’t work”. M2 (male 60-64)

Others relayed personal knowledge of the failure experienced by local community groups such as Probus who had endeavoured to get collectives of tradesman off the ground.

“We had a member at our Probus Club, who wanted to get a register together of our members and what their skills were and being able to assist each other...that was a good idea but it was very poorly received and never got off the ground”. J6 (male 75-79)

“See, the scouts used to help and all that. See, what you’re up against now is that you’ve got to have insurance. You’ve got to be so careful. You got to help somebody out and something happens on the job, you’re in big trouble. I’d just give it away, because it’s just been made so hard. It just snowballs on and on and on”. F5 (male 70-74)

Other problems foreseen using retirees were associated with the delays in getting someone to do the job you need and the time it takes to get a job done by an older workforce. While most group members were happy to pay a retiree workforce for such work it was suggested that payment should be per job, and not by the hour.

“But you should pay them by the job and not by the hour. I find that some of the older workers are very slow and they take a long while to do things”. A2 (female 75-79)  “Oh yeah. They give you a quote - $40 to do that job. It might take half a day, it might take half an hour. They quote you a job”. A7 (male 70-74)

“They [the council] used to have somebody that would come out and help with whatever you want. You know, with personal care. They used to have somebody who would come out and help for odd jobs. But, it takes a long time. You’ve got to book it in and you can’t have it done tomorrow”. I3 (female 60-64).

“The idea of the Lions Club, I think it’s great. But I wouldn’t like the idea of charity. But the fact that you can offer what you can afford is a bonus”. F3 (female 60-64)

Several groups suggested that a guidebook for seniors that provided details of services available to them and an idea of what they are entitled to. They suggested that this could be provided by council, or with other schemes such as the Seniors Card. Once again though, the theme of recommendation of tradesperson or maintenance persons was embedded in these suggestions.

“I think we probably all received our Seniors Card and what we got was a bit of information about all the discounts. Where you get discounts but nothing about surviving as a senior. Like, having to continue your life as a senior. There is no book on …services. It was all about where you get discounts. I think that’s an area that needs to be looked at”. L3 (male 60-64)

“I think that the Council should provide a booklet, or a list of what’s available through the Council, or people that they can recommend who are reasonable in charging. Like, things
that you would normally do. I know they’ve got a handyman now but I think they should employ a few more, or put a list out of companies that will...” “And you know, even if the Council got an advisory service, like 24 hours a day advisory service... The water system went on us one evening and there was water, you know... on the floor everywhere. Now, I didn’t know the first thing... I didn’t have to start. But who can I contact? You ring a plumber, “oh we’ll be out in the morning”. “You know, like an advisory... and they can direct you to the right people. Because you try to get a 24 hour day plumber. They’ve got it advertised in the local rag but they don’t want to come”. G4 (male 65-69)

“Or, give you advice as to where to go where people will come to say, change a light bulb and companies that do offer say, pensioner discounts, or that have, that are safe also. You don’t always want company who you are not quite sure of. You are going to be advertising to the world that you’re living alone and you’re frail. You don’t want that”. G5 (female 60-64)

The discussions on value of recommendations went so far as to wish to have advisory boards which could serve several roles: to assess homes for what maintenance jobs need to be undertaken and; then have an overriding body to complain to regarding poor service.

“I think we really need someone to come out and assess the job and tell us .. truthfully what needs to be done and that can be somebody who you can rely on. So, we know we’re not being diddled by an individual who wants to drum up some work for himself of which he can overcharge.” E1 (female 60-64)

“Maybe they could set up some kind of an advisory board where people ring in who have complaints about certain people, not to use those people.” D7 (female 65-69)

“I wish they had a register where you could ring in and complain about certain tradesmen who rip you off. Now, we had a guy called XXX come in. We had our kitchen redone and all he had to do was retile and do the plumbing. But the thing is, this particular day, he was switching off and doing this and that, and all of a sudden, water came pumping out of one of the pipes in the kitchen. Well, my husband and I gathered up a few towels and then he came back. Then, he said to my husband, “you were supposed to switch it off”. I mean, my husband wasn’t a plumber, he was a plumber. He should have turned the taps off in the kitchen before he went out to do the pipes outside. As for our bill, it was astronomical. So, I went down to Reece’s Plumbing, because that’s where he told me he got his bits and pieces and for each part that he got, he charged three times that amount on the final account. It is unbelievable. D2 (female 65-69)

To others in the groups relying on a body such as the council or an advisory service would only be acceptable if the work/tradesperson could be guaranteed in some way.

“The Council ... will recommend people but they will not guarantee it. So, it’s best not to go to that. To my way of thinking it’s best to go to somebody who knows somebody. The Council will give you a name but they won’t guarantee. They’re not responsible if anything goes wrong. They are not responsible and the Veterans Affairs will say, they will give you a name but if anything goes wrong they’re not responsible.” B7 (female 75-79)

As for reliability registers, I’m not too sure how you go about that. People wouldn’t want to put themselves on an unreliability register would they?” J6 (male 75-79)

Other novel solutions included a barter system where seniors could trade goods for service, or using persons assigned to community service to provide home maintenance as part of their community service.
“There’s not a lot of barter system around either. I mean, you mightn’t be able to do much but you might have fruit trees. I could give them a huge bundle of fruit or something and then they do a job for me. There’s not a lot of that around’. F3 (female 60-64)

“I’ve got an idea. Why don’t you get together with people who have got, what do you call it? A fine which they don’t want to pay, or what do you call these people?” Part of the Community Services because I’m sure there is a lot of tradesmen in it”. L1 (female 60-64)

2.5 ARE THESE ALTERNATIVES TO DIY FEASIBLE AND ACCEPTABLE?

Focus group participants were asked to think about their ideal alternatives to DIY for home maintenance, whether they be something currently available to them, or a new solution or service that they would like to see available to them. There was a range of suggestions made among the groups.

This section of the report examines 10 different alternatives to DIY home maintenance which are either available or were suggested by focus group participants. In order to determine which alternatives are likely to work and which types may be feasible, alternatives will be reviewed individually, and their advantages and disadvantages discussed.

2.5.1 Family assistance

Asking family members for help with DIY home maintenance was often suggested by focus group participants as the most ideal alternative. But many participants felt family were too far away, too busy or had their own lives to lead. Others said that although family assistance was free of cost, the family member asked often took a long time to come, and they could have completed the job more quickly and done a better job!

Like, even if you have family who are willing, they may not always be able. There are jobs that you know they’re not capable of doing. So, you know, I think it’s hard anyhow to depend on family to come and do every job. You need to be independent in that way and able to draw on some paid help if you need”. K2 (female 70-74)

Other focus group participants also felt depending on family robbed them of their independence which was seen as a vitally important attribute of staying in their own homes and managing their own DIY tasks. Overall there appeared to be reluctance amongst the group members to seek help from family or friends with DIY tasks on the basis the family were too busy.

Advantages:

• No or low cost (may be materials only)
• May be easy to access, may be able to attend to task quickly
• No security risk

Disadvantages:

• May be busy and not able to attend to task quickly
• Family may live too far away to not able to attend to task quickly
• May not do the job to the persons liking and there is a reluctance to criticise unpaid assistance
• May take away from “family time”
• May not want to be seen as a “nuisance” to busy family member
• May be a concession to failure of independence of living alone
Feasibility:
In many instances family assistance will be highly feasible in terms of availability and cost.

Acceptability:
There may be reluctance among some seniors to ask family for too much assistance as it may be seen to threaten their independence or impinge on quality family time.

2.5.2 Recommendations of tradespeople by friends, family
Recommendations of tradespeople were a popular choice for participants. The tradesperson would have been found by family or friends and used by them. This to some extent guaranteed their honesty, reliability of their work and that they were not too expensive. But of course, the particular skill of the tradesperson may not be the one required at the time, or the area they serviced may be too far away from the client who needed them.

“Reliable tradespeople that have been recommended I think because everybody hasn’t got relatives or young people, or family that could come and help. When you have to rely on an outside source and you can get somebody that has been recommended, I think you’re far better off. I think it is important to know who you’re going to get. If you have assurance that the person you are going to get is honest and a good tradesman and won’t take you down”.  
K9 (female 80+)

To a large degree, recommendations by family and friends of suitable tradespeople as an alternative to DIY home maintenance, was well accepted and acknowledged as such by most of the focus groups participants.

Advantages:
- Previous knowledge of reliability and cost
- Known to do a good job
- Reduced security risk

Disadvantages:
- May be busy and not able to attend to task quickly
- May be outside usual service area and charge more for the job for travel time
- May not do the job to the persons liking and there is a reluctance to criticise a family member’s recommendation
- May still be expensive for older persons on a fixed pension

Feasibility:
Highly feasible in terms of safety, reliability and cost

Acceptability:
This means of obtaining a tradesperson was usually the first mentioned at focus groups in response to the question, and most participants nodded or spoke in agreement when it was discussed

2.5.3 Guide/Booklet for seniors
Several groups suggested that a guidebook should be produced for seniors that provided details of services available to them and an idea of what they are entitled to. They suggested that this could be provided by council, or with other schemes such as the Seniors Card. Once again though, the theme of recommendation of tradesperson or maintenance persons was embedded in these suggestions.
"[A guidebook that could] give you advice as to where to go where people will come to say, change a light bulb and companies that do offer say, pensioner discounts, or that have, that are safe also. You don’t always want company who you are not quite sure of”.  G5 (female 60-64)

This type of publication could also provide a guide to what is a reasonable price e.g. for the 25 most often needed tasks.

**Advantages:**
- Provides good knowledge of what is available
- Some measure of assurance for seniors that service or provider is recommended
- Centralised singular source of information

**Disadvantages:**
- May become quickly out of date
- Councils or overriding bodies may be held responsible for “poor jobs”
- Councils unable to be seen to recommend particular service providers

**Feasibility:**
May present problems in publishing and editing due to changes in tradespersons involved

**Acceptability:**
Accepted by many participants as it represents a printed source of information which is easy to access

### 2.5.4 Local advertising

The “VICTORIAN SENIOR” is a monthly newspaper distributed statewide free of charge, which carries abundant advertising for holiday destinations and retirement and nursing accommodation for seniors, but has virtually no advertising for tradespeople. The “Progress Leader Newspaper” which is also free and distributed weekly to the eastern suburbs does carry many pages of advertising for tradespeople. These advertisements are listed alphabetically under headings such as Gardeners, Carpenters, or Plumbers. A typical advertisement may read:

“Carpentry, Plastering, Painting and Tiling”
The Small Job Specialists
Master Builder MBAV No …
Registered Building Practitioner ……
Ph………………or…………………..

Although advertisements in local papers may sound ideal for an elderly person seeking help with a small job in one of the listed areas of work, many of the focus group participants found the cost of the job outweighed the need for hiring the tradesperson. Some participants felt the tradesperson purposely inflated the cost to prevent being hired to do small jobs, as the person were only really interested in larger, longer jobs. The fact that the tradesperson in this advertisement was a Master Builder and registered as a Building Practitioner, does not guarantee the safety of their client, the reliability of them coming on the scheduled date, or the standard of their work.

“YELLOW PAGES “ is a well-known source of advertising for tradespersons, and usually accepted by older members of the community. However, because it is large in size and heavy to hold, it does present problems for elderly people to manipulate the pages and find the correct sections. The advertisements also cover the whole of metropolitan Melbourne and therefore the participants may have trouble locating local tradesperson. The selection is also limited to tradespersons that can afford the advertisements that are quite expensive. Size of print may also be a problem.
Franchises such as Hire-a-Hubby or the Grey Army were mentioned at the focus groups, but many participants had been disappointed with their services, costs and the ages of tradespersons with the Grey Army. They had expected elderly retired workers in the Grey Army but sometimes the tradespeople were young.

Advantages:
- Find someone local
- Choice of providers

Disadvantages:
- May be costly for both client and tradesperson, eg Yellow Pages ads are very expensive
- May be waiting period
- May not be willing to undertake small jobs
- May not know quality of the job
- Security and reliability of tradesperson

Feasibility:
This alternative is already in existence and has been used by a number of the seniors participating in the focus groups, with mixed success.

Acceptability:
While it is highly feasible, a number of participants were reluctant to use local advertising to find tradespersons as there was no guarantee of the job or the individual. Finding several quotes for a job may be time consuming and not possible in the instance of an urgent job. Participants also mentioned that local advertisers were reluctant to take some jobs (too small, unattractive) and in this instance would price themselves highly so as to avoid the job.

2.5.5 Home and Community Care Programs (HACC)
The Home and Community Care Program is a joint Australian, State and Territory cost-shared Program with the Australian Government providing 60% of funds and the States and Territories providing 40%. Local government and community organisations deliver HACC program services.

The aims of the HACC Program are:
- to provide a comprehensive, coordinated and integrated range of basic maintenance and support services for frail aged people, people with a disability and their carers; and
- to support these people to be more independent at home and in the community, thereby enhancing their quality of life and/or preventing their inappropriate admission to long term residential care.

The HACC budget in Victoria for 2003-04 was about $358.6 million from both governments, including an additional $42 million from the Victorian Government. Local governments also make substantial contributions to total resources (DHS, 2005). In Victoria the program supports over 220,000 frail older people and people with disabilities. More than half of all Victorians aged 75-plus who live alone receive a HACC service. HACC services include home care, home nursing, allied health services, property maintenance, meals, respite care and personal care.

In Victoria in 2002-2003 some 33,098 HACC clients received assistance with home maintenance (DHS, 2004). Home maintenance services offered may differ between municipal areas but in general, include a home maintenance service for repairs and minor modifications such as cleaning spouting, fixing security locks and installing ramps. Some municipalities offer gardening. All potential HACC service users are assessed for eligibility and their individual need requirements. To receive a HACC service, clients generally need to be frail aged, people with a disability or carers of these people. Fees
for HACC services are generally means tested with a low, medium and high rate for service. For home maintenance it is generally an hourly fee plus cost of materials.

Many of the study participants who already use HACC services in the Cities of Monash and Greater Dandenong were extremely happy with the services they provided.

“I’ve found the Council are great overall. They’re excellent. The support they give. I also do volunteer work and it stagers me the way [they] support these elderly people in their homes. I didn’t realise just how much they do for these people”. D7 (female 65-69)

Participants who were recruited by virtue of having previously used council HACC services identified council as their best DIY alternative, however prices of HACC provided services remained an issue for some. Another negative for some was the inability of HACC to cover all required jobs.

“I can’t do all the repairs, so if you ask the Council, they can’t do this and they can’t do that. They can’t do anything in the garden. No pruning, or that. So, I’m stuck”. E6 (male 80+)

The councils do face difficulties though in delivering sufficient HACC services to clients due to the increasing ageing population, leading to increased demand for services on a budget that does not meet the increasing demands on services. As well as increased demand, other factors impact on HACC service delivery such as the ageing of the housing stock in some areas, increasing requests for a broader range of services, and migration of seniors communities to particular areas of Melbourne.

“I think Councils are frightened to put up their hands because anytime anyone mentions a new service, it’s more money and any service they need to provide, or want to provide costs more and then the rates go up and people complain.” J6 (male 75-79)

Focus group participants also looked to the council to provide recommendations for tradespersons to fill the voids that HACC services cannot supply. Each council does use subcontractors who have been through a rigorous selection process including checks on insurance, indemnity, occupational health and safety requirements and police checks. Councils then sign service agreements with these subcontractors. Councils are unable to recommend tradespeople unless they have gone through this process. For example, if a resident requests a recommendation for a plumber through the council, and the council does not subcontract plumbers, then they cannot recommend anyone in this field.

HACC clients of councils that use subcontractors do have the advantage of being able to refer to that service provider again by their own arrangement, having already found them to their satisfaction in providing the HACC supplied service. Some level of council endorsement was reassuring to many participants.

“Another reason why it would be good if the Council employed the people and then you could pay them but the Council covers it. And check them out before they employed them and go through all that. You would still pay the same but you would have the confidence that the Council had checked them out and that they had insurance”. H10 (female)

**Advantages:**
- Currently available
- Administered centrally by local government
- Funded by State and Federal Government
- Range of services available to eligible members of local community
- Discounted service
- Service provider screened and selected by local government
- Needs assessed beforehand by the Council care workers
Disadvantages:
- Not all maintenance services needed by seniors are available
- Under-funded to keep up with demands of increasingly ageing population
- Waiting lists for non-essential safety maintenance
- Limits to amount of services they can provide individuals based on broader community demand
- Doctor’s referral needed prior to receiving HACC

Feasibility:
Victorian councils are already successfully providing HACC services. The service provides essential maintenance and supportive services to older Victorians living at home.

Acceptability:
Local council is the first port of call for many older Victorians seeking assistance with home maintenance tasks. Focus group participants in general portrayed a sense of trust; reliability and legitimacy in Council supplied or supported services.

2.5.6 Community Aged Care Packages

The Federal Government has recently announced a major boost to community care and support for older people and their carers through the “Staying at Home” initiative. Federally funded care packages have become available across Australia to help older people to stay in their own homes as long as possible. To be eligible for these packages the person must first be assessed by an Aged Care Assessment Team as needing extra services, but otherwise able to manage at home. They are then referred to the Care Plan in their immediate area. The Care Plan operates with the local Council to enable the older person to continue to receive HACC if this is felt necessary.

Community Care packages are very flexible and designed to help with individual care needs. The types of services that may be provided as part of a package include help with:
- personal care
- social support
- work around the home
- social activities

Care recipients may be asked to pay a fee for a Community Aged Care Package. The amount charged forms part of an agreement between the recipient and the service provider.

Advantages:
- Means older persons with disabilities such as early dementia can be supported to stay in their homes
- Case managers are appointed who oversee the needs of the clients on a regular basis
- Cost is low or means tested

Disadvantages:
- The person must be assessed by an ACAT team prior to receiving an Aged Care Package

Feasibility:
None of the focus group participants were receiving an Aged Care package, so this alternative may not be feasible unless a participant declined in health.

Acceptability:
Participants did not discuss this alternative, probably because it is such a new health initiative, and therefore not well known yet.
2.5.7 Advisory Services

In several focus group discussions on ideal alternatives to DIY the suggestions were raised regarding the need for advisory boards or services which could either recommend service providers, assess homes for what maintenance jobs are needed, receive complaints regarding poor service, or provide several of these roles at once.

2.5.7.1 Advisory service: recommending service providers

2.5.7.1.1 Council run

Participants often suggested council as the most reliable over-arching body to supply recommendations for tradespersons.

*But if the Council had a list of recommended tradesmen and by tradesmen I mean right across the board from home help to however. That’s going to overcome many of the problems.* L7 (male 65-69)

*“Even if the Council got an advisory service, like 24 hours a day advisory service… The water system went on us one evening and there was water, you know… on the floor everywhere. Now, I didn’t know the first thing… I didn’t have to start. But who can I contact? You ring a plumber, “oh we’ll be out in the morning”. “You know, like an advisory… and they can direct you to the right people”.* G4 (male 65-69)

We raised the suggestions of a council run advisory board with the councils who were co-operating in this study. They advised that there would be several problems setting up such an initiative at the council level. They suggested that this would be very difficult to administer, mainly in keeping up to date with a list of reliable and suitable tradespersons. Many of the tradespersons accepted as suitable may get sick or change over time, the most suitable tradespeople for a particular job may be in another Council area, or they may be too busy at the time needed, and lastly it may be difficult to find providers willing to undertake the many small jobs required by clients. In addition there is the issue of guarantee of the job, or council responsibility if the job is not done to the client’s satisfaction. Some focus group members stated that a council run advisory service scheme would only be acceptable if the work/tradesperson could be guaranteed in some way.

*“The Council will give you a name but they won’t guarantee. They’re not responsible if anything goes wrong. They are not responsible and the Veterans Affairs will say, they will give you a name but if anything goes wrong they’re not responsible.”* B7 (female 75-79)

Advantages:
- Readily accessible via council
- Service provider screened and selected by local government
- Supports local service providers

Disadvantages:
- May be costly and cumbersome to administer
- May become quickly out of date
- Users of the service may hold the administering body responsible if jobs are not done to their satisfaction

Feasibility:
Councils are currently unable to provide an advisory service of this type. To establish such a service may be costly and resource intensive and difficult given current levels of funding.
Acceptability:
The suggestion of a council run advisory service was very well accepted by focus group participants with the only concern being that councils would not guarantee the work. Otherwise this was a highly desirable DIY alternative.

2.5.7.1.2 Commercially run
An alterative to a council or government run referral service is one run by the private sector. A search for any local run commercial advisory services found two such services providing good models for this type of service.

Mylifemyhome.com is a pre-screening directory for all home improvement, repair, maintenance and move-related professionals. Pre-screening includes checks for a clean legal history, current insurance and licensing/memberships and good customer service.

The service allowed visitors to the site to choose one of two options:

a. Conduct a directory search. In this option you can enter your postcode of residence and choice of a service category from approximately 50 categories, for example: home maintenance; gardening – general; plumbers and gasfitters; and electricians.

b. Request a quote. In this option an on-line application is completed, the application form requests contact information, details of the service required and any special requirements. Three quotes were supplied for a fee of $40.00 with $25.00 refundable upon uptake of one of the three supplied quotes. The application form is shown in Appendix 6.

The second commercial service identified is called Accreditation Australia. Established by the same group who developed mylifemyhome, Accreditation Australia is a business services organisation that comprehensively checks and endorses quality service providers who offer quality customer service, professionalism and good character in their business. The Managing Director, Ms Robyn Bell states that this accreditation program was created through an urgent need to differentiate quality business operators over poor performers and rogues in the service industry. Ms Bell says that the new service was established with vulnerable members in our society such as older persons, the disabled, schoolchildren and housewives, in mind. Service providers are checked for qualifications and/or licences, memberships, insurance, references, and for Police records. Within 12-months Accreditation Australia has 1,000 tradespersons as members with a comprehensive variety of trades. After tradespersons are successfully checked by Accreditation Australia they pay $240.00 per annum, and have to provide a supportive customer reference every 3 months to retain their registration.

The company provides consumer information and referral to service providers, including those who are happy to tackle small jobs, at no charge. Consumers pay the service provider directly. In the event of consumer dissatisfaction, Accreditation Australia liaise between the consumer and registered tradesperson to facilitate a positive outcome. If this is unobtainable they recommend alternative avenues to resolve any disputes eg. Consumer Affairs Victoria

Accredited tradespersons carry organization identification to identify them. Accreditation Australia has on-line information plus a brochure that informs interested persons about their organization. The service is advertised via the HIA Home Show, in the print media, including local papers.

Ms Bell says that a primary aim of the service would be liase with Melbourne Councils and introduce a telephone call service, so the service can be offered to the residents of every Council. Thus far councils have been unable to use this service, due to the council policy of using subcontractors only.

Advantages:
- Readily accessible via internet and phone
- Service providers are pre-screened
- Has the potential to facilitate direct quotes for jobs
- Cost of job negotiated prior to job commencement
- Accesses a large number of tradespersons across a number of services
- Follow up of client and tradesperson in the event of dissatisfaction with service

**Disadvantages:**
- May be a difficult service to find if one does not have access to the internet
- Requires substantial marketing to make the service known among the seniors community

**Feasibility:**
A commercially run advisory service is currently running in Victoria.

**Acceptability:**
A service such as this would be thoroughly endorsed by the older persons in the focus groups, however currently knowledge of the availability of such a service was very low among focus group participants.

2.5.7.2 **Advisory service: recommending need for maintenance**
Focus group participants also sought another type of advisory service, one that would come to your home and provide an objective assessment of what type of maintenance jobs are required.

“*I think we really need someone to come out and assess the job and tell us truthfully what needs to be done and that can be somebody who you can rely on. So, we know we’re not being diddled by an individual who wants to drum up some work for himself of which he can overcharge.*” *E1 (female 60-64)*

This type of advisory service already exists. Archicentre, the Home Inspection Service of the Royal Australian Institute of Architects, provides the Home Service Report, a free service, funded by the Victorian Department of Human Services - Office of Housing. The Free Home Service Report details the condition of the home and includes an estimate of the cost of works to ensure safety and ease of access. Linked to the service, available for homeowners over 60 or those persons with a disability, is a Home Renovation Loan of up to $20,000 to carry out necessary repairs.

These home inspections are intended to help older persons remain independent within their homes by identifying what works need to be done to make the home a safe place to live. Inspections are undertaken by architects who check both inside and outside for maintenance concerns and they report on dangerous matters that need immediate attention such as electrical wiring and so on. Inspections are arranged within 7 days of request at a time that is mutually convenient. For safety and security concerns architects provide identification upon arrival. There is at present no waiting list for a home inspection.

Archicentre undertook 4,000 Home Service Reports in the past 12-months for seniors and people with disabilities (personal communication, 2005). A further 3-years of funding from DHS has recently been announced for this service.

**Advantages:**
- Currently funded by Department of Human Services so free service for seniors
- Service aimed directly at the needs of older home owners
- No or minimal waiting period
- Profession architects undertaking inspections
- Identification provided upon arrival at property
- Linked to loan scheme

**Disadvantages:**
- Do not recommend tradespersons for the work needed to be completed
Feasibility:
A government-sponsored scheme is currently in existence in Victoria

Acceptability:
Focus group participants identified the need for this type of service. It did appear however that knowledge of the current scheme was not high among focus group participants.

2.5.7.3 Advisory service: making complaints
The third type of advisory service that participants would like to see is one where they could make complaints regarding the service they received.

“I wish they had a register where you could ring in and complain about certain tradesmen who rip you off. Now, we had a guy called XXX come in. We had our kitchen redone and all he had to do was retile and do the plumbing. But the thing is, this particular day, he was switching off and doing this and that, and all of a sudden, water came pumping out of one of the pipes in the kitchen. Well, my husband and I gathered up a few towels and then he came back. Then, he said to my husband, “you were supposed to switch it off”. I mean, my husband wasn’t a plumber, he was a plumber. He should have turned the taps off in the kitchen before he went out to do the pipes outside. As for our bill, it was astronomical. So, I went down to Reece’s Plumbing, because that’s where he told me he got his bits and pieces and for each part that he got, he charged three times that amount on the final account. It is unbelievable”. D2 (female 65-69)

The Building Commission currently runs a service for complaints against registered builders. The following passage regarding the service is taken from the Building Commission website.

**Building Commission complaints services**

Registered building practitioners are typically proud of their professionalism and ethical standards, but sometimes their clients, or members of the public, may have concerns about their conduct or ability. If you have such concerns, you should discuss them with the building practitioner. If you are not satisfied or you do not wish to discuss the matter further, you can seek the assistance of the Building Commission.

The Building Commission takes all complaints about registered building practitioners where they may have breached professional standards or the requirements of the Building Act 1993, seriously. The building practitioner’s client or anybody who has an interest in the work of a practitioner can submit a formal complaint to the Building Commission. Complaints should be made in writing

A complaint relating to a registered practitioner’s professional conduct or ability to practice should be made in writing to:

Manager, Practitioner Compliance
Building Commission
PO Box 536E
MELBOURNE VIC 3001

For issues concerning smaller jobs the Consumer Affairs Helpline at Consumer Affairs Victoria (CAV) can provide general advice on how to handle disputes with service providers. CAV are unable to act on the consumer’s behalf but can provide them with alternatives and strategies to address the situation. Consumer Affairs Victoria cannot compel a trader to resolve an issue but can advise consumers of their options to go to the Victorian Civil and Administrative Tribunal (VCAT) or seek civil remedies in the courts.
The Consumer Affairs Helpline is available on **1300 55 81 81**

**Advantages:**
- Useful fallback tools if negotiations with unsatisfactory tradespersons cannot be resolved directly
- Provides sound advice on methods to obtain a successful outcome

**Disadvantages:**
- Process may be time consuming, complex and costly to older consumers, especially if legal solutions are recommended
- Success not guaranteed

**Feasibility:**
Complaint systems are currently in existence via Building Commission and Consumer Affairs Victoria.

**Acceptability:**
Not discussed at length in focus groups but would expect that it would be acceptable to older community, however a simplified system would be preferable.

### 2.5.8 Barter systems

Other novel solutions discussed at the focus groups were a barter system where seniors could trade goods for service, or using persons assigned to community service to provide home maintenance as part of their community service.

“There’s not a lot of barter system around either. I mean, you mightn’t be able to do much but you might have fruit trees. I could give them a huge bundle of fruit or something and then they do a job for me. There’s not a lot of that around’. F3 (female 60-64)

An on-line Barter system currently operating in Victoria is called the LETSystem. LETS stands for Local Energy Trading Systems, and is focused on people trading goods and services using alternative currencies and is non-profit and community focussed. The LETSystem is a trading network supported by its own internal currency. It is self-regulating and allows its users to manage and issue their own ‘money supply’ within the boundaries of the network. One of its benefits is that it offers greater access to goods and services. For seniors though, access may be an issue as it is predominantly run “on-line”. So although the system states that it is “for anyone who wants to use it”, its accessibility is actually restricted to those who are familiar with using on-line services.

There are 35 local LETSystems running in Victoria and they are listed at [http://www.lets.org.au/viclets.html](http://www.lets.org.au/viclets.html)

**Advantages:**
- No direct cost
- Open to everyone, do not need to meet eligibility criteria
- Community focused

**Disadvantages:**
- May not be able to find someone to do the job you require
- May be difficult to access for those without internet connection

**Feasibility:**
There are approximately 35 LETSystems running locally across Victoria.
Acceptability:
A barter system was discussed light-heartedly at one or two of the focus groups, but participants showed no great enthusiasm. There appeared to be no knowledge of LETSystems among focus group participants.

2.5.9 Community Services
One focus group suggested using persons undertaking community service or community based orders as reduced free of cost labour for seniors needing home maintenance.

“I've got an idea. Why don’t you get together with people who have got, what do you call it? A fine which they don’t want to pay, or what do you call these people?” Part of the Community Services because I’m sure there is a lot of tradesmen in it”. L1 (female 60-64)

Community based orders exist as part of a sentence to suitable offenders as an alternative to going to jail. Organised by the Department of Corrections, the court imposes the community-based order on the offender for a number of hours of unpaid community work. Given the prevalence of security as an issue for seniors when finding a DIY alternative this is possibly not a suitable DIY alternative or offenders would need to be carefully screened.

Advantages:
• Low or no cost
• Provides service to older community

Disadvantages:
• Potential security risk for seniors
• No guarantee that the person providing the service has the required skill or expertise

Feasibility:
This type of system may be difficult to administer and monitor.

Acceptability:
Given the prevalence of security as an issue for seniors when finding a DIY alternative acceptability may be low among many seniors, particularly women living alone.

2.5.10 Volunteer groups of older tradespersons
A good number of groups suggested that council, or an alternative community organisation, could administer either a volunteer labour force or a labour force of newly retired tradespersons who may be able to provide services for seniors at a discount rate.

“Do Council provide a list of handymen, or people that I suppose are early retirees that might not want to go back into the workforce but just might like to do a little bit of extra money for people that are older but could sort of call them up?” K6 (female)

“Perhaps an idea could be that there may be tradesmen around that are people in their younger retired years, who could have a volunteer force to help people out who can’t, you know”. I1 (male 65-69)

“One of the other things that could be looked at is you know, there’s a lot of active people around with a lot of experience, over 60, or whatever, they could be employed by the Council at a fairly cheap rate. They could offer their services to help pensioners, right? Whether it’s a tradesman, he might be an electrician, he might be retired but he still wanted to a little bit of..."
work just to help the community. He might be willing to offer his services for $5.00 and hour, or whatever, you know what I mean?” M4 (male 60-64)

Currently some small-scale volunteer schemes are run by chapters of Lions and Rotary Clubs and Legacy who offer some support for members or widows of members but these are area-specific or only open to members. Focus group participants relayed the failure of a local community group of which he is a member to get such a volunteer force of retired tradesman off the ground. Other problems foreseen using retirees included insurance and WorkCover issues; also the time it may takes to get a job done by an older tradesperson. While most group members were happy to pay a retiree workforce for such work it was suggested that payment should be per job, and not by the hour.

“But you should pay them by the job and not by the hour. I find that some of the older workers are very slow and they take a long while to do things”. A2 (female 75-79)

Advantages:
- Low cost
- Experienced tradespersons

Disadvantages:
- May take a while to get the job done
- May be difficult to administer on a broad scale
- Relies on the good will of a few people
- May place older tradespersons at risk of injury

Feasibility:
Investigations show that these volunteer systems run well when the scale is small, i.e. a local club running a service for a limited number of clients. Potentially much more difficult to administer and run on a larger scale, eg for a whole local government area.

Acceptability:
Generally a good level or acceptability among focus group participants. However some raised concerns about the length of time it would take for a volunteer to become available and how long the job would take an “older” tradesperson.

2.5.11 Other relevant services or providers
A 2003 report by Ashby and Fox outlined the results of a student placement at MUARC. The two Nursing/Health Promotion students conducted a survey of maintenance service providers. In conducting this survey the students contacted several relevant government and commercial bodies to examine their role in maintenance service provision to older Victorians. Some, like Archicentre, have already been discussed. Two other groups who had input to this process are the Council of the Ageing (COTA) and the Department of Veterans Affairs.

2.5.11.1 Council Of The Aging (COTA)
The Victorian Council of the Ageing (COTA) offers a service called ‘Seniors Information Victoria’ which provides a range of information for older people. Many of the calls to this service are from older people wanting low cost, reliable tradespeople to undertake home maintenance tasks. COTA refers such enquiries to the HACC program in their area who send out an assessor and may then offer available services relating to safety in the older person’s home environment. For enquiry’s regarding larger maintenance jobs and renovations, COTA makes referrals to the home renovations advisory service offered by Archicentre.
COTA receive many calls of this nature from older people often because they are concerned and nervous about hiring tradesmen to work within their homes. Many of these calls come from women who have lost their husband and are unsure about maintenance issues. As of January 1st 2002 (till end October 2002) COTA, received 203 calls related to home maintenance and renovation issues.

COTA feels there is a large gap in this area of aged care. Two issues they have identified as important in regards to the elderly are financing maintenance jobs while on a pension, and the dilemma of who is a reliable tradesperson. COTA is also working on developing a home equity conversion loan in addition to the home renovation loan available through the Victorian government.

2.5.11.2 Department of Veterans Affairs
The Department of Veterans Affairs (DVA) offers two services for veteran white and gold cardholders.

1. Helpline- that refers older people to ‘reliable’ tradespeople from their database. The tradespeople then ring the person back and quote them on the job. These tradespeople also offer discounts, the person inquiring then decides if they want to go ahead with the job.

To be deemed reliable, tradespersons must: meet all building standard trade qualifications; have public liability insurance; and preferably be a member of their trade association. A satisfied veteran member has referred most tradespersons on the database to the DVA. The DVA has a policy of carrying out follow-up checks after a job is done to ensure the work is acceptable.

2. Home Front Falls Prevention Program- that provides physiotherapists and free home inspections/advice. Gold and White cardholders are entitled to one free assessment per calendar year. DVA is also willing to contribute $163 to the necessary work after it has been assessed and approved.

The Veterans’ Home Care program ensures that DVA provide a wide range of home care services to the veteran community on similar terms to those currently provided under HACC. Home help, personal care, garden maintenance, and other services are available to veterans assessed as needing such services to enable them to continue to live independently.
3. DISCUSSION

In Australia, government policy is directed towards supporting older Australians to remain independent in their own homes for as long as possible (DHS, 2004). A literature review on issues related to the over-representation of older persons in DIY maintenance injury was conducted by MUARC in 2003 (Ashby and Fox). This review established that a person’s own home is an object of considerable emotional attachment, and many older persons have lived their married life with their spouses, raised their children, and spent much of their adult lives in their current homes. Home ownership can provide people with: a sense of control and familiarity; privacy and a place of refuge; allows maintenance of a social network of friends and neighbours; a place to entertain and reciprocate hospitality; a place to pursue avocational activities; and provides a tangible asset (Ashby and Fox, 2003).

Control over one’s home is of paramount importance to many older homeowners. The literature review highlighted that older persons feel that losing control over their physical environment is the first step towards losing control over other aspects of their lives, ultimately resulting in being moved to a hostel or nursing home. Participants in this focus group study made comments supporting these statements.

While independent community living has both political and community support, it is hard to deny that maintaining a home can be time consuming, costly, and may put older home owners at risk of severe injury. Each year in Victoria there is an average of 8 deaths, 165 hospitalisations and at least 678 emergency department presentations among older Victorians from DIY home maintenance injury.

Our study involved 118 community members, predominantly residents of the Cities of Monash or Greater Dandenong. Of the 118 participants who took part in one of fifteen focus groups, 44% were male and 56% female. The ratio of males to females was greater in the previously injured group 16:7, compared to the HACC services user group in which female participants outnumbered males by two to one.

In a very general sense (there were exceptions in each group) the typical profile of a participant in each the three subgroups we worked with was as follows:

- **Injured subgroup**: Male; aged 60-69; living with another in a separate home
- **HACC service users**: Female; aged 70-79; equally as likely to live with someone as alone; and living mostly in a separate home, but one quarter live in a flat or unit
- **Community group**: Equally likely to be either male or female; aged 65-79; living with another in a separate home

Fifty-two percent of all participants noted having a DIY related injury that required medical treatment. Interestingly, four participants in the injured subgroup reported their DIY injury status as no, despite the fact that this was the criterion by which they were entered in to the study and the injuries were confirmed by the treating hospital.

As people age and health problems and functional impairments accumulate, the efforts involved in household maintenance becomes greater and more burdensome. Participants in this study reported that the types of DIY they still undertake include gutter cleaning, lawn mowing, gardening, toy making, changing light bulbs, painting, carpentry, chopping firewood, repairing structures such as the verandah, pruning and car maintenance.

Working from heights, such as on a ladder, becomes more dangerous as persons age due to reduced flexibility, mobility and reaction time, and poorer balance. Our study participants also reported that the jobs that had become most difficult were those that required them to work from a height eg. cleaning guttering or roof maintenance, usually involving ladders. Despite how challenging some
tasks have become there are factors: lessening physical abilities; limited access to, and uncertainty of, DIY alternatives; and restrictions on the ability to pay for expensive assistance, that mean that some older Victorians continue to engage in unsafe DIY practices as a means of continuing to manage their home repairs/maintenance.

This report investigates how 118 older Victorians residing in two regions of Melbourne deal with their maintenance and in doing so answer three research questions posed:

- Why do older persons, aged 60 years and older, undertake high-risk DIY activities and under what circumstances?
- What would constitute acceptable low risk alternatives to DIY?
- Are these alternatives acceptable and feasible?

It is important in answering these questions not to condemn all DIY for this population. There are positive aspects to undertaking DIY and it is worthwhile to outline these before considering the three research questions.

### 3.1 POTENTIAL BENEFITS OF DIY

DIY home maintenance is not without benefit for older persons. Many of the focus group participants in this study reported feelings of pride and satisfaction in having done tasks themselves. In addition, some participants reported using DIY to keep fit. Our 2003 literature review (Ashby and Fox) revealed that more moderate forms of DIY, such as gardening, can act to enhance older persons post retirement experiences and that successes in the outcomes of even relatively mundane daily events are associated with positive effect, generalised well being, and improved quality of life in healthy older adults.

Also, the literature review reported that regular tempered activity is a predictor for good health in the older population and suitable activities such as gardening can increase “current concerns”, i.e. caring for plants may be a therapeutic replacement for losses and other changes experienced by an older population. Gardening has also been shown to be strongly correlated to reduced risk of hip fracture, reductions in risk factors for heart disease; and weight loss. In addition, the kneeling, walking and bending involved in gardening may enhance an older persons general fitness level.

The positive effects from DIY are most beneficial when it is voluntary eg. when the DIY task, be it gardening or building a pergola, is seen as a pleasurable activity. However, some DIY is involuntary and undertaken due to cost constraints, the inability to recognise declining capabilities, fear of poor work standards or lack of alternatives to DIY such as being able to obtain a suitable tradesperson. It is to these issues we now turn.

### 3.2 WHY DO OLDER PERSONS UNDERTAKE HIGH-RISK DIY ACTIVITIES AND UNDER WHAT CIRCUMSTANCES?

A seemingly simple question, “Why do you undertake DIY”, revealed a range of responses and four classes of participants, distinguishable mainly by their attitudes to doing DIY.

The first was a group, quite often men, who described a working background as a tradesman. This group was adamant that they would continue to do DIY around their homes for as long as they were able and were resistant, even defensive, to any suggestions that they should cease DIY activity just because they were “older”. Continuing DIY was very much a choice for this group who were vocal in the assessment that they could still do a better job on their home maintenance than anyone they could pay to do the task at hand. They did however, for the most part, show respect for tasks such as electrical work, knowing from experience that these were the types of tasks best left to a qualified...
tradesperson. This group were likely to find novel solutions to dealing with types of DIY that may be becoming more challenging for them and were quick to offer these solutions and tips to other group members. When these men are faced with, or were asked to consider a future in which, the reality that they physically may not be able to do DIY tasks anymore they noted finding it difficult to accept.

The second group lacked the formal experience of the first but were adept at, and no less keen to, undertake DIY while it was within their ability to do so. These persons stated that the notion of being able to still do their own DIY helped them maintain a sense of independence, a highly valued notion. Also, they often regarded DIY as highly beneficial to their fitness levels. This group gained much enjoyment from their DIY with some noting they preferred to garden that do other work inside their homes.

A third group were still keen to do what they could, but were realising that health concerns, age related deteriorations, and size of their properties were factors that were impeding their ability to continue to do DIY. This group shared their experiences of how they had adapted the way that they tackled tasks such as the gardening and lawn mowing to accommodate increasing physical limitations or concerns as they aged, or dealt with health concerns and injuries. By changing the way they did tasks, or the way they thought about the task, they tried to modify the job so they could still attempt it.

Lastly, there was a group who had simply become unable to undertake their own DIY and were already using DIY alternatives because they had realised that they were unable to do much of their own maintenance. Deterioration in their health and capabilities had significantly altered the way this group views their homes and prioritises their home maintenance. Some members of this group were resigned to the fact that the way they viewed their home was changed forever as they became less and less able to maintain their homes themselves. This group was very reliant on cost effective alternatives to DIY to keep them in their homes.

Participants were encouraged to think of their DIY in terms of it being on a sliding scale from ‘choice’ or ‘necessity’. In discussing DIY in this manner several key themes surrounding participants reasons for doing, or not doing, DIY emerged. Some of the themes/reasons were strongly related to which of the above-mentioned groups the participants fell into, others cut across the groups. The major determinants of DIY on the scale from ‘choice’ to ‘necessity’ are outlined below.

### 3.2.1 DIY as a choice

Responses regarding DIY as a choice ranged from participants saying that DIY provides exercise and fitness opportunities, to the pride or satisfaction one obtains from realizing a “job well done”. Some participants indicated that they do DIY simply because they have the time or ability, or just because they enjoy doing it.

Some saw DIY as a simple choice, based on one’s own assessment of ability to do the specific task at hand. If the task was within their capabilities then they would give it a go, conversely, if it were out of their expertise e.g. electrical repairs, they used a tradesperson. For those who mainly saw their DIY activity as a choice, pride/satisfaction gained from DIY and the fitness offered by DIY were the two main reasons for DIY.

A number of participants identified pride or satisfaction in doing DIY as the reason they still did their own home maintenance. Some noted that it was not simply that they took pride in the job that they could do, but also doubted the ability of another to do the job as well as they would themselves, or to the standard they would be happy with. Within some groups there was debate as to whether “pride” was a male phenomenon and a contributor to the injury risk among older males from DIY related activity. Some female participants felt that it was harder for men to acknowledge that they may need outside help and that they would have difficulty in asking for this help. However, pride and
satisfaction, while a more common theme among males, was also a factor that a number of women raised as reasoning for doing DIY.

Others chose DIY maintenance as it allowed them a bit of regular “huff and puff”. They identified that DIY allowed them to keep busy and active and help maintain a level of fitness. They felt that to give this up they’d be destined to “sit on the couch” and “become old before their time”. In general, these proponents of DIY for fitness were still realistic enough though to identify their limitations and make contingencies, perhaps take several days to do a job they may have accomplished in one day in their younger years.

It is inappropriate to discourage a sensible approach to low risk DIY e.g gardening, so long as it can offer the healthy older community a means to keep fit and the risk of serious injury can be avoided eg. no pruning at a height.

3.2.2 DIY as a necessity

Most retirees find themselves on fixed incomes or pensions, an actuality that may result in real, or perceived, financial barriers to undertaking even minimal home safety improvements when an outside service provider is required. Focus group participants expressed that budgeting to fit all required maintenance jobs into a limited incomes means that older persons may be forced to tackle maintenance jobs that they may not be able to do, because the alternatives are too costly.

Some participants were accepting of the economic reality that to get many of the jobs done around the home they need a qualified tradesperson and that those services come at an expense. HACC service users were at an advantage having already identified this council service as a cost effective solution to the jobs they could no longer undertake.

Participants relayed fears among the older community that they may be vulnerable to being overcharged for maintenance jobs by commercial service providers. Small jobs in particular, when it may be hard to find a trades/handyperson, may be particularly susceptible to overcharging as the service provider inflates the quote for a job they do not really want. When there are few service providers to choose from, seniors fear that they may have to pay the inflated price to have the task done. As a solution, some participants strongly suggested to others the need to ensure they get several quotes as a means of working out if the prices offered were reasonable.

In addition to the high cost, the waiting periods associated with getting some tasks completed was an incentive to ‘have a go’ at the job themselves. In 2002 MUARC supervised a Deakin Nursing/Health Promotion student project. The two students surveyed maintenance service providers in 8 randomly selected Melbourne council areas. A telephone survey was undertaken with private service providers randomly selected from the local newspapers provided in each of the eight areas. Councils were also interviewed with respect to the HACC home maintenance services they provide. The results of this survey show that most private service providers have waiting times of between one and two weeks on jobs due to limits on the numbers of available staff and existing workloads. Local councils were best able to prioritise urgent or safety related jobs, however they also had the longest waits for non-urgent jobs, compared to private or self-employed providers (Ashby and Fox, 2003).

There comes a time when even the most competent DIY’er becomes unable to complete jobs that were previously accessible. Participants in this study suggested that the catalysts that would make them give up DIY were associated with: fear of injury or physical consequence of doing too much; changes in balance, stability and strength; slowing of reaction times; increasing frailness; lack of confidence in their own ability; decreases in eyesight; increased consequence of medical conditions, including increased medications; and just plain commonsense. At the time of this realisation, an acceptable alternative to DIY needs to sought and accepted.
3.3 WHAT WOULD CONSTITUTE ACCEPTABLE LOW RISK ALTERNATIVES TO DIY?

We asked participants to consider their alternatives to DIY and to share with us where they would look for an alternative and what factors would help them choose a service provider. We first asked where they may, and do, look to if they need assistance with home maintenance. There were a number of avenues identified for sourcing DIY alternatives; the most common sources were the council, local papers, recommended trades/handymen, and family, friends or neighbours.

3.3.1 Council

The council was a commonly identified source of assistance with home maintenance among both HACC service users and non-HACC user groups. Most HACC service users were happy with the jobs that had been provided by council and that services were reasonably priced. The Deakin Student survey of service providers (Ashby and Fox 2003) found that councils generally offer the cheapest services, approximately $10.00 per hour, compared to an average $21-30 per hour for other providers. However, the cheaper costs of council services need to be weighed against longer wait times for some services. The only concern raised by HACC service users was the limited number of tasks covered by HACC services. Non-HACC services users had mixed reactions to the usefulness of council in providing assistance with the range of DIY alternatives they may require, however, their knowledge of the range of services provided may be limited and based on assumption, rather than experience.

3.3.2 Private trades/handyperson

Participants in almost all 15 focus groups were universal in suggesting that the best way to find a skilled and reliable trades/handyperson was by word of mouth recommendation. The notion that a trades/handyperson had been recommended by someone they knew or trusted reassured many of the participants regarding the reliability, honesty and experience of the trades or handyperson. Several participants recommended for large jobs to try and obtain the addresses of previous customers of that tradesperson so they could look at the job, view the standard of work and perhaps even speak with previous customers to see if they had been satisfied with the job done.

The alternative, if no recommendation could be made, was to use the local paper as a means of finding a tradesman to do a maintenance job. Some had positive experiences using trades or handymen who advertised locally, while others were more sceptical about picking a random tradesperson from an advertisement. To a lesser extent participants said they would use the yellow pages.

3.3.3 Family, friends or neighbours

Family, friends or neighbours were commonly raised as DIY alternatives. However, there was mixed enthusiasm for the practicalities of using these unpaid alternatives to DIY versus a paid service provider. Some of the participants in this study were fortunate to have family either nearby who could help, could come quickly when they needed the assistance, or made dedicated time to assist. Others received the same sort of assistance from neighbours and friends, sometimes in lieu of family who do not live in close proximity. Even when this help was available there were some seniors who were disinclined to use it. Reasons for resisting this voluntary help included: a willingness to still do DIY; doubts in helper’s capabilities; inability or unwillingness to wait till the help can be provided; difficulty in negotiating the tasks they want done; and not wanting to be a burden on children who are busy with their own families. Some were especially concerned about being seen as a nuisance or burden on their families. Others felt that if they did not take up the offers of help now that they may be withdrawn and not available if they needed them in the future. Another concern was the impact on “quality family time” if visits from children were taken up asking them to do home maintenance.
Others seniors in our focus groups found themselves unable to access this type of voluntary assistance, commonly because they did not have any family, their family didn’t live in close proximity or they were the youngest members of their neighbourhoods or circle of friends.

Cultural changes in the family and neighbourhood settings emerged as an impediment to voluntary DIY alternatives. In the family context it was felt by some that their children have different priorities in current times compared to the times when they themselves were young and provided support for their parents. In fact some observed that roles appeared to be reversed and rather than the children providing assistance, it was the retirees providing the assistance to their children.

In the community context, our study participants noted that as their neighbourhoods diversified in cultural makeup, language barriers might impede the kind of relationships with neighbours that historically had fostered their assistance with DIY tasks. This situation may be magnified in the two local government areas within which this study was conducted. In the cities of Greater Dandenong and Monash residents born overseas (37% and 54% respectively) are over-represented compared to 29% percent of all residents of the Melbourne Statistical Division being born overseas. Thirty-seven percent of City of Monash residents come from more than 30 overseas countries, and 54% of the City of Greater Dandenong residents were born overseas from 151 different birthplaces (48% from non-English speaking backgrounds).

3.3.4 Factors influencing choice of DIY alternative

After finding out where participants may go to seek alternatives to DIY we then asked them to share what factors were most important to their decisions on whom to choose to provide an alternative to DIY. The main factors that influenced these choice were associated with: cost, including risk of being overcharged; reliability in terms of finding someone to both do the task at hand and to do a good job; security, especially for vulnerable older persons living alone; recommendation from another source; and the general approach of the trades/handy person.

Choosing a tradesperson is price sensitive. As previously stated, older persons find themselves on fixed incomes and hence are limited in the number and size of the maintenance jobs they can have done in the context of tight budgetary restrictions. “Cost is everything” was a common catchcry among the older persons who took part in this study. Concerns over vulnerability to overcharging, especially for small tasks, have been discussed but is extremely important as a predictor for potentially risky DIY behaviour. Finding a reliable tradesperson and trusting that they are willing and able to do the required job was a factor of vital importance and would help address some of the fears of overcharging or over servicing mentioned by our participants. Recommendation from friends, family or neighbours was seen as the best means of finding someone reliable, however there was significant support for a centralised advisory service who would take some care and responsibility in recommending a local trades/handyperson.

Fear of allowing strangers into one’s home is a genuine concern for the older population. Participants in this study commonly felt that older people in our community are, or are seen as, vulnerable and therefore at risk of being taken advantage of. Television and print media are swift to report assaults of older persons in their own homes, and in doing so perpetuate this fear among this population. In the year 2000 the Victorian Department of Justice’s conducted a local safety survey of Victorians which found that a significantly higher proportion of persons aged 60+ (56%) consider crime to be a moderate to great problem in their local area, compared to 43% of those age 14-24 (Dept of Justice, 2000). In reality, however, the older a person becomes the less likely they are to be a victim of crime. A 2002 Department of Justice report found that while seniors represent 17% of the total population, older Victorians experience only 3% of all crimes against persons (Dept of Justice, 2002).

The participants discussed the strategies they use to try and protect themselves in the situation where a person unknown comes to their homes. Many ensured that they have someone at home with them when trades/handy persons or other strangers are scheduled to be there. Some purposely give the
impression that this other person lives with them permanently. Others ensure that they have another’s voice, often a male family member, on the answering machine recording to give the impression that they are not living alone.

Lastly, participants identified just wanting someone who was affable, who approached him or her in a friendly and non-condescending manner, someone they felt comfortable with. HACC providers ensure that they carry official ID so that the older person can easily identify them as the person they were expecting.

3.4 ARE THESE ALTERNATIVES ACCEPTABLE AND FEASIBLE?

There are a number of available avenues through which older community dwelling Victorians can access home maintenance services as an alternative to DIY. Government services, local council programs, private providers and self-employed small businesses all offer a variety of home maintenance services. We asked focus group participants to consider both the services they already know, and come up with new ideas for their ideal DIY alternatives. We took the ten main suggestions from this ‘think tank’ and considered the advantages and disadvantages of each. We also assessed each for how feasible they are i.e. how would they work in reality, as a good suggestion may not be feasible due to high cost or lack of resources. Similarly, we assessed each suggestion against how acceptable we thought the focus group participants would find them, based both directly on focus group discussions and our own impressions from the sense of the groups.

The most feasible alternatives were family/friends’ assistance, recommendation of trades/handy persons by family/friends, local advertising and HACC program services. All of these options are currently in existence and are accessible to most, dependant only on family structure and eligibility for HACC services. Certainly HACC and Community Aged Care Packages assist greatly in enabling older people to stay living at home, but a Doctor’s referral is necessary for the HACC services and an ACAT assessment is necessary for the Community Aged Care Package, so this limits their applicability for all. The options were acceptable to most. Family related options and HACC were cost effective and met criteria for trust and reliability. The only disadvantages were that some tasks may be beyond those providing these alternatives and that there may be a wait for non-essential tasks. Local advertising was acceptable to most but some issues with cost and reliability were an impediment for some.

There were several new or novel options that were highly acceptable to focus group participants, however in reality they may not be feasible as they may be resource intensive and administratively complex. Two suggestions, a volunteer force of retired tradespersons, and a council run advisory service to recommend trades/handypersons were highly desirable but not currently in existence. Councils currently enter into subcontractor agreements with providers who can supply services within the HACC structure. This rigorous process means that councils in good faith can recommend these trades/handypersons but that is the extent of the referral service they can currently offer. Accountability and cost of a broader referral service may be beyond the limits of the HACC service funding arrangements, as maintenance is only one type of service offered under the HACC program. Focus group participants provided examples of volunteer programs of retired tradespersons, but these were small-scale operations limited to one-off Legacy or Probus groups. A larger scale program, even council wide, would be administratively difficult, and demand may exceed the time commitments that volunteers could make. In addition, such a service may simply shift the burden of high-risk maintenance from the resident to the retired tradesperson.

Advice was perhaps the most valuable commodity sought by our older participants. Advice on what maintenance is required, advice on finding a reliable tradespersons, and advice on what to do when they were not happy with a service received. We found evidence of models of advisory services currently running in Victoria to address each of these needs. However, the issue for each seems not the availability or feasibility of these advisory services but the general community’s lack of knowledge
and hence use and uptake. Archicentre conducted 4,000 Home Services Reports in the last 12-months, however none of our focus group participants knew of the availability of the service. Knowledge of the existing service that refers accredited tradespersons and also options in terms of complaining about poor service were completely unknown to participants in our study.

Therefore knowledge, or lack thereof, appears to be a significant impediment to preventing DIY injury, or accessing DIY alternatives. Focus group participants sought information more than anything on how to prevent injury and information on available DIY alternatives.

Three valuable pieces of knowledge could assist the older community to either continue to conduct DIY at a reduced risk, or find suitable DIY alternatives. Firstly, seniors need to be provided with more information on high-risk DIY activity and scenarios so they can use this information to avoid riskier activities. Secondly, they should be made aware by doctors of the implications of medications on their ability to work at a height, or operate powered equipment. Thirdly, they should receive information on suitable DIY alternatives.

Local councils could improve older householders knowledge of available services including: services offered; eligibility criteria; cost; and application procedures. Councils could also consider information sessions for older constituents, via existing networks, where the profile of DIY safety could be raised and DIY alternatives could be discussed. Armed with this information older Victorians could make informed decisions to avoid risky DIY activity.

Lastly, it is worth noting another interesting aspect of the focus groups for researchers was the interaction between the participants. It is not obvious in the recorded data how much interest was observed whilst each participant was speaking. Many of the participants used the occasion to help others in the group by recounting their experiences of DIY maintenance in an effort to warn the others of the inherit problems they had faced, and share solutions to these. Often there would be laughter or a real feeling of “we’re all in this together so lets help each other” amongst the groups, even the non-community groups who were strangers before the focus groups. When the participants left at the end of the sessions they would invariably thank the researchers profusely and tell us how much they had gained from the focus group and listening to others’ experiences.

3.5 LIMITATIONS

This type of study is subject to certain limitations. By the in-depth nature of such qualitative enquiry sample sizes are necessarily small and only a subset of all older Victorians could be included in the study. Hence, one must take care when interpreting the results for other members of other local government areas, or even other subgroups within these two council areas. While all due care was taken to access a cross section of residents of these two local area communities they still only reflect a small proportion of these populations.

Participants self-selected into this study, so selection bias may be present, i.e. there are certain characteristics and experience among those who volunteer to participate in a study like this that may not be present in those who refused to take part. In addition, funding provided for this study did not allow for the use of translators hence non-English speakers might have been put off participating in the study.

There were less participants from the ‘injured’ subgroup than other groups. Given their demographic profile our injured participants may be the younger, fitter and less seriously injured in this group. We may have missed another type of injured DIYer, those who are older and have had more serious consequences from their injury. Similarly, our selection criterion may have been biased against the frailest members of these communities, as they may have not been inclined or able to attend the focus groups.
3.6 IMPLICATIONS FOR FUTURE PRACTICE

Injury prevention efforts rely heavily on change. Whether it be an individual changing their own behaviour, manufacturers changing products to make them safer, programmatic changes or to offer new or revised interventions, or policy makers regulating or mandating change, each contributes to impacting on the injury burden. The results of this qualitative study provide unique insights into the values, attitudes and beliefs that shape the behaviour of older community dwellers with respect to undertaking risky DIY home maintenance activity and use of DIY alternatives and shows that there are important personal and environmental/structural barriers to changing their practices associated with maintaining their homes.

Gielen and Sleet (2003) reviewed behavioural approaches to injury prevention stating that “behaviour change theory provides the bridge from understanding which behaviours and environmental factors are responsible for an injury problem to deciding on and developing appropriate interventions” and that “translating health behaviour theories and models into action programs is essential for injury prevention”. To this end we examined our results using the Health Belief Model of behaviour change to explain the influence of different variables on our older participants behaviour.

The Health Belief Model applied to injury states that health related behaviours result from an individuals beliefs about:

- Their susceptibility to injury.
- The perception of the severity of an injury outcome.
- Feeling that changing their behaviour is beneficial i.e. benefit outweighs the cost of the changed behaviour.
- Cue to action, i.e. an event, action or knowledge that pre-empts thoughts of change.
- Confidence to carry out the changed behaviour.

Susceptibility to injury and perception of severity of an injury outcome

Hospital surveillance data in Victoria clearly indicates an increased serious injury risk for older persons who attempt high-risk DIY to maintain their homes. Injury outcomes are severe with an annual average of 6 deaths and at least 675 hospital treated injuries among seniors as a direct result of DIY activity.

There were four classes of focus group participants identified in our study; distinguishable mainly by their attitudes to doing DIY, and in many respects their perception of risk of injury from DIY. There was a group who were keen to do DIY for as long as they were able and were resistant, even defensive, to any suggestions that they should cease DIY activity just because they were “older”. Members of this group were often men who were ex-tradesmen, or had a background in a safety related field. Another group may have lacked the formal experience of these men but were no less keen to undertake DIY as a means of maintaining their independence and fitness. A third group were still keen to do what they could, but were realising that health concerns, age related deteriorations and size of their properties were factors that were impeding or effecting their ability to continue to do DIY. Lastly, there was a group who had simply become unable to undertake their own DIY.

The first two classes of keen DIYers were adamant with regard to continued participation in DIY despite often having reported a previous history of DIY related injury. DIY injury was perceived by this group as minor and a trade off against the benefits DIY provided.

The latter two classes or participants readily discussed the fear of injury during DIY and recognised the physical consequences of “doing too much”. These participants recognised that physical changes in balance, stability and strength; slowing of reaction times; increasing frailness; diminishing eyesight; and increased consequence of medical conditions, including increased medications made them more susceptible to injury from DIY jobs. These participants also readily noted that the outcome of an
injury could be severe and possibly result in losses of independence, mobility and mean that they may be removed from their home.

**Implications for intervention and practice**

It is important to raise the awareness of the potential consequences of high-risk DIY activity for seniors so that informed choices can be made and an individual assessment can be made on the risks associated with certain DIY activities. Relevant information of the types and circumstances of serious DIY injury should be made readily available to Victorian seniors in an accessible way.

Recommendations to this end are:

- General practitioners or other health care providers should be made aware of the risks and pass on information about the implications of medications or health related declines to older patients and discuss how their medical conditions may place them at an increased risk of injury.
- To release the study results to the media to stimulate public debate and awareness of the DIY injury problem and available services to assist with home maintenance.
- Councils could consider information sessions for older constituents, via existing networks, where the profile of DIY safety could be raised and DIY alternatives could be discussed.

*Feel that changing their behaviour is beneficial i.e. benefit outweighs the cost of the changed behaviour*

A change of behaviour, from DIY to use of a DIY alternative requires good knowledge of potential alternatives and confidence that the outcome from the use of the alternative will be satisfactory. Four main barriers to use of DIY alternatives were identified and included: lack of knowledge of available service alternatives; finding a reliable and competent alternative; financial barriers to using alternatives; and concerns of being vulnerable to overcharging, over-servicing and personal security.

Lack of knowledge of available alternatives to DIY appears to be a significant impediment to preventing DIY injury, or accessing DIY alternatives. Participants in this study sought information more than anything else on available DIY alternatives. Many used the focus group forum, especially non-community groups, to discuss alternatives and share experiences of DIY alternatives. Much of this discussion involved finding a reliable alternative that would “turn up” and “do a good job”.

For some, DIY was still undertaken because the alternatives are too costly. Many retirees find themselves on fixed incomes or pensions, an actuality that may result in real, or perceived, financial barriers to undertaking even minimal home safety improvements when an outside service provider is required. Focus group participants expressed that budgeting to fit all required maintenance jobs into a limited incomes means that older persons may be forced to tackle maintenance jobs that they may not be able to do.

Fear of allowing strangers into one’s home was a real concern for the focus group participants who felt that older people in our community are, or are seen as, vulnerable and therefore at risk of having advantage taken of them. Concerns over vulnerability to overcharging, especially for small tasks, was important as a predictor for potentially risky DIY behaviour. Finding a reliable tradesperson and trusting them to be willing and able to do the required job was a factor of vital importance and, if solved, would help address some of the fears of overcharging or over-servicing mentioned by our participants.
Implications for intervention and practice

There was a number of readily accessible services and schemes currently running that would assist with home maintenance, however knowledge of these was poor. Participants identified the need for services to provide advice on what maintenance is required in their homes, advice on finding a reliable tradesperson, and advice on what to do when they were not happy with a service received. We found evidence of models of current advisory services in Victoria to address each of these needs. However, the issue for each seems not the availability or feasibility of these advisory services but the general community’s lack of knowledge and hence use and uptake. Thus, it is important that current and future strategies in this area are marketed extensively and creatively using multiple modes of distribution. Future strategies and developments need to be considerate of older persons concerns regarding pricing and vulnerability.

Recommendations for future intervention and practice include:

- Local councils could improve older householders knowledge of available services including: services offered; eligibility criteria; cost; and application procedures.
- Local councils could survey older residents to determine what DIY home maintenance needs are strongest and consider these results against the maintenance services they currently provide.
- Private service providers could offer themselves as specialists in “seniors” jobs and offer price and security sensitive services.
- Better advertisement of existing schemes such as the Archicentre Home Services Reports is warranted due to the low level of knowledge among study participants.
- Provision of practical findings from this study, particularly regarding available services, to a central location, e.g. Council on the Ageing, DHS so that they can be distributed to the broader community via multiple media e.g. flyers, websites.

Cue to action

For many of the participants the cue to action was the recognition that they were susceptible to injury, that physical changes in balance, stability and strength; slowing of reaction times; increasing frailness; decreases in eyesight; and increased consequence of medical conditions, including increased medications put them at risk of injury from DIY jobs. Others had seen spouses suffer an injury or health related decline that meant they needed to assess how DIY jobs were to be done.

Some others were spurred to consider behaviour change simply from participation in the study, i.e by having their awareness of the injury risk raised by discussing the issues in the focus group, by reading the plain language statement, or by attending a recruitment presentation.

Implications for intervention and practice

Whatever the cue to action, when older community members recognise the need to act, information regarding risk and alternatives need to be readily accessible and available to facilitate this behaviour change in the most positive way.

Recommendations:

- Release the study results to the media to stimulate public debate and awareness of the DIY injury problem and available services to assist with home maintenance.
- Councils could consider information sessions for older constituents, via existing networks, where the profile of DIY safety could be raised and DIY alternatives could be discussed.
• Provide practical findings from this study, particularly regarding available services, to a central location, e.g. Council on the Ageing, DHS so that they can be distributed to the broader community via multiple media e.g. flyers, websites

Confidence to carry out the changed behaviour

The Health Belief Model was expanded to include the concept of self-efficacy. In this context this means that older members of the community must be confident that they are able to find suitable alternatives, and have the confidence that these alternatives will be cost-effective, reliable and safe.

Implications for intervention and practice

• Local councils could improve older householders knowledge of available services including: services offered; eligibility criteria; cost; and application procedures.
• Private service providers could offer themselves as specialists in “seniors” jobs and offer price and security sensitive services.
• All services providers should wear readily validated security information and identify themselves to allay fears of seniors using a DIY alternative.
4. RECOMMENDATIONS

**Intervention and practice**

- General practitioners or other health care providers should be made aware of the risks and pass on information about the implications of medications or health related declines to older patients and discuss how their medical conditions may place them at an increased risk of injury.

- Councils could consider information sessions for older constituents, via existing networks, where the profile of DIY safety could be raised and DIY alternatives could be discussed.

- Local councils could improve older householders knowledge of available services including: services offered; eligibility criteria; cost; and application procedures.

- Local councils could survey older residents to determine what DIY home maintenance needs are strongest and consider these results against the maintenance services they currently provide

- Private service providers could offer themselves as specialists in “seniors” jobs and offer price and security sensitive services.

- Better advertisement of existing schemes such as the Archicentre Home Services Reports is warranted due to the low level of knowledge among study participants.

- All services providers should wear readily validated security information and identify themselves to allay fears of seniors using a DIY alternative.

**Information dissemination and implementation of findings**

- Disseminate the study results to relevant state government departments, local government, HACC service providers, other relevant services and industries.

- Disseminate the findings from this study into existing seniors groups and the broader seniors community.

- Conduct a forum of stakeholders in this issue to present the study’s findings.

- Provide practical findings from this study, particularly regarding available services, to a central location, e.g. Council on the Ageing, so that they can be distributed to the broader community.

- Publication of the research findings in the peer-review literature.

- Place relevant findings for interventions and information on DHS, MUARC and other relevant websites and widely disseminate the links.

- Release the study results to the media to stimulate public debate and awareness of the DIY injury problem and available services to assist with home maintenance.
**Research**

- Monitor DIY injury among seniors for frequency, patterns and trends over time.

- Seek to have questions on DIY participation, particularly for persons aged 60 years and older, placed into a population-based survey to provide baseline participation rates, and monitor this information over time by means of repeat surveys. These data are currently not available.

- Conduct a study to determine what role home maintenance issues play in older persons decision to move into aged or assisted care, and to compare the costs of increased maintenance service provision with provision of aged or assisted care.

- Seek improvements to Victorian Emergency Minimum Dataset (VEMD) data collection to improve the capture rate of DIY injuries presenting to Victorian emergency departments, as the currently reported injuries are probably substantial under-estimates of the true size of the problem.

- Seek refinement of International Classification of Diseases Version 10, Australian Modification (ICD-AM) to be able to better distinguish DIY related injury.
5. CONCLUSION

Injury is a serious yet preventable cause of morbidity and mortality and results in enormous long-term burden of care costs to both the nation and the person involved. DIY injury among older persons is an emerging injury issue that will increase as the population ages if left unchecked. This project aimed to gain a better understanding of the factors contributing to DIY injuries to older persons. It is the first step in identifying some of the issues facing older Australians, government and service providers in designing and implementing suitable strategies to prevent DIY injuries among an older population.

The major issues highlighted in this project were: the complex decisions facing older persons in accepting the need to give up DIY; the difficulties in choosing appropriate DIY alternatives; lack of knowledge of some resources and services currently available; and the challenge of accessing cost effective and reliable private service providers.

It is important not to overlook the positive benefits low-risk DIY activities can provide post-retirement. DIY can enhance general fitness, provide satisfaction and pride in a job well done and give meaning and enjoyment. Within the older population we do not wish to discourage these positive benefits but hope that programs and services can be designed and be made accessible for when DIY becomes burdensome or dangerous to older homeowners.
6. REFERENCES


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APPENDICES

APPENDIX 1: FOCUS GROUP THEMED QUESTION LIST

Investigating older persons' involvement in DIY activities – Interview Protocol for Discussion Group

Thank you very much for attending our discussion group. As you know, we are undertaking research into Do-it-Yourself (DIY) injuries to older persons. DIY home maintenance injuries result from activities that could have been done by a professional tradesperson but are undertaken by a homeowner or occupier. They range from simple tasks such as gardening or mowing the lawn to more complex tasks such as building an extension onto the house, or painting the house. We would like to ask you a few questions about your DIY activities.

1. How often do you undertake DIY activities in your own home?
2a. What sort of tasks do you do regularly? Prompt e.g. gardening or lawn mowing?)
2b. What tasks do you do less frequently? Prompt e.g. up ladder pruning, use power tools?
3. How fit do you feel to undertake these tasks?
4. Have you ever been injured doing a DIY task? Prompt: minor e.g. cut or scratch, major requiring hospital visit?
5. Has the injury stopped you from undertaking DIY activities? Prompt: temporarily or permanently?
6. Why do you do DIY tasks yourself? Prompt: necessity or choice?
7. What factors would make you decide not to undertake DIY activities any longer? Prompt: can you see a time when you may no longer wish to do tasks yourself?
8. Do your family or friends ever assist you in maintenance tasks around your home?
9. Would you be happy to pay someone to do these tasks? Prompt: If 'no' is this because of cost, home security, promptness of service, standard of work, or reliability of tradesperson?
10. Do you know of other services that may be available to help with your DIY tasks? Prompt: What are these? Eg Local Council, HACC, Grey Army?
11. Which of these services have you used and have you been satisfied?
12. What would you see as the best alternative? Prompt: Local Council organised tradesperson, family/friends, maintenance providers who offer pensioner discounts or other?
13. What are the most important factors for you in choosing an alternative to DIY? Prompt: cost, security, reliability, others?

Thank you very much for the time you've spent with us. It has given us valuable information to help prevent DIY injuries and inform service delivery.
APPENDIX 2: DEMOGRAPHICS QUESTIONNAIRE

Investigating older persons' involvement in DIY activities:
Background survey

1) Full Name...........................................................................................................................................

2) Gender    M ☐   F ☐

3) Age group   60-64 ☐ 65-69 ☐  70-74 ☐  75-79 ☐  80+ ☐

4) Age of your home.............yrs

5A) Type of dwelling
   Separate house ☐
   Semi-detached, row or terrace house, town house ☐
   Flat, unit or apartment ☐
   Other (please specify) ..............................................

6) Do you own or rent the property?    Own ☐
                                           Rent ☐

7) Number of years you have lived there..........yrs

8) Do you live alone?   Yes ☐ No ☐

8A) If no, with whom do you live?  Spouse ☐
                     Partner/friend ☐
                     Other relative ☐
                     Your child ☐
                     Boarder ☐
                     Other (please specify) ………………..

9) Have you ever been injured doing DIY home maintenance?      Yes ☐ No ☐

   If, YES
9A) How long ago were you injured? ......................................................

9B) What activity you doing when you were injured? eg. cleaning gutters
...........................................................................................................

9C) What was your injury? eg. sprained ankle
...........................................................................................................

9D) What level of treatment did you require? eg. GP visit, hospital stay
...........................................................................................................

_____________________________________________________________________

Office use only

Date……………. Session time…………………….Venue……………………
APPENDIX 3: SAMPLE SUPPLEMENTARY NOTES

How often do tasks?
- missed her answer
- finds maintenance overwhelming so
  tables things on weekly basis. Is now disabled &
  finds things v. difficult esp. daily tasks
  we seem to trip over things more easily. Uses council
  & pays others. Finds curtains difficult. Doesn’t work
  windows. Things she can’t do, she leaves or looks for other
  ways.
  because not aware of what Council can do she
  doesn’t want to pester relatives. So finds ways of getting round
  the issues
  used to
  - help neighbours, now they do them in return
  - who fixes possible damage, also expensive to get
    help outside. Good if Council could provide outside
    help.
    - pays $6/40/hr from Council

Most common tasks?
- gardening, painting
  - pays gardener. Council could help.
  - 1 bedroom unit: moving plants can be a problem
    has major medical problems so even easy tasks difficult
  - leaves tasks eg curtains windows.
    when older you can’t do it
  - medication can upset you also esp. balance.
    - meds are bad.
    - meds needed down in my unit.
    - ladders difficult
  - not allowed climb ladder, wonky on pins
    - no longer houseproud. Can’t judge pavement, move likely
20/12/04 CGD

has fallen 3 times, has learnt to fall on stomach. 3 times.

Tired, poor vision.

Some days have side effects.

I'm on a tablet which has very severe effects. Would like to do
tings but can't

you body says no

Feels stupid asking someone to change a light globe

Recovering last 3 months but has had terrible trouble
getting help to even do simple things.

May upset, comforted.

Any injuries?

- has had arm injury

- you often don't know

- even if you have a slight fall because everything hurts.

I can't take out kitchen bin now, because it's so awkward.

Medical bills from extra medical now when you think the things you used to do are so different.

Feels Council should provide a list of tasks they will do.

don't want people to know you live alone.

Small maintenance tasks are so expensive.

maybe cheap Council assistance also.

has been told what she can't do by her specialist but when

you're on your own this is difficult. You have to have a true

balancing act between what you can do and can't do. Costly exercise.

I changed a light bulb, it was scary and painful.

I have a torch always. I used to be able to do heaps, now

can't do simple things.

Who can I contact in emergencies? Plumbers won't come even

if advertised as 24hr.

is saving money for major plumbing repair.

How available are family, friends?

excellent, close, too

not close + busy. Lives elderly people, it's the blind leading

the blind.

can't always depend on neighbours.

brought up her kids on her own so has grandchildren to help.

No one available

finds cars cut off driveways which is really hard for

elderly people.

lots of accidents.

has one daughter but she is young + busy + I don't

want her to feel pressured by the disabled mother.
20/12/04  

Dear Mr. [Name],  

I hope this message finds you well. I am writing to ask for your advice on a matter that has been concerning me recently.  

In the old days you knew your neighbours, but things have changed. Our local community has become more diverse, and I have noticed that some of the new residents do not appear to get along well with each other.  

Recently, I have heard that one of our neighbours has moved into a new house and has a disabled child. They have not received much assistance from the local community, which has been disappointing.  

Apart from Council, how else do you get help?  

Trustworthiness is important.  

Friends recommend, 'word of mouth'.  

If small jobs, the local paper maintenance men don't want to know you.  

Her previous experiences, 'rip off'. Some people are out of the property, men are rude and unpleasant. Once they know you're 'old' or the pension they think you're stupid and try to overcharge.  

Other agencies, Council came and did handrails very reasonably.  

Social worker at Rehab was wonderful.  

Local Parish very good to her.  

Are you willing to pay for a good job?  

General agreement 'yes', as long as price not inflated.  

Feels Government should have some form of subsidy to employ appropriate people to do small tasks.  

Because she can't bend, saved up for a dishwasher but couldn't afford to get piece inserted to raise it's level.  

Got a $300 quote for a little cupboard.  

Security lights are very expensive to install.  

Any other suggestions?  

Centrelink could advise re Council workers for minor jobs - 'all agreed'.  

* Not aware of what should be done & really appreciates reminder re charging fire alarm reminder.  

Factors when getting outside:  

Trustworthiness, trades persons, honest, appropriate skills, value for money, cost.  

People wanting to do small jobs, if on your own, can't plan to have someone with you.  

If you know the person it helps.  

Don't want to feel vulnerable.  

Yours sincerely,  

[Name]
APPENDIX 4: CODING SCHEME

Major coding categories for ‘Older DIY’ focus groups

- Frequency and type of DIY activity (FREQ) (TYPE) (TYPE_N)(LADDER)(PPE)

This category refers to the first introductory questions of the focus group. This includes how often a participant undertakes DIY (FREQ) and what types of DIY activities they or their spouse/partner around their home undertakes (TYPE). Any DIY activities that they identify that they cannot do anymore are coded as (TYPE_N) to denote that they are unable to do this task anymore.

Specific details for some types of DIY activity or issues should also be coded here where they are commonly mentioned eg. ladder (LADDER) or are means of prevention eg. personal protective equipment (PPE).

- Experience (EXPER)

This category refers to participants who have working experience in a trade or safety related setting.

- Positive aspects of DIY (FIT) (PRIDE) (INDEP) (OTHER +ve)

This category refers to the positive feelings/reasons given by participants for undertaking DIY. It is important to capture the benefits of DIY for this population subgroup so this data should be coded here. This category should capture mentions DIY conducted for fitness/health reasons (FIT), for the pride and satisfaction of doing the job themselves (PRIDE) and to help participants remain independent (INDEP). (OTHER_+ve) can be used for any other positive outcomes from DIY not accounted for in the codeset.

- Health (HEALTH) (MEDS) (AGEING) (FEAR)

This category refers to any discussion of how DIY impacts participants’ health, in either a positive or negative way. There may be some crossover with (FIT) but if the participant specifically mentions that they do DIY to keep fit, code to (FIT) instead. (HEALTH) should also capture health concerns that have caused participants to give up DIY. Mention of impact of medications should be coded specifically as (MEDS) but keep within this broad category. (AGEING) should be assigned to how participants have noticed declines or changes in their capabilities associated with age, other than health or medication issues. Also, coded here are instances where older persons speak of fear for doing DIY for fear of injury (FEAR).

- Barriers to DIY alternatives (COST) (SECURITY) (RELIAB) (WAIT) (SMALL_J) (OTHER_B)

This category refers to negativities feelings or issues that may deter older persons from using DIY alternatives. Includes mentions of: the expense of alternatives and limitations to being able to afford these (COST); issues of finding a reliable tradesperson to do the required tasks (RELIAB) an specifically finding someone to do a small job (SMALL_J); issues of fear and security of letting a stranger into their homes (SECURITY); and the issue needing to wait for the task to be done, (WAIT). (COST) should include issues raised about getting quotes for jobs and fear of being overcharged for a job.

(OTHER_B) can be used for any other barriers not accounted for in the codeset.
• Adapting (ADAPT) (↓size)

This category refers to any information about how seniors have changed, or adapted the way they do their home maintenance or changed their existing homes to make DIY easier. It also should include data on thoughts or actions about downsizing their homes to make it easier to remain living independently.

• DIY alternatives used (COUNCIL) (TRADE) (GREY ARMY) (FAMILY) (FRIEND) (NEIGH) (CLUBS) (OTHER_ALT)

This category codes participant’s experiences of using alternatives to DIY. Sub-coding is used to determine the type of service provider council (COUNCIL), a private trades or handyperson (TRADE) or Grey Army (GREY ARMY). Or, voluntary assistance such as family (FAMILY), friends (FRIENDS), neighbours (NEIGH) or local clubs (CLUB). General descriptions of using these alternatives should be coded as above.

If the participant relays a particularly good or bad experience of any add (+ve) or (-ve) to the code eg. (COUNCIL +ve) if the data tells of a good experience using council services as a DIY alternative.

(OTHER_ALT) can be used for any other alternatives not accounted for in the codeset.

• Source of alternative (PAPER) (RECOM)

This category tells how participants source their DIY alternatives, through recommendation or word of mouth (RECOM) or from the local newspapers (PAPER).

If the participant relays a particularly good or bad experience of any add (+ve) or (-ve) to the code eg. (PAPER -ve) if the data tells of a bad experience of finding a DIY alternative in the local paper.

• Ideal alternatives (ADVISORY) (GUIDE_B) (VOLUNTEER) (BARTER) (OTHER_IDEA)

When the participants ideal alternative to DIY has previously been coded for eg (FAMILY) (FRIEND) (COUNCIL) etc. then use codes as above. If the alternative is a new idea or something not previously mentioned use the following codes: (ADVISORY) for suggestions for advisory services for seniors; (GUIDE_B) for suggestions for a local guide listing all services; (VOLUNTEER) for suggestions for any non-family volunteer forces; and (BARTER) for suggestions for a barter system.

(OTHER_IDEA) can be used for any other alternatives not accounted for in the codeset.
APPENDIX 5: PARTICIPANT’S NOTES RE DIY SAFETY

THINK THINK THINK

Think about the project you are about to do.

Think about how you are going to achieve this.

Before proceeding think about any possibility which may cause an accident or injury to yourself or a helper. Such as falls, cuts, broken bones etc.

What equipment or tools are you about to use? Is this equipment etc in good condition, such as, are tools sharp? Have you a strong & safe ladder, goggles or ear protectors.

If working under the house, or on a roof, make sure there is some person within hailing distance if an emergency should arise.

IMPORTANT Always notify this person where you are going to be and what you are doing.

GENERAL SAFETY HINTS:

Keep pathways clear and unobstructed by such things as hoses, pieces of timber, garden tools or other rubbish which may contribute to a fall.

External steps: paint the edges white for easy visibility. Install a secure handrail on at least one side or have a tradesman do this. IT must be secure.

First aid kit: Have a few essentials, band-aids, antiseptic etc. together in a container & NOT mixed up among other non emergency items in the medicine cupboard.

Cutting tools. Keep these sharpened as they will work better, and if you have an accident, a clean cut is better than a jagged tear and less painful. When cutting with sharp handtools, always make the cutting direction AWAY from the body.

In a workshop or “shed” keep the bench and floor uncluttered. Things lying on a floor can cause you to trip.

Ladders can be a source of severe mishaps, extension ladders in
particularly. Make sure the bottom is stable and the ladder not leaning sideways. The top of the ladder must also be resting in a stable position. If possible secure it to prevent any sideways slipping. Old ladders with loose joints & hinges should be destroyed before they cause a mishap. Step ladders are not as dangerous but similar precautions apply.

Power tools can be a source of danger. Keep electrical cables in good condition.

Smoke alarms are cheap insurance.

N. Stahlard
Research Project:
Investigating the
Over-representation of older persons in do-it-yourself home maintenance injury and barriers to prevention.
Venue City of Monash offices (Ron @ Hall Oakleigh 11am ¼ hour before for information & registration)
The purpose of this project is to investigate the over – representation of older persons in Do-It-Yourself (DIY) home maintenance injury and barriers to preventing these injuries
Do-IT-Yourself activities refers to those home maintenance tasks such as Lawn Mowing, Pruning, Cleaning Spouting, or Painting that you undertake in your own home. (This is limiting what about Gardening

Lawn mowing.
Depending on health use (electric or key start type of mowers,) automatic cut off models if possible.
Always cut across inclines.
Always remove electric power source before touching or inspecting blade area.
Always remove spark plug before touching or inspecting blade area.
Have motor mower service regularly (2 years)
Have mower blades sharp
Prepare lawn no objects that could be come missiles

Pruning.
Hand pruning saw.
Branch cutting with extension pole cutters
Use step ladders, not leaning type
Chain saw with two people
Safety equipment eyes & if needed ears

Cleaning of Spouts
Clean with hose on stick.
Remove trees which cause trouble.
Liaise with neighbours over tree which cause trouble.

Painting.
Use Ladders & Plank where possible.
Use a roller where possible

Plan
A head for all of life
For all of the four things

Safety
Have an uncluttered house & garden
Know your limits
Use right equipment

Tools
Use the right tools
Sharpen or have them sharpened regularly

Garden
Choice of plants (low maintenance)
Tree height (maximum of 4 metres)
Mulch all gardens (to limit weeds)
Outside the Home

1. Old fungus from cleaning or garden (shovelling) - seldom clean, cleaning out.
2. Stiffness in joint, lack of proper, clean, well-ventilated areas.
3. Windows - care needed in getting it out.
4. Noise from across walkways.
5. Stiffness in joint, poor eyes, lack of clean, well-lit areas.
6. Belt and stiffening back walkways will wear, build outs.
7. Inefficient outdoor lighting at night.
8. Steps, poorly defined.
9. Inefficient draining on the rear of home details.
10. Incorrectly lifting heavy objects.
11. Building fences around drain, (eye shields), area 3 month guards.
12. Antibacterial papers.

Kitchen

1. Broken clocks, lighting on floor causing stiffness.
3. Lighting on floor.
4. Plastic outside chair, suffering fatigue from sun light.
5. Broken clocks on electric blankets.
6. Three doses in lunch.
7. Telephone cords.

Personal

1. Badly fitting or worn out footwear.
2. Use of high design standards for blue home planning.
3. Bathrooms needs distincting marks for blind habits.
4. Over hanging branches from back yards & fields.
5. Dry and wet mats.
Poisonous substances should be marked clearly not put in soft drink containers, milk bottles, cold cream bottles.

Floors should have non-slip surface, table clothes (if pulled can spill what on table)

Not easily knocked over radiators have built in heating apparatus properly guarded.

Have enough power points for all gadgets so that there is no trailing cords.

Items on benches shorten electric cords.

Cautious on cords for pans or electric jugs tip over causing accidents.

Non-slip mats on floors in bathrooms.

Dispose razor blades after use.

Never use a portable radiator in the bathroom when washing clothes when hair is wet don't touch electrical switches.

Outdoor swimming pool should have fence around. Not just a cover over pool.

If person loses balance fall onto cover.

It sinks bringing sides over top of them.

Loose carpet on stairs easily trip.

A house should be simple, uncluttered, functional and tidy.

Do not carry any thing that is too brittle or too heavy could cause balance.
When the phone rings, before answering
Turn off water, gas, electrical appliance
Could be on phone a long time talking.

Stairs at night have sensor light to come
on easier to see. Have hand rail
Some are slippery when wet.
Have proper fitting shoe wear and kept in
good order.

Read instructions on medicines and
tablets, when & how many to be taken

When using a ladder or step ladder make
sure it’s on firm ground.

MOTOR MOWER. Do not try to pull
some thing from under muther those you
fingers.
Do not walk back wards with mower
could trip and pull mower on to feet.
Do not use when near anyone sitting
near by. A stone can come off blade
at same velocity as a 45 caliber gun.

From
Ron Campbell

Springvale Senior Club
Focus Group
Tuesday 16 Nov 2004.
APPENDIX 6: APPLICATION TO REQUEST A QUOTE FROM MYLIFEMYHOME.COM

<table>
<thead>
<tr>
<th>Title (eg. Mr, Mrs, Dr)</th>
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<tbody>
<tr>
<td>First Name*</td>
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<tr>
<td>Last Name*</td>
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<tr>
<td>Address</td>
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<tr>
<td>Suburb*</td>
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<td>State*</td>
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<td>Phone*</td>
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<td>Fax</td>
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<td>Email Address</td>
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Do any of the following apply to this project?
- [ ] Urgent job/requires immediate attention
- [ ] Needs to be done outside of business hours
- [ ] This will be a recurring job
- [ ] I will be providing some or all of the materials
- [ ] Insurance is covering this job
- [ ] This job requires work on a building of historical significance

Choose the appropriate status for this request*:
- ready to hire

When would you like this request to be completed*?
- ASAP
Quote Request*
(please provide as much detail as possible)

How would you like to receive the quotes?*

Email
Have you read our terms & conditions for using this service?*