

**To analyse evidence based government policies**

 | Need Assignment Help

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### **Aim:**

To analyse evidence based government policies and age friendly initiatives from Aotearoa/ New Zealand and a global context.

### **Ageing Population in New Zealand compare with the US**

The ageing population has accelerated over a period of time driven by decreased fertility rates and rapid increase in the life expectancy. The population of people over 65 years across the world has been estimated 524 million in 2010 would increase to approximately 1.5 billion by 2050 (World Health Organisation, 2011). In the 2013 census in New Zealand, the ratio of 65

plus population has doubled from 1981, from 309,795 that 9.9% to 607,032 that is 14.3% (Statistics New Zealand, 2015). This population is expected to make up 23.8% of total NZ population by 2063 (Statistics New Zealand, 2015). Apart from the impact on social and economic scenario, the ageing population has resulted into increase in the age related chronic diseases and that is challenging the global health care systems. New Zealand is not an exception to this scenario because there in unsustainability in the health and services provision in the country (Ministerial Review Group, 2009).

Similar kind of situation is observed in the US too. According to the reports of U.S. Census Bureau (2009), one out of every eight people in the America is above 65 years. The population is ageing and by 2050 the ration will further increase to one in five. When compared to NZ, the US ageing population is diverse economically, socially and ethnically.

The majority of population reside in suburbs and approximately only 10% comes under below federal poverty line. The situation is more complicated due to the lack of adequate public transport. In a survey conducted by AdvantAge initiative revealed that 43% of the elderly people stated that there is no sufficient public transportation for their communities (Feldman , Oberlink, Simantov, & Gursen, 2004). The housing societies where the elderly lives are not age-friendly. The studies suggest 14% of the houses where the adults reside require major modifications and repairs, as they were also build almost 40 years ago (Feldman , Oberlink, Simantov, & Gursen, 2004).

In the year 2003, the NZ Guidelines Group analysed that gaps are present between the actual and best assessment processes in the country. Bridging this gap required a comprehensive evidence-based and standardized assessment tool was required. Then the Home Care international Residential Assessment Instrument (interRAI-HC) was introduced and accepted by all DHBs in NZ (Meehan & Millar, 2014). InterRAI is an international research and clinical network that is focussed on the development and use of comprehensive tools of

assessment to respond to the requirements of people with complex health demand, involving more than 30 countries (Bernabei, et al., 2009). The prime aim of this assessment is to promote evidence-based clinical practice.

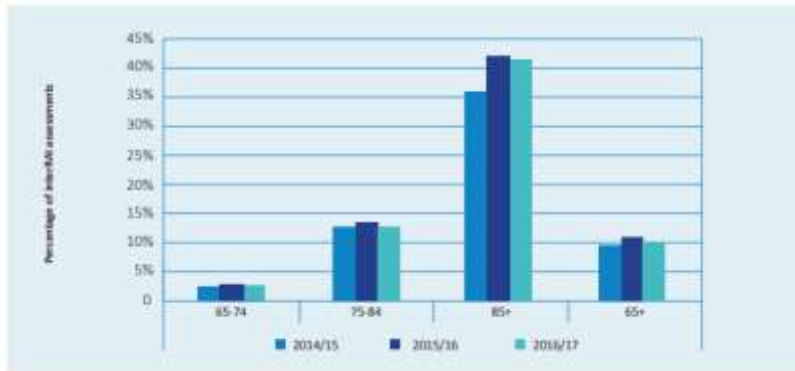
In the United States, the Federal Government has realised to develop ageing-friendly communities. The changes are now being implemented in the physical and social infrastructures of the country for the elderly population. This step was implemented for the physical and psychological harmony of the people in community as they age.

## **Analysis of interRAI annual reports**

InterRAI is, “ *responsible for developing comprehensive clinical assessment systems and the suite of clinical assessment tools available. In New Zealand, interRAI is governed by interRAI New Zealand Governance Board*” (interRAI New Zealand, 2017). There exists a royalty free licence with interRAI International via the Director-General of Health. The District Health Boards (DSBs) have been using interRAI for the assessment of the needs of old age population in the country.

According to assessment of interRAI for 2016-17, 10% of the New Zealand’s population is aged above 65 years. This percentage has remained constant over the last three consecutive years. 41% of the assessments in the same year were over 85 years of age, and required greatest support and care (interRAI New Zealand, 2017).

**Figure 1: interRAI assessment for the aged**



The disease diagnosis done by interRAI on 65 plus in 2016-17 revealed three most common diseases and they were coronary heart disease, diabetes, and stroke.

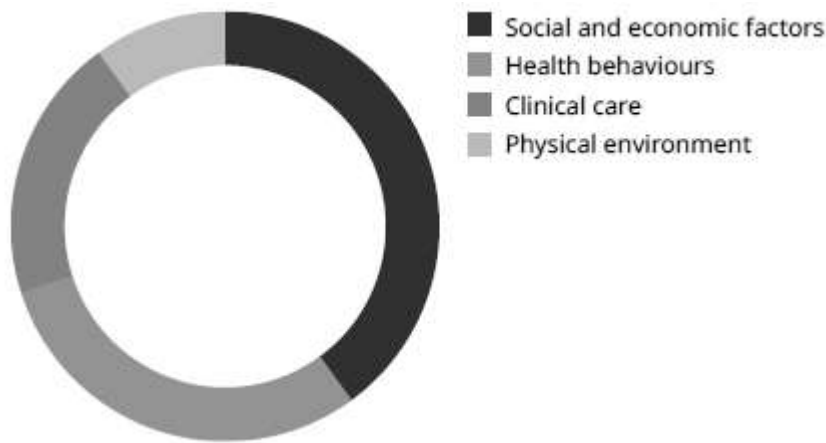
The population today has increased access to health care had addressed the disparities to health. The life expectancy has increased among the indigenous population of Australia, New Zealand, Canada and the US but is not matched with the non-indigenous population of these countries (Kunitz, 1994). In the year 2016-17, most of the population of New Zealand rated themselves as healthy and long life expectancy. The recent findings of “Global Burden of Disease” study revealed that in the past two decades, life expectancy and health expectancy have raised for the New Zealanders (Ministry of Health., 2018).

As per the report, the life expectancy has increased with much faster rate when compared to health expectancy in the country, this implies that the population in the country is experiencing long life in poor health. There are constant health challenges for the health and disability system (Ministry of Health., 2018).

### ***Factors affecting health***

There are various factors that are influencing the health and well being of the New Zealand which include economic, social, clinical care, and health behaviours (Ball & Lawler, 2014). Ministry of Health works in corporation, with district health panels and other agencies to improve the outcomes of health conditions in New Zealand.

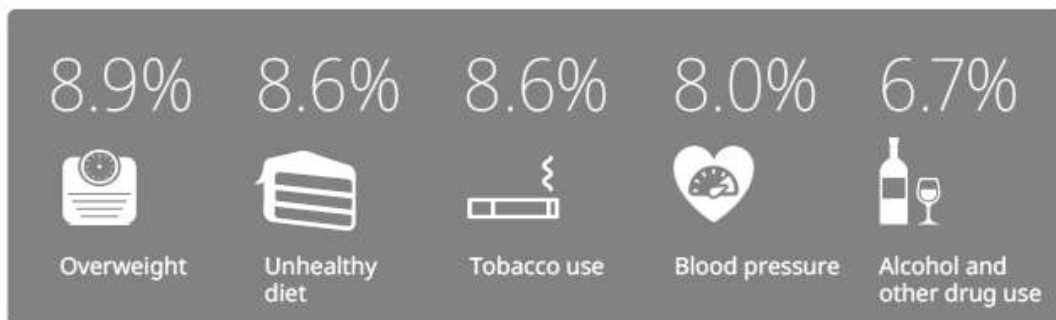
**Figure 2: Factors affecting health**



Source: (Ministry of Health., 2018)

The modifiable health behaviours of the people in New Zealand account for major health loss in the country (Boudiny, 2013). It includes over weight, unhealthy diet, high blood pressure, tobacco usage, alcohol and other drugs are the prominent modifiable risk factors affecting the health expectancy rate (Appannah & Biggs, 2015). The statistics suggest that the rate of smoking, alcohol and cannabis usage have increased, whereas the consumption of fruits and vegetables has fallen. The rate of obesity has increased since 2011-12 (Ministry of Health., 2018). These modifiable risk factors have influenced the social and physical environment of the people and are important focus of the Ministry of Health for prevention (Bowling, 2005).

**Figure 3: Factors affecting health loss at all ages and gender**



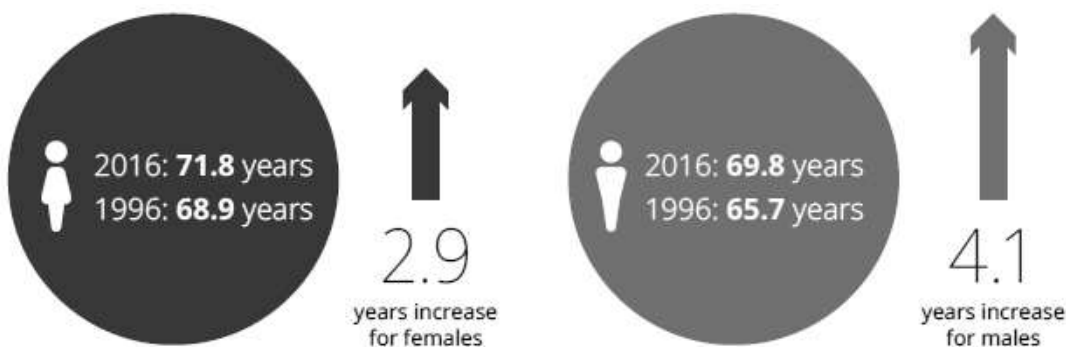
Source: IHME (2016)

## *Life Expectancy in New Zealand*

Life expectancy ratio is considered to be a critical indicator of health status of the total population in a country. This reflects that how the health and disability system, living standards, societal efforts contribute to the length of the life of people. The life expectancy of 65 years and above has increased from 1996 to 2016 by 2.4 years for females and 3.3 years for males in New Zealand. In 1996 a female aged 65 years was expected to live further for 19.1 years whereas in 2016 the woman of 65 years is expected to live further for 21.5 years. The males of 65 years in 2016 are expected to live further for 18.9 years when compared to 1996 that was 15.6 years (IHME, 2016). Though the life expectancy has increased for overall population but there exists discrepancies between Maori and non-Maori groups (Ministry of Health., 2018). According to the report of IHME (2016), the health expectancy rate for ageing population has also increased in the last two decades. As per the statistical data, the health expectancy for females above 65 years of age has increased by 1.8 years whereas, for males it has increased by 2.5 years (IHME, 2016).

The life expectancy rate of the ageing population in the US is higher than NZ. As per the United Nations report, the ageing population increased from 8% in 1950 to 12% in 2000 and it will further increase to 20% by 2050. The reports suggest that life expectancy of ageing population is 81.2 years in females and 76.4 years in males (USC Gerontology, 2018).

**Figure 4: Health expectancy rate**



Source: (IHME, 2016)

Though health expectancy has increased with life expectancy but rate of increase in health expectancy is lower than the life expectancy which implies that the average New Zealand population is living around for a decade in poor health condition. When compared with 1996 statistical data, the average number of years females have spent in poor health condition has raised from 10.9 years to 11.6 years in 2016 whereas it increased from 8.8 years to 9.8 years for males (IHME, 2016).

The prime challenge for health and disability system in New Zealand is to guarantee that people live long in good health conditions. The biggest challenge in this situation is the rapidly ageing population of the country . Currently most of the New Zealand population is living in their seventies and above. It is being predicted that by 2050, one out five New Zealander will be aged 65 and above and the number of people above 85 years will be tripled (Ministry of Health., 2018). The ageing population brings health issues, disability and frailty along.

### ***Health of Aged in Aotearoa***

In Aotearoa New Zealand, the life expectancy of ageing population is 81.1 years for females and 76 years for males, whereas for indigenous population life- expectancy is approximately less than nine years for non-Maori people. It has been observed that ischemic heart disease and cancers are the prominent reasons of mortality of people, and ageing population suffers from higher rates of chronic obstructive respiratory disease, arthritis, osteoporosis, and asthma. It has also been observed that females are more prone to these diseases than men in Aotearoa, NZ (Yeung, Cooper, & Dale, 2015). The life expectancy has increased for New Zealanders but the increase in health expectancy has not inclined with the same pace (Yeung, Chan, & Woo, 2015). Mental health condition for ageing population is also an issue. In case



of females suffering from mental health issues also face social isolation and anxiety about lack of financial security and safety (Dr. Hall, 2015). Additionally, evidence is there that anguish caused by such issues in the older people may be medicalised rather than they are addressed at a social or economic level. The reports suggest that by middle of the century, 26% of the population will be 65 and above and majority of them would be females. The problem of ageing population throughout the world has evolved new theories and policies to deal with the issues of gender and age discriminations. There are studies that suggest that various countries are looking for cost effective health care methods, where the older population could become the target for cost cutting (Dr. Hall, 2015).

It has been noted by Ministry of Health, New Zealand that less than one in twelve of the aged disabled people is taken care by institutions and older care facilities. There are studies that shows ageing population have indicated to be more satisfied than the youth population, with their lives. The studies also suggest that most of the older population despite of being disabled, function well in the society and positively take care of the health condition (Dr. Hall, 2015).

## **Health Strategies for Aeging Population**

Every year, the services of New Zealand's Age Concern's EANP get more than 1000 referrals regarding elderly abuse or neglect. More than half of the victims are elderly women. EANP has pointed out that dependent elderly people are particularly in susceptible position to abuse and reports revealed that for many of the ageing population their health was considerably affected due to the abuse they have experienced by their care takers. This abusive behaviour because of dependence on others has resulted long-term consequences and majority of them experienced a significant decrease in their independence and self-esteem. It was reported that older people are left with the feeling very frightened or anxious and

emotionally distressed (Dr. Hall, 2015). The data shows that elderly abuse by care services is not very prominent but abuse by their own family members is very common. The studies and data of Age Concern New Zealand (ACNZ) have revealed that there has been constant increase in the referrals for some time, and that services are not always able to respond to this demand.

In the US, the federal government is taking initiatives to support its ageing population. The White House Conference on Ageing (2015) identified that, “*creating and supporting communities that are age-friendly*” is very crucial in order to support the vigor, health and ageing in the community. The AFCI that is the Age-Friendly community initiatives are being applied by the US government to support the community change process of on the behalf of rapidly ageing population. AFCI plays a vital role in identifying the issues faced by the elderly adults including social, economic, mental, psychological and physical issues. After recognizing these issues, different model have emerged with an aim of transforming societies to give the elderly population, more healthy and age-friendly environment (Geller, 2009).

The studies suggest various reasons behind declining health expectancy and increasing life expectancy. The Ministry of health is providing better health facilities to the people which has improved the life expectancy but with disabilities. The challenge to ministry of health is to improve the quality of health and life of the ageing population in Aotearoa New Zealand. Apart from health facilities the ageing population are being ill -treated for being dependent therefore provision for work could help them to improve their quality of life especially to the elderly women. Apart from this the elderly abuse should be taken seriously that hampers their both physical and mental health.

## Conclusion

There has been constant increase in the ageing population of over 65 years in Aotearoa New Zealand. The crucial health challenges faced by the ageing population could be highlighted through a disease based approach group in general. This does not covers the issues related to poverty, migration, ethnicity, or any other effects of discrimination or grouping (Dr. Hall, 2015). There hasn't much significant difference been observed in the lives of ageing population of the New Zealand over the last century through the focus on their mortality rate.

It has been observed that as a result of medical improvements or healthy diets followed in their early life, the people who are now in their eighties might be living longer but with disabilities. And we also cannot expect that ageing population above 60s, who have been reported to be exposed to various modified risk factors such as increased consumption of drug and alcohol, and the increased availability of treated foods and an inactive standard of living, will definitely would affect the health expectancy of the population along with life expectancy. The evidences also reflect towards poverty as significantly influencing health and mortality of ageing population (Dr. Hall, 2015).

## References

- Appannah, A., & Biggs, S. (2015). Age-friendly organisations: The role of organisational culture and the participation of older workers. *Journal of Social Work Practise*, 29(1), 37-51.
- Ball, M., & Lawler, K. (2014). . Changing practice and policy to move to scale: A framework for agefriendly communities across the United States. *Journal of Aging & Social Policy* , 26(1-2), 19-32.
- Bernabei, R., Gray, L., Hirdes, J., Pei, X., Henrard, J., & Jonsson, P. (2009). International Gerontology. In J. Halter, J. Ouslander, M. Tinetti, S. Studenski, K. High , & s. Asthana (Eds.), *Hazzard's Geriatric Medicine and Gerontology*. New York (US): McGraw Medical.
- Boudiny, K. (2013). Active ageing: From empty rhetoric to effective policy tool. *Ageing and Society*,, 33(6), 1077-1098.
- Bowling, A. (2005). . *Measuring health: A review of quality of life measurement scales*. Mainhead: Open University Press.
- Dr. Hall, S. (2015). *Submission Health of Older people Strategy*. Auckland: Women's Health Action Trust.
- IHME, I. (2016). *GBD Compare*. Seattle, WA: IHME, University of Washington.
- interRAI New Zealand. (2017). *Annual Report 2016/17*. New Zealand: interRAI New Zealand.
- Kunitz, S. (1994). *Disease and Social Diversity: The European Impact on the Health of Non-Europeans*. New York: Oxford University Press Inc.

Meehan, B., & Millar, N. (2014). Regulating the quality of long-term aged care in New Zealand. In V. Mor, T. Leone, & A. Maresso (Eds.), *Regulating Long-term Care Quality: An International Comparison* (pp. 357-81). New York: Cambridge University Press;.

Ministerial Review Group. (2009). *Meeting the Challenge: Enhancing Sustainability and the Patient and Consumer Experience within the Current Legislative Framework for Health and Disability Service in New Zealand*. . Wellington (NZ): Government of New Zealand.

Ministry of Health. (2018). *Health and Independence Report 2017: The Director-General of Health's Annual Report on the State of Public Health*. Wellington, NZ: Ministry of Health.

Statistics New Zealand. (2015). *2013 Census QuickStats about People Aged 65 and Over*. Wllington (NZ): Government of New Zealand.

World Health Organisation, W. (2011). *Global Health and Ageing*. Geneva: US National Institute of Aging.

Yeung, P., Chan, W., & Woo, J. (2015). 'A community-based Falls Management Exercise Programme (FaME) improves balance, walking speed and reduced fear of falling. *Primary Health Care Primary Health Care*, 16(2), 138-146.

Yeung, P., Cooper, L., & Dale, M. (2015). 'Prevalence and associated factors of elder abuse in a community-dwelling population of Aotearoa New Zealand: a cross-sectional study. *Aotearoa New Zealand Social Work Review*, 27(3), 29-43.