

Office for Seniors'
Better Later Life:
He Oranga Kaumātua
2019 to 2034

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Submitter details

1. Nelson Marlborough Health (Nelson Marlborough District Health Board) (NMH) is a key organisation involved in the health and wellbeing of the people within Te Tau Ihu o Te Waka a Maui. NMH appreciates the opportunity to comment from a public health perspective on *Better Later Life He Oranga Kaumātua 2019 to 2034*.
2. NMH makes this submission in recognition of its responsibilities to improve, promote and protect the health of people and communities under the New Zealand Public Health and Disability Act 2000 and the Health Act 1956.

General Comments

3. NMH strongly supports the creation of the *Better Later Life He Oranga Kaumātua 2019 to 2034* strategy that addresses the needs of an ageing population. NMH strongly supports the vision of “*Older New Zealanders lead valued, connected and fulfilling lives*” and the associated guiding principles.
4. NMH recommends an additional guiding principle for the Strategy: “Recognising intergenerational solidarity (or integration)”. Intergenerational solidarity is understood as ‘social cohesion between generations’¹ There needs to be equal importance on mutual cooperation, understanding and co-existence of generations. This has not been explicitly acknowledged within the draft Strategy. As raised in NMH’s previous submission, intergenerational approaches have a potential to address many social development priorities, such as building of active communities, promoting responsible citizenship, as well as addressing inequality and social exclusion². In order to deliver on this Strategy, it is important to utilise the potential of all generations. The older a society becomes, the more important it is to invest in youth. The success of the young generation determines society’s ability to support those older people who depend on the help of others’.³

¹ <https://sustainabledevelopment.un.org/content/documents/2006future.pdf>

² United Nations Youth (n.d) *Youth and Intergenerational Partnerships*
<http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-intergenerational-partnerships.pdf>

³ <https://www.age-platform.eu/sites/default/files/Solidarity-uk4.pdf>

5. The benefits of intergenerational integration⁴ include

- a. *Resources, Efficiency and Sustained Community Support*: Capitalising on youth and elders as resources for each other and for communities, for instance mentoring services, upskilling on technology, shared sites, care programmes.
- b. *Policy Formulation and Implementation*: Rather than comparing one population against another, policymakers have a more integrated view.
- c. *Greater advocacy*: Intergenerational integration will enable representative organisations to pursue a unified policy agenda.

Specific Comments

- 6. NMH supports the five key areas of action around economic security, improving access, providing housing choices and options, enhancing social connection and providing accessible built environments.
- 7. *Economic impacts*: It is noted that the section on Financial Security and Economic Impacts has the admirable goals of "All older people have sufficient income, assets and other support to enjoy a good standard of living" and "NZ is financially prepared for an ageing population". But this section makes no mention of intergenerational equity where the needs of the present are met without compromising the ability of future generations to meet their own needs.⁵ It is important that all New Zealanders can enjoy a good standard of living but it is as equally important that one generation does not have priority over another. This is especially important when globally, we need to address and adapt to climate change which will require additional infrastructure funding and this funding is reliant, in part, on rate payers. The wording and the associated actions in this section of the Strategy need to take cognizance of intergenerational equity especially in regards to the action point around local and central government planning.
- 8. *Paid work and business owners*: NMH supports the goals and the actions contained in this section. In particular NMH supports the intergenerational

⁴ Willem van Vliet— PhD (2011): Intergenerational Cities: A Framework for Policies and Programs, Journal of Intergenerational Relationships, 9:4, 348-365 Retrieved from:

https://www.researchgate.net/publication/259218884_Intergenerational_Cities_A_Framework_for_Policies_and_Programs

⁵ https://www.unicef.org/socialpolicy/files/LSE_Capstone_Intergenerational_Equity.pdf

approach of offering all workers irrespective of age opportunities to upskill, retrain, and flexible work environments.

9. *Health*: NMH supports the goals and the actions contained in this section.
10. *Social*: NMH supports the goals and the actions contained in this section. NMH recommends that further information is given to expanding the action point relating to developing initiatives that better address the physical and social determinants of health. These determinants are extremely broad so without further information it is difficult to ascertain what initiatives could be developed.
11. *Culturally appropriate and whanau-centred services*: NMH supports the goals and the actions contained in this section.
12. *Providing housing choices and options so people can age in the community*: NMH supports the goals, NMH notes that many of the actions proposed are not specific to older people therefore it would be beneficial to expand these further to benefit a greater number of people. These include
 - a. Provide adequate protections for all tenants, not just older people
 - b. Encourage the development of a variety of accessible housing with good access to public transport and services
 - c. Provide effective interventions for people who are experiencing or at risk of homelessness
 - d. Build recognition of the importance of cultural diversity in the design and provision of social services
13. It is noted that there is nothing in the Strategy that addresses housing quality. The importance of this was noted in our earlier submission. People who live in warmer drier homes tend to be healthier, with fewer GP and hospital visits and fewer days away from work due to illness. Tenure uncertainty, unaffordable housing related costs, dilapidation and cold damp conditions have all been found to prompt movement into residential care. Poor housing exacerbates existing health conditions and heighten the impacts of impairment. This triggers dislocation from their communities, admission to an unnecessarily high level of care and support, and shifts the cost of what is primarily a housing problem onto the health and social services sectors.⁶ NMH urges the Office of Seniors to include actions that can address house quality. Whilst the Winter Energy payment is one way of alleviating

⁶ Saville-Smith, K. & Saville, J., (2012) *Getting Accessible Housing: Practical Approaches to Encourage Industry Take-up and Meeting Need*, Centre for Research, Evaluation and Social Assessment for the Office for Disability Issues and the Ministry of Business, Innovation and Employment

the burden of high energy bills, further work still needs to occur to make older houses warmer.

14. This Strategy does not make mention of house size. In general, New Zealand's existing housing stock is predominately 3-4 bedrooms but changing demographics will create an increased demand for smaller houses. Explicit actions need to be included in the Strategy to increase the number of smaller houses to meet the demands of smaller households.
15. *Preventing social isolation and loneliness*: NMH supports the goals and the actions contained in this section. NMH again encourages the incorporation of the concepts of an intergenerational approach. As noted in our previous submission, changes in family patterns, living arrangements, greater geographic mobility, and age segregated activities has been said to have resulted in older and younger people becoming increasingly disconnected⁷. However both groups have resources of considerable value to each other, they also face similar concerns such as social isolation. Reciprocity between generations is one means of addressing this.
16. *Valuing and respecting*: NMH supports the goals and the actions contained in this section and was pleased to see that intergenerational contact has been incorporated into this section.
17. *Supported decisions making / Safety, including elder abuse / Digital inclusion / Responding to change / Volunteering*: NMH supports the goals and the actions contained in these sections.
18. *Recognising and responding to diversity*: NMH supports the goals and the actions contained in this sections but notes that these do not need to be specific to older people.
19. *Provide accessible built environments so people can participate in their community / transport*: NMH supports the goals and the actions contained in this sections and notes that the long-term outcomes contributing to age-friendly environments for older people are the same for children and youth.

⁷ Generations Working Together (n.d.) *Intergenerational approaches to improving health and wellbeing*, NHS Health Scotland <https://generationsworkingtogether.org/downloads/536a04c11694b-GWT%20web%20FINAL.pdf>

20. NMH supports the initial priorities as identified in the Strategy.

Conclusion

21. NMH thanks the Office of Seniors for the opportunity to comment on *Better Later Life He Oranga Kaumātua 2019 to 2034*.

Yours sincerely



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