

End of life plans added to healthy ageing study

July 19 2016



Massey researchers have been surveying older people about their health and wellbeing for 10 years. Credit: Massey University

It is 10 years since Massey University researchers launched the first comprehensive survey to find out how well New Zealanders are ageing –

now they want the next generation of people aged 55 and over to sign up.

The latest Health, Work and Retirement longitudinal survey, run by the Health in Ageing Research Team (HART) at Massey's School of Psychology, is the seventh since the project began 10 years ago. This year's 24-page multi-choice questionnaire has been updated to include new questions about dental [health](#) and end-of-life planning.

Researchers are hoping to recruit 4000 more [people](#) aged between 55 and 70 to take part in the study who were previously too young or have not been surveyed.

The survey was recently posted out to nearly 8000 households around the country from a selected pool across diverse geographic and socio-economic backgrounds, using the electoral role. Researchers are hoping for a strong uptake and are urging survey recipients to complete and return it as soon as possible.

Responses to survey questions provide valuable information about social connections, health, housing, work and other issues of growing older, researcher Dr Joanne Allen says. Reports – based on data from the surveys – are designed to provide information and insights to help shape and inform government policy and assist social agencies on issues affecting New Zealand's rapidly increasing ageing population.

The inclusion of end-of-life planning questions reflects changes in attitude towards the need for more open conversations on the topic.

Deeper understanding of what it's like to get older

The survey covers a wide range of themes including lifestyle and daily habits to how people perceive their lives and circumstances – from family and neighbourhood relationships to safety, medication and

alcohol consumption, transport and even purpose in life and reasons for living.

"It gives us a view beyond the basic statistics – we can get an in-depth understanding of the experiences of getting older," Dr Allen says.

Results from three earlier (2010, 2012 and 2014) segments of the study have provided evidence for reports and policy recommendations on specific issues, such as being a caregiver, access to and use of the internet, the needs and concerns of older workers, housing, and survival and well-being after the Christchurch earthquakes.

HART co-leader Professor Christine Stephens says researchers are "very grateful to our participants who have been taking part in the surveys across ten years.

"They have contributed a rich source of information about the changing needs of older New Zealanders and we look forward to being in contact again. We are now seeking new participants around the ages of 55 to 56 to contribute the voices of the coming cohort of ageing New Zealanders to government and health policy."

Information on ageing valuable as NZ's 65+ population grows

The need for research is highlighted by growth of New Zealand's older population, she says, with the number of people aged 65 and over doubling between 1981 and 2013 – from 309,795 to 607,032 people – according to 2013 Census results released by Statistics New Zealand a year ago. This age group increased from 9.9 per cent to 14.3 per cent of the population in that period, and is projected to grow to 23.8 per cent in 30 years.

The Health and Aging Research Team's datasets comprise the Health, Work, and Retirement (HWR), New Zealand Longitudinal Study of Ageing (NZLSA) and Independence Contribution Connection (ICC) surveys. Their work is funded by the Ministry of Business, Innovation and Employment.

Some of the key findings from the HART surveys since 2006:

- Lower living standards equate with poorer health.
- Living standards affect all aspects of health and wellbeing, including a link between poverty and loneliness.
- Older people with vision impairments experience poorer economic, physical, and mental health status, lack of social support, and greater social isolation.
- Mobility is a key factor for the quality of life among older visually impaired people.
- Volunteering is related to increased happiness. People with lower living standards who volunteer have levels of happiness almost as high as people with high living standards. But it is more difficult for older people with low living standards to do volunteering.
- Types of social networks are related to the types of social support that they receive, and is related in turn to both physical and mental health.
- The internet is important for nurturing social networks that contribute to health and wellbeing in older age. The internet is used by over 80 per cent of older people and most often used for social reasons, though not to make new friends – largely to support existing social networks.
- Housing, and the differences in health between renters and homeowners: renters reported lower quality of life and higher levels of depression. Gaps widened over time: over four years the home owners' mental health improved, while the renters' poorer [mental health](#) remained the same.

- Home owners who reported loneliness did not experience changes in health. But loneliness for renters was associated with worsening mental and physical health over four years.
- Older caregivers cope better and report better health, greater life satisfaction and less loneliness when they are financially better off. Only a quarter of working caregivers are aware of their rights to caregiving leave, while one third use sick leave, unpaid leave and annual leave to care for others.

More information: Check the HART website for more information:
[www.massey.ac.nz/massey/learn... h/hart/hart_home.cfm](http://www.massey.ac.nz/massey/learn/h/hart/hart_home.cfm)

Provided by Massey University

Citation: End of life plans added to healthy ageing study (2016, July 19) retrieved 6 May 2024 from <https://medicalxpress.com/news/2016-07-life-added-healthy-ageing.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.