

# Health and independence highlighted in ageing population

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Health, independence and caregiving in advanced age are investigated in a major report released today that will assist policy and services on the health care impacts of population ageing in New Zealand.

Increasing numbers of people in advanced age who make up an increased proportion of the population in New Zealand is part of an international trend across developed and developing countries.

The report, "Health, Independence and Caregiving in Advanced Age," from University of Auckland researchers also contributes towards research into the needs of the increasing numbers of Māori in advanced age.

Changing demographics will have major policy, funding and planning implications and the Ministry of Health wants to ensure that services are in a good position to meet the needs of older people.

A leading researcher into advanced age, Professor Ngaire Kerse from the University of Auckland says the Ministry and the sector required evidence to prepare for the increased demand for services.

"There is an even greater imperative to focus on what keeps people well and healthy into older age," she says. "To make the best use of information and improve our understanding of aging well, the Ministry commissioned this report based on insights from this advanced age cohort and their carers."

The study is the first in the world to include research into an indigenous population in advanced age and the first and only research to provide information on the health of Māori people aged 80 plus, over time - essential for health and social sectors planning.

The study is part of LILACS NZ research (Te Puāwaitanga O Ngā Tapuwae Kia Ora Tonu/ Life and Living in Advanced Age, a Cohort Study in New Zealand), a long-term study of New Zealanders living in advanced age.

The study aims to help people plan better for their own health and wellbeing in advanced age, allow older New Zealanders to share their wisdom with future generations and inform the development of local and national policies to benefit older people.

**Findings from the 211 page report are produced in four chapters and summarised here:**

### **Contributions in Advanced Age**

- People of advanced age engaged in LiLACS NZ are mostly independent and living in the community. Contributing to the welfare of others continues into advanced age.
- The ability to give care or assistance may stem from better health and functional ability, but giving may also contribute to maintaining physical health and function.
- They make contributions to whānau and family, communities and society. They hold heritage, knowledge and tikanga, volunteer and sometimes still engage in paid work, and may be caregivers as well as recipients of care

### **Receiving assistance in advanced age**

- Quality of life in advanced age may not be affected by changes in functional status
- The predicted increase in the number of New Zealanders of advanced age means that demand for health and care services in New Zealand will grow.
- Prior research suggests that living longer will mean living longer with disability as well as more years of good health.
- Supports for independent living ('ageing in place') have successfully maintained quality of life. Physical decline is not inevitable following periods of ill health in advanced age.
- Informal care is unpaid care, usually provided by family or whanau. Formal care is paid care. Formal and informal care may be complementary, rather than one kind of care delivery substituting for another.

## **Carers for people in advanced age**

- This section aimed to increase understanding about carer contributions, health and wellbeing, and the economic value of care, and provide another source of information on the care given to the LiLACS NZ participants.
- Informal care from people with a close relationship to the person they care for predominates in advanced age and includes both functional and emotional support.
- While caring carries positive value for the carer, the impact of unpaid care provision on employment productivity and on health spending are potential costs to society

## **Health, health service use and common health conditions in advanced age**

- This section examined how depression, in combination with

common physical health conditions, impacted on functional status, frailty, quality of life and health service use.

- Effective treatments for depression in advanced age may lead to improved health and less [health](#) service use amongst those with chronic physical conditions, as well as lessening the burden of depression itself.

Provided by University of Auckland

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