



Unlocking the Potential of Active Ageing

Creating health-promoting and supportive environments to empower older people and enhance their contributions to society

Public consultation on a topic for a Long-term Insights Briefing

2024

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We are seeking your feedback

The Ministry of Health - Manatū Hauora is seeking written feedback on the proposed topic of its Long-term Insights Briefing by **Monday 2 December 2024.**

This is the first phase of a two-phase public consultation approach to develop our briefing. You can make your submission by:

- completing the online form provided on Citizen Space
- emailing your feedback to: LTIB@health.govt.nz
- posting it to: Strategy Group, Ministry of Health, PO Box 5013, Wellington 6140.

Please include your name, the name of your organisation (if applicable) and contact details in your submission. You may also include links to relevant evidence (for example, research references) and outline the values that underpin your comments.

For more information on how we intend to use and publish your feedback, and how we will protect your private information, see Annex 1.

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Part One: Who we are and what a Long-term Insights Briefing is

About the Ministry of Health – Manatū Hauora

The Ministry of Health – Manatū Hauora is the chief steward of health and the health system, and lead advisor to the Government on health. We regulate and monitor the health system to deliver better health outcomes for all New Zealanders. We define stewardship as:

Taking decisions or actions today that mean we are collectively better off in the future than we would otherwise have been, and building and maintaining the relationships that enable us to do this.

Our role includes scanning the horizon for future issues and opportunities related to health, setting long-term health strategies, and advising the Government on changing priorities, policies, funding, and other matters that affect how the health system operates and improves health outcomes for all New Zealanders. Developing the Longterm Insights Briefings is one of the ways in which we carry out this role.

About Long-term Insights Briefings

Under the Public Service Act 2020, the public service of Aotearoa New Zealand is required to develop Long-term Insights Briefings (LTIBs). Government departments must complete the briefings at least once every three years.

Chief executives in the public service have a statutory duty to produce LTIBs independently of Ministers. LTIBs differ from the advice that the public service provides Ministers, and from the accountability and planning documents it prepares for Parliament. They are not government policy.

Instead, LTIBs are 'think-pieces' on the future. Their purpose is to strengthen the public service's focus on the long-term, by making available:

- information about medium- and long-term trends, and risks and opportunities that affect, or may affect, Aotearoa New Zealand
- information and impartial analysis, including on policy options for responding to these matters.

The Department of the Prime Minister and Cabinet's guidance recommends that LTIBs look at least 10 years into the future. To learn more about LTIBs, please visit the Department of the Prime Minister and Cabinet's **Long-term Insights Briefing webpage.**

Opportunities to contribute to this Long-term Insights Briefing

This consultation document is your first opportunity to contribute to the Ministry's LTIB. Feedback we receive will help us better shape the topic and questions we explore while we draft the LTIB.

You will have other opportunities to provide feedback as we develop the LTIB. We aim to complete the LTIB by mid-2025. Key timeframes are:

- Until 2 December 2024 for this public consultation on the proposed topic and areas you want us to explore within the topic subject matter
- February to April 2025 targeted engagement as we develop the LTIB
- May 2025 public consultation on the draft LTIB.

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Part Two: Our proposed topic

Our proposed Long-term Insights Briefing topic is:

Unlocking the potential of active ageing – creating healthpromoting and supportive environments to empower older people and enhance their contributions to society.

A number of important trends and drivers are likely to impact future wellbeing of New Zealanders. Some key areas are population and demographic change, resource stress, citizens' changing expectations about government and services, emerging technology, the changing workforce, and climate change.

We have chosen our proposed topic after considering these drivers, and the opportunities that arise from responding to them. The proposed topic relates to the impact of an ageing population, and the opportunities that arise from this long-term trend. It also responds to future demographic changes within the older population group. The activities and contributions of older people have been changing over generations, as a result of their generally better health, technology changes, along with societal changes that especially affect women.

Globally, people are living longer. Every developed country in the world is experiencing growth in both the size and the proportion of older people in its population. Countries face major challenges in adjusting to these demographic shifts as they will change the population's needs for services and supports, which in turn will require major changes to areas such as the built environment (for example, the neighbourhoods people live in). Reflecting these global trends and needs, the United Nations Decade of Healthy Ageing (2021–2030) fosters global collaboration towards an aim of improving the lives of older people by enabling them to participate in, and contribute to, their communities and societies. It includes a focus on age-friendly environments (for example, age-friendly cities), and combatting ageism.

Aotearoa New Zealand is affected by this global trend of population ageing. Over the last 70 years, significant improvements in living standards and health care have increased life expectancy. This trend, along with falling birth rates, has contributed to an ageing population. In 1953 the median age of death was 68 years for males and 71 years for females, which means 50% of people died prior to these ages.¹ By 2023, the median age at death had risen to 79 years for males and 83 years for females. In 2023, 42-year-old females born in 1981 (first year of the 'Millennials' generation) are expected to live to 88.6 years, and males in this same age group are expected to live to 85.9 years.²

¹ Stats NZ. 2024. Births and deaths: Year ended December 2023 (including abridged period life table). URL: stats.govt.nz/information-releases/births-and-deaths-year-ended-december-2023-including-abridgedperiod-life-table (accessed October 2024).

² Stats NZ. 2021. New Zealand cohort life tables, March 2023. URL: stats.govt.nz/informationreleases/new-zealand-cohort-life-tables-march-2023-update/ (accessed October 2024).

Health loss (from death or living with poor health) generally increases with age.³ Many diseases that contribute to health loss in older age are preventable or able to be postponed. As our population ages, we can expect more people to live longer with more complex conditions and with multiple and more complex health conditions. These are health issues that require more specialised care and support, not only to address their health or disability directly, but also to support them to participate in society.

Supporting people to live longer, healthier lives and prevent poor health is a focus of current Ministry of Health work. As the *Government Policy Statement on Health 2024–2027*⁴ outlines, health agencies and entities are currently expected to focus on prevention, by decreasing five key health risk factors and reducing the impact of the five leading non-communicable diseases that contribute to health loss.

Alongside the present work to enable people to stay healthier for longer, it is critical that we consider how social and physical environments affect active ageing. This helps prepare for future growing generations of older people and enabling them to thrive in the future. By unlocking active ageing, we can support older people's participation in society, which will have significant benefits for individuals, whānau, communities and Aotearoa New Zealand as a whole.

About active ageing

The World Health Organization states that 'if ageing is to be a positive experience, longer life must be accompanied by continuing opportunities for health, participation and security'.⁵

To promote such opportunities, the World Health Organization has introduced the concept of 'active ageing', which it defines as 'increasing opportunities for participation so people are contributing to society and taking opportunities to enhance their wellbeing and quality of life as they age'.⁶

Active ageing acknowledges that broad factors, including social and physical environments, affect how individuals age and how they continue to contribute to society. These factors can include housing and the wider built environment, transportation, the economic resources of their family, civic participation, employment and social connectedness. The proposed LTIB topic will explore some of the impacts from social and physical environments that can support or hold back efforts to unlock active ageing and support wellbeing in older age.

⁶ World Health Organization. 2002. Active Ageing: A policy framework. URL: extranet.who.int/agefriendlyworld/wp-content/uploads/2014/06/WHO-Active-Ageing-Framework.pdf (accessed September 2024).

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³ Ministry of Health. 2023. *Health and Independence Report 2023*. URL: health.govt.nz/system/files/2024-008/Health%20and%20Independence%20Report%202023_online_f3.pdf (accessed October 2024).

⁴ Minister of Health. 2024. *Government Policy Statement on Health 2024–2027*. Wellington: Ministry of Health.

⁵ World Health Organization. 2002. Active Ageing: A policy framework. URL: extranet.who.int/agefriendlyworld/wp-content/uploads/2014/06/WHO-Active-Ageing-Framework.pdf (accessed September 2024).

The Government has a strategy focused on supporting people to age, which will continue over the next 10 years: **Better Later Life – He Oranga Kaumātua 2019 to 2034**⁷. This aims to help ensure there are opportunities created for everybody to participate, contribute and be valued as people age.

⁷ Office for Seniors. 2019. Better Later Life – He Oranga Kaumātua 2019 to 2034. URL: officeforseniors.govt.nz/better-later-life-strategy/ (accessed October 2024).

Part Three: Why our proposed topic is important

Older people make valuable contributions to society

Society depends on older people for their skills, knowledge, and experiences. New Zealander's are living longer, allowing individuals to contribute significantly to society in many different ways as they age. For example, these contributions from active ageing can come through employment, volunteer work, care of family members, community involvement and their economic power. As the older population increases to one in four people by 2056, these contributions to society will only become more important to the overall wellbeing and outcomes of New Zealanders. By creating supportive environments for active ageing, we can empower older people to continue to contribute to our society, making it stronger.

Aotearoa New Zealand has an ageing population

Aotearoa New Zealand's older population (aged 65 years and over) is projected to increase from 868,700 to 1,850,300 people over the next 50 years. By 2028, one in five people in Aotearoa New Zealand will be aged 65 years or older. By the 2050s, this could change to one in four people.⁸

The proportion of people aged 85 years or older is also increasing. Currently 1 in 50 people are aged 85 years or older. By the 2030s, this ratio could increase to 1 in 30 and by the 2040s, to 1 in 20. By 2048, the age group 85 years and over is expected to be one in five of the population aged over 65 years and is projected maintain that share until 2073.

Figure 1 outlines the growth in the number of people aged over 65 years within Aotearoa New Zealand from 1953 to 2073. This shows how in 2024, the period of 'Baby Boomers' entering the older population is nearing the end of the cohort. Population ageing has mainly focussed on the 'Baby Boomers', but in 2046, all of 'Gen X' will be in the older population, and the first 'Millennials' will be entering it⁹. The 'Baby Boomers' are projected to have their highest share of the older population in 2029, around 85%,

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⁸ Stats NZ. 2022. One million people aged 65+ by 2028. URL: stats.govt.nz/news/one-million-peopleaged-65-by-2028/ (accessed October 2024).

⁹ The boundaries of generational groups vary, especially those used for some countries. The age cohort boundaries used in this report for the generational groups are: 'Baby Boomers, 1946–1975; 'Gen X', 1976–1980; 'Millennials', 1981–1996.

and then transition to under half by 2040, and under 5% by 2057.¹⁰ 'Gen X' are projected to be at their highest share of older people in 2045, around 65%, and then be overtaken by 'Millennials' for the highest share of older people in 2056. As these projections show, supporting active ageing in the future will largely be focussed on the generations after the 'Baby Boomers'.

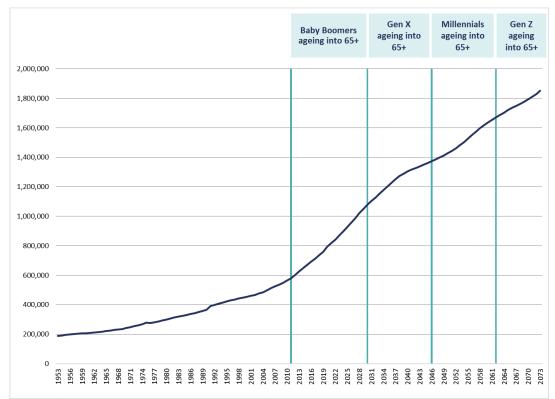


Figure 1: Growth in the population of older people (median projection), 65 years and over, Aotearoa New Zealand, 1953–2073

Source: Stats NZ. 2022. National population projections: 2022(base)-2073

Future generations of older people are expected to be more diverse. They will vary more by characteristics, such as ethnicity and family demographics, or life experiences, views of wellbeing and expectations for lives in older age. Such characteristics and views will influence their contribution into older age. These factors will also influence what will enable active ageing or act as barriers to it.

The following are some projected trends in the demographics and activities of older people that have an impact on active ageing.

• **Ethnicity** – Aotearoa New Zealand is expected to have a more ethnically diverse older population in the future, with Māori, Pacific and Asian populations growing faster than the European population as younger generations age.¹¹ Growing ethnic

¹⁰ Stats NZ. 2022. National population projections: 2022(base)-2073. URL: stats.govt.nz/informationreleases/national-population-projections-2022base2073/ (accessed October 2024). The analysis for the share of the generations is based on the single-year age projections up to 95 years of age, with some adjustments to split the population projections for those over 95 years group, reported as a single age-group, when more the one generation likely to have presence above 95 years of age.

¹¹ Stats NZ. 2022. National ethnic population projections: 2018(base)-2043. URL: stats.govt.nz/information-releases/national-ethnic-population-projections-2018base-2043/ (accessed October 2024).

diversity in the ageing population may influence the contributions from active ageing as there are different cultural factors around intergenerational support, values, and roles of older people.

- Households A more ethnically diverse population in the future may lead to more households with inter-generational families, which could provide more two-way support between generations. However, there is also a driver for more one-person or couple households, including those who have not had children. One-person households are expected to increase by 18% from 2018 to 2043.¹² The percentage of women aged 45–49 years, who have never had children, grew from 9% in 1981 to 16% in 2018. Therefore, there will be more older people without children.
- Disability Older people are more likely to have a disability. The Disability Survey 2013 reported people aged 65 years or over were much more likely to be disabled (59%) than adults under 65 years (21%) or children under 15 years (11%).¹³ The type and impact of this disability can affect the supports people need, and barriers they face to active ageing.
- Regions Rural and regional areas currently have higher proportions of their populations aged over 65 years. Population projections for 2048 indicate some areas, such as the cities of Wellington, Hamilton, and Christchurch, will have one in five people aged over 65 years, while Thames-Coromandel district will have two in five people aged over 65 years.¹⁴ Other districts will have one in three people aged over 65 years, including Buller, Hauraki, Kāpiti Coast, Tasman, and South Wairarapa districts. It is important to consider the geographic locations of where older people are living, as regions can vary in the options and support for active ageing. Older people often move location in retirement, to manage costs or to move closer to family. Some Māori kaumātua may also choose to move in older age to the whenua they feel connected to.
- Activity Older people contribute significantly to society through paid and volunteer work, mentorships, community involvement and family support. As different generations age, these contributions have changed, and may continue to do so.
- Employment A higher proportion of older people are remaining in the workforce, which may change the way in which older people contribute to society. Employment provides many benefits to support active ageing including from work providing financial security, social connectedness, a sense of purpose and interaction with people from different population group, including younger generations. Currently, 208,300 older people are in the workforce. This number of older people working is projected to nearly double to 392,400 by 2071. Wage and salary (remunerated work) earnings by people aged over 65 years are expected to rise (in real terms inflation-adjusted to 2021) from \$5.9 billion in 2021 to around \$30.7 billion in 2071. In relative terms, that is an increase from \$7,200 per older person in 2021 to \$16,900 per older person in 2071. Income from those self-employed is likely to increase from \$4.7 billion in 2021 to \$24.3 billion by 2071. In relative terms, that is an

¹² Stats NZ. 2022. Family and household projections 2018(base)-2043. URL: stats.govt.nz/informationreleases/family-and-household-projections-2018base-2043/ (accessed October 2024).

¹³ Stats NZ. 2014. Disability Survey: 2013. URL: stats.govt.nz/information-releases/disability-survey-2013 (accessed October 2024).

¹⁴ Stats NZ. 2022. Subnational population projections 2018(base)-2043. URL: stats.govt.nz/informationreleases/subnational-population-projections-2018base2048/ (accessed October 2024).

increase from \$5,700 per older person in 2021 to \$13,400 per older person in $2071.^{15}$

 Volunteer and unpaid work – Around 60% of people aged 65–74 years, and over 40% of people aged over 75 years volunteer in their communities semi-regularly (at least once over the last four weeks).¹⁶ The economic value of the unpaid work of older people, such as caring for others, household work and volunteering, is estimated to increase by \$83 to \$94 billion over the next 50 years.¹⁷

Older people play a variety of important roles in their communities in Aotearoa New Zealand. They may be involved in caring for family members, volunteering, contributing to community organisations, or providing informal support to their neighbours and friends.¹⁸ Our communities are enriched by older people's commitment to them.

Enablers and barriers to unlocking active ageing

People can continue to contribute to society as they age into older age groups if they are enabled to continue in work and participate in voluntary or unpaid work within the community or their family. Key factors that influence contributions and participation, as can enable people or be a barrier, include:

- the individual person's attitude, religious or belief systems, health, standard of living, level of social connectedness and expectations for their older age.
- other societal factors such as social connectedness of the community, attitudes in the workplace and community to older people, the level of support or encouragement for actions, policy settings, such as to support public transport, or activities in the community.
- the built environment, having community facilities or transport options, combined with the geographic distances to activities.
- technology options, such as to overcome distances and to connect people to work, volunteer work, social networks or family is also an enabler, if people have access to it and use it.

The LTIB will cover the barriers or enablers for some key activities or contributions related to the focus areas that are chosen (see part four), and how they may vary for different groups of older people in the future. The LTIB may also consider what the

- ¹⁵ New Zealand Institute of Economic Research. 2024. Business of Ageing: 2023 update. A report for the Office for Seniors. URL: officeforseniors.govt.nz/assets/Uploads/7000OFS_Business-of-Agingupdate-2023_3.pdf (accessed October 2024).
- ¹⁶ Stats NZ. 2022. Wellbeing Statistics 2021. URL: https://www.stats.govt.nz/informationreleases/wellbeing-statistics-2021-supplementary/ (accessed October 2024).
- ¹⁷ New Zealand Institute of Economic Research. 2024. Business of Ageing: 2023 update. A report for the Office for Seniors. officeforseniors.govt.nz/assets/Uploads/70000FS_Business-of-Aging-update-2023_3.pdf (accessed October 2024).
- ¹⁸ New Zealand Council of Christian Social Services. 2023. *Te Körero mö ngä Kaumätua: Exploring the context of older people in Aotearoa New Zealand*. URL: nzccss.org.nz/wp-content/uploads/2024/06/NZCCSS-Te-Korero-mo-nga-Kaumatua_August-2023.pdf (accessed October 2024).

government role is and what options there are to support active ageing through promoting enablers or by addressing barriers.

Aotearoa New Zealand has an opportunity to benefit from unlocking the valuable contributions an increasing older population can provide to our society.

Active ageing 'allows people to realise their potential for physical, social, and mental wellbeing throughout the life course and to participate in society according to their needs, desires and capacities, while providing them with adequate protection, security and care when they require assistance.'¹⁹

By exploring the enablers and barriers for active ageing in the context of Aotearoa New Zealand and the focus areas, we will understand how to unlock active ageing to best support older people to continue to make valuable contributions, for longer, to their families, communities and society in the future.

Barriers and enablers for active ageing do not only exist when a person is older, they can impact across a person's life. A person's experiences prior to being an older person can affect their contribution to society as an older person.

Questions for feedback:

- 1. Do you think 'active ageing' is a **critical topic** to explore in a Long-term Insights Briefing? Why or why not?
- 2. What are the **main risks** of not further enabling 'active ageing' over the next 20 years?
- 3. What **health-promoting** and **supportive environments** would better enable 'active ageing'?
- 4. What **barriers** to 'active ageing' do you see in our environment and society?

¹⁹ World Health Organization. 2002. Active Ageing: A policy framework. URL: extranet.who.int/agefriendlyworld/wp-content/uploads/2014/06/WHO-Active-Ageing-Framework.pdf (accessed September 2024).

Part Four: Areas to explore in our Long-term Insights Briefing

There are complex interconnections across people's lives that contribute to creating enablers or barriers to active ageing. 'Unlocking the potential of active ageing' is therefore an extremely broad topic.

This LTIB will have two to three focus areas for unlocking active ageing, which the LTIB could explore through case studies or scenarios based on research and practices in Aotearoa New Zealand or internationally. Through these focus areas, we will provide an overview of the value of active ageing to Aotearoa New Zealand by profiling the opportunities and challenges of active ageing.

Using focus areas to identify opportunities and challenges within active ageing

To develop insights into the opportunities and challenges within the topic of unlocking the potential of active ageing, we could explore:

- how further enabling 'active ageing' could improve the health and wellbeing of New Zealanders
- the benefits of an active ageing society for Aotearoa New Zealand
- the impact of active ageing on health needs.

We could also look at focus areas that impact active ageing, such as:

- social connectedness, including marae-based positive ageing
- age-friendly housing and urban development
- age-friendly neighbourhoods and environments
- age-friendly transportation
- supporting health-protective factors and behaviours
- supporting active ageing in the health workforce so that older workers can continue to contribute to it.

The following are focus areas we might explore further.

• Social connectedness, including marae-based positive ageing. Older people's social connectedness and participation in social activities help to protect their health

and wellbeing and to prevent social isolation, as well as supporting them to overcome barriers. Community or cultural connections, such as through marae activities, offer one example of this enabler. Intergenerational connections within communities can be mutually enriching and fulfilling for all ages: older people pass on knowledge, traditions and experience, while young people may help older people with the barriers they face, such as with transport needs or using emerging technology.

- Age-friendly housing and urban development. Housing conditions of older people are often linked to their quality of life and whether they are able to age while living in their own homes or with family. Having appropriately designed housing that is close to their community and social services allows older residents to live comfortably and safely. Housing that facilitates community connections or inter-generational living, including papakāinga housing, can be another important enabler.
- Age-friendly neighbourhoods and environments. The built environment has a
 major impact on the mobility, independence, and quality of life of older people as
 they go about their daily lives beyond the comfort of their homes. A clean and safe
 built environment with well-maintained recreational areas, ample rest areas, welldeveloped and safe pedestrian paths, and good access to key amenities provides an
 ideal living environment for older people to age-in-place.
- **Age-friendly transportation.** Driving can be an essential transportation option for older people, particularly in suburban and rural areas. Poor road conditions, heavy traffic, inadequate accessible parking, inadequate street lighting and poorly positioned signage are some barriers to driving, particularly as older people may face vision difficulties. In addition, drivers need to maintain their confidence as they age so that everyone on the road can have a safe driving experience.

Using private driving services or more automated vehicles are other options that could provide greater mobility for older people to participate in activities.

Affordable and accessible public transport is essential to enable older people to age actively and remain engaged with their community, with access to health, social and other facilities.

- Supporting health-protective factors and behaviours. Health behaviour is a person's actions that positively or negatively affect their own health. These life-course behaviours can support individuals to age actively or make active ageing more difficult. For example, following a healthy diet and getting regular physical activity are positive health behaviours, supporting their ability to contribute as they age. Negative health behaviours with the opposite impact include smoking, using alcohol and drugs, gambling, having poor sleep habits and following a sedentary lifestyle.
- Supporting active ageing in the health workforce so that older workers can continue to contribute to it. Older people who have worked in the health workforce have significant skills and experiences. Enabling them to continue to contribute can benefit both the individuals and the health system. In exploring this factor, we could look at how people in the health workforce may be interested in contributing to the health sector in their older years (for example, part-time work, mentorship, skill-sharing and volunteering), the support or workplace adaptations they would need, and potential barriers to their participation that exist in the health sector, such as professional registration.

We are seeking your feedback on which of these areas, or others, the LTIB should consider.

Questions for feedback:

5. Do you think these focus areas are the **most important** for enabling or demonstrating the impact of 'active ageing'? If not, what other areas would you propose?

Considering the equity of active ageing

Our LTIB will need to consider what action is needed to address equity challenges so that active ageing does not perpetuate existing inequity. Using an equity lens to develop the LTIB would also help in making decisions on which focus areas of active ageing to prioritise. In looking at a given focus area, we will need to consider which inequities exist within it and take into account the diverse experiences and perspectives of supports and barriers in active ageing.

In developing our LTIB, we will need to consider how inequities that people may have experienced throughout their lives - such as disparities in wealth, income, housing, health, disability, ability to use technology, geographical location and social connectedness - will affect the potential contribution through active ageing. On the one hand, inequities are likely to lead to additional barriers that make it more difficult for some groups to contribute as older people. On the other hand, they can also drive people experiencing inequity to contribute more. For example, some older people may be in paid work as they lack financial resources, just as they did when they were of working age.

A significant inequity for active ageing is that a lower percentage of Māori live to the age of 65 years. Among Māori aged 50–65 years, both males and females have higher death rates than Europeans in this age group. At 65 years, Māori life expectancy is also lower than that of Europeans for both sexes, by around 4 years for males and 4.5 years for females.²⁰

The Ministry of Social Development (MSD) has outlined some of these inequities in its proposed LTIB topic, **current and future disadvantages for older New Zealanders**. MSD's first round of public consultation on the proposed topic has now closed. MSD will undertake a second round of consultation on the draft LTIB in early 2025, with the final LTIB due to be published in mid-2025. Please see **MSD's website** for further information.

²⁰ Stats NZ. 2021. National and subnational period life tables: 2017-2019. URL: stats.govt.nz/information-releases/national-and-subnational-period-life-tables-2017-2019 (accessed October 2024).

Considering Te Tiriti o Waitangi

When exploring our proposed topic, we will consider how active ageing relates to the principles of Te Tiriti o Waitangi as set out in the Waitangi Tribunal's Hauora report.²¹ We will ensure the LTIB reflects the health needs and aspirations of Māori, as well as hauora Māori, to achieve equitable outcomes.

The Ministry of Health, under health sector principles of the Pae Ora (Healthy Futures) Act 2022, has an obligation to involve Māori, and other population groups, so that their needs and aspirations are reflected in services and programmes that aim to support them. Through targeted engagement, we will seek input from Māori communities, groups supporting older Māori, and those organisations or community groups that are built on kaumātua and kuia contributions so that we can understand Māori perspectives on active ageing and its supports and barriers. The Public Service Act 2020 also requires public sector agencies to support the Crown with its relationship with Māori, including by having the capability to engage with Māori and understand Māori perspectives on the areas and outcomes where each agency has responsibility.

Some examples of how active ageing may relate to the principles of Te Tiriti o Waitangi, as set out in the Hauora report, are:

- equity oritetanga: achieving equitable outcomes for older Maori.
- **decision-making authority tino rangatiratanga**: opportunities for people and communities to be self-determining and to exercise decision-making authority on matters of importance to Māori.
- **options kōwhiringa**: having supportive environments that enable older people to have choice in a culturally appropriate way that recognises and supports the expression of hauora Māori models of care.

The LTIB could consider policy options

Government agencies have opportunities to influence active ageing in the future.

The Ministry of Health does not hold all the levers for change. However, our role as the Government's primary advisor on health places us in a unique position to look at the intersection of the broad determinants of health and ageing, and how these can be considered differently across the government sector. Considering policy options includes a dual focus on:

• **health-led actions** to protect, promote and improve health and wellbeing as people age

UNLOCKING THE POTENTIAL OF ACTIVE AGEING: CREATING HEALTH-PROMOTING AND SUPPORTIVE ENVIRONMENTS TO EMPOWER OLDER PEOPLE AND ENHANCE THEIR CONTRIBUTIONS TO SOCIETY

²¹ Waitangi Tribunal. 2019. Hauora Report on Stage One of the Health Services and Outcomes Kaupapa Inquiry. Wai 2575. Wellington: Waitangi Tribunal. URL: forms.justice.govt.nz/search/Documents/WT/wt_DOC_195476216/Hauora 2023 W.pdf (accessed October 2024).

• **health-partnering actions** (including across government and in communities) to enable active ageing through influencing the broader determinants of health.

The LTIB could consider options for how government agencies enable active ageing into the future. These options could include:

- creating leadership roles across government, communities, and the private sector
- making cross-sector changes to legislative, regulatory or policy settings.

Part Five: How we will develop the Long-term Insights Briefing

We will develop our LTIB by:

- building an evidence base by reviewing Aotearoa New Zealand and international literature and research on the two or three focus areas within active ageing that the LTIB explores further. This will include exploring policy options or practices that Aotearoa New Zealand communities and other countries have used to implement active ageing effectively.
- engaging with stakeholders to gain feedback and insights on:
 - the themes selected for case studies and the likely future trends within these themes, the opportunities and risks these themes present, and their implications for health-promoting and supportive environments in Aotearoa New Zealand
 - possible solutions to the current challenges related to Te Tiriti o Waitangi, health equity and other health-related social issues
 - possible and preferred future scenarios based on projected trends, research, and consultation, which we would use to identify potential implications and solutions.

How we will work with others

The Ministry of Health is working with other public service agencies and entities whose priorities align with our proposed topic. We will also look for opportunities to engage with non-governmental organisations, academia, and private sector organisations that can share their insights with us on our topic areas and/or challenge our assumptions.

For the first public consultation, we will be drawing on our existing relationships, networks, and advisory groups. For example, this could include Iwi-Māori Partnership Boards and aged-care networks.

For more information on the topics other agencies have chosen for their LTIBs, see **Te Kawa Mataaho website.**

Part Six: How you can provide feedback

We want to hear your views on the proposed Long-term Insights Briefing topic of 'unlocking the potential of active ageing', and your responses to the specific questions on the following page.

This is the first of two public consultation periods in developing our LTIB. You can make a submission in any of the following ways:

- Complete the online form on Citizen Space
- Email LTIB@health.govt.nz with your submission, including your response to the consultation questions
- Write your response and mail it to:

Strategy Group Ministry of Health PO Box 5013 Wellington 6140

In your submission, please indicate if you wish to receive updates, including on any further opportunities for feedback as we develop the LTIB.

Questions for your feedback

Unlocking the potential of active ageing

- 1. Do you think 'active ageing' is a **critical topic** to explore in a Long-term Insights Briefing? Why or why not?
- 2. What are the **main risks** of not further enabling 'active ageing' over the next 20 years?
- 3. What **health-promoting** and **supportive environments** would better enable 'active ageing'?
- 4. What **barriers** to 'active ageing' do you see in our environment and society?

Areas of focus

5. Considering the list of potential focus areas below, do you think these focus areas are the **most important** for enabling or demonstrating the impact of 'active ageing'? If not, what other areas would you propose?

These are the focus areas we may consider further in the development of the Long-term Insights Briefing:

- social connectedness, including marae-based positive ageing
- age-friendly housing and urban development
- age-friendly neighbourhoods and environments
- age-friendly transportation
- supporting health-protective factors and behaviours
- supporting active ageing in the health workforce so that older workers can continue to contribute to it.

You are welcome to provide broader feedback on the proposed topic of active ageing that the questions above do not cover.

Annex 1: Use of information

We will use the information provided in submissions to develop our Long-term Insights Briefing. The Ministry of Health may contact you about your feedback if we need to clarify any matters you raise in your submission.

Publishing information

We will publish a summary of the feedback we receive through this consultation.

The Ministry of Health will consider that, by making the submission, you have consented to publication of material contained within your submission, unless you clearly specify otherwise in the submission. If your submission contains any information that is confidential or you do not want it published for another reason, please indicate this at the top of the submission and mark any confidential information clearly within the text.

While we collect submitter's names and contact information, please note that personal contact details and names will **not** be shared or published through the summary of submissions.

Submissions remain subject to requests under the Official Information Act 1982. If you have concerns about your response and name being released, please note this in your submission, along with the reason why your name or parts of the submission should be withheld from any future request under the Official Information Act 1982. The Ministry of Health will take such objections into account and will consult with submitters who have raised objections to the full release of their submission under the Official Information Act 1982. Note that the Official Information Act recognises the privacy of natural persons as a reason for withholding information, such as their contact details.

Private information

The Privacy Act 2020 establishes certain principles about how various agencies can collect, use and disclose information about individuals. Any personal information you supply to the Ministry of Health in making a submission will be used only for the purpose of helping to develop the Long-term Insights Briefing.