

Looking to the Future in an Ageing Aotearoa/New Zealand

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We need to be aware of -

- Living longer and healthier
- Recognising change and diversity in the older population
- Retirement – can it last?
- Support for ageing in place
- How will we share responsibility for care?

In 2021 - SNZ projections (2011 base)

- Half the population will be over 38
- 17% of the population will be 65 plus
- The number of people aged 65 plus will have increased by 40% - from 587,000 to 823,000
- The number of people aged 85 plus will have increased by 32%- from 73,000 to 96,000

2021 is only 5 years away

Life Expectancy – SNZ 2012-2014

		LE at Birth	LE at age 65	Average age at death
Non-Maori	Male	80.3	19.1	84.1
	Female	83.9	21.6	86.6
Maori	Male	73.0	15.4	80.4
	Female	77.1	17.5	82.5

Preparing for a healthy old age

Prevention (postponement) of disability

- ◆ **Lifestyle: knowledge, opportunities, incentives**
- ◆ **Public health and medical care**

Enabling environments

- ◆ **Architecture, urban design, transport, education, culture and sport, safety**
- ◆ **Assistive Technology, prosthetics, robotics, IT**

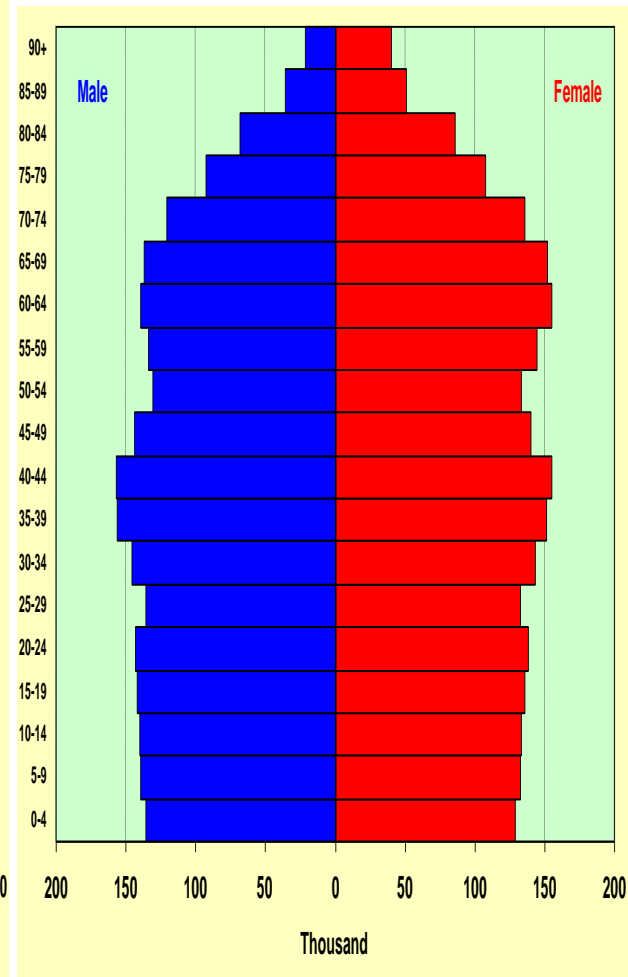
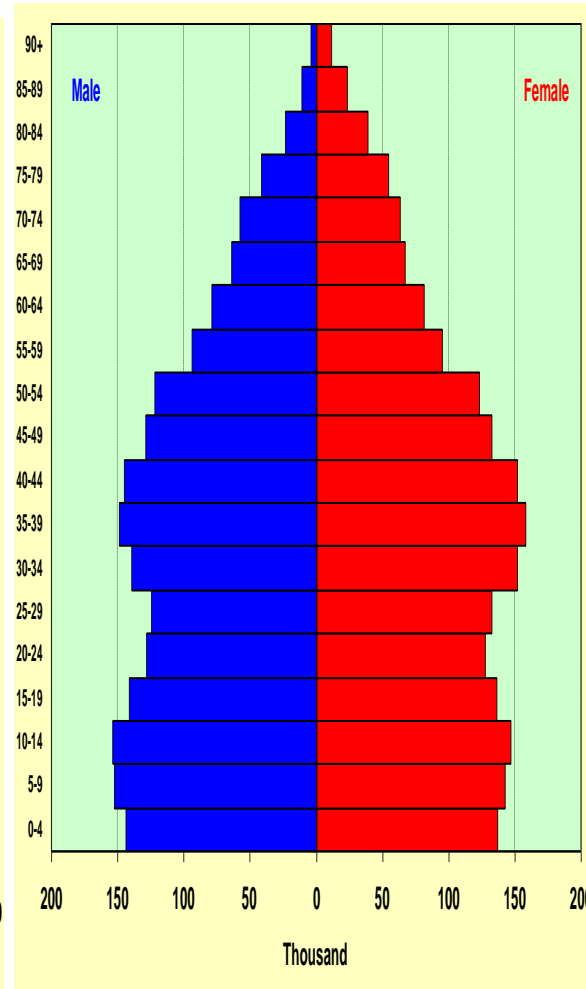
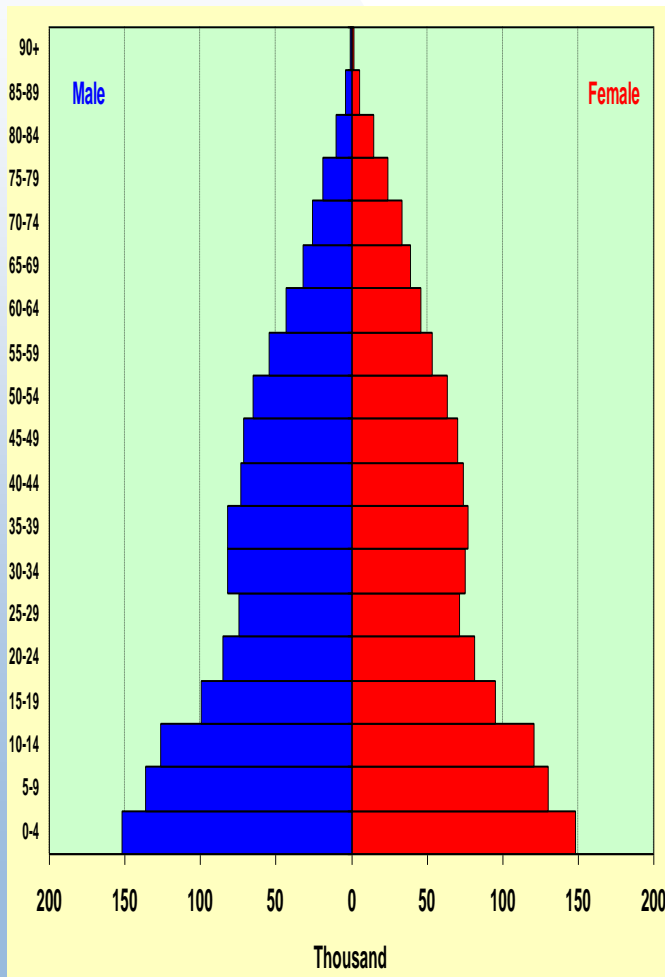
The Baby Boomers are Coming!

How will they differ from current older age groups?

1961

2001

2031



Changing family patterns – age at family milestones

Born	1929 Now 87	1947 Now 69	1965 Now 51
Married	20	22	31 (lived together before)
Birth of first child	20	24	33
No. of children	4	3	2
Birth of last child	27	32	36
Last child leaves home	45	52	58

Greater Ethnic Diversity

Population 65 plus	2011 thousands	2021 thousands	Increase 2011- 2021
European	520	687	32%
Maori	32	54	67%
Asian	29	64	119%
Pacific	15	24	65%

Paid Work Patterns of BBers

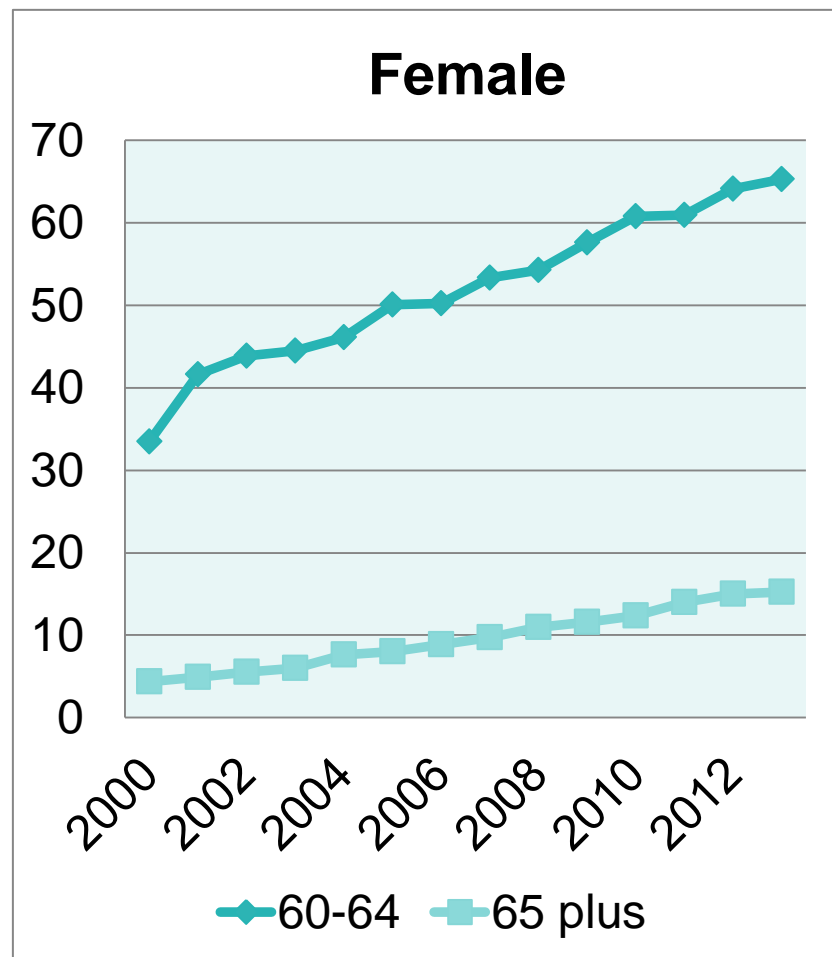
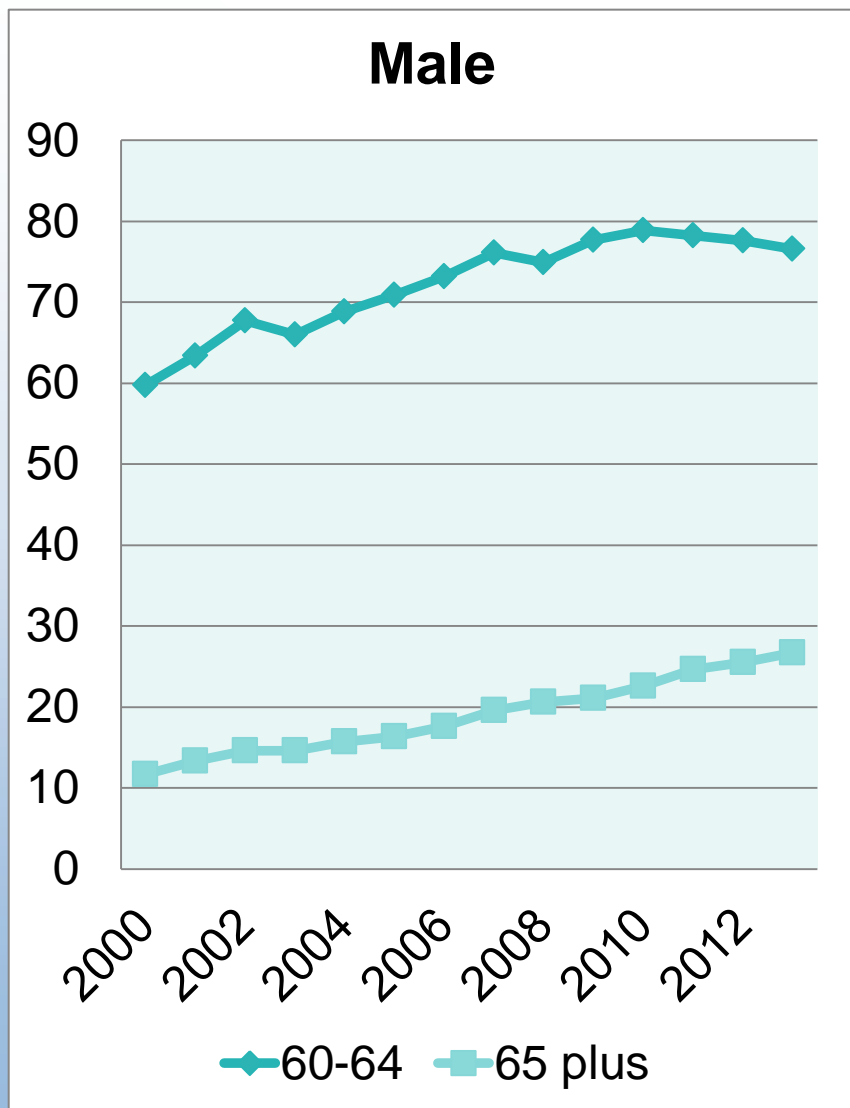
- Increased female participation - women less likely to have periods out of labour force
- Greater instability in male participation patterns – more PTwork and unemployment
- Rising rates of self employment
- Growth of service, business and financial sectors and decline of primary and manufacturing

These will facilitate working longer

Economic Life Cycle – suggests potential for longer working lives

	Workforce entry	Workforce exit	Death
Early 20th century	14	65	70
Period(years)	14	51	5
Early 21st century	22	65	85
Period(years)	22	43	20

Labour force participation rates for older people are growing (HLFS)

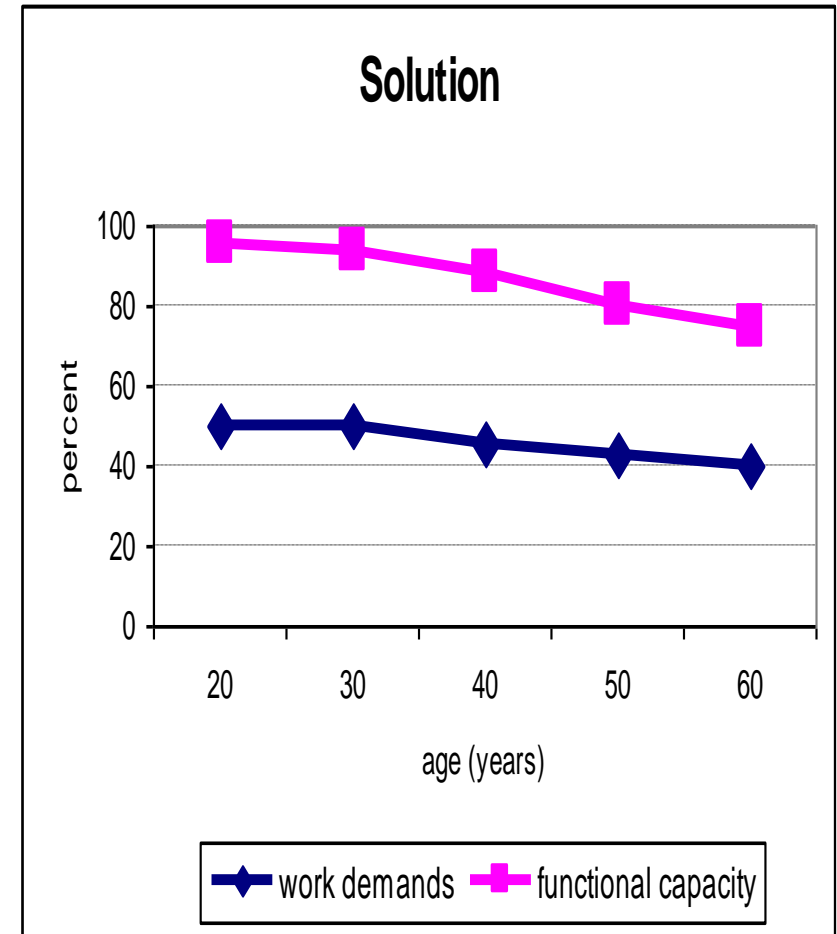
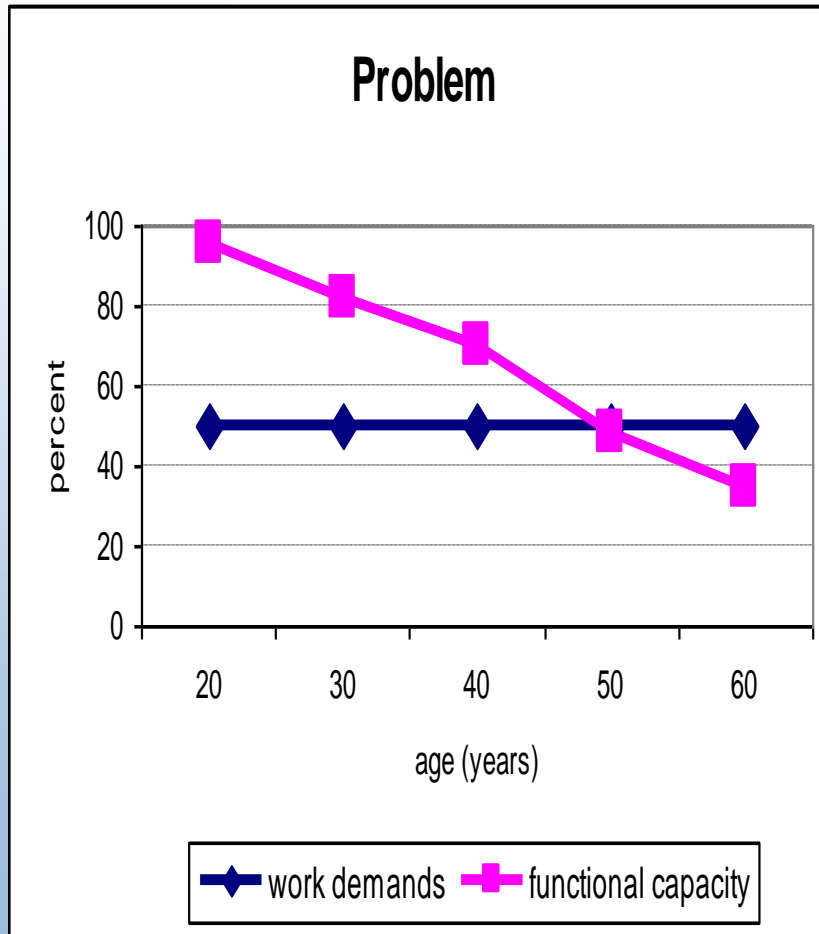


Preparing for an Ageing Workforce

- **Acknowledge diversity among older workers and avoid stereotypes**
- **Flexible working conditions**
- **Phased retirement**
- **Access to (re)training adapted to older workers**
- **Acknowledge caring responsibilities**
- **Update work environment and reduce hazards**
- **Health promotion and preventive action**

Reciprocal Work Adaptation

– FINPAW Model (Ilmarinen and Louhevaara 1999:265)



How is retirement changing?

- Transition to retirement becoming more complex – a transition phase. Will it disappear altogether?
- Influences on retirement decisions have roots in mid-life and inter-relate
- More than simple economic judgements
- Couple effects
- Other intangible factors – ability to choose, control over time of retirement and speed of transition

Why do we continue to call it “retirement”?

Why support Ageing in Place?

- Policy
- Preference of older people

Preparing for many more very old people with significant disabilities and care requirements living in the community

Housing situation of older people

Age group	Owned with mortgage %	Owned without mortgage %	Rented %	Rent free %	Not Spec. %	Residential care %
65-74	9	68	12	4	6	1.3
75-84	5	69	13	4	7	5.9
85 plus	5	64	15	5	9	27.4
Total population	39	25	29	3	4	65 plus 5.6

Implications

- No single housing solution
- Develop a range of alternative housing options to meet special needs
- Likely increase in renting – falling home ownership (2006 census 67% households, 2013 census 65% households)
- Potential for partnership initiatives
- Housing needs cannot be separated from care and support requirements

85 plus - the fastest growing age group

- **80% live in the community, most in mainstream housing**
- **1/3 of men and 2/3 of women live alone**
- **1/2 men are partnered, 1/10 women**

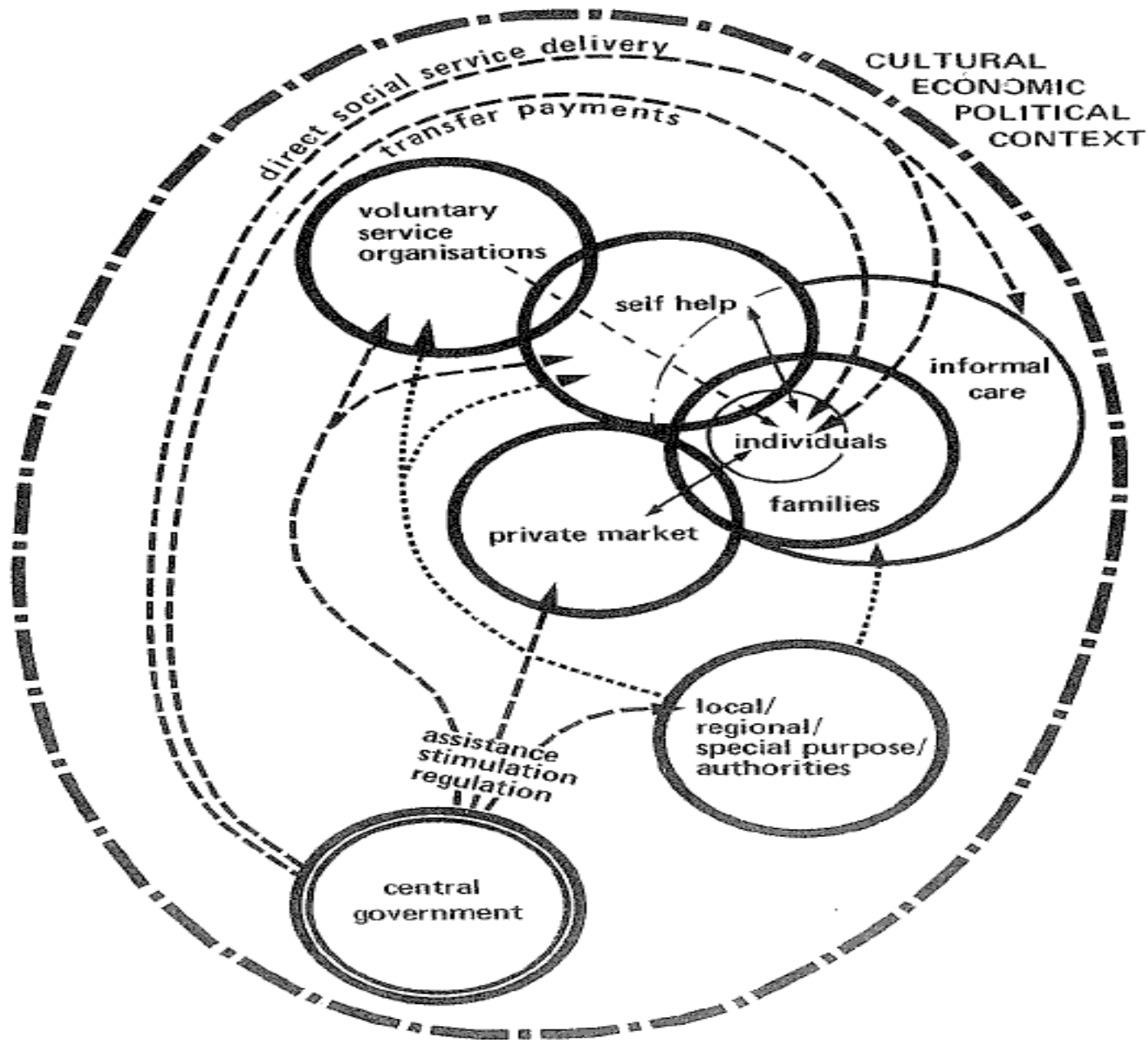
Scenarios - Demand for Care

- 1) **Crisis:** age of onset of disability or chronic disease remains as at present, while death is postponed. Increasing interval of disability drives up demand for services
- 2) **Receding horizon:** onset and progression of disease and disability is postponed to the same extent as mortality
- 3) **Compression of morbidity:** disability and chronic illness are postponed until closer to death - interval between disability and death is reduced

Care of Older People

- People are entering residential care later and with higher levels of disability
- Balance between residential and community-based care
- Cost of residential care – who should pay?
Who should provide?
- Role of families and informal care

How will responsibility be shared?



Flows of social services and care

Sharing Care – Welfare Pluralism

Identifying the strengths of each

- Individuals
- Families
- Communities
- Voluntary organisations
- Private sector
- Government agencies – local and central