



## Summary of Submissions to draft strategy

---

# Better Later Life He Oranga Kaumātua 2019 to 2034

**AUGUST 2019**



Office for Seniors  
Te Tari Kaumātua

Administered by the Ministry of Social Development

New Zealand Government

**Author** Office for Seniors

### **Acknowledgements**

We want to thank all the submitters and workshop and hui attendees who provided input during the consultation between May and June 2019.

### **Disclaimer**

The views and opinions expressed in this report are made by submitters and attendees at workshops and hui held by the Office for Seniors. While the Office for Seniors has made every effort to ensure that the information in this report is reliable, it takes no responsibility for any errors or omissions in the information contained in this report. The report is presented with a view to inform and stimulate wider debate.

### **Copyright**

This work is licensed under the Creative Commons Attribution 3.0 New Zealand licence. In essence, you are free to copy, distribute and adapt the work, as long as you attribute the work to the Crown and abide by the other licence terms.

To view a copy of this licence, visit

<http://creativecommons.org/licenses/by/3.0/nz/>

Please note that no departmental or governmental emblem, logo or Coat of Arms may be used in any way which infringes any provision of the Flags, Emblems, and Names Protection Act 1981. Attribution to the Crown should be in written form and not by reproduction of any such emblem, logo or Coat of Arms.

### **Published August 2019**

Office for Seniors  
PO Box 1556  
Wellington 6140  
New Zealand

Telephone: +64 4 916 3300  
Facsimile: +64 4 918 0099  
Email: [osc@msd.govt.nz](mailto:osc@msd.govt.nz)  
Web: [www.superseniors.msd.govt.nz](http://www.superseniors.msd.govt.nz)

ISBN: 978-1-98-854187-7 (print)

ISBN: 978-1-98-854188-4 (online)

# Contents

<b>Consultation .....</b>	<b>5</b>
<b>Next steps .....</b>	<b>5</b>
<b>Consultation results .....</b>	<b>6</b>
<b>General comments.....</b>	<b>10</b>
Summary .....	10
The design of the new strategy .....	10
Language used .....	10
Formatting .....	10
Innovative approaches .....	10
Research .....	11
Timeframes.....	11
The action plan and implementation of the strategy.....	11
Action plan.....	11
Implementation .....	11
Funding .....	11
Measuring and monitoring.....	12
Working together to achieve results.....	12
Māori ageing.....	12
Rural issues.....	12
Stages of ageing .....	12
Gender .....	13
Suggested changes .....	13
<b>The vision .....</b>	<b>14</b>
<b>The guiding principles .....</b>	<b>16</b>
Suggested changes .....	17
Valuing people as they age/Te whakaaro nui ki te tangata i ō rātou rā ki te ao.....	17
Keeping people safe/Te noho haumarū .....	17
Recognising diversity and that everyone is unique/Te aronui ki te āhua o ia tangata.....	17
Suggestions of additional principles.....	18
<b>Financial and economic security (including through employment) .....</b>	<b>19</b>

Summary .....	19
Financial security .....	19
Sufficiency of income .....	19
Financial literacy/education/support .....	20
Financial security/preparation.....	20
Superannuation .....	21
Economic impacts .....	21
Paid work and business owners .....	22
Employers.....	22
Work.....	23
Issues affecting older women .....	24
Suggested changes .....	24
<b>Improving access to health and social services .....</b>	<b>25</b>
Summary .....	25
Availability and prevention .....	26
Mental health.....	26
Cognitive decline or dementia .....	26
Caring/carers.....	27
Access to information .....	27
Cost .....	27
Dental services .....	28
Links between strategies and other work.....	28
Inequities.....	28
Cultural issues .....	29
Technological disparities.....	29
Suggested changes .....	29
<b>Providing housing choices and options so people can age in the community .....</b>	<b>31</b>
More alternative housing options.....	31
Increased supply of social housing.....	32
More protections for renters .....	33
More support services in the community or home.....	33
Partnerships between central and local government and community providers.....	33

Suggested actions .....	34
<b>Enhancing opportunities for social connection and participation</b>	<b>35</b>
Summary .....	35
Preventing social isolation and loneliness .....	36
Valuing and respecting.....	36
Supported decision-making .....	37
Safety, including elder abuse .....	37
Digital inclusion.....	38
Volunteering .....	38
Recognising and responding to diversity .....	39
Role of local and central government.....	39
Community spaces.....	39
Suggested changes .....	40
<b>Providing accessible built environments so people can participate in their community</b> .....	<b>43</b>
Summary .....	43
Accessibility.....	44
Transport .....	44
Age-friendly .....	45
Role of local and central government.....	45
Suggested changes .....	45
<b>Initial priorities</b> .....	<b>47</b>
Suggested changes .....	48
<b>Appendix</b> .....	<b>49</b>

## Consultation

---

On 12 April 2019, Hon Tracey Martin, Minister for Seniors, released a draft strategy – *Better Later Life: He Oranga Kaumātua 2019 to 2034* for consultation.

The draft strategy was available for download from the SuperSeniors website, and we provided hard copies to a number of relevant bodies (eg, public libraries, district health boards, and a number of organisations and community groups such as Age Concern, GreyPower and local authorities).

People could provide feedback by completing an online submission form or by printing off a Word document version and either emailing or posting this. We also accepted submissions in whatever form and however they were sent to us.

We publicised the release of the draft strategy in the media and used our social media channels to build awareness of it and that we were seeking feedback. In addition to the Ministerial launch, Diane Turner, the Director of the Office for Seniors, and her staff spoke about the draft strategy at a number of events and meetings during this period.

The submission period closed on 3 June 2019, late submissions were accepted and considered.

This document summarises the feedback we received.

## Next steps

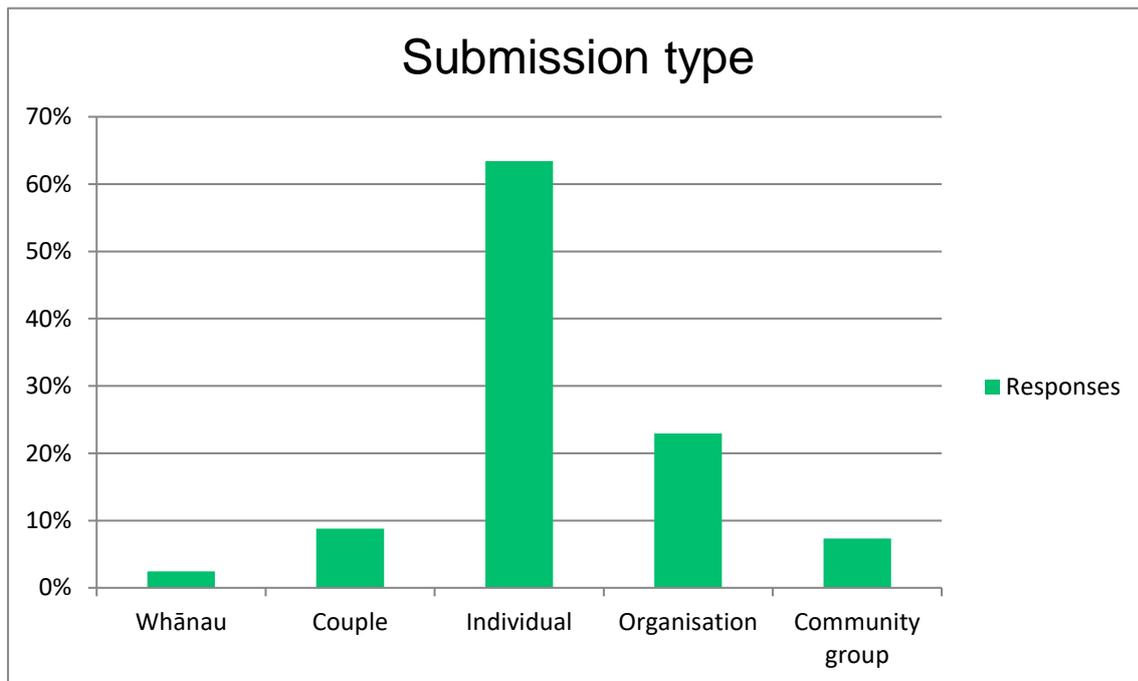
---

Once the submissions have been analysed, we will update and finalise the strategy.

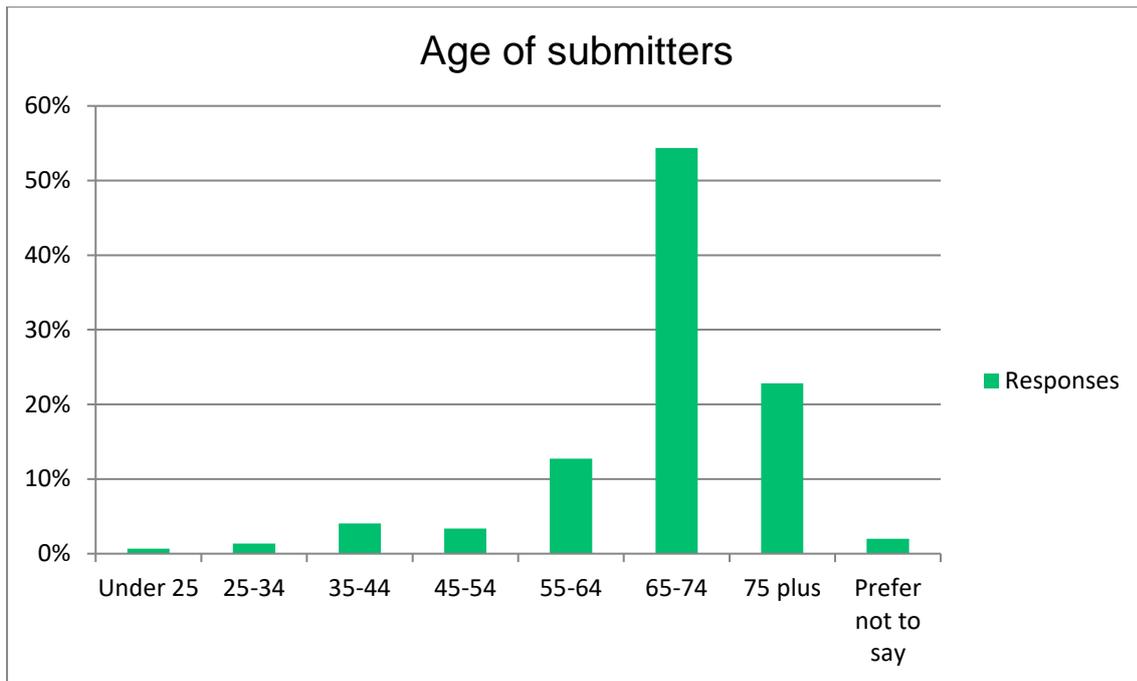
## Consultation results

---

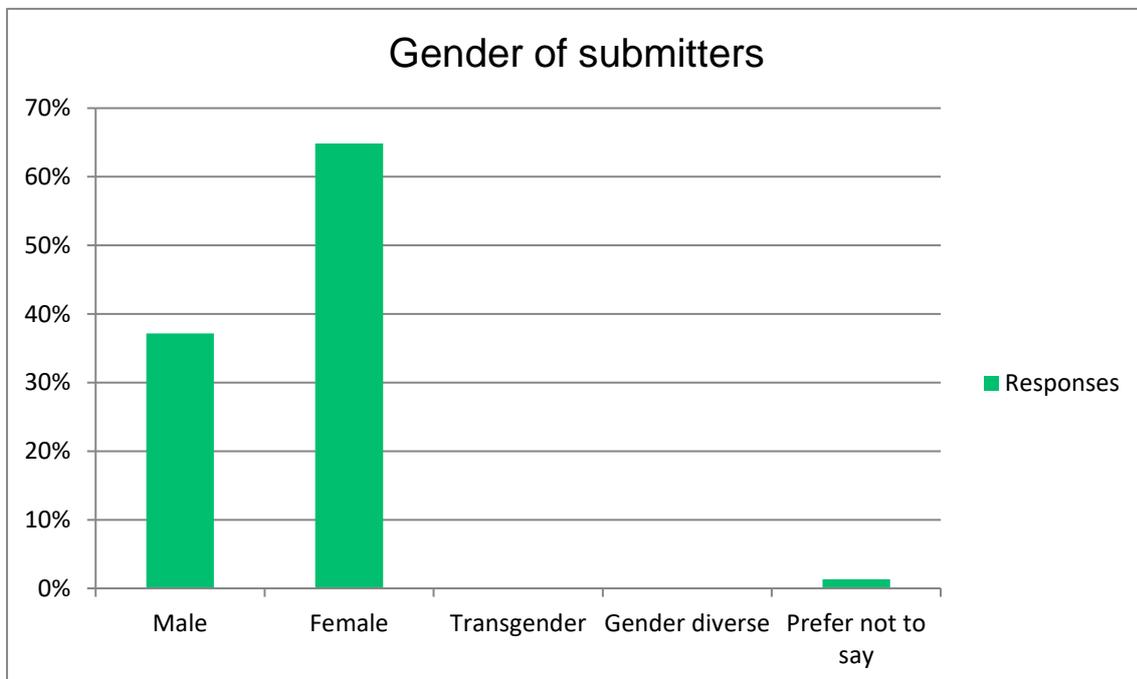
We received 230 submissions. A large proportion of these were received from organisations and community groups who were responding on behalf of their membership, so the total number of submitters is likely to be considerably more than indicated in the following graphs.



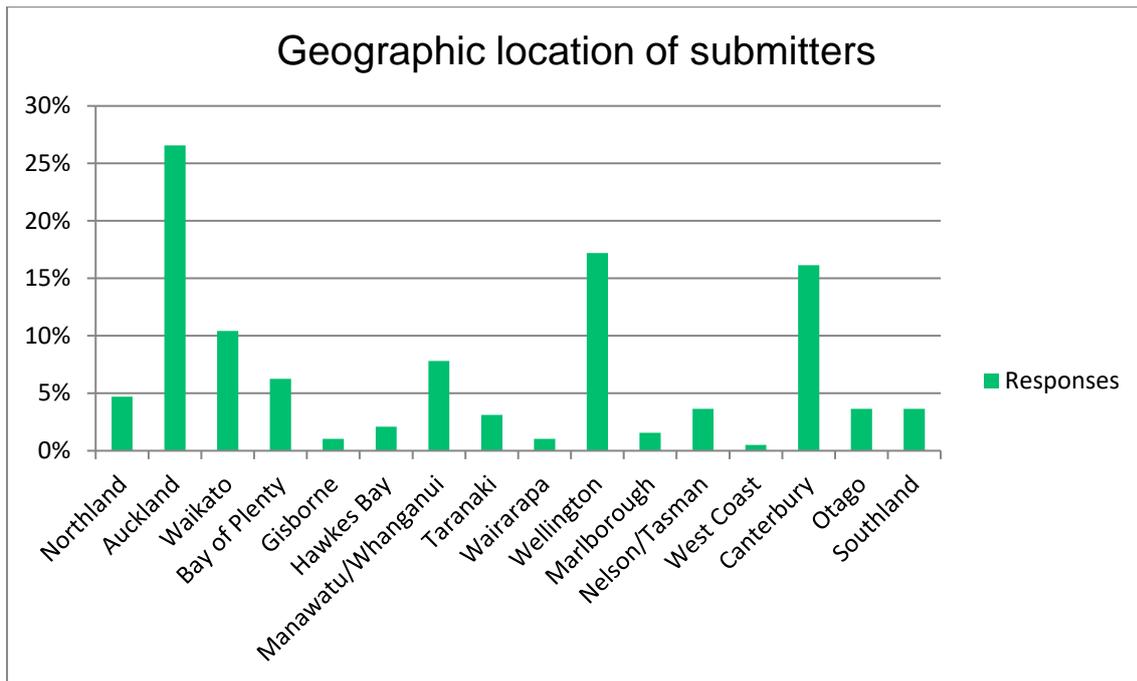
Of those who responded online or used the submission form we provided, and indicated a submission type, most were from individuals (63%, 130 people), followed by organisations (23%, 15 submitters). A full list of organisations and/or community groups who made a submission is provided in the Appendix.



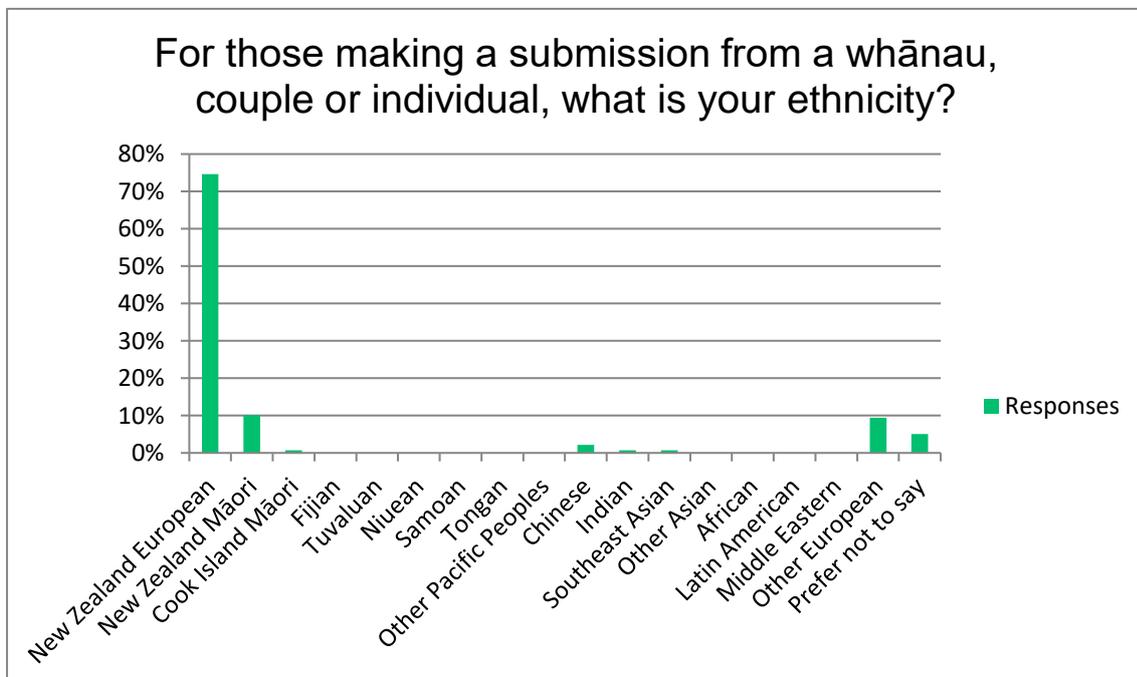
Of the 149 submitters who stated their age on the submission form we provided, 54% (81) were aged 65–74, 23% (34) were aged 75+, and 13% (19) were aged 55–64. Seventy-one submitters did not indicate their age, and three preferred not to say.



Of those submitters who stated their gender, 37% (55) were male and 65% (96) were female. Two submitters indicated they preferred not to say.



Of the 192 submitters who provided their location, 26% (51) indicated they were from Auckland, 17% (33) were from Wellington, and 16% (31) were from Canterbury. The rest of the submitters were fairly evenly spread geographically.



Of those who stated their ethnicity, 75% (103) identified as New Zealand European, 10% (14) as Māori, and 9.4% (13) as other European. Eighty-

two submitters did not answer the question, and a further seven preferred not to say.

# General comments

---

## Summary

Most of the submissions were positive and supportive of the new strategy overall, including the title and tone of it. Many submitters provided suggestions for the action plan and implementation of the strategy, its design and the need for collective action.

## The design of the new strategy

### Language used

Some submitters commented on the language used and thought it could be more inclusive. One submitter suggested using “we” rather than “they”. Others wrote about the use of passive rather than active language, particularly in the possible initial priorities. Some felt that the language was too vague. An alternative title – “Enjoying Later Life” – was also suggested.

The use of te reo Māori throughout the draft strategy was positively commented on by a number of submitters. There were also some who did not support its use.

### Formatting

There was positive feedback about the look and feel of the draft strategy, including comments on its accessibility, use of space and presentation of graphics. Others felt that the source data should be referenced.

### Innovative approaches

Some submitters mentioned that innovative approaches are needed for the strategy to be a success. One submitter said, “We need to look at truly innovative methods rather than business as usual.”

## **Research**

Recommendations were given around how research should be presented in the new strategy, as well as research to investigate. A key example given was the Ageing Well National Science Challenge.

## **Timeframes**

Some submitters were supportive of the 15-year timeframe of the strategy. We also received comments saying that the timeframe should either be much shorter or longer, and that the timeframe of the strategy means it needs to allow for significant innovation and creative solutions.

## **The action plan and implementation of the strategy**

### **Action plan**

Submitters wanted to see an action plan with practical, achievable actions. It was also important to them that there are clear timeframes. Some wanted the action plan to be developed sooner than stated. Submitters also mentioned looking forward to consultation on the draft action plan once it is developed.

### **Implementation**

There were questions about how the strategy would be implemented, and the importance of strong contextual knowledge to successfully implement the strategy. Submitters also raised the importance of being clear about who will be responsible for which actions.

### **Funding**

The issue of how the new strategy would be funded was raised. Submitters felt that it was important for the strategy to clearly state its funding arrangements, as these will be key to the achieving the vision. The importance of securing funding over a number of electoral cycles was also raised.

## **Measuring and monitoring**

Several submitters mentioned the importance of having robust ways of measuring progress and monitoring the action plan. They felt that measuring and monitoring should be part of the strategy. One submitter suggested using Positive Performance Indicators because they are objective, and outcome based.

## **Working together to achieve results**

It was acknowledged that there is a need to work together to achieve results in each area of the strategy. We received offers of help from individuals, iwi organisations, community groups, non-governmental organisations (NGOs), and local government.

## **Māori ageing**

Māori ageing was mentioned by a number of submitters, who recognised it as a cross-cutting theme relevant to all parts of the strategy. They noted the importance of the Crown's commitment to Te Tiriti o Waitangi and the need to remember that iwi are treaty partners. Submitters also noted that the strategy needs to consider kaumātua, the role of whānau, and the inequities that can be disproportionately faced by Māori. One submitter said, "We must work together with them; seek advice and counsel from them, and not think we have to do it on their behalf."

## **Rural issues**

Several submitters noted the particular difficulties that can be faced by older people living in rural areas, and the importance of being mindful of these differences in the development of the strategy and action plan.

## **Stages of ageing**

Several submitters commented on the need for the strategy to take an intergenerational approach. Rather than considering only people aged 65+, some felt that all age groups should be considered. A number felt that younger generations need to prepare for ageing – the earlier the better.

Some submitters noted the big impact that people's experiences earlier in life have on their later life and supported a life course approach.

## **Gender**

Gender was mentioned by several submitters as a cross-cutting theme that linked to all parts of the strategy. They noted that women often end up in more precarious situations in later life than men for many reasons, including gender norms and social structures. This is discussed in further detail in the "Financial and economic security (including through employment)" section.

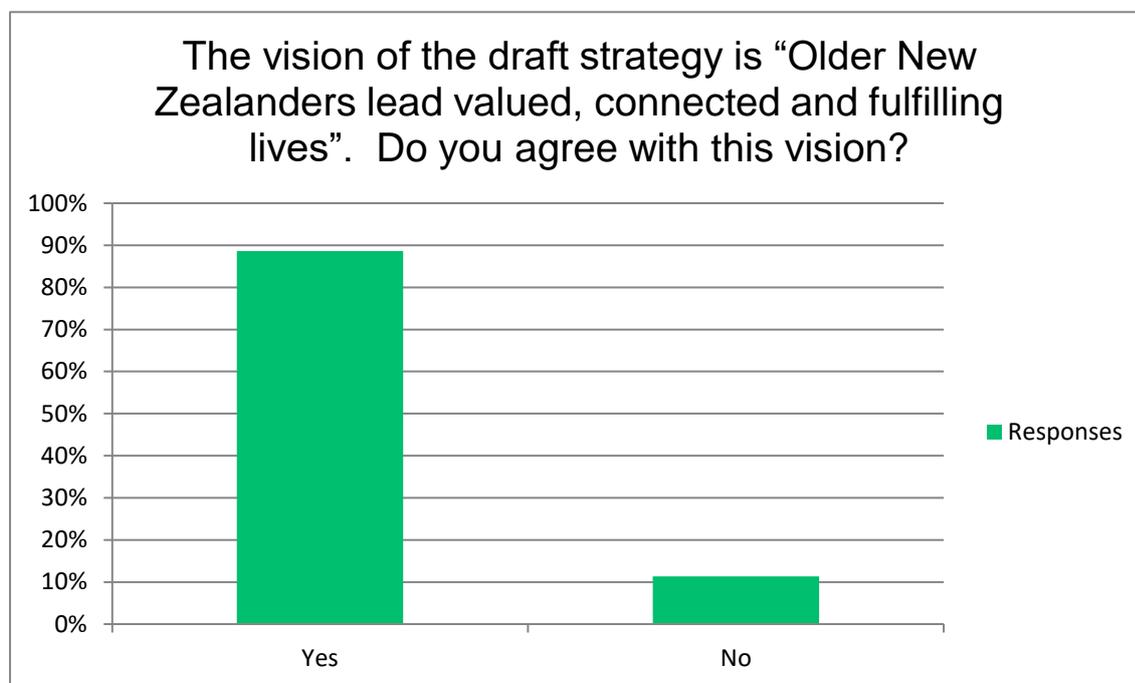
## **Suggested changes**

- Ensure the strategy is accompanied by a relevant, achievable action plan with sufficient monitoring and evaluation measures so that the success of the strategy can be assessed.
- Undertake further research to better understand the needs of older people living in poverty.
- Actively promote the release of the final strategy to the sectors and players who will help achieve the outcomes.
- Include climate change in the strategy.
- Include a brief section outlining longer-term projections for 2050.
- Appropriately fund the Office for Seniors (or other appropriate organisation) to carry out the key recommendations contained within the strategy.
- Consider giving the funding to Whānau Ora commissioning agencies for the achievement of the outcome area providing accessible built environments so people can participate in their community.
- Include more emphasis on the oldest age group (ie, those aged 80+).
- Incorporate into the action plan the findings of studies conducted within the Ageing Well National Science Challenge, which establish clear predictors to living well in older age.
- Take a multi-disciplinary and multi-stakeholder approach to the implementation of the strategy.
- Undertake further consultation on the draft action plan.

- Invest money and time into discussions with, and education of, young adults to prepare for their older age.

## The vision

---



Of those who responded to this question online or used the submission form we provided, 88.5% (164) agreed with it and 11.4% (21) disagreed. Thirty-five submitters did not answer this question.

While the vision received a high level of support, submitters suggested the following changes.

- Change “lead” to “leading”.
- Define the age (eg, instead of “older New Zealanders”, state “New Zealanders aged 65+”).
- Add “active”.
- Add “security/secure”.
- Add “wellbeing”.
- Add the who (as in “Government agencies will work collaboratively to...”).

Others suggested alternative visions:

- “Older New Zealanders are valued, and live a healthy life with dignity, choice and control.”
- “Older New Zealanders can live lives that help them individually feel valued, connected, healthy and involved.”
- “Older New Zealanders should lead more fulfilling lives.”

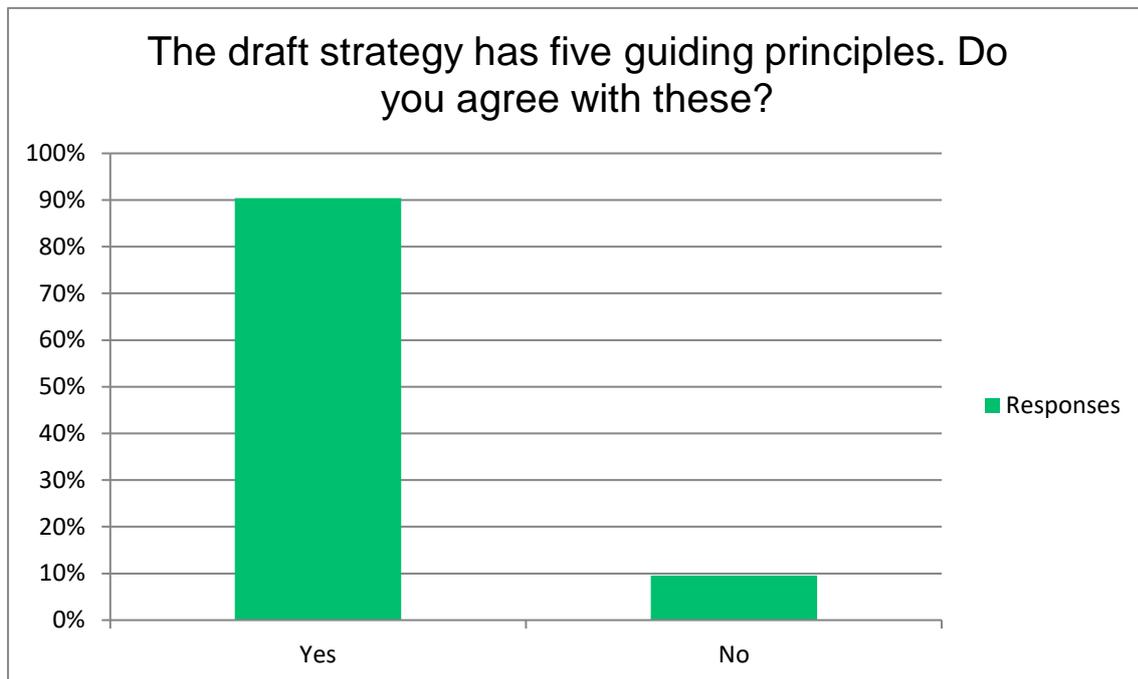
One submitter stated:

*The sentence suggested is subjective and can despite being well meaning lead to 'blame' or be internalised as 'sickness' for not having a fulfilling life when in fact it is largely a cultural systemic structural issue.*

Another agreed with the vision, seeing it “as a step toward re-normalising old age and our elders as a significant, valuable part of society rather than a problem to be solved”.

## The guiding principles

---



Of those who responded to this question, 90.4% (170) agreed and 9.6% (18) disagreed. Thirty-two submitters did not answer this question.

Most comments were supportive – for example, “sound principles that underpin a holistic approach to healthy ageing”.

Some submitters thought the principles could be improved. They suggested that “the principles are universally appealing guiding principles – the strategy would benefit from some basis underlying the principles” and that the “guiding principles should be an explicit recognition of the increased opportunity for future contribution”. One submitter said that while the guiding principles are good, they are likely to be impossible to measure, and we need to ensure the action plan has teeth.

Some of the more critical comments included:

- “Far too generalised and politically correct.”
- “[The] principles do not address the social change vitally needed because they take a whole of life approach overall.”
- “What is wanted for ‘Valuing people as they age’? Is it about ‘older people to be valued and respected?’ Then say this.”

One submitter thought the guiding principles needed “emphasis [on] the need for everyone to adopt sound practices at an early age rather than expect help to overcome symptoms later in life”. Another submitter thought the principles should provide “an anchor consisting of shared New Zealand values to underpin the guiding principles adopted”.

## **Suggested changes**

### **Valuing people as they age/Te whakaaro nui ki te tangata i ō rātou rā ki te ao**

An alternative suggestion for the descriptor is:

*In New Zealand, kaumātua are loved. They are treated with respect and dignity and are recognised for their past and present contributions they make to cultural, spiritual, health and environmental outcomes for our country. Kaumātua have the experience and right to make decisions and have their voice heard, including planning for what will happen if their ability for tino rangatiratanga is diminished. Appreciating the precious role of kaumātua and kuia as the foundation for our whāriki of the future, we need to return to the wisdom of te pā harakeke, and accept that the health of our elders must be the priority of us all.*

### **Keeping people safe/Te noho haumarū**

Suggestions included:

- Change to “Being safe”.
- Change to “Keeping people safe and healthy”.
- Change to “Society cares for its elders and does not allow abuse”.
- The descriptor could read: “In New Zealand, all kaumātua feel safe, and live free from abuse and neglect.”

### **Recognising diversity and that everyone is unique/Te aronui ki te āhua o ia tangata**

One submitter suggested that the descriptor could read:

*New Zealand communities are rich with diversity, and everyone is unique. This may be because of health issues and disabilities,*

*socioeconomic background, gender and sexuality, family circumstances, and an individual's life experiences and choices, where they live, life stage, ethnicity and culture. This strategy shows our strong commitment to ensure the dreams and aspirations of all kaumātua are heard and supported.*

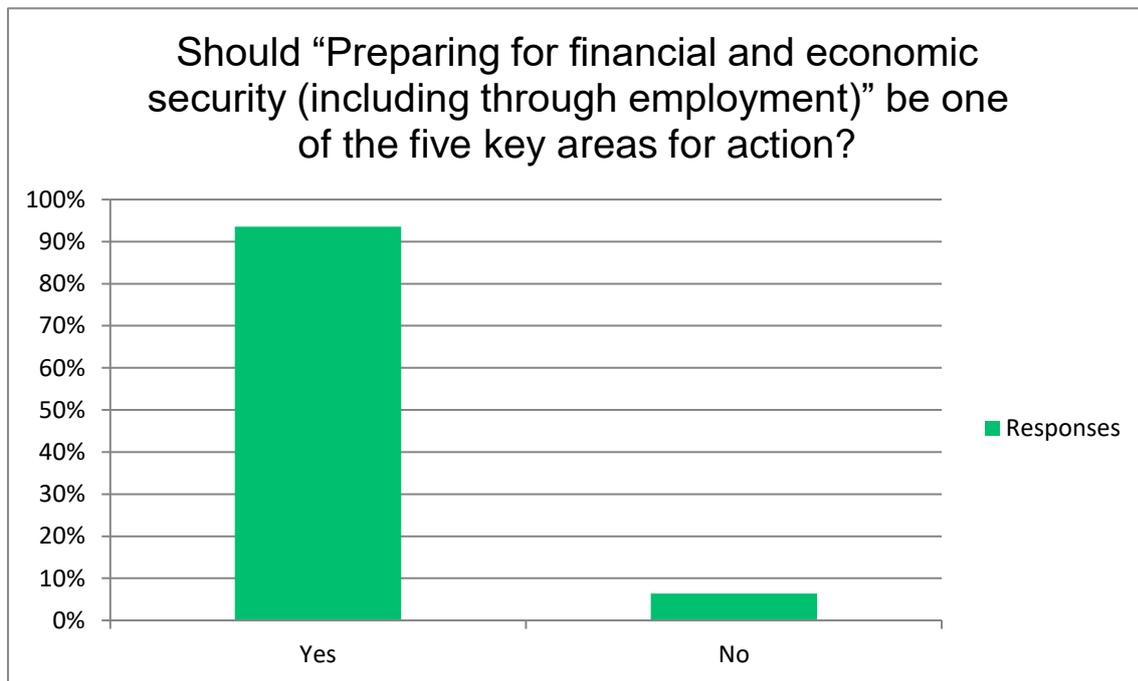
### **Suggestions of additional principles**

A number of submitters suggested additional principles.

- "Taking a Whānau Ora approach to ageing", with the descriptor reading: "Knowing that the determinants of health extend far wider than a focus on disease enables, we need to take a Whānau Ora approach which is collective in its scope; inter-generational in its approach; strengths based and starting from whānau aspirations as a foundation."
- "Older people thriving, having purpose, adapting to change and participating in life and in their communities", to give a focus on thriving.
- "Recognising that gender equity issues leave older women more vulnerable than older men."
- "Recognising intergenerational solidarity (or integration)."
- "Intergenerational solidarity is understood as social cohesion between generations."

## Financial and economic security (including through employment)

---



Of those who responded to this question online or used the submission form we provided 93.6% (175) agreed and 6.4% (12) disagreed. Thirty-three submitters did not answer this question.

### Summary

Most respondents supported this key area for action and provided commentary to support this, reiterating what had been said in the draft strategy.

### Financial security

#### Sufficiency of income

Some submitters noted that there would never be sufficiency of income until the living wage was adopted. Others said that some people would always need support. Some were concerned that the use of “sufficient” and “good” income may mean “a much higher level of consumption than is needed for a reduced expenditure but satisfying life for everyone aged 65+.” Another suggested that for this to happen there needed to be “compulsory savings schemes from one’s first payday”.

## **Financial literacy/education/support**

One submitter said there should be “access to improved financial literacy education from 30–40 years onwards”, another suggested that this should be provided for young adults over the next decade, and another said that “financial capability needs to be taught throughout life”. Another submitter supported “resourcing of financial digital literacy programmes to support older New Zealanders and their whānau”.

## **Financial security/preparation**

The submissions about financial security/preparation can be categorised into individual and systemic issues. Those taking an individual perspective said:

- “[We] need to stop using ‘preparing’ as if something is going to happen – [this is] tsunami thinking.”
- People need to be planning early and not leaving it until 65, and that retirement planning is part of this.
- “The people who most need to save more for retirement are the ones least able to do so.”

The submissions that took a systemic approach said:

- There needs to be a “pan-government approach to addressing financial security in the longer term”.
- We need “more actions at the systems level”.
- The strategy contains “very light and non-specific recommendations about how people who have insufficient income over a lifetime to save can be supported”.
- There needs to be intergenerational equity ensuring “the needs of the present are met without compromising the ability of future generations to meet their own needs”.
- “Consideration of future tax and KiwiSaver changes should be guided by this strategy.”

One submitter said:

*Along with inequities amongst older people it is useful to note the various stages of retirement. The Commission for Financial Capability describes this well in their three stages of retirement. In*

*the early phase (which may include still working) people are active, pursuing hobbies and travel; spending can therefore be high. In the middle stage spending slows and in the later phase, health and well-being costs may push up spending once again. This is relevant information for planning and saving for.*

## **Superannuation**

Several submissions dealt with a range of issues around New Zealand Superannuation (NZ Super), superannuation more generally and pensions. Some commented on the adequacy and fairness of NZ Super, including section 70 of the Social Security Act being unfair. Others felt that superannuation was not sufficiently addressed. Submitters said:

- “[It] may have been adequate for seniors who owned their own home, but it is not sufficient for older renters.”
- “National Super should be enough to live on, and at present it is not.”
- “National Superannuation is the foundation of a better later life.”
- “Drop [the] secondary tax regime.”
- “Draft Strategy doesn’t address ongoing superannuation.”

Some submitters expressed resentment at having to advise the Ministry of Social Development that they are overseas, and that the requirement to be in New Zealand could cause social isolation from family living overseas.

Submitters also stated that workers aged 65+ should receive employer contributions for KiwiSaver.

## **Economic impacts**

Submissions under this heading included:

- Geographic issues have not been dealt with.
- The value of the silver economy needs to be recognised and publicised. One submitter said, “We have investments that generate Income Tax, we still live in our home and so contribute to our city’s rates and other expenses and we are consumers of the same goods and services that we used prior to retirement and so contribute the appropriate taxes.”

- Several local body submissions indicated that they were very aware of and already planning for their ageing populations.
- Sustainability issues were mentioned, including that we needed sustainable population growth, and the “high consumption/high production economy that people have mostly had since the 1950s is unsustainable”.
- One submitter said:

*More people reliant on NZ Super could mean local government may face increasing rates arrears, as well as greater pressure to not increase rates, which in turn limits local government’s capacity to provide for community needs and aspirations.*

## **Paid work and business owners**

One submitter suggested this title be changed to “Paid work and business ownership”. Another said:

*We cannot look at the ageing population (ageing work force) in isolation but rather as a subset of a dynamic mega trend set of conditions that are constantly evolving. There is no one solution but rather a number of adjustments and resets within other systems.*

Another submitter mentioned the benefits of having had a coordinated approach to issues of working that an inter-agency steering group provided.

## **Employers**

Submitters agreed that there is a reluctance from employers to employ those over the age of 50, and that the State sector should be role modelling good practice. Some suggested there should be incentives to recognise good employers – for example, employer of choice accreditation. Submitters suggested that there should be tax concessions for employing older workers, and there should be campaigns to challenge ageism in the workplace. Submitters also said:

- “When developing a toolkit, it needs to be recognised that this is not a one size fits all solution. For instance, the needs of white collar and blue collar workers will be different.”

- “Employers need to offer flexible/part time work hours, working from home, and access to ongoing professional development.”
- “Employers can draw on Kaumātua experience, wisdom and capabilities so that their expertise is not dissipated but allowed to permeate through society, communities and whānau and ultimately impact on the wellbeing of whānau.”

## **Work**

One submitter noted that “for many, work is their source of contribution, pride, community and friendship, let alone financial security.”. Another noted there is an economic necessity to work, because of reliance on NZ Super.

Some submitters addressed upskilling so older workers stay relevant. They suggested that employers should be providing professional development for older workers, and that there should be short courses available for older workers to access. One noted that there should be “initiatives that help people transition to retirement”. Another noted that there is a trend towards online information being proposed as the panacea for meeting career needs, when there are many other effective types of career intervention, including “one-to-one, workshops, classes, computer-assisted”.

Another noted that “incomes drop after redundancy, depending on how long you’ve been out of work”, and sometimes this means moving to new work models such as “starting a new business, contracting, freelancing, fixed term contracts – some adapt, some don’t”, so there is a “critical need to reskill and upskill in new types and methods of working to stay relevant”.

One submitter noted that the “support provided to employees through restructure and redundancy is generally for white collar workers”, and that the

*bulk of government funding for career services sits within the secondary education system, but there is a clear link between older workers and TEC’s Careers System Strategy goal for this group: ‘All New Zealanders have the skills and capabilities to have a fulfilling career and sustainable income for as long as they choose’.*

One submitter suggested that “part time work post 65, should be taxed at the lower rate”, and another said, “Not all people can work post 65.”

### **Issues affecting older women**

Several submitters noted the added impact of financial issues on older women, including the effects of the gender pay-gap and women’s role as carers, with associated employment gaps and sometimes relationship breakdown (“women are generally worse off in terms of their ability to earn the incomes continuing to be earned by their ex-spouses”). This is then compounded by women living longer and being more likely to live alone. One submitter urged the government to tackle factors that are involved and, once identified, put in place long-term solutions so women are no longer financially disadvantaged. Another said that the priority should be “to improve the lives of many older women who are on their own with little income and few assets, plus a longer life expectancy than men”.

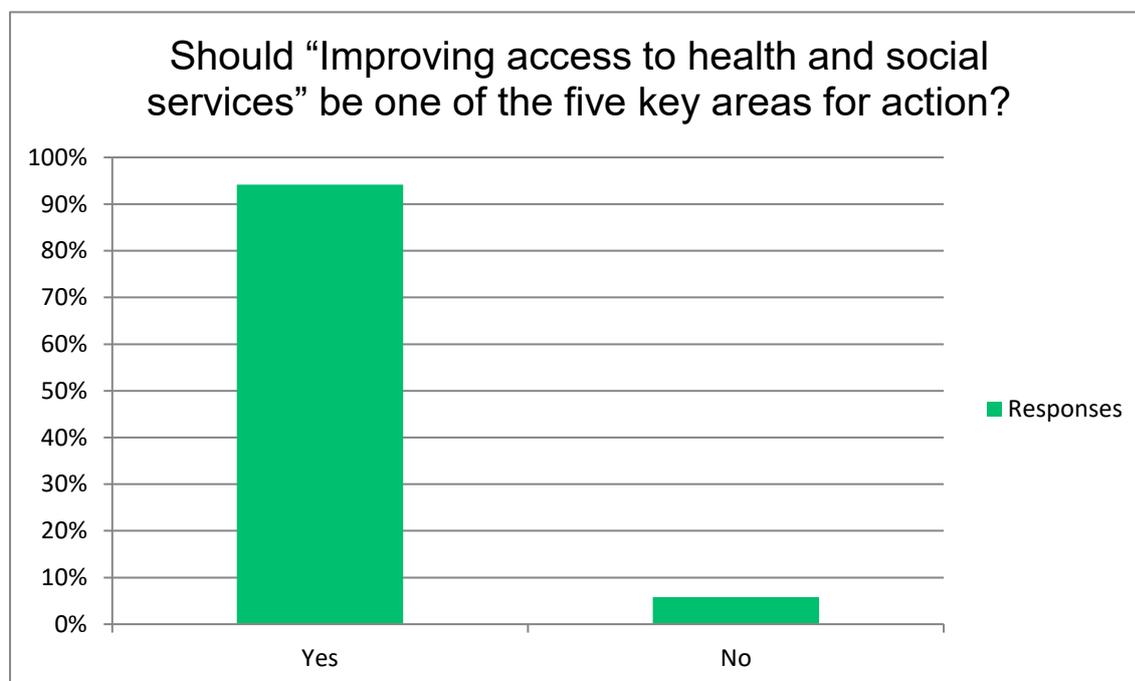
### **Suggested changes**

- For the “What needs to happen” key action “Provide information on the impact of different choices on retirement savings, including time out of the workforce”, remove the framing of time out of the workforce being a choice – it’s not always a choice.
- The “Case for Change” section could benefit from additional workplace-specific data.
- For the “What we want to achieve” aim “All older people have sufficient income, assets and other support to enjoy a good standard of living”, change “a good standard of living” to “a comfortable standard of living”.
- Under “What needs to happen” in the “Paid work and business owners” section, add the following key actions:
  - Provide education to address these issues and debunk stereotypes
  - Provide funding for specialist career services for older workers
  - Develop career and labour market information for older workers and employers
  - Design programmes for older people to continue contributing through paid and unpaid work

- Design programmes to support employers to provide non-standard options for older employees.

## Improving access to health and social services

---



Of those who responded to this question online or used the submission form we provided 94.2% (178) agreed and 5.8% (11) disagreed. Thirty-one submitters did not answer this question.

### Summary

In general, the majority of submissions were positive and supported this key area for action. Many expressed they were pleased to see recognition of the need for improved access to health and social services. Submitters acknowledged that many wished to see health promotion and risk reduction for older adults, in addition to equitable access to healthcare – especially for vulnerable groups. Several were supportive of the recognition of the need to reduce inequities in health – in particular, for Māori, Pacific, migrant, refugee communities and people with disabilities.

## **Availability and prevention**

Several submitters stated that currently there are not enough services to meet demand. An example given was that some people cannot access elective surgery and struggle to make themselves heard. Submitters also noted that there needs to be a focus on rehabilitation and preventative services and an acknowledgement that health is at the “core” of all other considerations, as it can also affect work and social factors.

Submitters noted inconsistencies in service provision between district health boards, and the need for general practitioners to train in geriatrics to become more familiar with older age health issues, such as cognitive decline.

## **Mental health**

Many identified this as a gap in the draft strategy, saying that not enough weight was given to mental health services. For example, older people have limited access to addiction services (eg, gambling, alcohol, drugs, smoking), which was described by one submitter as being a “hidden and growing problem”. Several submitters stated that additional services for addiction are needed, such as accessible screening, brief intervention, treatment programmes effective for older adults, and that counselling/psychological services for older adults need to be more affordable and accessible.

One submitter said that residents in aged residential care (ARC) have higher rates of mental illness, and other submitters reported that workers in rest homes are overstretched and underprepared.

## **Cognitive decline or dementia**

Several submitters identified this as a gap in the strategy, stating that there is no specific mention of dementia-related services. Submitters were concerned that people with dementia require specialist services, and health and social services will come under pressure with increasing numbers of people living with dementia.

## **Caring/carers**

One submitter noted that care partners and their needs have been omitted from the strategy.

## **Access to information**

Some submitters stated that there needs to be an increase in information about services, such as their availability, individuals' eligibility, and possible alternatives (eg, "nobody offers help, you've got to go and find it and ask for it"). Another suggested that transportation options for accessing health providers need to be supported – for example, Red Cross or St John's Health Shuttle. Submitters noted that accessibility to both health and social services is a current and increasing challenge, particularly in rural areas. This leaves older people more vulnerable, and initiatives such as the Green Prescription need to be more widely available.

One submitter noted that we don't communicate with those older people (those who are isolated and in "another world") adequately, and they "simply do not comprehend the world around them".

*We need to be able to talk with older people face-to-face, slowly, with empathy, and be understood.*

## **Cost**

Many submitters expressed that they cannot afford oral health care, hearing aids, mental health, or cataract operations. They said:

- There needs to be increased incentives or subsidisation of health-promoting activities, products and services (eg, general practitioner visits, dental services, prescriptions, heat pumps, insulation).
- The cost of private health insurance is high ("abhorrent") for older adults and not accessible to many.
- There is a reluctance for older adults to call an ambulance due to costs.
- Podiatry and foot care are a necessity for older adults, not a "luxury" – there is a need for increased services in this area.

## **Dental services**

Many submitters identified dental care as a gap in the draft strategy, noting that the costs were preventing older people from seeking treatment. They said:

- Effective dental health has been proven to contribute significantly to overall good health.
- Neglected oral care can lead to difficulties eating properly or comfortably. Inaccessibility is causing many older adults to “neglect” their teeth said one submission.
- Accessibility needs to be improved, and this should be a priority.

## **Links between strategies and other work**

Submitters made links between the draft strategy and the Healthy Ageing Strategy 2016, the New Zealand Disability Strategy 2016–2026, and the New Zealand Carers’ Strategy 2008. One submitter noted that despite the Code of Health and Disability Services Consumers’ Rights, sometimes decisions are taken outside of older adults’ hands. International programmes such as Babylon Health (UK) or Skycare (Netherlands) were suggested by submitters as being useful examples. One submitter identified strong similarities between the New Zealand Framework for Dementia Care and the draft strategy, and similarities with Alzheimers New Zealand’s evidence-based requests for improvement set out in its Recommendations for Budget 2019 were also identified.

## **Inequities**

Some submitters suggested that the strategy requires greater recognition of the inequalities dictating outcomes in health and how these are shaped by barriers to access and where seniors live. Some described the focus of the strategy as very “urban” and think there needs to be more information about rural services. For example, transport options for accessing health providers is particularly important in rural areas where public transport is difficult.

## **Cultural issues**

Submitters were clear that older adults are not a homogenous group, and the composition of the New Zealand population is changing, with an increasing range of cultural groups and diverse languages. Māori experiences of older age differ from non-Māori, and one submitter noted that it is “critical that services are delivered by kaupapa Māori providers with the full understanding of older Māori and their particular requirements”.

Submitters noted that Asian, Indian and Middle Eastern older people may not be able to access relevant information regarding their care. Additionally, it was noted that those living in an ARC facility may find the cultural norms of the ARC environment “alien to them”.

Some submitters reported that health and social agencies need to improve the way that they interact with kaumātua and whānau. Specifically, submitters suggested that a whānau-centred model of care needs to be adopted, culturally appropriate care needs to be prioritised, and there is a need to cater to te reo Māori-speaking clients.

## **Technological disparities**

Submitters highlighted that the introduction of new technology must not be a barrier to accessing services. They noted that older adults may not wish to engage with new technology for a variety of reasons, such as fear, reduced cognitive functioning, and memory issues.

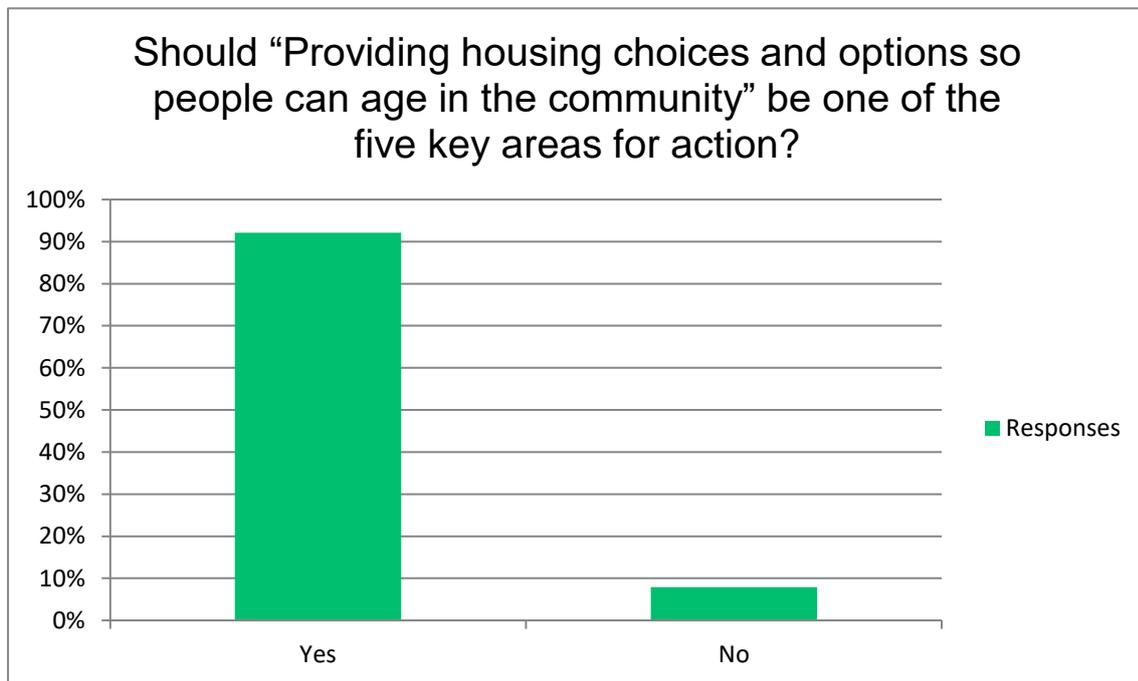
## **Suggested changes**

- Include a statement about supporting older people with mental illness and/or cognitive decline.
- Note that older people should consider the possibility of cognitive decline and familiarise themselves with the Protection of Personal and Property Rights Act 1988.
- Encourage a specific dementia strategy, and a distinction between seeing people with dementia as “sufferers”.
- Include the following statement under “What needs to happen”:  
“Ensure that Aged Residential Care is identified and prioritised within the Health Workforce NZ’s National Workforce Strategy.”

- Include more information about working with older people from diverse cultural backgrounds.
- For the “What needs to happen” action “Work across government and social sector agencies to improve access and co-ordinate assistance to socially isolated and other vulnerable older people”, add “and communities”.
- Add another action to the “What needs to happen” actions for culturally appropriate and whānau-centred services: “Employers provide culturally sensitive workplaces.”
- Change the health heading to “Maintaining wellbeing, health and quality of life”, and make “Improving access to health and social services” an action.
- Include technology and augmented intelligence.
- Prioritise addressing health and wellbeing through the wider determinants of health, such as housing, transport and employment.
- There should be “explicit recognition of the importance of linking the formal health sector with community support services” (eg, NGOs).

## Providing housing choices and options so people can age in the community

---



Of those who responded to this question, 92.1% (175) agreed and 7.9% (15) disagreed. Thirty submitters did not answer this question.

In this section, many submitters provided comments and suggestions of how older people could age in their community.

### More alternative housing options

Submitters said:

- The housing market is unaffordable, and available housing stocks do not meet the needs of older people.
- The retirement village model is not an ideal housing option for many older people as they cannot afford it. To make retirement villages more affordable, they should operate under a private–public partnership model and/or provide rental options for older people.
- There should be more affordable alternative housing choices and options for older people so that they can have choices and options to age in their community.

The following housing models and options were suggested to provide more affordable quality housing for older people:

- shared housing
- co-owned housing
- intergenerational housing
- the Abbeyfield (charitable trust landlord rental communal living) model
- more affordable quality smaller houses.

A few submitters suggested that housing models should incorporate universal design principles, and that Māori culture should be incorporated to explore options for kaumātua. Submitters also suggested changing the Building Act and Code to ensure that new-build residential dwellings meet accessibility criteria.

Others suggested that policies should be introduced to encourage older people to downsize, which would make their big houses subsequently available for others. Some suggested a retrofitting programme, reducing regulation compliance and costs so older people can modify their homes.

There was one suggestion that improving housing options could include removing “private, exclusionary covenants that often involve such requirements as larger house footprints, no visible ramps, high cost construction materials and so forth”.

## **Increased supply of social housing**

Submitters mentioned that there is not enough social housing available for older people and suggested that central and local government should build more single- or two-bedroomed quality social houses. However, one submitter was concerned that increased numbers of smaller houses may lead to social isolation and loneliness for older people.

A few submitters said that having a “a secure place to live” is a human right and should be provided for. Conversely, a few said housing is a personal responsibility, not a government one. Some mentioned that housing issues are not a Ministry of Social Development responsibility, but Housing New Zealand’s.

## **More protections for renters**

Submitters said renters want more affordable rentals, protections and security of tenure (including in the private sector). Some suggested that central and local government should provide for the rental market.

A few mentioned that government should provide more financial support for renters, including rent subsidies and an increase to the accommodation supplement.

A few submitters said they would prefer to rent (rather than own) if this option was available, affordable and had enough protections for them.

## **More support services in the community or home**

Some submitters said that while they want to age in their home and community, there was lack of support available to enable them to do so. This includes:

- provision of home support
- skilled caregivers
- accommodation supplement
- rent subsidies
- easy access to rates rebate scheme – extending rates rebate scheme to renters too.

## **Partnerships between central and local government and community providers**

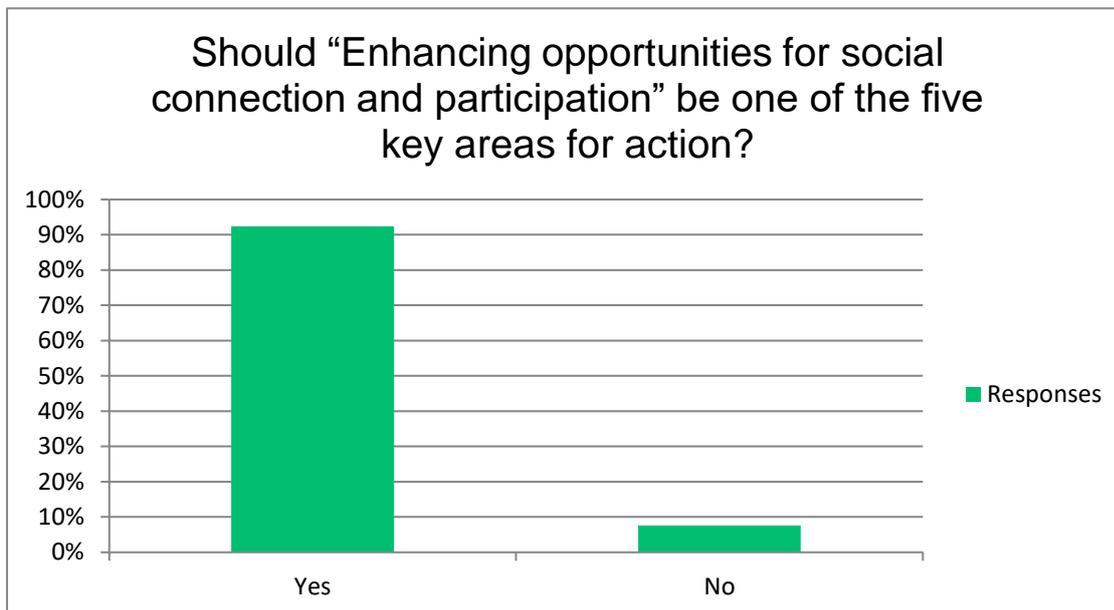
Some submitters suggested that government agencies should work together to address the housing issue for older people. One suggestion was for a cross-government working group to be set up. Some suggested that central and local government should work together. A few suggested that the Government should also work in partnership with community housing providers to increase housing supplies for older people. This includes funding support for community housing providers.

## **Suggested actions**

- Change the title of this key area for action to “Providing housing choices and options so people can age ‘well’ in the community”.
- Undertake more in-depth analysis to understand older people’s housing needs.
- Raise awareness about housing options available for older people.
- Identify and address the needs of older people at risk of experiencing homelessness.
- State that having “a secure place to live” is a human right in the strategy.
- Add a priority “to explore and invest in other models of housing provision”.

# Enhancing opportunities for social connection and participation

---



Of those who responded to this question, 92.4% (171) agreed and 7.6% (14) disagreed. Thirty-five submitters did not answer this question.

One submitter said there should be “a focus on more than old people getting together, they need opportunities to be engaged, integrated and share their skills with the wider community”.

## Summary

Most submitters supported this key area for action. Enhancing opportunities for social connection and participation was seen as intrinsically linked with other areas in the draft strategy. This is evidenced in the following two quotes:

- “We see this as the number one priority that serves to address the other identified priorities.”
- “Other actions in the draft strategy are likely to contribute to greater social connections among older people.”

The submissions about preventing social isolation and loneliness can be categorised into individual empowerment, and societal support to enable connection.

## **Preventing social isolation and loneliness**

Submitters felt strongly that all people, and particularly older people, should retain control over their own lives, feel able to make informed choices, and contribute in a way that adds meaning in their lives.

Submitters noted the loss of “social capital” – the ties that build trust, connection and participation due to life changes that occur in later life, such as retirement and the loss of friends and spouses to death and illness and people moving away. Social interaction was seen as a way to increase both social capital and health and wellbeing.

Submitters suggested that this area for action should be extended beyond inclusion to “belonging”, which is more than connection and participation. Participation in community education and the arts was another suggested avenue of engagement.

The linkage was identified between loneliness, lack of social connection and suicide, which all link to wider societal attitudes towards older people, especially those with mental illness. One submitter said that including older people in emergency planning empowers them to increase their individual and communities’ resilience. A submitter also noted the balance between social drinking and harmful alcohol use as something that requires support and training to service providers, particularly around significant life events.

Another submitter noted:

*Connection with whakapapa (identity) and participation in whanaungatanga (connectedness) is vital for the health and wellbeing of all New Zealanders. These elements contribute to a sense of belonging through establishing, engaging and maintaining relationships.*

This submitter also spoke about the strength that comes from this belonging, from which knowledge and tikanga can be shared with whānau and communities.

## **Valuing and respecting**

Changing societal norms and attitudes towards ageing and towards older people were mentioned a number of times as a path to preventing social

isolation and loneliness, with one submitter noting “stigma and discrimination are such significant issues that they warrant a section of their own”. Another thought the “Valuing and respecting” section could be more positive, with stronger statements.

Submitters noted that a lack of being valued or ways to feel “legitimate” can lead to people disengaging and becoming isolated. For those experiencing dementia, and their carers, stigma can make them feel “no longer any good” or that they are being treated like a third person, compounding their sense of isolation. “We all want to be seen, valued, appreciated and loved for who we are.”

## **Supported decision-making**

Raising awareness of, and access to, enduring power of attorney, including addressing cost barriers, was mentioned. This is a way people are supported to make decisions that affect them, and as a protection against financial or other abuse. Similarly, discussing advanced care planning allows older people and their whānau a chance to make informed decisions.

## **Safety, including elder abuse**

Many submitters reported the issue of elder abuse and that the need to prevent it is “vital”. One submitter stated that “there is no law to make it a crime”. The need for more than just awareness to create social change was raised in the submissions. Some submitters suggested there is a need to make it easier to report elder abuse and provide support, as well as a need to continue raising awareness of age discrimination. More research is needed into the prevalence and prevention of elder abuse, said one submitter. Submitters also noted that elder abuse is unacceptable and is an alarming trend, with a suggestion that elder abuse should be included in family violence discussions.

Submitters mentioned that safety issues for older people meant valuing and respecting older people is paramount.

A number of submitters noted the importance of making sure physical environments are age-friendly and accessible.

## **Digital inclusion**

Submitters mentioned the importance of older people being digitally included, but that services need to be inclusive of non-internet users and ensure multiple channels of access to government services as well as the private sector. The decision by one bank to stop processing cheques was given as an example that was further isolating older people. Training to improve digital skills for older people to adjust to this change was suggested, with one submitter saying that the need is becoming urgent. Another suggested that banking systems should provide a solution from those who are not internet users until further inclusive systems are developed. Some submitters noted that technology training would reduce vulnerability to online scams.

Submitters talked about the role of technology in allowing people to stay connected to whānau and friends, and to remain in paid or voluntary work.

One submitter noted that this one-size-fits-all approach excludes many from receiving information and influencing decision making, and another noted the importance of enabling older people to engage in policy processes and decisions that affect their wellbeing.

Another suggestion was for technology to be available for all kaumātua to use in their homes, and that Government in collaboration with key partners should provide free internet and landlines for kaumātua who live alone.

## **Volunteering**

Some felt that volunteers, often older people, were taken for granted and needed protections. One urged organisations to consider the needs of older volunteers and to address any potential barriers such as well-meaning but discouraging “bureaucratic obstacles”.

Submitters noted the mutual benefit of intergenerational connections, and that societal changes have led to a disconnection between people of different ages.

Volunteering often has negative connotations (eg, they have nothing else to do). Remarketing, perhaps finding new terminology and education, is needed.

## **Recognising and responding to diversity**

Submitters felt choice was important and that “support should not be homogenous”.

- In-home carers should be linguistically and culturally compatible.
- A “cultural facilitator” should be appointed within councils to bring different cultures together.
- Well resourced, culturally responsive activities for kaumātua are important.

## **Role of local and central government**

Submitters talked about the need for government to invest in NGOs and other organisations that provide opportunities for older people to connect. It was suggested that government use data about who is isolated and at risk of loneliness to plan and invest in intervention programmes. Another submitter supported the government establishing a “Minister for Loneliness”, as they have done in the UK.

There was a suggestion that the Age-Friendly Cities and Communities programme being central government led so that “local communities could optionally join and benefit from national and mutually-developed resources”.

Some disagreed with this being a key area of action, saying that it is an individual choice as to whether someone seeks opportunities for social connection and participation. They felt that it shouldn’t be a government-driven thing, and that people could join voluntary organisations if they want to. One submitter stated that other things are more important, and that improvements in other areas would drive improvements in this area.

## **Community spaces**

Community provided spaces such as clubs, senior hubs, libraries and arts centres were mentioned as being important to facilitate and enable participation and connection. Cost was a factor, with such spaces seen as

not well-resourced or underfunded. One submitter suggested the possibility of corporates providing spaces for older people to meet, and another suggested facilities co-located with younger groups to encourage intergenerational connections.

## **Suggested changes**

- This key area could be re-worded as follows: “Enhance opportunities for social connection and participation through employment and self-employment.”
- Under “Preventing social isolation and loneliness”:
  - For the “What we want to achieve” objective “Socially connected older people participating in their communities”, add the following to the end of the phrase: “and/or enjoying meaningful relationships”.
  - Add another bullet point to the “What we want to achieve” objectives that says “Normalised and meaningful relationships”.
  - Under “What needs to happen”, amend the “Promote volunteering” action to read “Promote community integration, volunteering, networking and paid work among older people, to support wellbeing, social connection and reciprocity”, and add another action: “Build community capacity.”
  - Add lifelong learning to this item: “Enhancing environments to enable lifelong learning, social connection and ensuring that elders participate in policy processes and decisions that affect their wellbeing.”
  - Add an additional bullet point in the “Enhancing opportunities for social connection and participation” key area “What needs to happen” section: “Educate, raise awareness and improve knowledge on the options available for older people to make informed choices for living in their later years”. This could alternatively replace the “Encourage people to decide how they might want to live in their later years – thinking about what they want to do, the activities that could help build and maintain their social connections, and transitioning between work and leaving the workforce.”
  - Another suggestion for this same action was to strengthen the statement as follows: “Educate, raise awareness and improve

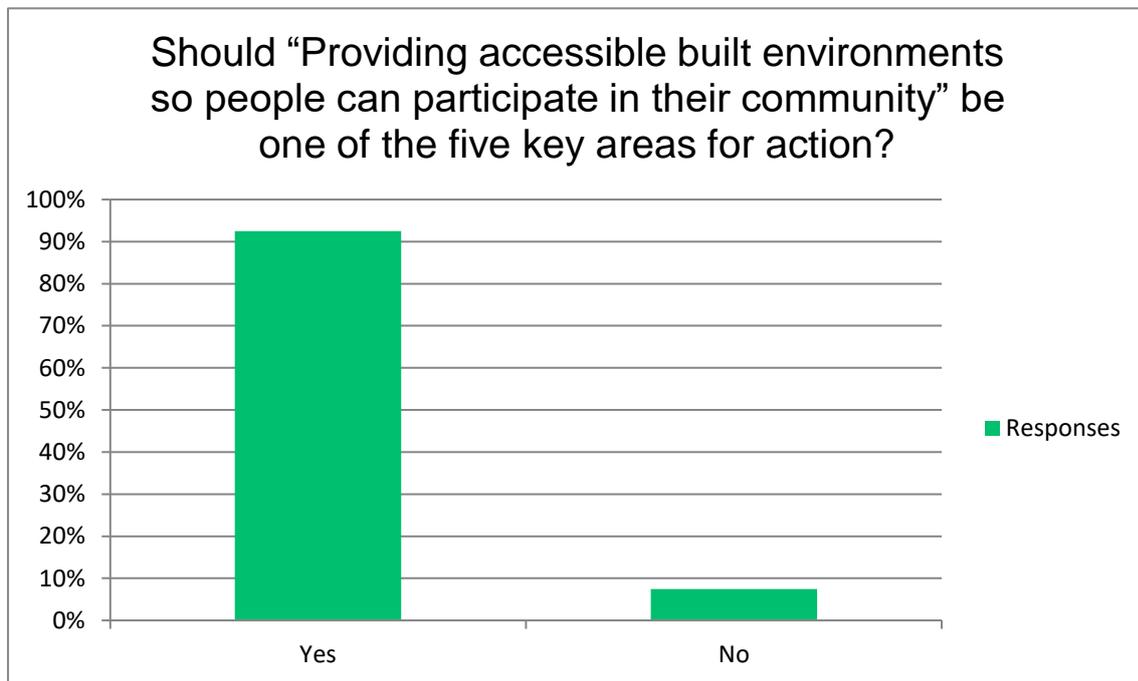
knowledge on options available for older people to make informed choices for living in their later years.”

- Include a “What needs to happen” action along the lines of “Use available data about who is most at risk of loneliness and isolation to effectively plan interventions.”
- Add an action priority that says, “Develop funding models that encourage cross-sector collaboration and innovation” or replace the “Take a joined-up approach across government and social sectors to co-ordinate assistance to socially isolated and other vulnerable older people”. Add an additional bullet point in the “Enhancing opportunities for social connection and participation” key area “What needs to happen” section: “Educate, raise awareness and improve knowledge on the options available for older people to make informed choices for living in their later years.” This could alternatively replace the “Encourage people to decide how they might want to live in their later years – thinking about what they want to do, the activities that could help build and maintain their social connections and transitioning between work and leaving the workforce.”
- Another suggestion for this same action was to strengthen the statement as follows: “Educate, raise awareness and improve knowledge on options available for older people to make informed choices for living in their later years.”
- Under “Valuing and respecting”:
  - Add another bullet point to “What needs to happen” that says: “Raise awareness of the often unseen contribution of older people.”
  - These comments could be strengthened. For example, the “What needs to happen” action “New Zealand society values older people and recognises their lifetime of contribution” could be revised to read “New Zealand society values older people and recognises and celebrates their lifetime contribution.”
- Under “Safety, including elder abuse”:
  - Add another bullet point to “What needs to happen” that says: “Work proactively with at-risk family/whānau.”

- Under “Digital inclusion”:
  - In the “What we want to achieve” section, amend “People who do not use technology can still access the services they need” to “People who do not use technology *are enabled to* access the services they need”.
  - Add another bullet point: “Increase support for organisations committed to assisting older people to use technology.”
- Under “Valuing and respecting”:
  - “What we want to achieve” – amend “Everyone has opportunities to contribute to society regardless of their age” to “Everyone, regardless of age, contributes to our society.”
  - Change “Focus on the benefits of an ageing population” to “*Promotion* of the benefits of ... population.”
- Under “Supported decision-making”:
  - Under “What needs to happen”, add a new bullet point: “Support for lead advocacy and service organisations working with vulnerable older people to enable assistance in their decision making.”

## Providing accessible built environments so people can participate in their community

---



Of those who responded to this question, 92.5% (173) agreed and 7.5% (14) disagreed. Thirty-three respondents did not answer this question. One submitter said:

*If older people are valued and at the centre of the planning process (such as happens in effective Age-Friendly Communities) it is less likely that buildings and transport systems will need to be changed to meet older people’s needs.*

### Summary

Most comments supported the inclusion of this area for action in the draft strategy.

Some commenters indicated they did not fully understand two of the concepts described in this section – the Age-friendly Cities and Communities programme, and the term “accessible built environment”.

Some comments referred to a need to direct people to where they could find out more about the Age-friendly Cities and Communities programme and the need to publicise it, particularly with older people but also with

local authorities. Two comments referred to the age-friendly checklist as an important tool in this area.

This was also the case for accessible built environments. Some commenters referred to accessibility issues for buildings and homes (eg, "I am assuming accessible built environments refers to wheelchair access to physical facilities").

These issues are important for people with dementia, as most people with dementia live at home for most of the time after diagnosis and most want to continue to live their lives by maintaining their interests, activities, hobbies and community connections.

## **Accessibility**

The Access Alliance was noted by one commenter as a "strategic stakeholder group who advocate around improving the built environment". Another noted that accessibility was about "physical accessibility from home to wherever the person wishes to go to" and "the principles of universal design allow accessibility to all age groups".

Another noted that the "What we want to achieve" goal "New Zealand communities, places and spaces and community facilities are age-friendly and accessible" needs to be defined. Another noted that it will "be more difficult to achieve within rural and remote areas but needs to apply there as well as in cities". This was reiterated by another respondent.

## **Transport**

Three respondents commented that safe, affordable public transport options are important (kneeling buses were given as an example), and one respondent said that alternatives such as taxis are expensive. One respondent suggested that "councils should consider funding smaller transport services (eg, shuttles) to operate from highly populated areas of elders to local medical centres/supermarkets", and another said that "pick up points, such as bus stops, need to be within walking distance from people's homes or places of work".

One submitter noted:

*There are many areas in New Zealand that do not have a public transport system. It will be important that options are provided for these areas so that older people can stay connected to friends and whānau as well as access the services they require.*

Active transport was an issue raised by two respondents, noting that while shared cycleways/footpaths were a good thing, the need for elders to walk safely in these multi-modal situations is not considered. One submitter noted that young planners and engineers do not necessarily understand the issues that allow accessible ageing in place, and there is a need to educate them of these issues.

One respondent suggested that as the use of mobility scooters increases, “full attention needs to be placed not only on the safety of the users but also pedestrians”.

### **Age-friendly**

Comments were made that if there were “people-friendly communities”, then this would also be “age-friendly”. Safe footpaths and more widely accessible environments “don’t just affect the elderly, it affects persons with disability and those with young children”. Another submitter stated that “there may be greater buy-in if the approach is seen to benefit all people”. Others supported the Age-friendly checklist and the Age-friendly Cities and Communities programme.

### **Role of local and central government**

Some submitters raised the importance of local government in this area – particularly in the area of planning, and the need to connect housing with services and transport options. An example given was the Positive Ageing Forum in Tauranga, where issues affecting older people are raised. The Age-friendly Cities and Communities programme was mentioned regarding this.

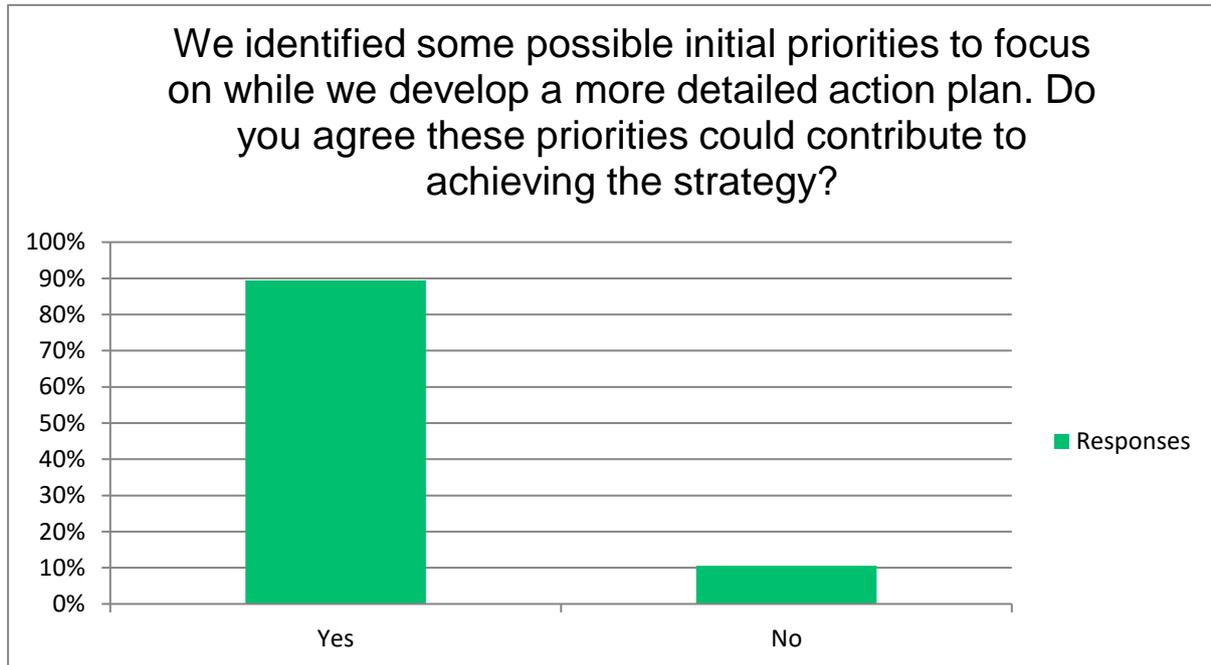
### **Suggested changes**

- Under “Providing accessible built environments”, add a bullet point to “What needs to happen” that says “Encourage innovative responses to transport problems.”

- Any action plan needs to include education for motorists for shared cycle paths to be safe.
- Designated parking spaces for “Elderly parking” should be required by law.
- Make age-friendly domains a legislative requirement for all future developments.

## Initial priorities

---



Of those who responded to this question, 89.5% (153) agreed and 10.5% (18) disagreed. Forty-nine respondents did not answer the question.

Several submitters commented that they felt the possible initial priorities were too light or too vague. One submitter noted that “many of the priorities are not specific enough for us to agree or not”.

Another submitter said:

*The priorities resonate with what we have heard but we challenge you to think ambitiously about transformative change. The scale of urgency means that more services is not going to be enough.*

One submitter suggested that they would like to see priorities to reflect the need to pay particular attention to Māori described in the “Why do we need a new strategy” section.

Another did not agree with the priority “Encourage local authorities to continue to plan for and take action to respond to an ageing population” because “encouraging local authorities to do more when many are already attempting to carry out tasks that are beyond their ability is a concern”.

One submitter thought the initial priority “Increase the supply of public housing” was too general and said that specific detail is needed. They also said that security of tenure is a matter of concern for older people (referring to the initial priority “Strengthen Housing New Zealand’s focus on tenants’ needs to ensure older people in public housing feel secure and supported”), so it seems superfluous to describe it as an initial priority here.

## **Suggested changes**

- Add “Ensure workplaces recognise the important and valuable role of mentoring by older people as a way of diversifying the workplace and overcoming barriers to older workers’ employment” to the “Preparing for economic and financial security” priorities.
- Add “Improving access to audio-visual resources by increasing the availability of captioning of digital television services” to the “Enhancing opportunities for social connection and participation” priority.
- Add to the “Improving access to health and social services” priorities: “Strengthening the care work sector and building a stable workforce into the future, including better protections, wages and enhanced training for care-workers.”
- Add a mechanism to enable older people to retain the right to make choices or decisions about their lives.
- Add “Increased promotion, education and understanding of an Enduring Power of Attorney and advanced care planning” to increase numbers of people who put these in place.
- Make the initial priorities clearer in the final strategy.
- Add an initial priority for quality walking infrastructure.
- Amend the initial priority to read as follows (suggested change in italics): “Establish a cross-government working group to identify and progress opportunities to *increase and* improve housing options for older people to live in age-and-disability-friendly homes.”

# Appendix

---

## Submissions received from organisations and community groups

The Royal Australian and New Zealand College of Psychiatrists (RANZCP)  
Alzheimers New Zealand  
Auckland City Council  
Ageing Well National Science Challenge  
BUPA Villages and Age Care  
Great Barrier Local Board  
Waiheke Local Board  
CCS Disability Action  
Centre for Research Evaluation and Social Assessment (CRESA)  
Generations (multiyear social innovation project)  
South Canterbury District Health Board, Disability Support Advisory Committee  
Waimakariri District Council  
South Auckland Chinese Senior Friendship Club  
Eldernet and Care Publications Limited  
Auckland Grey Power  
Te Rūnanga o Aotearoa, New Zealand Nurses Organisation  
Whanganui District Council Positive Ageing Forum (with representation from many Whanganui community organisations)  
Innovation Unit  
Age Concern Tauranga  
The Grey Power NZ Federation Inc.  
The Grey Power North Canterbury Association Inc  
My Care  
National Gerontology Nurses Section – New Zealand Nurses Organisation  
National Council of Women of New Zealand  
Kerikeri Retirement Village Ltd (Charitable Company)  
Age Concern New Zealand  
Revive and Thrive Coaching  
Alcohol Healthwatch Trust  
Career Development Association of New Zealand (CDANZ)  
Age Concern Auckland  
New Zealand Public Service Association

Te Pūtahitanga o Te Waipounamu – South Island Whānau Ora  
Commissioning Agency  
The New Zealand Federation of Business and Professional Women  
Clubs New Zealand Inc  
Abbeyfield New Zealand Inc  
New Zealand Aged Care Association  
New Zealand Nurses Organisation  
The Employers and Manufacturers Association  
Kawerau & Districts Ageing in Place Incorporated  
Positive Aging Advisory Group of Whangarei District Council  
Kaipatiki Community Facilities Trust (Auckland Region)  
Digital Inclusion Alliance Aotearoa  
English Language Partners New Zealand  
Living Streets Aotearoa Inc.  
Zonta Club of Mana Inc.  
Friday Club – part of the Timaru Senior Citizens  
Horowhenua District Council  
WellElder Counselling Trust  
Planalytics  
Nelson Marlborough District Health Board  
Manawatu District Council  
Northern Dance Network  
New Zealand AIDS Foundation  
Wellington Chinese Association  
Age Concern North Shore Inc  
Counties Manukau Positive Ageing Network (CMPAN)  
National Science Challenge  
Creative NZ  
Nelson Tasman Positive Ageing Forum  
The Rufus Rogers Branch of the Labour Party (Hamilton)  
Cornerstone Cohousing NZ  
Neighbourly  
Ohaki Consultancy  
Golden Bay Anglican Church  
Adult and Community Education (ACE) Aotearoa  
Kapiti Coast Older Persons' Council  
Nelson Marlborough Health – manager of older persons' mental health  
service  
Senior-Link Day Activity Centre, Dunedin  
Adult Guardianship Services Trust Board  
Home Alone

BONZA (Baby Boomers of New Zealand & Australia), formerly Grey Skills based in Christchurch  
Napier City Council  
Papamoa Beach Retirement Village