

# **New Zealand**

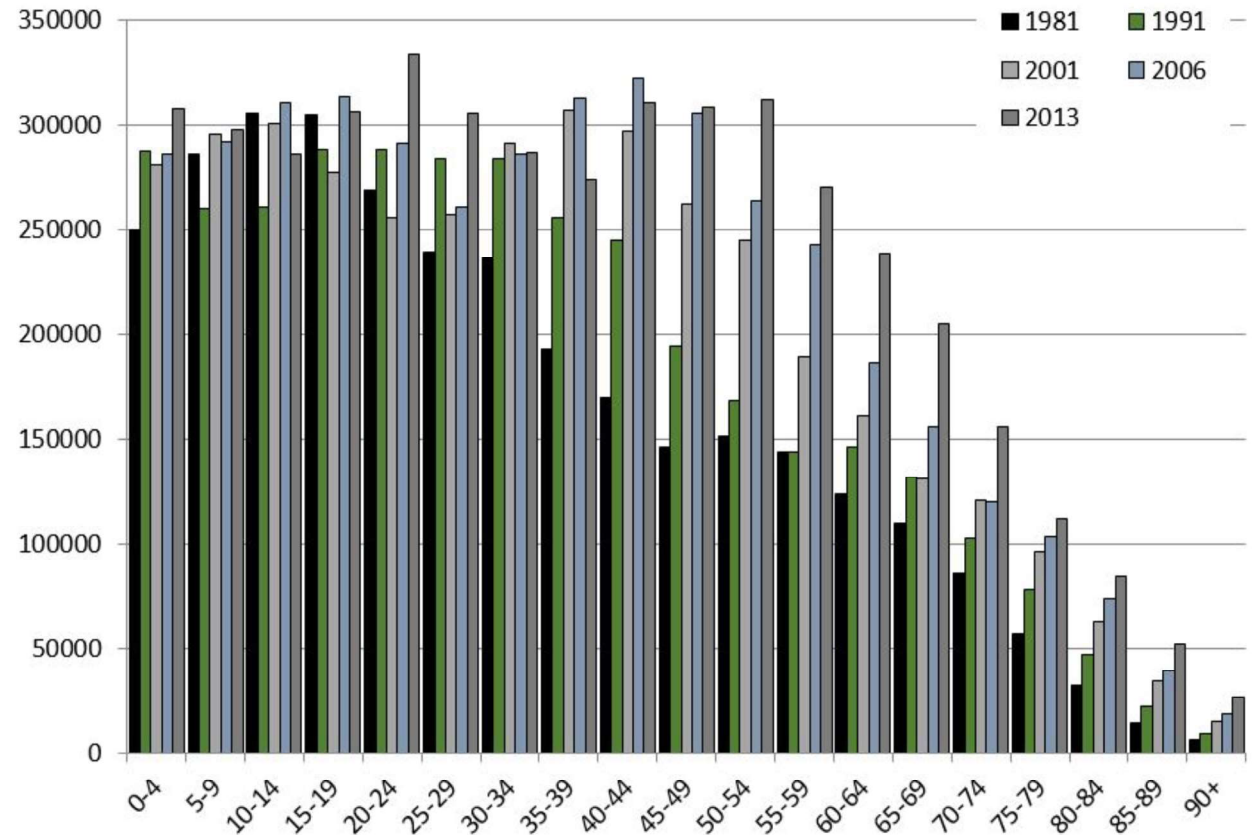
***Mixed Health Population, ethnic inequalities,  
good medical cover, strong scientific base.***

# Demographics

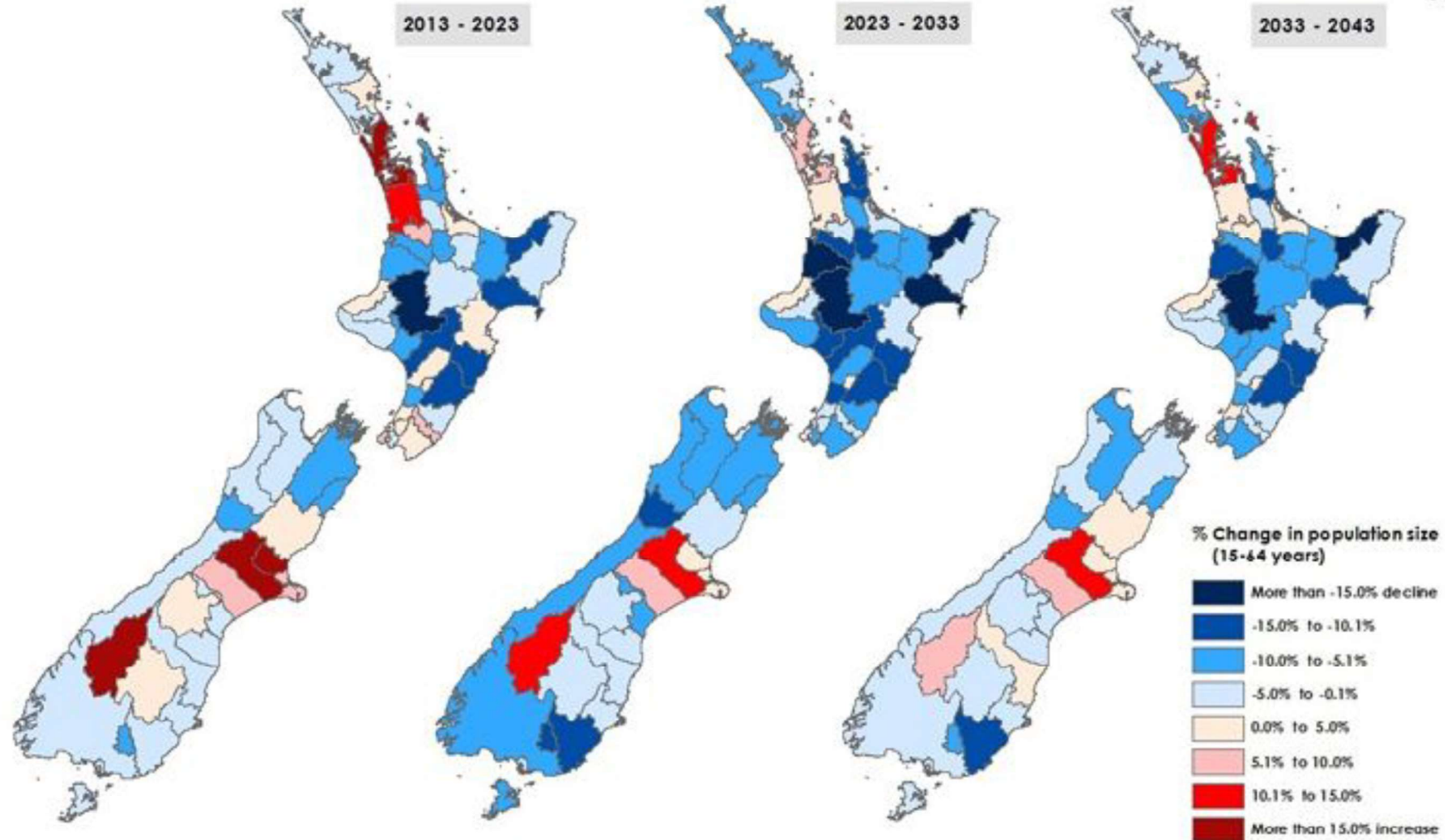
People aged 65 and older currently constitute 15% of New Zealand's population, with just over half (53.4%) being women (Statistics New Zealand, 2019).

Like most Western countries, the number of older New Zealanders has almost doubled since 1998, increasing from 0.44 to 0.74 million people. Ongoing increases in life expectancy mean that the older population in New Zealand is predicted to double to 1.30 million in the next 20 years, and the 85+ age group is expected to double in the next 40 years.

Because of increases in life expectancy and improved well-being, there is likely to be a continued emphasis on **'ageing in place'** – living in the community, with some level of independence, rather than in residential care.



**Projected percentage change in population size of 15-64 year olds; 2013-23, 2023-33 and 2033-43**



# Research Priorities



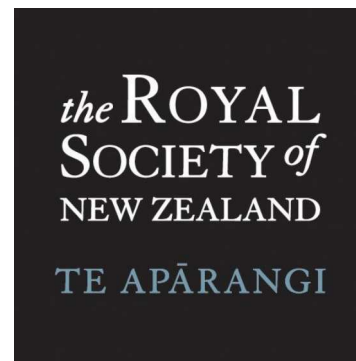
## **MINISTRY OF BUSINESS, INNOVATION & EMPLOYMENT** HĪKINA WHAKATUTUKI

The Ministry of Business, Innovation and Employment (MBIE) is the main funder of research in New Zealand (Ministry of Business, Innovation and Employment, 2019a). MBIE funds researchers directly through Endeavour, Catalyst, and Strategic Science Investments. MBIE also provides research money for distribution by other government agencies with narrow funding priorities, such as the Health Research Council, the Royal Society of New Zealand’s Marsden Fund, Crown Research Institutes, and National Science Challenges.

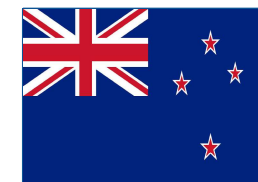
In 2014, MBIE funded the Ageing Well National Science Challenge to increase gerontology research capacity and capability, and effectively address future needs associated with predicted demographic changes in New Zealand (New Zealand Gazette Office, 2014). Ageing Well is one of the three health-focused National Science Challenges, divided across the life span into A Better Start (young people), Healthier Lives (middle age), and Ageing Well (older people). There are also another eight mission-led National Science Challenges to “tackle the biggest science-based issues and opportunities facing New Zealand,” ranging from Biological Heritage to Resilience to Nature’s Challenges. The initial tranche of Ageing Well funding (2015–2019) focused on five interlinking research strands to reduce disability, increase social engagement, independence, and autonomy, create age-friendly environments, and value older people. The second tranche (2019–2024) is funding larger programs of research focused broadly on Health and Wellbeing in Ageing, and Ageing and Māori (Ageing Well National Science Challenge, 2018).

## Research Priorities

The New Zealand Government invests approximately \$1.3 billion per annum on research funds across the science sector. In the past 5 years, the Government has directed more health research funding to address health inequities. In addition, Health Research Strategies require successful grant applicants to explain how the team will address health inequities within the research project. There is a concerted effort by research groups and centers to attract and train postgraduate scientists and clinicians in gerontology and geriatric fields. Also, national and international collaborations, which are essential in the National Science Challenge funding model described below, means that there are strong relationships between researchers, stakeholders, communities, and policy makers



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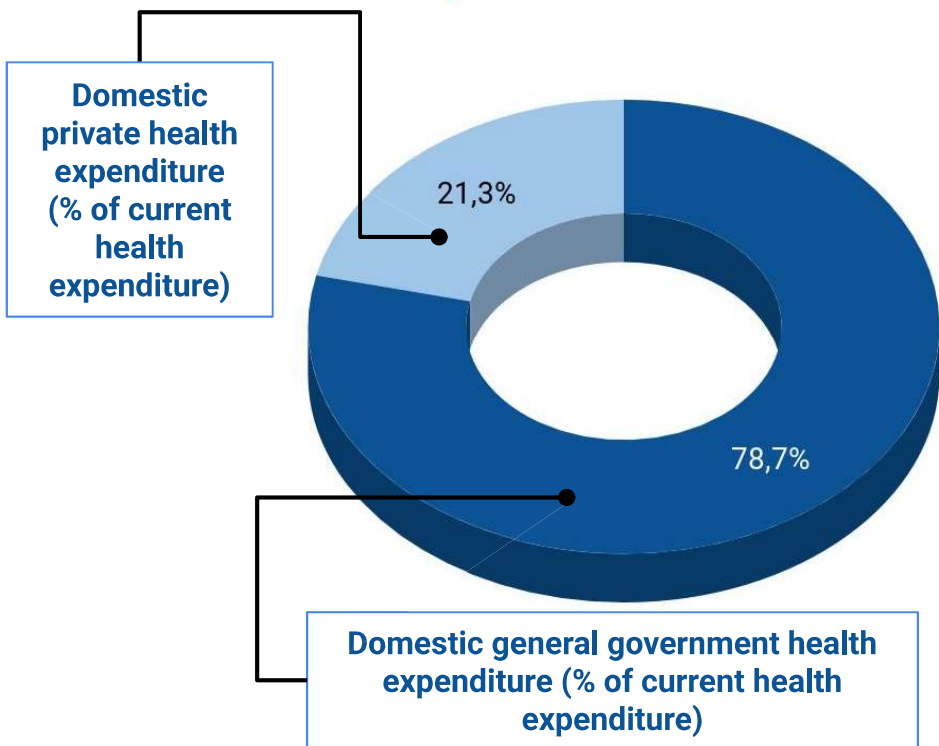
General metrics	HALE	Both Sexes HALE (2016)	72.8 years
		HALE/Life Expectancy Difference 2016	9.4
	Economy	GDP per Capita, Current Prices (2016)	40.03 thousand (\$)
		Annual GDP Growth (2016)	3.6 %
	Healthcare	Current Health Expenditure per Capita (2016)	3.75 thousand (\$)
		Public Health Care Expenditure 2016	9.22 % of GDP
	Retirement	Age Dependency Ratio 2016	53
		Population over 65, 2016	15 %
		Number of WHO Age Friendly Cities and Communities	2
	General Health Status	Alcohol Consumption per Capita (Litres of Pure Alcohol) 2016	10.7
		Annual Cigarette Consumption (Units per Capita) 2016	685
		Prevalence of Overweight among Adults 2016 (Age-Standardized Estimate)	65.6 % of adults

## Longevity-Related Indices

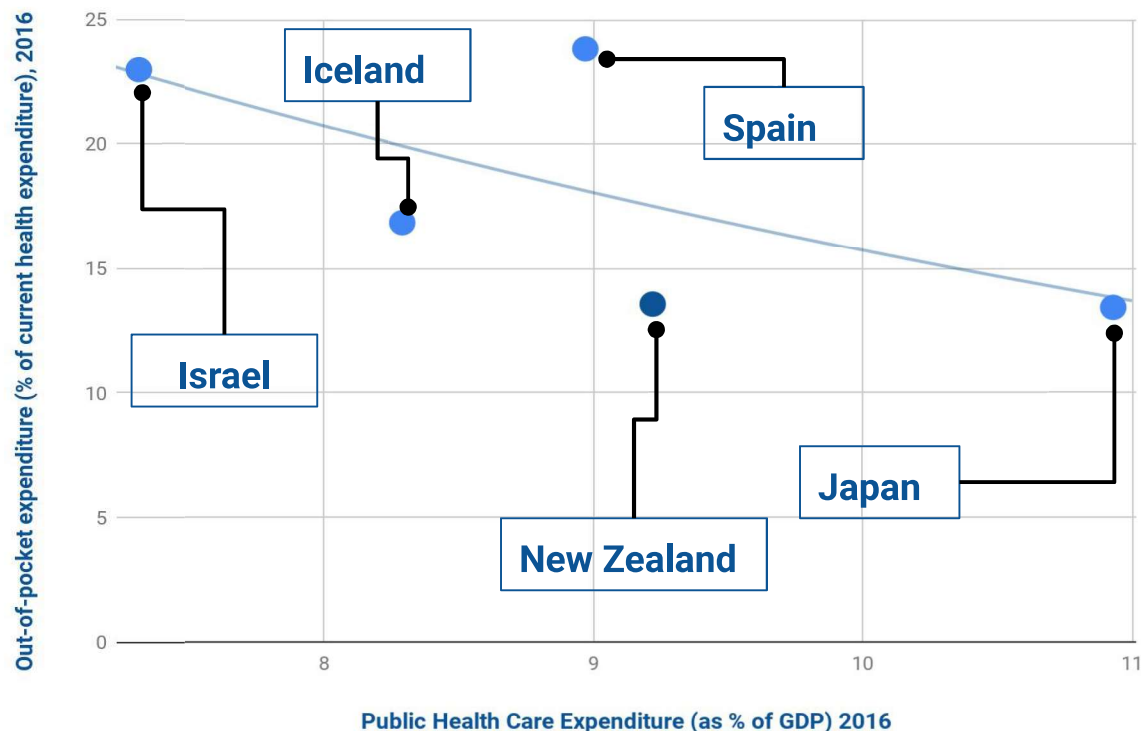


- The Healthcare Access and Quality Index -2016: **92**
- Human Development Index 2016: **0.92**
- E-Government Development Index 2016: **0.86**
- Corruption Perceptions Index 2016: **90**
- Global Gender Gap Index 2016: **0.78**
- Democracy Index 2016: **9.26**

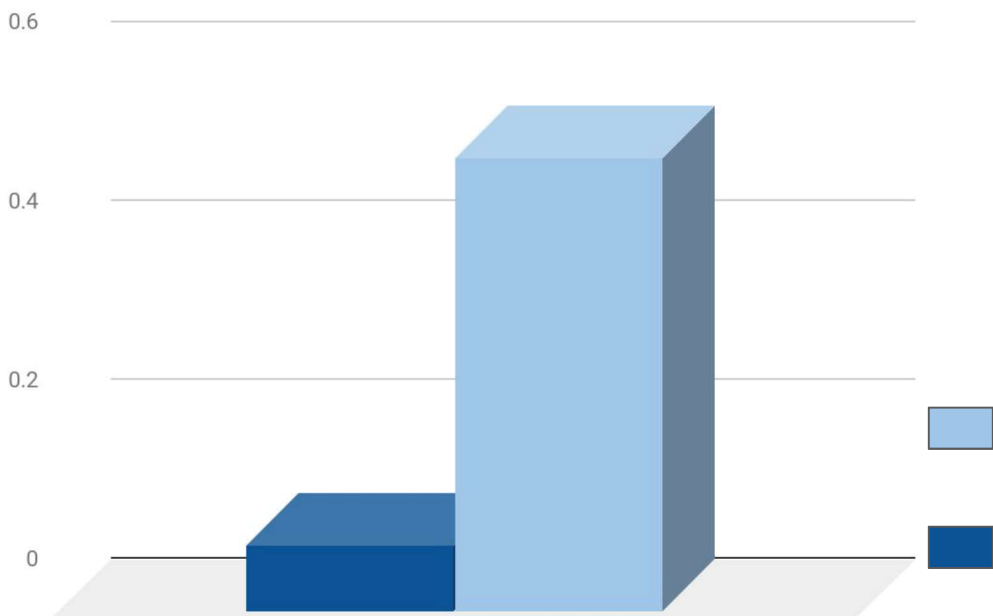
## Current Healthcare Expenditure



## Countries with High HALE and Life Expectancy and Medium Gap



## Effectiveness ratios



The government should commit to reduce smoking rates, the overall negative impact of alcohol, prevent and manage obesity, and to support and encourage healthy eating and physical activity, provide better access to primary health care.

HALE and Life Expectancy Difference CAGR (6 years)/Current health expenditures per capita (current US\$), CAGR (6 years)

HALE CAGR (6 years)/Current health expenditures per capita (current US\$), CAGR (6 years)

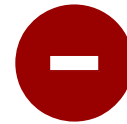


# SWOT Analysis of Healthcare in New Zealand



## STRENGTHS

- New Zealand has a generally high performing health system, which provides universal coverage and publicly funded access to a large set of core health services.
- Public care is funded through general taxation. This means residents receive free or subsidised medical care.
- Health insurance in New Zealand isn't overly expensive. Some employers offer medical cover.
- Well-developed medical infrastructure. There is a wide range of clinics and private hospitals. Private testing laboratories and radiology clinics are also available.



## WEAKNESSES

- The level of hospital admissions for COPD and asthma in New Zealand is one of the highest in the world.
- There are great disparities in the life expectancy and DALYs between New Zealand and Maori with Pacifica tribes.
- Maori health status is poorer because of notably lower socioeconomic status, reduced access to health services and professionals, and health risk factors.
- There is the third highest rate of prevalence of obesity in New Zealand that stands for 30.6% of adults that is the great risk factor for most of chronic diseases.



## OPPORTUNITIES

- Encourage a more active lifestyles through health promotion media campaigns and make physical activity an easier choice in the workplace.
- Improve the flow and quality of clinical information utilizing AI opportunities in life science and data generation.
- Enhance physical and eHealth infrastructure to widen the access to qualified healthcare treatment.
- Improve access to care for disadvantaged or underserved populations.



## THREATS

- Breast and colorectal cancers are above the OECD average though there were slight improvements in the rates.
- Prevalence of health inequalities between different socio-economic groups.
- Poor diet and lack of physical activity remain key risk factors for the future.
- Ageing of the population is a rising issue for healthcare and pension systems stability.
- Growing burden of non-communicable and chronic diseases as a result of rising concern on behavioral risk factors.



# Analysis of Strengths and Weaknesses of Health Care System in New Zealand



- The Human Development Index in New Zealand is 0.908 that is the reason for placement of the country in 'very high human development' category.
- Perinatal, neonatal, post-neonatal mortality rates are all low and have continued to decline.
- Personal healthcare access and quality index is high and is 92.4 that is the evidence for the well-functioning healthcare system in New Zealand.
- New Zealand has universal coverage health system with services provided by public, private and non-governmental sectors. 83.2% of expenditures funded through public sources in 2009–2010 while out-of-pocket expenditures 16.8% of expenditure and private health insurance contributed only 4.9% of expenditures in 2009–2010.
- Relatively young population slightly mitigate the pressure on pension system.



- The main causes of death are circulatory diseases, malignancies, ischaemic heart disease, cerebrovascular disease and chronic respiratory disease.
- There was an increase in the rates of termination of pregnancy: from 14 per 1000 in 1990 to 19.2 in 2009.
- There was an increase in incidence of a range of diseases in the Māori population compared to the non-Māori population.
- Maori smoking rates are 46% overall, compared with 31% for Pacific, 23% for European/other and 13% for Asian peoples.
- Cancer remains to be the key factor for deaths for the Maori population and the major reason for disability-adjusted years.
- There is unequal distribution of key specialists and other resources among the population and it causes lots of unmet needs in some districts with long waiting lists.

# Recommendations for New Zealand

- **Reduce socioeconomic inequalities in health at individual and population level.** Behavioural risk factors tend to be more common among people at a disadvantage because of a lesser education or lower income.
- **Strengthen primary and preventive care.** A core function of a strengthened primary care sector must be the effective management of patients with multiple, complex health care needs, including long-term conditions such as diabetes. The government should devise comprehensive approach to tackling diabetes, high blood pressure and other chronic diseases through public health programmes and public policy.
- **Utilize AI opportunities for future of Healthy Longevity.** Artificial Intelligence may help to improve productivity and efficiency of healthcare system, processes information with less time and provide generated data with the right context for decision making process. Subsequently, AI will enable organisations to complete some complex tasks at scale, at a fraction of the cost of human labour and often with superior results. AI will also supplement and amplify human capability so that people and organisations can achieve even more.
- **Engage healthy lifestyle.** There is rising concern on prevalence of overweight and obesity among adolescents and adults. One of the top priorities for government on the way to Healthy Longevity is to encourage a more active lifestyles through health promotion media campaigns and make physical activity an easier choice in the workplace; tighten regulations of food advertising to better protect children.
- **Introduce long term care insurance system.** New Zealand also faces the rising issue of “silver tsunami”. Challenges related to population ageing should be transformed into plenty of market opportunities. First of all, this demographic change will require drastic reform of healthcare and long-term care systems. Unless tackled, the rapid increase in aging population can impose a large burden on the health care system including universal health insurance system.