

# Health of Older People Strategy

Selwyn Foundation submission of Feed-back

## *Healthy Ageing*

We are pleased to see the combined approach of health and social services to contribute to healthy ageing. Indeed the biomedical disease and disability focus has been less than effective in providing wellbeing to the older population. We applaud the focus on prevention with “healthy ageing and creating resilience” and the inclusion of “a respectful end of life”.

## *The issue of Social Isolation*

The Selwyn Foundation recognised that social isolation is a significant contributor of many health related issues. Therefore our charitable focus includes the running of Selwyn Centres with opportunities for socialisation as well as opportunities for information that creates resilience among its guests

Our experience tells us that social isolation is often caused by an inability to pay for glasses, hearing aids, dentists, transport etc. Common aged related disabilities as sight impairment, hearing impairment, memory challenges, limited mobility cause the downward spiralling loneliness.

## *Technology Supported Innovative Models of Care*

Support during the transition period back home after hospitalisation and acute care is pivotal for optimal recovery or the development of ‘a new ‘normal’ with a chronic condition. This thinking of “creating a new balance” is different from the “restorative care” thinking which has a rehab focus. In the Restorative care model health professionals still “do to” the older person. In the “creating a new balance” model the older person takes charge over their health and finds out about their condition and learns through feed-back how day to day activities influence the condition, how other people manage to live well with the condition etc. The Selwyn Foundation’s Telehealthcare research project demonstrated this model.

## *Ageing and Spirituality*

Spirituality is increasingly understood to be important in healthcare provision as seen in policy, guidelines and practice across many western health systems. In addition to the mandated inclusion of spirituality in end-of-life care by the WHO there is a growing consensus which the Selwyn Foundation supports that spirituality needs to be part of healthcare particularly where chronic conditions leave (older) people significantly affected resulting in having existential distress.