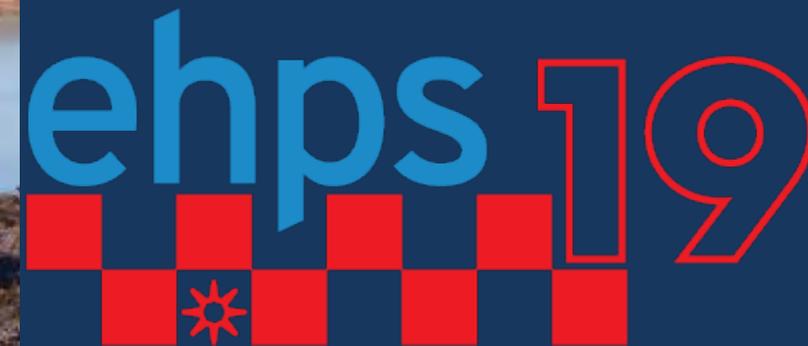




# Life course socioeconomic predictors of healthy ageing in Aotearoa/New Zealand: Differences by Māori ethnicity and gender.

Christine Stephens, Ágnes Szabó, Mary Breheny.





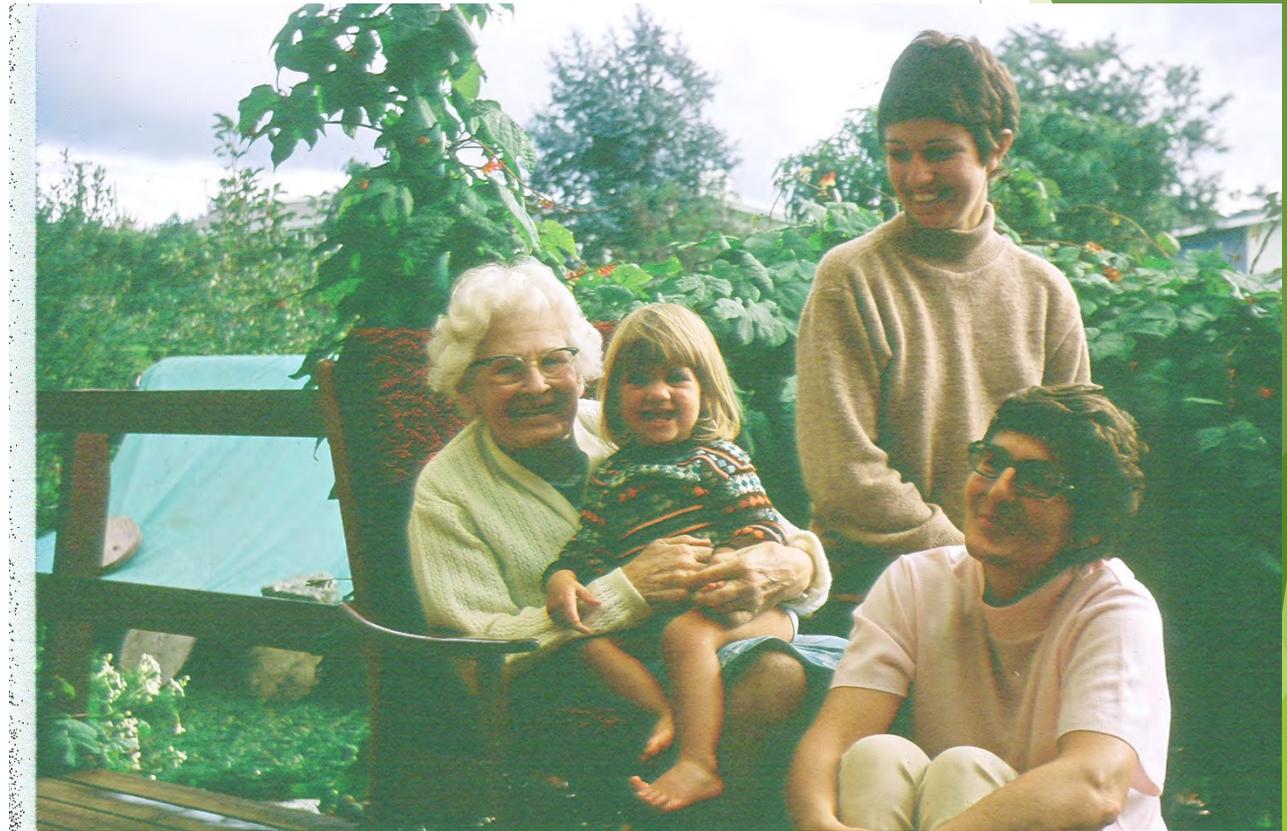
# Homogenising older people

- ▶ Ageing population as a burden on society.
- ▶ Conflicting evidence for population health projections.
- ▶ Construction of older people as one (frighteningly) large homogenous group.
- ▶ Need to shift the ways we construct older people.
  - ▶ Treating chronological age as a cut-off point
  - ▶ Using population averages across countries without accounting for economic and cultural differences
  - ▶ Disregarding the social and cultural location of illness and health care



# Diverse experiences of health

- ▶ Broad variations in illness and functional decline.
- ▶ Increasing diversity in older people's health status.
- ▶ The effects of a whole lifetime of experience on wellbeing in older age.
- ▶ Inequalities across the life course predict health and illness in older age.





# Lifecourse inequalities

- ▶ Life course approaches view old age as a phase of development that is the outcome of earlier influences.
- ▶ Disparities in health in older age are the result of long-term cumulative disadvantage which begins in childhood.
- ▶ Differences in health in older age are related to differences in social class, race, ethnicity, gender, education level, and material wealth or deprivation which produce lifelong inequalities.





# Gender and Ethnicity

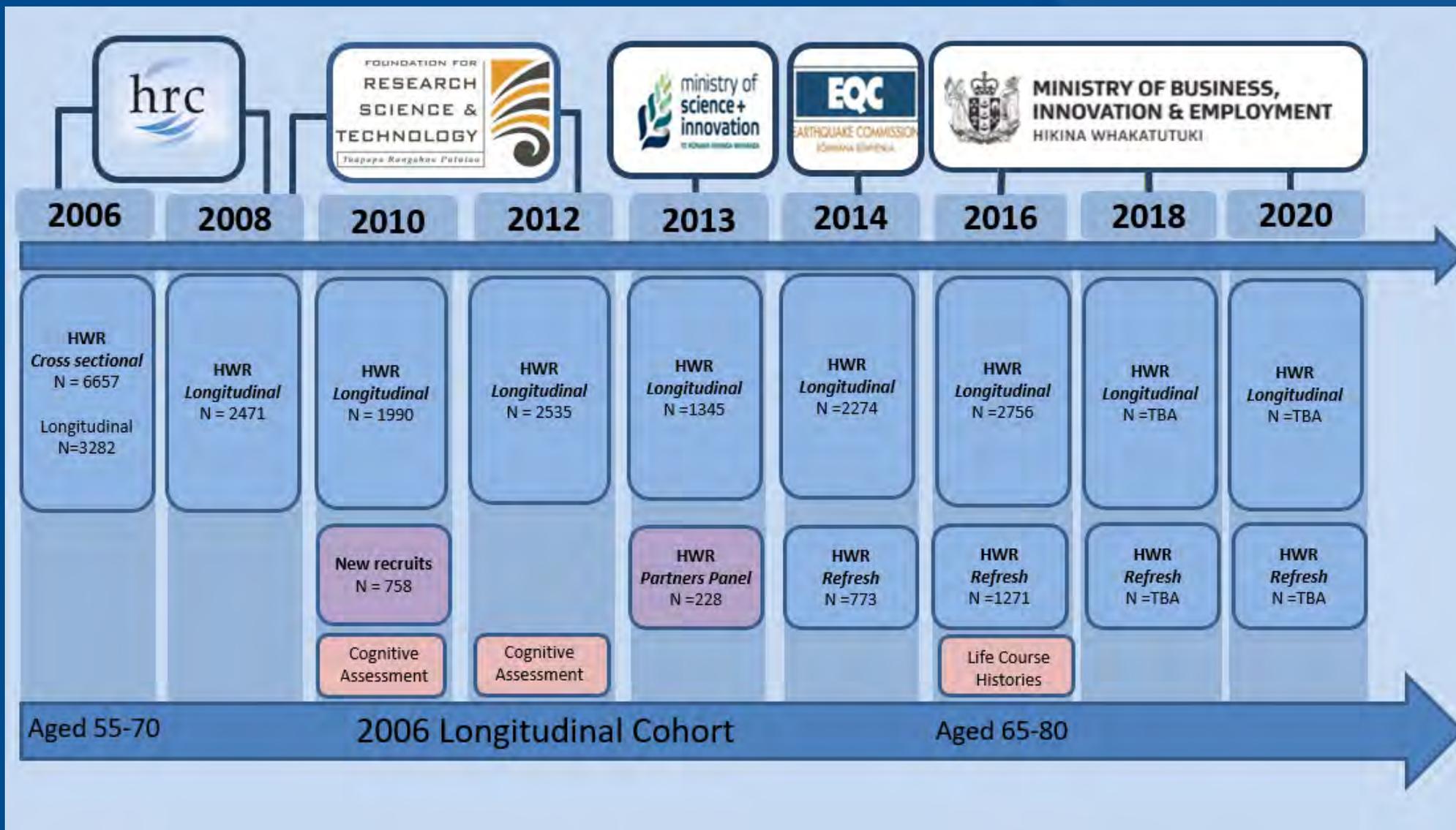
- ▶ Ageing intersects with inequalities for particular demographic groups to shape health throughout life.
- ▶ Strongest evidence for effects of being female compared to male, or belonging to minority ethnic groups.
- ▶ Intersectional scholars point to how belonging to particular sub-groups (eg female and minority ethnic group) has particular effects on health.





The mediational model with gender and ethnicity as moderators

# Health, Work and Retirement Study





# Method

## Sample:

- 729 participants
- 53% female
- 40% Maori
- Mean Age 72

## Domains:

- childhood SES
- education
- adult financial history
- late life physical, mental and social health.

## 1. Mediation analysis:

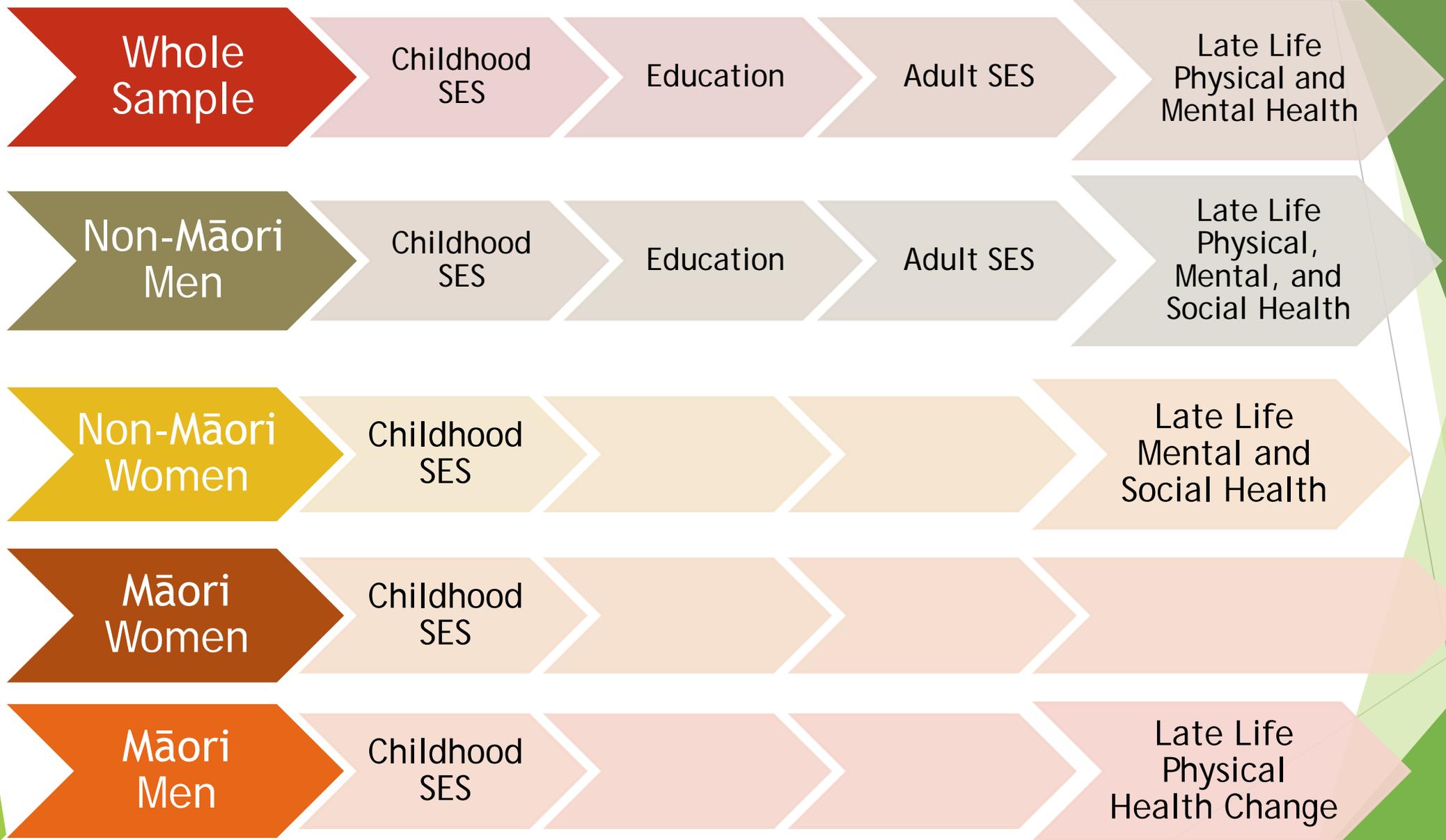
- ▶ First analysis with whole sample. influence of life course determinants on the intercepts and the slopes
  - ▶ Controlled for the influence of age on each path.

## 2. Latent Growth Curve Analysis:

- ▶ Estimated changes in Physical, Mental, and Social Health over 10 years.
  - ▶ Intercept refers to baseline score in 2006.
  - ▶ Slope indicates rate of change from 2006 to 2016.

## 3. Multigroup Analysis:

Investigate differences across groups:  
non-Māori men, Māori men, non-Māori women, and Māori women.





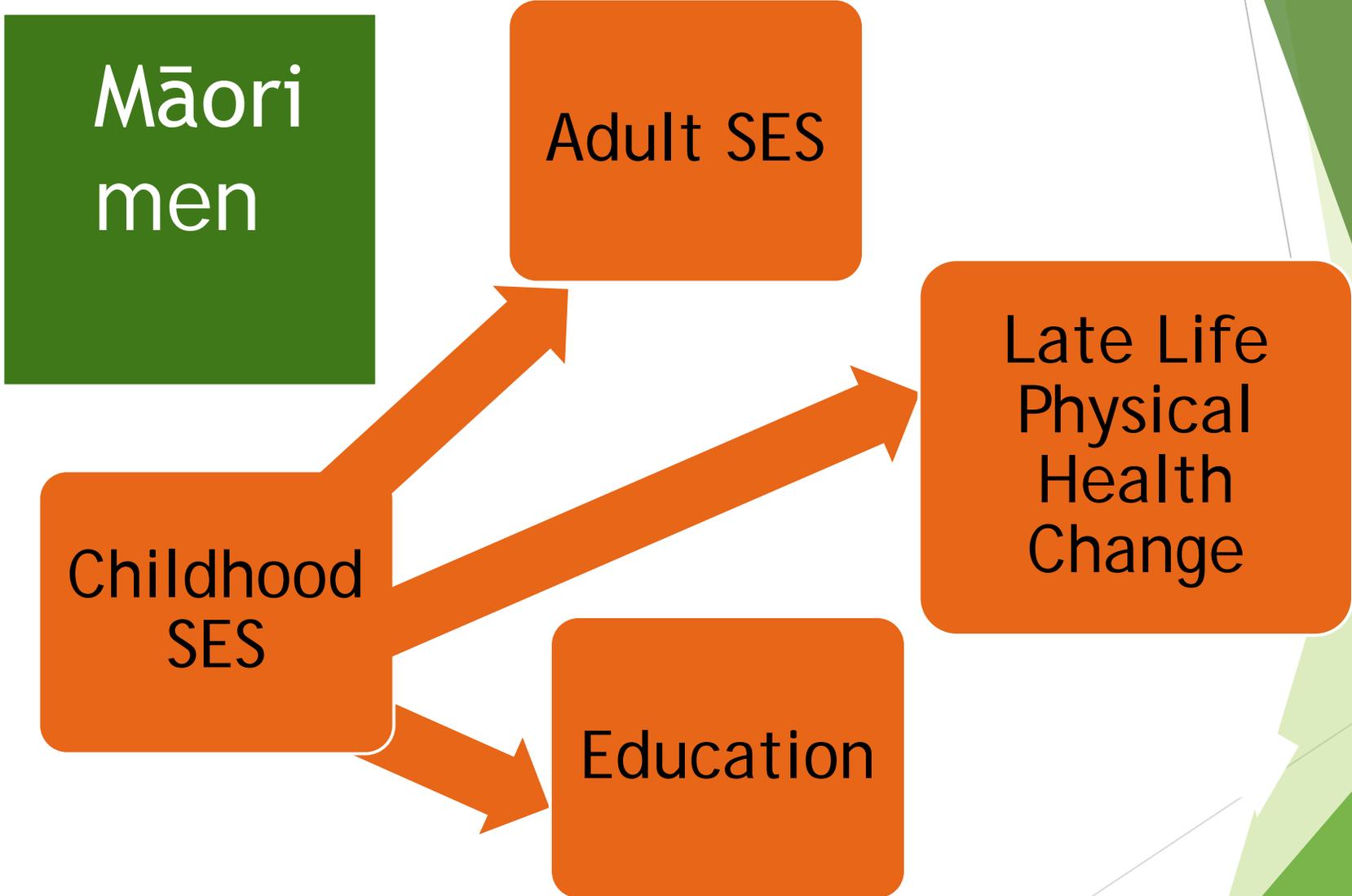
Māori  
men

Adult SES

Childhood  
SES

Late Life  
Physical  
Health  
Change

Education





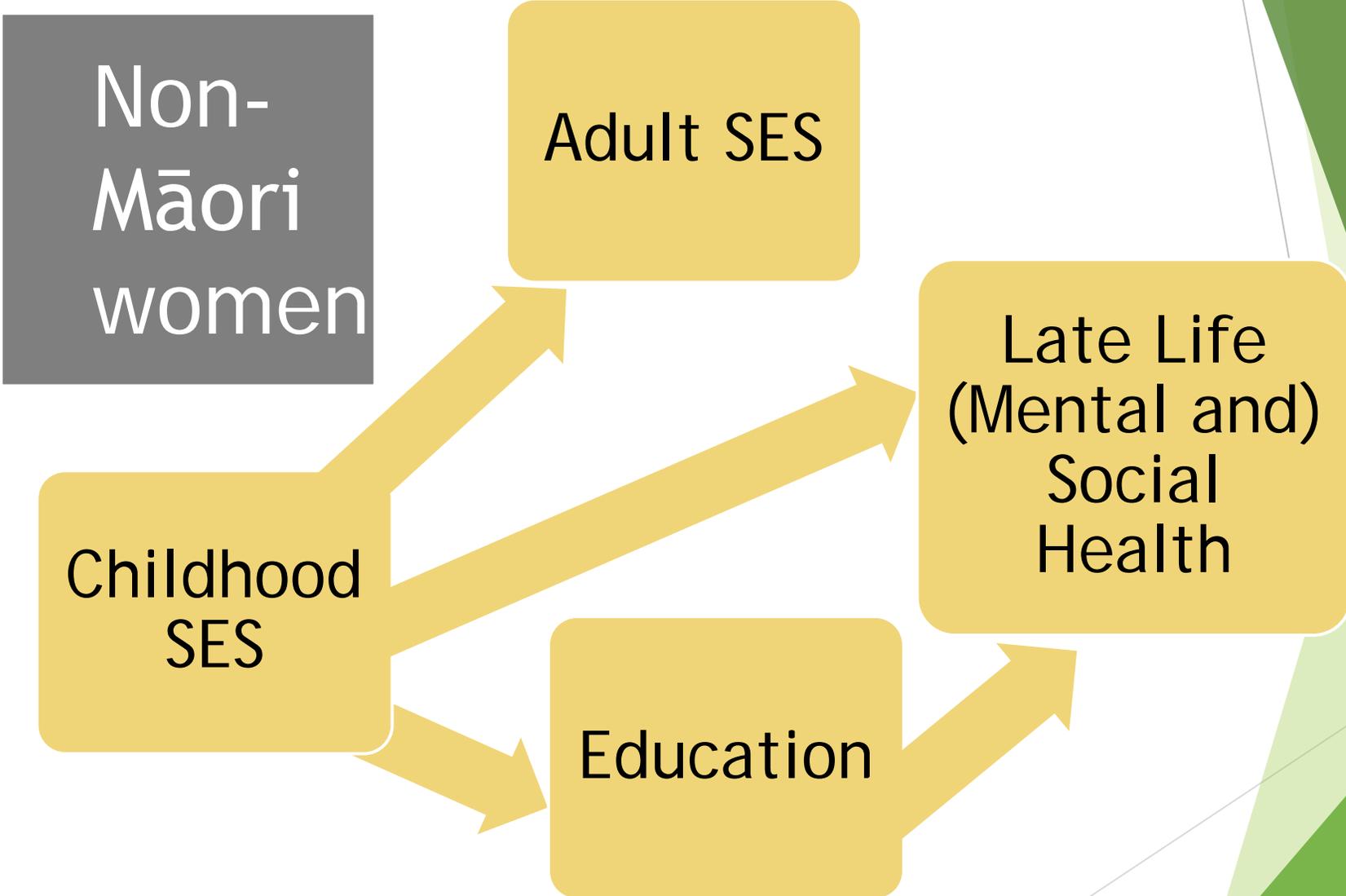
Non-  
Māori  
women

Adult SES

Childhood  
SES

Late Life  
(Mental and)  
Social  
Health

Education





Māori  
women

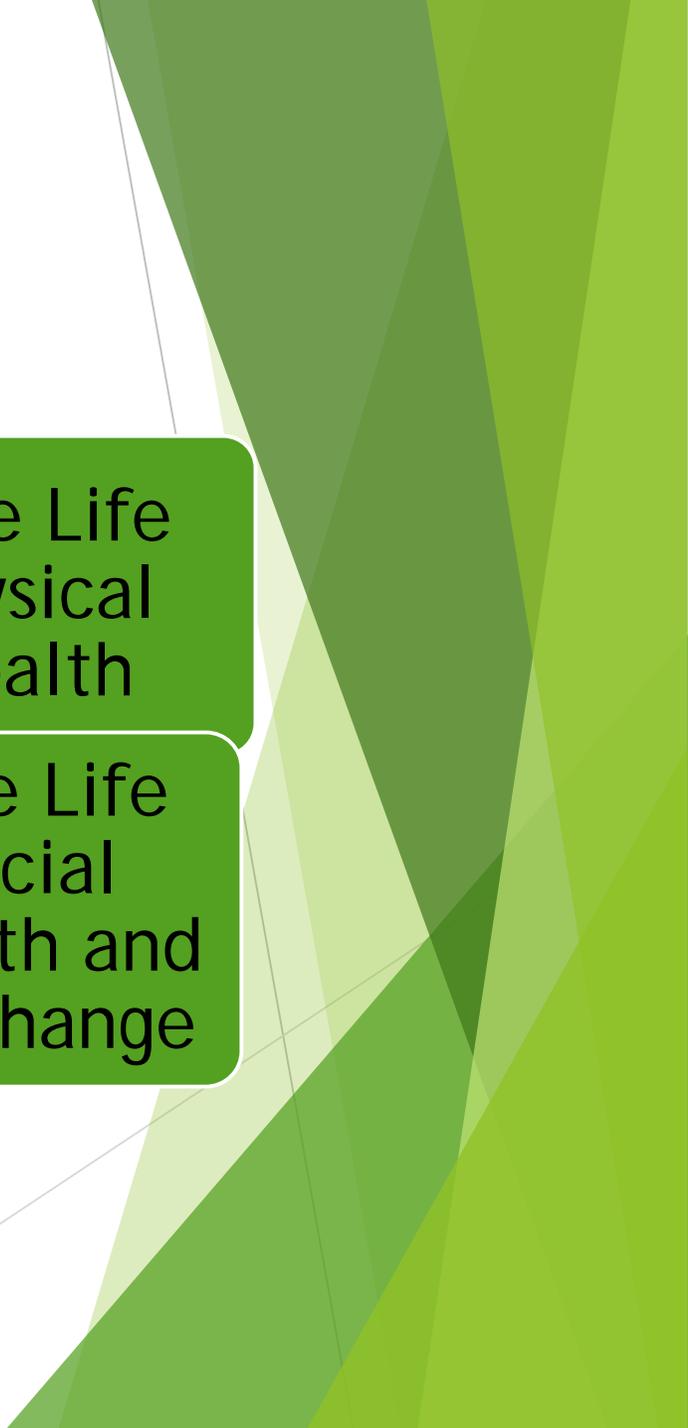
Childhood  
SES

Adult SES

Education

Late Life  
Physical  
Health

Late Life  
Social  
Health and  
SH Change



# Conclusions

- ▶ Lifelong impacts on health in older age.
- ▶ Diverse experiences of different socially structured groups produce different pathways to health.
- ▶ The impact of inequalities on the health of current cohorts of elders.
  - ▶ Avoid the reinforcement of inequalities in older age.
- ▶ Work to create a social environment that supports and maintains good health for all across the life course.

