

J Frailty Aging 2021;10(1)72
Published online September 29, 2020, <http://dx.doi.org/10.14283/jfa.2020.49>

LETTER TO THE EDITOR

HEALTHY FOR LIFE: AN INNOVATIVE AND COLLABORATIVE APPROACH TO COVID 19 LOCKDOWN IN NEW ZEALAND

Dear Editor,

Recently Boreskie and colleagues published an editorial in the Journal of Frailty and Aging on Preventing Frailty Progression During the COVID-19 Pandemic (1). In it they proposed the SAVE programme (Socialization, Adequate nutrition, Vitamin D, Exercise) to prevent frailty. They concluded that creative thinking and concerted efforts would be needed to disseminate health recommendations to maintain the health of pre-frail and frail older adults in unprecedented times, such as those posed by the COVID-19 pandemic.

At the start of April 2020, District Health Boards (DHBs), who fund and provide regional public health services within New Zealand, recognized a significant clinical risk of a loss in functional ability and independence among older people confined to their homes during the lockdown period. In response, a multidisciplinary collaborative team was established, working across academic institutions (AUT University, Massey University, University of Otago and University of Auckland), non-government organisations (Age Concern New Zealand, Sport Canterbury), DHBs and central governmental organisations (Accident Compensation Corporation, Health Quality Safety Commission and the Health Promotion Agency). This collaboration quickly developed a free-to-view national television programme targeted at older people. The show, called Healthy for Life, was broadcast on a national television channel on three consecutive Saturday mornings starting 1 May. The show was also made available through the local streaming service. The 30-minute programme comprised Super7, a strength and balance exercise programme (<https://www.livestronger.org.nz/assets/Uploads/Exercise-at-home/super-seven-exercises-physiotherapy-nz.pdf>) and advice on nutrition, sleep, home safety, brain health and maintaining social links. The show was viewed by more than 100,000 people. A follow up telephone survey with 248 frail older people showed a consistent and urgent need for more content on TV specifically aimed at supporting older people. This advice and support related to both the needs for a safe exercise programme delivered via TV and for use in the home together with strategies to support healthy sleep, brain health, safety in the home and remaining socially active.

In New Zealand we found that a large collaborative team could work very quickly in response to an urgent need and that TV was a medium embraced by our current cohort of older people, particularly with a show specifically targeted them and freely accessible. As a result of this the research team and our engaged key stakeholders are committed to developing and testing of resources that can be delivered through universal means of delivery, such as TV. We are also committed to integration of these resources into health and disability service provision to ensure that tailored support and advice can be provided.

Funding: The production of Healthy for Life was funded by: Live Stronger for Longer; Health Quality Safety Commission; HOPE Foundation; The Donny Charitable Trust; Health Promotion Agency; Bupa New Zealand; The University of Auckland; Collaboration For Ageing Research Excellence, Otago University; AUT University.

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Reference

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