

Boom and bust?

The last baby boomers
and their prospects for
later life

November 2021



Based on research commissioned from:

About us

Centre for Ageing Better

The UK's population is undergoing a massive age shift. In less than 20 years, one in four people will be over 65.

The fact that many of us are living longer is a great achievement. But unless radical action is taken by government, business and others in society, millions of us risk missing out on enjoying those extra years.

At the Centre for Ageing Better we want everyone to enjoy later life. We create change in policy and practice informed by evidence and work with partners across England to improve employment, housing, health and communities.

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Contents

Key messages	04
Introduction	07
Who makes up this age group?	09
Financial security	11
Work	15
Providing care	20
Healthy ageing	22
Social lives and connections	26
The cumulative impact of adversity across multiple areas of life	30
What impact is this having today?	32
Appendix 1: Summary of the quantitative analysis	36
Appendix 2: Summary of the qualitative research	40
References	41

Key messages

The experience of ageing in England is changing. Prospects for people in their 50s and 60s today – those at the tail-end of the post-war baby boom – as they reach old age have worsened considerably since the turn of the millennium.

This report is based on analysed national data from almost 14,000 50-70¹-year-olds at two timepoints – 16 years apart – and in 97 interviews. The data shows that, across many key aspects of life, such as health, work, housing, finances, family make-up and social lives, people in their 50s and 60s today are facing worse circumstances than people who were at the same age in 2002.

Even before the pandemic, the number of people in relative poverty had been rising for this age group – from 2.3 million in 2010/11 to 3.1 million in 2019/20. This represents a real increase beyond population growth and demographic change. Looking at the rates of relative poverty for different age groups over this time period, those in their 50s and 60s have experienced a larger increase than younger cohorts.

The research suggests that around 1 in 5 people in this cohort – some 2.6 million people – are likely to experience an old age marred by multiple, chronic problems such as poor health, poor finances and poor social connections. People from Black, Asian and Minority Ethnic (BAME) groups – who have doubled as a proportion of the population

in the last 20 years – are at particular risk of this being their future, the data shows.

Older generations are becoming not only greater in number, but also increasingly diverse in terms of health, wealth and life circumstances

The generation currently approaching later life is experiencing big societal shifts such as longer working lives and the growth of the gig economy, a crisis of housing supply and quality, and increasing demand to provide care for family and loved ones. These challenges will affect all of us, whatever our age. But, as our research shows, people currently approaching later life face particular risks associated with these societal shifts that demand urgent attention. And yet little policy focus has been dedicated to this group and anticipating and alleviating these challenges.

This report sheds much-needed light on this ‘forgotten generation’: who they are, the nature and severity of the challenges facing them, and how their lives and prospects differ at this life stage from people of the same age 16 years ago. The findings must be a spur to action for policymakers: without action, many in this group will suffer poverty, ill-health and loneliness in old age. Without greater leadership from government on ageing and the impact of population ageing, the experience of old age is likely to be even worse for future generations.

1 While we have used 50-70 as a shorthand, most of the data refers to people aged 50-69.

Our research finds:

- **Financial inequality in later life is increasing dramatically.** The richest people in their 50s and 60s today are twice as wealthy as the richest in this age group were 16 years before; the poorest are almost a third poorer. One in five in this age group say they will be unable to meet future financial needs in old age. A rise in private renting means fewer people will be able to rely on housing assets to fund old age.
- **People from BAME backgrounds face shocking levels of inequality.** People from BAME groups are under-represented in the richest wealth group (12% compared with 21% for people from White backgrounds) and over-represented in the poorest (29% compared with 19%). In addition, 17% of people from BAME groups in their 50s and 60s are unable to meet their current financial needs, compared to 5% of people from White backgrounds.² And 40% of people from BAME backgrounds report low levels of satisfaction with their lives, compared to 26% of people from White ethnic backgrounds.
- **The gender employment gap among people approaching retirement means that women face greater financial precarity in later life.** The number of women in their 60s in paid work is still almost half the rate of men, and women in their 50s and 60s are more likely to work part time than men. By any measure of wealth, women are approximately ten percent worse off than men.
- **The quality of work has worsened for people in their 50s and 60s.** More than half of people in their 50s and 60s say their work is excessively demanding, almost doubling since 2002. One in three people feel a lack of control over their work compared to 9% in 2002.
- **Poor health will limit many people's ability to work up to state pension age.** Two thirds of people in their 50s and 60s are now reporting a long-term health condition and a third say their health impacts their ability to work. Our sample showed this was particularly the case for people from certain BAME groups, such as Asian women.
- **Large numbers in this age group are juggling working lives with caring for loved ones.** 1 in 4 people in their 50s and 60s are carers, and 42% of people in this age group who are working also have caring responsibilities. Women and people from BAME backgrounds are particularly likely to be carers.
- **Social and community connections have weakened.** People in their 50s and 60s today have a greater likelihood of being without children, divorced, separated and living alone than in 2002. 40% of men say they have poor relationships with close relatives and nearly 30% poor relationships with their children. One in ten men say they have no friends.

² The figures in this and the following sentence are from the Understanding Society survey. The data used means that these findings are not generalisable to the whole population. They do, however, give an indication of common experiences and therefore, the scale of ethnic inequalities. This is the best available data for reporting on variation across people from BAME subgroups.

Based on this evidence, four key things need to change:

1 A cross-departmental strategy addressing ageing and demographic change is needed. **The government's Plan for Growth and Levelling Up proposals must address the age shift underway and the dramatic and growing inequality in the way we experience later life.**

3 **National data collections need to be supported to expand and become sufficiently robust so the experiences of different groups can be more clearly understood, and ethnicity data reporting must be mandatory in all official and statutory statistics and data monitoring.** The near invisibility of older people from BAME groups in the data currently means we cannot fully demonstrate the systemic discrimination they face, nor ensure that policies and practices are designed to support people experiencing the greatest inequalities.

2 The government's manifesto commitment to deliver five extra years of healthy life expectancy is badly off track. **Investing in preventative public health measures to reduce risk behaviours in mid-life must be a top priority for the Office for Health Improvement and Disparities if the government is to keep its promise.**

4 Increasing the participation of older workers in the labour market is essential to address the widening wealth inequalities of those in later life. Without a more targeted approach, any further extension to the State Pension Age will leave many more living later life in poverty. **The government must legislate for enhanced flexible working rights, carers leave and a single enforcement body without delay. Government should also promote the mid-life MOT model, which gives people a focused opportunity to plan and prepare for their futures. Employers must take steps to be age friendly,** including tackling ageism in the workplace and supporting older employees to manage health conditions and caring responsibilities.

This report is based on research conducted by IPPR and University College London, commissioned by the Centre for Ageing Better. The research teams carried out in-depth, mixed-methods research, the results of which are outlined in [two separate reports](#). These also provide more detailed descriptions of the methodologies used. Please note that the recommendations for change reflect the views of the Centre for Ageing Better and not necessarily the research teams.

Introduction

Three in ten adults in England are aged between 50 and 70 – more than 13.6 million people (Office for National Statistics, 2020). Increasing lifespans mean that many of us in our 50s and 60s today can expect to live well into old age. Yet, for those of us who become septuagenarians, octogenarians and beyond, our experiences of later life will vary hugely (Centre for Ageing Better 2018a).

The quality of those experiences will reflect circumstances that are shaped before retirement. Our experiences as we approach later life set our trajectory for those later years. Understanding the experiences and circumstances of people in their 50s and 60s is critical to identifying how to best support the estimated 10 million people who will be aged 70 to 89 by 2038 (ONS, 2018a).

Despite their increasing size and significance in societal terms, people in their 50s and 60s have been the focus of less research, discussion, and policy attention than other age groups. Yet, we know that is a transitional period where important changes and life events take place – such as children becoming more independent and leaving home, older relatives needing care and support, and work patterns shifting and changing. These years are also often a time of consolidation, when planning and preparation become important, whether in relation to saving for retirement, lifestyle adjustments to better maintain health,

or considering when to leave work or move home. Yet, personal circumstances mean that some are better placed than others to plan and prepare for later life.

To better understand what life is like for people in their 50s and 60s today, Ageing Better commissioned the Institute of Policy and Practice Research (IPPR) and University College London (UCL) to carry out a mixed-methods research project (see Appendix 1 for the methodology for the quantitative and qualitative research). To capture the fullest picture possible of people's lives as they approach later life, the research team used data from two different studies, the English Longitudinal Study of Ageing (ELSA) and Understanding Society – collectively capturing the experiences of almost 14,000 people in their 50s and 60s. Interviews with 91 people between 50 and 69, and six over 70 were also undertaken.³

This report summarises the findings from this work, and for the first time, sets out the key societal shifts experienced by the current generation of people in their 50s and 60s. It also provides an analysis of the cumulative impact of adversity across various areas of life. In doing so it identifies how many people in this age group are experiencing multiple layers of disadvantage right now and are a risk of missing out a good later life in the future.

The findings reveal the scale at which life has changed for people approaching later life since the start of the millennium. Yet policy and practice has not kept pace

³ Note that all figures in this report are ELSA data unless otherwise stated.

Introduction

with this change. We must ensure that the way our society is structured and the expectations we have of people – what they can afford, how they will spend their time and who they can care for – reflect people’s reality. For example, if more people are working into their late 60s, what does this mean for their ability to care for older parents or their physical and mental health? Responding holistically to people’s needs across the interconnected aspects of their life will also be critical if we are to reduce inequalities.

The evidence presented in this report will be of key importance for national and local policy makers and practitioners who are aiming to improve experiences and outcomes for people as they approach later life and in later life. This report also sets out a series of recommendations for government.

While we have used the best available data to develop the most comprehensive picture of the experiences of people aged between 50 to 69, we are still unable to develop a complete picture for the whole population of this age group, especially for different BAME sub-groups, based on the limitations of the data (see Appendix 1 for further information).

Where signposted in the text, we have used findings from the Understanding Society survey to understand these variations by ethnicity. The data used means that these findings are not generalisable to the whole population. They do, however, give an indication of common experiences and therefore, the scale of ethnic inequalities.

Who makes up this age group?

People in their 50s and 60s are an increasingly varied group, growing in number, who commonly have to tackle a set of challenging situations over these twenty years. Here we set out in broad terms who these people are – demonstrating a diversity that counters the frequent depiction of this age group as homogenous – and how the group is changing over time.⁴



10% of people in their 50s were from BAME groups compared to 6% of people in their 60s in 2018

While most people identify as White (92%), ethnic diversity in this age group has grown, with the proportion of people from BAME groups doubling in the last 15 years, and will continue to increase. As demonstrated later in the report, this is important because people from BAME groups are more likely to be at risk of a poor later life.

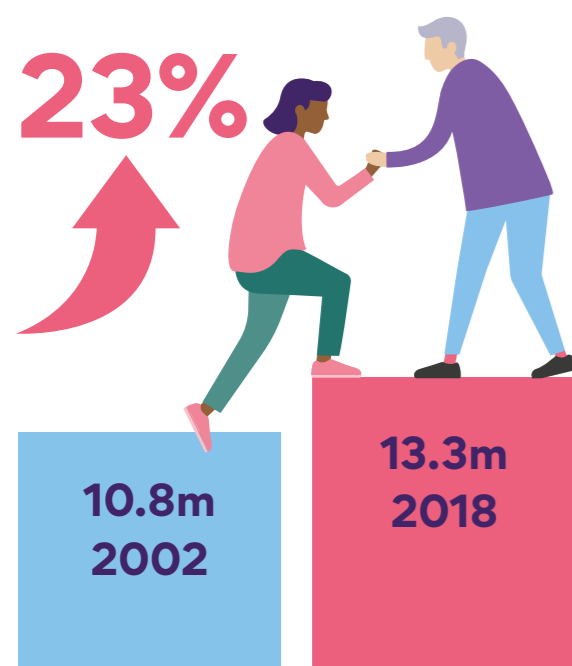
Living arrangements



22% of women aged 60-69 live alone compared to 16% in the 50-69 age group

18% of men aged 60-69 live alone compared to 19% in the 50-69 age group

Living arrangements have changed accordingly, with fewer people now living with a partner (77% in 2002 to 71% in 2018). Some 2.5 million people – nearly one in five people aged 50-69 – live alone, which is most common in women aged 60-69.



The increase in the number of people aged 50-69

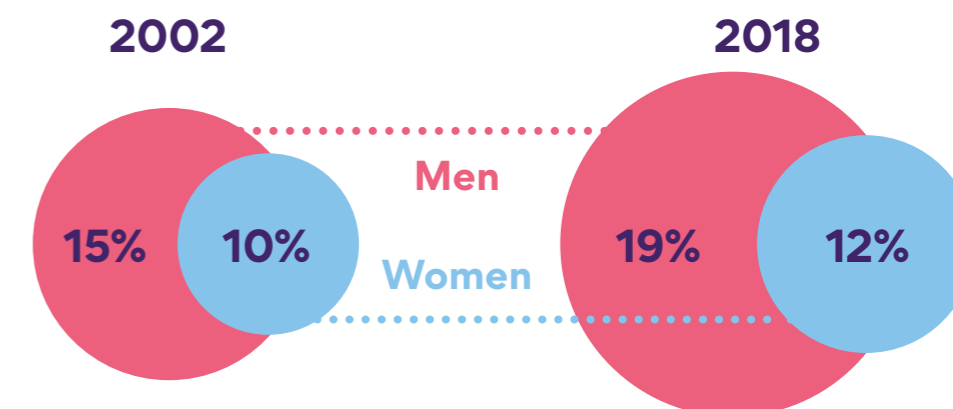
Marital status



1 in 10 people in their 50s and 60s have never married

People in their 50s and 60s are now living in a wider set of circumstances. In 2002 only 6% of people had never married. In today's generation of 50 and 60 year olds, that has increased to 1 in 10 people in this age group, and more are divorced or separated.

People with or without children

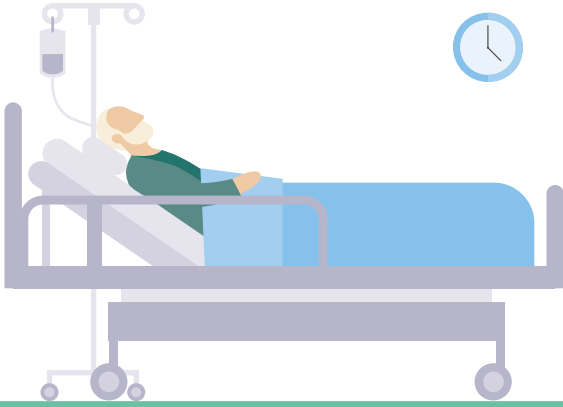


While it has always been the case that most people in their 50s and 60s have children, the proportion of men and women ageing without children is increasing.

⁴ Figures in this report are from ELSA data unless otherwise stated.

Who makes up this age group?

Over the course of the twenty years, people in this age group are likely to undergo a number of significant and potentially life-changing events.



38%

having a hospital admission



26%

becoming a carer (more common among women 31% than men 21%)



18%

retiring



17%

acquiring a limiting, longstanding illness

Many will face more than one of these events. 17% of people experienced three or all of the following: becoming a carer, acquiring a new health condition, moving home or hospital admission.

Against this backdrop of increased diversity in terms of ethnicity, living arrangements and relationships over the last 15 years, there have been significant changes – both positive and negative – in the experiences that people

across this age cohort face: in their financial circumstances, their experiences of work and caring, and their health and social connections. These have shifted across the cohort – but so too has the variety of experiences that people in their 50s and 60s face in these areas. Further, the demographic and social changes which have driven this diversity are likely to become even more prevalent in the future. These are the issues which the rest of this report examines.

Financial security

The gap between rich and poor has grown dramatically

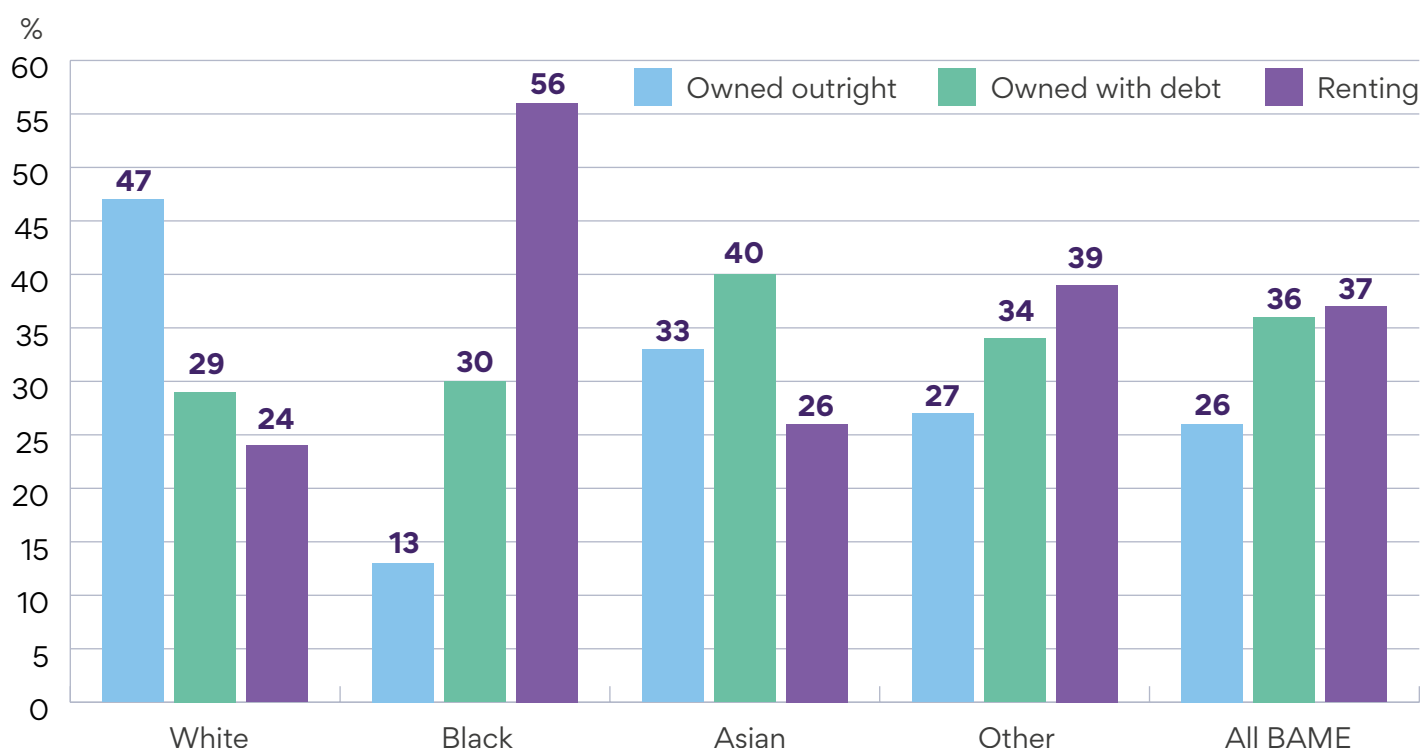
Our research highlights the stark and widening inequalities between the poorest and richest that have been experienced by people in their 50s and 60s over a 16 year period. Comparing data from 2002 and 2018, the net wealth (all non-pension wealth) of the richest 20% in this age group more than doubled from £690,650 to £1,353,392. Meanwhile for the poorest 20%, their wealth fell in value over the same period

by a third to £6,582.⁵ It would take the combined wealth of 200 of the poorest people to equal the wealth of just one of the wealthiest.

Housing wealth is a safety net for fewer people; more people in their 50s and 60s are now renting

Our research highlights a declining trend in home ownership. One in five (20%) people in their 50s and 60s today are renting their home,

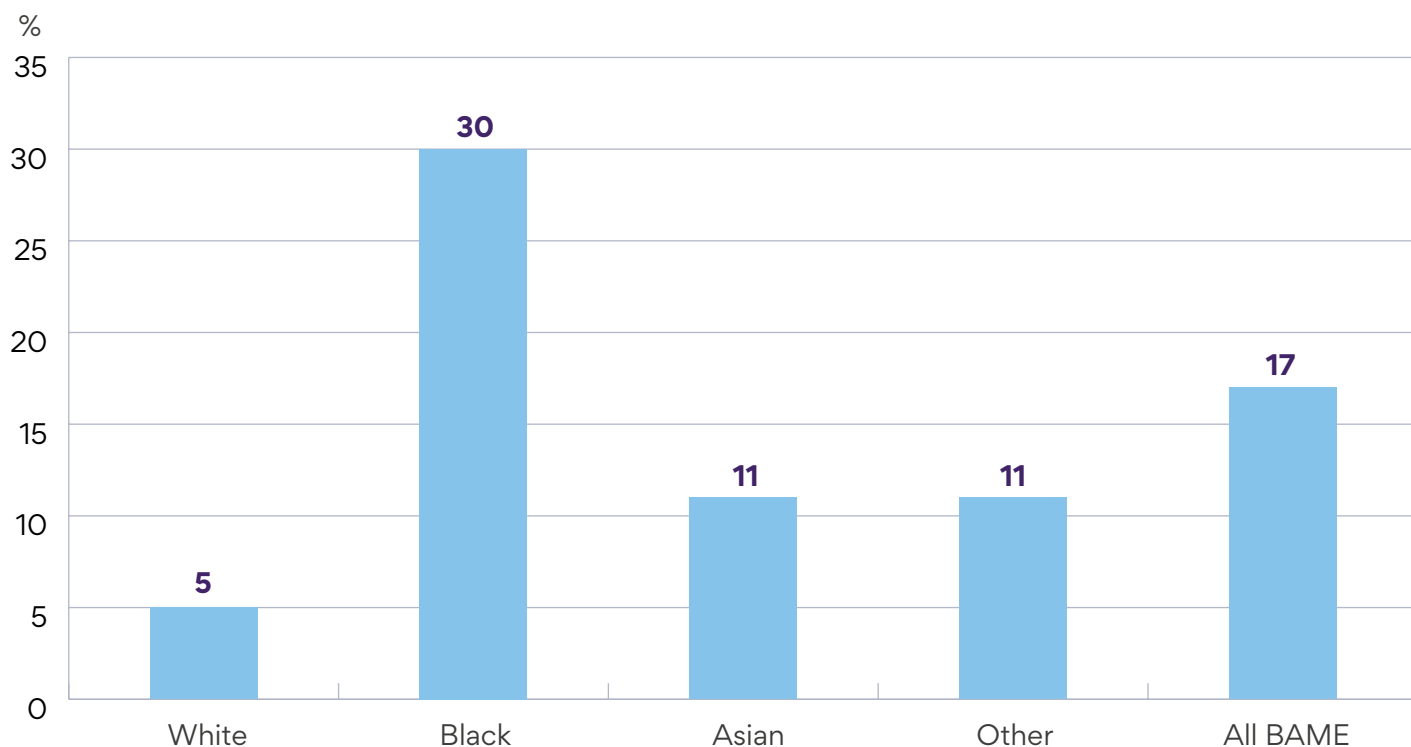
Figure 1: Percentage of people aged 50-69 who own their own home outright or with debt, or rent their home, by ethnicity



Source: Understanding Society, 2018. The 'other' category refers to other minority ethnic groups

⁵ The mean net wealth of the bottom 20% in 2002 was £5,954. The research team estimated that after accounting for inflation, the poorest group should have had approximately £9500 average wealth in 2018.

Figure 2: The percentage of people aged 50-70 who are behind with bills and housing costs



Source: Understanding Society, 2018. The ‘other’ category refers to other minority ethnic groups.

rising from just under two million people in 2002 to 2.5 million people in 2018. Unfortunately, these income disparities also translate into startling differences between those who will be able to enjoy retirement without spending money on rent or a mortgage and those who will need to use their pensions to continue paying for a roof over their head. It is also unlikely that many people in this position will have assets that they can use to improve their financial security now or to fund their retirement, to pay for the cost of care, or to pass down to their children in the future.

Renting is also more common for those from BAME backgrounds, with people from Black ethnic backgrounds in our sample are more than twice as likely as people from white backgrounds to be in this position (see Figure 1 on page 12). There is a similar disparity in homeownership: in their 50s and 60s, nearly half of White people (47%) in the sample we

looked at owned their home outright compared to a third of Asian and just 13% of people from Black backgrounds.⁶

People from BAME backgrounds in this age group are much less financially secure

In addition to the huge financial disparities between the wealthiest and the poorest, our research makes visible the scale of inequalities in financial security between people of different ethnic backgrounds in their 50s and 60s today. People from BAME groups were under-represented in the richest wealth group (12% compared with 21% for people from White backgrounds) and over-represented in the poorest (29% compared with 19%).

Levels of financial security vary between

⁶ Data source: Understanding Society, 2018.

ethnic groups, with the data demonstrating that people from Black ethnic groups could be the least financially secure of all. In our sample, the average weekly income for people from White and Asian background was very similar about £500, but much lower for Black people who earned £397 a week.⁷ The impact was that one third of people from Black backgrounds reported being behind on bills, rent and mortgage costs, compared to nearly one in five (17%) for all BAME backgrounds, and just one in 20 (5%) for people from White backgrounds (see Figure 2).⁸

Future financial security: in people's own words

One in five worry about the affordability of old age

Our recent work with Pensions Policy Institute has shown that 3 million people (25%) approaching retirement today are unlikely to receive a minimum income standard in retirement (Hurman et al, 2021).⁹ In this research, we found that nearly one in five people (18%) thought that they would be unable to meet future financial needs, with people in their 50s more likely to report this than people in their 60s.

While the richest have income from earnings and property, relatively few people in their 50s and 60s today are likely to receive significant income from Defined Benefit (DB) pensions when they retire, as was more common with the 2002 cohort. DB pensions provide a secure, yearly income based on a proportion

of previous earnings for the rest of someone's life. People living for longer meant that DB pensions were a significant outlay for employers and so they have become much less common in the last 20 years, especially in the private sector.

Most of the people we spoke to felt they would have to top-up the state pension with savings from (the now more common) Defined Contribution schemes. Even then, some felt they would not have enough to live on in retirement.



“I have a pension – occupational and state... I couldn't live on that money. If I hadn't inherited property... I would have had to go back to work full-time.”

They also felt that they would be worse off financially in retirement than their parents' generation had been. While some wanted to retire earlier or have more financial constraints than they expected, others recognise the changing nature of retirement, e.g. 'Back then people retired and then died'.

While some people actively saved for retirement, the reality of their circumstances or a reluctance to think about the distant future has prevented others from doing so

The people we spoke to who anticipated an adequate income in retirement largely fell in to two camps: those who had planned for retirement from a young age (and been able

⁷ Data source: Understanding Society, 2018.

⁸ This includes more than 1 in 10 (11%) of people from Asian backgrounds, and nearly a third (33%) of people from Black ethnic groups (data source: Understanding Society, 2018).

⁹ Based on Joseph Roundtree Foundation definition of minimum income standard.

to save consistently), primarily men, and those who had a 'reckoning' in their 40s or 50s prompting them to save more.



"I didn't plan for retirement. But when I was a kid, my father insisted that I took out a policy. They used to have insurance salesmen, not financial advisors, and he had this guy who came around to the house, and when I started working he insisted that I took out a pension, and that was that... when I started work, it was like the worst thing in the world because it was money out and I could have gone out and spent it on wine women and song, but then I realised it wasn't so bad."



"I had a health scare when I was around 50, and that was a huge wake up call. So I thought we needed to do more financial planning."

However, not everybody had given much thought to saving for retirement. For some, this was because they didn't want to think about retirement, for others it was because they felt they couldn't afford to do so.



"I didn't do any active planning for later life – that's terrible – no savings... You do think about it deep down but then you don't think about it."



"I do think about the future, but there is only so much I can do with the resources I have and there is no point dwelling on it."

Low incomes, high living costs and the need to support family members were all factors that people felt prevented them from saving. Other factors identified by interviewees as making saving even more difficult included redundancy, illness or relationship breakdown. Most people in this position felt they should have saved but could not see how they could have given their circumstances. Some thought that their children were likely to have an even more difficult time than they had financially. For that reason, many people with children were concerned with ensuring that they had enough money to help their children with living expenses, or to put money towards a house deposit.

Work

More people are working in their 50s and 60s than ever before, yet the proportion of women working in this age group continues to lag considerably behind men.

Before the pandemic hit, we had seen a gradual rise in employment amongst people in their 50s and 60s, with 57% working in 2018, compared to 55% in 2002. The increase has primarily been driven by gradual rises in the state pension age over two decades to bring women's retirement age in line with that of men. As such, the proportion of women in their 60s in paid work has risen from 26% in 2002 to 35% in 2018. It remains, however, almost half the rate of men, 60% of whom were in paid employment in both 2002 and 2018. Women in their 50s and 60s are also more likely to be working part time compared to men in the same age group. Employment patterns also vary by ethnicity with Asian women the least likely to be in paid work (less than half, 46%). Women from White and Asian ethnic groups more commonly reported working part-time (45% and 41%, respectively) than Black women (28%).

While part-time work is a positive choice for many, for others it is likely to be the result of them being unable to find a full-time job with enough flexibility for them to manage competing priorities, such as caring for both older parents and younger children.

The gender pay gap remains

There is little evidence from this research that more women working in their 50s and 60s has reduced the income gap between them and men of the same age. In both 2002 and 2018, women were more likely than men to be in the lowest income quintile with a downward trend being observed across the two timepoints – nearly one quarter (23%) of women in their 50s and 60s were in the lowest quintile in 2018 compared with 18% in 2002. Women were also least likely to be in the highest income quintile across both timepoints. In terms of net income, women in their 50s and 60s today are approximately ten percent worse off than men. This research reinforces the cumulative impact of the working patterns for women over the life course, which is often shaped by looking after family. While the gender pay gap is relatively small for women in their 20s, it hits its peak by the time they are in their 50s (ONS, 2018b). The divergent working patterns of men and women as they approach retirement are likely to further compound the gender pay gap. **Work is central to meaning, purpose and identity for many, yet there is strong evidence that experiences of work for people in their 50s and 60s have worsened over 16 years.**

Our research highlights the social, as well as financial benefits that work can provide. Many people interviewed felt that work played a central part in their identity and purpose. And where there was good quality work, where people had control over their work, they enjoyed it.

“I love my job, you lose yourself when you have kids, I spent 20 years bringing them up, having to think about what I need to do. It is a really refreshing life stage, it feels like a new beginning.”



“I love my job, when I’m working, I find it satisfying and rewarding, it is just mine [and] I go there and control... everything.”



Yet overall, and despite employment rates for people in their 50s and 60s increasing, the quality of work for this age group has deteriorated considerably since 2002. Broadly speaking, what makes a job good quality is the same for a worker at any age. People want to feel that they have control over their work, that they get as much out of work as they put in (the effort reward balance), and that they are doing something worthwhile (Centre for Ageing Better, 2017). This study shows that many people in their 50s and 60s today do not feel this way.

Perhaps the biggest indicator of declining job quality is the sharp increase in the proportion of people in this age group who feel unsatisfied in their work, which has grown from 22% in 2002 to 35% amongst 50- and 60-year-olds today. Work dissatisfaction is slightly more common amongst men and women in their 50s compared to people in their 60s but does not seem to vary by gender.

Another key indicator of quality of work relates to the demands of the job (Taylor Review, 2017). Our research found that there has been a commensurate rise in the proportion of people in this age group who think that their work is excessively demanding, from 28% in

2002 to more than half (52%) of today’s cohort. Further today one in three people (33%) feel a lack of control over their work – compared to 9% of people in 2002 – and one in three people reported an effort reward imbalance.¹⁰

“... everything kept changing, you couldn’t talk to people... No consultation with workers, new managers brought in even if they couldn’t do the job, new demands which made the job unenjoyable.”



People from Black, Asian and Minority Ethnic (BAME) backgrounds have worse experiences of work

In our conversations with people from BAME backgrounds, a number had experiences of discrimination at work, and instances when they had observed racist behaviour or cultures in the workplace. Most said these experiences had been earlier on in their careers and felt things had improved recently. However, for many, the experiences of discrimination had been associated with slower career progression and more difficult routes to promotion than for their White colleagues. This is likely to be associated with the large wealth differential we can see between people from White backgrounds and people from other BAME backgrounds discussed previously. It is therefore not surprising that, in addition to experiencing racism and discrimination, coupled with the likelihood of lower wages, people from BAME backgrounds are less likely to report high job satisfaction compared to people from White backgrounds (52% compared to 60%).

¹⁰ Questions about effort and reward imbalance were not included in ELSA wave 1 (2002), therefore it is not possible to assess whether and how feelings of effort and reward imbalance have shifted over time.

Ageism in the workplace and job insecurity contribute to poor experiences of work

Our conversations with people in their 50s and 60s identified further insights into the factors, beyond those discussed above, driving poor experiences of work. Many participants we spoke to – especially women – had experienced ageism in recruitment and in the workplace. Both male and female interviewees acknowledged that older women faced multiple barriers in recruitment and in the workplace. Many believed that if they were made redundant it would be harder to find work because of their age, with some noting that ageism is a gendered issue: ‘It is harder for older (job) interviewees, and for older women in particular’. Women were considerably more likely to describe experiences of ageism. These included feeling patronised, invisible, and excluded. Some felt that appearing older than their colleagues meant they were in danger of being viewed as ‘past it’, not ambitious, or not worth listening to. Several spoke of their efforts to make sure that they did not dress or present themselves in ways that might be read as ‘dowdy’ or ‘mumsy’, or alternatively as inappropriately youthful. Several mentioned comments and ‘little asides’ that teetered on the border between insensitive ‘banter’ and actual discrimination.



“I know they aren’t going to employ someone over 60 in a young office – they think you won’t fit in, you won’t be part of the office culture. It’s just the way it is. Legally they aren’t allowed to discriminate on the grounds of age, so they say you’re unsuitable because... you aren’t a good fit.”



“At 58, there is not much chance of being promoted into a higher wage bracket, there may be fewer opportunities to progress.”



“Sometimes I think that I’m written off because of my age... I’ve been in meetings where I’m not listened to, or I’ve been passed over for a promotion.”

Our previous research also found that, in many ways, age is the ‘forgotten’ protected characteristic, with more than a third (36%) of 50- to 69-year-olds feeling at a disadvantage applying for jobs due to their age (Centre for Ageing Better, 2018b).

Additionally, polling carried out in 2015 found that less than half of people aged 45-64 felt that they had job security, compared to 65% of all workers (Natcen, 2015). It is likely that the COVID-19 pandemic has exacerbated these insecurities for many older workers. The people we spoke with in this study also spoke about working in the gig economy – comprising jobs with temporary contracts and work that is often subject to last-minute scheduling. Some gig economy workers had chosen this kind of work to fit around other commitments, or as a stepping stone to full retirement, while others had to work this way due to the nature of their industry.



“I was working for hospitality and cleaning in shops, everyone is in zero-hour contracts.”

As with younger workers, the financial precarity of working in the gig economy was a big issue for interviewees, as well as general employment conditions with the findings

suggesting that for some, expectations of experiencing good quality work had been lowered.

“... companies want you to do more and pay you less...”



“... zero hours contracts, it's just rubbish how they treat the workforce... they can do whatever they want with you.”



While the flexibility of zero-hours contracts may appeal to some people in certain situations, the financial implications can be lifelong. Challenges such as accessing sick pay and saving for a pension are particularly important for people who are approaching retirement age. Some interviewees were also keenly aware of the impact of COVID-19 on their income, regardless of whether they had actively chosen to work in the gig economy.

“It's a period of a lot of uncertainty. The people they want to keep on full-time are their regular employees.”



For many workers in their 50s and 60s, these uncertainties remain. There had been continual growth in the proportion of over 50s in employment for the last decade, but the pandemic has stalled this progress. Between December 2020 and February 2021, employment rates of 50-64 year-olds fell from 72.6 to 71.1%, and from 11.5 to 10.4% in people over 65 despite an increase in the population aged 50 years and over in this period (Office for National Statistics, 2021).

Attitudes to retirement

More people are anticipating working for longer; with a shift towards more fluid rather than fixed retirement patterns

Just under a third of people in their 50s and 60s class themselves as fully retired. Yet rates vary markedly by ethnicity; people from White ethnic groups are twice as likely to have retired than people from BAME groups (30% compared to 15% of people, respectively).

However, for those who have yet to retire, people's expectations of when they will stop working have shifted considerably. Nearly a third of today's 50- and 60-year-olds believed there was a more than 75% chance they would be working when they are 60 or 65 (based on their age now) compared to 23% in 2002. Indeed, many of the people we interviewed in their 50s felt that retirement was a long way away for them – and were ambivalent about the idea of a 'full' retirement.

Ambitious career plans, job fulfilment and/or social aspects of work combined with the financial need were drivers to continue working for some interviewees.

“My next career move... [should include] opportunities to be at the cutting edge of change and innovation.”



For others, the insecurity of their financial situation was the sole factor shaping their decision to continue working after the age of 65 – more than 1 in 3 are retiring with unpaid debts (including mortgage debt), owing an average of £17,500 (Hurman et al, 2021).

“When my kids were very little, I didn’t work and it was just so isolating and boring, I couldn’t wait to not do that anymore. It [retirement] will be like that only feeling more achy and tired.”



“I enjoy my job on the whole – there are a lot worse jobs to be doing... I’d hold my hand up that I’d love to be retired now.... I’m looking forward to retirement. I’ll be 66 when I retire. But even then I might carry on working one day a week... If I do this it will be mainly for the financial reasons ... It’s nice to be at work because you’ve got people there, and friends, and you meet people outside your home.”



Many people we spoke with felt that all their work plans depended on them staying healthy. This was particularly the case for people working in physically demanding jobs.

“I have done it all my life, so I am used to it, I do less physical stuff today than I did ... how I have managed not to break or strain anything is a miracle.”



Overall, interviewees shared the view that people in their 50s today were much worse off financially than they were a generation ago and were therefore more likely to need to work for longer:

“People at 50 today are going to have to work a lot longer – there aren’t going to be early retirement schemes – people have to have a longer perspective now when it comes to work than I had – a lot of benefits like the free bus pass have been taken away from people at younger ages.”



For those in their 60s, retirement was a more concrete prospect, but many people still had career plans. Some interviewees felt that COVID-19 might push them out of work before they were ready to leave, whereas for others, it had prompted them to retire sooner.

“It’s part of who I am, part of my identity... without COVID-19 I would have wanted to go on and on.”



“I’ve rethought this [retirement] since the lockdown... I’ve known quite a few people who passed away from COVID-19 and that has shown me that life is too short.”



Others had retired but had subsequently returned to work or tried to return for a variety of reasons, both financial and social.

“I had no qualms about retiring. You look forward to retiring... you’re counting the days off... but when it comes it’s a big void.”



“I’d like the financial uplift – but that’s not the main thing but it’s important – I also want a job because of the opportunities to get out, develop, fulfil my purpose and I really love meeting people.”



Providing care

People in their 50s and 60s are the most likely to be providing unpaid care to family or friends than any other age group (Office for National Statistics, 2019). Our data analysis shows that approximately 1 in 4 people in this age group today are providing care for a frail or ill relative and 65% are looking after grandchildren. Women continue to be more likely than men to be carers (52% compared to 40%).

Many carers were combining paid employment with their caring responsibilities, with nearly half of all those in paid work also reporting being a carer (42%). Those working carers involved in the interviews relied upon their employers and colleagues to provide accommodations and acknowledge that their needs might change and that some problems might come on suddenly. Some people we spoke with had not been able to work flexibly, or have adjustments made, and had effectively been forced to leave a job. More women had reduced or left work to provide care than men.

Providing care was seen as positive and rewarding, yet many acknowledged that it could be tiring, isolating and lonely and brings with it an emotional toll

Many people spoke positively about wanting to 'give back' to their parents or saw providing care as part of their relationship with their partner. Caring was easier, both practically and emotionally, for interviewees who had the time, resources and flexibility to provide care without an overwhelming impact on their own lives.

However, most carers we spoke with acknowledged the challenges. Many frequently talked about providing care as being both isolating and lonely. Particularly if providing care intensively, people found the time and mental space needed to maintain social connections hard to come by. Some felt the nature of the health condition of the person they were caring for carried stigma.



“Caring for my parents was very hard, I was happy to do it, but it was just tough. You never seem to stop. The moment you thought you would finish, something else would come up... it's hard with children... you half-do everything.

And friends move on – the three D words – they get divorced, they die, or they see that you've got dementia in the house and they think it's catching, so they don't come around.”



25% of people in their 50s and 60s are carers, over half are providing care for grandchildren and many are juggling care with work

People caring for someone living with dementia were often particularly anxious about whether they were 'doing the right thing' when their loved one was in such a vulnerable position. This did not necessarily stop after the person being cared for passed away.



“...I also have regrets over whether I made the right decisions concerning mum in her last few years and maybe I could have handled things differently. I have been told that everyone has these kinds of thoughts following bereavement but that doesn't make it any easier.”

Healthy ageing

Risk behaviours

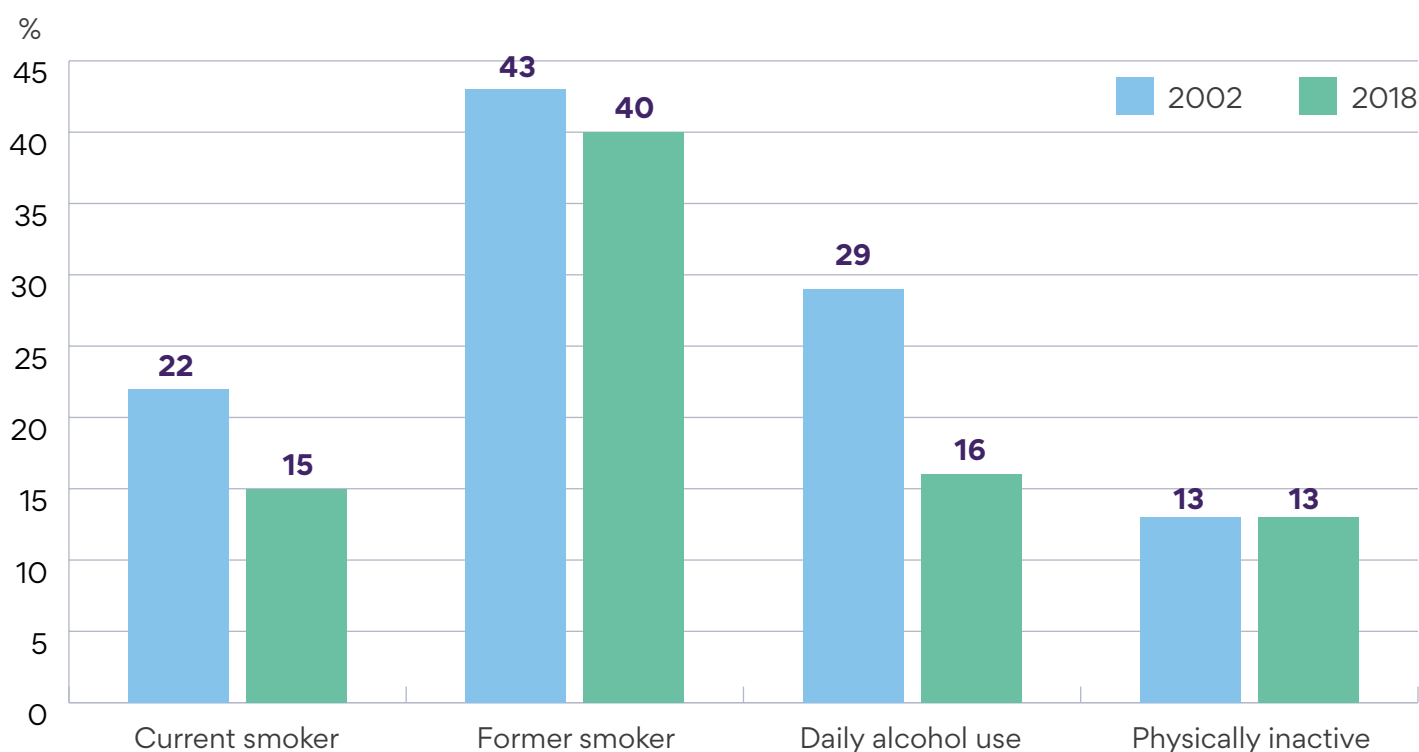
Despite the general increase in healthy habits amongst people in their 50s and 60s, levels of physical inactivity have remained unchanged since 2002 and over half of people in this age group today engage in at least one risk behaviour that could negatively affect their health in later life.

Overall, people in their 50s and 60s today have healthier habits than people of the same age in 2002: they are less likely to smoke (15% compared to 22%) or drink alcohol daily (16% compared to 29%) and have better

cognitive function (77% compared to 61%) (see Figure 3). Yet the proportion of people reporting that they are physical inactivity (i.e. undertaking less than 30 minutes of moderate or vigorous activity per week) have remained the same – around 23% at both time points.

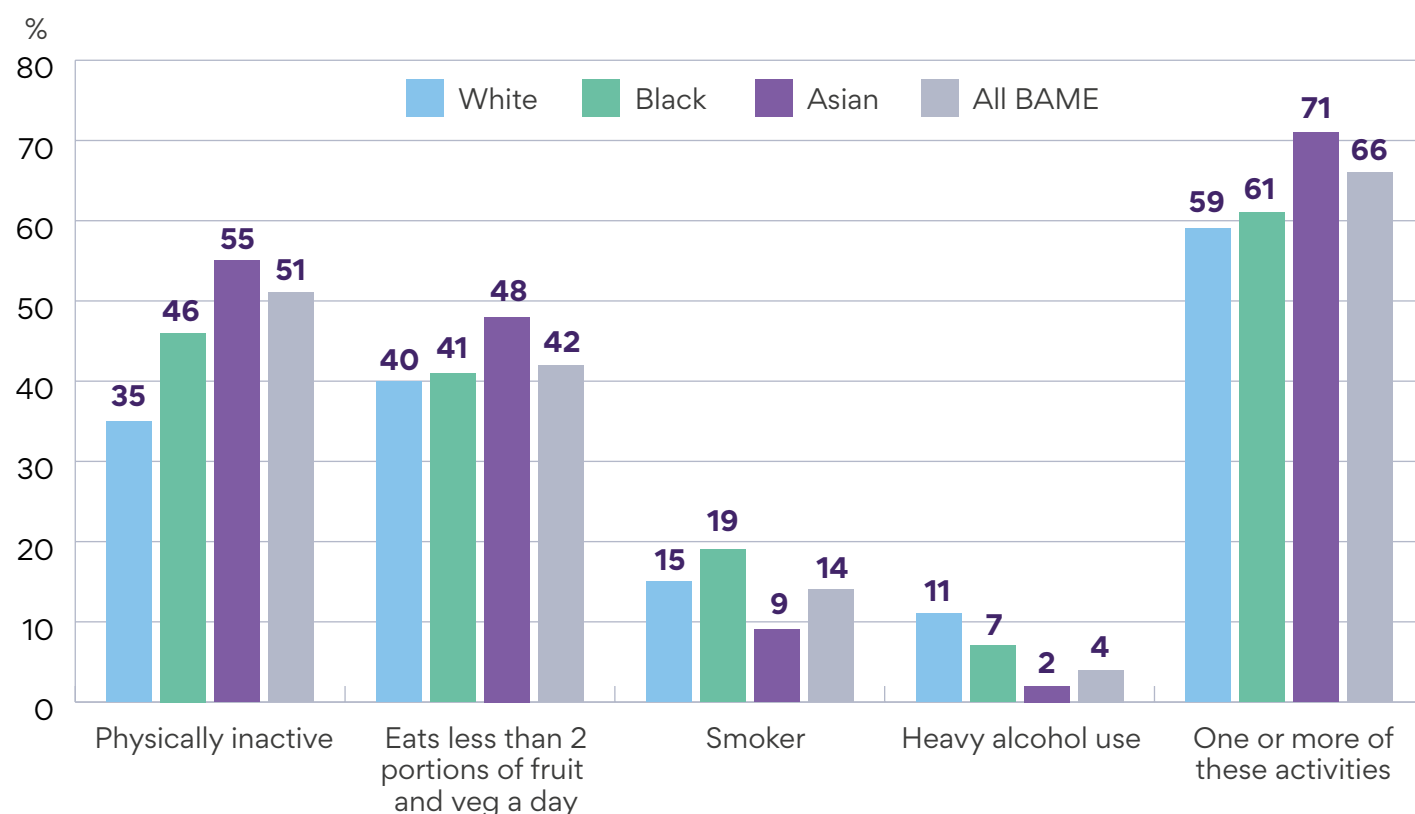
While the overall picture is positive, these trends mask significant variation among the population. More than half of people in this age cohort today experience one or more risk behaviour – behaviours that put people at risk of developing health conditions. These risk behaviours, include smoking, drinking daily, eating a poor diet or being physically inactive. Understanding Society data suggests that

Figure 3: Percentage of people aged 50-70 who engage in risk behaviours, 2002-2018



Source: ELSA data, 2002 and 2018. This data is for all ethnicities.

Figure 4: Percentage of people aged 50-70 who are inactive, eat unhealthily, smoke or drink alcohol, by ethnicity



Source: Understanding Society, 2018.

there are also differences by ethnic groups (see Figure 4), and in some instances gender, for example:

- Over half of men and women from BAME groups in the sample reported being physically inactive compared approximately one third of those in the White ethnic groups. Asian women (72%) and men (70%) were most likely to be physically inactive.
- Heavy alcohol use was more common for people from White backgrounds compared to those from BAME backgrounds (11% compared to 4%) and was more common in men than women.
- People from Black ethnic backgrounds were most likely to be current smokers (22%), and people from Asian ethnic groups were the least likely to smoke (9%).

When we spoke with individuals about their health, many felt that, while their own attitudes and motivation to be healthy was key, family and friends had a significant influence. Some felt that health should be balanced with ‘enjoying life’ and accepted some aspects of an unhealthy but enjoyable lifestyle as causing little harm. Health ‘wake up calls’ among some interviewees drove efforts to live more healthily and to reduce stress, especially at work. While few were current smokers, others admitted to being ‘a bit’ overweight, or drinking ‘a bit’ too much. As Ageing Better’s recent work on physical inactivity (Cavill et al, 2021) and active travel (Moreton and Welford et al, 2021) has shown, factors that will lead people to adopt healthier lifestyles vary from one individual to the next; support and opportunities within the external environment to help change behaviours must

therefore be similarly varied, to reflect people's holistic needs and preferences.

People's current health status, how it impacts on their life and their thoughts for the future

Although many have already been diagnosed with long-term conditions and were anxious over their health in the future, most rated their current health as good or excellent.

The proportion of people reporting chronic conditions, poor self-rated health and a limiting longstanding illness remains similar amongst people in their 50s and 60s today compared to 2002. More than half of people in their 50s and 60s today and in 2002 have one or more major long term health condition (59% in 2002 and 66% in 2018).

And yet three out of four people self-rated their health as good, very good or excellent at both time points (76% in 2002 and 78% in 2018). While the data shows that a quarter of women and a fifth of men in this age group report living with depression, few people we spoke to explicitly discussed their mental health. Instead, people were more likely to discuss how they felt about specific life events, or the impact of the COVID-19 pandemic on their mental health.

People in their 50s and 60s today believe they will live longer than people did in 2002.¹¹ However, many people we spoke with expressed anxieties about their health in the future – especially the potential impact poor health would have on their independence and relationships. People also worried about dementia in particular, especially if they had a parent living with a dementia related condition.



“I feel a bit annoyed with myself that I keep putting things off, like cleaning the house... I do lack motivation... There's not really much to get up for in the morning, but I do get up... I waste a lot of time. I'm annoyed with myself. I can't believe how much time I waste. This has got a lot worse since lockdown. My friends said that they felt 'my brain's gone to pot', and I feel like that. I don't think I'm depressed, but I'm really worried about everything.”

New conditions or diagnoses impact on multiple aspects of life in different ways

Many people we interviewed had considered themselves healthy prior to diagnosis of a health condition. For most, a new health diagnosis had profoundly affected their lives. For example, one interviewee 'had a five-year plan' for her work life but her diagnosis meant that she was now thinking about the progressive decline of her condition, and her mortality. Another interviewee, whose health problems in her late 50s had left her with disabilities, described her diagnosis 'almost like an execution order'. Some people felt that long-term conditions were 'an old people's issue', so diagnosis had led to a shift in their identity. Interviewees spoke about how this shift in identity, together with disruption of their normal activities, had impacted on friendships and social contact. However, for some, diagnosis with a long-term condition had also led to positive change, such as exercising more and eating healthier diet.

11 68% of people in their 50s and 60s expected to still be alive at 75-80, compared to 62% in 2002 (Data source: ELSA).

Ill-health, both physical and mental, limits one in three people's ability to work and is more common for people from BAME groups

More than 1 in 20 people in their 50s and 60s today are unable to work due to ill-health and more than a third report that their physical or mental health impacts their ability to work. In the Understanding Society sample we analysed, people from BAME backgrounds were more likely to report that poor health limited the amount or type of work they could perform (43%), than those of White ethnicity (34%) – with people from Asian ethnic groups, particularly Asian women, most likely to be impacted this way.¹²

People we spoke with who were still in employment reported mixed experiences of working with health conditions. Those with

supportive employers willing to adapt the job role and allow flexibility generally felt quite lucky, others had changed the way they worked. Yet some people, whose job requirements could not be sufficiently adapted, had to leave work because of their health, essentially forcing them into early retirement – in some cases with adverse consequences on both their finances and sense of identity.



“I had to start navigating the benefit system, it still does not feel right. When we were growing up, work was important, benefits were not such a good thing, I'd much rather go out and work. I have to accept that, it took me a long time to accept I had become disabled too... People have negative thoughts about people on benefits ... I was made to feel worthless.”

¹² 49% of people from Asian ethnic groups reported health limits their ability to work (compared with 43% and 34% of people from White and Black ethnic groups, respectively). This varied by gender: 56% of Asian women and 43% of Asian men reporting a health impact on ability to work. Data source: Understanding Society, 2018.

Social lives and connections

For many people in their 50s and 60s today, family remains their main source of support and social connection.

People we spoke with placed great emphasis on their relationships with family and friends, and felt they had people to rely on. Despite more people in their 50s and 60s today living alone, being divorced/separated or never having children,¹³ most people we spoke to still thought of their family as their main support. This was the case even for people

who had strong connections to their community and full social lives.

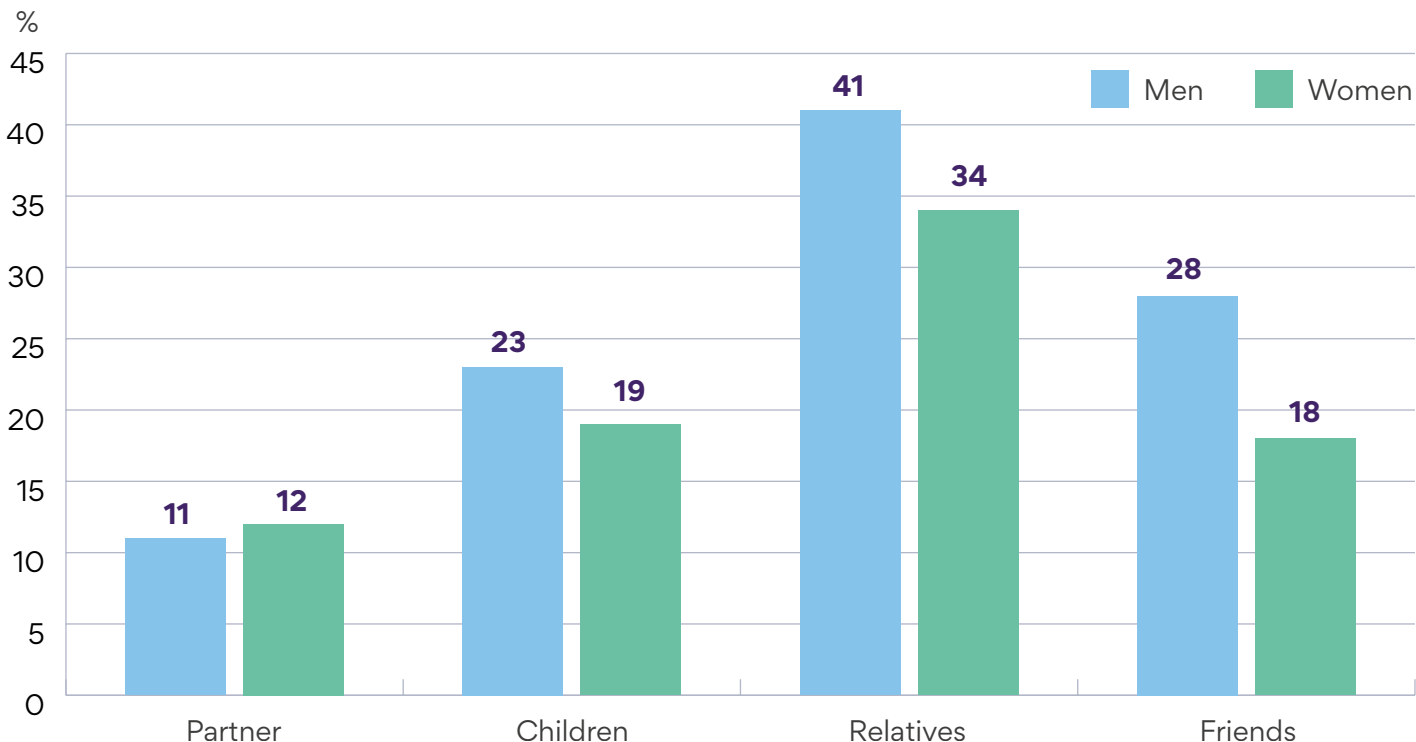


“I would be lost without contact with my family. They are an extension to you. It would not be nice without being able to contact them.”



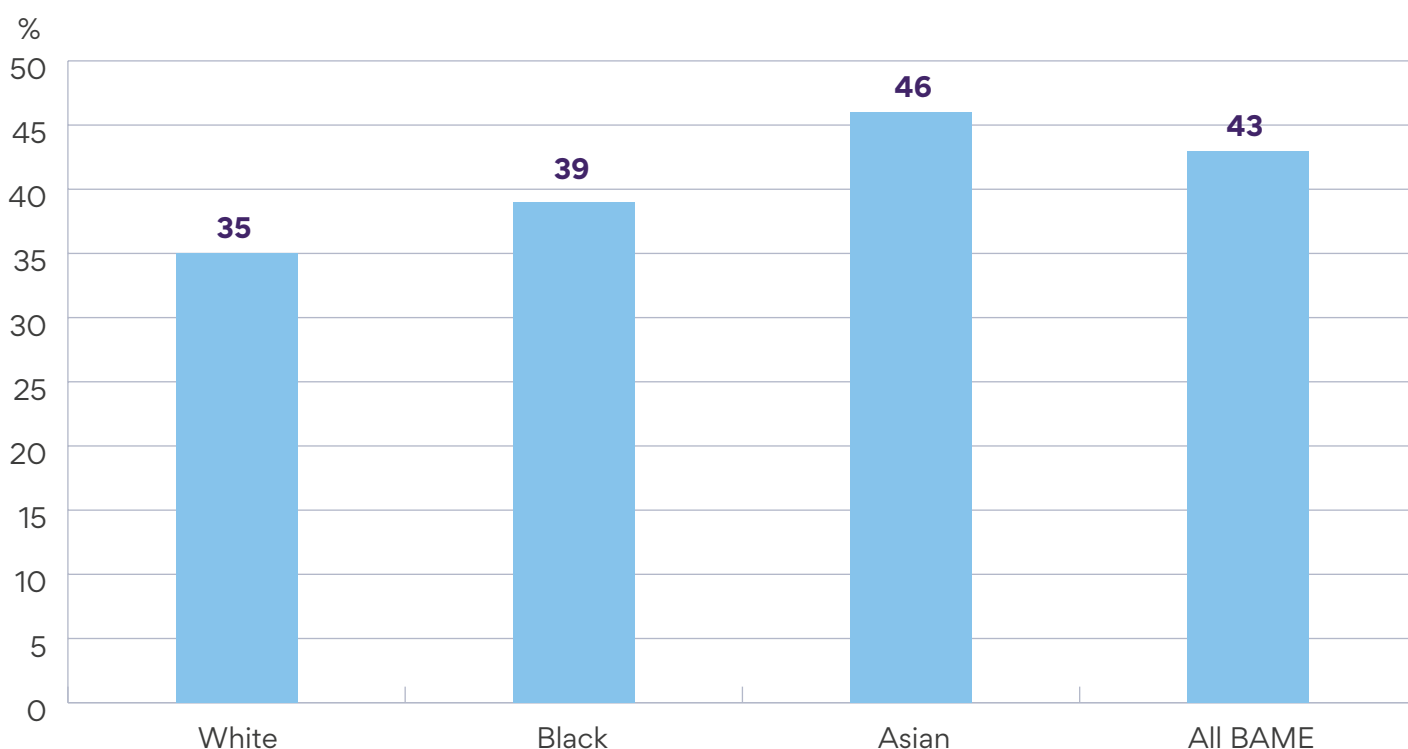
“My family contact gives me a sense of belonging.”

Figure 5: Percentage of people aged 50-69 who have poor relationships, by gender



Source: ELSA, 2018. Note that these figures only include those who have a partner, children, relatives and/or friend i.e. someone without a partner would not be included in the figures above.

¹³ See page 9 for further information.

Figure 6: Percentage of people aged 50-69 who report feeling isolated, by ethnicity

Source: Understanding Society, 2018. This survey question asked people to report if they felt isolated, left out or lacking companionship.

Many people in their 50s and 60s struggle to maintain close relationships, particularly men

Despite the strong emphasis that interview participants put on relationships with family and friends, around a third of men and women in their 50s and 60s today experience poor relationships with either a partner, children or friends (see Figure 5).¹⁴

More than 40% of men in their 50s and 60s today report that they have poor relationships with close relatives and nearly 30% have poor relationships with their children. In 2002, only 6% of men said they had no friends, it is now 9%. This came through in our interviews as well, with men we spoke to feeling they had difficulty in starting and maintaining social connections in comparison to women.

Taking part in or supporting sports teams was identified as a way of making social connections by some men, as was participating in activities designed specifically for men:



“I am involved in MenShed, that has been quite an interesting experience, sitting with a group of men and talking has been an interesting experience.”

Our analysis of Understanding Society data indicated that people from BAME backgrounds were more likely to report feelings of isolation than those from White backgrounds (43% compared with 35%) (see Figure 6). This was particularly the case for Asian women in our sample, 52% of whom reported feelings of isolation.

¹⁴ In 2002, 20% of women in this age group were missing out due poor relationships with either a partner, children, close relative or friends, by 2018 this was 31%. For men, 25% were at risk in 2002, and 35% in 2018.

Many people invest in their friendships, but changing circumstances at this life stage makes maintaining and making new social connections more difficult

Most people we spoke with said they valued their relationships with friends – whether they had a large or small group of them. It was clear that many put a lot of time, effort and often money in to maintaining relationships with friends, especially long-standing ones.



“Very regular contact with friends and neighbours, I call them all the time. Those are my principles and beliefs about the need to keep contact.”

Crucially, in looking for new friends, people wanted to find people with similar interests but not specifically people their own age.

Many interviewees talked about the difficulty of making new friends as they were approaching later life. The reasons were varied. Factors such as financial constraints and caring responsibilities made it difficult for some to build and maintain social connections. For people who had recently moved or had a change in their circumstances, e.g., retirement or no longer having to provide care, making new friends had been especially challenging. Others had found it difficult to socialise after separation from a partner.



“If you’re single and your friends have got partners, they don’t like to invite you because you’re on your own. If I have got single friend I used to [pre-COVID-19] invite them out because I used to feel alone ... I wouldn’t want to go through all that again – that is quite horrible.”

Of the people we interviewed who had children, the majority felt that their family life had been a major driver of their social lives, but that these friendships often drifted apart as children grew up.



“This is our environment, when you have kids you meet people with kids.”

A small number of people we spoke with stated that they would have liked to have children but did not do so for a variety of reasons including relationship breakdowns and infertility. Interviewees described feeling as though they were missing out on the milestones of parenthood, as well as experiencing loneliness and isolation. Some were also anxious about being alone in later life. One participant, who had close relationships with siblings and parents as well as a strong friendship group, said:



“I am thinking the next 25 years, it would be a shame to live under these circumstances... I get a bit stuck where I have to put next of kin ...”

Many interviewees had been using social media to socialise before the pandemic and saw it as a way to maintain relationships. However, while virtual socialising had

necessarily taken a higher priority during COVID-19 restrictions, few felt it gave the same benefits as seeing people in person.

“I think social media is good, helps people communicate in a much easier way, there are obviously downsides, but that’s the case for everyone.”



Our research shows that the strength of our relationships and feeling part of something has a noticeable protective effect. For example, people in their 50s and 60s who have two or more close relationships (e.g. friendships) are less likely to report depression after a separation or divorce (from a chance of 25% at the time of separation to 11% at the end of follow-up over a 14 year period) than those who do not (from a chance of 21% at the time of divorce to 32% after the same period of follow-up).

Community connections

Clubs, societies and hobbies formed a key part of this age group’s connections with their local community and just under half of people in their 50s and 60s today volunteer

Data shows that 67% of people in their 50s and 60s are members of an organisation, club or society (including those that involve physical activity), and 44% are volunteers – with people more likely to be volunteering in their 60s compared to their 50s. Many of the people we spoke to in interviews were also volunteering and had benefited from doing so.

Most of the ways the people said they connected to their communities were free,

such as using the library, being part of a religious group or volunteering, though some cost might be involved for example buying food and drinks while out. Some identified cost as a barrier to participation, particularly those who were on a limited income. This could mean that people who do not have adequate funds then subsequently become unable to build connections that might help them be more resilient to risks such as financial inadequacy.

Meaning and purpose

Nearly one in ten people in their 50s and 60s today report a lack of meaning in their lives – with satisfaction with life varying by ethnicity

The proportion of people reporting a lack of meaning in their lives has increased slightly since 2002 (9%, compared to 7% in 2002). Further, just under one million people report never or almost never looking forward to each day, a rise from around 400,000 people in 2002. Our research shows that people who say that their lives rarely or never have meaning or purpose are at higher risk of depression and loneliness than those who say their life always or often has meaning or purpose.

Looking at other measures influenced by feelings of meaning and purpose, we can see that people from different ethnic backgrounds have very different experiences, with 40% of people from BAME backgrounds reporting low levels of satisfaction with their lives overall, compared to 26% of people from White ethnic backgrounds.

The cumulative impact of adversity across multiple areas of life

So far in this report, we have analysed individual segments of people’s lives such as their work, their health and their caring responsibilities. We also wanted to understand the interactions between these elements of life, to explore whether those who are in poor health, for example, are also likely to experience difficult working lives or financial insecurity, and what impact these situations had on people’s mental health and disability-free life expectancy.¹⁵ This holistic understanding of people’s lives also shines a spotlight on the impact of multiple disadvantages throughout the life course and identifying those who are experiencing the most challenging situation right now and potentially into their later life.

In order to undertake this analysis, the survey respondents were divided into three groups based on their positive or negative

experiences in a large number of areas of life (see Figure 7 and Appendix 1).¹⁶ We labelled these groups as having either low risk, a medium risk or a high risk depending on the number and range of negative life circumstances they were facing.

Our analysis showed that 20% of people in their 50s and 60s today – 2.7 million people – are at high risk of missing out on a good later life.¹⁷ This figure represents 21% of women and 18% of men in this age group, all of whom are experiencing challenges across multiple critical elements in their lives including their health, financial security, housing and work. Individually, people in this group are also likely to be missing out on other aspects of a good quality of life.

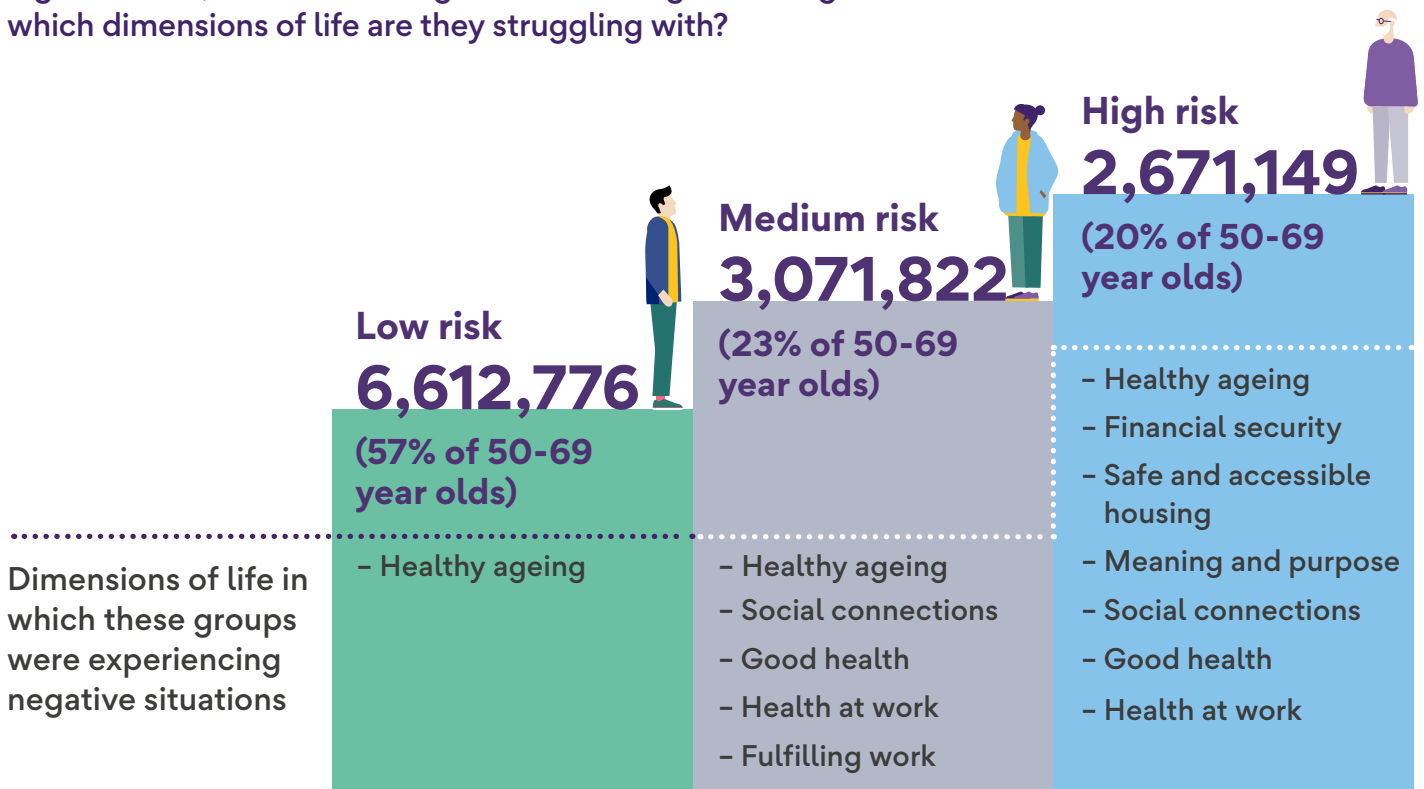
The cumulative set of negative experiences have unsurprising but significant consequences. People in the high-risk group could expect to have an additional 11 years of life spent with a disability compared to those with low risk of missing out on a good later life, and between 8.8 and 10 years fewer compared to those in the medium risk group.

15 Disability-free life expectancy is the average number of years an individual is expected to live free of disability if current patterns of mortality and disability continue to apply.

16 This section and Appendix 1 provides a very high-level summary of the complex analysis undertaken. Please read the [full UCL report](#) for further details.

17 The figures presented in this section are based on analysis of ELSA data.

Figure 7: Low, medium and high risk of missing out on a good later life: which dimensions of life are they struggling with?



Source: Based on an analysis of ELSA data. This figure is a condensed snapshot of the analysis. Please see Appendix 1 and the accompanying UCL report for a description of the analysis, how the dimensions of life were calculated and the equivalent analysis using Understanding Society data. Individually, people in these groups are also likely to be missing out on other aspects of a good quality of life.

They are also 15 times more likely to be living with depression, eight times more likely to be experiencing pain and report being lonely, and four times more likely to lack companionship when compared to those with low risk. During their 50s and 60s, those in the high-risk group are also more likely to be admitted to hospital, acquire a new long-term condition, have a relationship breakdown and move house than the other risk groups.

The findings highlight that for many, the various dimensions of a good later life are interconnected. This, combined with our interviews, confirms that changes to one area can have a domino, cascading effect on the others. Unless policy and practice responses are integrated and take account of interactions from other parts of life, the prospects of enjoying a good later life for people in high-risk groups are limited.

What impact is this having today?

The decades of our 50s and 60s, when we are approaching our later life, are a time of change. Family life and relationships often evolve. Some people will see their children leave home, many will become carers for the first time and there is an increased likelihood of developing a long-term health condition and experiencing bereavement. Our relationship to our work, to our health and to the places we live also start to shift. This was true 16 years ago, as it is now.

But we cannot assume that these life changes – and the way people experience them – is immutable. **Life for people approaching later life today is different in many important ways.** Not only are people in their 50s and 60s more ethnically diverse as a group than they were in 2002, their relationship status and living arrangements are more varied. An increased proportion of people in this age group have never married, are divorced, live alone or share with someone other than a partner. More people are also ageing without children. The changing shape of relationships and wider circumstances will undoubtedly challenge assumptions about the support networks that we all have access to as we age – it will impact on the supply and demand for informal and formal care.

Despite positive shifts such as higher employment rates, our research shows that the way people in their 50s and 60s experience multiple aspects of life has deteriorated. Job quality, social connectivity and home ownership have declined, responsibilities such as juggling work with providing care for a friend or relative are growing and fewer people are likely to report meaning in their lives. Anxiety about future health and the affordability of older age is common and expectations about retiring, both when and how, have changed. Most people anticipate having to work for longer, with retirement more likely to involve a phased retreat from work rather than an all or nothing event.

At best, these societal shifts disrupt the image that many people may have had of their future when they were younger. Others represent deeply concerning trends, that require urgent policy attention.

Our research has brought into stark focus widening inequalities. Financial inequalities are increasing dramatically; the rich are getting richer, and the poor are getting poorer. Living in poverty rather than the often-assumed affluence is the reality for a large minority of 50-70-year-olds. Even before the pandemic, and since 2010, the number of people in relative poverty has been rising for this age group – from 2.3m in 2010/11 to 3.1m in 2019/20¹⁸ represents a real increase beyond population growth and demographic change.

¹⁸ Poverty rates were calculated After Housing Costs.

Looking at the rates of relative poverty for different age groups over this period, those aged 50 to 70 have experienced a larger increase than younger cohorts.¹⁹

Our research has also made visible the multiple layers of disadvantage experienced by people from BAME backgrounds in this age group. For example, compared with those from White backgrounds, people from BAME groups are more likely to be disadvantaged financially, to report that their physical and mental health limits their work and to have lower levels of satisfaction in both their jobs and their lives more generally. Our research clearly highlights that there are notable differences in the experiences of people from different BAME sub-groups. For example, our research suggests that people from Black backgrounds in their 60s are the least financially secure and people from Asian backgrounds in our sample are more likely to be physically inactive than people of all other ethnicities.²⁰ However, even using the best available data, as we have done here, it has not been possible to give a full picture of how experiences of various aspects of life vary across BAME sub-groups.

As highlighted by others, these and other deeply concerning ethnic inequalities in later life are little understood and have been under-monitored due to a lack of research and usable data (Bécares et al., 2020). It is important to acknowledge that until recently, the over 50 cohort comprised relatively few people from BAME groups. However, many first- and second-generation immigrants are now in their 50s and 60s. The proportion of people from BAME groups approaching later life has doubled in the last 20 years; and it will

continue to rise. Yet, representation of people from different BAME groups remains limited in nationally funded datasets. Calls for Government commitment to close the ethnicity data gap have already been made, and action is already being taken to start to address these gaps in the next wave of the ELSA survey and by others including the work of the Inclusive Data Task Force and those involved in the Evidence for Equality National Survey (EVENS), the Centre on Dynamics of Ethnicity. We support these calls and the action already being taken. However, if we are to reduce inequalities in mid and later life, there also needs to be investment in research to better understand how to reach and involve people from different BAME groups in national research, otherwise participation will remain low. Unless this happens, people from BAME groups will remain near invisible as they age and policy and practice to reduce inequalities in later life will not be adequately informed by their experiences.

Gender inequalities are also apparent. The gender employment and income gap among people approaching retirement means that women face greater financial precarity in later life. This financial insecurity will also be exacerbated by the uneven distribution of pension wealth between men and women, which varies with marital status and increases with age – with the median pension wealth for men aged 65-69 being six times that of women of the same age (Buckley and Price, 2021). And while divorcees, whether male or female, have poorer pension wealth compared to people who are married, this disparity is greatest for divorced women and also becomes worse with age.²¹ While men in

19 IPPR analysis of Households Below Average Income data.

20 Data source: Understanding Society, 2018.

21 The research by PPI and the University of Manchester found that divorced women aged 55 – 64 who are not cohabiting had a pension wealth of £19,000 compared with £100,000 for similar divorced men. Whereas divorced women in their late 60s who are not cohabiting have less than 30 per cent of the pension of equivalent men (Buckley and Price, 2021).

What impact is this having today?

general fare better than women in terms of employment, income and pension wealth, men in their 50s are at the highest risk of missing out on social connections in later life, with 1 in 10 approaching later life saying they have no friends.

That people in their 50s and 60s are already missing out on a good quality of life now is unjust yet the trajectory for their later life is also concerning. Compared to their 2002 counterparts, people in their 50s and 60s now expect to live longer. Yet our research shows that they are on track to be worse off in later life than people of the same age in 2002. The narrative of job and financial insecurity and a reliance on renting rather than home ownership is no longer applicable to young people alone. These issues are having an impact on people in their 50s and 60s today and will continue to do so as this group ages. While people in this age group as whole have healthier lifestyles, levels of physical inactivity remain unchanged since 2002. And over half of people in their 50s and 60s are still engaging in one or more risk behaviours such as eating a poor diet, smoking, drinking too much alcohol and/or physically inactive – all of which raises the risk of poor health or disability in later life. Already, just under two thirds of people in their 50s and 60s report having one or more long-term health condition and a third say their health impacts their ability to work.

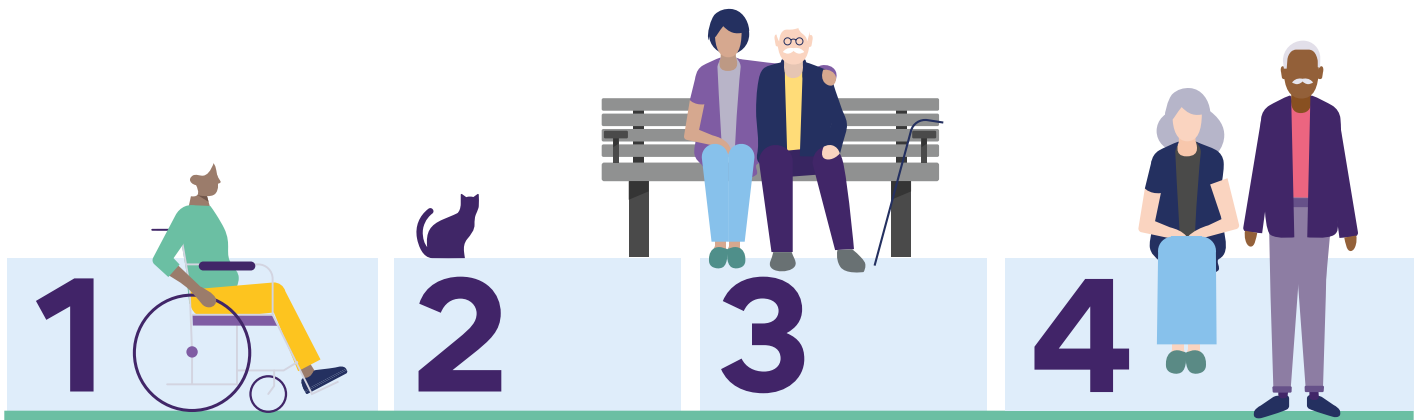
At a time of their lives in which people need to be accumulating financial and social resources for their later lives, the gap between those with and those without is also widening. Lifetime accumulation of disadvantage is readily apparent among people in their 50s and 60s today. Given the timing of this research,²² is likely that COVID has intensified

even further the precarity of the situation for many people in their 50s and 60s and will have exacerbated existing inequalities. For example, more than 600,000 workers over 50 have been furloughed for six months or more (Handscomb et al, 2021) and 5.3 million people are on waiting lists for NHS treatment, which could rise to more than 13 million by the end of 2022 (Stoye et al, 2021).

Older generations are becoming not only greater in number, but also increasingly diverse in terms of, health, wealth and life circumstances. While these shifts have happened, society's response to them has not kept pace; the experiences of people in their 50s and 60s have been overlooked. Our research found that 2.6 million people in their 50s and 60s are at risk of an old age marred by a combination of poor health, poor finances and poor social connections, as well other aspects of later life that people say matter the most. This adds up to personal struggle for the individuals, and a huge loss to our society – who will miss out on the benefit of the work they could do, the support they could provide, and the contributions they could make. The potential savings for public finances – if we are able to support 2.6 million people to stay in work, stay healthy and in their communities – are substantial.

Providing support, services and interventions that tackle one of these areas in isolation is unlikely to change the trajectory for individuals. Unless policy and practice responses are holistic and integrated the prospects of us all enjoying a good later life will be limited. And if action is not taken soon, future generations will continue further along this damaging trajectory into a poor later life.

²² This research combines a snapshot of survey data from 2018 with qualitative findings from interviews with people during 2020, see Appendix 1 for further information.



Based on this evidence, the Centre for Ageing Better believes there are four key things that need to change:

1 A cross-departmental strategy addressing ageing and demographic change is needed. **The government's Plan for Growth and Levelling Up proposals must address the age shift underway and the dramatic and growing inequality in the way we experience later life.**

2 The government's manifesto commitment to deliver five extra years of healthy life expectancy is badly off track. **Investing in preventative public health measures to reduce risk behaviours in mid-life must be a top priority for the Office for Health Improvement and Disparities if the government is to keep its promise.**

3 National data collections need to be supported to expand and become sufficiently robust so the experiences of different groups can be more clearly understood, and ethnicity data reporting must be mandatory in all official and statutory statistics and data monitoring. The near invisibility of older people from BAME groups in the data currently means we cannot fully demonstrate the systemic discrimination they face, nor ensure that policies and practices are designed to support people experiencing the greatest inequalities.

4 Increasing the participation of older workers in the labour market is essential to address the widening wealth inequalities of those in later life. Without a more targeted approach, any further extension to the State Pension Age will leave many more living later life in poverty. **The government must legislate for enhanced flexible working rights, carers leave and a single enforcement body without delay. Government should also promote the mid-life MOT model, which gives people a focused opportunity to plan and prepare for their futures. Employers must take steps to be age friendly, including tackling ageism in the workplace and supporting older employees to manage health conditions and caring responsibilities.**

Appendix 1: Summary of the quantitative analysis

Full details of the methodology for the quantitative element of the research can be found on our website.

Data sources and limitations

The quantitative research used survey data from two ongoing studies: the English Longitudinal Study of Ageing (ELSA) and Understanding Society: the UK Household Longitudinal Study (UKHLS).

ELSA started in 2002, with new waves of data being collected every two years. It involves a nationally representative sample of the older population – providing a detailed picture of the experiences of people aged 50 and over living in private households in England.

Understanding Society, which started in 2009 and captures new data annually, is not exclusively focused on older people and instead includes occupants of all ages from households across the UK. It also oversamples minority ethnic groups and thereby allows the experiences of different minority ethnic to be explored. In contrast, ELSA data can only be broken down by those from White and BAME backgrounds.

The analysis undertaken in research was restricted to the following data:

- ELSA data from 2018/19 (wave 9): A sample of 3,511 people aged 50 – 69 years, of this sample, 233 were classified as from BAME backgrounds. Data from earlier ELSA waves

(1 to 8) were also analysed to explore changes over time. Data from 2002/2003 (wave 1) was used to explore whether and how the experiences of today's 50-69 year olds differ to the previous generation.

- Understanding Society from 2018 (wave 9): A sample of 10,296 people aged 50-69 years living in England. Of the sample, 1,910 people were from BAME groups.

Inclusion of data from both studies enabled a greater breadth of factors to be explored than was possible with either alone. However, the two data sets were analysed separately – ELSA and Understanding Society could not be combined, nor are the findings directly comparable due to differences in the survey questions and design, and the target population.

Key limitations of the data sources

ELSA is a nationally representative sample of older adults living in private households in England – the sample is selected randomly. It is therefore possible to generalise the results obtained from ELSA to the population of people aged 50-69 in England living in private homes. However, as highlighted above, ELSA only breaks down ethnicity by people from White and BAME backgrounds.

Understanding Society does provide a breakdown of the experiences of people from BAME groups, but the sample is not randomly selected. This means that while the findings capture the experiences of people included

Table 1: Snapshot of the ELSA and Understanding Society variables including the analysis mapped to the dimensions of a good later life

Dimension of a good later life	Variables captured and their categorisation	
	ELSA	Understanding Society
Fulfilling work	<ul style="list-style-type: none"> - Effort/reward imbalance (no, yes) - Lack of control at work (no, yes) - Excessive work demand (no, yes) - Low job satisfaction (no, yes) 	<ul style="list-style-type: none"> - Work satisfaction (low, medium, high)
Good Health	<ul style="list-style-type: none"> - Self-rated health (fair/poor, good+) - Limited long-standing illness (no, yes) - Major long-term health condition (none, one, two) - Sight or hearing impairment (none, sight, hearing, both) 	<ul style="list-style-type: none"> - Self-rated health (fair/poor vs. good+) - Limiting long-standing illness (no, yes) - Major long-term health conditions (none, one, two) - Sight or hearing impairment (none, sight, hearing, both)
Work and health	<ul style="list-style-type: none"> - Heavy manual work (no, yes) - Health limits work (no, yes) 	<ul style="list-style-type: none"> - Long-term sickness/ill-health (no, yes)
Healthy ageing (health risk behaviour)	<ul style="list-style-type: none"> - Cognitive recall (10+ words, <10 words (impaired)) - Daily alcohol consumption (no, yes) - Physical activity (active, inactive) 	<ul style="list-style-type: none"> - Smoking (no, yes) – is this ever/never or current - Inactivity (no, yes) - Heavy alcohol use (no, yes) - Fruit and veg intake (>2, ≥2 portions)
Financial security	<ul style="list-style-type: none"> - Net wealth (quintiles) - Net Income (quintiles) - Enough money to meet future needs unlikely (no, yes) 	<ul style="list-style-type: none"> - Tenure of home (outright, debt, renting) - Net income (quintiles) - Not managing financially (no, yes)
Social connections	<ul style="list-style-type: none"> - Relationships (none, poor or good) for: partner, children, close relatives and friends - Clubs/society/organisation membership (no, yes) - Volunteering (no, yes) 	<ul style="list-style-type: none"> - Relationship with partner (good, poor) - Lack of societal engagement (no, yes) - Socially isolated (no, yes) - No close friends (no, yes) - Barriers to seeing friends (no, yes)

in the sample, and even with weighting applied, it is not possible to generalise the results to all people from BAME groups aged 50-69 living in England today.

Despite these limitations, it is important to emphasise that our research has used best data available on minority ethnic groups.

Analysis of the datasets to explore who might be at risk of missing out on a good later life

Ageing Better's strategy formed to basis for the analytical framework for the dimensions of a good later life for our research. Our strategy identifies the interconnected themes that people say matters the most to the quality of life.

The research team mapped the related survey questions from ELSA and Understanding Society to these dimensions of a good later life. Table 1 provides a snapshot of the questions mapped against several dimensions of a good later life, full details are available in the UCL report. The responses to these questions were then used in the subsequent analysis.

The first step of the analysis focused on identifying who is missing out on each domain of a good later life, this involved:

1. Coding individual responses to each question within the given good later life domain. For example, in the fulfilling work domain, depending how an individual answered the

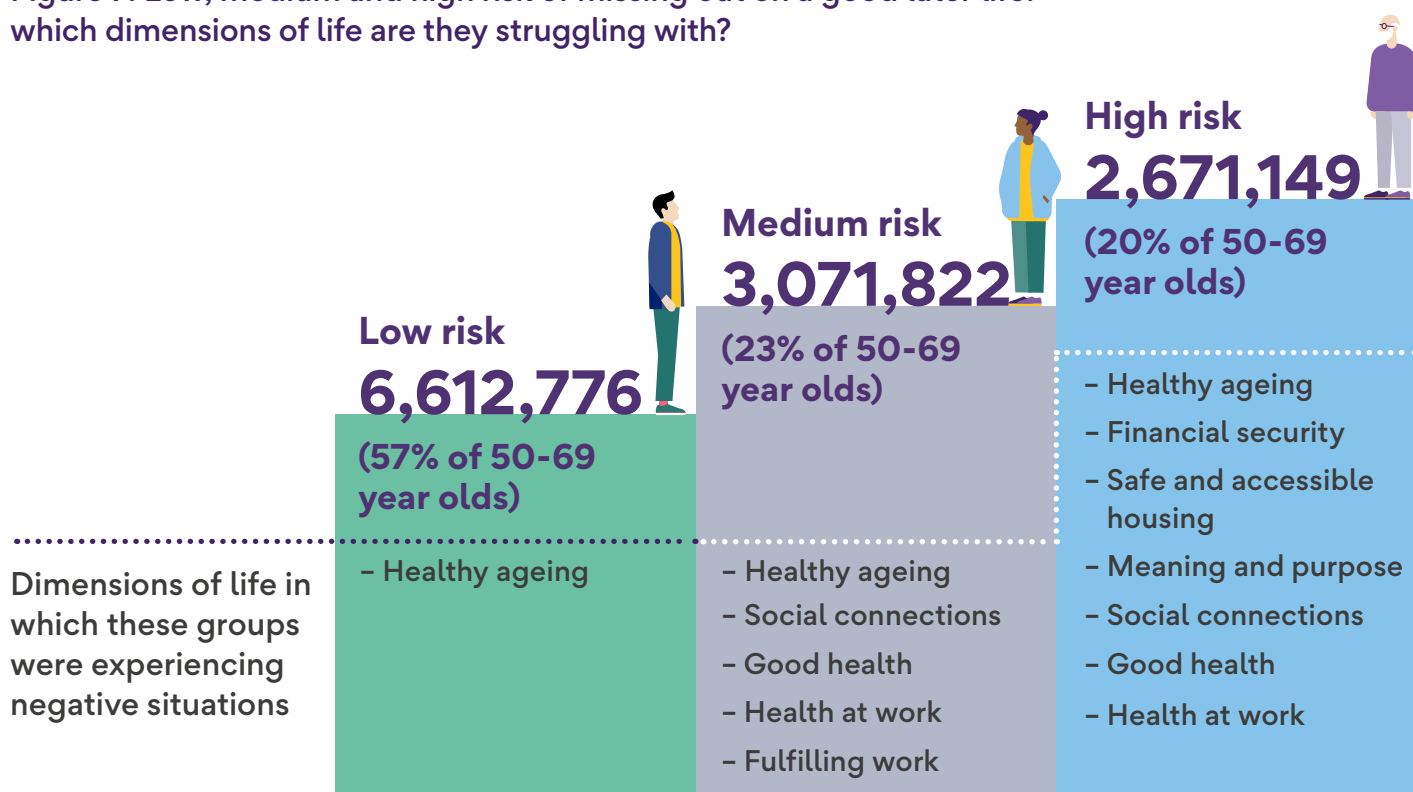
relevant question, their responses were coded as: yes or no for the following four variables: effort/reward imbalance, lack of control at work, excessive work demand, low job satisfaction imbalance (with a yes meaning that they are experiencing an effort/reward imbalance etc).

2. Using the coded responses from (1) to create a summary measure which classified the individual as missing out or not on the given good later life domain. For example, an individual was classified as being at risk of missing out on Fulfilling Work if their survey responses had been coded as yes for one or more of the four variables within that domain (effort/reward imbalance, demand, control, satisfaction).

The research team then used a statistical approach called latent class analysis to identify how we can sensibly group people based on whether they were missing out on the various domains of a good later life. The analysis revealed that the best option was to group people into one of three groups (see Figure 7 on page 39).

Regression analysis was also employed to explore the relationship between the three risk groups and poor outcomes – the outcomes included pain, depression, loneliness, lack of companionship, ONS-wellbeing and life satisfaction. In addition, for each of the risk groups (low, medium and high), disability-free life expectancy by age and sex was computed using mortality data for England from the ONS of the corresponding population (in terms of age and gender) in 2018.

Figure 7: Low, medium and high risk of missing out on a good later life: which dimensions of life are they struggling with?



Source: Based on an analysis of ELSA data. This figure is a condensed snapshot of the analysis. Please see Appendix 1 and the accompanying UCL report for a description of the analysis, how the dimensions of life were calculated and the equivalent analysis using Understanding Society data. Individually, people in these groups are also likely to be missing out on other aspects of a good quality of life.

Appendix 2: Summary of the qualitative research

Full details of the methodology for the qualitative element of the research, including a snapshot of the demographic profile of people involved, can be found on our website,

The aims of the qualitative research were to capture further insights into the experiences of a spectrum of people in this age group, building on those gained through the quantitative analysis.

The qualitative research was carried out with a sample of 91 people aged 50-69 and six participants over 70. Participants were recruited to offer a balance of characteristics according to gender, ethnicity, sexuality, relationship

status, housing and employment status and geographical location. Interviews were conducted during July and August of 2020.

Semi-structured depth interviews were carried out with 66 participants. 12 small focus groups were also held, each involving between two to four of these interviewees. Diaries were also completed over the two-month period by six interviewees to provide insights into the impacts of key life events unfolding in real-time.

An additional six interviews were carried out with participants over 70 to capture attitudes of previous generations to later life and to explore the findings of the quantitative research.

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