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The State of Ageing in 2020

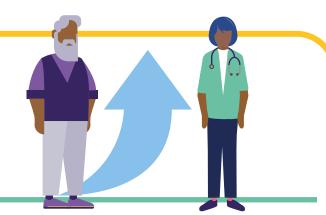
ageing-better.org.uk



COVID-19 has laid bare the urgency of improving the state of ageing.

The picture described here through analysing nationally-available data shows how people across England are ageing. It shows the state of our health, our finances and our communities when COVID-19 hit and the impact it has had so far.

The pervasiveness of poor health, unsafe and low-quality housing, and a lack of social connections – particularly among the poorest in our society – has exacerbated the impact of the pandemic on those who already faced the most challenging prospects in later life. People currently in their 50s and 60s who lose their jobs now are at risk of falling out of the labour market for good. COVID-19 will deepen some of these inequalities yet further – but it did not create them.



The impact of this will be felt more sharply across society in the next 20 years, as greater numbers of people reach their 60s, 70s and 80s.

If the current trajectory is allowed to continue, the gap between those who are able to enjoy later life and those who struggle through it will be even wider for future generations than it is for the present one – with grave consequences for society.

This is not inevitable. The current crisis has galvanised public and political **support for changes** that can create a society where we can all live healthier, fuller, more connected lives – whether that's changing **the economy**, **our environment**, or becoming more actively involved in our communities.¹ We know what needs to be The current crisis has highlighted more than ever the inequalities in how we age.



done to change course. We need bold leaders to take action and create the radical improvements we need to secure a better future for us all. Now more than ever we need the government to reaffirm its active commitment to ensuring people can enjoy five more healthy, independent years of life by 2035, while narrowing the gap between the experience of the richest and poorest across our nation.

Even before the pandemic, progress on improving life expectancy was stalling – and disability-free life expectancy was going backwards.

Rates of increases in life expectancy seen in previous decades have slowed and people are living longer in poor health than in the past.

A man who turned 65 in 2010 could expect to live two years longer than someone who reached the same age in 2001. Over the same period, 65-year-old women gained 1.6 years. But since then, progress has slowed: since 2010, 65-year-old men have gained just an extra one year in life expectancy. For women, it's even less: 0.7 years. We see the same pattern in life expectancy at birth.

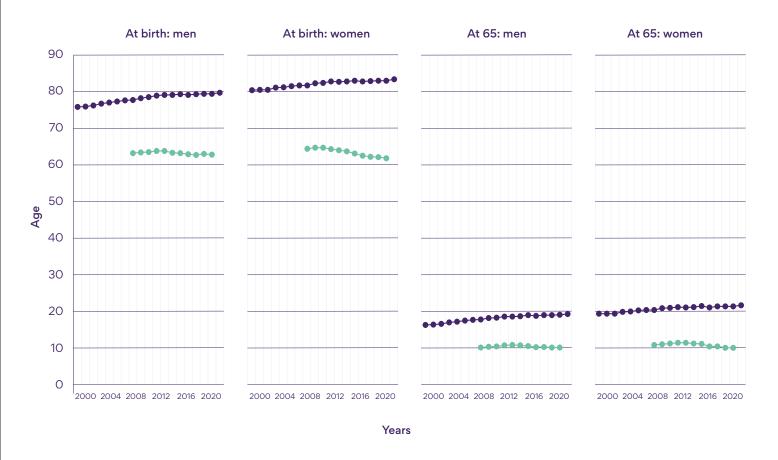
Disability-free life expectancy – the number of years people live without a limiting illness – is also now moving in reverse, particularly among women. The average baby girl in 2018 could expect to live to just 62 without a disability or health condition, down from almost 65 in 2010. And for those in the poorest areas of the country the story on health is much worse.



A girl born today can expect to live to just 62 without a disability or health condition.

Disability-free life expectancy

at birth and at 65, England, 2001 to 2019



🕒 Life expectancy 🛛 🔵 Disability-

Disability-free life expectancy



Women in the wealthiest parts of the country are set to live 16 years longer in good health than those in the poorest.

In the poorest parts of the country, a baby girl has a disability-free life expectancy of 51. That means she's currently set to spend 16 fewer years in good health across her life than a girl born at that same time in the wealthiest parts of the country. And when you look at how these same measures apply in later life, the average man and woman aged 65 can expect just six years longer free of disability compared to the 12 years their wealthiest peers will enjoy.

In addition, there is a stark North/South divide. Someone aged 65-69 living in the North East can expect 8.3 more years disability-free – nearly three years less than someone living in the South East. This health-wealth gap risks becoming wider still in the wake of COVID-19. Poverty and financial insecurity, employment, our homes and the places we live all affect physical and mental health directly. They also affect behaviours like being physically active, smoking, having a poor diet and drinking too much.

COVID-19 will only accelerate health inequalities if we don't take action. With a greater burden of ill-health on the poorest in society, it is the poorest who will suffer most from the **delays in diagnosis and treatment** of health conditions.² Future years may bring not only a further reduction in disability-free life expectancy, but a larger gap between the richest and poorest.

Action:

We need a focus on prevention and support for those with health conditions in the poorest communities. Now more than ever we need the government to reaffirm its active commitment to ensuring people can enjoy five more healthy, independent years of life by 2035, while narrowing the gap between the experience of the richest and poorest across our nation.

Life expectancy (LE) and Disability-free life expectancy (DFLE)

(years) by gender and index of Multiple Deprivation Decile, England, 2016-2018







More than two million people aged 55 or older are living in a home that endangers their health or wellbeing.

During this pandemic, many of us are spending more time in our homes than ever before. For some, this has had positive implications: **nine in ten workers** who were able to work at home during lockdown said they would like to continue to do so in some capacity.³ But for too many people, their home is actively damaging their health and wellbeing.

There are 4.3 million homes in England that do not meet basic standards set by government. They are excessively cold, or damp, or contain hazards that put the occupant at risk of tripping and falling. At least half of them are headed by someone aged 55 or older (and a million have at least one child). In England, one in five excess deaths in winter are attributed to cold housing.

Action:

Fixing all of these hazards would cost a total of $\pounds4.3$ billion – an amount that could be paid back in savings to the NHS in just eight years. We need this investment to support a major upgrade and refurbishment of our housing.

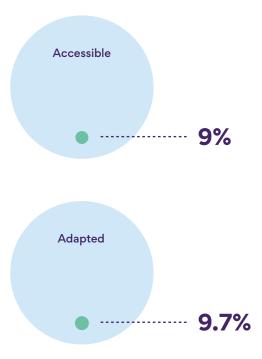
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There are 4.3 million homes in England that do not meet basic standards set by government.



Only 9% of homes in England are visitable by people with accessibility needs. Proportion of homes that contain all four accessibility features, and any adaptations,

in England, 2018



10 The State of Ageing in 2020

Just 9% of homes in England (just over two million), meet the most basic standard of accessibility. This means they have level access to the entrance, a flush threshold, sufficiently wide doorframes and circulation space, and a toilet at entrance level. Just 10% of all homes contain at least one adaptation – such as grab rails or ramps.

This is not enough to meet the needs of the current population – let alone the needs of the population of 2040, when one in four of us will be 65 or older. The vast majority of older people live in mainstream housing, rather than specialist housing, such as a retirement community or sheltered accommodation. We need more homes built to a higher standard of accessibility, homes that are adaptable and flexible enough for all of us to live in them, throughout our lives.

Action:

The government should move ahead with plans to update building standards and make the 'accessible and adaptable' design standard the mandatory baseline for all new homes (set out in Building Regulations M4 Category 2).

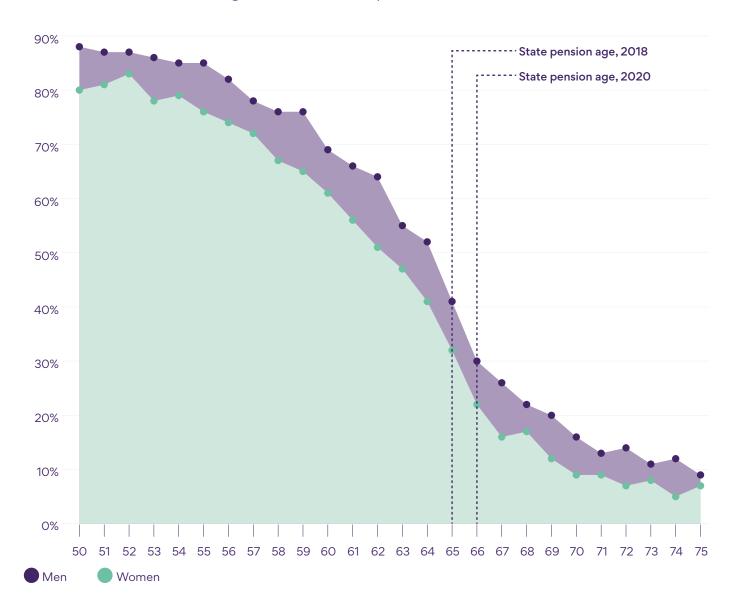


In the year that the state pension age reaches 66, less than half of men – and a third of women – are still in work at 65.



Employment rate for men and women

age 50-75 in the UK, year to March 2020

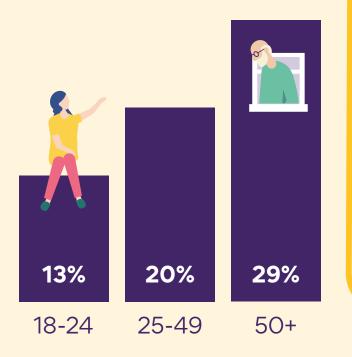


12 The State of Ageing in 2020

The proportion of people over the age of 50 in employment has risen over the last 20 years. The employment rate among people aged 50-64 has risen from 60% to around 73% since the year 2000. One in three workers are now aged 50 or older.⁴

Percentage of unemployed people who have been unemployed for more than 12 months,

by age, UK, 2020

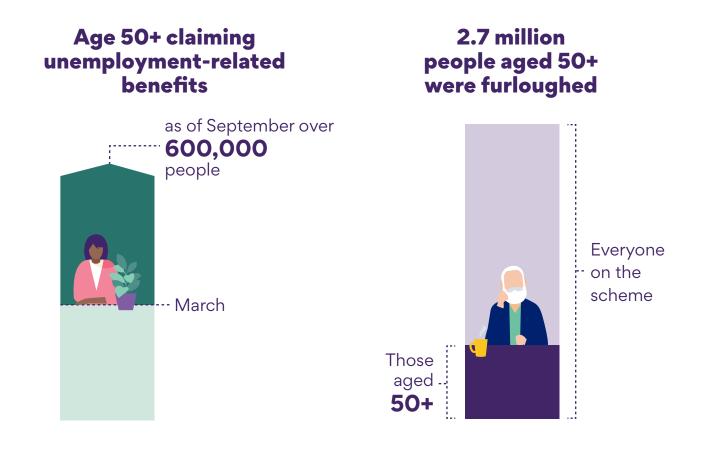


But this progress masks the large number of people who are still falling out of work prematurely. Prior to COVID-19, there were nearly 800,000 people aged 50-64 who were out of work, but wanted a job.⁵ They were kept out of the job market by a range of barriers – ageism in recruitment, lack of flexibility, insufficient support for their health conditions and managing caring responsibilities – but there were at least jobs to be filled.

COVID-19 risks bringing about a long-term unemployment crisis among the over 50s.

This recession could stall – or even reverse – the progress in employment among workers at older ages that has been ongoing for decades. We risk millions of people struggling with long-term unemployment in the years before they are able to draw a pension, leading to a rise in pensioner poverty.

- As of September, there are now over 600,000 people aged 50 or over claiming unemployment-related benefits – double the number there were in March 2020.⁶
- Of people aged 50 or over, **2.7 million were furloughed** (a quarter of everyone on the scheme), with an estimated **400,000 of those jobs at risk of disappearing.**⁷



Workers aged 50+ made redundant Labour Force Survey, year to September 2019 One third gained a new job within three months

The biggest risk, however, is of what happens next. Once they fall out of work, older workers take the longest, and struggle the most, to return to work.

Those over 50 who are unemployed are twice as likely to be out of work for 12 months or more than younger workers and almost 50% more likely than workers aged 25-49.

Relying on mainstream back-to-work support for this group will not work. On the government's Work Programme, which ran from 2011 to 2017, just 21.6% of the over 50s gained a job – the worst result of any group.⁸

Action:

Employers should value an age-diverse workforce and ensure they offer flexible working arrangements and training to workers of all ages.

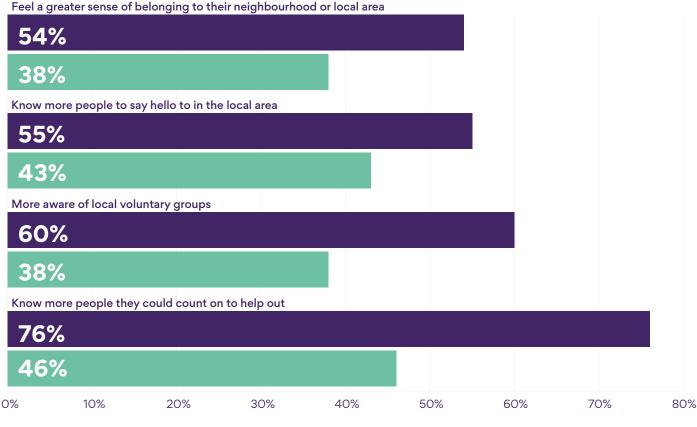
We need government to offer targeted, individualised employment support for this group, including opportunities for those with long careers in shut-down sectors to retrain.

Communities

Lockdown has seen a surge in community activity – but in many cases the people who are struggling to get by are missing out.

Change in measures of connection since lockdown

by subjective income in people aged 50 to 69 years, England, July 2020



Living comfortably

Finding it difficult to get by

Overall, older people report the greatest sense of 'belonging' to their community. But while COVID-19 has boosted these sentiments for many, our data shows these benefits were not felt equally.

People who said they were struggling to get by financially were much less likely to say that since the outbreak of COVID-19 they had more people to say hello to, or that they could count on to help out.



Those most in need of social connections during lockdown may have had the least access to it.

Action:

National and local government and funders need to invest in the physical, social and digital infrastructure which enables everyone to live in more connected communities.

We are on the path to a future of ageing badly.

These headlines offer a small snapshot of the full picture of how people in the UK are ageing today. But the message is clear.

If today's younger and middle-aged adults can expect the outcomes we have detailed here – but in addition face less secure work, smaller pensions pots and much less housing wealth – we will all be in trouble. Far from living up to the promise of longer lives, the gap between those who are able to enjoy later life and those who struggle through it will widen, with grave implications for society.

It used to be the case that to be old was to be poor. The data presented here suggests that without action this could well be true again in future. Pensioner poverty could return.

But there are steps we can take to change this trajectory.

These trends are the result of deep and complex structural inequalities in our society, but they are not great immovable truths, never to be shifted. We know where action is needed, and where effective interventions have not yet been proven the Centre for Ageing Better is working to test new approaches and support innovation.

The current crisis has galvanised public and political support for changes that can create a society where we can all live healthier, fuller, more connected lives – whether that's changing the economy, our environment, or becoming more actively involved in our communities. To make the most of this moment we need bold, optimistic leadership that understands that growing up and growing old with disadvantage, or finding yourself suddenly out of work in your 50s, needn't condemn you to a later life of poverty, disability and withdrawn from society. It is not yet too late to act to ensure that the next and future generations of older people are able to reap the benefits of longer, healthier and happier lives.

To read the full State of Ageing in 2020 report in online form, visit **ageing-better.org.uk**



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Chart sources

- Page 7 **Disability-free life expectancy**: ONS (various years), Health state life expectancy at birth and at age 65 years by local areas, UK. **Available at:** <u>https://www.ons.gov.uk/</u> <u>peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/datasets/</u> <u>healthstatelifeexpectancyatbirthandatage65bylocalareasuk/current</u>
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- Page 14 **Percentage of unemployed people who have been unemployed for more than 12 months:** Learning and work Institute Analysis of DWP data
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Centre for Ageing Better

Let's take action today for all our tomorrows. Let's make ageing better.

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