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| *Title* | **Is Social Exclusion still important for Older People?** |
| *Excerpt* | People in their fifties increasingly excluded from society says new research. |
| *Body copy* | The number of people aged 50 plus being socially excluded from decent housing, public transport and local amenities rose sharply over a six year period, according to new research carried out by the International Longevity Centre-UK (ILC-UK) and funded by Age UK.Over one in six people in their fifties (18%) were socially excluded in two of more areas of their life in 2008 – up from 13 per cent in 2002.But the research also found that almost 38% of those aged 85 or older faced some two or more kinds of social exclusion, an encouraging decline of 10% from the 2002 levels. For those aged 60-64 years old, the figure was 12.4% experiencing two or more kinds of exclusion in 2008.These findings were among the disturbing results from the research “Is Social Exclusion still important for Older People?”To produce the new report, launched today at an event hosted by ILC-UK, ILC-UK analysed the most recently available data from the English Longitudinal Study of Ageing (ELSA), which was collected in 2008, and examined how patterns of social exclusion changed since 2002. Social exclusion was measured across seven domains including exclusion from social relationships, local amenities, financial products, civic activities and access to information, decent housing and public transport, cultural activities, and common consumer goods.The report also reveals:* Rates of exclusion from decent housing and public transport and exclusion from local amenities rose sharply between 2002 and 2008 among the population aged 50 and above as a whole – by over five per cent to approximately sixteen per cent.
* As people age, they are more likely to become more socially excluded than less– 23.9 per cent of people became more excluded between 2002 and 2008.
* Almost two-fifths (38%) of those aged 85 and older were excluded from two or more domains of exclusion in 2008 – this compared with one-in-eight (12.4%) of those aged 60-64 years and one-in-six of the total sample (16.9%).

The report highlights how an older person’s demographic, socioeconomic and health characteristics were associated with whether or not they were socially excluded. For example:* Older men were significantly more likely to be excluded from social relationships while older women were more likely to be excluded from cultural activities.
* Being non-white was associated with a higher risk of experiencing some form of exclusion compared to being white (59.8% compared to 47.3%). Older people from ethnic minorities in particular were more likely to be excluded from financial products, such as private pensions and life insurance.
* Wealthy older people are much less likely to be socially excluded than their poorer counterparts - with almost two-thirds of older people in the highest quintile of income were not excluded in any form compared to less than two-fifths of people in the lowest quintile (64.3% versus 38.7%).
* Becoming a care giver between 2002 and 2008 was associated with a two fold increase in the odds of becoming excluded from two or more domains of social exclusion between 2002 and 2008. Those who assumed care-giving duties between 2002 and 2008 were more likely to become excluded from civic activities and access to information, excluded from decent housing and public transport, and excluded from common consumer goods.
* Those who moved from living alone to living as part of a couple (with no children) exhibited a 68 per cent reduction in the odds of becoming multiply excluded (excluded on two or more dimensions) between 2002 and 2008 compared to those who stayed living alone; conversely, those who moved from being resident in a couple household to living alone were over three times more likely to become multiply excluded over this period. For this age group (50+), becoming a widow is one of the most common reasons for starting to live alone.

Baroness Sally Greengross, Chief Executive of ILC-UK said: “Older people approaching retirement (50-54) appear to be worse off in 2008 compared to 2002. Whilst policy-makers have identified the squeezed middle classes as an at risk group, the squeezed middle age group is another at risk group. This report highlights the importance of taking a life-course approach to ageing. We need to intervene earlier to prevent social exclusion later in life.”Michelle Mitchell, Charity Director of Age UK said: “While this report is welcome, it would be interesting to know more about why levels of social exclusion are rising for people in their fifties, something which the next wave of ELSA data might help us understand. For many being socially excluded can lead to feelings of loneliness which research shows has a significantly adverse effect on physical and mental well-being, equivalent in some studies to well established risk factors such as obesity and smoking.”Dr Dylan Kneale, Head of Research at ILC-UK said “This report reveals the importance of helping older people access opportunities across a range of domains. We found that becoming excluded from social relationships, civic activities and access to information, cultural activities, and local amenities was associated with a lower quality of life, which in turn could have implications for older people’s health and other outcomes.”In the report ILC-UK calls on the Government to:* Allocate the task of measuring and developing strategies to overcome material and non-material disadvantage a specific team within government.
* Shift the focus of government policy on ageing towards prevention. ILC-UK argues that Government should focus on ‘ageing policies’ rather than ‘older people’s policies’ in order to tackle increasing exclusion among middle aged people
* Develop a widowhood strategy.
* Better develop outreach provision to reach the hardest to reach before crises occur.
* Improve planning of neighbourhoods for people of all ages to reduce levels of exclusion from local amenities and decent housing and public transport.
* Provide additional support for carers and reduce gender inequalities in social exclusion through the expansion of existing intervention programmes.

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