

Ageing well

Introduction



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Introduction

People are living well for longer and, for the first time in history, most people can expect to live well into their sixties (World Health Organization, 2018). In the UK, nearly 1 in 7 people are expected to be over 75 years of age by 2040 (Government Office for Science, 2016) and, by 2030, 1 in 6 people worldwide will be aged over 60 (World Health Organization, 2021).

Population ageing is a 'human success story' and something to be celebrated. It reflects the incredible progresses made in medicine, public health, and economic and social development (United Nations, 2019). The increase in the older population is occurring at an unprecedented pace and is likely to accelerate in the coming decade, impacting people of all ages (United Nations, 2019). It will require changes in terms of how society is structured and operates across a range of sectors - including health, social care, housing and urban planning (Robinson et al., 2020). The scale of the change required is brought into sharp focus here, so that the emerging needs, interests and aspirations of the next generation of older adults are adequately responded to.

The need to fundamentally rework how we think, feel and act towards ageing and age is crucial to responding to these impending changes, and meaningful opportunities must be created so that everyone, of all ages, is enabled 'to be and do what they value throughout their lives' (World Health Organization, 2021, p. 4). A future with increasing numbers of people in later life is shaped by how people respond now, in the current moment, both as a collective of people working across adult social care, and as a society more broadly.

With these things in mind, this evidence review is a call to action, to mobilise people to build an adult social care system that is better equipped to meet the needs of the next generation of older adults, in a way that is more inclusive, creative, rights-based, and representative of a more diverse range of people and identities. Most importantly, it should be led by older adults themselves (Ambition for Ageing, 2019; Ward & Barnes, 2016; World Health Organization, 2021).

The key messages elaborated in each of the themed chapters of this evidence review gain even more salience when considered against the backdrop of the Coronavirus (Covid-19) pandemic. It is therefore important to acknowledge the context in which this review has progressively taken place. Writing for this review began prior to the pandemic when many of the issues discussed were already pressing. However, the recent outbreak has exposed the need to improve the state of ageing in the UK (Centre for Ageing Better, 2020c). It has also emphasised the importance of strengthening the way we work to engage and support people in later life so that the future of adult social care is co-produced with older adults themselves (Ageing Better, 2021).

Covid-19

Emerging evidence illustrates how far Covid-19 has deepened existing social inequalities, particularly those of health, with the largest disparity being age (Centre for Ageing Better, 2020b). Some authors suggest measures implemented by the UK Government, particularly during the early stages of the pandemic, did not go far enough in tackling existing inequalities (Wright et al., 2020). The pandemic has shone a light on society's ageism (Colenda et al., 2020; Fraser et al., 2020; Morrow-Howell et al., 2020), and in some cases promoted age discrimination in policy (Ehni & Wahl, 2020; Lichtenstein, 2021).

It has also led to the proliferation of harmful social media hashtags such as 'boomer remover' (Fraser et al., 2020; Lichtenstein, 2021; Meisner, 2021), signalling the extent to which older adults have been misrepresented and undervalued in the dominant public discourse during the pandemic (Fraser et al., 2020), therefore emphasising the importance of raising awareness about, and challenging, ageism (Meisner, 2021).

Research demonstrates how ageist attitudes can contribute to poorer physical and mental health, and a reduced quality of life for older adults, costing societies billions every year (WHO, 2021). Ageism manifests in different ways across the life course and it often intersects with other forms of discrimination such as racism, sexism, transphobia or homophobia (Monahan et al., 2020; WHO, 2021).

It also represents a significant barrier to implementing new measures aimed at increasing and promoting healthy ageing among the population, and can be a source of stress for some older adults (Bergman et al., 2020; Vauclair et al., 2015). Measures taken to challenge ageism and negative stereotypes about age, as well as steps to address socioeconomic imbalances in later life are therefore likely to improve the healthy ageing of everyone (Bryant et al., 2012; World Health Organization, 2021, p.5).

The longer-term effects of the pandemic will continue to be felt across all parts of society during the course of the next twenty years as more people reach later life (Centre for Ageing Better, 2020b). However, in the short and medium term it is clear that the life trajectories people follow into later life are strongly influenced by local and global events - as demonstrated by the Covid-19 pandemic, as well as other key factors such as climate change (World Health Organization, 2021).

Many people delay planning or even thinking about later life. But it is during younger years that people are increasingly called upon to consider how they want to live as they grow older, as well as to consider what living ‘well’ might entail. This could mean thinking about how to keep healthy and active; recreation and ways to spend our time; about friends and family or expectations around sexuality, gender identity or intimacy; how, where and with whom people want to live; or about managing finances. It also includes thinking about any care expectations should care be something which is required in later life.

Decisions made about these things and how they are approached are instrumental in the shaping of health and social care policy and provision, the housing landscape, as well as the ways in which technology is developed and harnessed to respond to the needs and aspirations of the next generation of older people, in the here and now.

‘Baby boomers’: The next generation of older adults

The chapters of this review explore some of the most significant and emerging issues currently facing the adult social care sector as it seeks to adapt to rapid shifts in societal, cultural and technological norms, as well as the growing impact of the pandemic. The next generation of people, on the threshold of later life, are the post-war ‘baby boomers’. The term ‘baby boomer’, in the UK context, can be roughly defined as the generation of people born between 1946 and 1964.

Immediately after the Second World War, the UK saw a significant increase in births in 1946, before dropping again. The post-Second World War babies then had children of their own in large numbers, leading to another sharp spike in births, which continued well into the 1960s (Young & Tinker, 2017b). This high number of post-war births, combined with a prolonged ‘baby boom’ during the 1960s, meant there was a large cohort of people of similar age in the UK population. In 2019, people born between 1946 and 1964 were aged between 55 and 73, and accounted for nearly 14.3 million (21.3 per cent) of the UK’s population, making it the largest generation at the time (Park, 2020).

Research indicates that the baby boomer generation do not tend to identify with their parents’ generation and, instead, have a more youthful outlook which shapes how they envisage their future needs and preferences (Young & Tinker, 2017a). They are a demographic typically defined by higher levels of education than the generation before them, greater technological proficiency and engagement, and longer working lives (Young & Tinker, 2017a).

The baby boomers also saw the introduction of the UK's first welfare system, as well as the mass building of affordable, council provided accommodation during the 1950s and 1960s (Hoolachan & McKee, 2019). Data from the Office of National Statistics (ONS) indicates that women born during the 1960s are twice as likely not to have children as those born the generation prior to them (Storey, 2020). Population projections for England¹ predict that the majority of household growth over the next ten years will be due to an increase in older households without dependent children, particularly for those households headed by people aged 75 years and over (Nash, 2020).

Adult children tend to be the most common providers of informal social care to parents in later life when care is usually most needed (Storey, 2020). Personal care needs are expected to rise with population ageing, with evidence indicating that baby boomers' expectations around future care are strongly shaped by their earlier health and life experiences (Stafford & Kuh, 2018). Without any children, this group of people may be more likely to rely on formal care provision if they need it, therefore potentially increasing the demand on adult social care in the future.

With these factors in mind, this evidence review invites readers to rethink the ways in which adult social care operates today, and in the future, in order to meet the evolving and diversifying needs of this generation of older adults - as well as to look beyond the more 'traditional' responses to care and support in later life. This includes reimagining the ways in which we understand the norms and standards which structure people's lives as they grow older.

The shifting meanings of 'older age' and ageing 'well'

Questions regarding what it means to be grow 'older' are central to this review. How we think about and understand 'older age' is varied, and the definition of the 'older person' also varies dependent on the sector or the issue being considered. What it means to age 'well' or 'successfully' is also subject to debate, with some models of 'successful' ageing criticised for being too narrow or overly fixed on notions of able-bodied wellness, social engagement or physical activity (Martinson & Berridge, 2015; Westwood, 2019). This has prompted calls for a more holistic, inclusive understanding of ageing well which allows for a more expansive understanding that includes a broader range of ageing bodies and identities (Westwood & Carey, 2019).

However, the sense that life is worthwhile or meaningful is fundamental to every person's subjective wellbeing, regardless of age (Vanderweele, 2017). Research shows that people evaluate their life as meaningful according to a range of different factors, including having strong personal relationships, social and civic engagement, and better mental and physical health, irrespective of gender or socioeconomic status (Steptoe & Fancourt, 2019). Crucially, research indicates that feeling like life is worth living and filled with meaningful activities can promote healthy ageing, help sustain social relationship and enable people to optimise their time in later life (Steptoe & Fancourt, 2019).

1 Similar data is not available for the other UK nations.

Inequalities and diversity

Social psychologists Daatland and Biggs' (2006) assertion fifteen years ago, that a recognition of diversity is necessary to understand contemporary ageing remains equally, if not more, salient today. People are no more homogenous as they age than they are in earlier life - with needs, aspirations, interests and identities that are varied and complex. Peoples' diverse characteristics shape their needs and expectations for care and support as they grow older.

Yet there remains a sustained lack of attention paid to diversity in later life, with ageing typically examined and understood through a singular lens in which there is the embedding of normative perspectives and expectations (Westwood, 2019). There is also a lack of evidence with regards to the inequalities experienced by Black African and Caribbean heritage older adults, those from Asian backgrounds as well as other minoritised communities. Lesbian, gay, bisexual and transgender older people and those with disabilities are similarly underrepresented in the available research (Centre for Ageing Better, 2017).

This underscores the need for expanding research in this area and serves as a reminder that society must adapt and respond to issues of inequalities and diversity in later life, as well as understand the drivers and symptoms of inequalities and discrimination as people grow older, including those of gender (Kirkman & Fisher, 2021; Wildman, 2020). A failure to address inequalities 'risks a future where even a smaller group of people experience a good later life' (Centre for Ageing Better, 2017, p. 3).

Adult social care has an important role to play in this. This review seeks to acknowledge the intersectional nuances and complexities of ageing, and encourages readers to think beyond stereotypical responses to age and ageing, which are often structured according to a mainly white, heterosexual, cisgender norm. The themed chapters offer creative and diverse solutions, challenging these taken for granted norms and ideas.

Chapter themes

Drawing together work from academic and practice experts, this evidence review provides a critical overview of the current debates and evidence regarding the role of adult social care in working with older adults to develop and deliver care and support. It seeks to identify ‘gaps’ in current practice, while also looking forward to future framings of adult social care in relation to the four main themes addressed within it.

The review utilises research to equip those working in adult social care with knowledge to develop and shape provision which is more forward thinking, dynamic, innovative, inclusive and fit for purpose - while also promoting the full and active citizenship and wellbeing of adults as they grow older, in new and creative ways. It also aims to highlight the impact of policy, research and practice on the lives of older adults and, wherever possible, centres their voices, perspectives and aspirations within the context of the four main themes it addresses – which are set out below.

Housing solutions for later life

Population ageing means there is greater demand for more variety in the available housing options, which extend beyond the traditional choices of ‘staying put’ or moving into specialist housing or residential care (Robinson et al., 2020, p. 345). With a population projected to have 1.42 million households headed by someone aged 85 or over by 2037 (Park, 2020), housing must also be designed in way that can adapt and respond to people’s changing needs over the life course. This could also give rise to more innovative housing solutions that enable people to remain independent in their homes for longer in order to alleviate the pressure on social care (Young & Tinker, 2017a).

Chapter 2 explores these key issues as it foregrounds the complex decisions older people may be increasingly required to make with regards to their housing and care in the future. Drawing on available evidence, it discusses well-established but under-utilised housing solutions, as well as newer, lesser known approaches to living and the various ways in which they may serve to address older adults’ emerging care and housing needs and aspirations. In so doing, the authors invite readers to look forward to the future and to imagine what alternative models to living might look like, as well as how these might fit into the existing UK housing structure, and housing and care policy frameworks.

Sex, relationships and intimacy

Research indicates that sexual expression, intimacy and relationships remain integral to people's identity throughout the life course, and sexual and gender identities are formed from childhood to older age (Carpenter & DeLamater, 2012; Rahn et al., 2020). Chapter 3 provides an overview of the diversifying and emergent needs of the next generation of older adults in relation to sex, intimacy and relationships, foregrounding the importance of acknowledging and nurturing these according to older adults' wishes and expectations. The chapter also discusses the complex ways in which relationships and sexual or gender expression can be compromised by stigma and pervasive ageism in society, negatively impacting upon the health and wellbeing of people in later life.

The chapter foregrounds the key role adult social care occupies in supporting and enabling relationships and in nurturing older adults' choices around sexual and gender identity, as well as issues of complexity, including sexuality and mental capacity, and sexual violence. It explores the implications for practice so that practitioners are equipped to positively respond to the diverse and changing needs of older adults in relation to this domain of practice, including for those who reside in residential care settings, while addressing the intersections of gender, sexuality, race, ethnicity, religion and culture. In this, the chapter provides an insight into how dominant ideas about sex and relationships, combined with a lack of recognition of diversity in relation to gender or sexual identity among older people, can shape the support and care offered to them.

Alcohol and other drug use in later life

In the UK, people aged 65 to 74 are the only age group for whom daily alcohol consumption is increasing (Wadd et al., 2017), and older adults now make up a higher proportion of those who consume alcohol and other drugs, in comparison to previous generations. During the UK lockdowns 3 in 10 adults aged 50 to 70 reported drinking more, citing anxiety or loss of purpose (Centre for Ageing Better, 2020b). One of the biggest challenges for addressing and responding to alcohol and other drug use among older adults, is ageism (Wadd et al., 2017), with many experiencing social and system barriers to disclosure or help-seeking (Wadd & Dutton, 2018). This is coupled with the common misconception that drug use occurs among younger people, and not in later life (Wadd, 2014).

Alcohol and other drug use in later life is therefore an increasingly important issue for those working in adult social care. This chapter considers the implications of alcohol and other drug use in later life for those working in all areas of adult social care, including how the needs and preferences of older adults who use alcohol and drugs might be most appropriately met by social care providers in a manner that respects individual entitlements, rights and safety. The chapter underscores the need for more age-nuanced, inclusive policy, provision and research, and emphasises the value of multi-agency collaboration in order to better support people who use alcohol and other drugs in later life.

Digital technologies and innovation for older adults

The coronavirus pandemic has exposed the scale of the UK's digital exclusion (Serafino, 2019) and led to the rapid deployment of a range of technological resources to mitigate the negative impacts of public health measures. But, while the numbers of people with internet access has grown as a result, and the pandemic has prompted more people to use digital technology, a significant proportion of older adults have still never used the internet, with 5 million people aged over 55 not online (Centre for Ageing Better, 2020a).

The last chapter in this review provides a critical overview of the current and emergent issues in adult social care in relation to the use of business and technological innovation to meet the diversifying needs of a new generation of older adults. It considers recent advancements in care technologies, and how these might be leveraged in adult social care practice, while also discussing the opportunities and challenges of ensuring older adults are 'digitally included' and meaningfully involved in the development and use of technology in adult social care. Readers are encouraged to look forward to how innovation and technology solutions might be used in adult social care practice in the future, in order to enhance care provision for people in later life and ensure no one is left behind in the digital age.

Looking forward

Together, all four of the themed chapters serve as an important reminder that older adults, much like the rest of the population, wish to receive care, housing and support services that recognise their lives, their histories, their complexities and their diverse needs and identities (Tonic et al., 2020). This evidence review is a call to action, to challenge ageism and harmful stereotypes about ageing in all aspects of adult social care practice, and to initiate, continue and sustain changes so that the adult social care sector is better equipped to meet the emerging and diverse needs of the next generation of older adults.

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in practice

Ageing well: Evidence Review

Introduction

At Research in Practice, we bring together academic research, practice expertise and the experiences of people accessing services. We then apply this knowledge to develop a range of resources and learning opportunities, as well as delivering tailored services, expertise and training.

We work closely with professionals across the children, families and adult sectors to ensure our work is truly sector-led and responds to the most pressing issues.

Our Ageing well Evidence Review series of publications examines the evidence regarding the ways in which ageing is diversifying amidst changing social norms. The ways in which adult social care might respond to the needs of a 'new' generation of older people are explored and reconceptualised, while centring the perspectives and interests of this demographic.

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