

# Report on the Quick Scan of Policy and Research documents on empowerment and participation of older people in the United Kingdom

## European Project:

*"From Isolation to Inclusion: Promoting Innovation in Re-integrating  
Older Citizens into Community Life"*

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## 1. Introduction

The European Project “From Isolation to Inclusion: Promoting Innovation in Re-integrating Older Citizens into Community Life” is aiming to (further) develop measures that enable groups of older men and women at a multi-dimensional risk of social exclusion to fully participate in community life. As a first step this report gives a brief overview about recent UK policy and research documents dealing with social exclusion. The review is designed to find out whether the topics “empowerment” and “participation” of older citizens are covered comprehensively in national documentation. Apart from providing background knowledge about the political and theoretical discussion, the aim is to identify concrete initiatives and innovative ideas that promote empowerment and participation of older citizens in the UK.

## 2. Policy documents under review

The following policy documents have been reviewed:

### 2.1 UK National Action Plan on Social Inclusion (UKNAP)

The plan outlines the most important issues for the UK in the fight against poverty and social exclusion from 2003–05. Tackling poverty and social exclusion is primarily the responsibility of central, regional or local UK authorities, and while the development of UKNAP helps support that agenda, it also adds to the work that has been underway nationally since 1997. UKNAP comprises a strategic overview, discusses key trends, risks, indicators and targets. It addresses responses by Government and elsewhere, analyses relevant institutional arrangements and relationships and reports on good practice.

Poverty and social exclusion are complex and multi-dimensional problems. While household income clearly has an important impact on the elderly, there are many other factors that can help or hinder efforts to transform the lives of those suffering from poverty: housing, health, neighbourhood crime, education and employment status. In the UK, about one in five pensioners are in low-income households and are more likely to live in substandard accommodation. Fear of crime and difficulties with transport may also affect older people more than others. Older pensioners can face particular challenges: over-75s are at a significantly higher risk of low income. The support received from public services is crucial in protecting many older people in the UK from social exclusion.

**Tackling Poverty:** The strategy is to target the poorest pensioners, but to ensure a balance between providing a solid foundation of support for all, while targeting support for those who need it most. The UK NAP also reports on strategies to develop the social care available to the elderly, particularly pressing in the light of demographic trends. The aim is that all pensioners should have a decent and secure income in retirement, and it focuses help on those who need it most. Existing policy measures are (a) a

**Basic State Pension;** (b) a **State Second Pension** for those on lower incomes (also helps provide for carers and the disabled); (c) a **Minimum**

**Income Guarantee**, creating a new higher income threshold below which most pensioners with little or no savings should fall; (d) **Winter Fuel Payments** for households include people over 60; and (e) **Pension Credits** that make it easier for people to apply.

**Long-term care for the elderly:** Older people have specific care needs, and demographic trends make this an increasingly important issue for the social agenda. Reforms will guarantee faster access to a wider range of services for older people, with greater choice. Stability is being brought to the care home sector by giving local authorities resources to pay higher fees, along with action to ensure that new standards are implemented appropriately and do not drive existing good homes out of business. And more elderly people, who choose to do so, will be supported to continue to live in their own homes. Nursing care is also free for people of all ages in care homes.

**Institutional arrangements:** The multidimensional nature of social exclusion requires a broadly based response. In the UK it is important to note the role played by the devolved administrations, which in this report, has been integrated with discussion of central government action, but these are couched in general exclusion terms and do not focus on the elderly.

**Monitoring, evaluating implementation and developing the NAP:** National Government, with representatives of non-governmental organizations (NGOs), local government and others, including people with direct experience of poverty, support work in this area. There is regular dialogue between officials and civil society representatives, and a working group is looking at both ideas for increasing participation in the current NAP as well as looking forwards, acknowledging that establishing a culture of community participation will take time. Reflecting the importance of the fight against social exclusion, a wide range of public authorities consciously embeds activity to promote inclusion throughout their work. At the more strategic level, central government and devolved administrations illustrate how they are tackling poverty in a series of annual reports. The UK Government produces *Opportunity for All* (see 2.2 below), which includes challenging indicators of progress and detailed analysis of poverty issues. The UK Government also looks forward to further developing links with all those with an interest in the NAP. This will include both those focusing on the strategic level and those with a more subject-specific interest. Importantly, it is anticipated that this will also include input from people with direct experience of poverty.

## **2.2 Opportunity for All – Seventh Annual Report 2005**

*Opportunity for All* sets the strategy for tackling poverty and social exclusion. It also establishes the **indicators of progress** against which success would be measured. The aim is to achieve a fairer, more inclusive society where nobody is held back by disadvantage or lack of opportunity. It recognizes, for example, that there are important links between poverty in childhood and lifelong disadvantage. It also states that those

approaching retirement have a right to expect security and decent support when they are in need, but they are also expected to save and prepare for retirement. The Government aims to support people to make informed decisions for themselves about work, saving and retirement. This is a growing challenge as the UK population projections suggest that the number of people aged between 50 and 69 will increase from 13 million to around 16 million by 2025. The strategy to meet these new challenges is based on combating poverty and ensuring financial security in retirement; enabling future generations of retired people to make real and informed choices on working and saving; increasing employment opportunities for people aged over 50; improving security and bolstering confidence in occupational pension schemes; and improving the standard of public services for people approaching retirement.

#### **Progress so far:**

***People Aged 50+:*** The Pensions Act 2004 strengthens the UK's system of pension provision and to empower people to plan, work and save for retirement. Link-Age was established in 2004 to support a better integration of healthcare, housing, delivery of benefits and social care.

***Retired people:*** Poverty among people of retirement age has fallen and there are 700,000 fewer people of State Pension Age living on relative low income than in 1997, lifting about two million older people out of absolute low income.

**Looking forward:** The Government will endeavour to ensure that people are empowered to make sufficient provision for their retirement, including work with pension providers and employers to evaluate techniques to maximize membership of workplace pension schemes. To enable people to prepare for a secure retirement it will also give people the choice and opportunity to work longer, enabling those who want to, to extend their working lives; and extend Link-Age and pilot a Link-Age Plus service. It is essential to continue to tackle poverty among those of State Pension Age by looking at ways to ensure that all those in retirement who are entitled to Pension Credit receive this support.

**Summary:** Poverty and social exclusion are deep-rooted problems that take time and effort to tackle. Significant and sustained progress has been made and **indicators** identify where progress has been made and those areas where we still have more to do. Many of these problems are engrained and the Government is committed to a long-term strategy that results in real and lasting change to help individuals and communities take control of their lives and to break the intergenerational cycle of poverty and deprivation.

### **2.3 Breaking the Cycle (2004)**

This report takes stock after seven years of the formation of the Government's **Social Exclusion Unit**. Based on research and analysis it outlines: the progress made in tackling the causes and consequences of social exclusion; the challenges that remain and those that might arise in the future; the lessons learned about delivering services to disadvantaged people; and, the priorities for future action. It explores what drives social

exclusion, including those factors that transmit poverty and disadvantage from one generation to the next. It outlines the Government's strategy since 1997, identifies the main groups at risk and assesses the scale of the problem.

The report stresses that **social exclusion** is about more than income poverty. It is a term for what can happen when people or areas face a combination of linked problems such as unemployment, discrimination, poor skills, low incomes, poor housing, high crime, bad health and family breakdown. These problems are linked and mutually reinforcing so that they can create a vicious cycle in people's lives. Social exclusion is a consequence of what happens when people do not get a fair deal throughout their lives, and this is often linked to the disadvantage they face at birth. The main causes and consequences of social exclusion are poverty and low income, unemployment, poor educational attainment, poor mental or physical health, family breakdown and poor parenting, poor housing and homelessness, discrimination, crime, and living in a disadvantaged area. It acknowledges that while the risk factors for social exclusion tend to cluster in certain neighbourhoods, not everybody at risk lives in a deprived area.

Poverty and social exclusion can also pass from one generation to the next. However, poverty, unemployment and material hardship are declining and look set to continue moving in this positive direction into the next two decades if the UK continues to benefit from a stable and growing economy. Nevertheless, the report asserts, there are demographic, economic and social trends that may alter the prevalence and nature of social exclusion in the future. The ageing population is likely to present new risks for social exclusion and new policy challenges, including higher demands for care. New technologies offer the potential for services to tackle social exclusion better but they also have the potential to create a digital divide.

#### **2.4 The Impact of Government Policy on Social Exclusion among older people: 4/2004 (ODPM)**

The paper states that developing policies to combat social exclusion has been an important element of Government policy since 1997. Initiatives have been undertaken targeting poverty and exclusion affecting older people. These initiatives – set out in documents such as the Department for Work and Pensions' annual *Opportunity for All* reports (see 2.2 above) – have been part of a wider debate about the meaning of social exclusion as a concept, and in particular the relevance of its application to groups such as elderly people. The review examines available research evidence on the effectiveness of policies aimed at limiting the impact of social exclusion in old age. The aims are: first, to examine the success of policies designed to tackle social exclusion in old age; second, to consider whether the evidence suggests some policies have been more successful than others; and, third, to identify factors that may either assist the development or create obstacles to the implementation of effective policies. The report examines the background to issues relating to social exclusion in old age; identifies the range of policies used to tackle exclusion; and considers evidence about the impact of policies designed to integrate older people into social and community life. It identifies four

groups of conditions that might cause exclusion: **Age-related characteristics** refer to the way in which older people are disproportionately affected by certain kinds of losses or restrictions relating to income, health or reduced social ties; **Cumulative disadvantage** refers to the way that the same birth cohorts may become more unequal over time; **Community characteristics** highlight the way older people, who may have strong attachments to their locality, may also be vulnerable; and **Age-based discrimination** refers to the impact of ageism within economic and social policies that contributes to various forms of social exclusion in old age. The selection of policies to be studied for the review was guided by the adequacy of research data and relevance to the social exclusion debate. Thus, the review addresses 19 policy areas grouped under four broad headings that can be linked to the drivers of social exclusion in later life outlined above:

**Policies relating to income (age/cumulative disadvantage):**

• Minimum Income Guarantee. • Housing Benefit; • Council Tax Benefit; • Attendance Allowance and Disability Living Allowance (including Carer's Allowance); • Social Fund (including Winter Fuel Payments and Cold Weather Payments); • Direct Payment and Universal Banking Services; • Warm Front.

**Policies relating to health and social care (age/cumulative disadvantage/age-based discrimination):**

• Community Care policies; • Health Action Zones; • NHS Direct; • Care Direct.

**Policies relating to urban and neighbourhood renewal (community characteristics):**

• Neighbourhood Renewal Fund; • New Deal for Communities; • Community Empowerment Fund; • Home Improvement Agencies.

**Policies relating to crime (community characteristics):**

• Reducing Burglary Initiative • Neighbourhood Wardens • Locks for Pensioners • Distraction Burglary Task Force.

**Key findings:** Evidence suggests that the impact of Government policies on social exclusion has been uneven. Its policy has been more successful in addressing exclusion based on age-related characteristics and age-based discrimination. By comparison, exclusion driven by cumulative disadvantage and community characteristics has proved more difficult to tackle. The review recommends consideration of three types of policy development:

- the impact of new types of poverty and social exclusion which emerge in old age needs to be monitored against existing policies;
- the scope of community care policies need to be broadened to embrace the social exclusion agenda more effectively; and
- the next phase of the social exclusion debate needs to acknowledge the complex differences between groups and the implications of this for new forms of social exclusion. In all areas, certain groups still remain excluded from key services and benefits. However, the differences between and within groups – such as minority ethnic groups, those with mental health problems, or people with disabilities – can be large.

## **2.5 A Sure Start to Later Life: Ending Inequalities for Older People: 1/2006**

The experience of exclusion is not unique to older people – it affects people of all ages. However, exclusion can be particularly acute in later life for three reasons. First, it is all too rare that people who are excluded in mid-life are able to break the cycle of exclusion in later life; indeed it can often become more acute. Secondly, the impact of key life events, such as bereavement, can lead people to become excluded in later life. Thirdly, the impact of age discrimination on both the aspirations of individuals and the environment within which they operate can lead to exclusion. Too often this exclusion is compounded by the failure of services to react to the complexity of exclusion in later life. This is why we need a more responsive model for services for older people that addresses these needs.

### **A Sure Start to later life**

Sure Start was created for children and families living in disadvantaged areas to access education, care, health, family support and other services in one place. Part of its success comes from **locating a single, accessible gateway** to wide ranging services in the community, where potential problems are identified quickly and prevented from becoming worse. **Older people** also highlighted the importance of a full range of services being delivered locally and in one place – rather than being pushed from pillar to post by service providers. The Sure Start approach would use the same methods to improve access, bringing together services around older people. It will not be just about better social services, which is often seen as the service responsible for older people, but comprehensive services that can empower older people and improve quality of life. The Sure Start approach is designed to address this and is part of building inclusive communities where older people themselves are leading change.

Figure 1: A Sure Start to later life – improving participation and prevention



**The individual:** There is a range of policy changes that could make a significant difference to individual older people. No older person should be forced to live in poverty in the 21st century. The take-up of entitlements such as **Pension Credit, Council Tax Benefit, Housing Benefit and Attendance Allowance** must be further improved, the aim being to make entitlements as simple and automatic as possible. Older people should have access to a fair and transparent health and care service where they can be treated with dignity and respect. More capacity will be built into services, and they will be made more responsive to the needs of individuals, more accessible to communities and preventative approaches will be boosted. Health and social care services need to be underpinned by high quality information and joint working between services. The need for and benefit of preventative services has been highlighted throughout our consultation because there is a need for a range of interventions later in life such as ensuring that older people are targeted with active ageing opportunities.

**Social relations and participation:** Some events and personal situations can lead to loss of role and loss of participation. It is clear that issues of social isolation and loneliness cannot be solved at national government level alone. Addressing social exclusion amongst the most excluded older people has to be everyone's responsibility. Individuals, families and communities therefore need to consider the extent and cause of social isolation in their areas and consider developing the most appropriate interventions. Everyone – family, neighbours, pharmacists, GPs, carers and shopkeepers and older people themselves – must act to ensure that isolation amongst older people is reduced. Opportunities for leisure and learning and volunteering have been shown to be vitally important for older people, as they are for everyone.

**The home:** The home is critical to older people wishing to maintain their independence and a decent quality of life. There is scope for action to ensure that older people are enabled to remain active and independent for as long as possible, that older homeless people with high levels of specialist care needs are appropriately accommodated and that repeat homelessness is prevented. For those older people who wish to remain in their homes, there is a need for the provision of high quality adaptation services at a local level. The lifetime use of a home should be taken into account when it is built or when renovations are undertaken and this will minimise, over time, the need for some types of adaptation – including the most expensive types of access modification. Regardless of their tenure type, fire safety and accident prevention is a critical issue for older people who must have access to services which can prevent accidents and fires in their homes, and that service providers' work together to identify those most at risk.

**The local area:** In an aging society, the interdependence between older people and their communities will be realised. Older people need to feel empowered to contribute and participate, for their benefit and for that of society. The design of towns, streets and homes can make a huge difference to the ability of an older person to spend time safely and participate in their local community. Policy, planning and local strategies on regeneration and crime need to take older people and their needs into account. Older people's role in helping to build cohesive communities needs to be acknowledged. Many older people have reported the impact that the **Neighbourhood Wardens Scheme** has made to their lives in reducing their fear of crime, sorting out community problems, identifying excluded older people and ensuring that older people feel safe to walk in their communities. Older people have told us clearly that they value flexible, individualised transport services which can allow them to retain their independence within their local community. In some areas there is a clear need for mainstream transport services to be made more accessible. We believe that flexibility of **concessionary fare** schemes and the **blue badge** schemes needs to be considered for the most excluded older people to be able to access the transport that they need.

**Wider society:** Much could be done both at a national and local level to ensure that our society is one that respects the rights of older people and treats them and their families with dignity. From 1 October 2006, age discrimination in terms of recruitment, promotion and training will be outlawed. Within government there is also much that needs to be done to ensure that the profile of older people is raised. The Government has already formed a Cabinet Committee to deal with all issues facing an ageing population. An Office for Older People and Ageing including the planned Observatory for Ageing will be considered, to support the Minister for Older People in their work.

### **3. Research documents under review**

#### **3.1 Global Aging Program: International Retirement Security Survey: 7/2005 (AARP)**

Global increases in longevity and rising health care costs mean that government spending for retirement and health programmes will put increasing pressure on government budgets. The findings of this survey show that people in ten developed countries view their retirement with guarded optimism. A surprising number, however, have given their retirement little or no thought and a large proportion do not feel very well informed about the things they need for a happy and successful retirement. Many people polled in the study also expect that public pensions and health care benefits will play a primary role for their retirement security. Yet, they lack confidence that their governments will be able to provide these benefits in the future. Many are therefore not confident that they will have enough money to live comfortably through retirement.

The study shows that while attitudes towards retirement differ considerably from country to country, there are some areas of consensus regarding the challenges. While the findings reveal substantial challenges, they also suggest potential remedies. Large percentages of adults in all countries expect some level of work to be a part of their retirement years, so increased opportunities for the employment of older people could benefit both older people and the economies in which they work. Respondents also see more taxes from higher income people to support public pension systems as an acceptable remedy to the fiscal strains these systems face. And, finally, the lack of information noted by many respondents represents an opportunity for public education campaigns to help individuals better prepare for their retirement.

The overall challenge for all governments will be to make a genuine effort to promote greater understanding of retirement security issues, open a real debate, engage their citizens in finding and agreeing to solutions and to close the gaps between the current situation, the future outlook, and the preferences and expectations of their populations. While the citizens in these countries do not view government as the sole source of support for

the elderly, they still expect government to be a significant source of support in old age. Governments in developed countries need to build confidence that they will meet their future commitments by preparing now for their rapidly growing aging populations.

### **3.2 Excluded Older People (Interim Report): 3/2005**

This interim report asserts that the experience of older age should be a positive one, but acknowledges that whilst many older people enjoy the chance for more leisure, learning new things, or spending time with friends and family, others experience isolation and exclusion. Older people who are excluded are the subject of this interim report.

In the first phase of the project, older people themselves, and those who work with them, were consulted. While it observes that many services have improved, and more help is available from the benefits system, it also acknowledges that there is a further group of older people – the most excluded – for whom the improvements in service provision have not had a significant impact. The gap between those who benefit most and those not benefiting does not seem to be narrowing. It points out that the next phase of work will focus on what needs to be done about this. The consultation highlighted three key ways in which respondents say provision needs to improve if older people are to enjoy a better quality of life:

- Joined up services are key;
- intervening early is important, and investment in low level prevention can reduce costlier interventions later; and
- older people generally know what they need and want, and they should be involved in the design and – where practicable – the delivery of services.

### **3.3 Get Heard - Bringing people experiencing poverty and social exclusion into the Government's debate about tackling poverty Toolkit for Development of UK National Action Plan 2006: 11/05 (DWP)**

This toolkit was developed with the goal of bringing people experiencing poverty and social exclusion into the government's debate about tackling poverty. The NAP requires a wide and inclusive dialogue about anti-poverty policies and strategies. The toolkit was developed through a partnership of people with direct experience of poverty, voluntary and community sector organisations involved in the fight against poverty in the UK, and the Department for Work and Pensions (DWP). We believe that those with direct experience of poverty need to be actively involved in this process for the following reasons: It is a right that the voices of people with experience of poverty and social exclusion are heard. It helps ensure that people with direct experience of poverty are able to influence what the government does. Grassroots groups bring an emphasis on human dignity and universal rights. It helps promote a holistic approach to understanding and tackling poverty. The complexities of poverty will be better understood and addressed as more and different experiences of

poverty are discussed. The toolkit is a guide. It provides enough information to help group thinking about government policy and poverty and what needs to be done. It includes: background information to the NAP; information about the consultation process for the 2006 NAP; workshop formats to help groups explore a range of issues in the NAP; notes on running inclusive sessions; information sources; and toolkit evaluation and feedback forms.

### **3.4 Older People – Independence and Well-being - The Challenge (Audit Commission)**

This report summarises a series of papers that explore the nature of the change required from public services. The scope of the report is wide, so it can do no more than touch on many of the issues facing older people of all ages, from the majority who have no need for care services, but who have a wide range of other concerns, to the minority of frailer older people who may need support and care. It summarises older people's views about what helps them to live independent lives; describes the steps that some authorities are taking to develop a strategic approach to older people's independence and well-being; illustrates how a strong focus on independence can be extended to frailer older or disabled people, by developing proactive support and through the use of new; highlights the important role that carers play in enabling older people to live independent lives; and concludes with an agenda for successful achievement. The programme of work described in this report has been undertaken in conjunction with a number of partner agencies. The work has been undertaken with Better Government for Older People whose aims are to change attitudes towards our ageing population and highlight the contribution that older people make to their communities. It concludes that a new approach to older people that promotes independence and well-being demands action at many levels. Society as a whole, government departments and regulators all have a contribution to make. But local councils and their partners have a crucial role. By providing effective community leadership, the challenges of an ageing society can be turned into opportunities to deliver richer and more vibrant communities with older people playing their full part.

### **3.5 Second Blooming: Towards achieving a healthy and active mature population in the South West – Demographics and Inequalities: 7/2005 (South West Public Health Observatory)**

This report, the first in a series, on the health of mature adults (50+ year olds) in the South West, using the 2001 census, describes the demographics and their self-expressed experience of health. Some key findings are:

- The South West has the longest life expectancy rates in England (males 77.4 years and females 81.8).
- Mature adults (over 50 year olds) make up 38% (1.9 million) of the population of the South West, a higher proportion than in any other region. There are now more people aged over 50 than under 25 years in the South West, a reversal of the position in the 1970s.

The South West has a greater percentage of over 80 year olds than other regions e.g. 5.5% compared to London with 3%.

- This changing demographic profile of the region is forecast to continue over the next two decades and results from increasing life expectancy, reduced conception rates, baby boomers, and net inward migration. People aged over 50 accounted for one-third of the South West's net gain from migration flows in 2002/3.

- 64% of mature adults in the South West live in urban areas. 36% of mature adults in the South West live in "non-urban" areas, and often constitute a high percentage of these populations.

- Increasing age does not necessarily equate with poor health. In the South West even in the 85+ age group 30% claim not to have any limiting long term illness according to the 2001 census and only 30% report their health as being not good. However, there is significant sub-regional variation in the proportions.

- According to the income deprivation affecting older people index, people aged 60 and over are better off in the South West than England as a whole. It is estimated that 143,000 people over 60 live in poverty.

- There is significant sub-regional variation in deprivation in mature adults. The geographical distribution of older adults with a poorer experience of health tends to correlate with deprivation.

- There are very high numbers of mature adults living alone in some areas. For example over 45% of over 75 year olds in Bristol live alone.

- Older adults are more at risk of dying in the winter during periods of cold weather. It is estimated that each year 93% of excess winter deaths occur in the over 65 year olds equating to about 2,200 excess deaths, some of which may be avoidable. In the South West, about 6% of households are fuel-poor, and home to people over 65.

### **3.6 Multiple Exclusion & Quality of Life amongst Excluded Older People in Disadvantaged Neighbourhoods: 3/2005 (ODPM)**

This report highlights the experiences of older people whose lives are affected by multiple forms of social exclusion, and represents part of the ODPM's Social Exclusion Unit's new focus on excluded older people. Despite growing evidence of the positive impacts of a range of policies aimed at reducing the social exclusion experienced by older people, research shows that some groups of pensioners continue to be disadvantaged by poverty. Others are affected by exclusion from services, community activities, social isolation and discrimination. The report draws on in-depth interviews and case studies of excluded older people living in socially deprived urban neighbourhoods. It addresses the following questions. What are the key characteristics of exclusion faced by older people in disadvantaged neighbourhoods, and how are these identified

through individuals' narratives? How does the experience of social exclusion vary according to such factors as age, gender, ethnic origin and health status? To what extent does exclusion reflect the influence of life course factors and/or the impact of old age? Why do some people who experience multiple forms of exclusion report a good quality of life, and what are the policy implications of this?

### **3.7 State of the South West: Aging Population (SW Observatory/South West Regional Development Agency)**

The State of the South West is a comprehensive review of the South West of England's economic, social, environmental and cultural life. It describes the current position and trends. It does not seek to make policy recommendations, but rather to help set an informed context in which policy for the region can be developed.

**Ageing Population:** The South West has the oldest population structure of all the regions in England; 38% were aged 50 or over in 2004. Official projections suggest that the number of residents aged over 50 will rise by over 300,000 over the ten years, raising their share of the total population to 41%. A changing population profile will have important implications for the allocation of public funds to different services. In particular, an aging population may be expected to increase demand for a range of health and welfare-related services. Early retirement may exacerbate existing labour and skill shortages. It is important that workers approaching retirement age are encouraged to remain in work. Policies to promote lifelong learning and flexible working patterns may help to ensure older workers retain marketable skills and help older workers move into retirement gradually. Very little is known about the incomes of older people in the region although personal incomes amongst the residents aged 65 and over in the South West are broadly comparable to the England average. Ensuring older people obtain the benefits they are entitled to would help to alleviate problems associated with low income. Population ageing is likely to increase the number of single person households and so increase the demand for housing. Despite one person households increasing both overall and as a proportion, just over one-third of new homes have one or two bedrooms. Furthermore there is often little incentive for older people to 'trade down' to smaller dwellings once their children leave. These trends have important implications for the sustainable use of the region's development land.

## **4. Empowerment and participation of older people in policy documents**

### **4.1 Better Government for Older People – Excluded Older People – Summary of Consultation responses**

The report *'Breaking the Cycle'* (see 2.3 above) highlighted progress made since 1997 in addressing social exclusion but recognised that some groups still suffer from persistent inequalities. Older people are often excluded because they have too few material resources. Other factors matter too.

These include lack of contact with other people, poor access to services, and lack of involvement in civic and neighbourhood activities.

**E-questionnaire and interim report:** The views of service providers, academics, the voluntary sector and older people's groups/forums were sought to identify the issues and barriers which prevent excluded older people achieving a good quality of life. An interim report was published in March 2005 (see 3.2 above) and reflected the views collected and highlighted the areas which need improvement in order for excluded older people to achieve a good quality of life.

**Focus groups:** Focus groups were held across England to enable excluded older people to give their views on quality of life issues. These groups were mainly arranged through voluntary sector projects and older people's groups. Examples of groups consulted with include: carers of older people with dementia, ethnic minority groups, older people with sensory impairments and physical disabilities, and older people living in deprived and rural areas.

**Early results of consultation E-questionnaire:** The main barriers preventing excluded older people achieving a good quality of life have been reported as: Lack of accessible services (13%); Inadequate social networks (12%); Poverty (11%); Health (8%); Transport (8%); Age discrimination (8%). The recommendations for areas to change generally were: service delivery (the need for flexibility, joining-up, and individualised); transport; age discrimination; finances; leisure and education; funding; and housing.

*"Quality of life is about having choices. Services for older people are still often designed to suit the provider and lack flexibility"*

*"Social networks suffer as people get older and it becomes harder to make new friends. Social isolation leads to depression, loneliness, anxiety, which in turn stop people from interacting with their local community and accessing services they need."*

**Feedback on the interim report:** Feedback on the three interlinked themes highlighted in the interim report: (1) early intervention and low level services; (2) joined up and coordinated services; and (3) the importance of user involvement and choice - has been supportive. There has also been overwhelming enthusiasm for the proposal for a 'Sure Start for Older People'. (see 2.5 above). Responses to the interim report have stressed the significance of income poverty on the exclusion of older people.

**Focus groups:** The focus groups highlighted a number of areas that are important for quality of life including: good health, a decent pension, good social relations, a safe environment a decent home and being able to understand and use transport services. A lack of information was highlighted as being a barrier to accessing services and again, people had enthusiasm for a scheme that would bring services together and provide them in a way that is suitable for the individual.

*"You get your pension Monday, it pays your rent, it pays your gas, it pays your light, you go for your grocery, you come back and you have nothing again."*

*"...you want to feel that you are of some use to society. That you're not just shoved on the scrap heap and that nobody you know, that nobody cares about you or that the thing with, the things that you've done in your life the experiences that could be useful to other people are not being passed on in some way or another or helpful to other people"*

**Next steps:** The consultation results and feedback have helped to understand further what needs to change and how to improve service delivery, as well as providing examples of good practice. At the end of July we began negotiating proposed actions with other government departments. The action plan on excluded older people will be part of an integrated programme, including plans of action on disadvantaged adults who move frequently and inclusion through innovation (information and communication technologies).

#### **4.2 Better Government for Older People - SUMMARY**

*"...many older people experience exclusion affecting their everyday lives..."*

**Factors leading to Social Exclusion:** Lack of material resources; lack of contact with other people; poor access to services; lack of engagement in civic and neighbourhood activities; change of role [loss of job, family moving away etc]; drop in income; decline in health, increased falls etc; and death of carer or relative.

**Current Population Trends:** Older people on low incomes are concentrated in North East, North West, West Midlands and Greater London; and rural and coastal areas mainly affected by isolation and exclusion from services.

**Future Challenges of an Aging Population:** Public spending; impact on the national labour market; need for intensive services and financial support; higher levels of exclusion will have "considerable economic and social consequences".

**New Opportunities:** Exclusion, ill health and acute needs are not inevitable consequences of ageing; well-being and low level services and a positive approach to ageing reduce the factors leading to exclusion; early intervention can lead to greater quality of life; and creation of "enabling environments".

#### **CONSENSUS OF THE KEY ISSUES FROM CONSULTATION WITH EXCLUDED OLDER PEOPLE, AGE SECTOR ORGANISATIONS, ACADEMICS AND THE PUBLIC SERVICES**

**The Local Area:** Crime and safety; regeneration; and rural areas.

**Social Care and Carers:** Having choices; involvement in well-being services; funding for organisations that focus on excluded groups; direct

payments; budget restrictions; better information; BME issues; support for carers training and contributions acknowledged.

**Getting About (transport):** Accessibility; safety; affordability; and availability.

**Income and Employment:** Barriers to accessing benefits; low income; better and joined-up systems required; phase out traditional notices of retirement; flexible 'retirement' options; tackling discrimination in the workplace; better training opportunities.

**Equality and Diversity:** Language; lack of culturally specific services; low income; lack of training for staff; racism; homophobia; and isolation.

**Social Activity:** Social relations; social networks and involvement in the community; learning and leisure; and participation.

**Health and Mental Well-being:** Need for joint working; access to health care; older people given information; health promotion; addressing BME issues; CMHT's; and comprehensive services.

**Housing and the Home:** Repairs and adaptations; aids to daily living; Extra care provision; Being part of a mixed economy; homelessness.

**Funding and Targets:** *"The complexity of funding streams can cause real problems for innovative services...organisations devote time and energy, which could be spent delivering services, seeking funding and providing the same information to many different funders"*

**THE WAY AHEAD:.....**

**Early Intervention and Low-Level Services:** Improved access to "universal services"; better joined-up" rehabilitation services; lower levels of high cost intensive care services; provision and access to physical / practical facilities in and for the home and environment; and access to personal and social activity.

**Joined-Up and Coordinated Services:** Services which value and respect users; services proactively offered; personalised services; delivered by local people; good information; universal services; older people in control; whole-systems approach; citizenship based; and active, vibrant, intergenerational communities.

**Control and Choice:** Involving older people in decision making; direct payments; advocacy and peer support; citizenship based approach; and move away from a "bestowing" culture.

**.....TOWARDS:**

- working with older people;
- services for everyone;
- flexibility at the point of delivery;

- promotion of independence and well-being;
- respectful and transparent;
- community-driven and professionally coordinated;
- outcome driven;
- access to services for excluded older people as a **top priority**;
- services available provided by both statutory and non-statutory sectors (e.g. voluntary Sector);
- local context and local governance; and
- people choose which services are appropriate for themselves.

## **5. Empowerment and participation of older people in research documents**

### **5.1 Developing Bristol Older People's Strategy**

In December 2004 Bristol City Council's Cabinet approved a recommendation by the Select Committee "Promoting the Independence of Older People" to develop a Bristol Older People's Strategy. Meetings were held with key stakeholders prior to forming the Older People's (OP) Strategy Group. Within the council each department nominated an older people's champion to take forward this work. Membership of the OP Strategy Group will also include older people, carers and representatives from the Department of Work & Pensions, Primary Care Trusts and voluntary organisations. The work will raise the profile of older people in the city, their needs and aspirations, and will result in a more co-ordinated approach to the delivery of services.

The developing paper outlines details of current activity in Bristol. It is structured under the 7 "dimensions of independence" that were originally determined by groups of older people in consultation carried out by Age Concern and the Audit Commission. These "dimensions of independence" were then endorsed by a sub-group of the Bristol Older People's Forum as the key themes that could be used for the development of the Bristol Older People's Strategy. The "dimensions of independence" are:

- Housing and the home
- Neighbourhood
- Social activities, social networks and keeping busy
- Getting out and about
- Income
- Information
- Health and healthy living

**Housing and the home:** Provision of very sheltered housing; development of a 5 year strategy which includes targeting resources to enable more older people to retain their independence; provision of assistive technology; starting a project to explore teleshopping for older people; and development of a network of home improvement agencies.

**Neighbourhood:** Ensuring older people benefit from crime prevention initiatives. Provision of advice on avoiding distraction burglaries; learning sessions around safety for older people; providing Promoting Independence Teams to prevent admissions to hospital or long term care and increasing the engagement of local communities in supporting older people; undertaking a quality assessment on access issues to parks and green spaces; and developing methods to encourage understanding and respect between groups and to demonstrate the positive contribution of young people in their communities:

**Social activities, social networks and keeping busy:** Development of library services for those people who cannot access public libraries; introduction of reminiscence sessions in older people's homes, a reading group for visually impaired people and support for older people to learn IT skills; and promotion of physical activities for older people.

**Getting out and about:** Provision of 'real time' information at bus stops, lowered level bus platforms and raised kerbs and of bus passes for 65+ years; provision of facilities, transport and instructions to familiarise visually impaired and deaf/blind people with the city centre cultural venues.

**Income:** Provision of a financial and welfare rights service for older and disabled people who do not claim or under claim benefits for which they are entitled; and visits to older people to provide benefits advice.

**Information:** Provision of information about, and access to, social services, benefits and other resources, including an information and advice service for older people who are given the option office appointments for those who would prefer to have a face-to-face conversation.

**Health and healthy living:** Promotion of the "Walking the Way to Health" initiative in certain areas across the city to encourage older people who wish to take the first steps of rehabilitation, injury recovery and lack of fitness; promotion of community engagement; provision of guidelines to improve standards of fitness; provision of training of carers of older people; provision of a city-wide integrated Intermediate Care Service which aims to prevent hospital admissions and to facilitate discharge from hospital; improvement of services for older people with mental health problems; development of a Joint Commissioning Strategy for Services for Older People to ensure that they are cared for in the care setting most appropriate to their needs and that they receive a service as quickly as possible after a thorough assessment of their needs, including developments to achieve and sustain a minimal level of delayed transfers, an integrated falls strategy and an integrated strokes care pathway strategy and an improvement of mainstream services for older people with mental health needs; and the piloting of an automatic pill dispenser trial to enable people with memory or visual impairment to manage their own

medication, to maintain their self-esteem and dignity and to continue living at home.

## 6. Examples for initiatives to promote empowerment and participation of older people

The Government has introduced a **State Second Pension** for those on lower incomes, and also provides, for the first time, additional pension for some carers and long-term disabled people for carers and the disabled); a **Minimum Income Guarantee**, creating a new higher income threshold below which most pensioners with little or no savings should fall; **Winter Fuel Payments** for households include people over 60; and (e) **Pension Credit** that make it easier for people to apply and replaces a weekly means test with a less intrusive and burdensome method of assessment. **The Pensions Act 2004** strengthens the UK's system of pension provision and to empower people to plan, work and save for retirement. **Link-Age** was also established in 2004 to support a better integration of healthcare, housing, delivery of benefits and social care.

Bristol City has developed a programme of **very sheltered housing (VSH)** for older people, and the Council's **Supporting People Team** has developed a 5 year strategy which includes targeting resources to those older people most in need of housing related support. The council is also developing a one stop **Housing Support Register** to provide access to VSH, sheltered housing, specialist housing or floating support.

The provision of **assistive technology** including **community alarms** and various sensors e.g. falls sensors, gas monitors and flood sensors will help people maintain their independence and provide peace of mind for carers.

The Council's Social Services & Health Department and Brunel University have undertaken a pilot project to explore **teleshopping for older people** who cannot leave home to shop.

**Bristol Care & Repair** is one of a network of home improvement agencies around the country, which exists to help older and/or disabled people to live in homes that are warm, safe, secure and adapted to their needs. They offer the following services:

- **Handyperson Service** – undertaking plumbing repairs, small roof repairs etc and fit small adaptations like handrails. Labour is currently free and people only pay for the materials used.
- **Major Repairs and Disabled Adaptations Service** – advise and support people through major building work in their home and other disabled adaptations.
- **Move on Advice Service** - Caseworkers offer advice, information and support when people are thinking of moving house.

**Hospital Discharge and Admission Prevention Project** – This urgent response team works with a client and medical staff to enable a timely and safe discharge from hospital or to prevent admission in the first place.

**The Safer Bristol Partnership:** ensures older people benefit from crime prevention initiatives such as the **Bobby Van**. This responds to fear of crime amongst older people; has mapped levels of crime by ward, which can be used with demographic data to target crime reduction initiatives to older people; and is going to develop targeted communications (for professionals and for older people) to reassure older people on home safety and help them protect themselves. Trading Standards currently work with older people to advise on **avoiding distraction burglaries**. The Life Skills Centre based at the CREATE Centre runs learning sessions around **safety for older people**.

The Council's Neighbourhood & Housing Services are piloting a new approach to working with other council departments and partners to deliver **integrated services for older people**. This model aims to deliver more effective services, targeted at meeting the needs of particular communities.

There are a number of methods being used in Young People's Services to encourage **understanding and respect between groups** and to demonstrate the positive contribution of young people in their communities:

The Council's Culture & Leisure Services are working on a Quality Standard for **Physical Activity Referrals**, which will provide guidelines to improve standards amongst existing schemes and help develop new ones.

**Consultation 'Ideas Log'** prepared following consultation with older people, statutory and independent sector staff with ideas for meeting needs and aspirations in relation to preventative, community based services for older people

**Bristol Older People's Forum (BOPF)** of 3,500 members has written and presented a Bristol Pensioners' Charter, a prospectus and agenda for the Council to meet the needs of older people, covering strategic choices, local administration, access to services and benefits, health and social care, housing, the local environment, transport, crime prevention, education, employment and leisure opportunities. The Charter concludes:

*"If only one message had to go out from this programme, it is that if programmes or strategies about older people do not have the fullest possible involvement of older people in their development they are very unlikely to stand the test of time".*

BOPF is funded by Council departments and assists in consultation e.g. Equalities Team and Community Regeneration have a joint Service Level Agreement with BOPF and they are one of the key consultative bodies in terms scrutiny, service reviews etc. A Focus Group of 25 older people, drawn from BOPF, are regularly consulted on service issues and involved in service planning and development.

## 7. Conclusion

The foreword to ***A Sure Start to Later Life: Ending Inequalities for Older People*** (see 2.5 above) states:

*“A society can be judged on how it treats its older people. One goal is to tackle pensioner poverty, and a lot has been done to ensure that later life is a time of opportunity, not vulnerability. Progress has been made on poverty, equality in employment and better services, and its strategy on ageing, Opportunity Age, sets out the Government’s agenda for the ageing population”.*

The Government must focus more on those older people who experience exclusion and isolation and, as it readily acknowledges, if it can make things work for the most excluded, they will work for all older people. There is now a better, but not complete, understanding of the extent of exclusion, poverty and isolation for older people, and the Government must concentrate much more on the minority if they are at best to eradicate or at least to minimise these inequalities in later life.

Government must also lead more effectively to achieve a radical change in attitudes to ageing that are the root cause of inequalities. To this end, it must introduce and enforce effective legislative change to tackle discrimination and promote equality. It is understood that a ministerial review will consider whether to establish an Office for Older People and Ageing Policy to provide strong leadership across government. Without such an office and full ministerial commitment, current helpful initiatives and achievements in beginning to tackle social exclusion and isolation of older people will founder. The Government’s aims to prevent exclusion and promote well-being in later life by addressing poor health, poverty and social exclusion, with effective joined-up services at key times. It must be strongly encouraged to meet this commitment which, it acknowledges, is all about increasing quality of life for all, including the most excluded where the biggest gains can be made. This can only be achieved by creating a cycle of well-being through participation, leisure, education, improved health and ensuring older people are valued in families, the workplace and communities.

However, effective cultural change must come from communities themselves and the Government has stated that it will support the champions of this agenda at every level. Local government also has a duty to produce community strategies and a power to promote the social, economic and environmental well-being of older people in their communities. Local authorities are community leaders, advocates of local regeneration partnerships, employers, catalysts for economic activity, service providers and experts on information and research. They are best able to influence the work to tackle social exclusion. Using Local Strategic Partnerships and Local Area Agreements (an agreement between local partners and central government, setting targets and outcomes that are to be achieved over a three-year period), Local Government must co-ordinate essential services to older people and play a key role in bringing the European Union dimension down to local level, as they, with the voluntary and community sector:

- have valuable knowledge of, and experience in, developing common indicators of social exclusion and social inclusion and how they fit local and regional circumstances;
- can advise on translating European guidelines into domestic policies by setting specific targets and adopting measures taking into account national and regional differences;
- have valuable experience in delivering relevant structural fund programmes; and
- have valuable experience in transnational co-operation projects in this field.

The importance of early intervention and low level services, the need for joined up and co-ordinated services, and the importance of promoting user involvement, choice and control cannot be over-emphasised.

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