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# Pictures of life in older age: a quantitative analysis of the lived experience of ageing using the Understanding Society survey

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2020

Funded by Independent Age



## About the authors

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## Acknowledgements

We are grateful to Thomas Wilson, Gill Moffett and others at Independent Age for their helpful comments throughout the project. We are also grateful to Stefan Swift at City, University of London for producing the infographics for the report.

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## Executive summary

This report illustrates the lived experience of certain subgroups of older people:

- the oldest old
- older people from Black, Asian, and Minority Ethnic groups;
- older people with a physical health condition;
- older people with a mental health condition;
- older people who live in rural areas;
- older people with the lowest incomes,
- older people without children;
- older people who are carers; and
- LGBT+ older people

These subgroups can often get missed in official statistics on older people. This is because statistics tend to report the 'average' or the 'percentage of' all older people, rather than the of a particular subgroup. For example, it is relatively easy to find statistics on the average levels of happiness of older people or the percentage of older people living in poverty, but much harder to find these statistics for subgroups of older people such as LGBT+ older people, or the oldest old, or older people with a mental health problem.

### Methods

The research uses the Understanding Society (USoc) survey dataset to create new statistics on subgroups of older people. USoc is a large-scale household panel survey routinely used by policy makers, campaigning organisations and academics to understand the state of society. It is a survey repeated annually with 40,000 households from across all four countries of the UK. In this report we focus on older people in England. The survey first took place in 2009-10 (wave 1), and the latest data from 2016-17 (wave 8) contains 6,955 adults in England aged 65 and over.

Questions in the survey cover a broad range of areas, including income, work, family composition, health and social relationships. We capture the lived experience of older age across three themes: *Health and wellbeing* (including how health limits family activities, visits to a GP, and life satisfaction); *Financial security* (including being behind with bills, material deprivation, and financial contentment); and, *Social connectedness* (including contacting with children, use of social media, and interest in politics).

### Headline findings

Some key findings for each subgroup are summarised below:

#### *The oldest old*

- The oldest old have poorer health and wellbeing compared to the average older person. They are more likely to report being mostly or completely dissatisfied with their health and be limited in what they can accomplish as a result of their physical and mental health.
- Financially, the oldest old are more likely to be worse off than the average older person. They are more likely to be in the poorest income quintile after housing cost and be in receipt of benefits although they are less likely to live in housing owned with a mortgage.
- The oldest old tend to be less socially connected compared to the average older person. They are more likely to live alone, have few close friends, or not go out socially, with limited use or access to technology to connect socially.

### *Black, Asian, and Minority Ethnic older people*

- Black and Asian older people appear to have poorer health compared to White older people. They are more likely to say they have had more than 10 visits to the GP in the last 12 months and report being limited in what they can accomplish as a result of their mental health. However, there are no statistically significant differences between ethnic groups in other indicators of health and wellbeing and this might be due to the relatively small number of ethnic minority older people in the Understanding society dataset.
- Both Black and Asian older people are financially worse off compared to White older people, with both more likely to report finding it quite or very difficult to get by financially or not being able to pay unexpected expenses. Furthermore, Black older people tend to be financially disadvantaged on more financial security measures and are more likely to be in the lowest spending quintile on food and groceries, being behind with some or all of their household bills or being in the most deprived quintile of consumer durables deprivation.
- Overall, Black and Asian older people tend to be less socially connected than White older people, however, there are some variations on which measures this occurs. Black older people are more likely to live alone, travel by private car or van less than once a day or not have a tablet computer in their household or part of their accommodation, whilst Asian older people are more likely to have two close friends or less, have occasional doubt or a bit of a worry or big worry about becoming a victim of crime or not to be very or at all interested in politics.

### *LGBT+ older people*

- While the differences in a majority of the health and wellbeing measures between older LGBT+ people and the average older person are not statistically significant, older LGBT+ people appear to have poorer health and wellbeing than the average older person. They are more likely to be receiving care (formal or informal), or to be in need of care and not receiving it, as well as to have visited the GP more frequently in the past 12 months.
- Older LGBT+ people are more likely to be less financially secure than the average older person. They are more likely to be in the poorest income quintile after housing, be in the most deprived quintile of consumer durables, live in socially rented housing and be in receipt of benefits.
- Socially, older LGBT+ people are more likely to be less socially connected compared to the average older person. They are more likely to live alone, be in contact or see their children less frequently (or have no children), disengaged politically and not go out socially, with limited use or access to technology to connect socially.

### *Older people without children*

- Overall, there tends to be no statistically significant differences in the health and wellbeing of older people without children compared to the average older person. While older people without children are more likely to eat fruit and vegetables less frequently over a week than the average older person, they are less likely to report that their physical health limits moderate activities they can do on a typical day a lot. Older people without children are also more likely to be in need but not receive any care, as well as less likely to receive informal care.
- Older people without children are more likely to be financially worse off than the average older person. Although they are less likely to report finding it quite or very difficult getting by financially, they are more likely to be in the poorest income quintile after housing cost, lowest spending quintile on food and groceries, or most deprived quintile of consumer durables deprivation.
- Older people without children tend to be less socially connected compared to the average older person. They are more likely to live alone, have few close friends, or not go out socially, with limited use or access to technology to connect socially.

#### *Older people with a severe physical health problem*

- Unsurprisingly, older people with a severe physical health problem are more likely to be disadvantaged across different measures of health and wellbeing than the average older person. They are more likely to report being mostly or completely dissatisfied with their health and life overall, be at risk of a psychiatric disorder, have more contact with health services and be limited in what they can do as a result of their physical and mental health.
- Financially, older people with a severe physical health problem are more likely to be worse off compared to the average older person. Although they are less likely to be in the most deprived quintile of consumer durables deprivation, they are more likely to be in the poorest income quintile after housing cost, express being mostly or completely dissatisfied with their household income, find it quite or very difficult getting by financially and be in receipt of benefits.
- Older people with a severe physical health problem tend to be less socially connected than the average older person. They are more likely to live alone, have few close friends, not go out socially due to their health, be less engaged within their community and politically, with limited use or access to technology to connect socially. However, they do see their children more frequently compared to the average older person.

#### *Older people with a severe mental health problem*

- Older people with a severe mental health problem are more likely to be disadvantaged across different measures of health and wellbeing than the average older person. They are more likely to report being mostly or completely dissatisfied with their health and life overall, have more contact with health services and be limited in what they can do accomplish as a result of their physical and mental health.
- Financially, older people with a severe mental health problem are more likely to be worse off compared to the average older person. They are more likely to be in the poorest income quintile after housing costs and the most deprived quintile of consumer durables deprivation, express being mostly or completely dissatisfied with their household income, find it quite or very difficult getting by financially and be in receipt of benefits.
- Older people with a severe mental problem tend to be less socially connected than the average older person. They are more likely to have few close friends, not go out socially due to their health, be less engaged within their community and politically, with limited use or access to technology to connect socially and see their children less frequently.

#### *Older people who are carers*

- Older people who are part-time carers appear to have better health, while those who are full-time carers appear to have poorer health compared to the average older person (although the differences between older full-time carers and the average older person are statistically significant on only a few measures). Older full-time carers are more likely to be at risk of experiencing a psychiatric disorder and be limited in what they can accomplish as a result of their mental health.
- Older people who are full-time carers also appear to be worse off financially on a few measures compared to the average older person. They are, more likely to be in receipt of benefits, live in social rented housing, and not have an annual holiday away from home. Older part-time carers appear to be slightly better off. They are less likely to be in the most deprived quintile of consumer durables deprivation, and less likely to be in the poorest income quintile after housing costs, report being unable to unexpected expenses or live in social rented housing.
- In terms of social connectedness, older people who are part-time carers are more socially connected compared to the average older person, however the picture is not clear for older people who are full-time carers. While both older part-time and full-time carers are less likely to live alone, older part-time carers tend to use or have access to technology to connect socially, go out socially or visit, and participate more frequently

within their community. On the other hand, older full-time carers are more likely not to go out socially or visit friends and participate less frequently within their community.

#### *Older people who live in rural areas*

- Older people living in rural areas have better health and wellbeing compared to the average older person. They are less likely to report being dissatisfied with their health and to be limited in what they can accomplish.
- Older people living in rural areas appear to be more financially secure than the average older person. They are less likely to be in the poorest income quintile after housing costs, the lowest spending quintile on food groceries, the most deprived, and to be in receipt of benefits. However, they are more likely to think they will be financially worse off the following year than they currently are, and to live in social or private rented housing.
- Older people living in rural areas tend to be more socially connected than the average older person. They are less likely to live alone, or have few close friends and tend to participate more frequently within their community. While they are more likely to be of the opinion that the standard of their local public transport is fair or poor, they travel by private car or van more frequently.

#### *Older people with the lowest incomes*

- Older people with the lowest incomes have poorer health and wellbeing compared to the average older person. Although they are less likely to care for someone, they are more likely to report being dissatisfied with their life and their health, be limited in what they can accomplish as a result of their health, eat fruit and vegetables less frequently and to smoke.
- Older people with the lowest incomes are less secure financially compared to the average older person. They are more likely to express being dissatisfied with their household income, and report finding it difficult to get by financially. They are more likely to be in the lowest spending quintile on food and groceries, and to be deprived of consumer durables, to be in receipt of welfare benefits, and to have housing problems.
- Older people with the lowest incomes tend to be less socially connected compared to the average older person. They are more likely to live alone, have few close friends, or not go out socially. They have limited use or access to technology, are disengaged politically and participate less frequently within their community. They are, however, less likely to be of the opinion that the standard of their local public transport is fair or poor and use public transport more frequently.

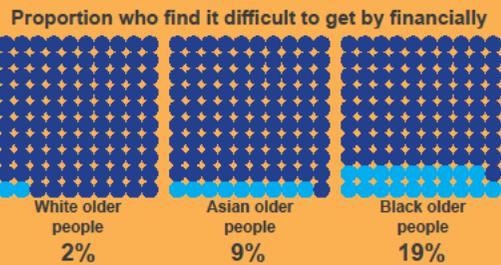
# BAME



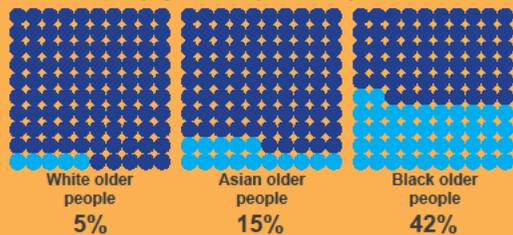
- Approximately 97% of 65+ adults were White, 2% of respondents were Asian, and 1% were Black
- This would be approximately 200,000 Asian older people in the general English population
- This would be approximately 100,000 Black older people in the general English population

## FINANCIAL SITUATION

Black older people are much more likely to have financial difficulties



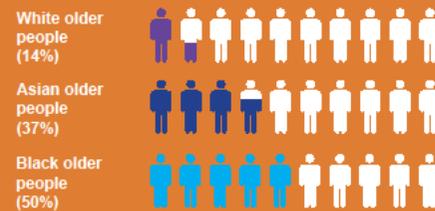
Proportion who would find it difficult to pay an unexpected expense



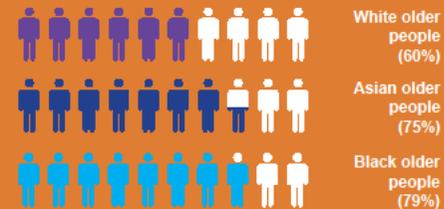
## CONNECTIVITY

Black older people are more reliant on bus services and rate them more highly

Use bus service three times per week or more



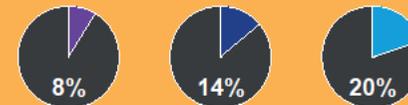
Likelihood of rating standard of public transport as very good or excellent



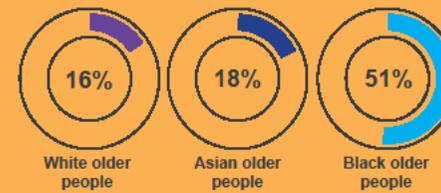
## HEALTH AND HOUSING

Black people are more likely to have mental health issues/live in social housing

Accomplished less due to mental health



Likelihood of living in social rented housing



Likelihood of living alone

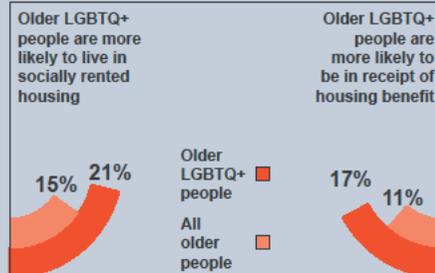
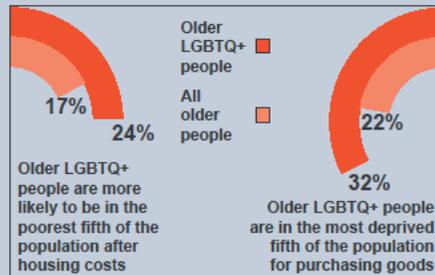
# LGBTQ+



- Approximately one in twenty (5%) of older people are LGBTQ+
- This group of people is defined as those who say they are not heterosexual or straight
- This would be approximately 500,000 people in the general English population

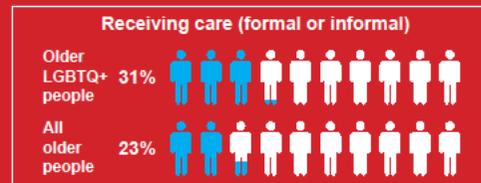
## FINANCIAL SITUATION

### Older LGBTQ+ people receive lower income

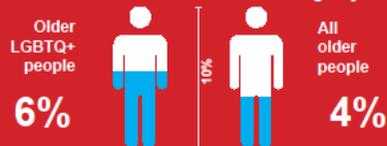


## HEALTH AND WELLBEING

### Older LGBTQ+ people are more likely to need care



### In need of care but not receiving any

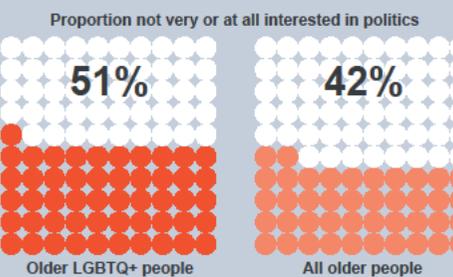
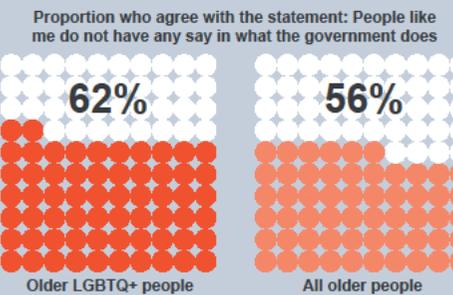


### More than 10 visits to the GP in the last 12 months



## POLITICAL INVOLVEMENT

### Older LGBTQ+ people feel less involved in politics



# WITHOUT CHILDREN

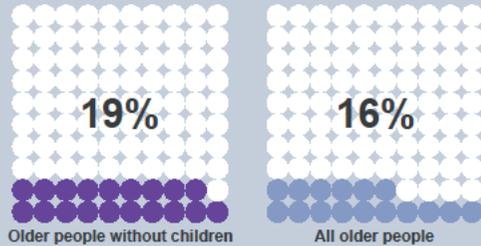
- Approximately 15% of older people were without children
- This includes those who have not had children, and those whose children have passed away
- This is approximately 1.5m older people in the general English population



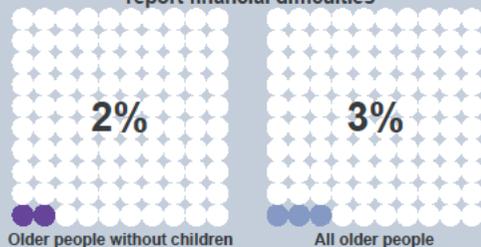
## FINANCIAL SITUATION

Older people without children are more likely to be worse off

Proportion of those who report financial difficulties



Proportion of older people who report financial difficulties



## HEALTH AND WELLBEING

Older people without children have average levels of health and wellbeing

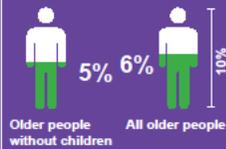
Health limits moderate activities



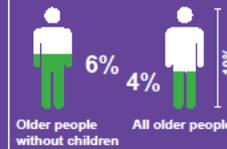
Receive informal care



Dissatisfied with life



Unmet care needs



## SOCIAL CONNECTEDNESS

Older people without children are more likely to feel isolated



# PHYSICAL HEALTH



- Approximately 19% of older people suffer from a severe physical health problem
- This would be approximately 1.9m people in the general English population

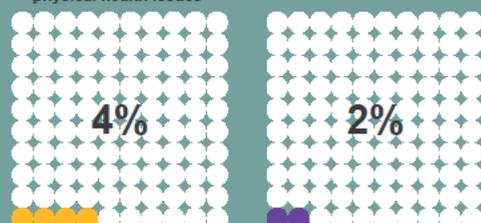
## FINANCIAL SITUATION

### Older people with severe physical health problems have lower income

Likelihood of older people belonging to the poorest fifth of the general English population



Older people with severe physical health issues



Mostly or completely dissatisfied with household income

## HEALTH AND WELLBEING

### Those with severe physical health issues are more likely to live alone

Likelihood of living alone



All older people (33%)

Have lots of energy only a little or none of the time



All older people (29%)

## SOCIAL CONNECTEDNESS

### Older people with physical health problems have less social interaction

Likelihood of having two close friends or less



Older people with severe physical health issues

All older people



Likelihood to not go out socially or visit friends when they feel like it

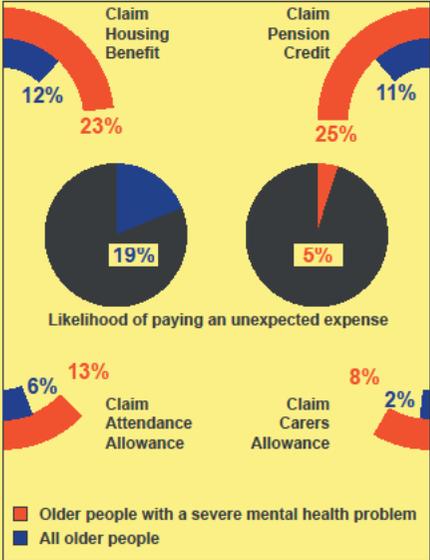
# MENTAL HEALTH



- Approximately 3% of older people were assessed as having severe anxiety or depression
- A further 12% were assessed as having moderate-severe anxiety or depression
- This is approximately 300,000 and a further 1.2m older people in the general English population

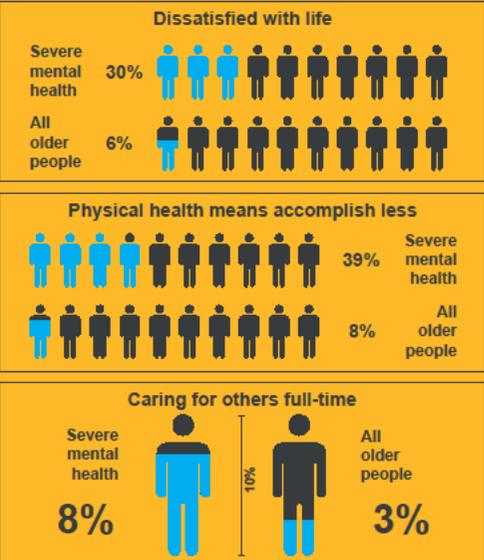
## FINANCIAL SITUATION

Those with mental health issues are more likely to receive benefits



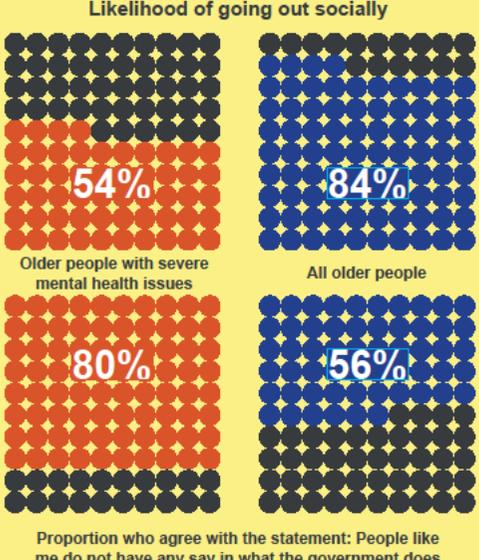
## HEALTH AND WELLBEING

Older people with mental health problems are less satisfied with life



## SOCIAL CONNECTEDNESS

Older people with severe mental health issues are less connected



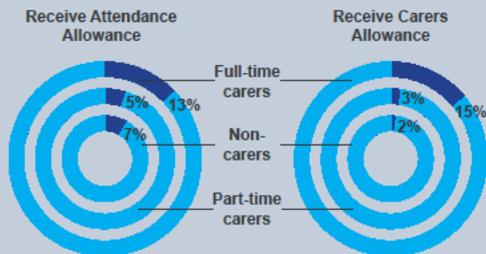
# CARERS



- Approximately one in five (19%) older people are carers
- 15% provide care for up to 34 hours per week (part-time carers) - 1.5m in England
- 4% provide care for at least 35 hours per week (full-time carers) - 400,000 in England

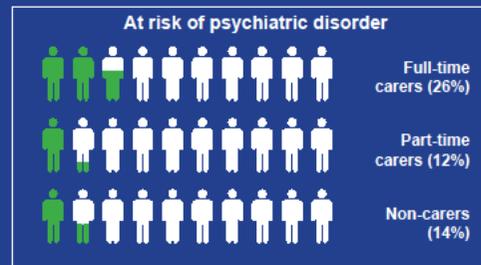
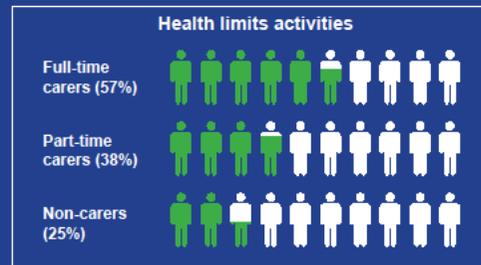
## FINANCIAL SITUATION

Full-time carers receive more welfare benefits



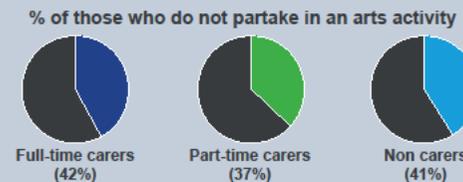
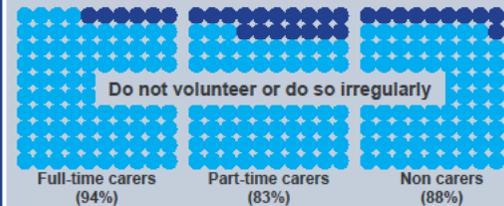
## HEALTH AND WELLBEING

Full-time carers report poorer health



## SOCIAL CONNECTEDNESS

Full-time carers tend to be more socially isolated



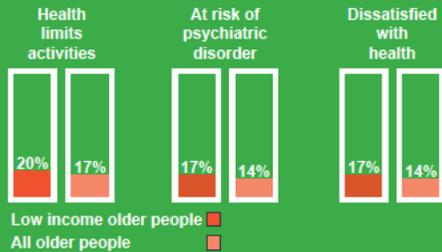
# LOW INCOME



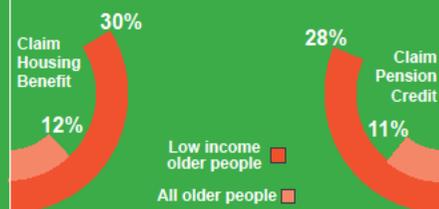
- Low income older people are in the poorest fifth of the population
- Approximately 16% of older people are living on low income
- This is approximately 1.6m people in the general English population

## HEALTH AND WELLBEING

### Older people on low incomes report worse health outcomes



### Older people on low incomes are more likely to claim benefits

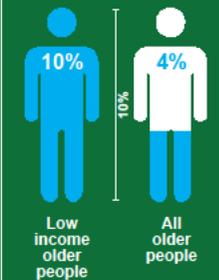


## HOUSING

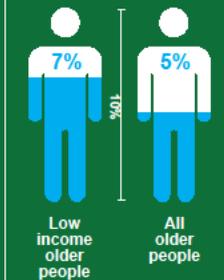
### Older people on low incomes report poorer housing conditions



### Report home not being in good state of repair

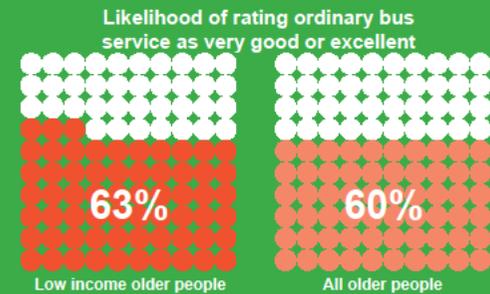
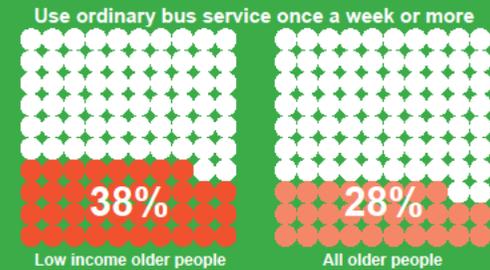


### Report home not being free from damp



## CONNECTIVITY

### The poorest fifth of older people are more likely to use a normal bus



## Introduction

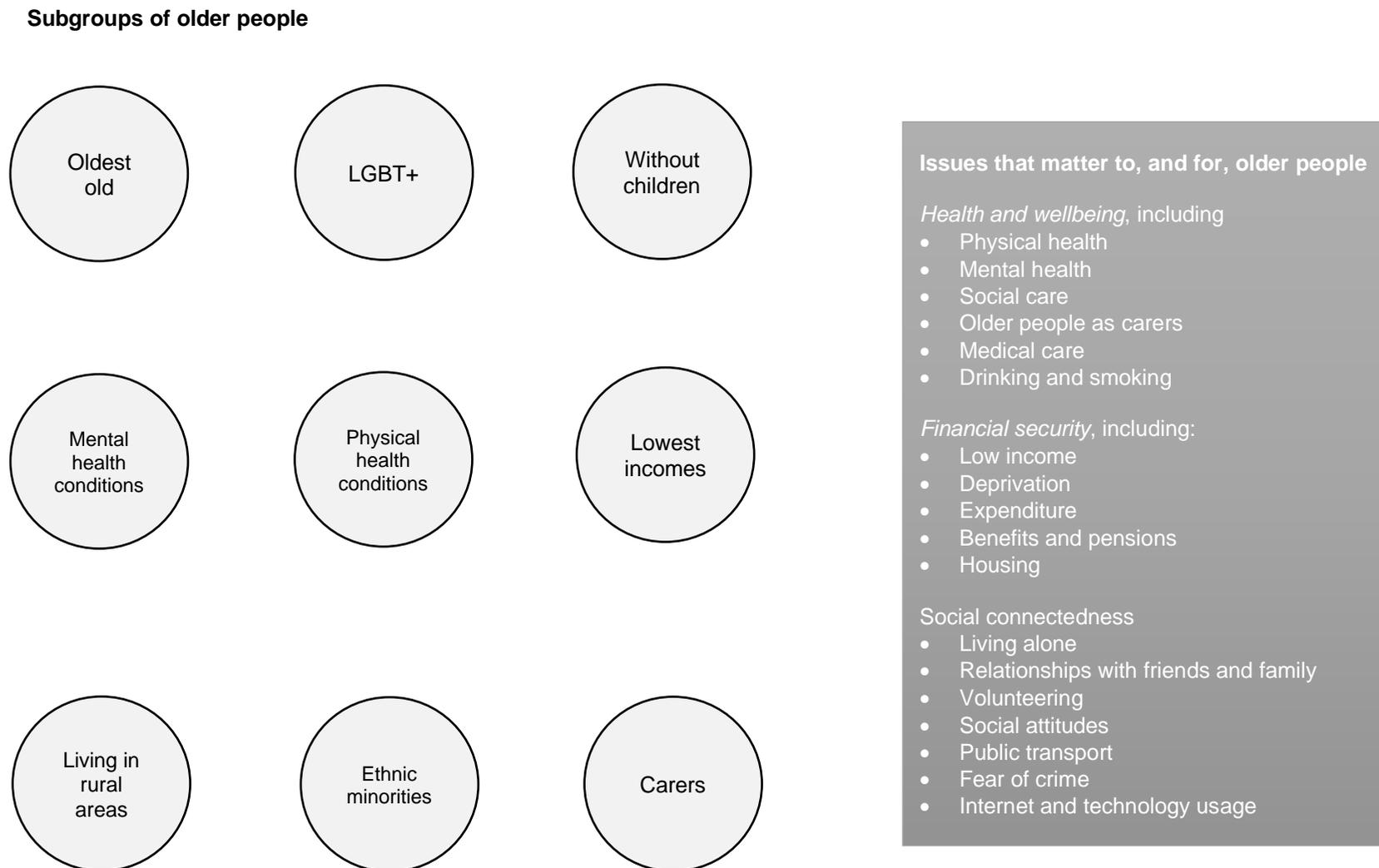
This report illustrates the lived experience of a diverse range of subgroups of older people who are often under-represented in existing policy debates, such as the oldest old, ethnic minorities, and older people living in rural areas. The report provides new statistics for these subgroups on issues that matter to older people - *Health and wellbeing*; *Financial Security*; and, *Social Connectedness*. Figure 1 below lists the subgroups and areas that the report focuses on (full definitions can be found in the Annex).

The report provides research evidence to:

- expose the diversity of circumstances and different outcomes among older people, and challenge the stereotypes that exist
- highlight and enhance the currently limited understanding of these subgroups of older people amongst policy-makers, researchers, commissioners and others
- potentially challenge the logic of a single age band of 65+ for all older people
- generate innovative and impactful statistics on underrepresented groups of older people

The report begins with a review of existing statistics on older people, and unsurprisingly reveals a deficit of information on subgroups of older people whose lives are the most challenging – and whose lived experience of older age is somewhat different from the ‘average’ older person portrayed in many sources of information on older people.

**Figure 1. Designing pictures of life in older age: Subgroups of older people and issues that matter to, and for, older people**



## Review of existing statistics on the lived experience of ageing

The purpose of the first phase of the project was to trawl published statistical compendiums to assess the extent, availability and quality of data relating to three overarching concepts or 'pillars': *Health and wellbeing*; *Financial Security*; and *Social Connectedness*. Within these three areas, a list of sub-concepts was assembled (e.g. for *Social Connectedness* loneliness, fear of crime, degrees of community participation) and some candidate indicators proposed to measure or at least represent these sub-concepts.

### Methodology

For each of these potential indicators, we then searched to identify pre-digested statistics, or where these were not available, to identify survey microdata, that could be plugged into reports about the experience of older people on an ongoing basis. There was a long shopping list of requirements for each of the indicators identified to support the three pillars. These were that:

- i. There was a strong preference for recurrent statistics, in order to facilitate tracking of change over time
- ii. Statistics should be current, i.e. unless they had some other significant selling point, they should have been produced in the last five years (since 2014)
- iii. The indicators should if possible be comprised of multiple sub-indicators, for both interest and the strengthening of their measurement properties

Further, in order to address the emphasis within the project on the heterogeneity of the population over 65, we identified other desirable features of such data:

- It should be disaggregated more finely and not just presenting figures for '65+'
- It should if possible present information relating those under 65 in forms of disaggregation that were symmetrical across the life course, rather than having 5-10 cohorts for the younger population and then simply categorising the top end as 65+
- It should capture target sub-groups for analysis. If the statistical source did not cover a sub group, or where it was not possible to cross-tabulate a sub group membership with age, this lacuna needed to be highlighted: The subgroups identified in the project specification were: care home residents; LGBT+, BAME; low income groups (by decile or quintile); those with disabilities or limiting physical illness; the homeless; those with mental health conditions; those living in rural areas; those with caring responsibilities; the 'oldest old' (a moving target, but defined by us as those over 85); and those without children.

In each case (for 13 sub-concepts on *Health and wellbeing*, 10 on *Financial Security* and 9 on *Social Connectedness*) we followed the same procedure:

- Attempt to identify a National Statistic, but if not available a Government statistic, and as a next option a statistic from another source, or simply a reference to survey micro-data
- Record its provenance, frequency and most recent release
- Provide a link to the original source to allow scrutiny of its methodology
- Establish which indicators and, where relevant, which sub-indicators, are present in the data
- Attempt to highlight, where sufficiently transparent, how far the statistics provide meaningful data with detailed age breakdowns and inclusion of sub-groups among older people.

## **Main findings<sup>1</sup>**

We completed this exercise in relation to 33 indicators under the three broad themes of health and wellbeing, financial security and social connectedness. We were able to find data in some form for nearly all the suggested indicators, though it did not always meet all the criteria set out in the methodology. 20 were covered by National Statistics, 2 from other government statistics, and the remainder from other sources, such as surveys. The provenance of data is closely linked to the nature of the variable. Runs of official statistics are likely to capture behaviours and service usage, but experiential and attitudinal variables tend to require surveys or rely on data from research projects, either as datasets or as extracted tables included in reports.

The majority of the indicators were covered by recent data. With just two or three exceptions, all sources identified were last updated in at least 2018. Most were part of a recurring series, allowing for some limited time comparisons and future refreshment of the statistics.

In addition to identifying the relevant data sources for each indicator, the exercise aimed to evaluate the extent to which they added to knowledge about a set of subgroups within the universe of 'older people'. These were: care home residents; LGBT+ individuals; BAME; those on the lowest incomes; those with disabilities and physical ill health, the homeless, people with mental health issues; those living in rural areas; those with caring responsibilities; people without children; and the 'oldest old', usually defined as 85+ years of age. One key finding is that typically statistical runs are not disaggregated in this way – indeed the relevant information is not collected or tagged. National statistics tend to be exercises in enumeration rather than preparation for analysis, and in any case they are normally collected for a particular purpose.

The best served subgroup is the oldest old, with information available for most of the indicators in the financial security and health and wellbeing domains. All the data we have about other subgroups comes from statistics relating to specific indicators relating to their characteristics – health data for those with disabilities and health conditions, sexual health figures relating to LGBT+, financial data covering those on lowest incomes, and so on.

The majority of data sources allow users to distinguish between different age categories among older people, although this is not consistent across the board. As a minimum, statistics separate out 65-74, 75-84 and 85+ as age categories. Others either identify more, shorter duration cohorts, or have respondent's actual age in the micro-data.

From a comparative design perspective, it is useful to have equivalent data on key indicators for the population at large, except where the measures relate to experiences or services that are unique to older people, such as pensions or residential care. Once again statistics provide this, though the age categories are not completely consistent. Ten-year cohorts are typical, but there are examples both of finer subdivisions, and the use of simply children and working age adults.

<sup>1</sup> The review of existing statistics is presented in an accompanying spreadsheet to this report.

## New statistics on the lived experience of ageing

In this section we analyse the Understanding Society<sup>2</sup> (USoc) survey dataset to create new statistics on subgroups of older people. USoc is a large-scale household panel survey routinely used by policy makers, campaigning organisations and academics to understand the state of society. It is a survey repeated annually with 40,000 households from across all four countries of the UK. In this report we focus on older people in England. Questions in the survey cover a broad range of areas, including income, work, family composition, health and social relationships. Although it is a population survey, because of its sheer size it includes a large number of respondents in older age. The survey first took place in 2009-10 (wave 1), and the latest data from 2016-17 (wave 8) contains 6,955 adults in England aged 65 and over. The list of indicators we look at to capture the lived experience of older age is summarised in the table below.

Health and wellbeing	<ul style="list-style-type: none"> <li>• In need but does not receive care (formal or informal)</li> <li>• Receiving care (formal or informal)</li> <li>• Health limits moderate activities</li> <li>• Physical health means accomplishes less most or all of the time</li> <li>• Physical health limits kind of work most or all of the time</li> <li>• Low levels of mental wellbeing</li> <li>• Mental health affects daily activities most or all of the time</li> <li>• Felt calm and peaceful a little or none of the time</li> <li>• Have a lot of energy a little or none of the time</li> </ul>	<ul style="list-style-type: none"> <li>• Mostly/Completely dissatisfied with health</li> <li>• Mostly/Completely dissatisfied with life overall</li> <li>• Eats fruit &amp; veg 3 days a week or less</li> <li>• Drinks 6+ alcoholic units (females) / 8+ alcoholic units (males) daily/almost daily</li> <li>• Smokes</li> <li>• Cares for someone (inside or outside household) 35+ hours per week</li> <li>• Cares for someone (inside or outside household) &lt;35 hours per week</li> <li>• Hospital/clinic in-patient visits in last year</li> <li>• More than 10 visits to GP in last year</li> </ul>
Financial Security	<ul style="list-style-type: none"> <li>• Poorest income quintile</li> <li>• Finding financial situation quite/very difficult</li> <li>• Mostly/completely dissatisfied with household income</li> <li>• Behind with some or all bills</li> <li>• Owner with mortgage</li> <li>• Private renter</li> <li>• Social renter</li> <li>• Not able to keep home warm enough in winter</li> <li>• Lowest spending quintile on food and groceries</li> </ul>	<ul style="list-style-type: none"> <li>• Claims Attendance Allowance</li> <li>• Claims Carer's Allowance</li> <li>• Claims Housing Benefit</li> <li>• Claims Pension Credit</li> <li>• Most deprived quintile of consumer durables</li> <li>• Does not have annual holiday away from home</li> <li>• Home is not in good state of repair</li> <li>• Home is not damp-free</li> <li>• Does not have access to car-taxi</li> <li>• Cannot pay unexpected expense</li> </ul>
Social Connectedness	<ul style="list-style-type: none"> <li>• Has access to the internet</li> <li>• Has a tablet computer</li> <li>• Frequency of using a library</li> <li>• Training scheme or course in past year</li> <li>• Frequency of contact with children</li> <li>• How many close friends</li> <li>• Hours spent interacting with friends through social websites</li> <li>• Go out socially</li> <li>• Lives alone</li> </ul>	<ul style="list-style-type: none"> <li>• Extent of worry about crime</li> <li>• Standard of public transport</li> <li>• Uses bus service</li> <li>• Frequency of travel by car</li> <li>• Frequency of doing an arts activity</li> <li>• Don't have a say in what government does</li> <li>• Level of interest in politics</li> <li>• Frequency of volunteering</li> </ul>

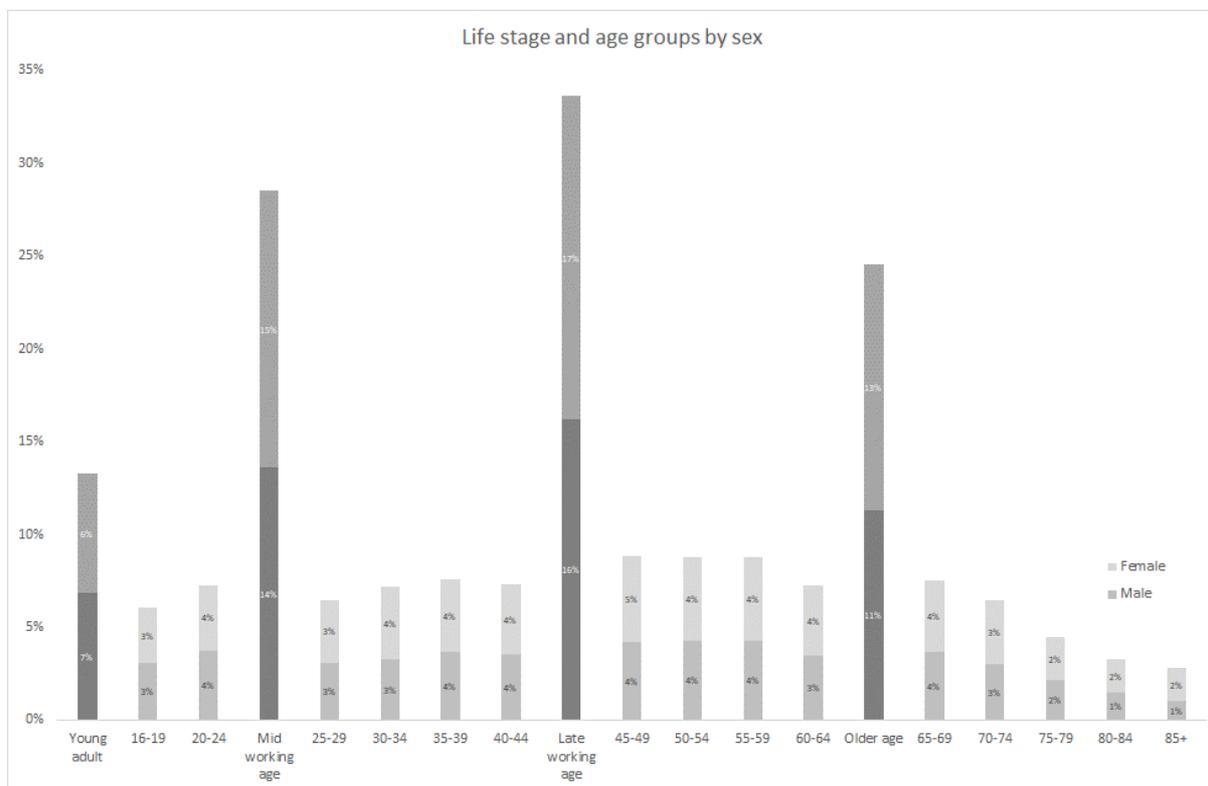
<sup>2</sup> For more information on USoc see <https://www.understandingsociety.ac.uk/> USoc data can be downloaded from the UK Data Service <https://ukdataservice.ac.uk/>.

## A summary across the life course

This section introduces the indicators we use to illustrate the lived experience of older age. The indicators are presented in three themes – *Health and wellbeing*, *Financial Security*, and *Social Connectedness* – and across the life course, in age bands from young people aged 16-19 to the oldest old aged 85 and above. This provides evidence of how the experiences of older people compare to younger cohorts, and also how life in older age can diversify as people move into later life – something often masked by aggregated statistics that present the ‘average picture’ for all people aged 65 and over.

We present these findings in two ways. The first four bars in each chart summarise the picture for each of the four life stages: young adults (aged 16-24), mid working age (aged 25-44), late working age (aged 45-64), and older age (aged 65+). The remaining bars illustrate how circumstances vary across the life course.

The chart below summarises the size of these groups in the population (by sex). This reflects the demographic make-up of the population of England and, in particular, the varied life expectancy of people in older age.



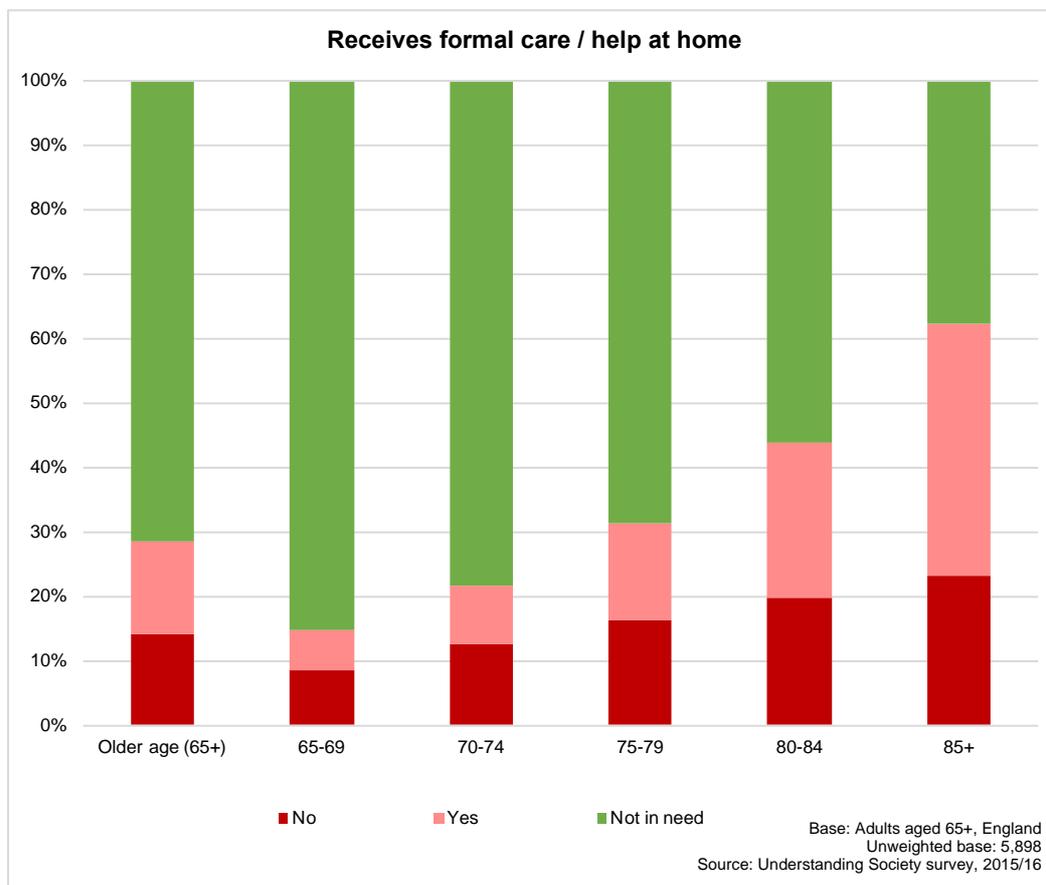
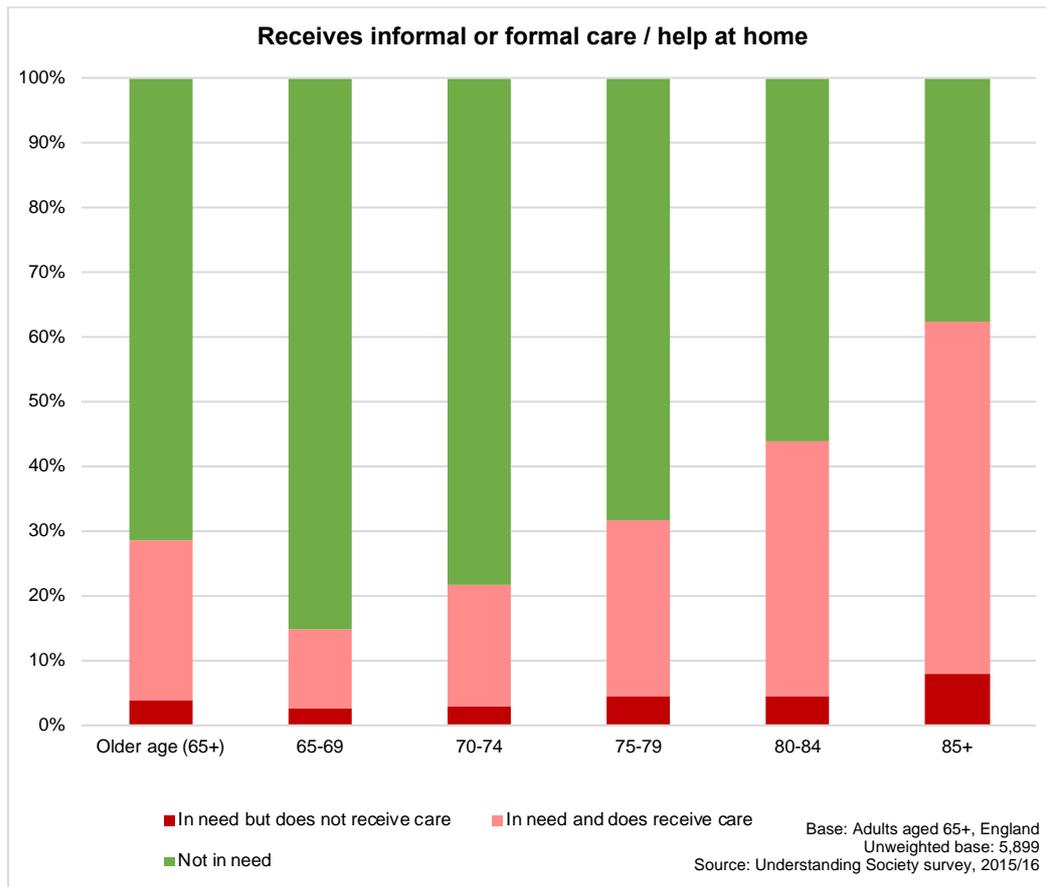
We look at indicators within each theme separately, beginning with *Health and wellbeing*. Each section includes a succinct summary of the main findings from the charts, followed by the detailed charts themselves.

## Findings

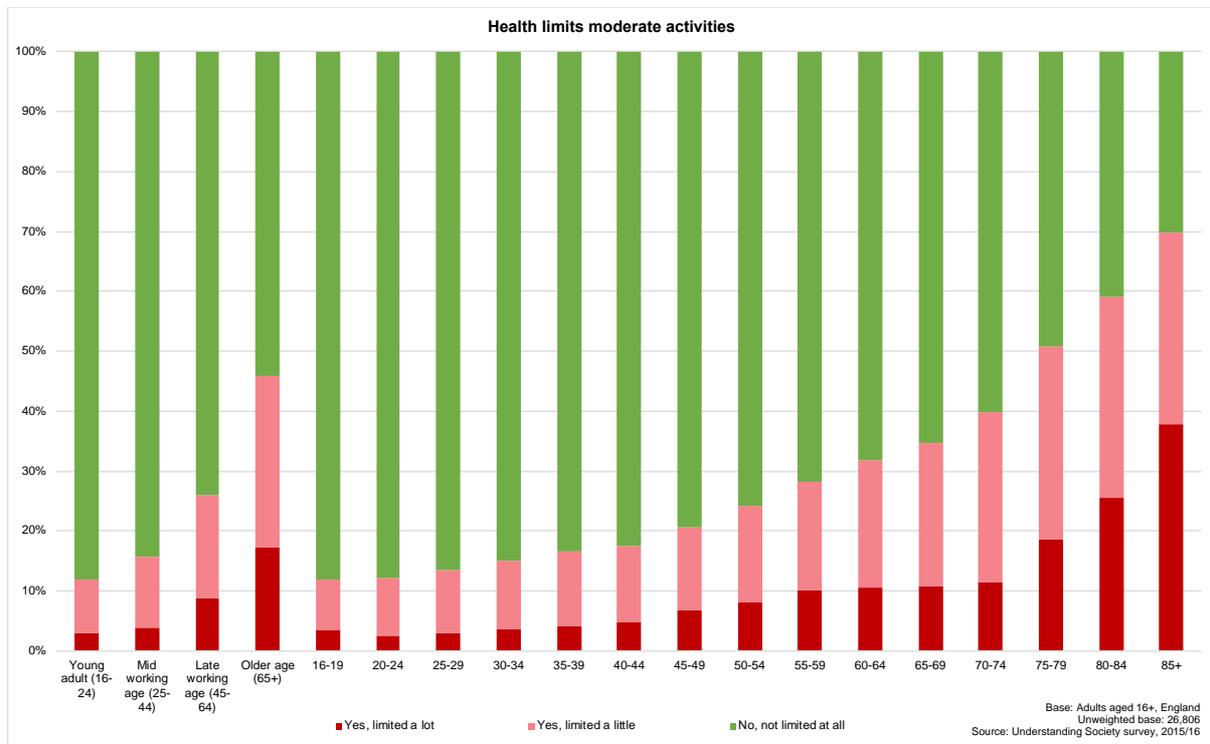
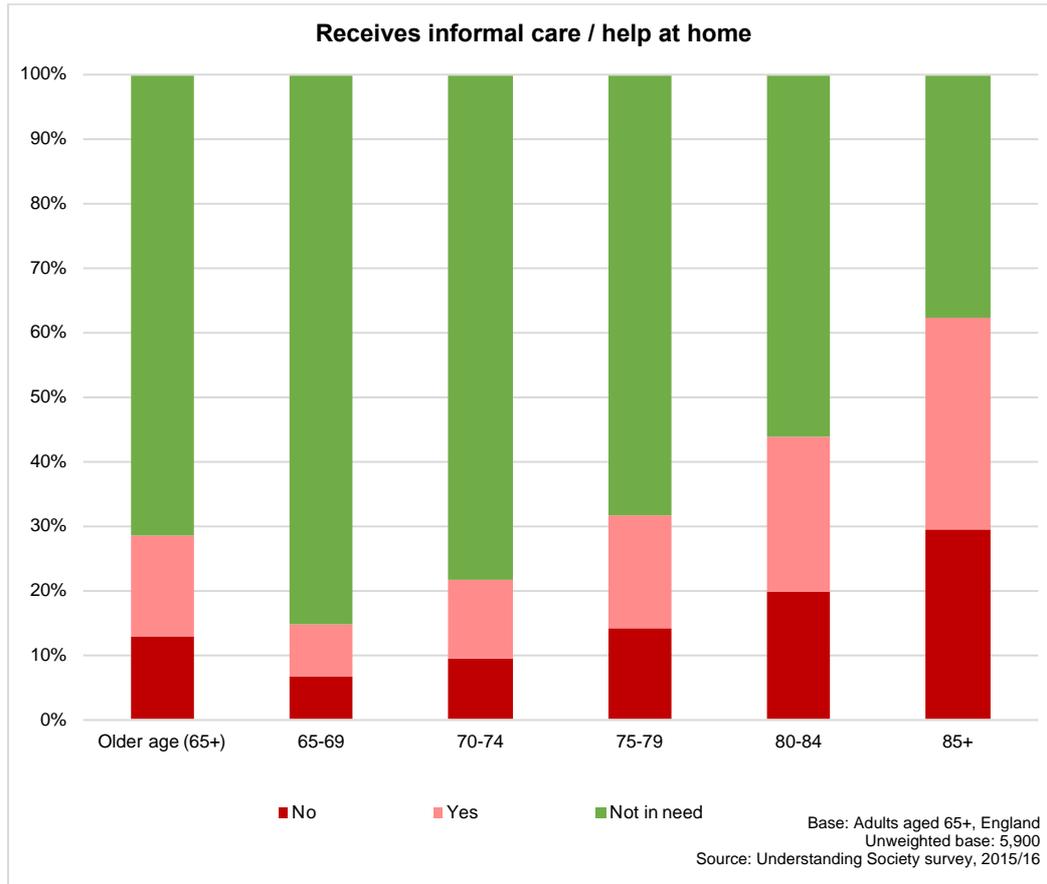
### *Health and wellbeing*

- The likelihood of an older person receiving care in their home increases substantially with age.
- Having a limiting physical health problem increases with age with the more limiting problems, and acknowledgement that this affects daily activities, particularly increasing for those in late older age (aged 75+). 70% of people aged 85+ report a limiting health problem.
- The rates of mental health problems vary much less with age, with older people less likely to report them, although there is a slight rise as people reach later older age.
- Not having a lot of energy increases for the oldest old, with over half of people aged 85+ saying they have this only a little or none of the time.
- Older people (and people of late working age) have the highest rates of saying they are mostly or completely dissatisfied with their health (yet only around one in seven say this). This does increase slightly for the oldest old.
- People are much less likely to report dissatisfaction with their life overall although dissatisfaction does peak in middle age, with those in early older age amongst those most likely to be most satisfied with their life.
- Fruit and vegetable consumption increase with age, with very few of the oldest old (around 5 per cent) eating fruit and vegetables three days a week or less
- Older people are less likely than other age groups to drink alcohol and to smoke – and this reduces further through older age.
- Being a carer is most common during late working age and early older age, where around one in five people care for someone inside or outside the household. Most people who care do not do this 'full time'.
- Older age sees an increase in people visiting the GP and being a hospital (or clinic) inpatient, and this continues to increase through older age. Over one in five people aged 85+ have been a hospital (or clinic) inpatient in the past 12 months.

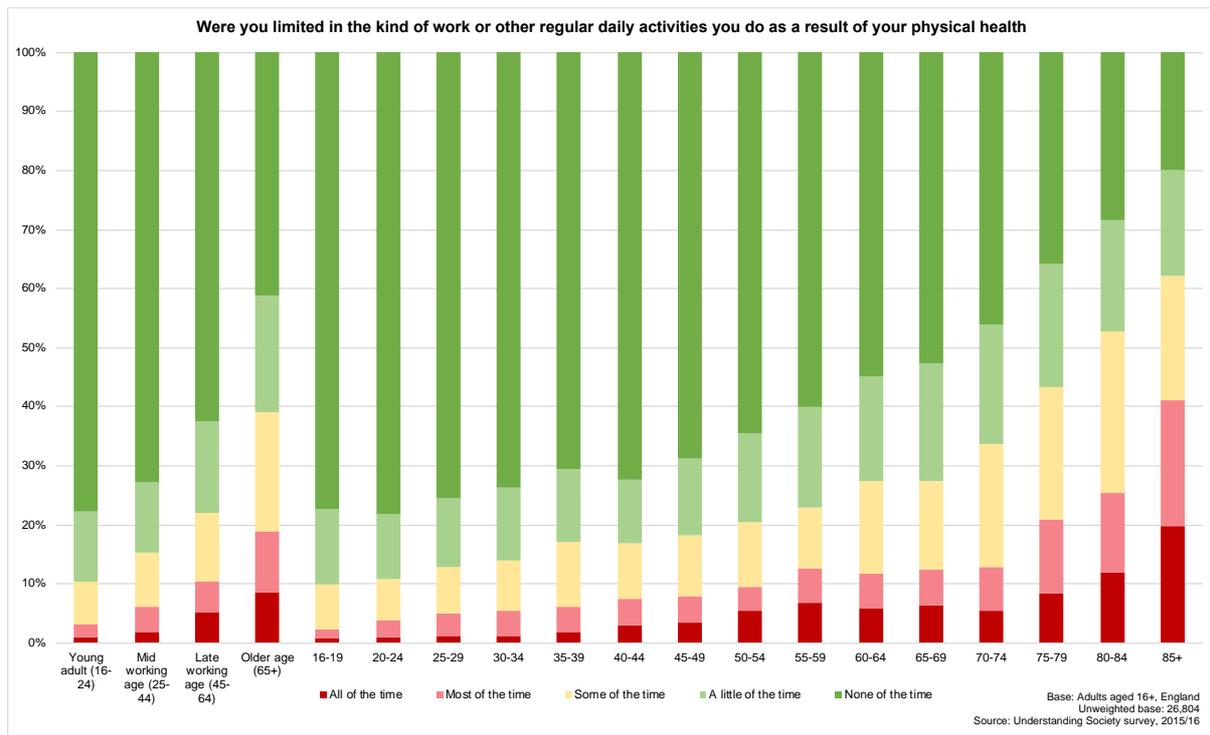
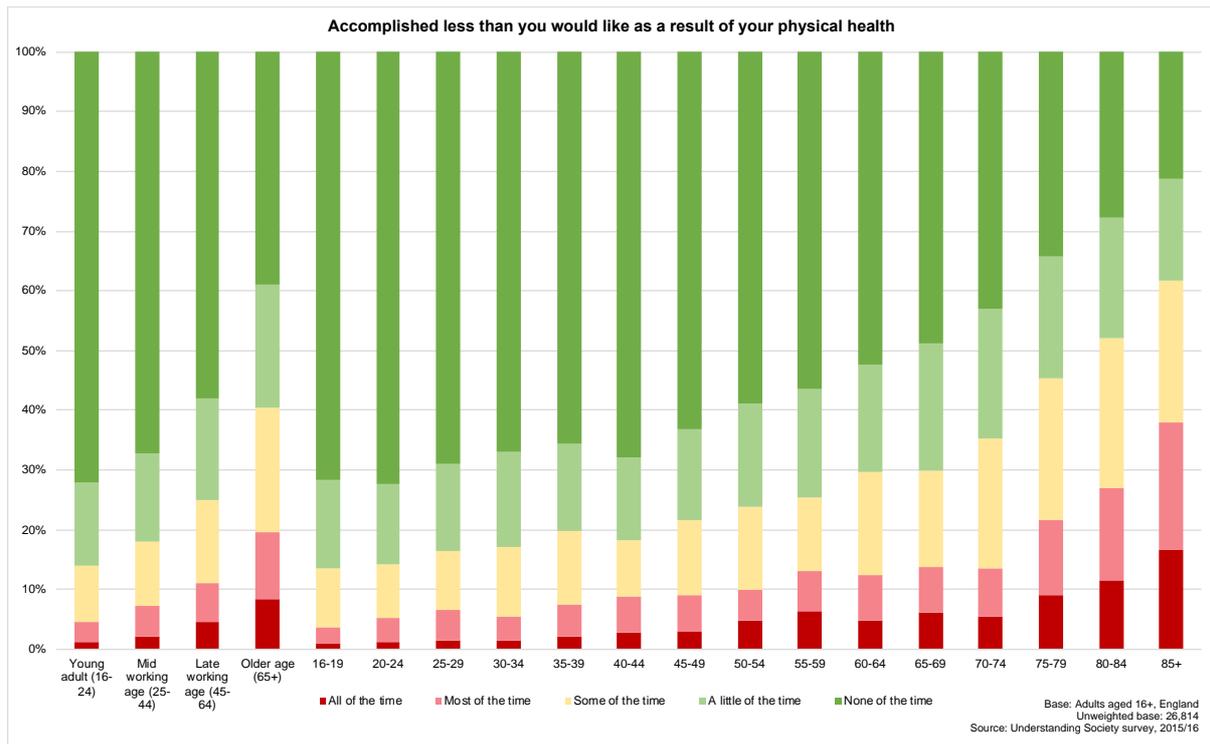
## Health and wellbeing



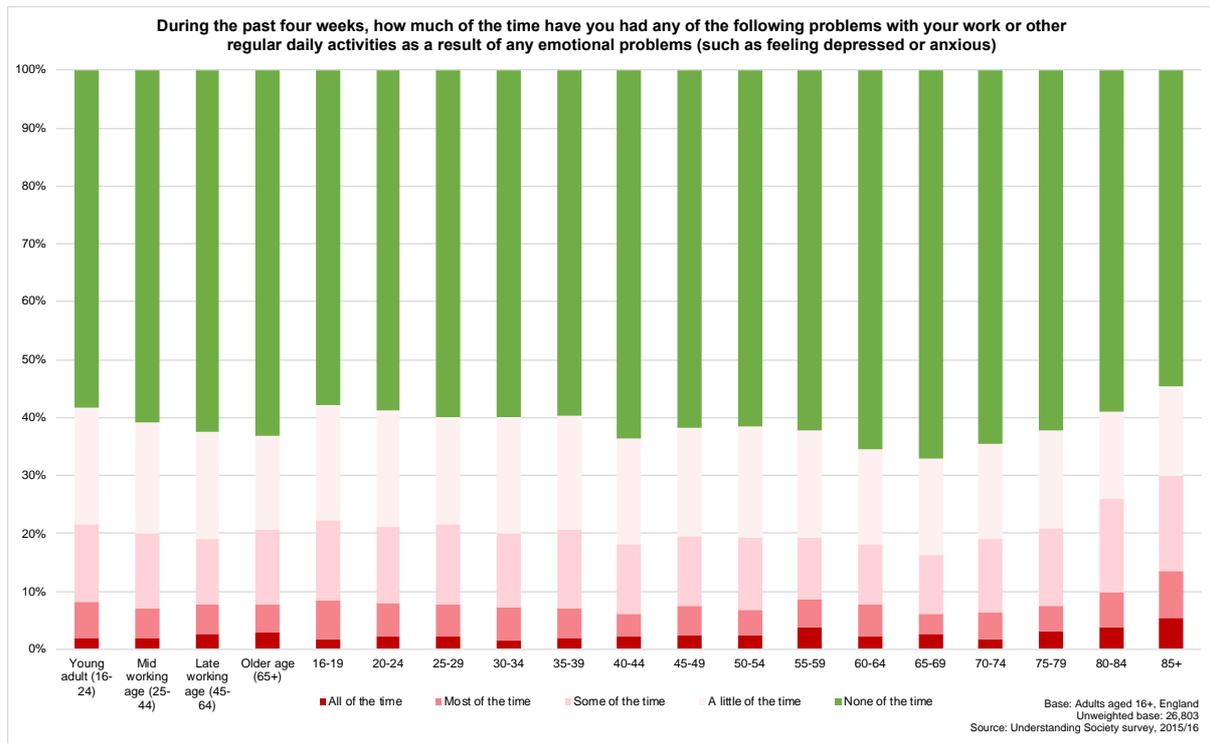
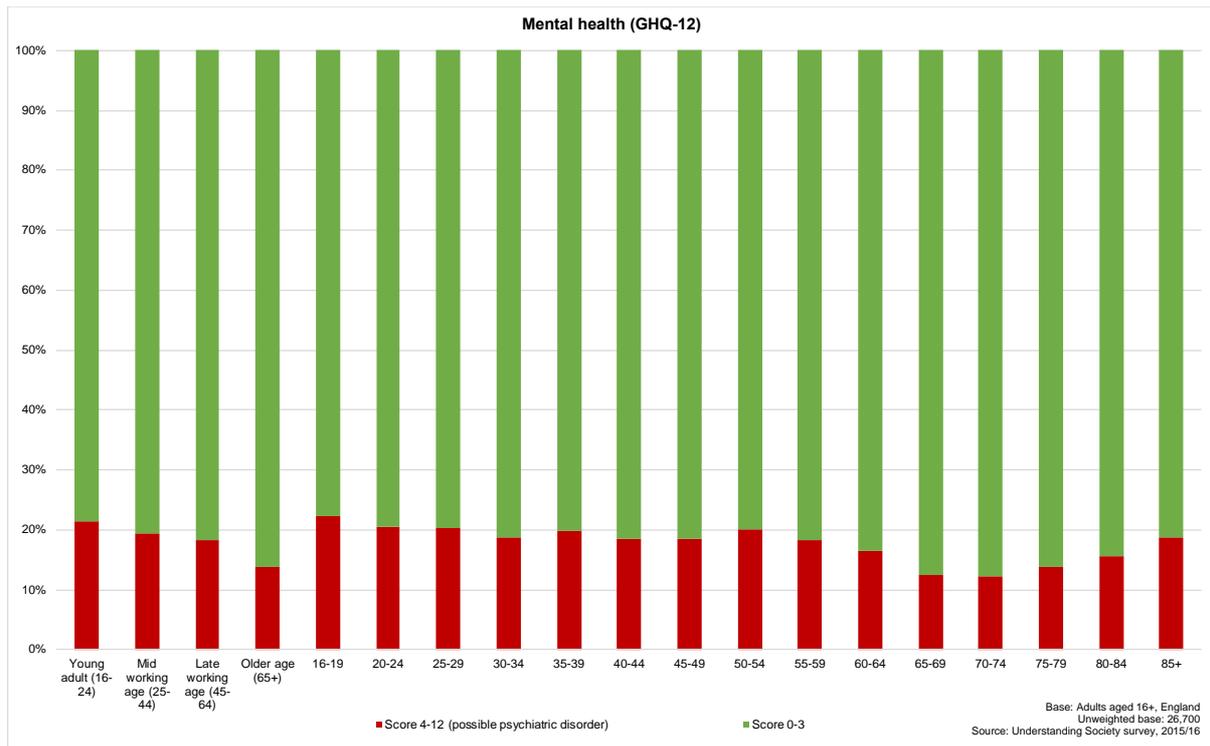
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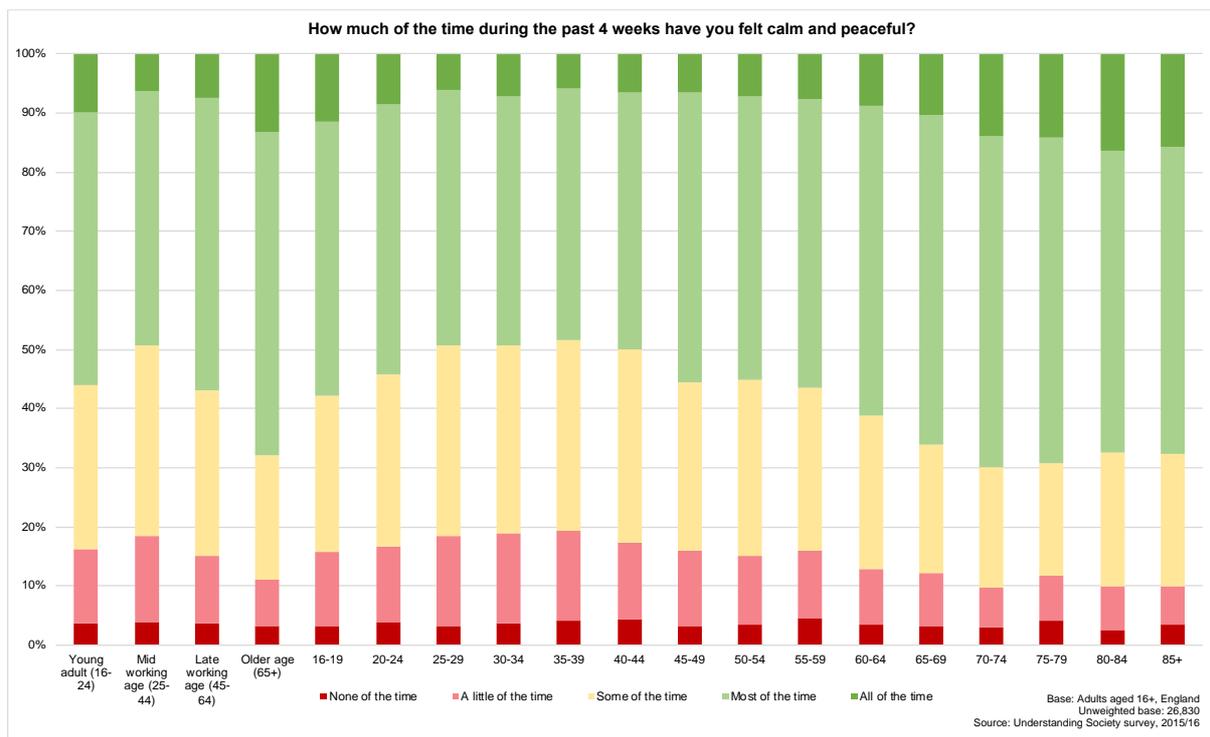
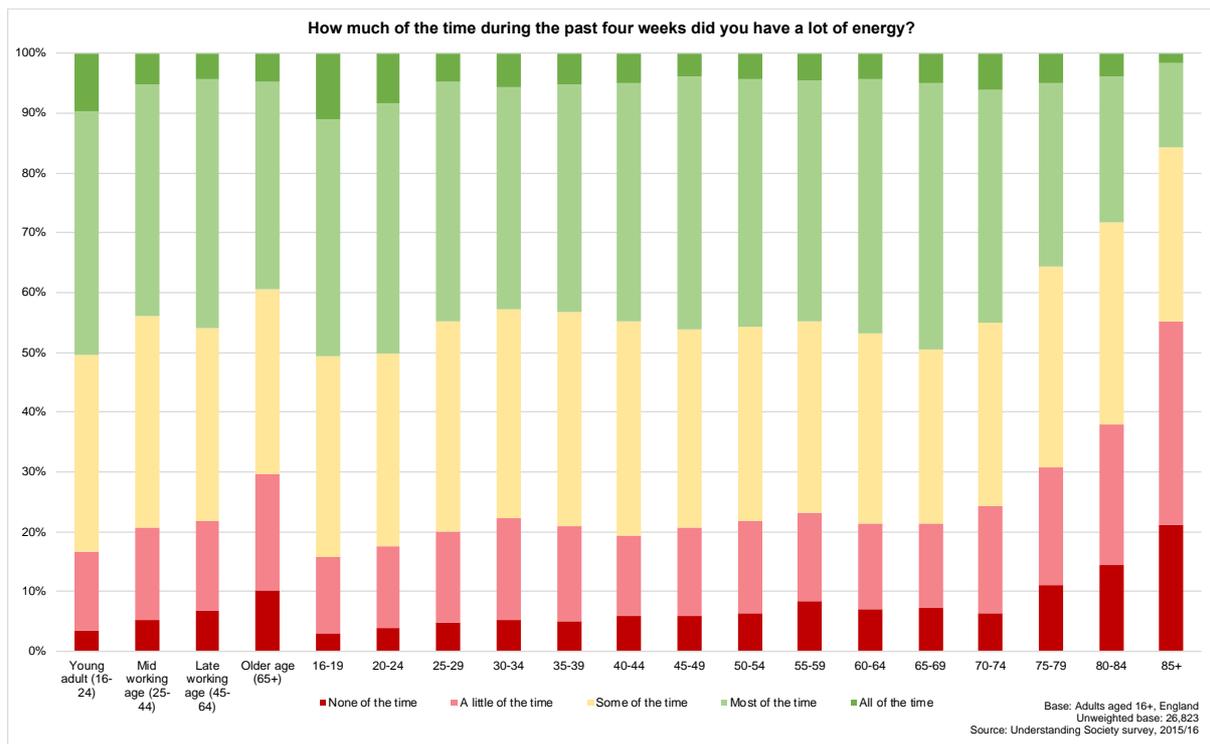
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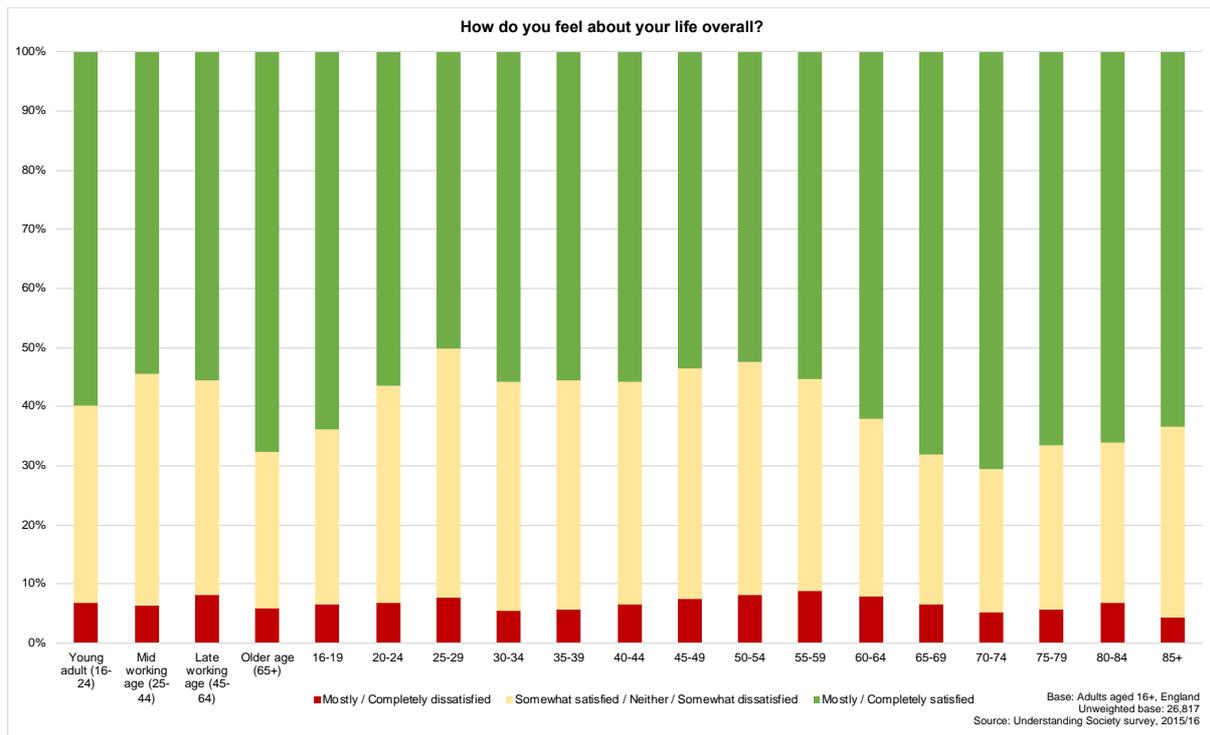
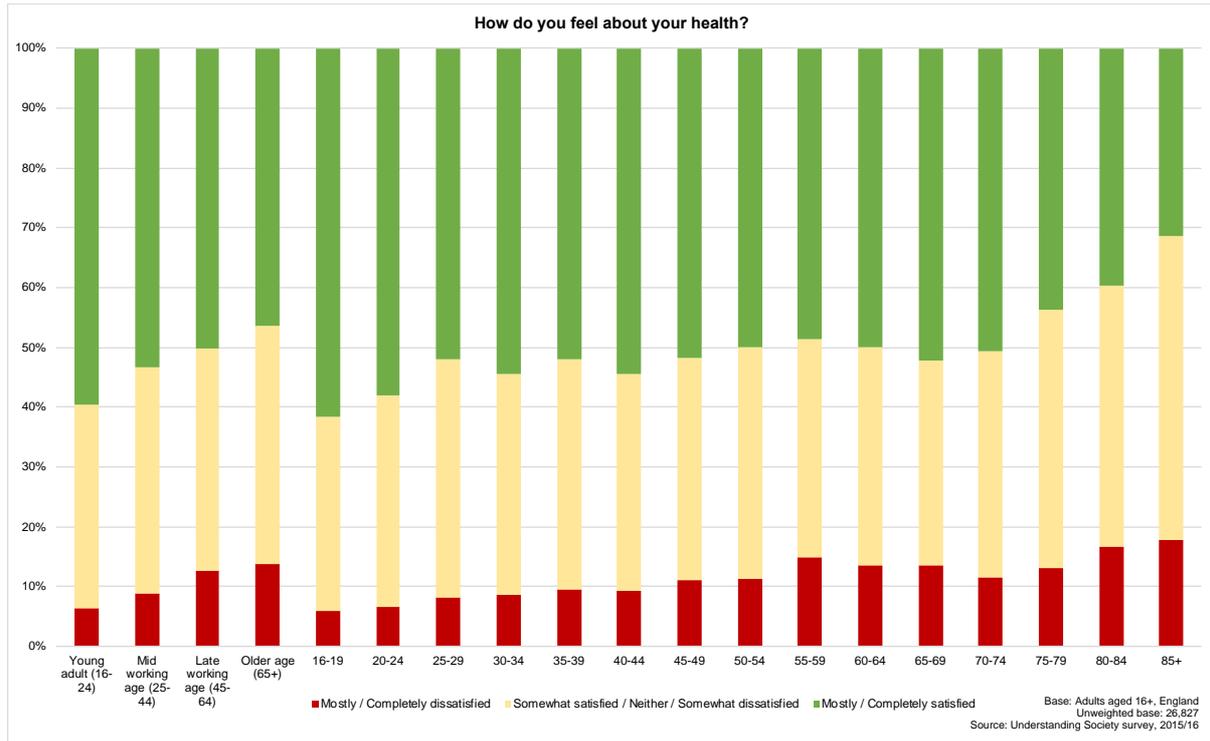
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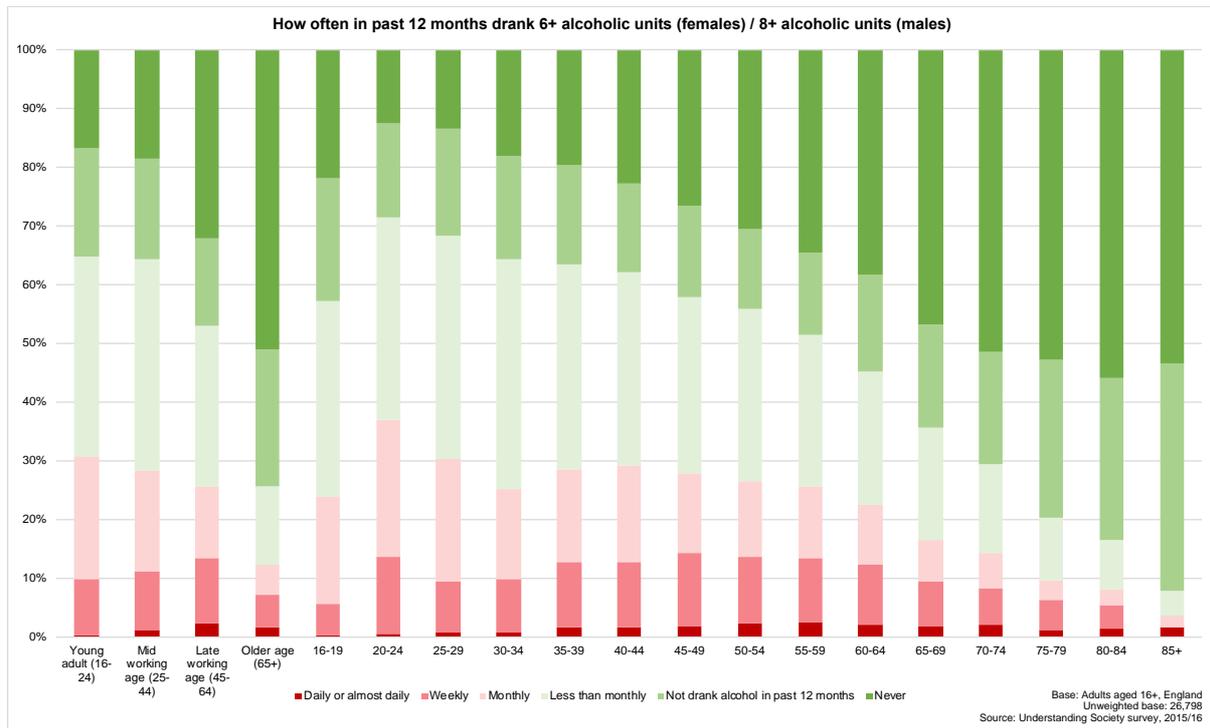
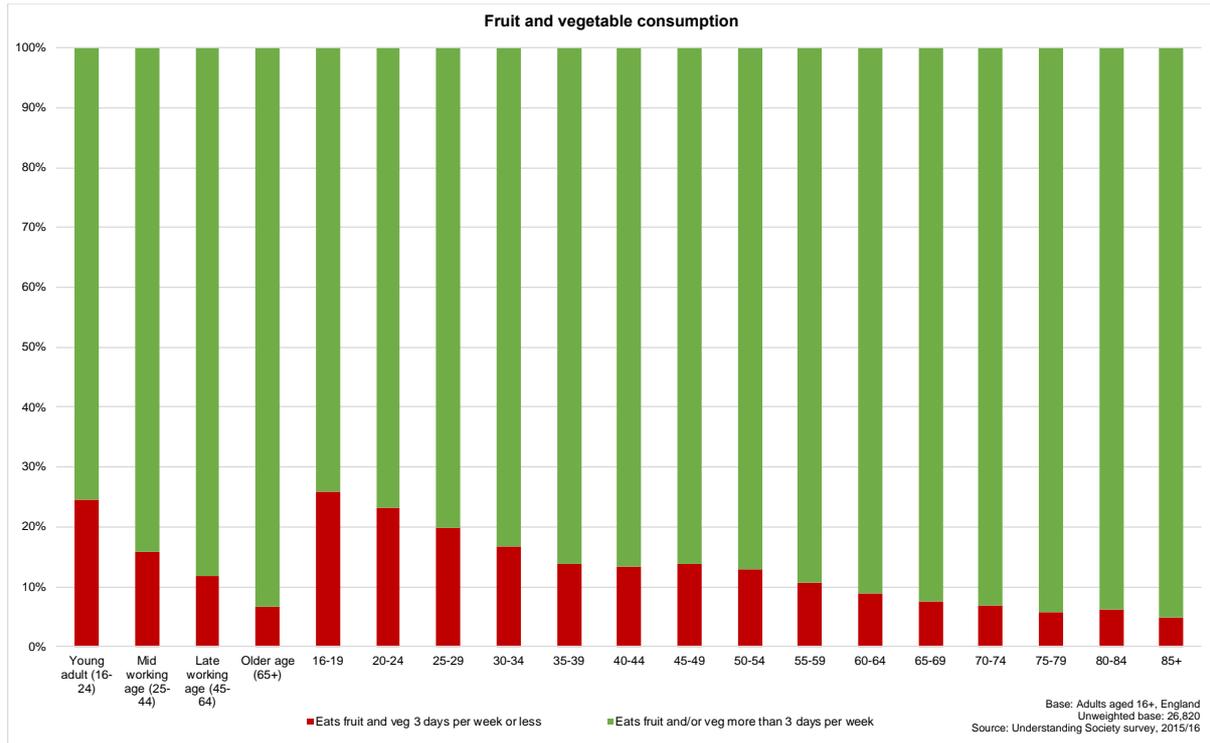
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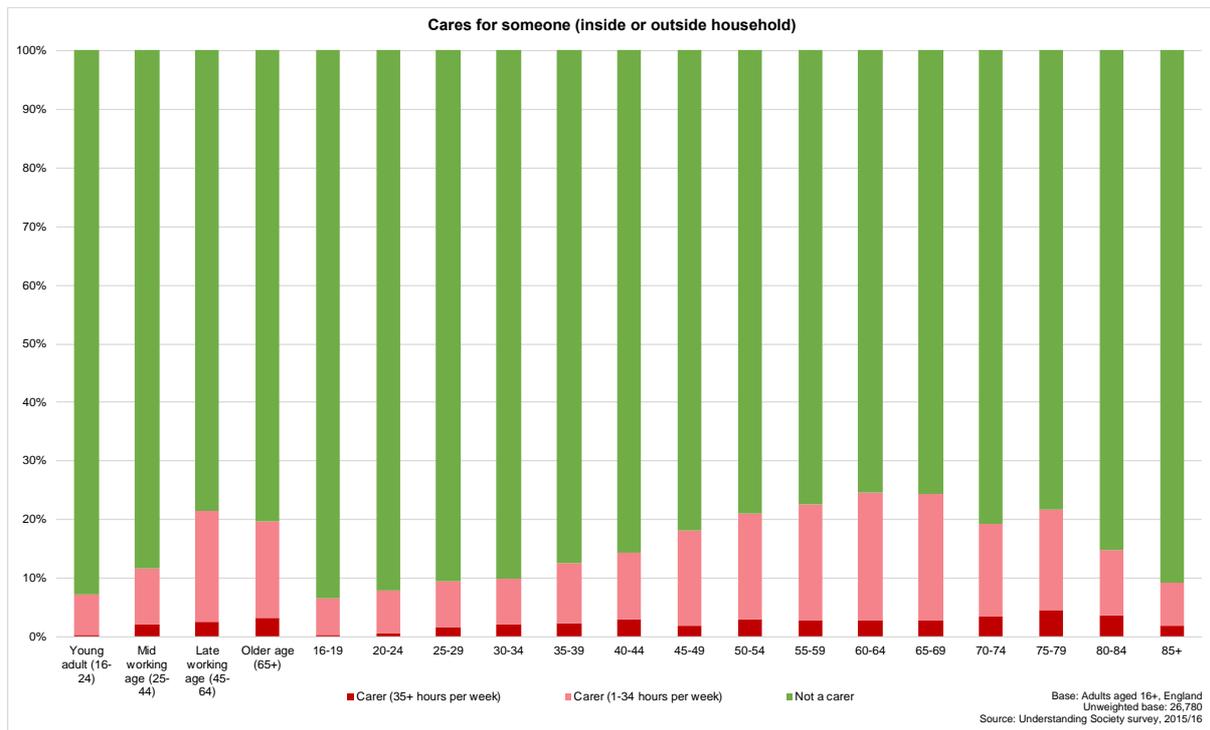
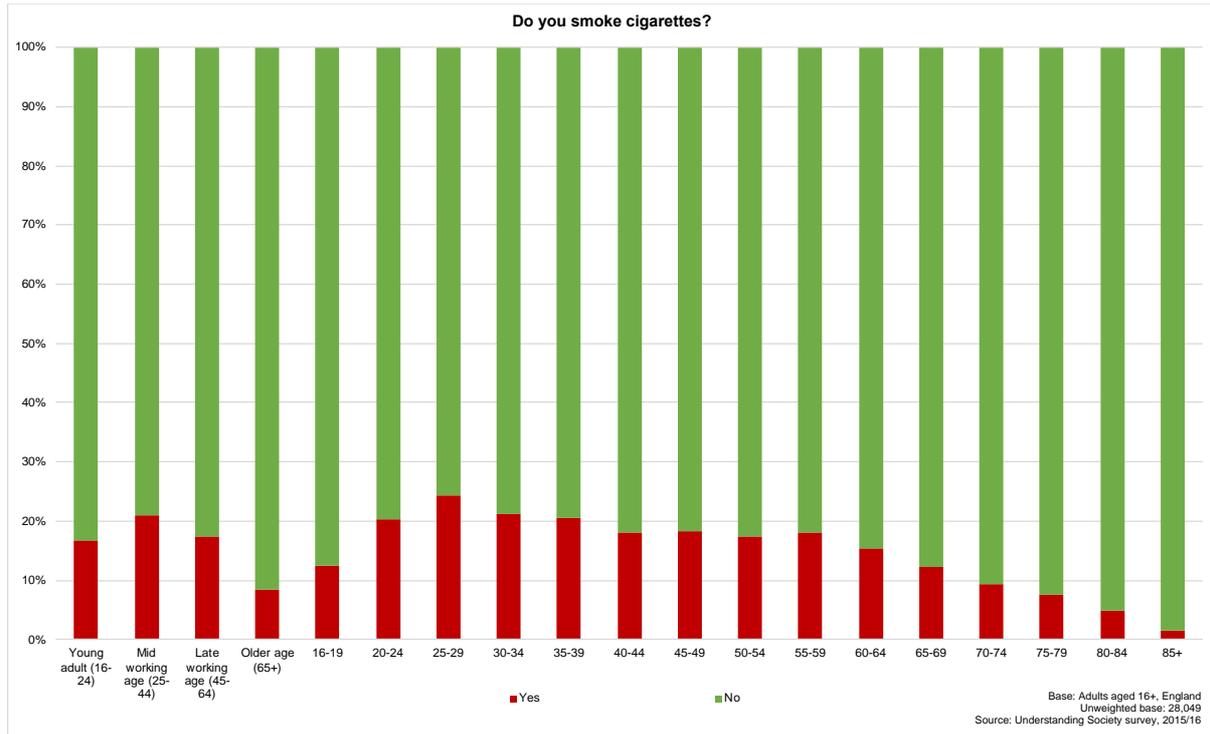
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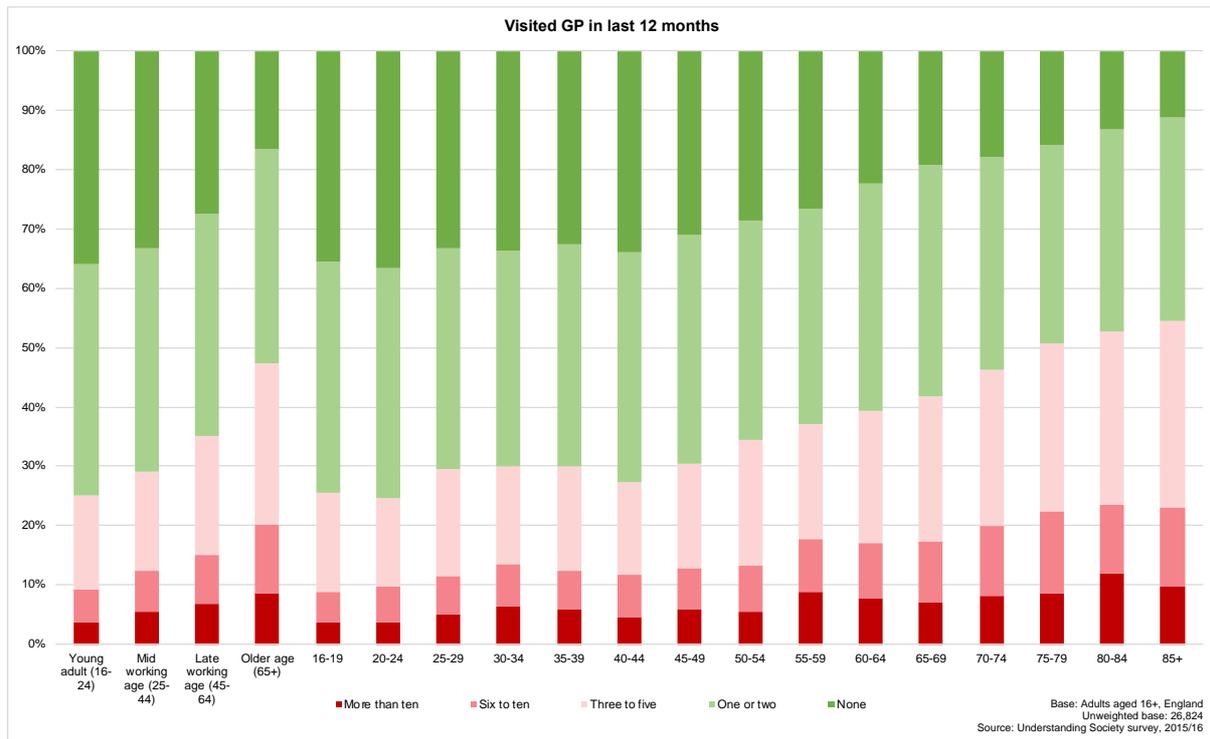
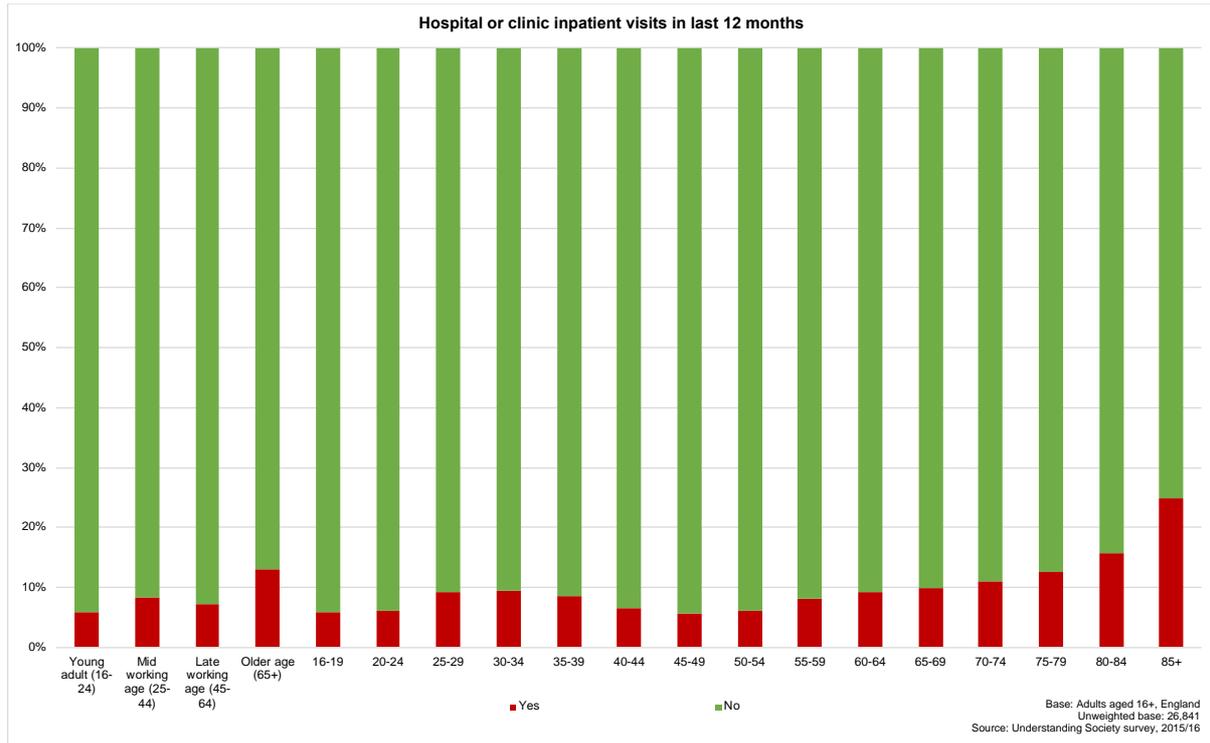
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# Health and wellbeing



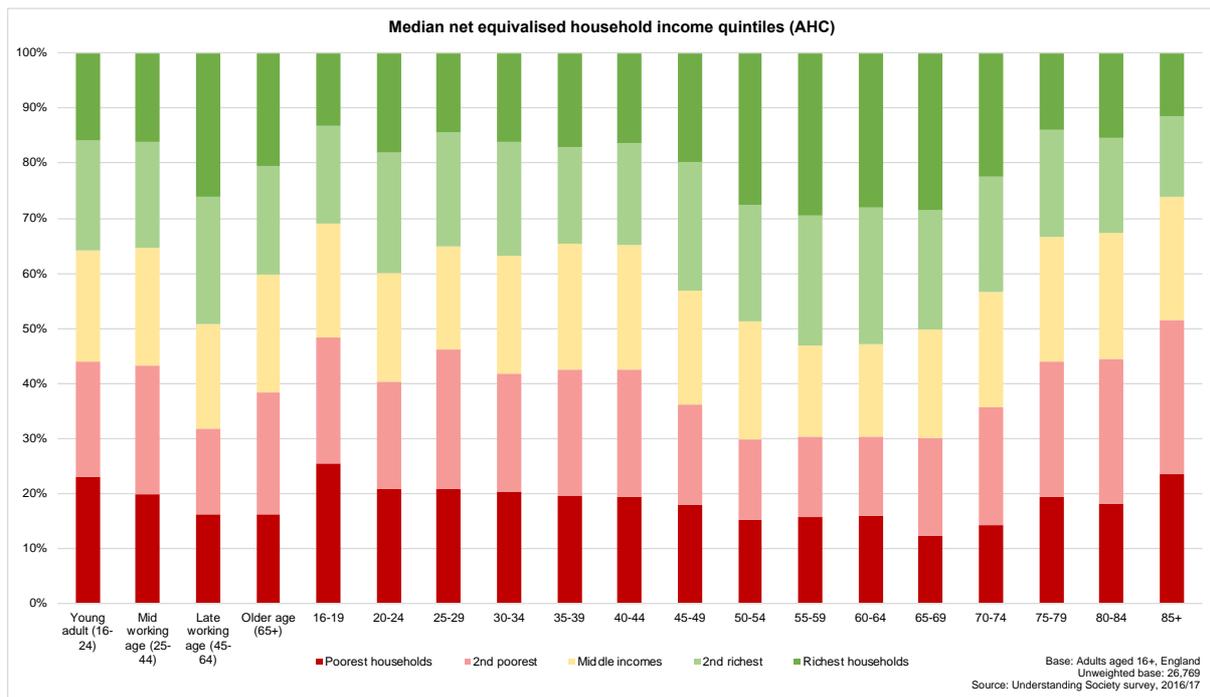
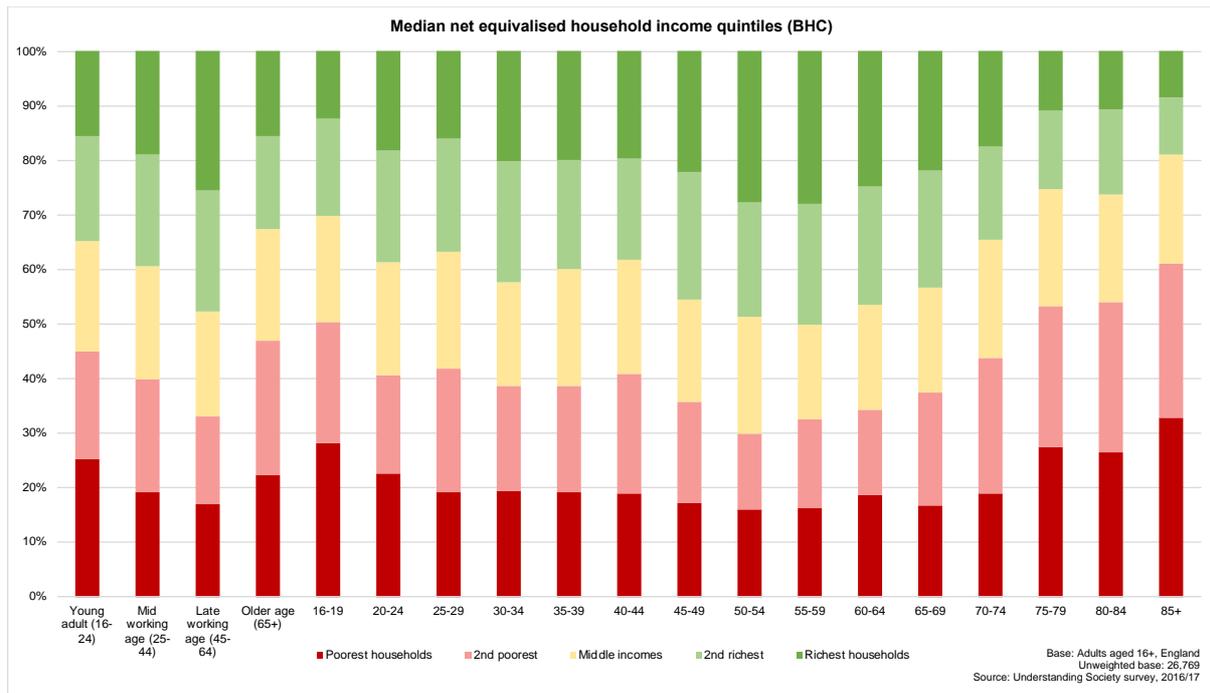
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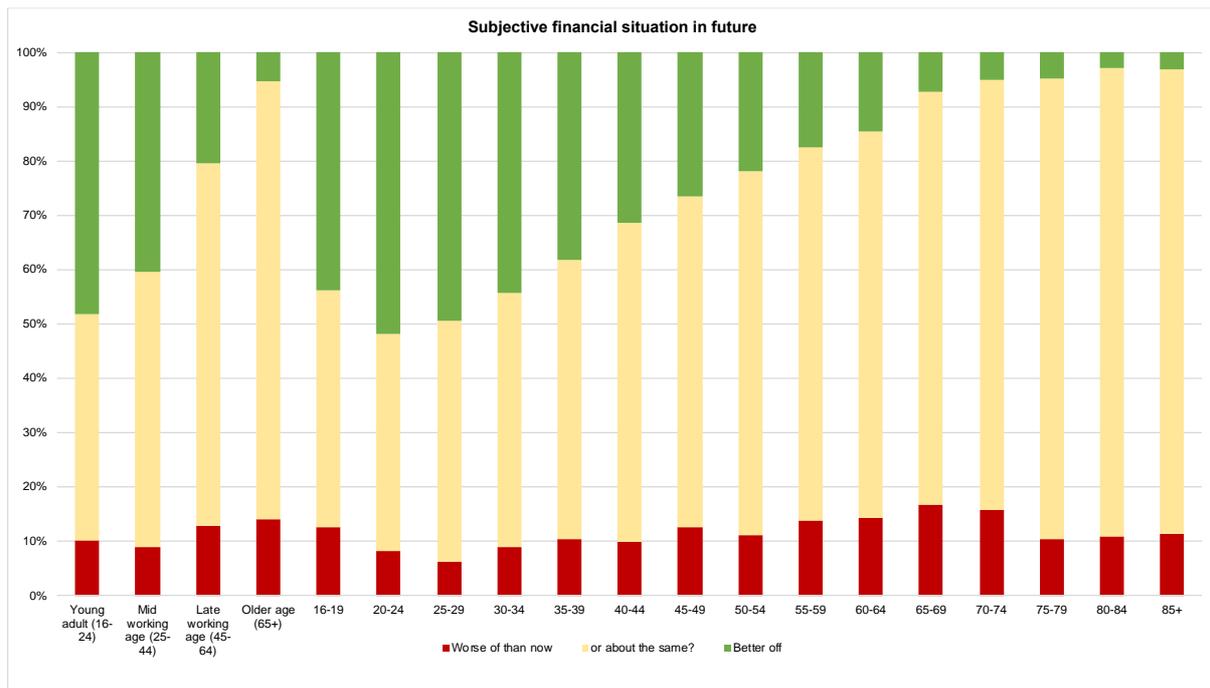
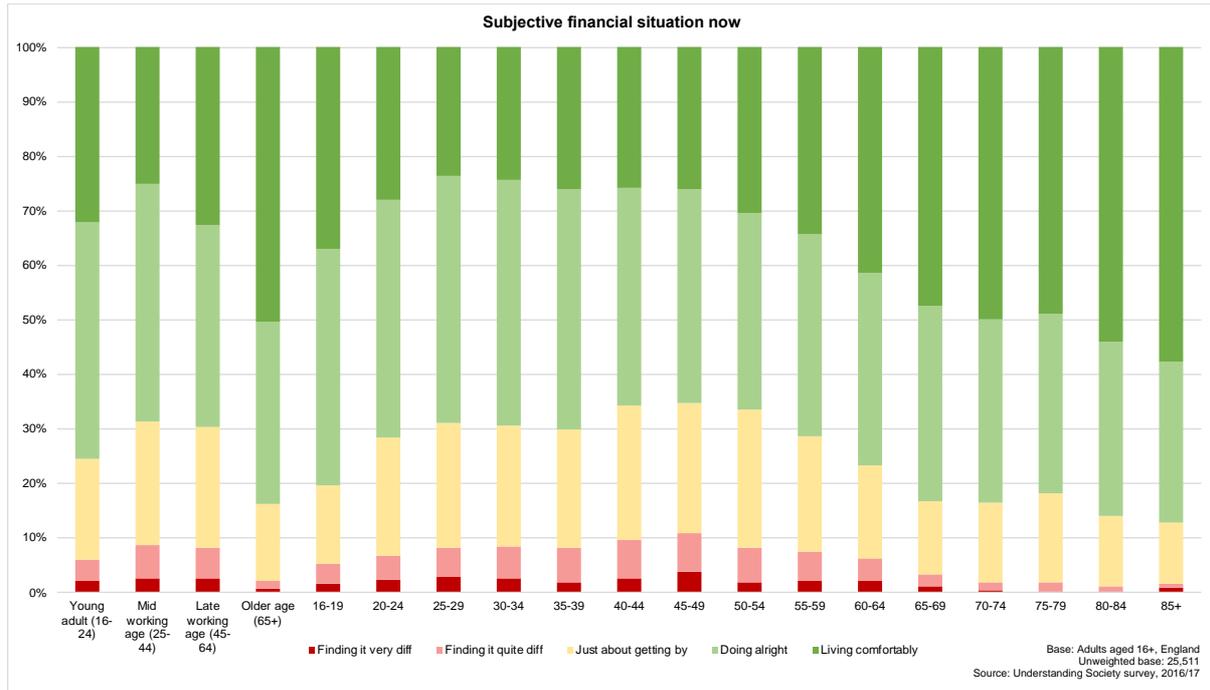
***Financial Security***

- Older people (and late working age) are the least likely to be income poor (after housing costs), yet rates of low income increase for people aged 75+.
- Older people are least likely to say they find it difficult to get by financially and to feel they are dissatisfied with their household income (along with young adults). However older people, particularly those in early old age are more likely than other age groups to worry about their future financial situation (still only a minority of people think this though).
- Only a small minority of people are behind with household bills and this reduces gradually as people get older.
- Home ownership increases with age (including owning home outright as people pay off their mortgage), yet there is a small rise in rates of renting for the oldest old. Around a quarter of older people aged 75+ live in rented accommodation (the majority of who live in social rented housing).
- The amount of money people spend on food and groceries tends to go up as people age but drops for people age 75+.
- The percentage of people receiving health and care related benefits (Attendance Allowance, Carers Allowance) increases as older people age.
- Older people (and those in mid-working age) are the most likely to be deprived of consumer durables (such as dishwasher, tumble drier, mobile phone etc). Levels of deprivation increase further for those aged 75+.
- Not having a holiday away from home each year increases in older age, up to three in five people aged 85+ not having an annual holiday. This is mainly because their health or disability prevents them from doing so.
- The older people get the less likely they are to have access to a car or other private transport. Around 10 per cent of people aged 85+ are without this.

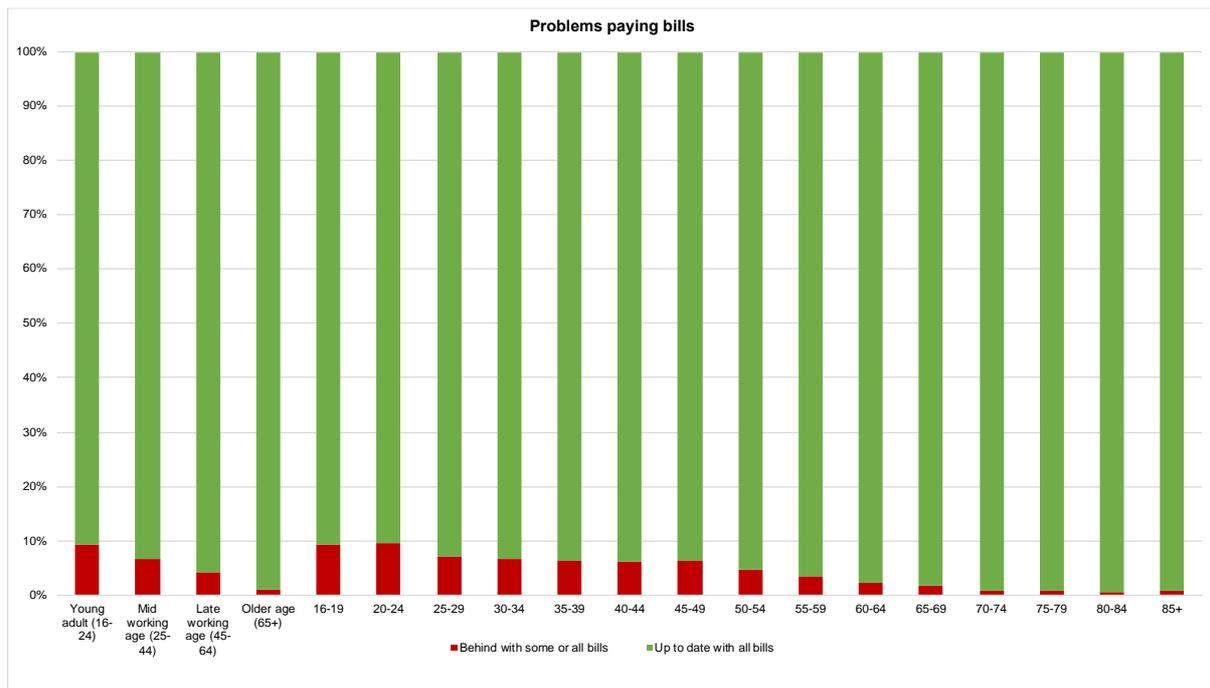
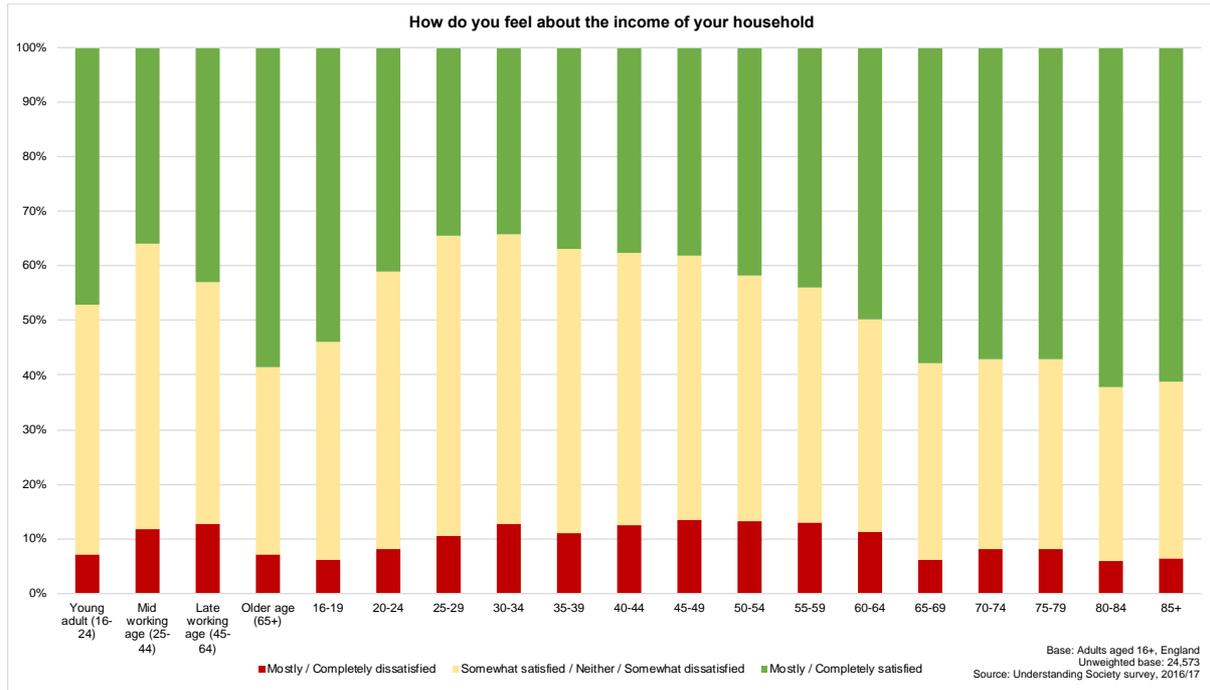
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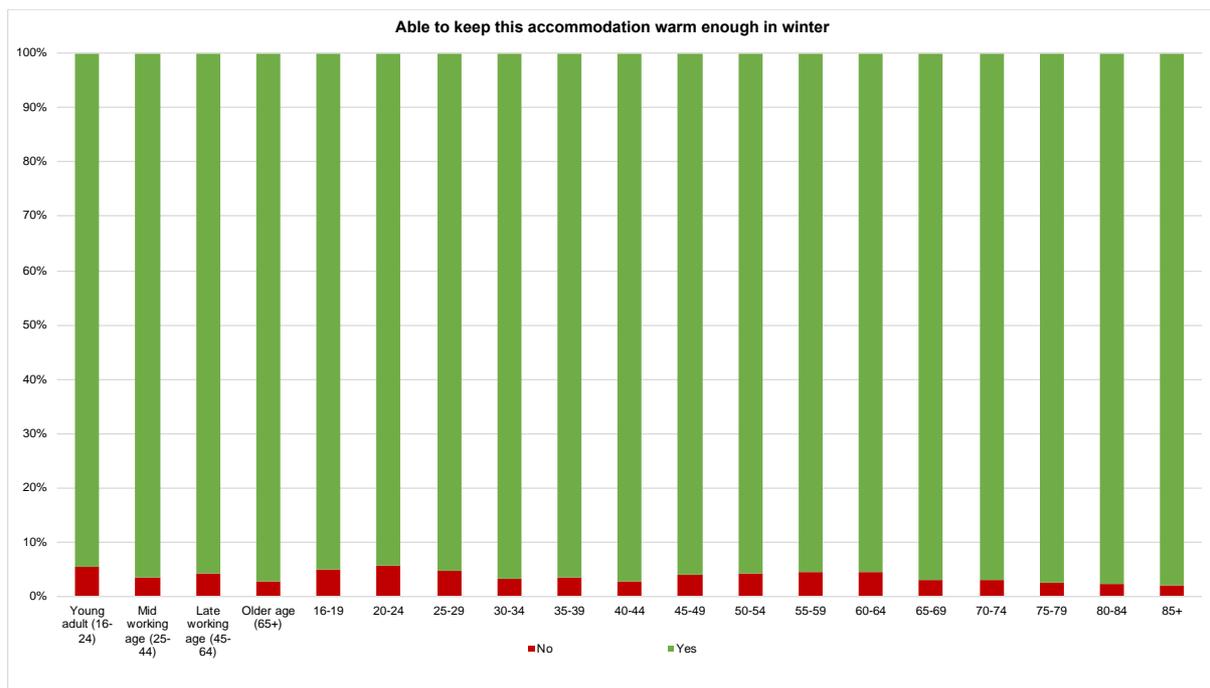
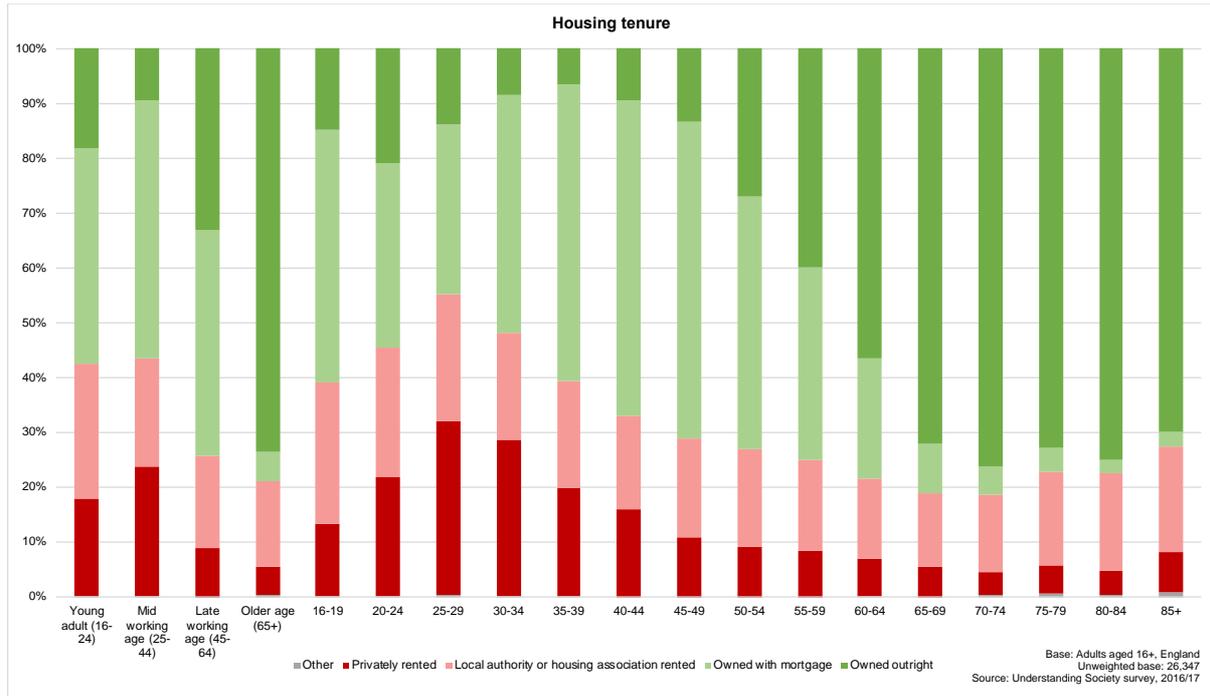
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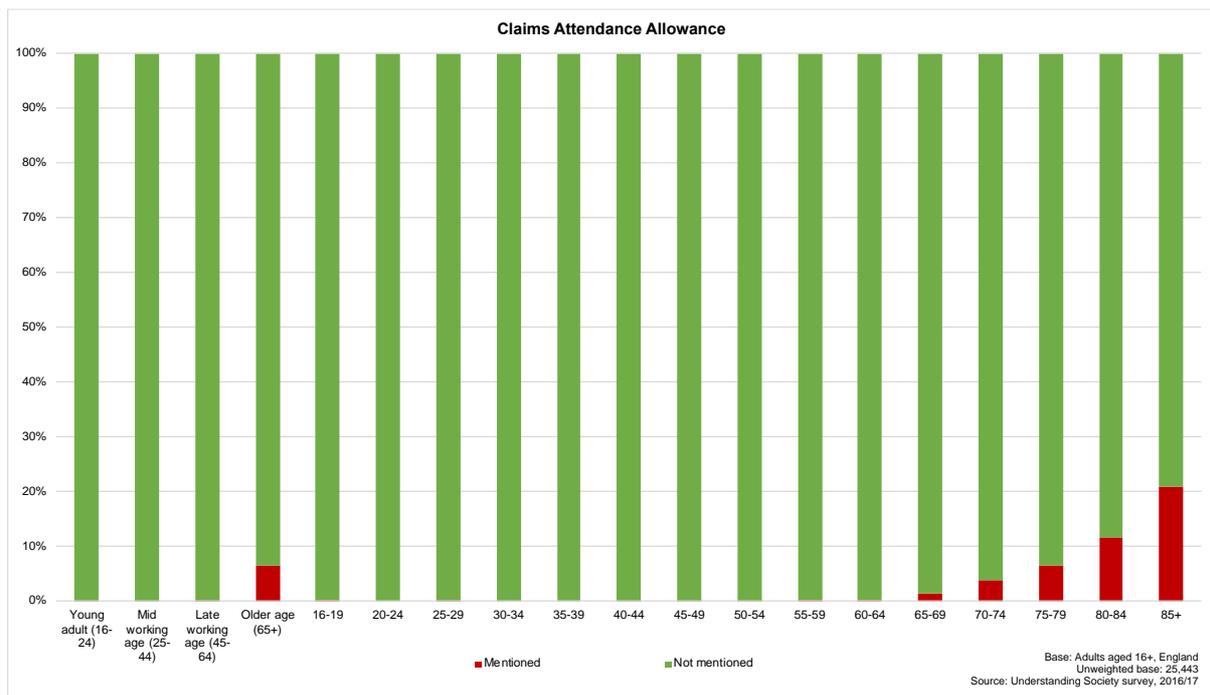
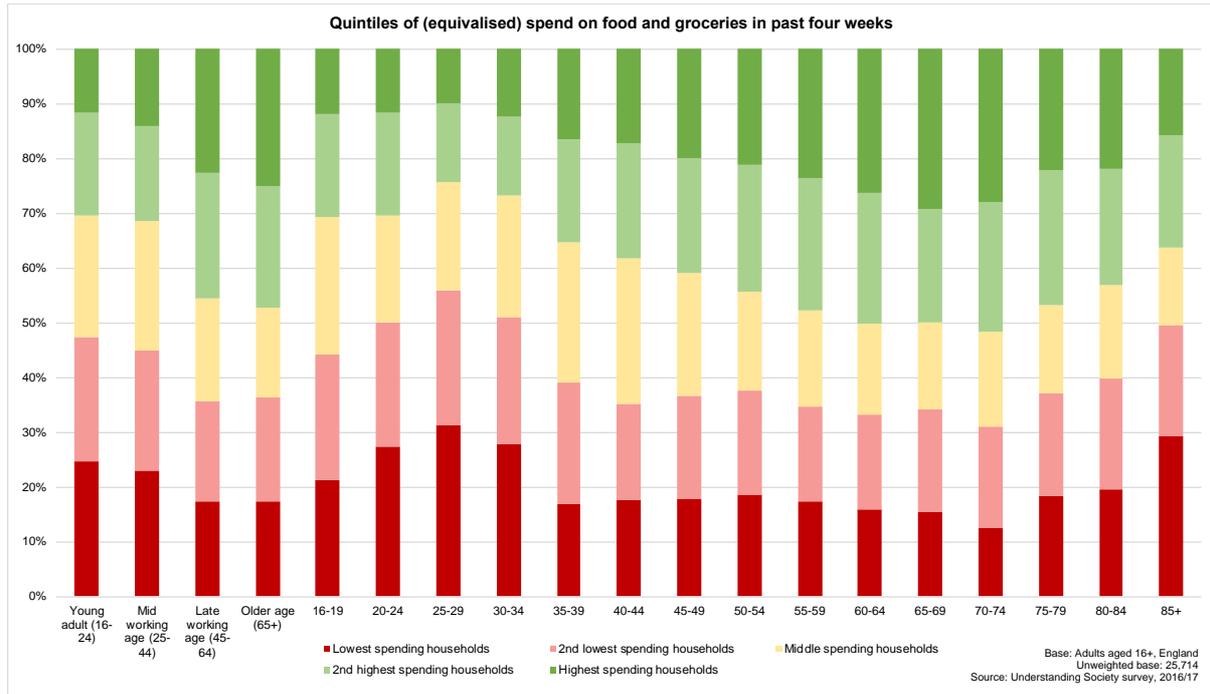
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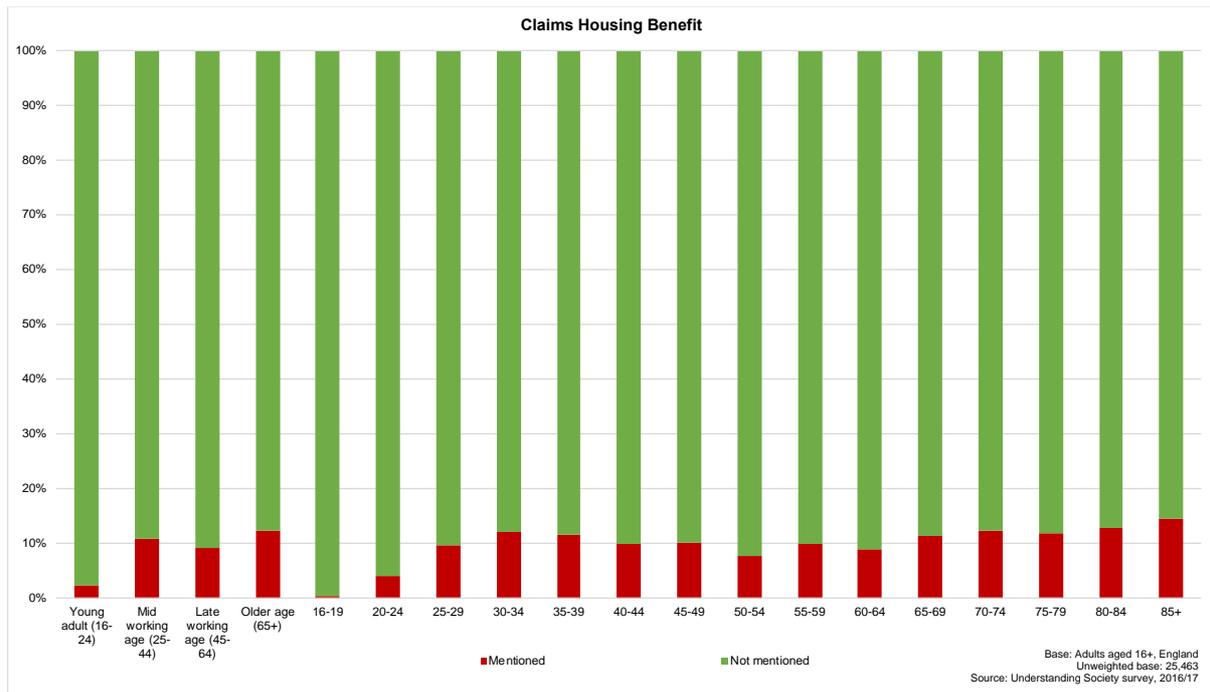
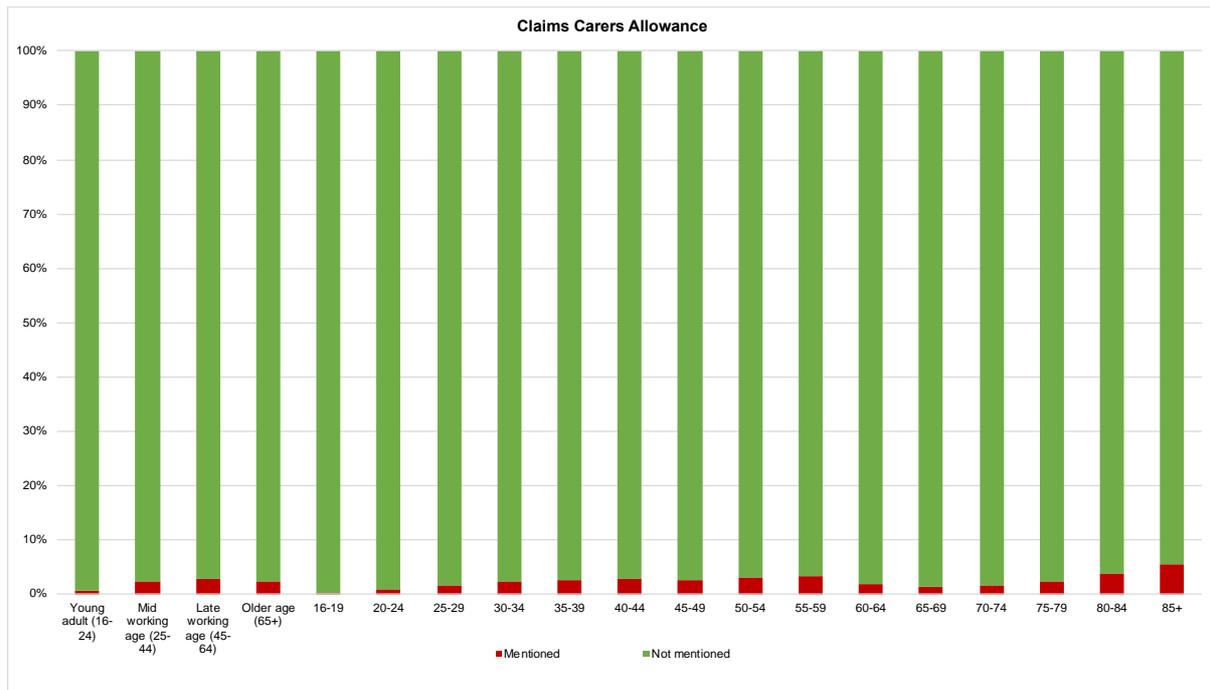
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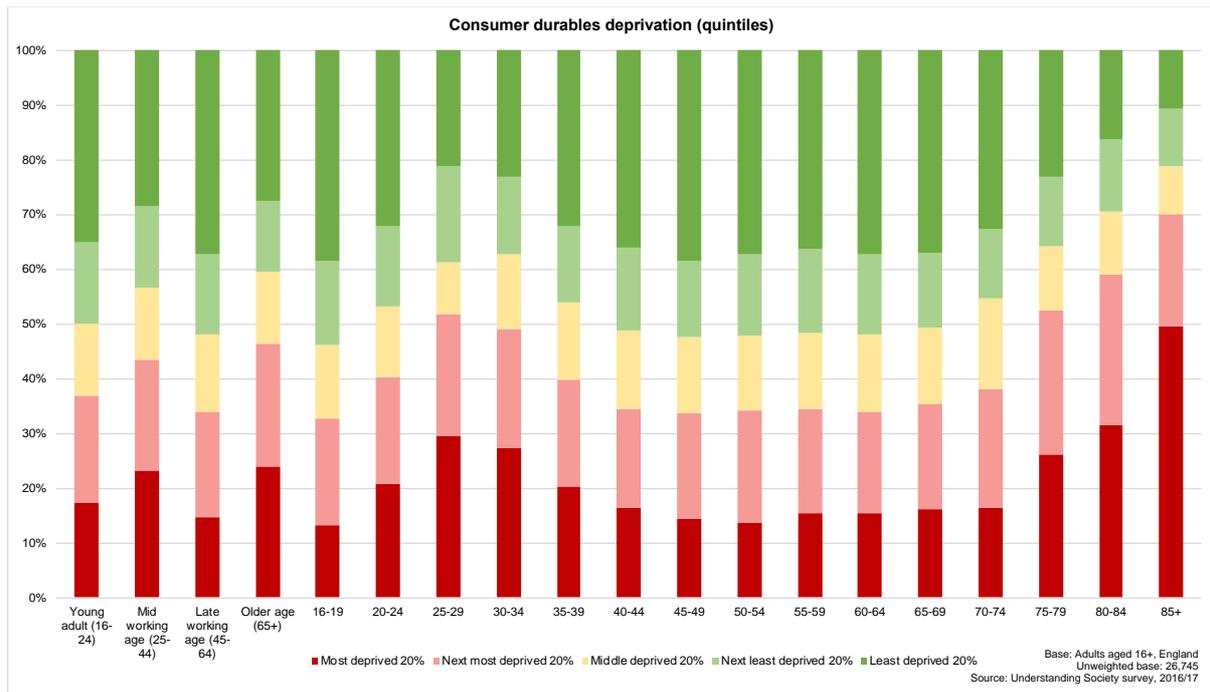
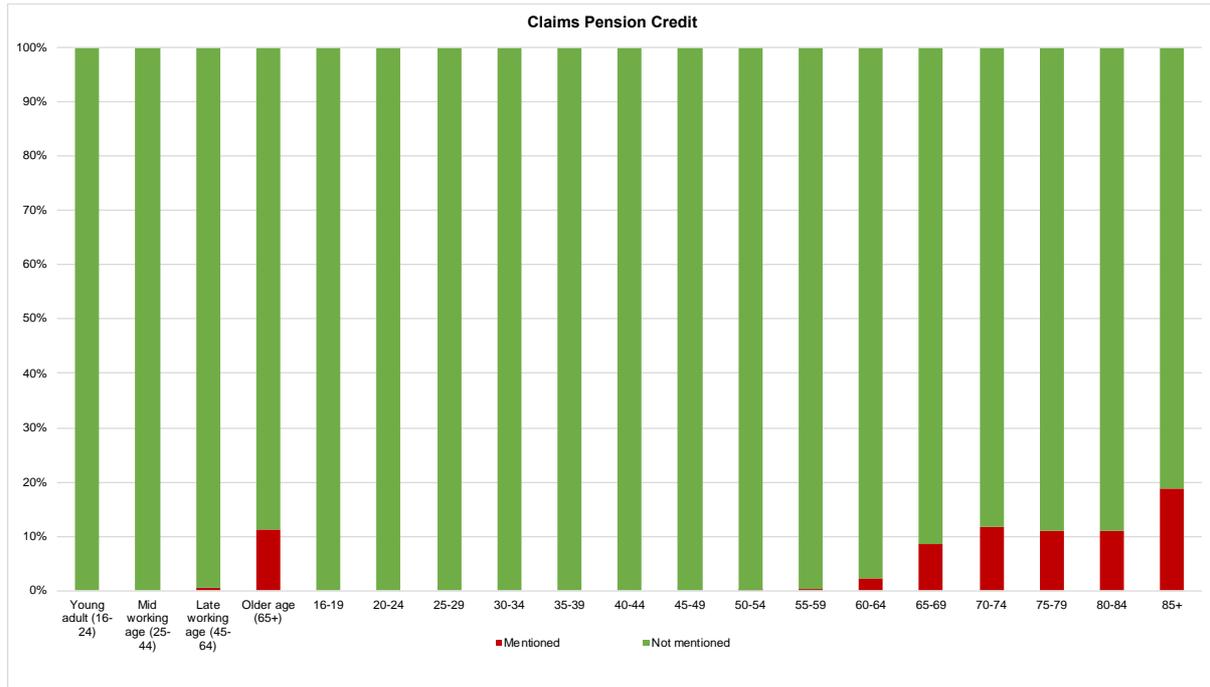
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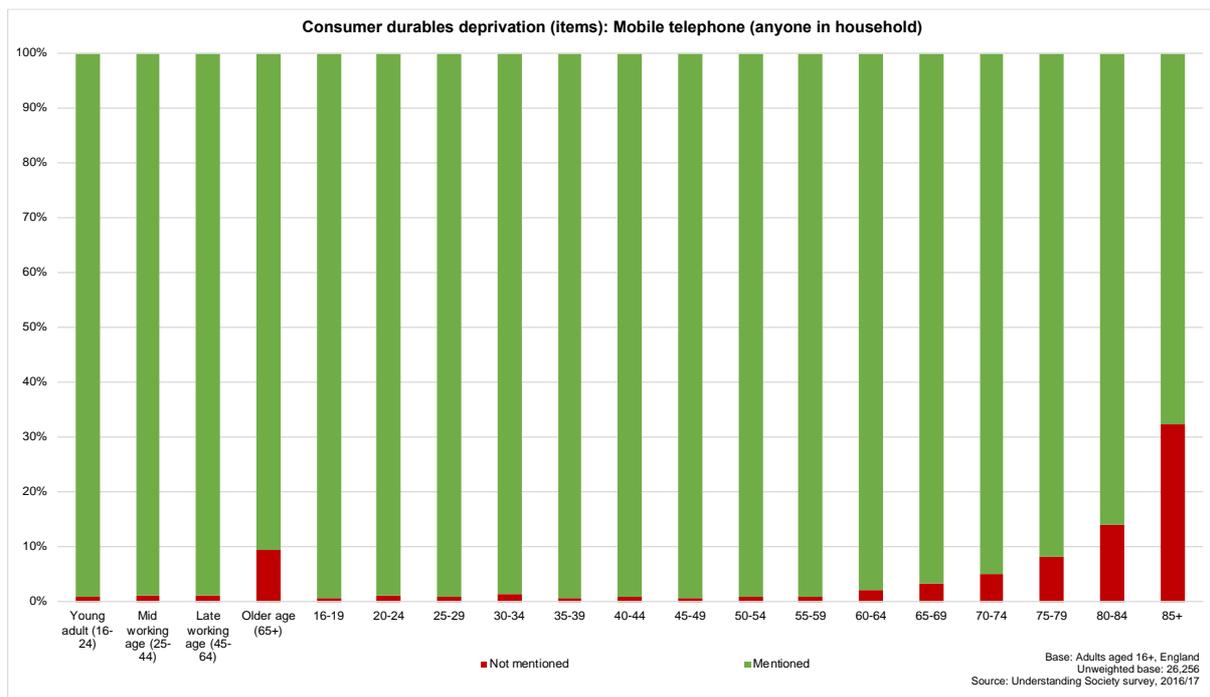
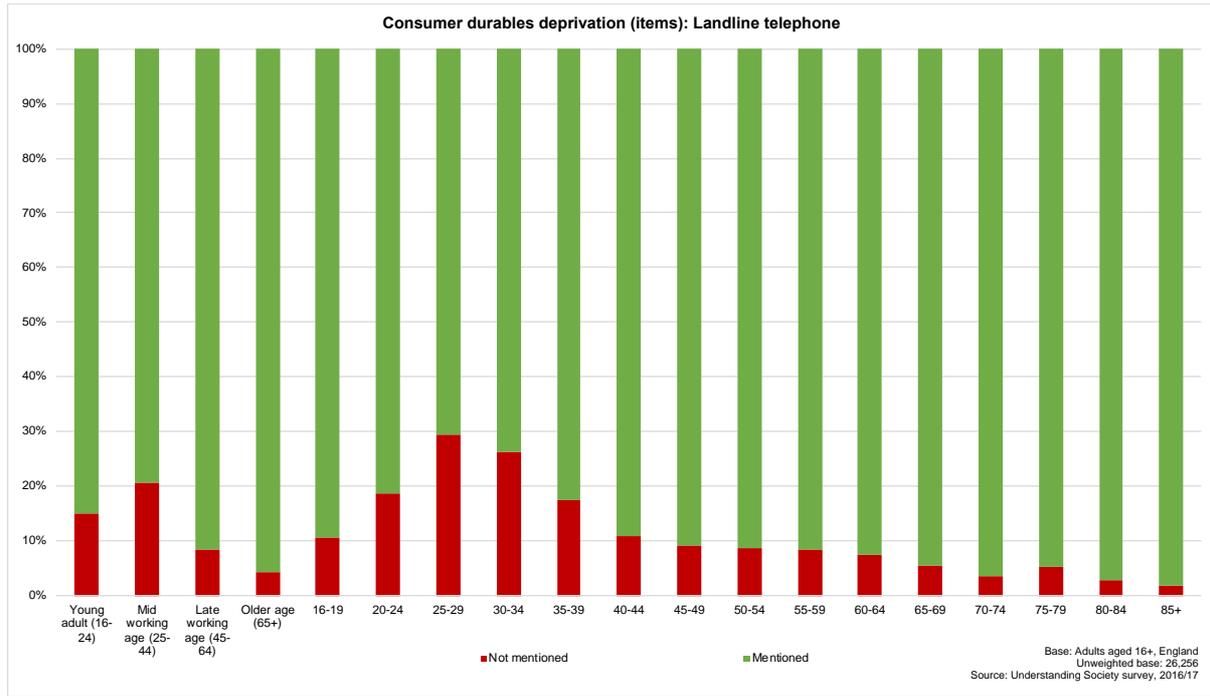
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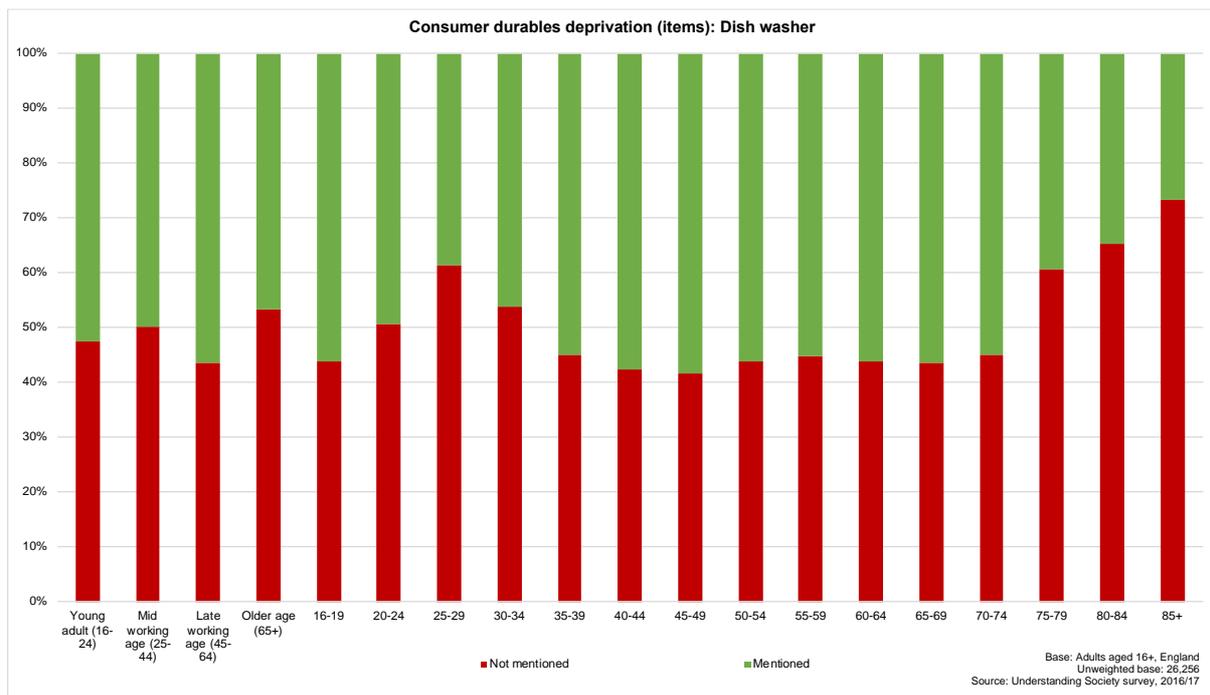
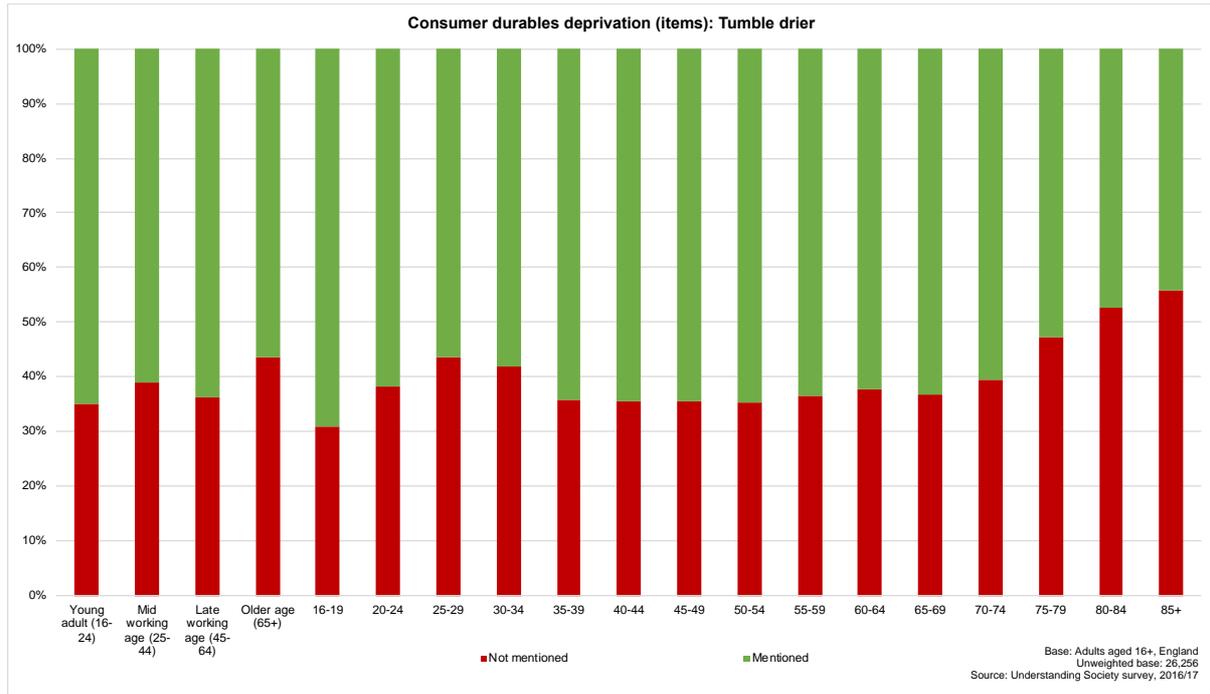
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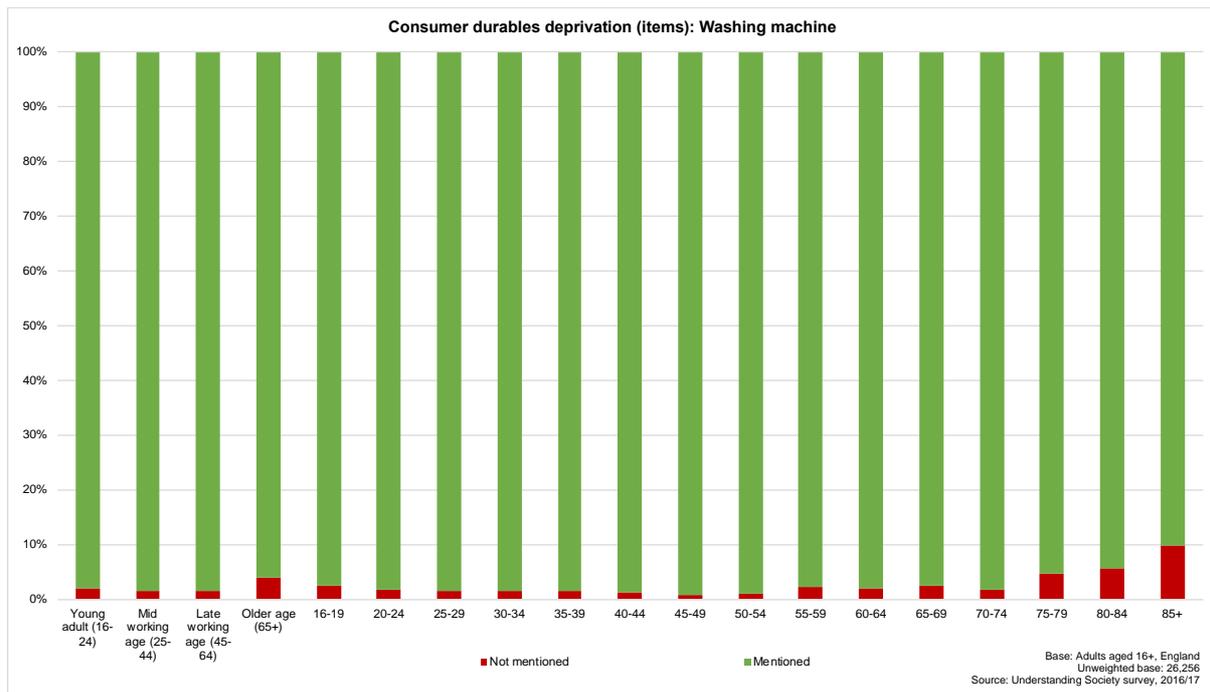
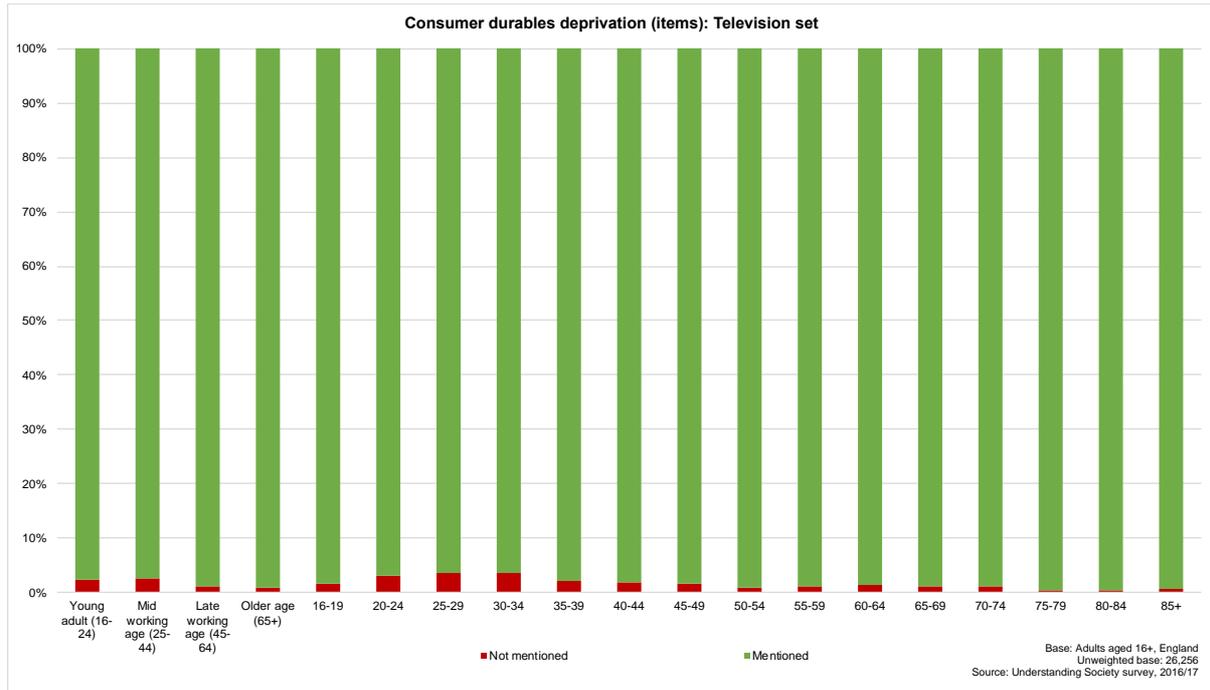
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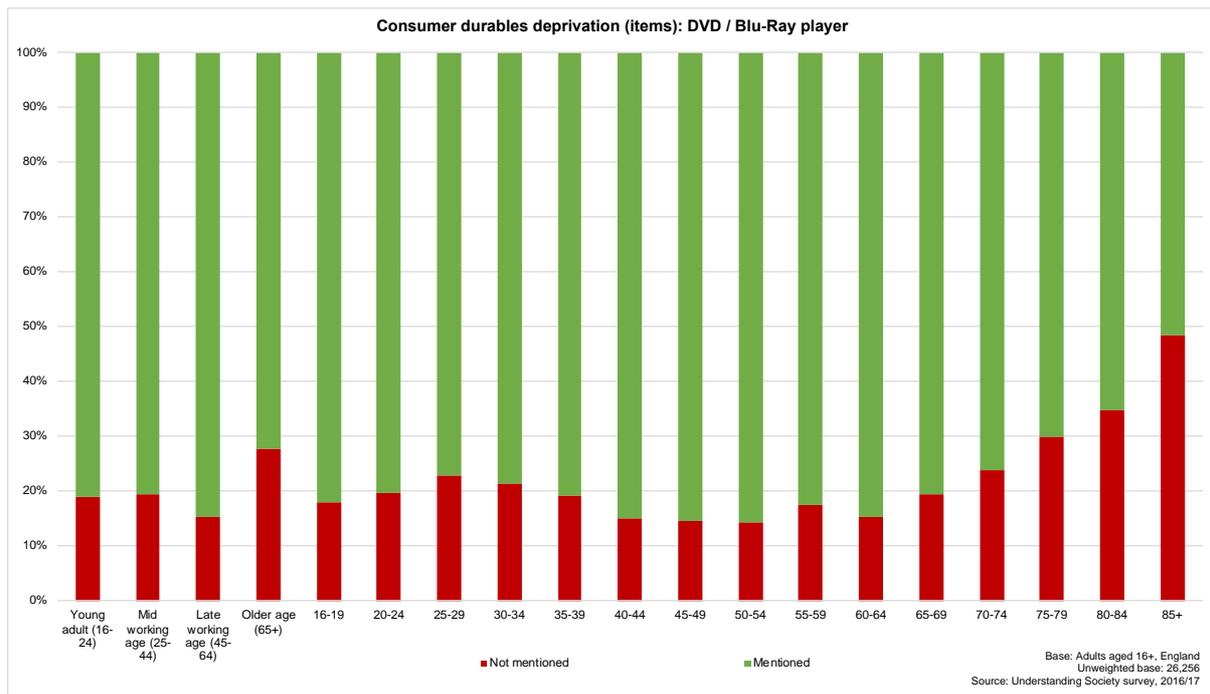
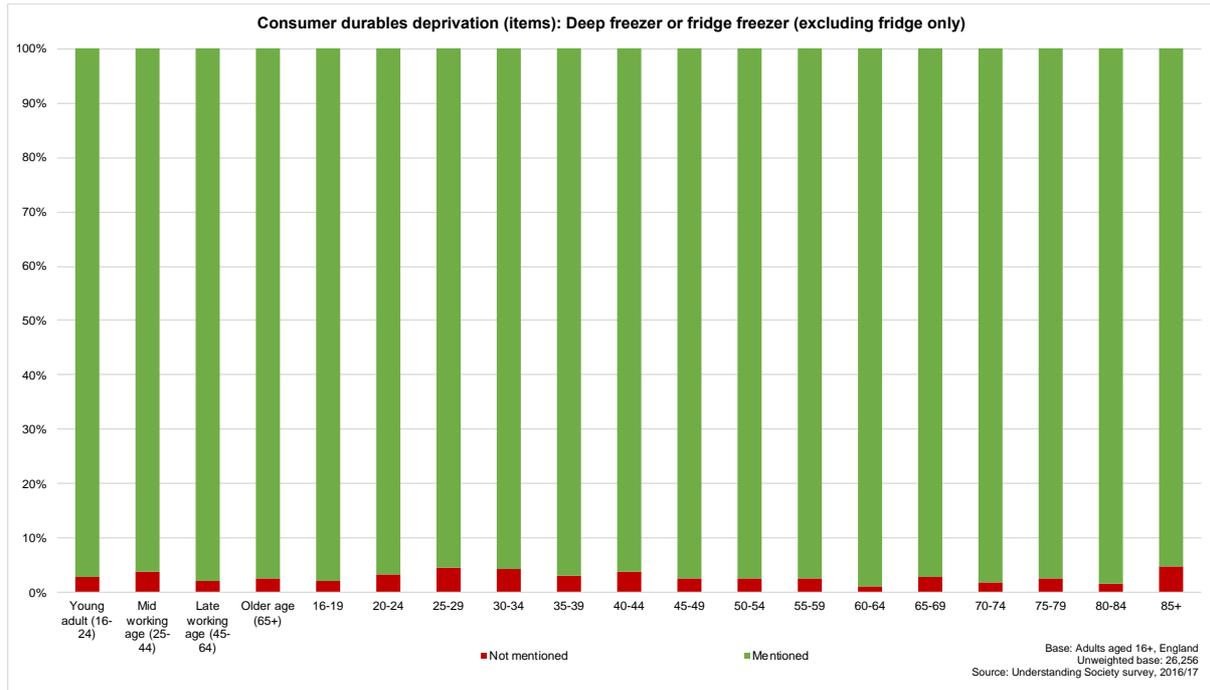
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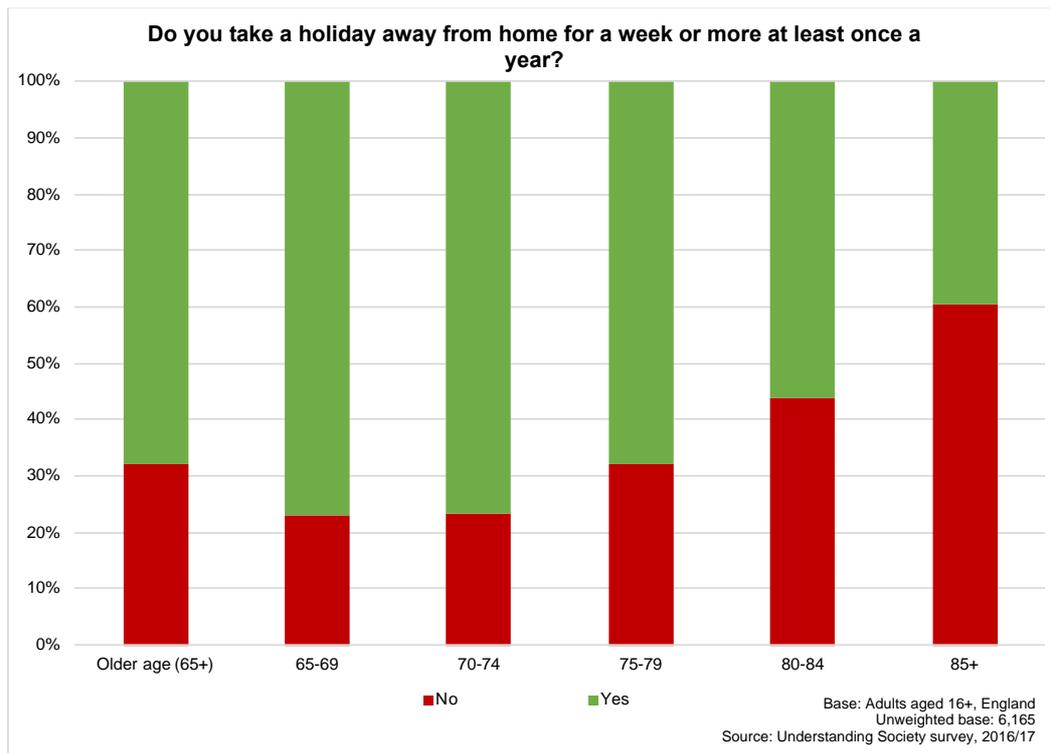
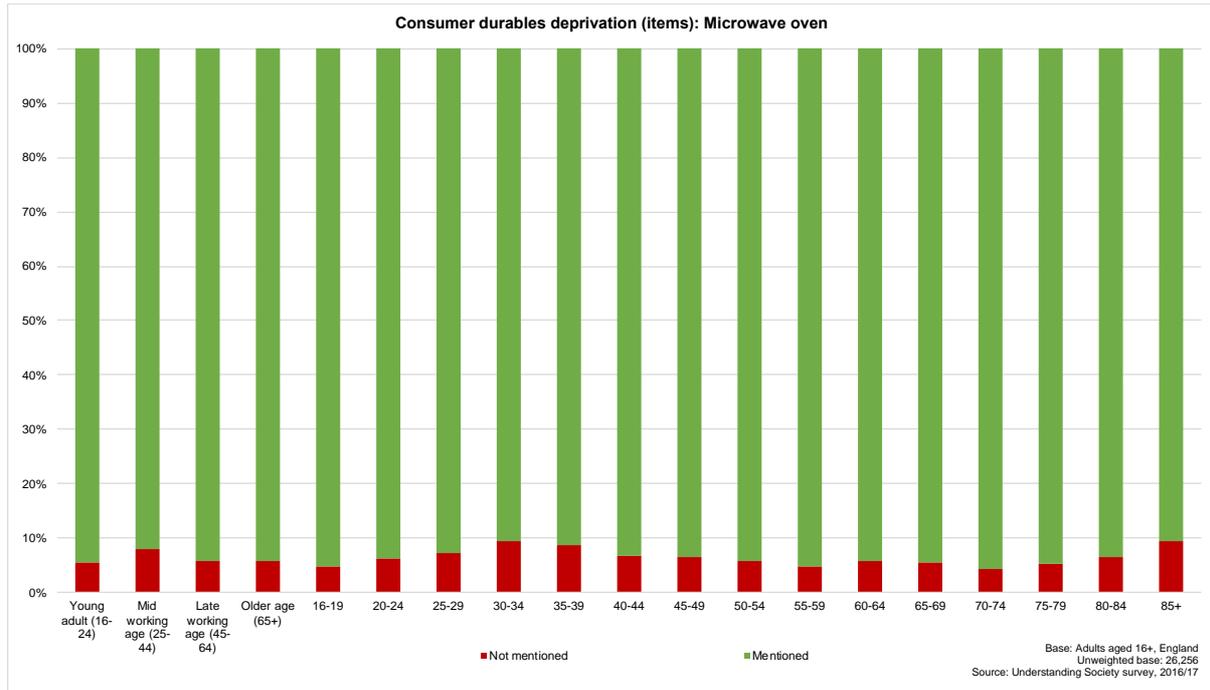
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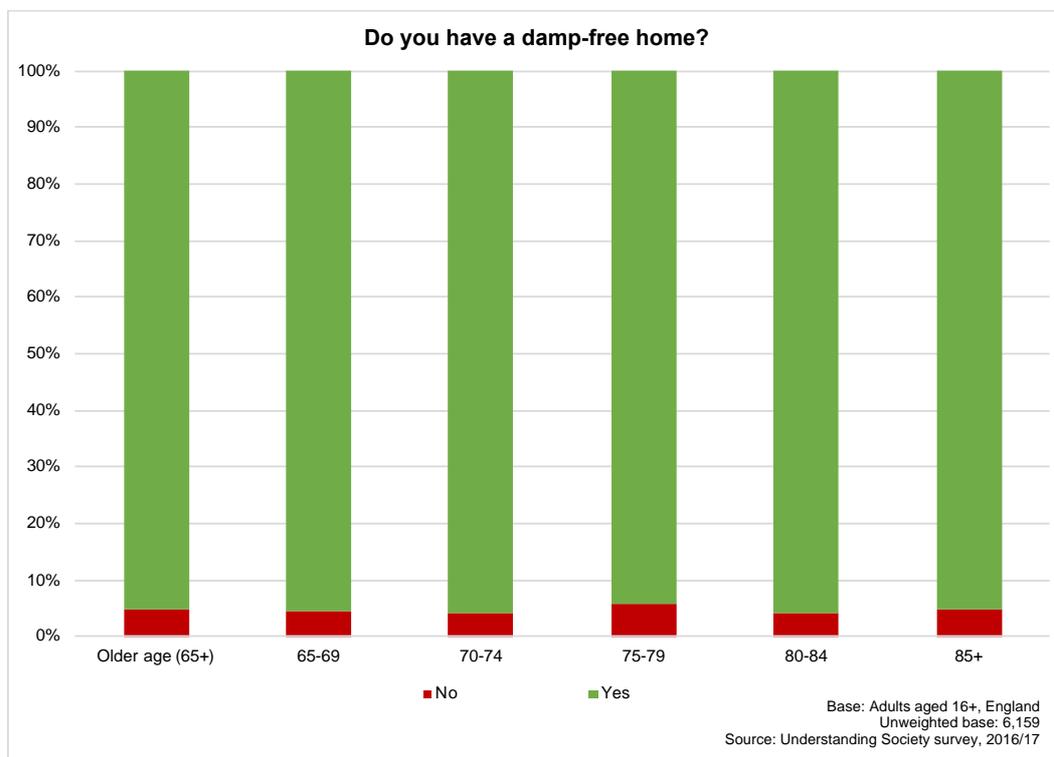
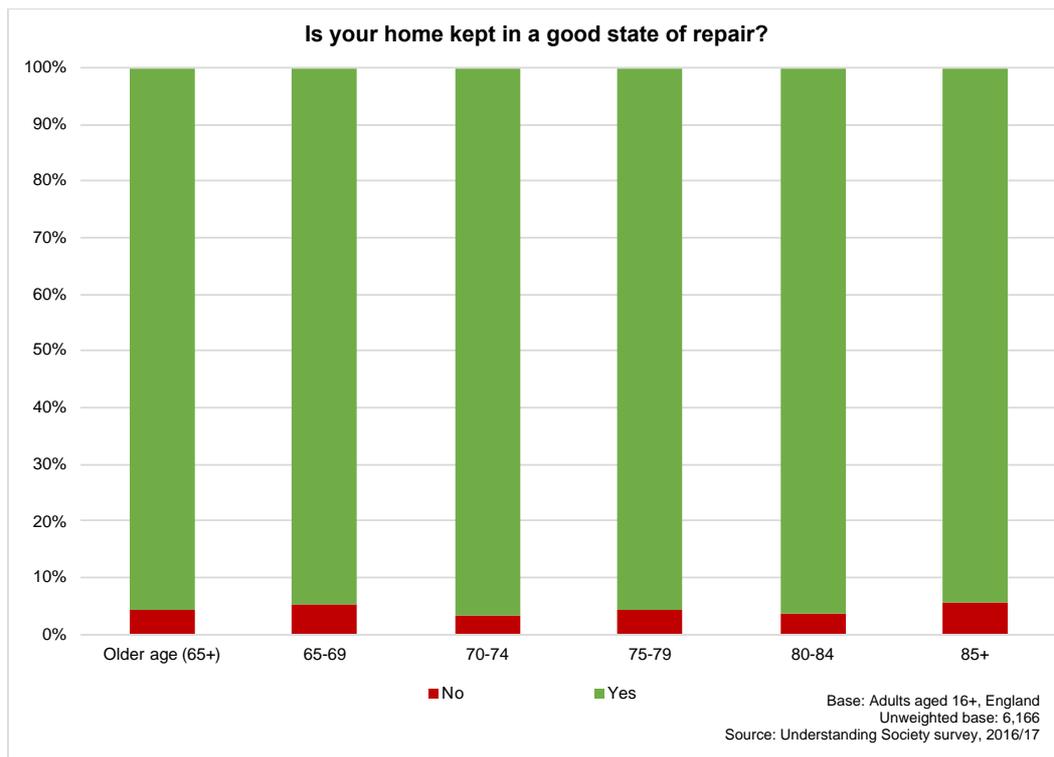
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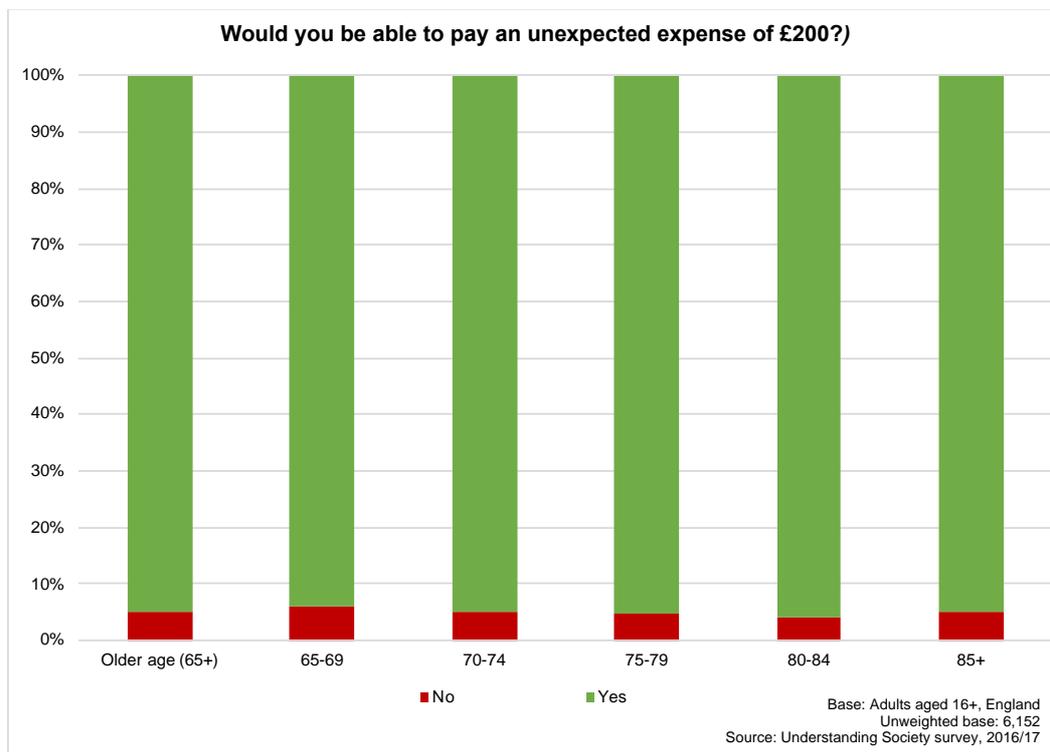
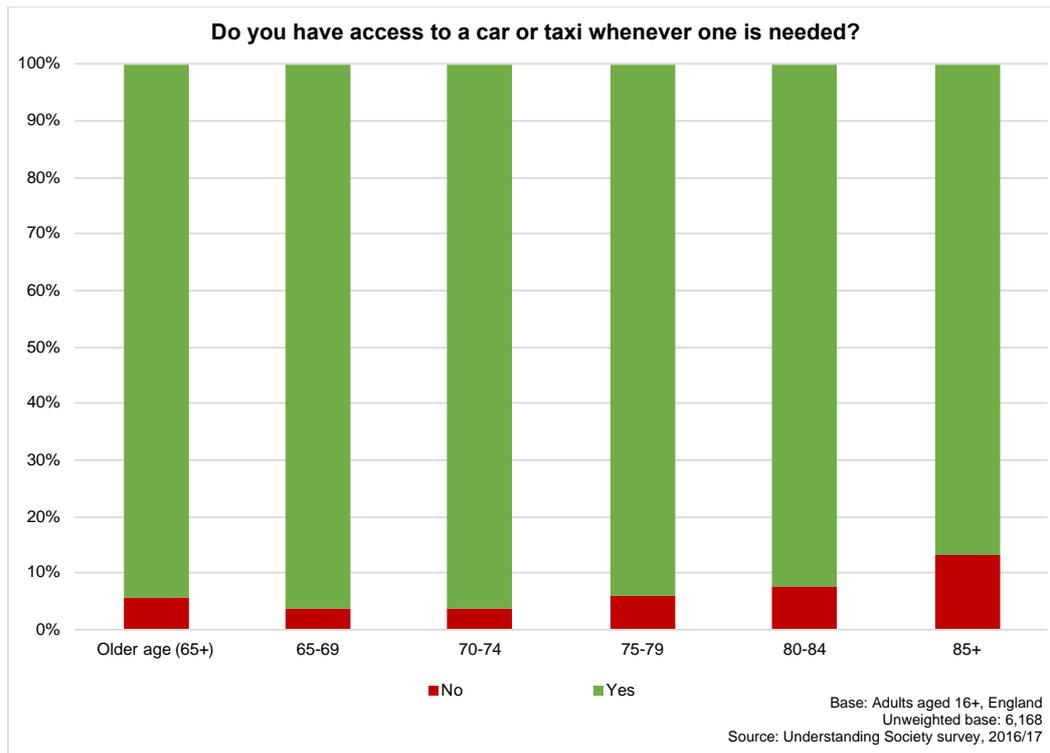
# Financial security



## Financial security



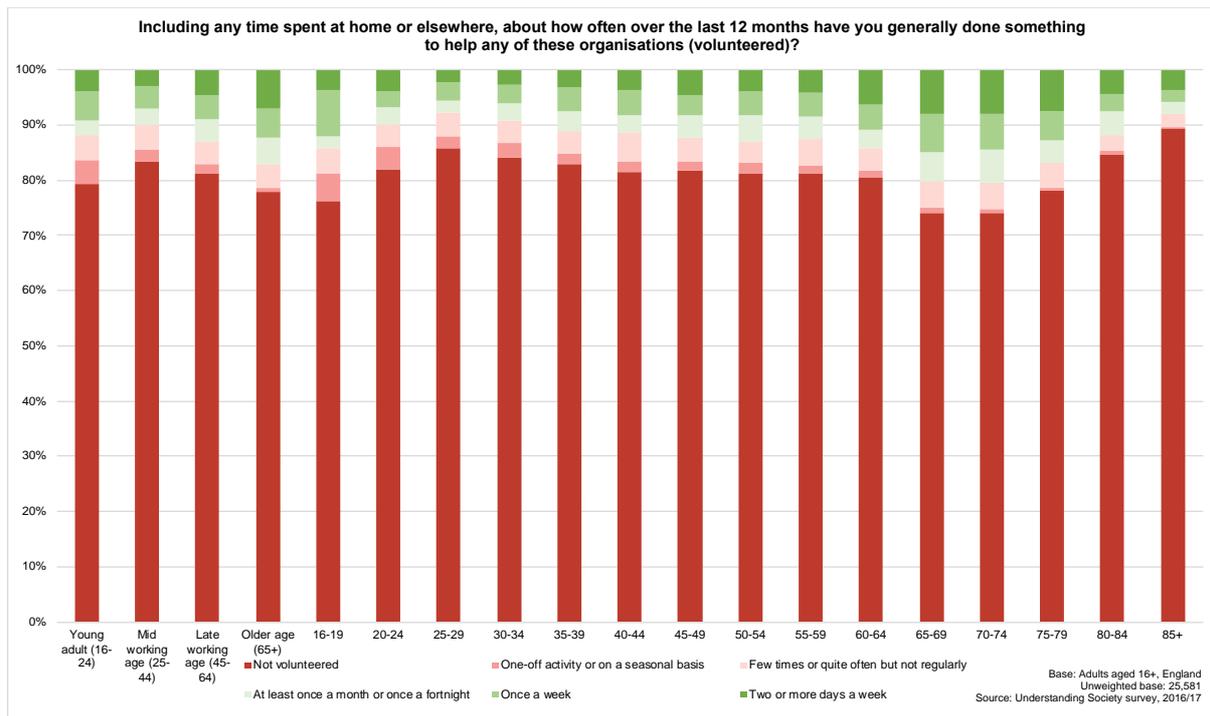
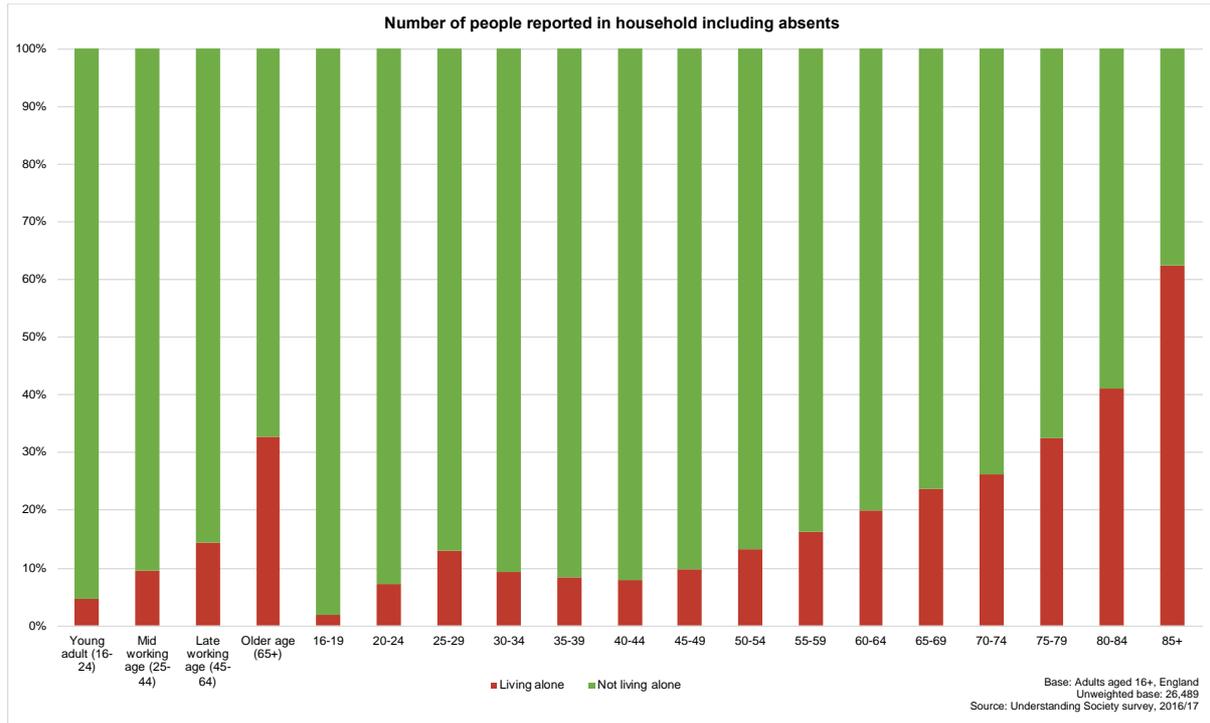
## Financial security



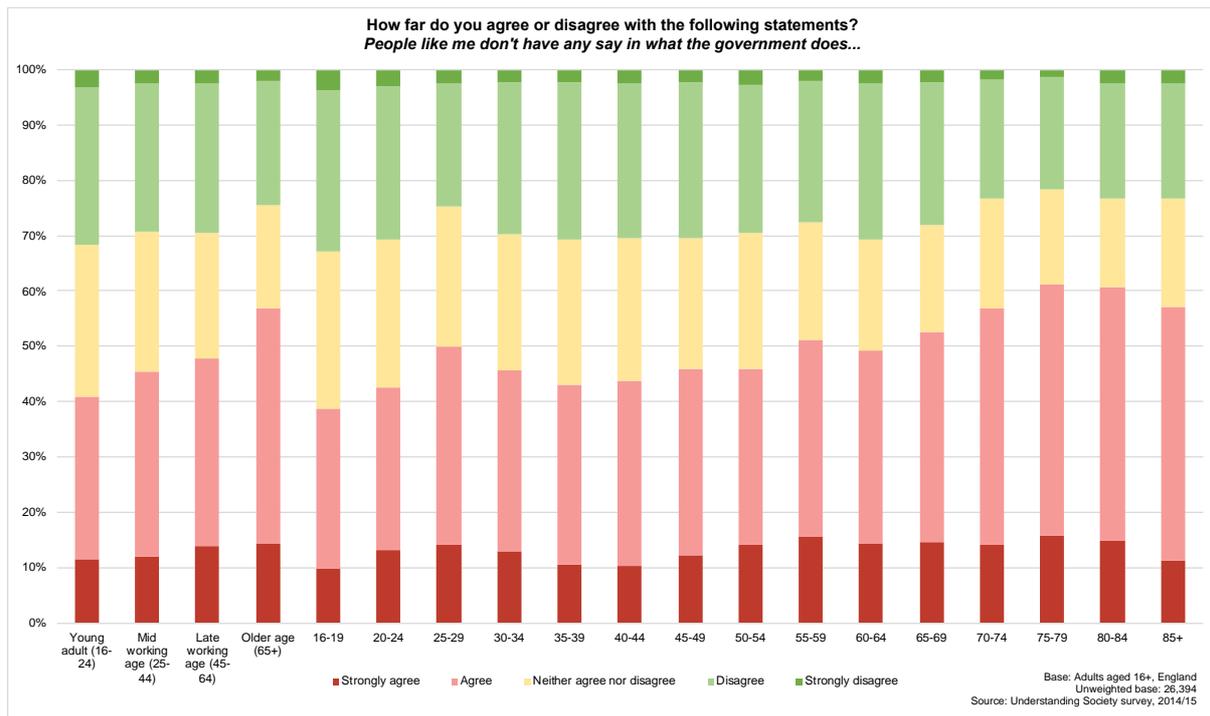
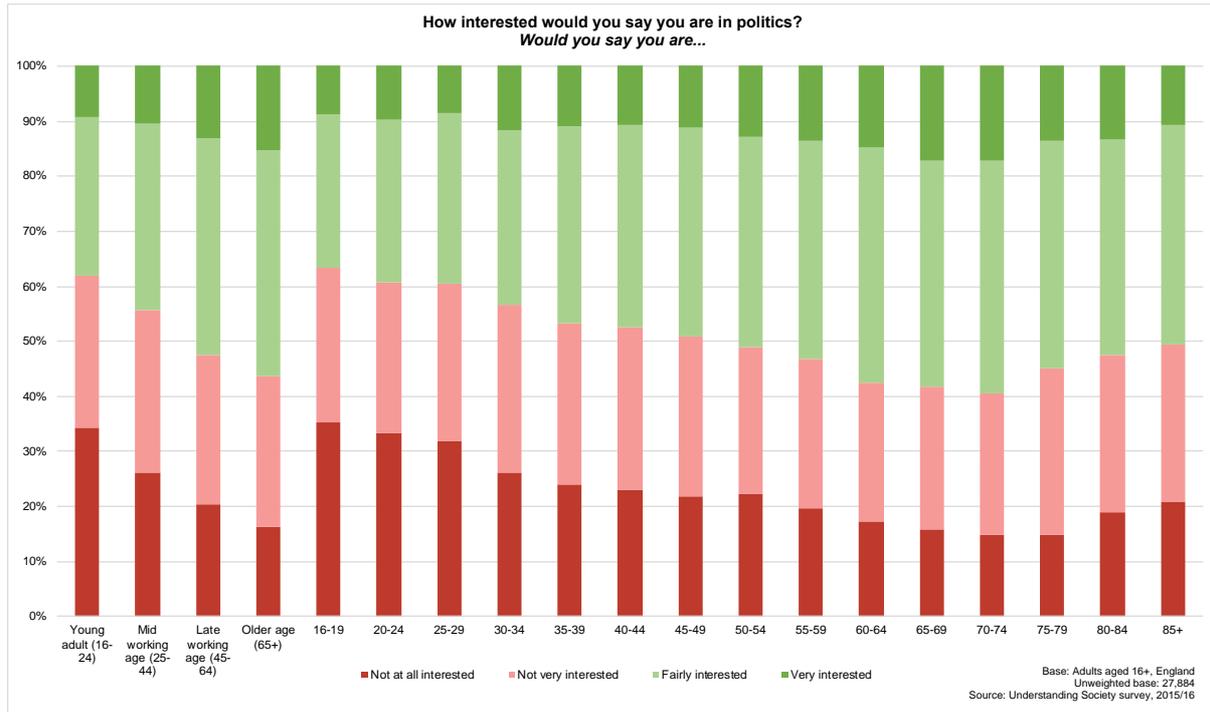
### ***Social Connectedness***

- Older people are more likely to live alone. Approximately three in five older people aged 85+ live alone.
- Interest in politics increases as people get older, but declines again for the oldest old. People in their 70s and 80s are also most likely to say that they don't have any say in what the government does
- The oldest old are least likely to regularly by car. Older people are the most likely group to travel by bus (as are young adults who may use it for school/college)
- Older people (and younger people) are least likely to worry about being a victim of crime
- Having none or very few close friends (including family as friends) increases with age, and rises again for people aged 75+. Over one in ten people aged 85+ say they have no close friends.
- Chatting with friends through social websites is very much a younger person's activity, and rates of doing this drops quite dramatically through the life course. Only about one in ten older people do this, and this drops to about 2 per cent of people aged 85+.
- Rates of going out socially or visiting friends is lower for middle age (most probably families with children) and older age, but considerably so for people aged 75+. Around two in five people aged 85+ say they do not do this, and the main reason for not doing this is due to poor health or disability.
- Thinking about contact with children who don't live in the same household, by the time people reach their mid-50s most have at least one child living away from them. The majority of these have face-to-face contact at least once a week and this remains constant (if not increases slightly) as people reach late older age (perhaps as people receive more care and support from relatives). A similar picture emerges for contact via phone/email etc.
- Older people, particularly the oldest old, are unlikely to take up training schemes, evening classes etc.
- The majority of people do not use public libraries but usage is highest in older age, although lowest for those aged 85+.
- People in older age are far less likely than the other life stages to use the internet (for personal use) and this reduces even further into older age. Less than one in five people aged 85+ use the internet every week.

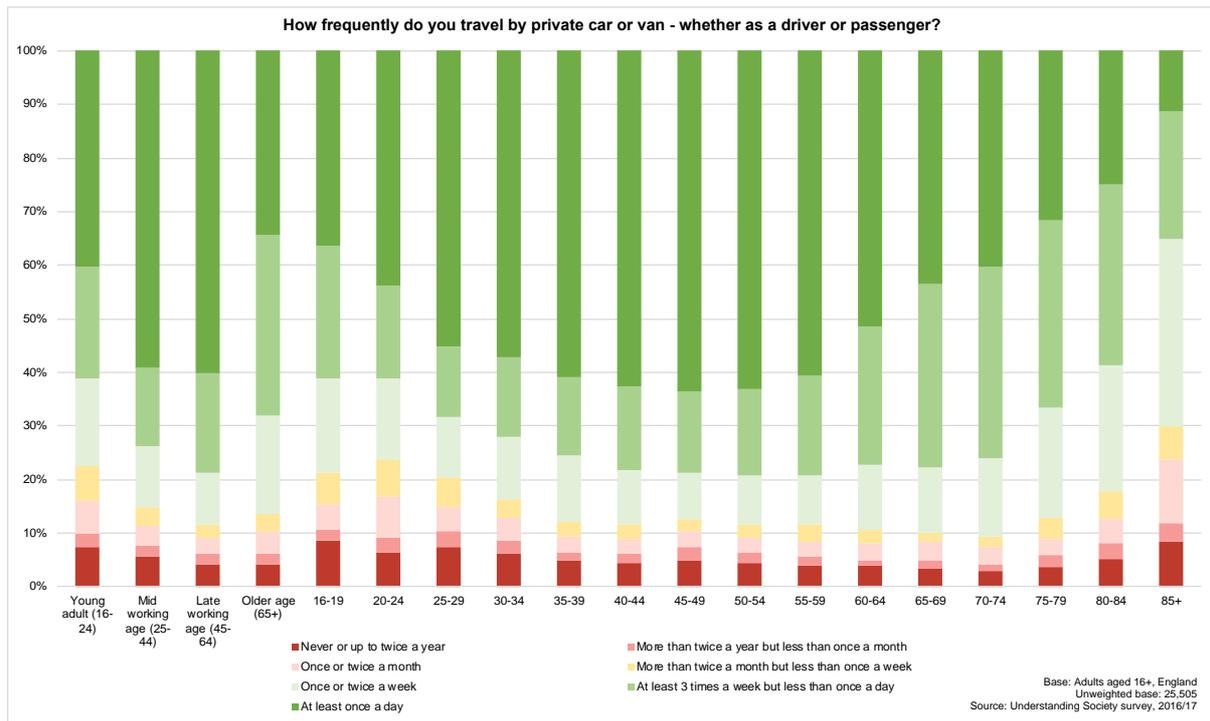
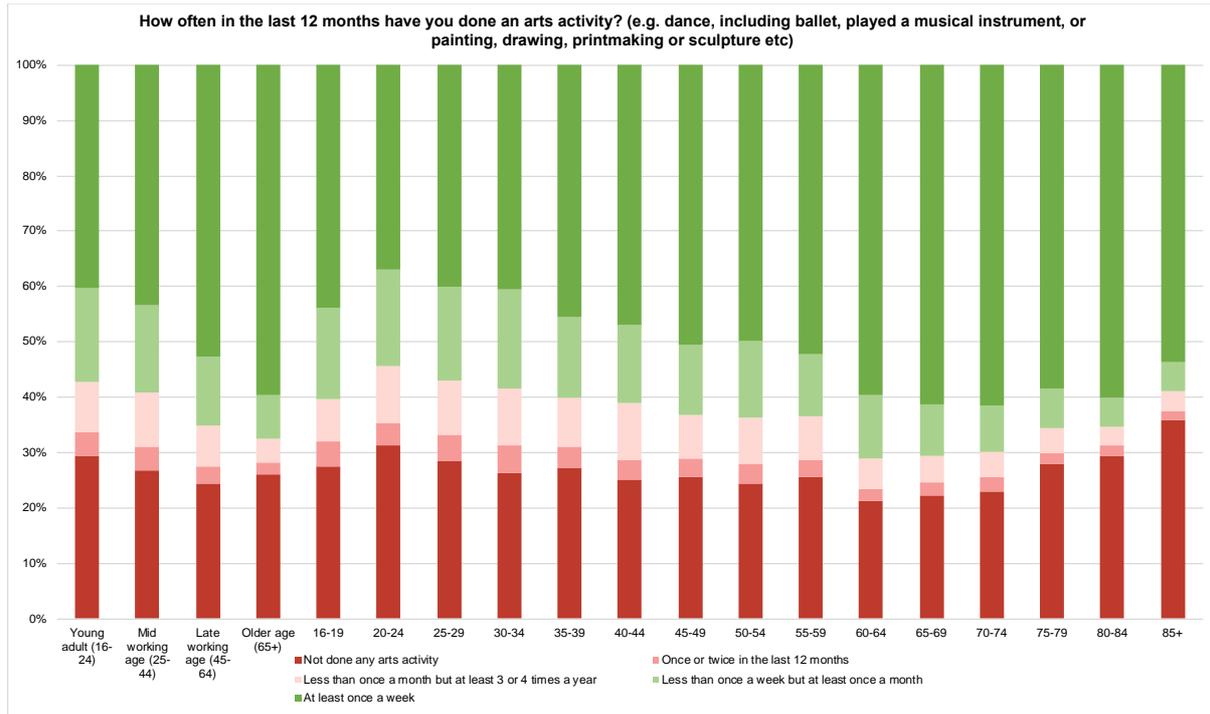
# Social connectedness



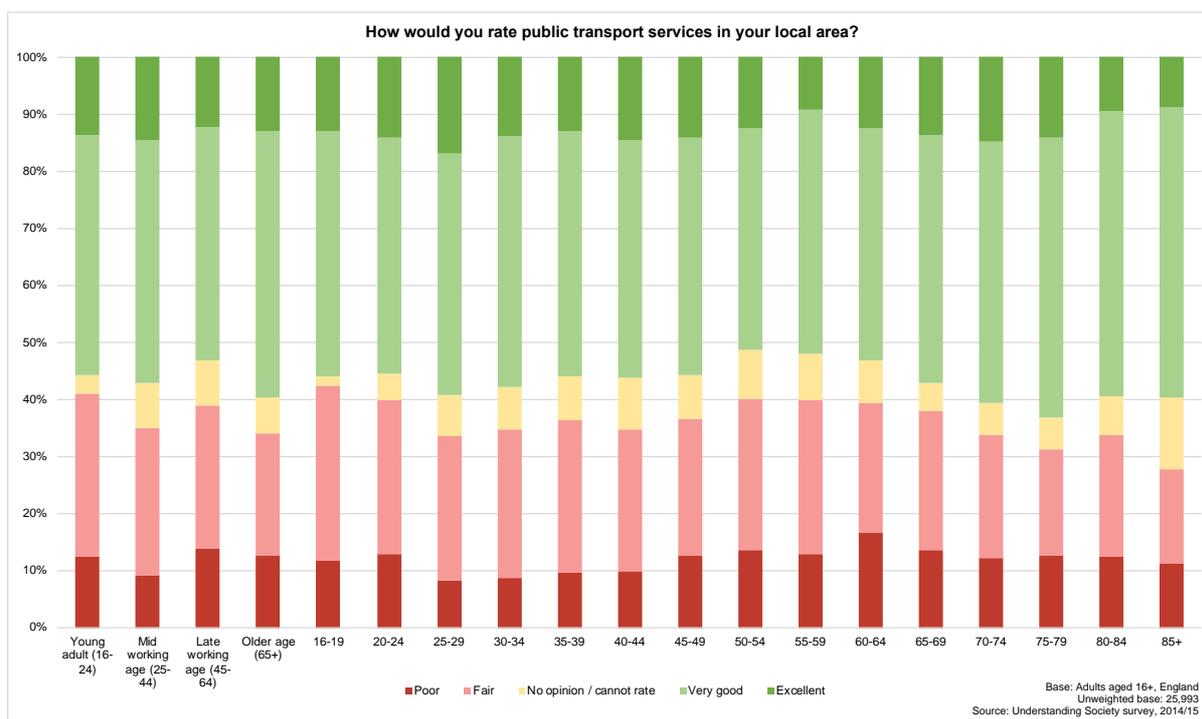
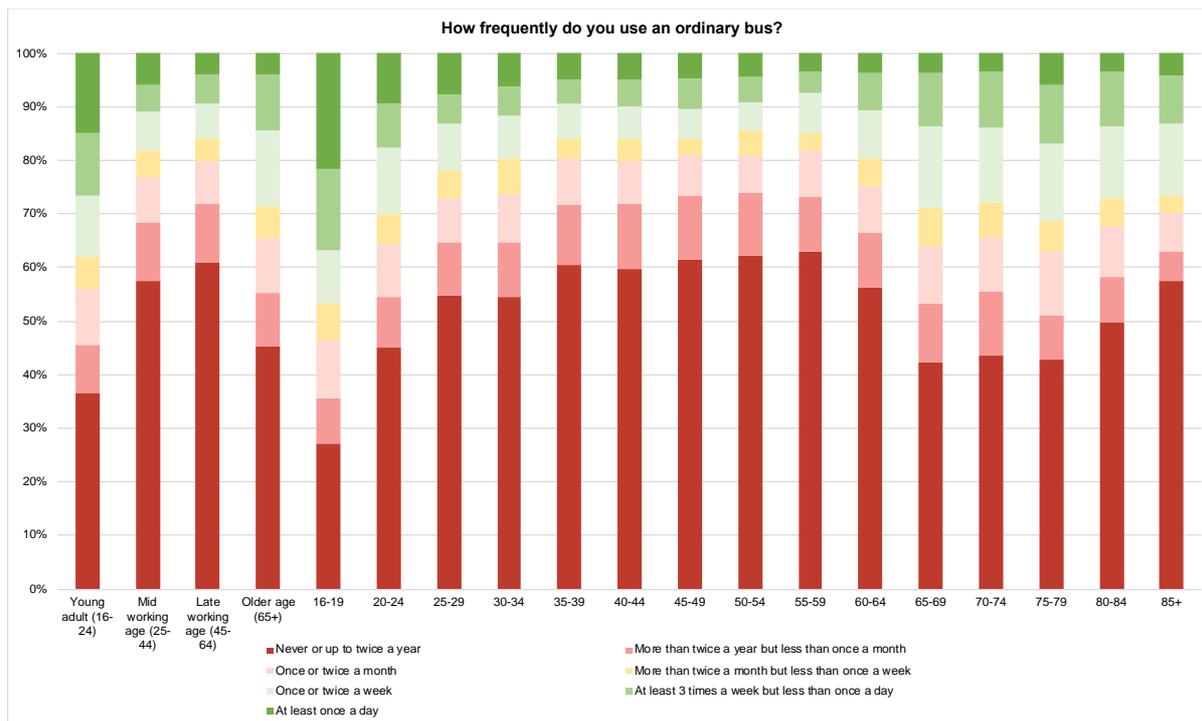
# Social connectedness



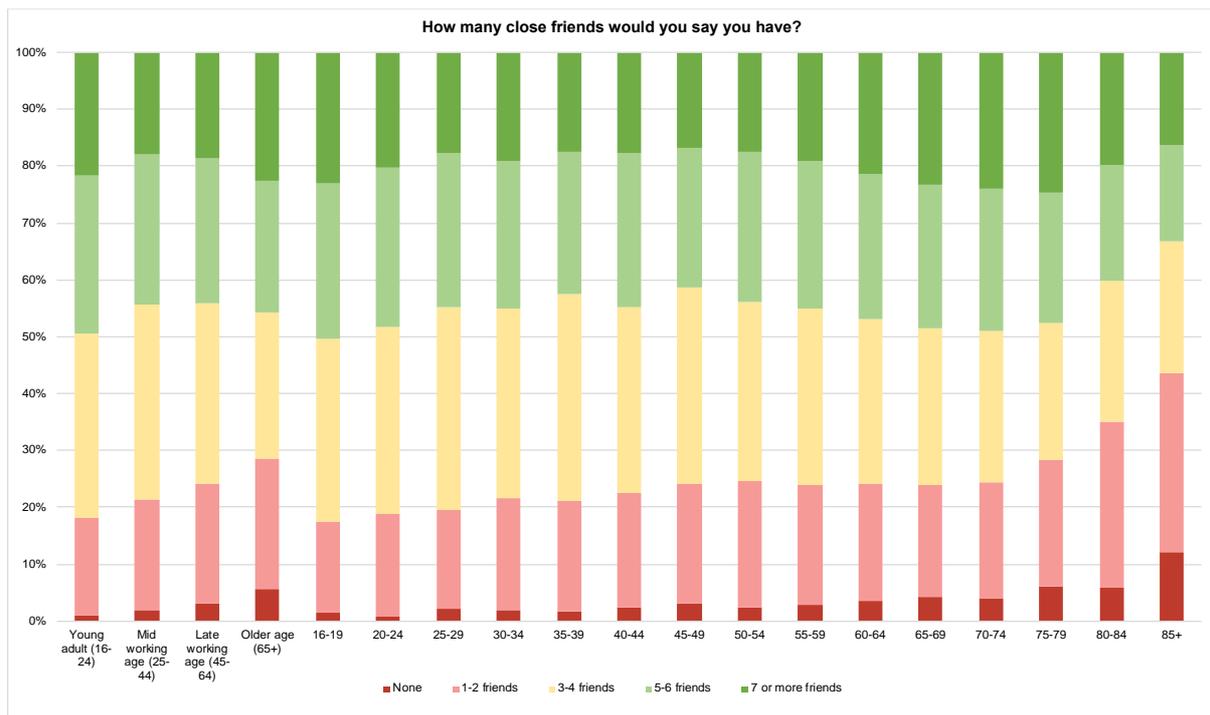
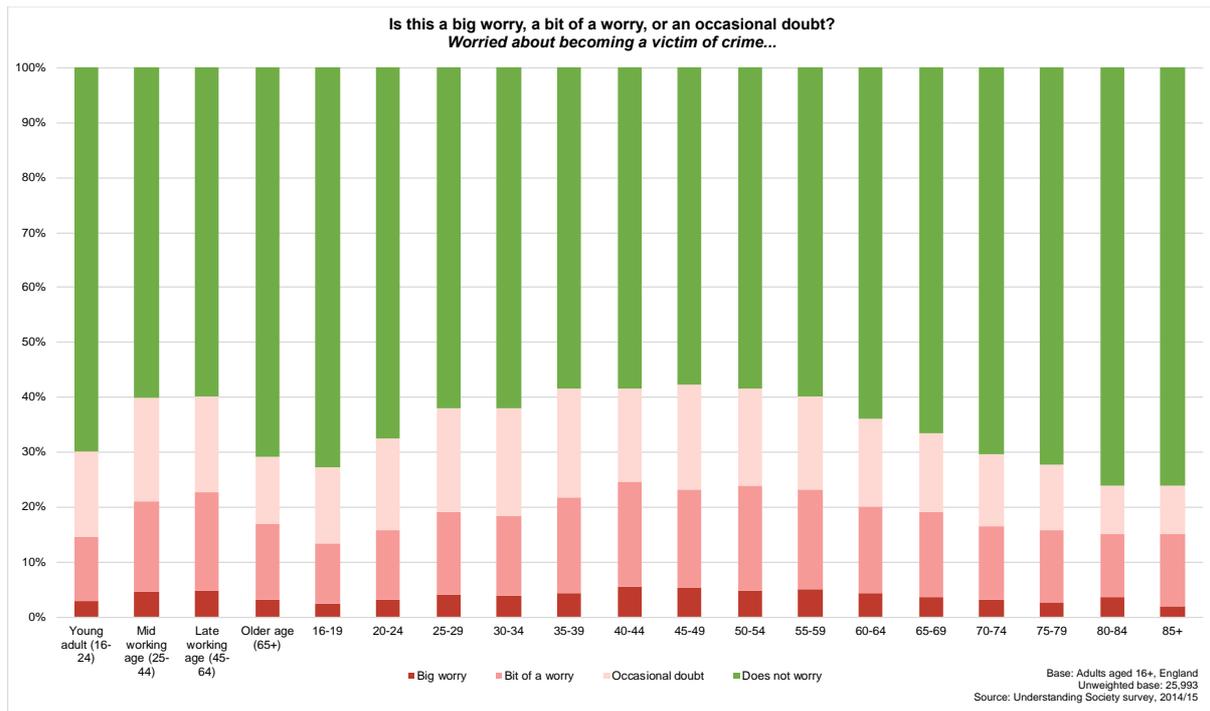
# Social connectedness



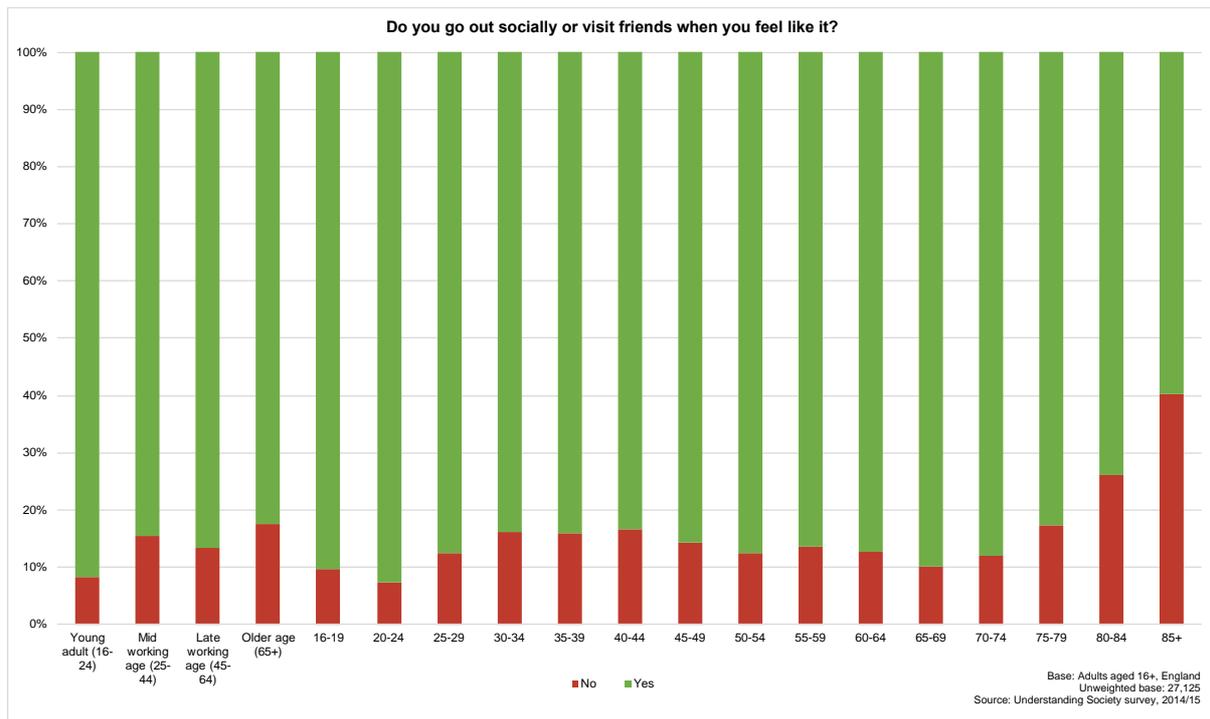
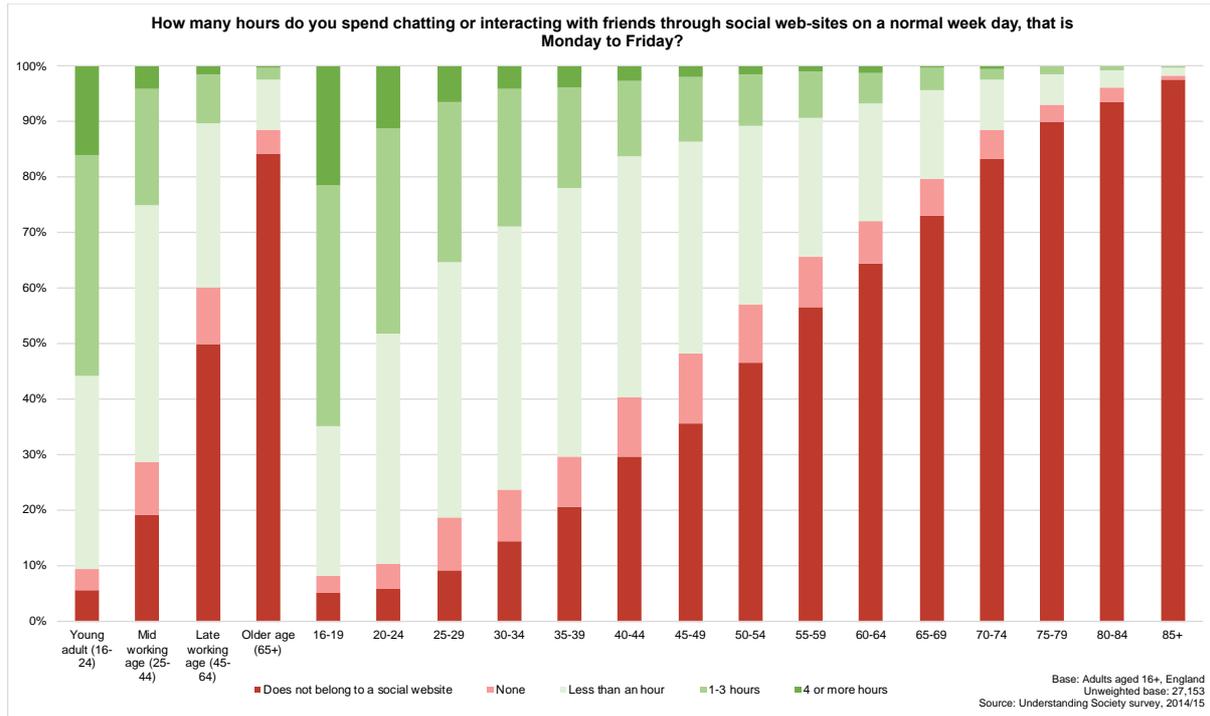
# Social connectedness



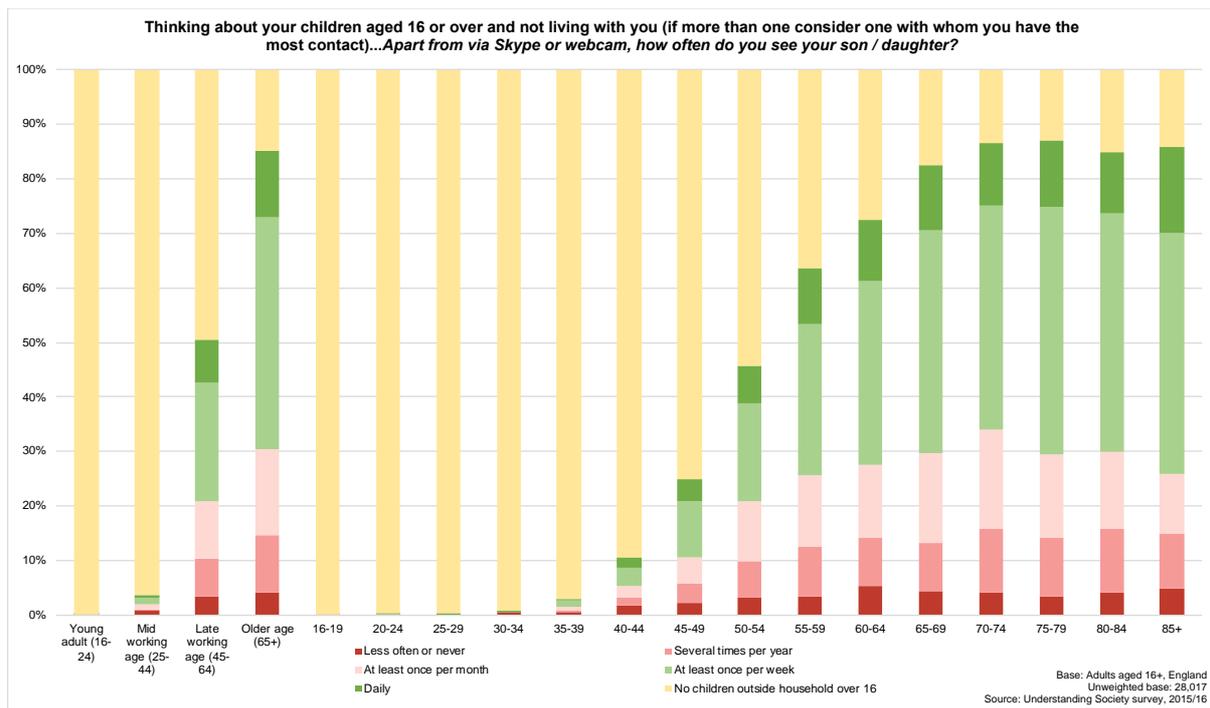
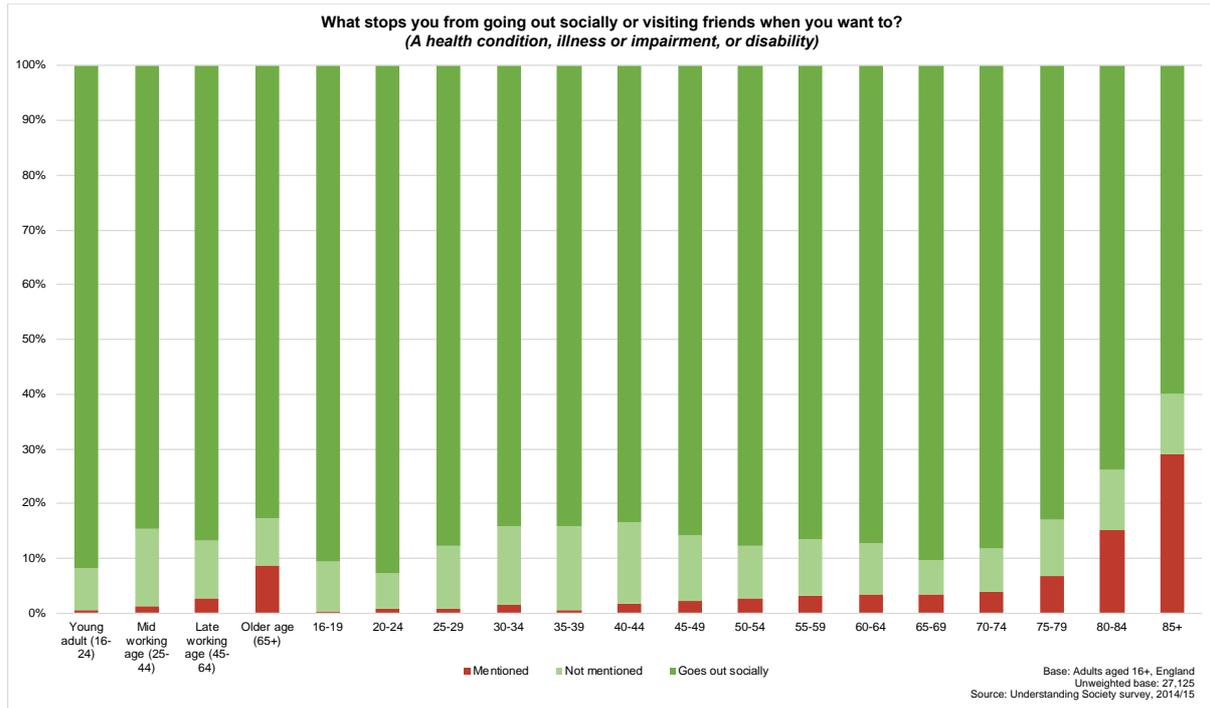
# Social connectedness



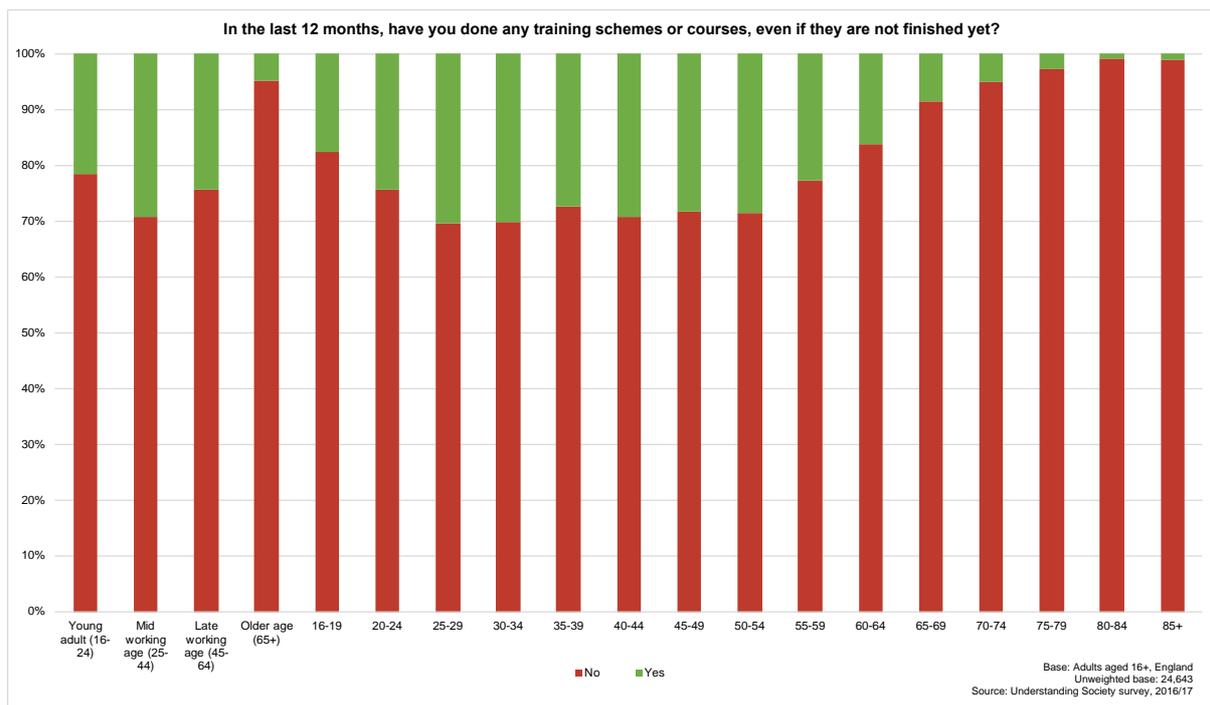
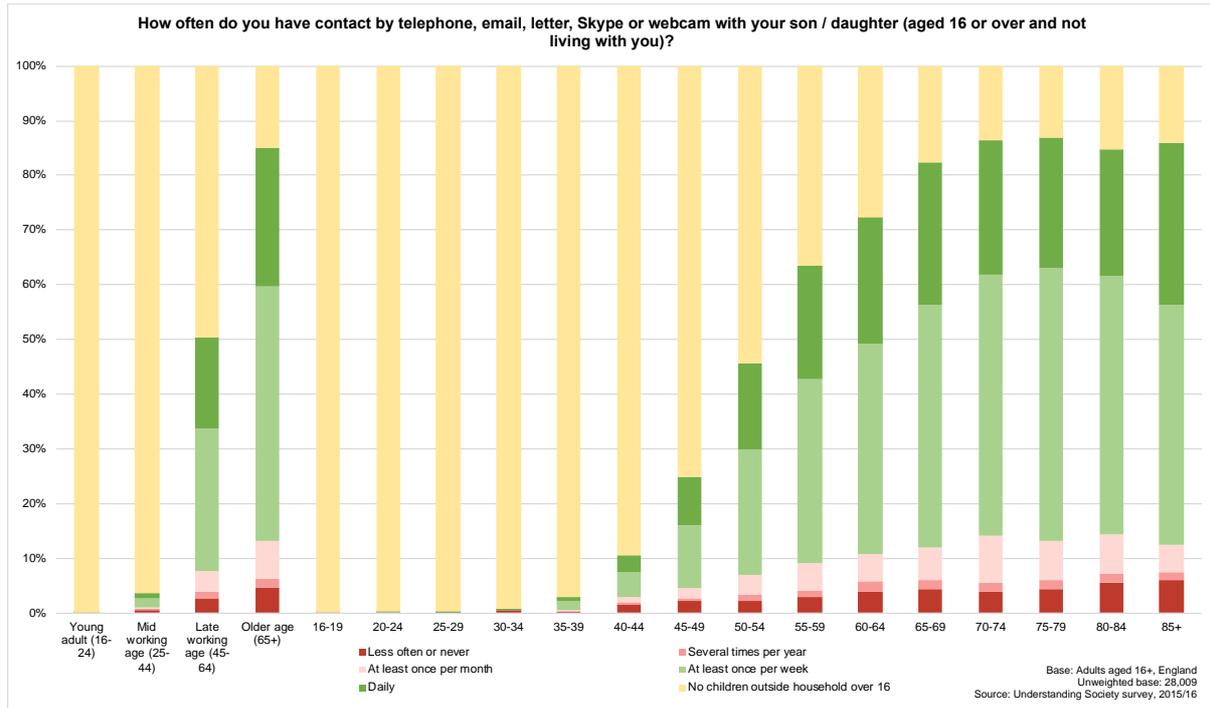
# Social connectedness



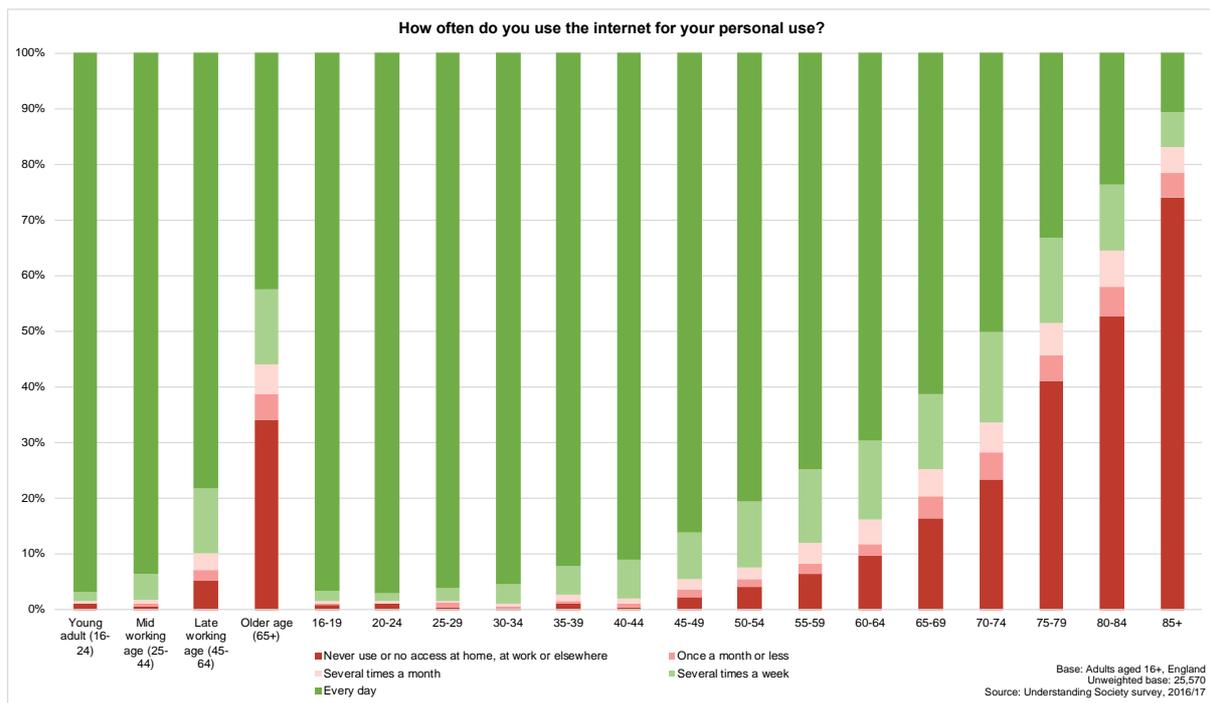
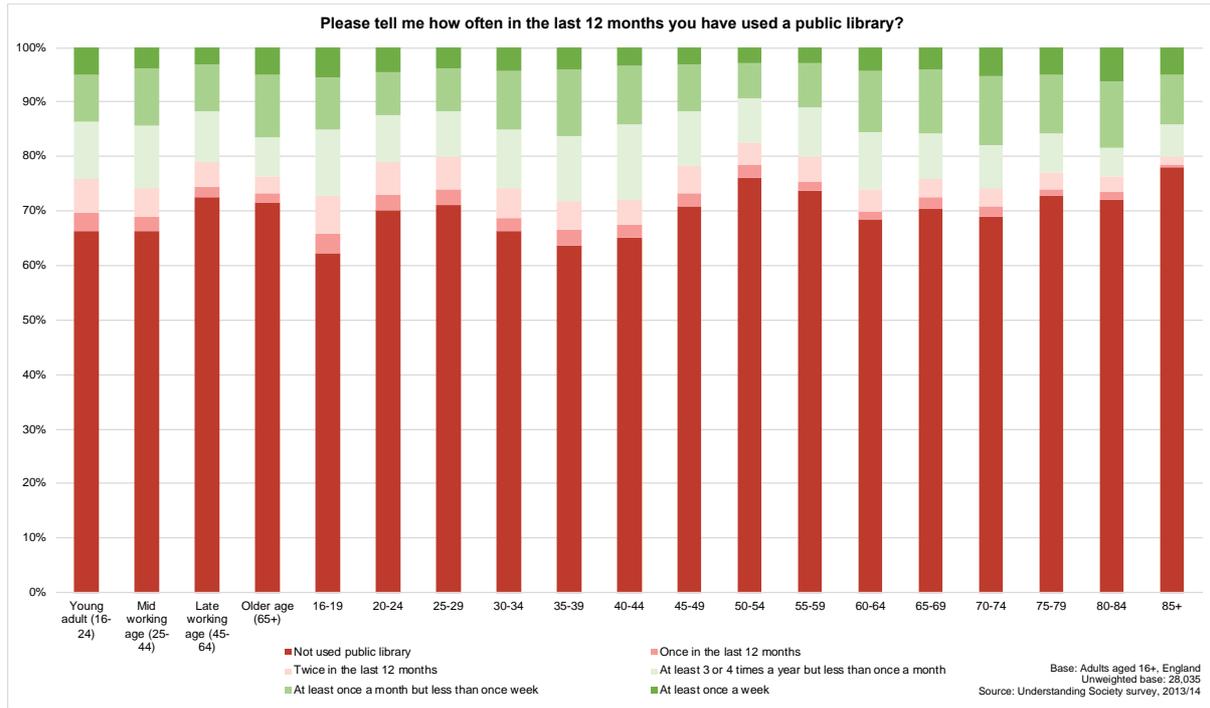
# Social connectedness



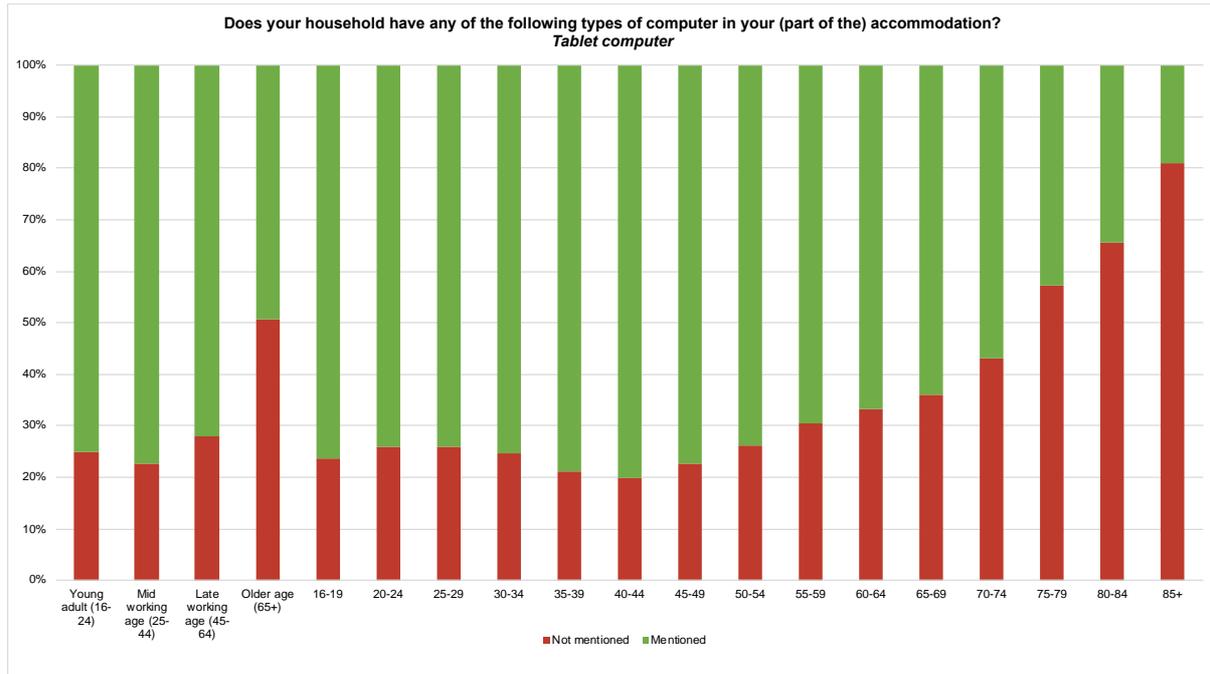
# Social connectedness



# Social connectedness



## Social connectedness



## New statistics on the lived experience of older age for under-represented subgroups of older people

This section presents new statistics on the lived experience of older age for each of the nine subgroups of older people. These subgroups are generally under-represented in official statistics on older people and their experiences can be hidden in existing official statistics that tend to just present the ‘average picture’ of life in older age. The subgroups used are:

- The oldest old
- Black, Asian, and Minority Ethnic older people
- LGBT+ older people
- Older people with mental health conditions
- Older people with physical health problems
- Older people with no living children
- Older people who are carers
- Older people on the lowest incomes
- Older people living in rural areas

The indicators of the lived experience of ageing are presented in three charts, one for each theme: *Health and wellbeing*, *Financial Security*, and *Social Connectedness*. Each chart presents indicators of that theme for the subgroup of interest (e.g. the oldest old) and compares their experiences to that of the average picture for all older people. As Understanding Society is a survey, it collects information about a sample of older people living in England, not from the total population of older people living in England. Although this information provides a picture of what life is like for older people in England, it, as with all survey research, is just an estimate. This estimate would look slightly different if a different sample of older people had been surveyed. Statistical testing is used to be confident that any differences the survey finds between a subgroup and other older people actually exists in the population. Simply put, if the bar for the subgroup has a black border it indicates that the percentage of older people in the subgroup (e.g. the oldest old) that have that experience (e.g. does not visit friends regularly) is significantly different to the percentage of other older people with that experience. Note that in the charts we present a bar for the subgroup (or subgroups in the case of ethnicity) and a bar for the average for all older people (the statistic often displayed in existing official statistics). The significance testing is carried out between the subgroup and other older people (as these two groups need to be mutually exclusive). Please note that statistically significant differences can be driven by the size of the difference in the experience between the groups, and the sample size of the subgroup. Certain subgroups may not show significant differences because there are relatively few of those older people in the Understanding Society survey.

It is also important to state that a significant difference between a subgroup and other older people does not necessarily mean that the characteristic of the subgroup is the reason for the difference. For example, if we find that the oldest old (aged 85+) are less likely than other older person to visit friends regularly, their age per se could be a factor, but it could also be due to their health (we know health problems are higher for the oldest old) or a myriad of other factors. And it is important to remember that the subgroups are not mutually exclusive; an older person could be in the older age subgroup, and the subgroup with physical health problems, and the subgroup living in rural areas.

Another important consideration when looking at the charts is the definition of the indicators and the length of the bars. All the indicators are set up to represent a ‘negative’ experience – for example being *dissatisfied* with your health, *behind* with household bills, or *not* seeing friends regularly. Hence longer bars mean more older people face that negative experience.

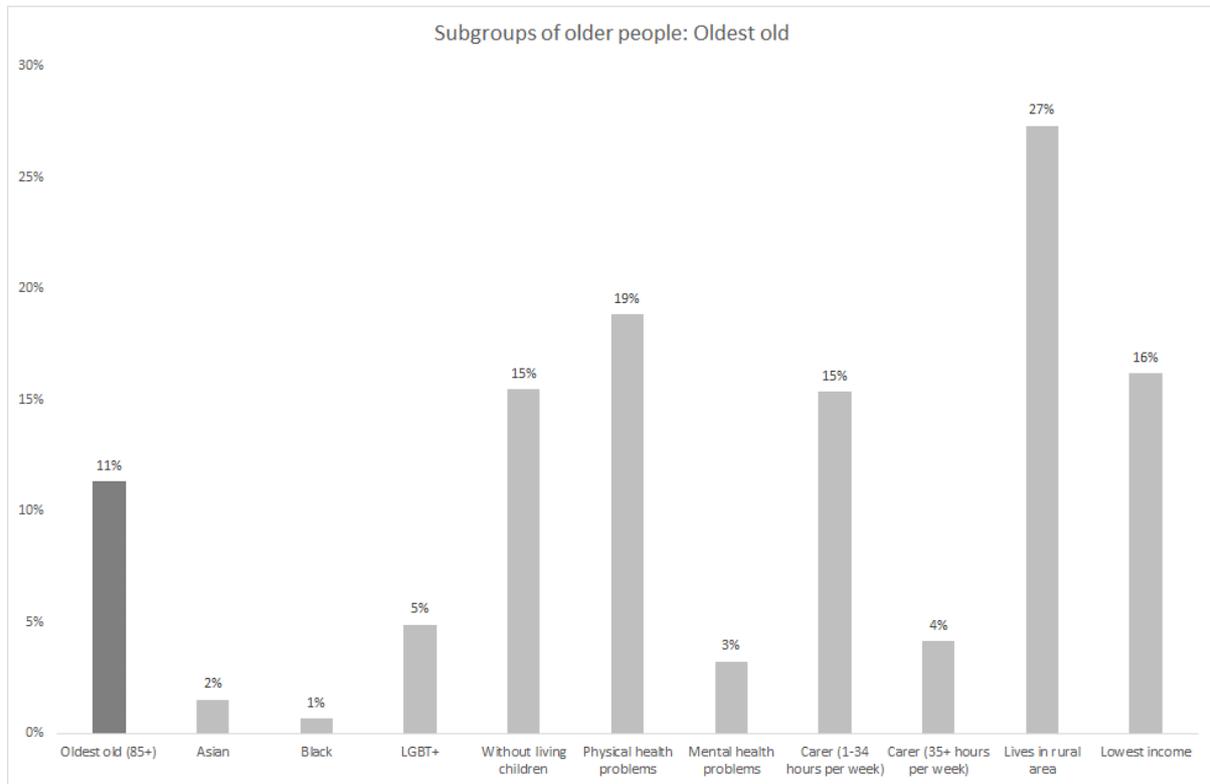
The length of the bar is measured as a percentage from 0 per cent (no older people face that negative experience) to 100 per cent (all older people face that negative experience), so that is important to consider too. For many of the indicators, only a minority of older people experience that issue (even though more in the subgroup may experience it than all older people on average). Interpreting whether that is still 'a lot' of older people needs to consider the definition of the indicator, and more detailed descriptions can be found in the Annex.

## The oldest old

### Definition

The oldest old are defined as people aged 85 and older.

- Approximately one in ten older people are in this age group.
- There are 580 people aged 85 and older in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of the oldest old compared to the average older person and only considers differences that are statistically significant:

#### *Health and wellbeing*

The oldest old are **more** likely to:

- Have had a hospital or clinic in-patient visit in the last 12 months than the average older person. They are also more likely to report being mostly or completely dissatisfied with their health and that health limits moderate activities they might do during a typical day a lot than the average older person.
- In terms of physical health, the oldest old are more likely to say this limits the kind of work they do and meant they accomplish less most or all of the time compared to the average older person.
- In terms of mental wellbeing, the oldest old are more likely to be at risk of experiencing a psychiatric disorder and their mental health meant they accomplish less most or all of the time compared to the average person.
- The oldest old are more likely to be receiving care (formal or informal), or to be in need of care and not receiving it than the average older person.
- The oldest old are also more likely to express they feel they have had a lot of energy a little or none of the time than the average older person.

The oldest old are **less** likely to:

- Eat fruit and vegetables three days a week or less, or to smoke compared to the average older person.
- The oldest old are less likely to care for someone inside or outside their household regardless of whether this is less than 35 hours a week or 35 hours or more a week compared to the average older person.

### *Financial Security*

The oldest old are **more** likely to:

- The oldest old are more likely to be in the poorest income quintile after housing cost as well as the lowest spending quintile on food and groceries than the average older person.
- The oldest old are also more likely to be in the most deprived quintile of consumer durables deprivation. They are also more likely to be living in social or private rented housing than the average older person.
- The oldest old are more likely to be in receipt of benefits such as pension credit, housing benefit, carer's allowance or attendance allowance compared to the average older person.
- The oldest old are also more likely not to have access to a car or taxi whenever one is needed or have an annual holiday away from home compared to the average older person.

The oldest old are **less** likely to:

- The oldest old are less likely to think they will be financially worse off next year than now compared to the average older person.

### *Social Connectedness*

The oldest old are **more** likely to:

- Not have a tablet computer, or use or access the internet, or belong to a social website compared to the average older person.
- The oldest old are also more likely to live alone, have two close friends or less and not go out socially or visit friends when they feel like it than the average older person. They are more likely to cite a health condition, illness or impairment, or disability as the reason for not going out socially or visiting friends.
- Furthermore, the oldest old are more likely to have volunteered or done an arts activity less than once a week in the last 12 months compared to the average older person. They are also more likely not to have done any course or training scheme in the last 12 months.
- The oldest old are more likely to travel by private car or van less than once a day.
- They are also more likely not to be very interested or at all interested in politics compared to the average older person.

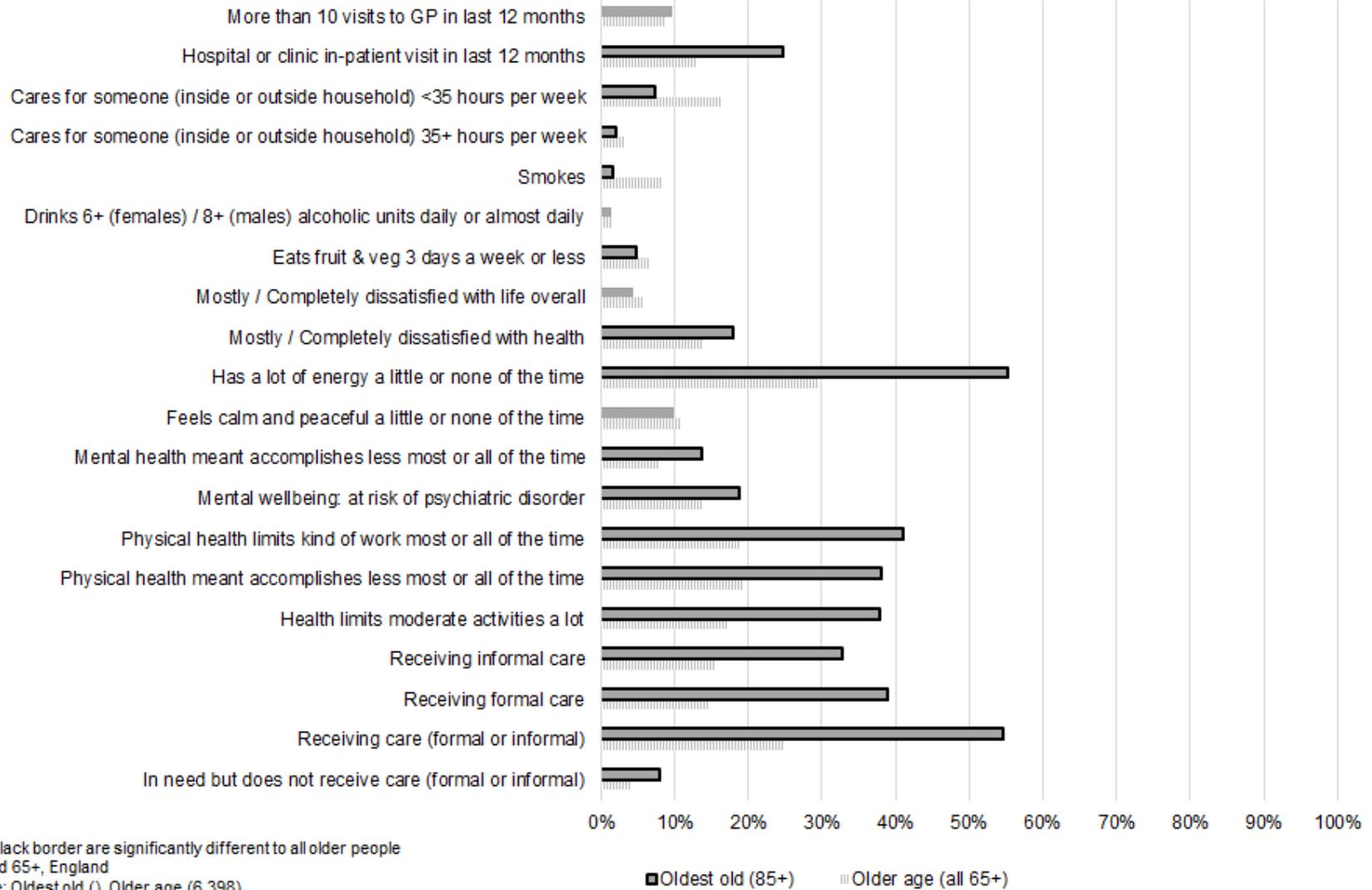
The oldest old are **less** likely to:

- See their child(ren) less than once a week (or have no child(ren)) compared to the average older person.
- The oldest old are less likely to worry about being a victim of crime than the average older person.
- The oldest old are also less likely to be of the opinion that the standard of their local public transport is fair or poor than the average older person.

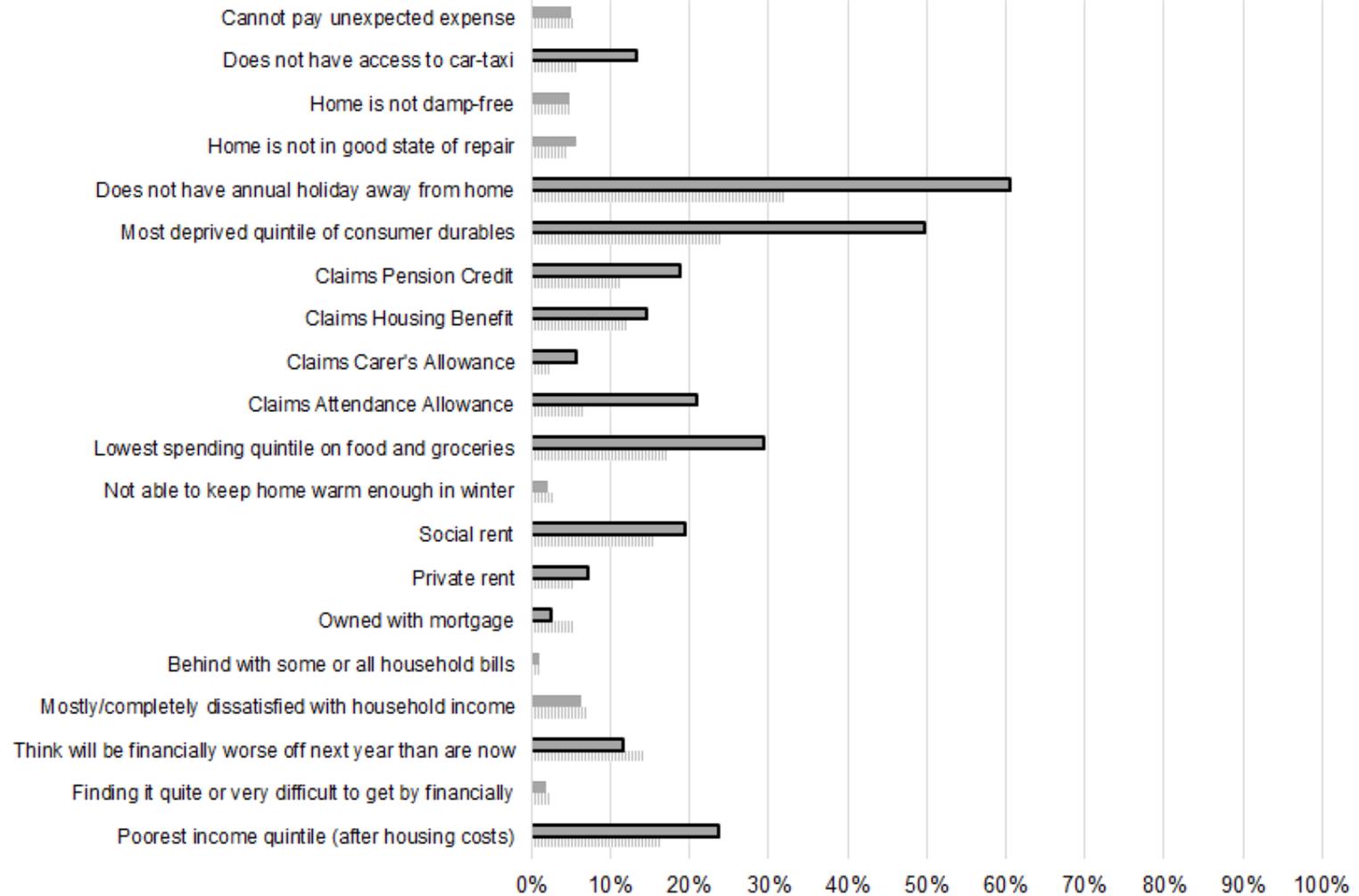
Key points about this subgroup:

1. The oldest old have poorer health and wellbeing compared to the average older person. They are more likely to report being mostly or completely dissatisfied with their health and be limited in what they can accomplish as a result of their physical and mental health.
2. Financially, the oldest old are more likely to be worse off than the average older person. They are more likely to be in the poorest income quintile after housing cost and be in receipt of benefits although they are less likely to live housing owned with a mortgage.
3. The oldest old tend to be less socially connected compared to the average older person. They are more likely to live alone, have few close friends, or not go out socially, with limited use or access to technology to connect socially.

## Oldest old (85+): Health and wellbeing

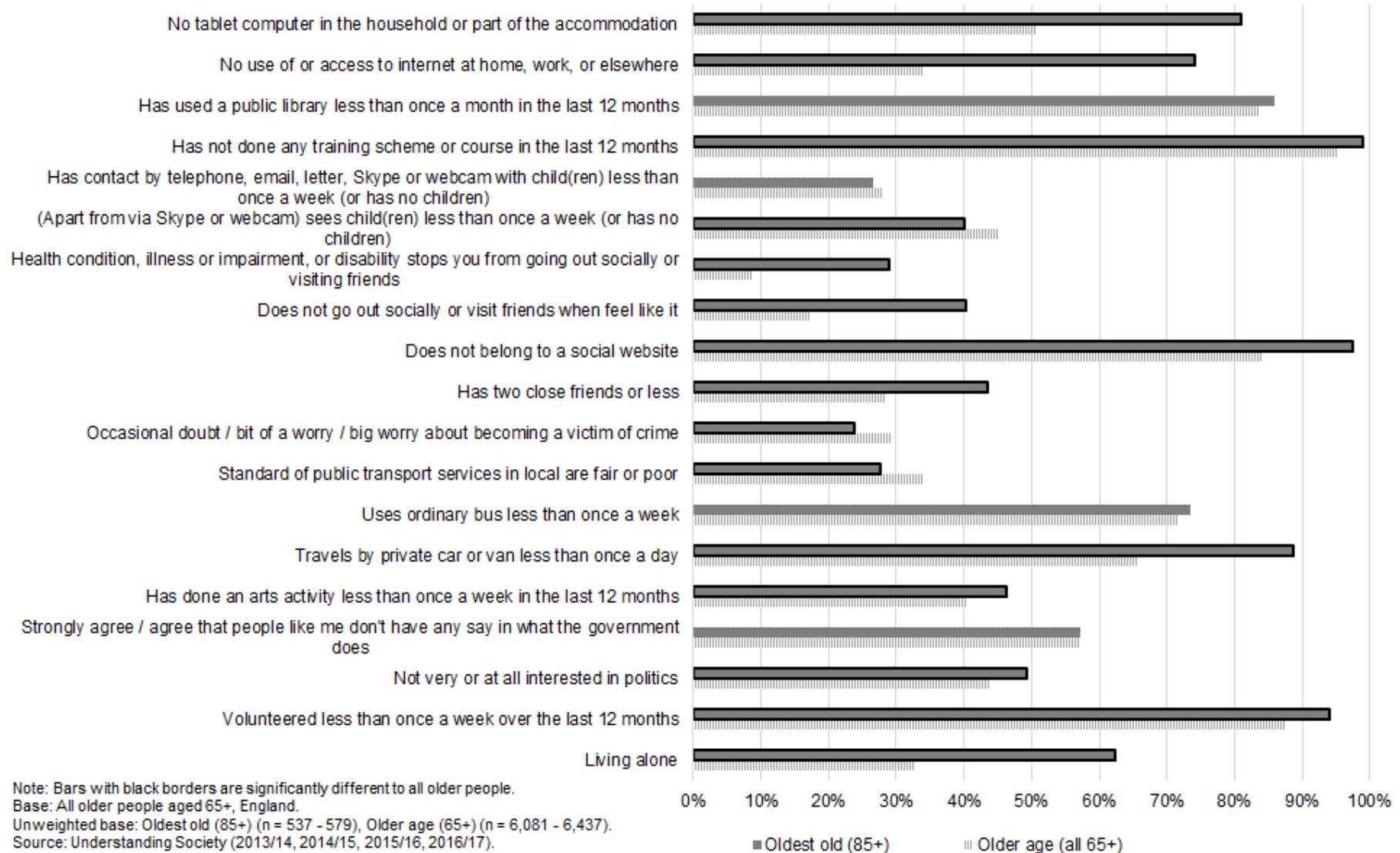


### Oldest old (85+): Financial security



Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Oldest old (580), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

## Oldest old (85+): Social connectedness

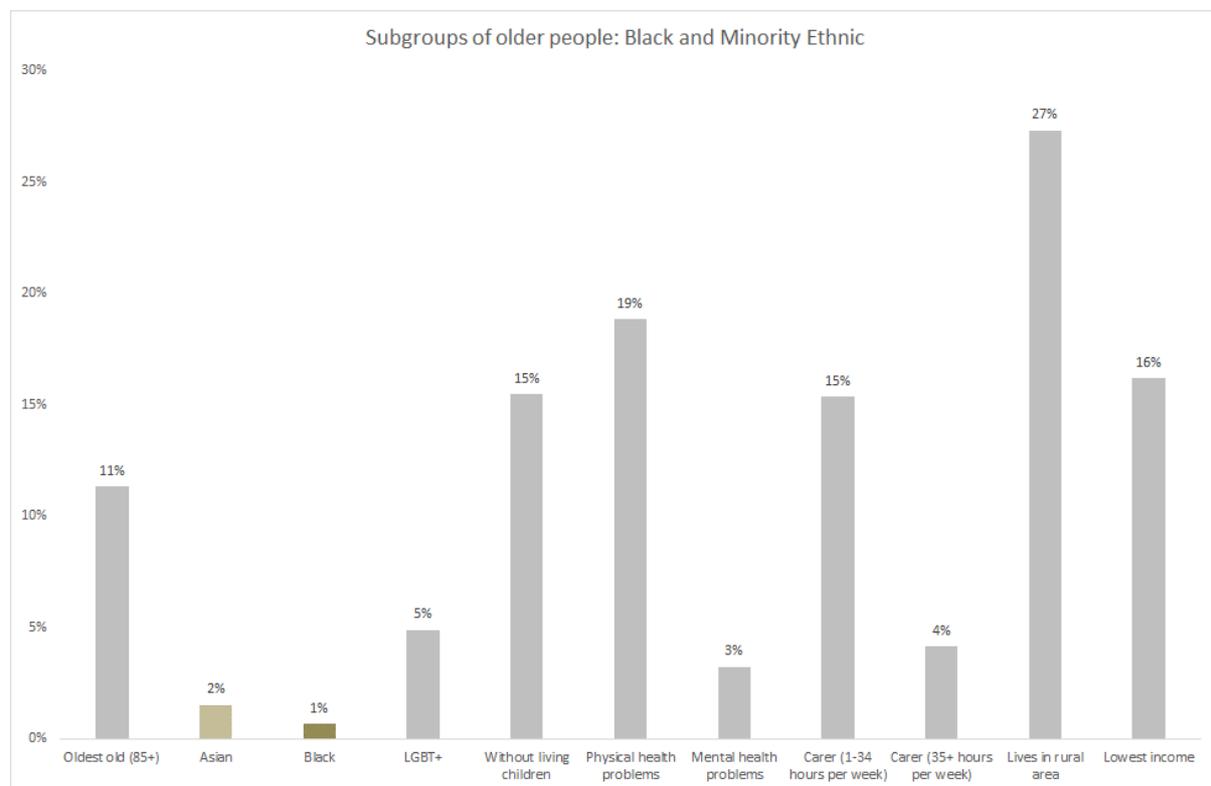


## Black, Asian, and Minority Ethnic older people

### Definition

The Understanding Society survey asks people which ethnic group they consider themselves to be. There are a large number of categories people can choose from and these are grouped people into White, Asian, Black and Other. The 'Other' category is not displayed in the chart as only very few older people put themselves in that category.

- The vast majority (97 per cent) of older people are White.
- Amongst older people, the two biggest ethnic groups are Asian (2 per cent) and Black (1 per cent).
- There are 358 Asian older people and 162 Black older people in the 2016/17 Understanding Society dataset.



### Findings

The charts below summarise the indicators of life for older people from BAME groups. There is a separate bar for each BAME group and when the bar is a different colour to the White group then, for that particular indicator, they are significantly different to White older people. The findings show that:

#### *Health and wellbeing*

BAME older people are **more** likely to:

- Say that they have had more than 10 visits to the GP in the last 12 months compared to White older people.
- Asian and Black older people are also more likely to report that their mental health meant they accomplished less than they would like in their regular daily activities most or all of the time than White older people.

## *Financial Security*

BAME older people are **more** likely to:

- Report finding it quite or very difficult to get by financially or not being able to pay unexpected expenses than White older people.
- Black older people are more likely to be in the poorest income quintile after housing costs compared to White older people
- Black older people are also more likely to be in the lowest spending quintile on food and groceries, report being behind with some or all of their household bills or being in the most deprived quintile of consumer durables deprivation compared to White older people.
- While Asian older people are more likely to live in housing owned with a mortgage, Black older people are more likely live in socially rented housing and claim housing benefits than White older people. On the other hand, Asian older people are more likely to claim pension credit compared to White older people.
- Black older people are more likely to report that their home is not in a good state of repair, is not damp free, nor do they have an annual holiday away from home.

## *Social Connectedness*

BAME older people are **more** likely to:

- Both Black and Asian older people are more to have done an arts activity less than once a week in the last 12 months compared to White older people.
- Black older people are more likely to live alone, travel by private car or van less than once a day or not have a tablet computer compared to White older people.
- Asian older people are more likely to have two close friends or less, have occasional doubt or a bit of a worry or big worry about becoming a victim of crime or not to be very or at all interested in politics than White older people.

BAME older people are **less** likely to

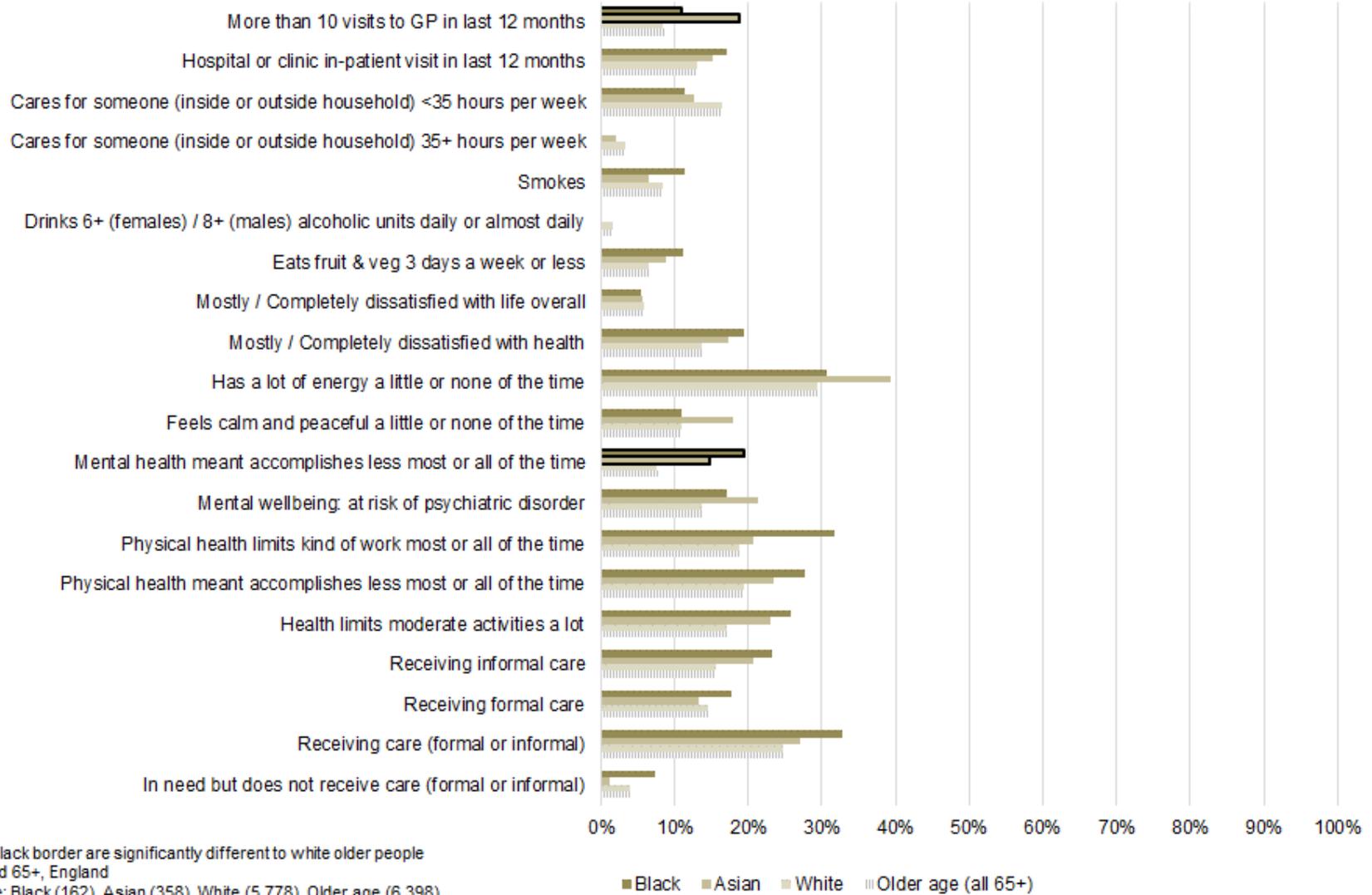
- Be of the opinion that the standard of their local public transport is fair or poor than White older people. They are both also less likely to use the ordinary bus less than once a week compared to White older people.
- Asian older people are less likely to live alone than White older people.

Key points about this subgroup:

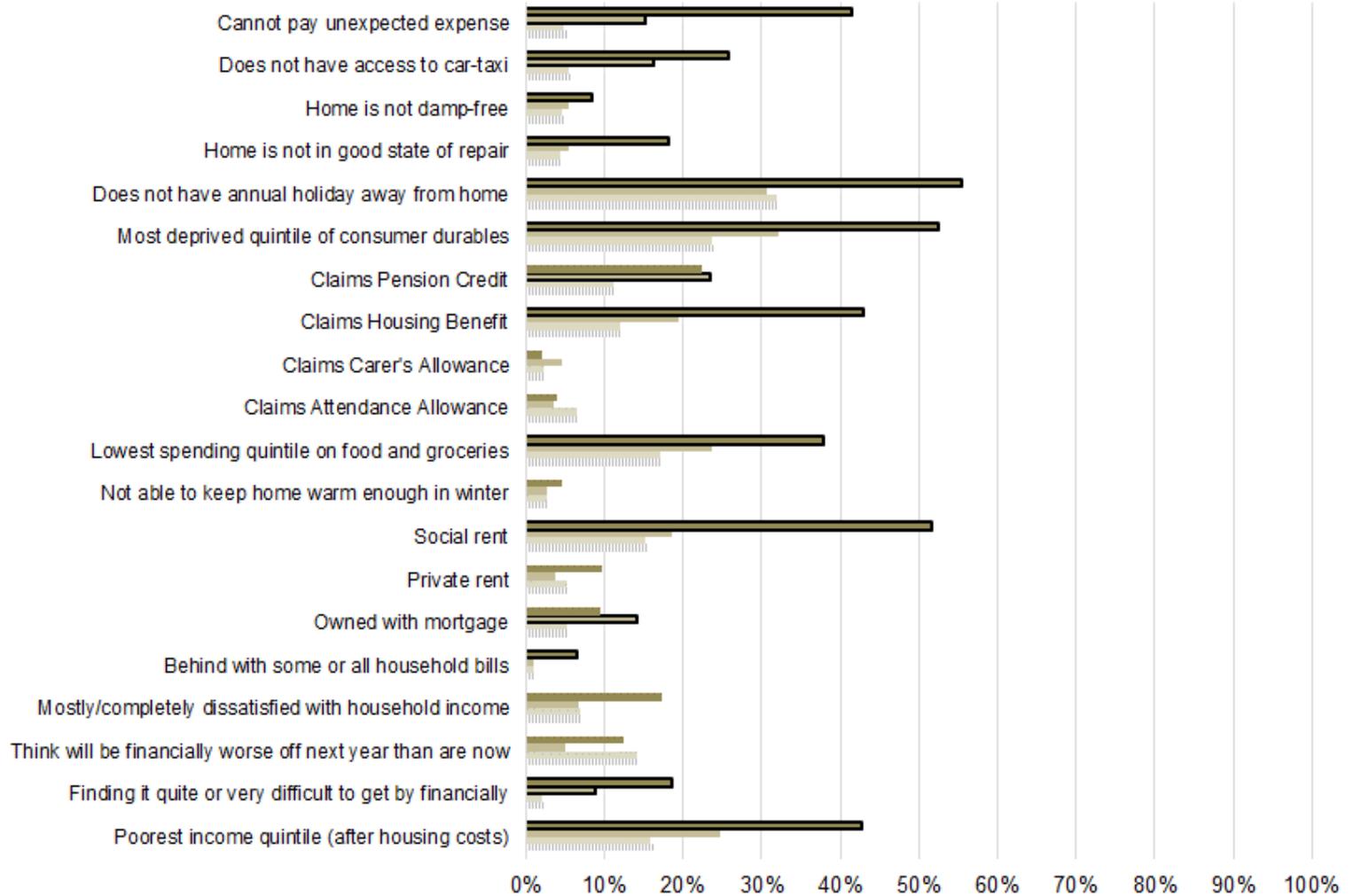
1. Black and Asian older people appear to have poorer health compared to White older people. They are more likely to say they have had more than 10 visits to the GP in the last 12 months and report being limited in what they can accomplish as a result of their mental health. However, there are no statistically significant differences between ethnic groups in other indicators of health and wellbeing and this might be due to the relatively small number of ethnic minority older people in the Understanding society dataset.
2. Both Black and Asian older people are financially worse off compared to White older people, with both more likely to report finding it quite or very difficult to get by financially or not being able to pay unexpected expenses. Furthermore, Black older people tend to be financially disadvantaged on more financial security measures and are more likely to be in the lowest spending quintile on food and groceries, being behind with some or all of their household bills or being in the most deprived quintile of consumer durables deprivation.
3. Overall, Black and Asian older people tend to be less socially connected than White older people, however, there are some variations on which measures this occurs. Black

older people are more likely to live alone, travel by private car or van less than once a day or not have a tablet computer in their household or part of their accommodation, whilst Asian older people are more likely to have two close friends or less, have occasional doubt or a bit of a worry or big worry about becoming a victim of crime or not to be very or at all interested in politics.

## Ethnic group: Health and wellbeing

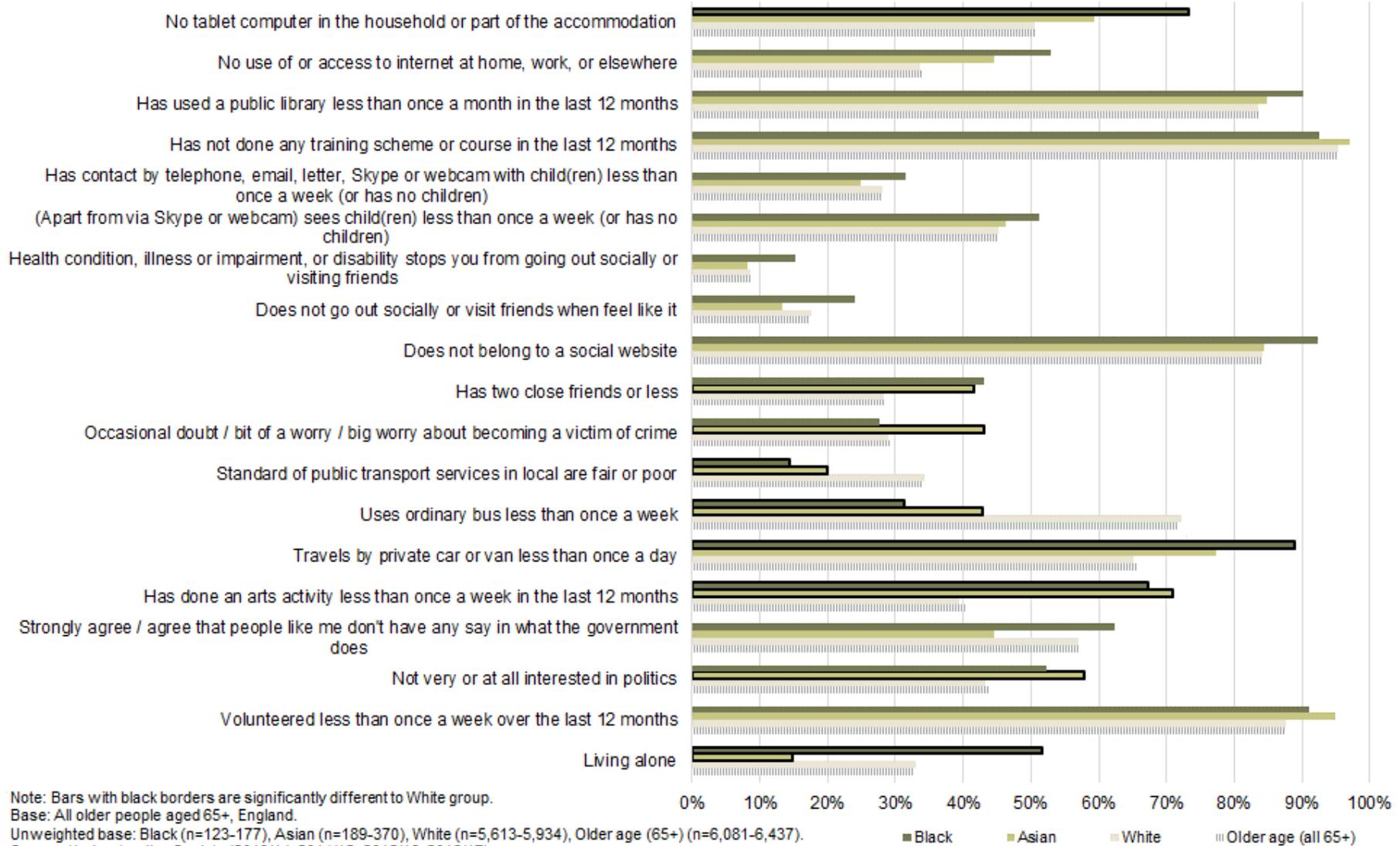


### Ethnic group: Financial security



Note: Bars with black border are significantly different to white older people  
 Base: Adults aged 65+, England  
 Unweighted base: Black (162), Asian (358), White (5,778), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

## Ethnic group: Social connectedness

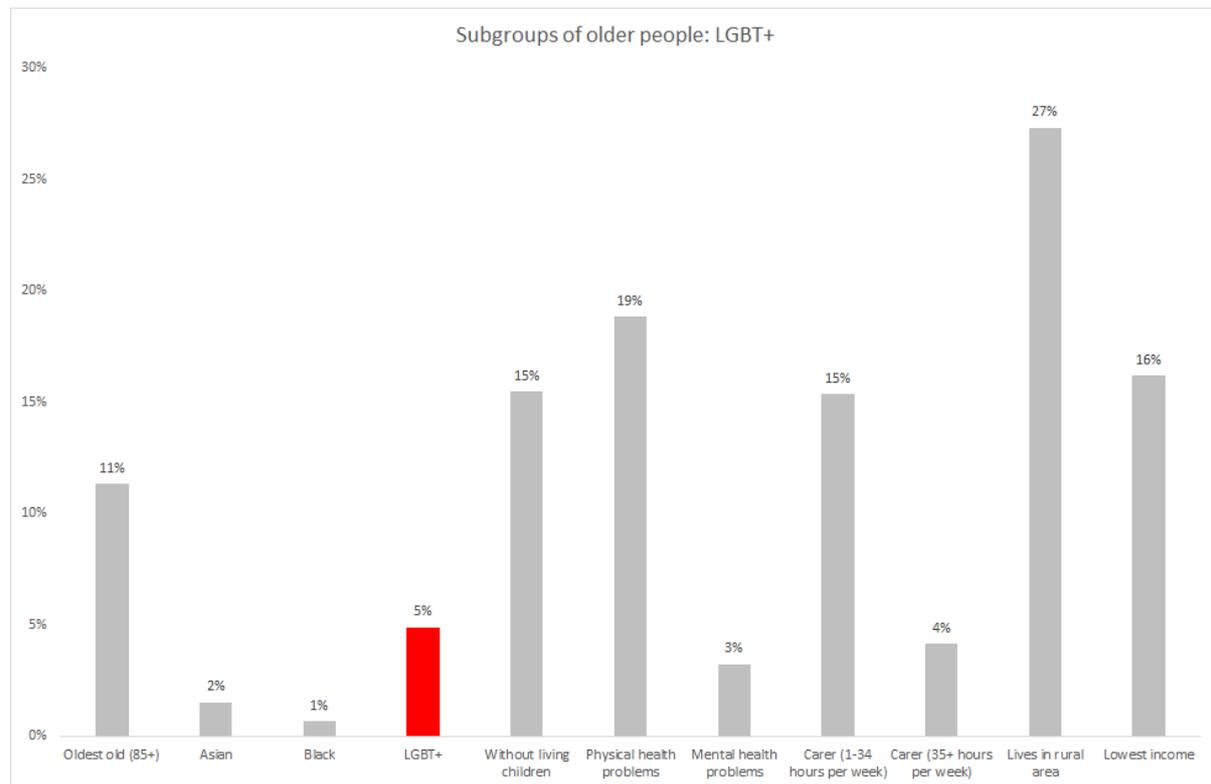


## LGBT+ older people

### Definition

The Understanding Society survey asks people how they describe their sexuality. The LGBT+ subgroup is defined as older people who say they are not heterosexual or straight; that is, they are one of gay or lesbian, bisexual, other, or would prefer not to say.

- Approximately one in twenty (5 per cent) of older people are LGBT+.
- There are 245 LGBT+ older people in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of the older LGBT+ people compared to the average older person and only considers differences that are statistically significant:

#### *Health and wellbeing*

LGBT+ older people are **more** likely:

- To be receiving care (formal or informal), or to be in need of care and not receiving it than the average older person. They are also more likely to have had more than 10 visits to the GP in the last 12 months compared to the average older person.

#### *Financial Security*

LGBT+ older people are **more** likely:

- To be in the poorest income quintile after housing as well as being in the most deprived quintile of consumer durables compared to the average older person. They are also more likely not to have an annual holiday away from home than the average older person.

- Older LGBT+ people are more likely to live in socially rented housing or be in receipt of benefits such as pension credit, housing benefit and carer's allowance compared to the average older person.

### *Social Connectedness*

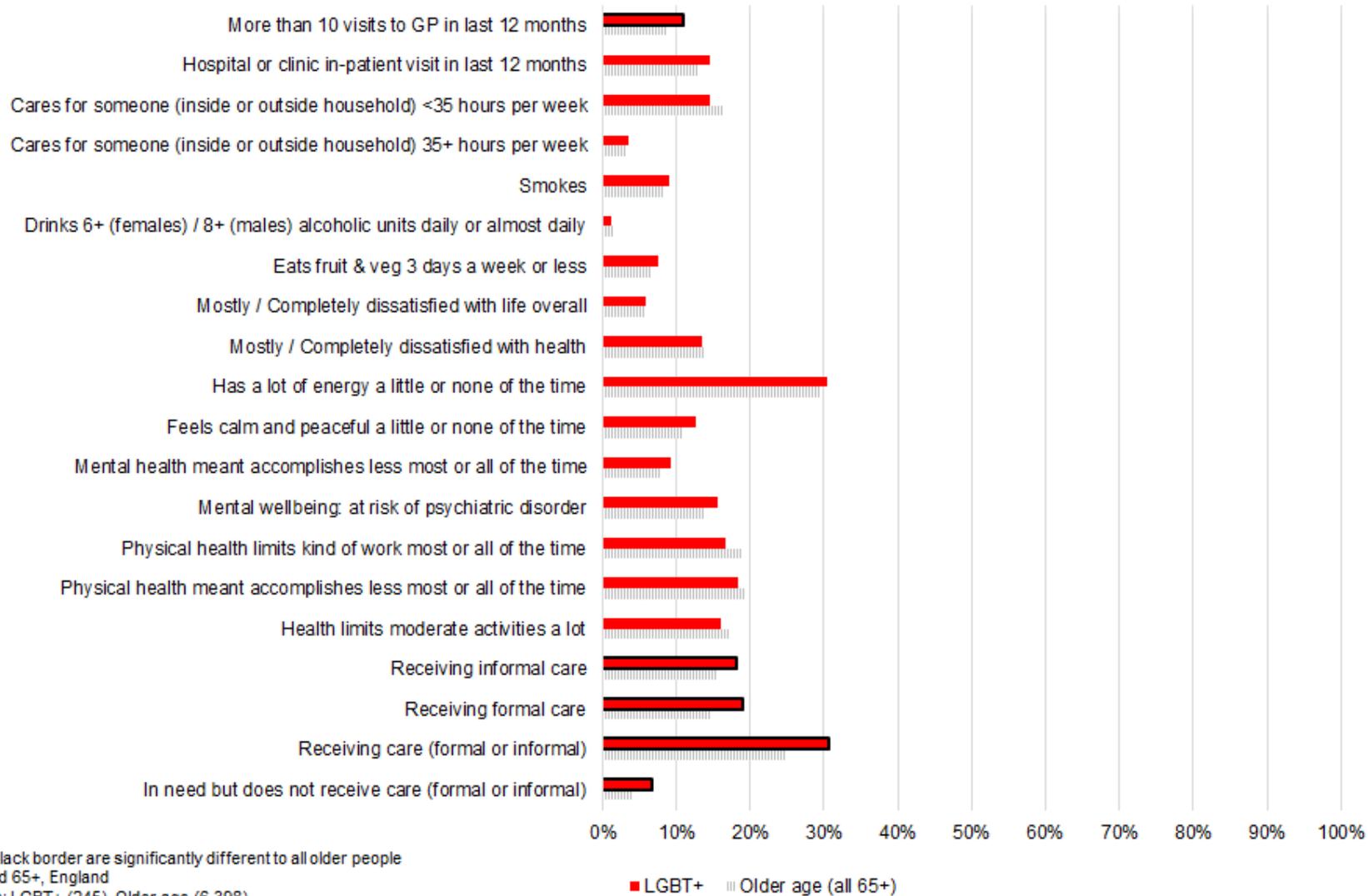
LGBT+ older people are **more** likely:

- Not to have a tablet computer, use or access the internet or belong to a social website compared to the average older person.
- Older LGBT+ people are more likely to live alone or not to go out socially or visit friends when they feel like it compared to the average older person. They are also more likely to travel by private car or van less than once a day.
- In terms of politics, older LGBT+ people are more likely to strongly agree or agree with the statement that people like them do not have any say in what the government does as well as not to be very or at all interested in politics compared to the average older person.
- Older LGBT+ people are more likely to have contact with or see their child(ren) less than once a week (or have no children) than the average older person.

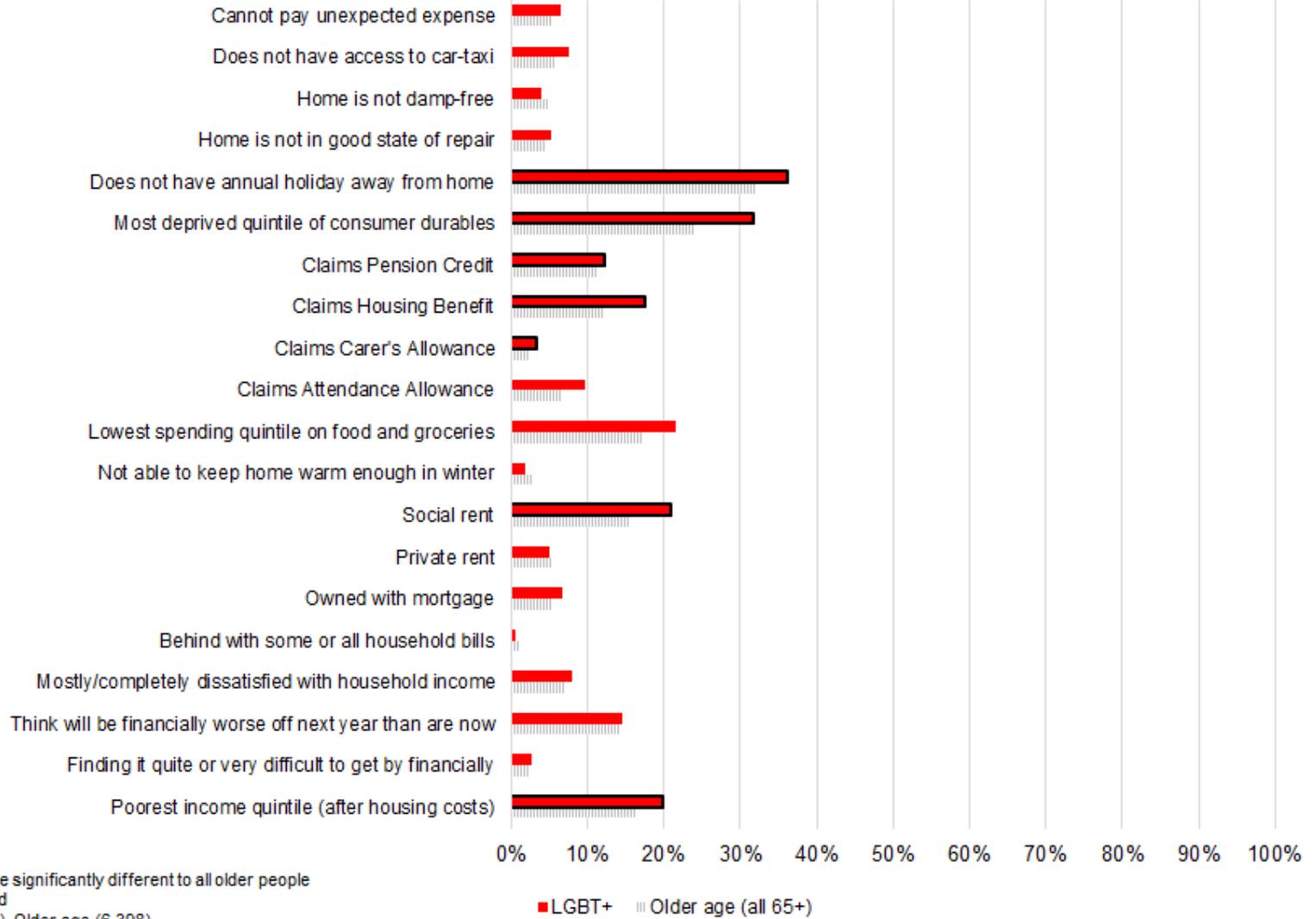
Key points about this subgroup:

1. While the differences in a majority of the health and wellbeing measures between older LGBT+ people and the average older person are not statistically significant, older LGBT+ people appear to have poorer health and wellbeing than the average older person. They are more likely to be receiving care (formal or informal), or to be in need of care and not receiving it, as well as to have visited the GP more frequently in the past 12 months.
2. Older LGBT+ people are more likely to be less financially secure than the average older person. They are more likely to be in the poorest income quintile after housing, be in the most deprived quintile of consumer durables, live in socially rented housing and be in receipt of benefits.
3. Socially, older LGBT+ people are more likely to be less socially connected compared to the average older person. They are more likely to live alone, be in contact or see their children less frequently (or have no children), disengaged politically and not go out socially, with limited use or access to technology to connect socially.

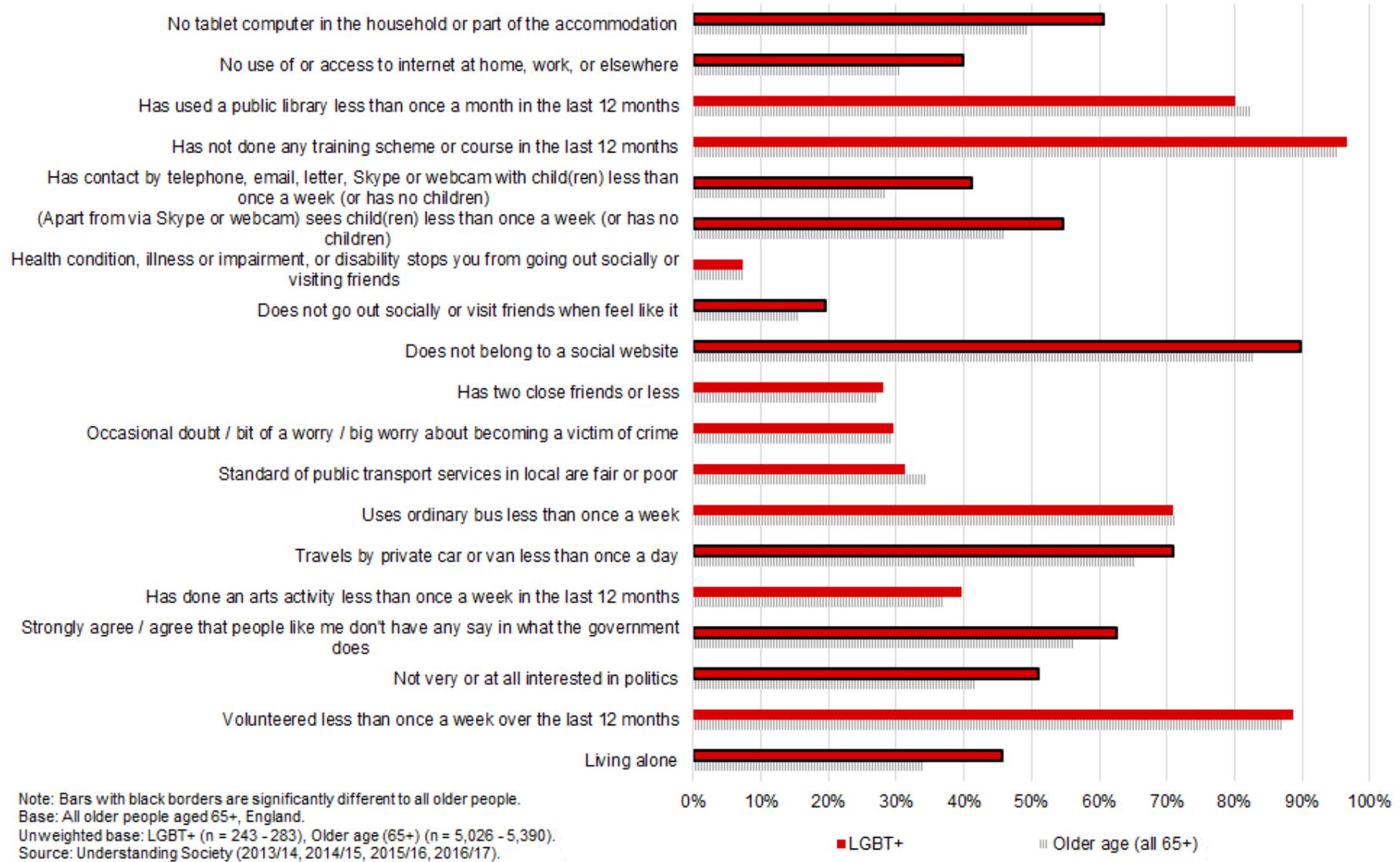
## LGBT+: Health and wellbeing



## LGBT+: Financial security



## LGBT+: Social connectedness

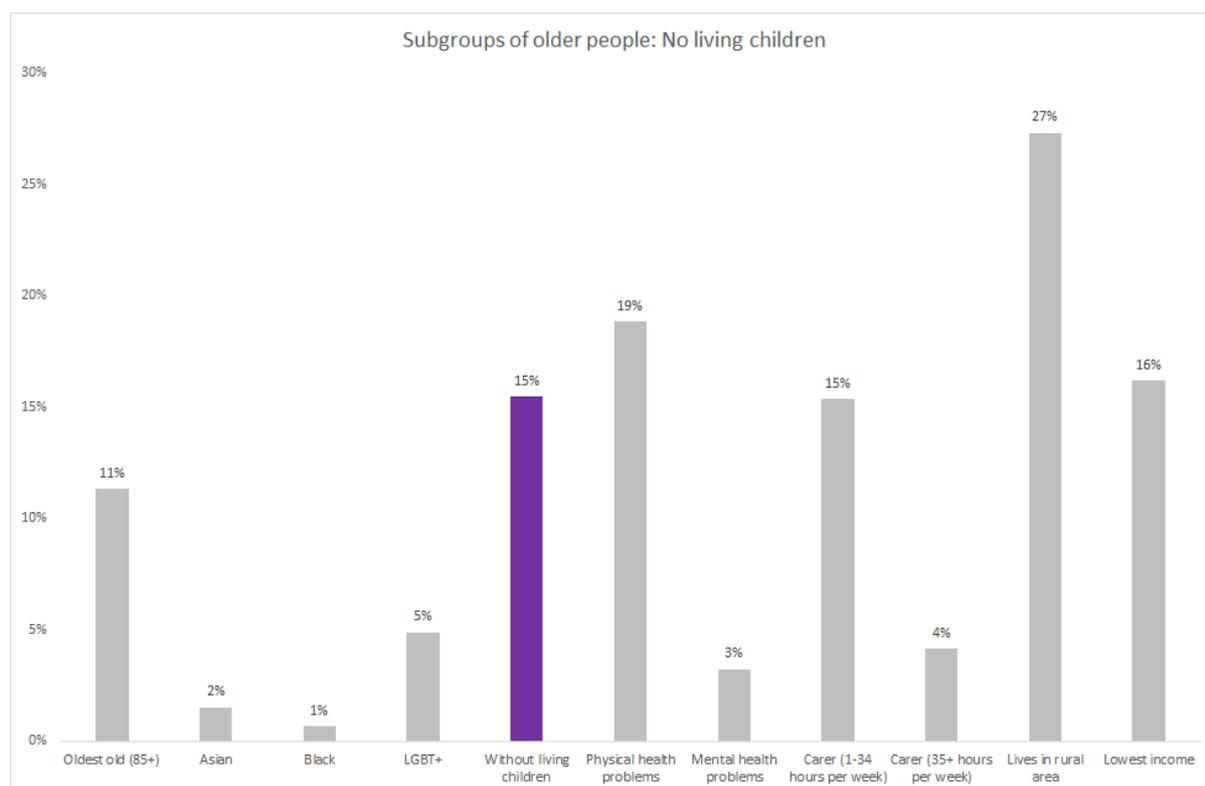


## Older people without children

### Definition

The subgroup older people without children is defined as older people who have never had children (or whose children have died).

- Approximately 15 per cent of older people are in this subgroup.
- There are 935 older people without children in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of the older people without children compared to the average older person and only considers differences that are statistically significant:

#### *Health and wellbeing*

Older people without children are **more** likely:

- To eat fruit and vegetables three days a week or less than the average older person.
- Older people without children are also more likely to be in need but not receive care (formally or informally) compared to the average older person.

Older people without children are **less** likely:

- To report that their physical health limits moderate activities than the average older person.
- Older people without children are less likely to receive informal care compared to the average older person. They are also less likely to care for someone inside or outside their household for 35 hours or more a week.

## *Financial Security*

Older people without children are **more** likely:

- To be in the poorest income quintile after housing costs, the lowest spending quintile on food and groceries, and the most deprived quintile of consumer durables deprivation.
- Older people without children are more likely to live in social rented housing, with the home not in a good state of repair or damp free than the average older person. They are also more likely to be in receipt of benefits such as pension credit or housing benefit compared to the average older person.
- Older people with children are also more likely not to have access to a car or taxi whenever one is needed or have an annual holiday away from home compared to the average older person.

Older people without children are **less** likely:

- Older people without children are less likely to report finding it quite or very difficult getting by financially compared to the average older person.

## *Social Connectedness*

Older people without children are **more** likely:

- To have a tablet computer, use or access the internet, or belong to a social website compared to the average older person.
- Compared to the average older person, older people without children are more likely to live alone, have two close friends or less, or not go out socially or visit friends when they feel like it.
- Furthermore, older people without children are more likely to have done an arts activity less than once a week in the last 12 months compared to the average older person. They are also more likely to travel by private car or van less than once a day, or worry about being a victim of crime.

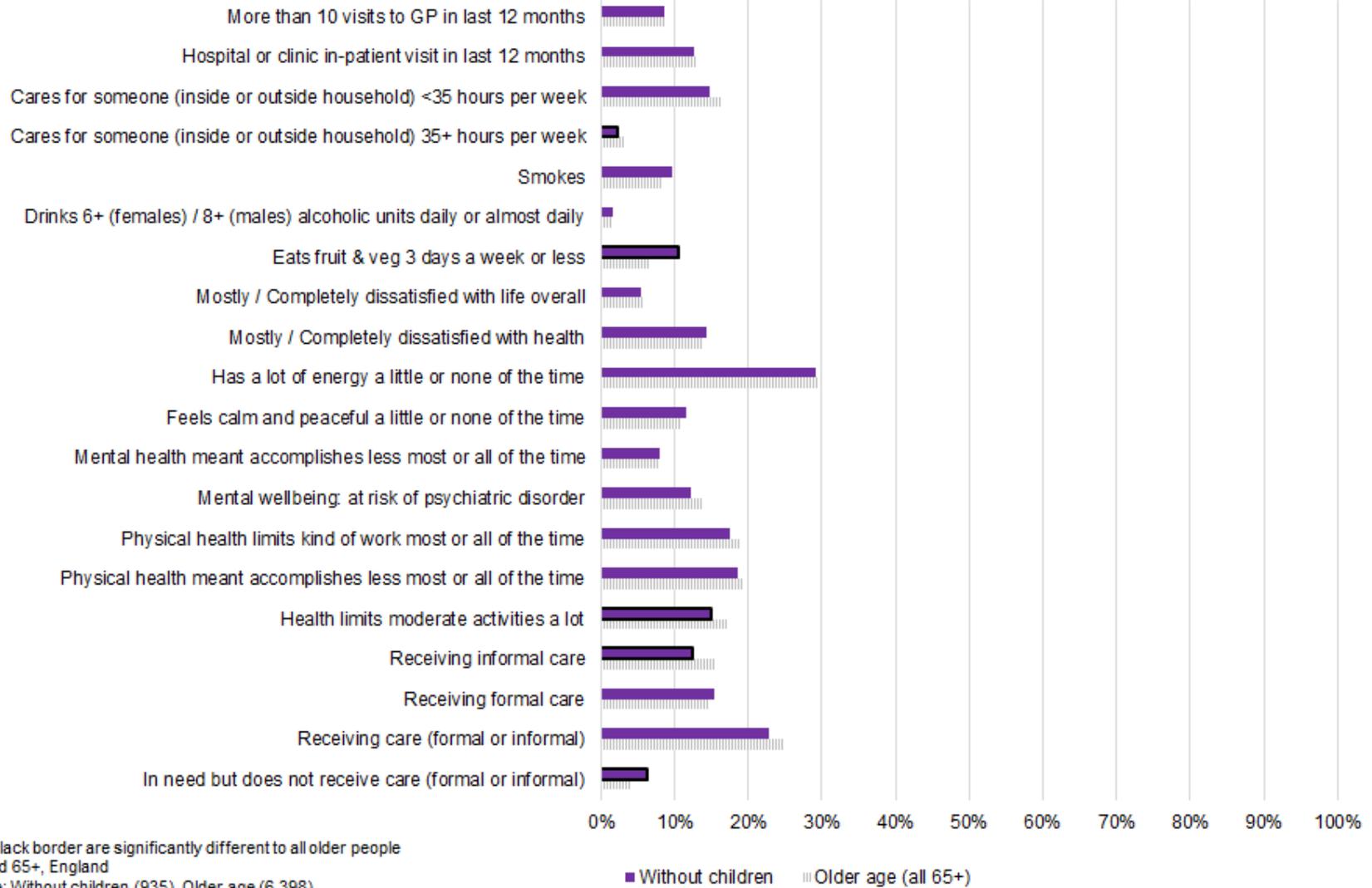
Older people without children are **less** likely:

- To use an ordinary bus less than once a week compared to the average older person.

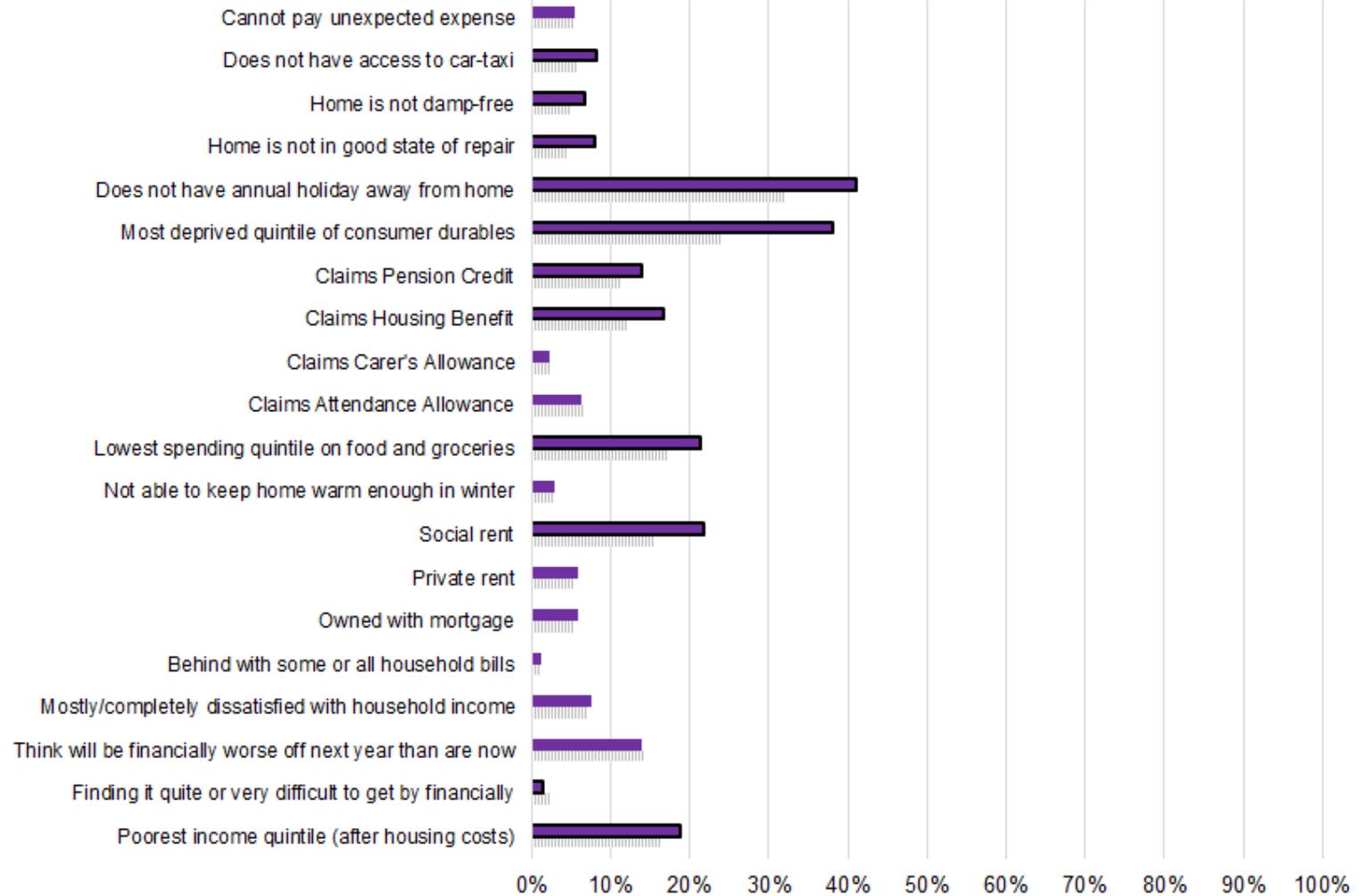
Key points about this subgroup:

1. Overall, there tends to be no statistically significant differences in the health and wellbeing of older people without children compared to the average older person. While older people without children are more likely to eat fruit and vegetables less frequently over a week than the average older person, they are less likely to report that their physical health limits moderate activities they can do on a typical day a lot. Older people without children are also more likely to be in need but not receive any care, as well as less likely to receive informal care.
2. Older people without children are more likely to be financially worse off than the average older person. Although they are less likely to report finding it quite or very difficult getting by financially, they are more likely to be in the poorest income quintile after housing cost, lowest spending quintile on food and groceries, or most deprived quintile of consumer durables deprivation.
3. Older people without children tend to be less socially connected compared to the average older person. They are more likely to live alone, have few close friends, or not go out socially, with limited use or access to technology to connect socially.

## Without children: Health and wellbeing

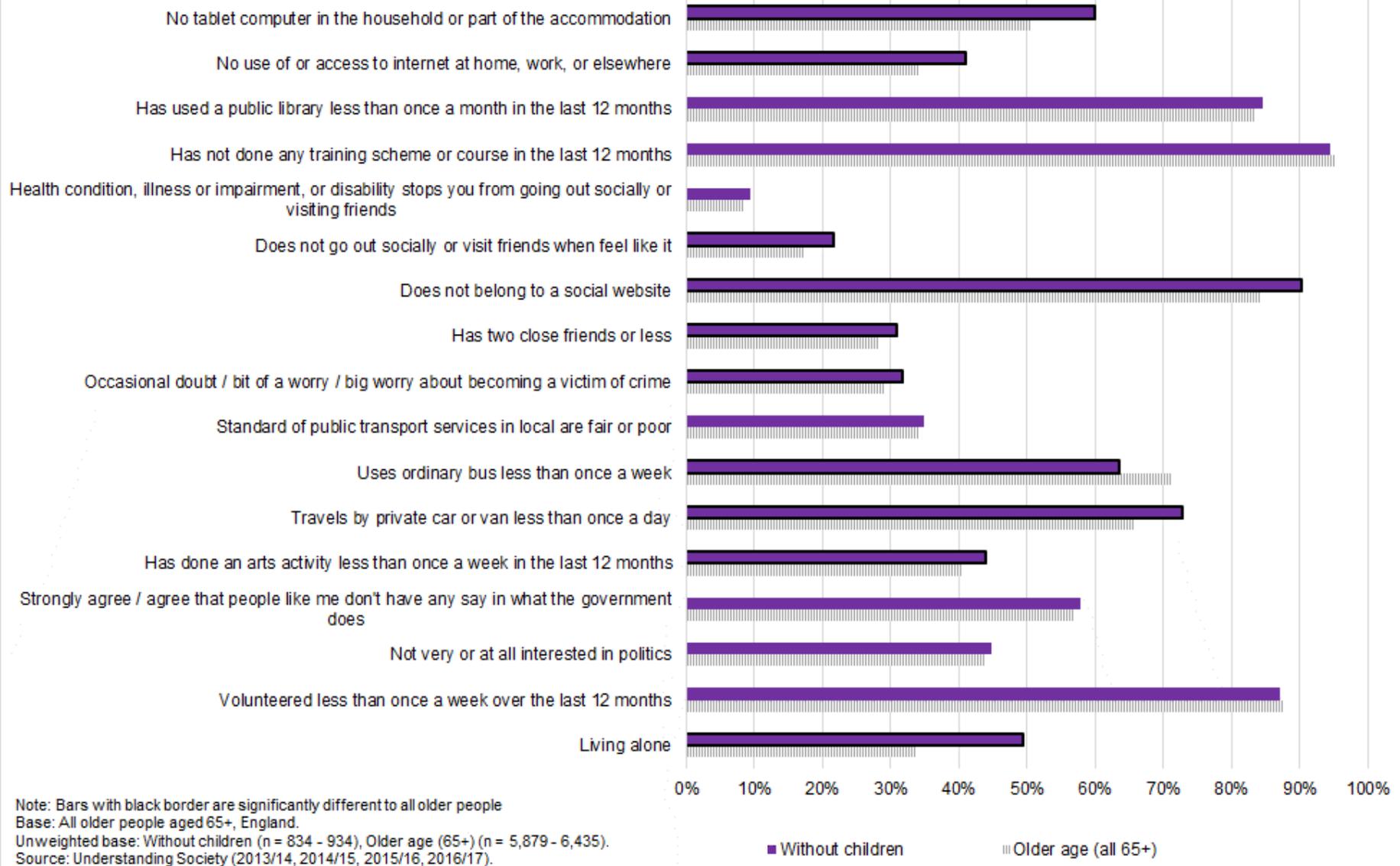


### Without children: Financial security



Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Without children (935), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

### Without children: Social connectedness



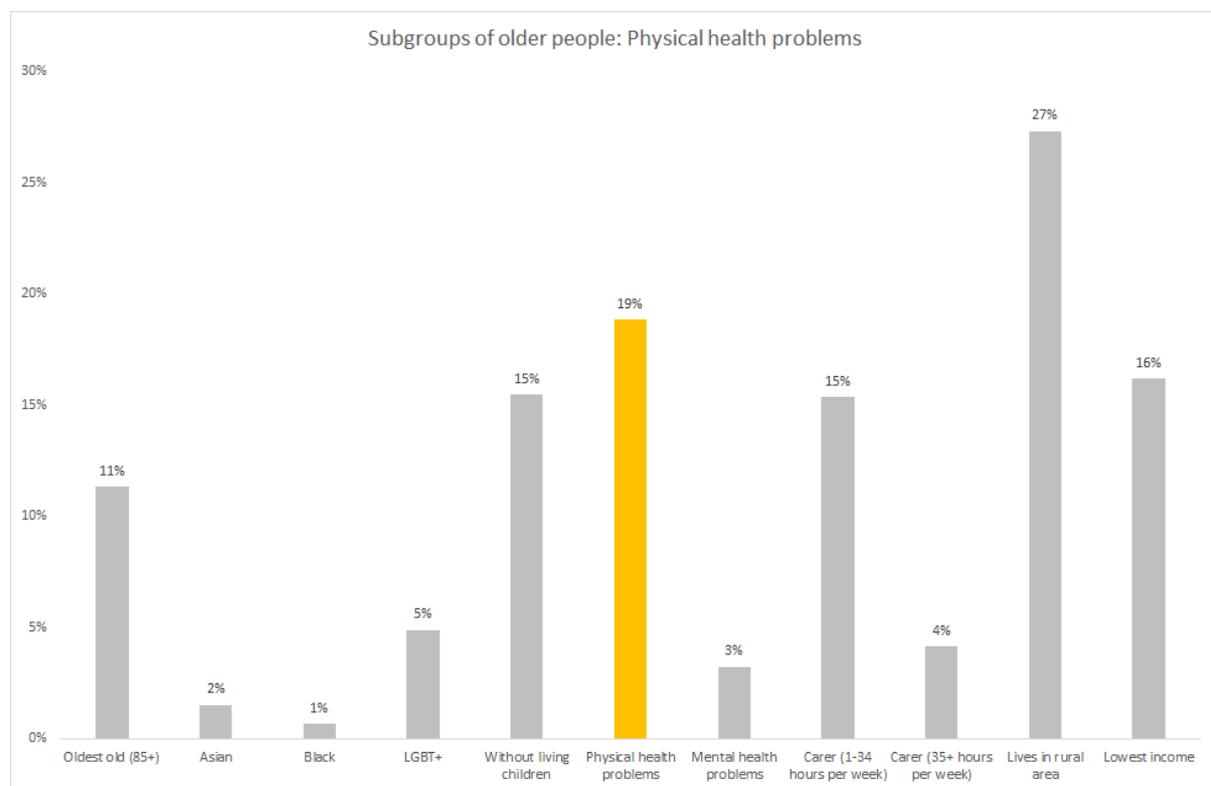
## Older people with physical health problems

### Definition

Older people with physical health problems are defined as those who record a score of 30 or more on the Physical Component Summary of the SF-12 questionnaire – a suite of questions that indicate a person's health status. Responses to the survey create a score from 0-100 which can be categorised as:

- 50 or more: no health problem
- 40-49: mild health problem
- 30-39: moderate health problem
- Below 30: severe health problem

- Approximately one in five (19%) older people are in this subgroup.
- There are 1,041 older people with a physical health problem in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of the older people with a severe physical health problem compared to the average older person and only considers differences that are statistically significant:

#### *Health and wellbeing*

Older people with a severe physical health problem are **more** likely:

- To report being mostly or completely dissatisfied with their life overall, as well as their health, and that health limits moderate activities than the average older person.
- Older people with a severe physical health problem are also more likely to report having a lot of energy or feeling clam and peaceful a little or none of the time compared to the average older person.

- In terms of mental wellbeing, older people with a severe physical health problem are more likely to be at risk of a psychiatric disorder, while they are also more likely to express that their physical health limits the kind of work they can do most or all of the time compared to the average older person. This (mental or physical health) meant they accomplish less most or all of the time than the average older person.
- Older people with a severe physical health problem are more likely to have had more than 10 visits to the GP or a hospital or clinic in-patient visit in the last 12 months than the average older person. They are also more likely to eat fruits and vegetables three days a week or less, or to smoke compared to the average older person.
- Compared to the average older person, older people with a severe physical health problem are more likely to be receiving care (formal or informal), or to be in need of care and not receiving it.

Older people with a severe physical health problem are **less** likely:

- Older people with a severe physical health problem are less likely to care for someone inside or outside their household for less than 35 hours a week than the average older person.
- Older people with a severe physical health problem are also less likely to drink six or more (for females) and eight or more (for males) units of alcohol daily or almost daily compared to the average older person.

### *Financial Security*

Older people with a severe physical health problem are **more** likely:

- To be in the poorest income quintile after housing costs, or to express being mostly or completely dissatisfied with their household income, than the average older person.
- Compared to the average older person, older people with a severe physical health problem are also more likely to think they will be financially worse off the following year than they currently are or to report finding it quite or very difficult to get by financially. They are also more likely to report being behind with some or all of their household bills or not being able to pay unexpected expenses than the average older person.
- In terms of housing tenure, older people with a severe physical health problem are more likely to live in social or private rented housing than the average older person. They are also more likely to report their home not being in a good state of repair, not damp-free, or not being able to keep it warm enough in winter compared to the average older person.
- Older people with a severe physical health problem are more likely to be in receipt of benefits such as pension credit, housing benefit, carer's allowance or attendance allowance than the average older person. They are also more likely not to have access to a car or taxi whenever one is needed or have an annual holiday away from home compared to the average older person.

Older people with a severe physical health problem are **less** likely:

- To be in the most deprived quintile of consumer durables deprivation compared to the average older person.

### *Social Connectedness*

Older people with a severe physical health problem are **more** likely:

- Not to have a tablet computer, use or access the internet, or belong to a social website.
- Older people with a severe physical health problem are also more likely to live alone, have two close friends or less, or not go out socially or visit friends when they feel like it than the average older person. They are more likely to cite health condition, illness or

impairment, or disability as the reason for not going out socially or visiting friends compared to the average older person.

- Furthermore, older people with a severe physical health problem are more likely to have volunteered or done an arts activity less than once a week in the last 12 months compared to the average older person. They are also more likely to have used a public library less than once a month or not to have done any course or training scheme in the last 12 months than the average older person.
- In terms of transport, older people with a severe physical health problem are more likely to travel by private car or van less than once a day and are also more likely to use an ordinary bus less than once a week compared to the average older person.
- Politically, older people with a severe physical health problem are more likely to report not being very or at all interested in politics than the average older person. They are also more likely to agree or strongly agree that people like them do not have any say in what the government does compared to the average older person.

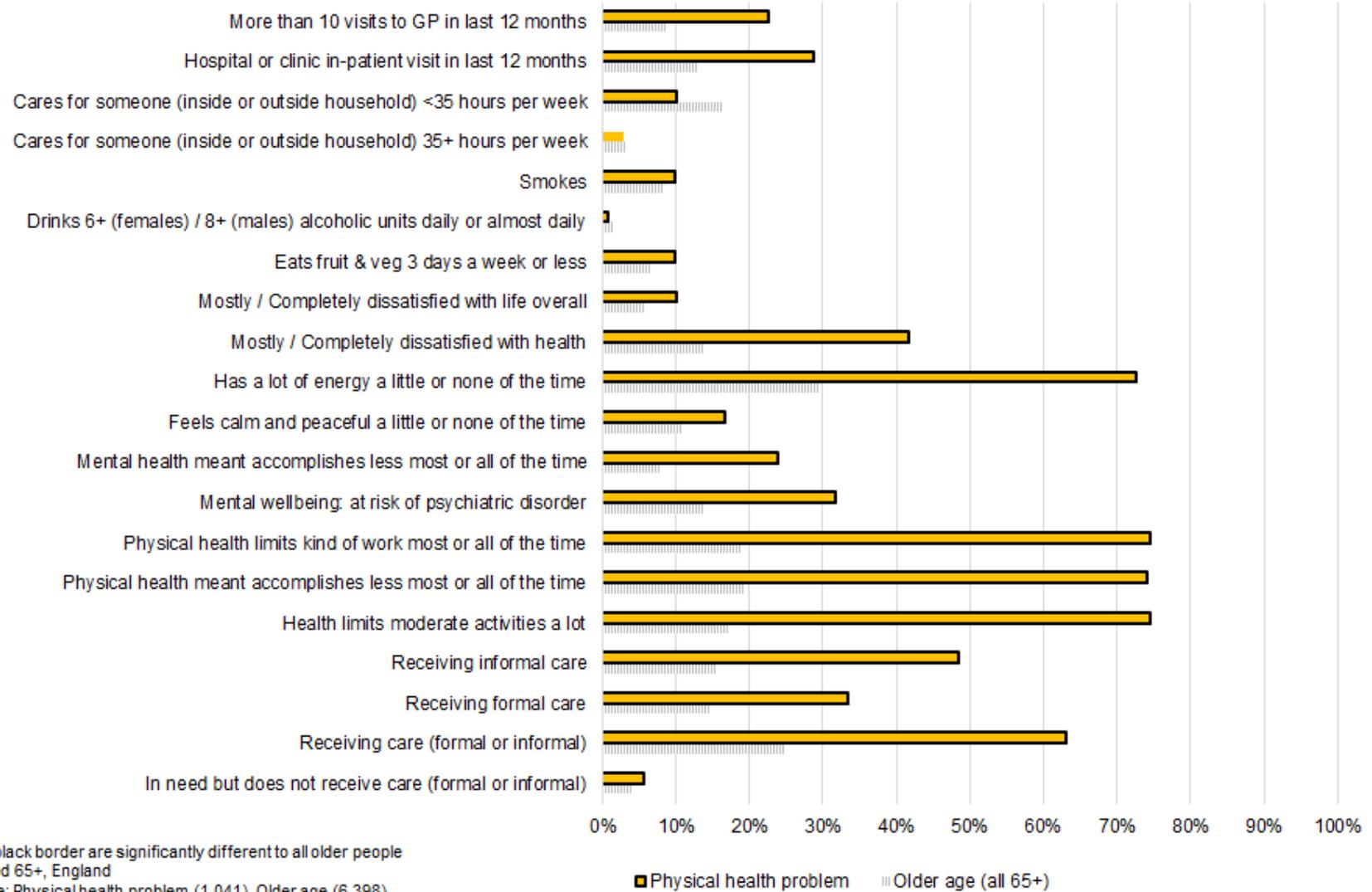
Older people with a severe physical health problem are **less** likely:

- To see their child(ren) less than once a week (or have no child(ren)) compared to the average older person.

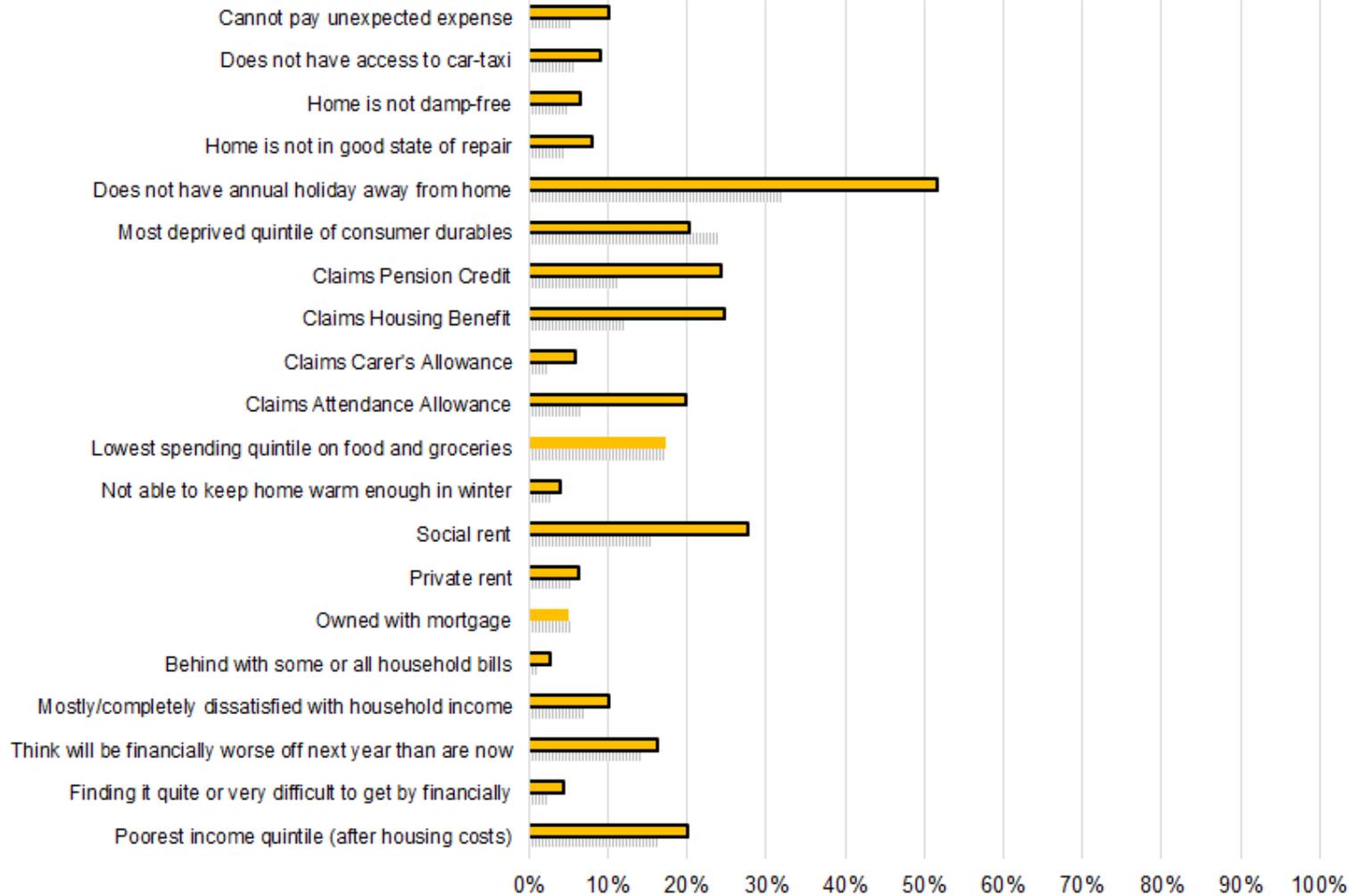
Key points about this subgroup:

1. Unsurprisingly, older people with a severe physical health problem are more likely to be disadvantaged across different measures of health and wellbeing than the average older person. They are more likely to report being mostly or completely dissatisfied with their health and life overall, be at risk of a psychiatric disorder, have more contact with health services and be limited in what they can do as a result of their physical and mental health.
2. Financially, older people with a severe physical health problem are more likely to be worse off compared to the average older person. Although they are less likely to be in the most deprived quintile of consumer durables deprivation, they are more likely to be in the poorest income quintile after housing cost, express being mostly or completely dissatisfied with their household income, find it quite or very difficult getting by financially and be in receipt of benefits.
3. Older people with a severe physical health problem tend to be less socially connected than the average older person. They are more likely to live alone, have few close friends, not go out socially due to their health, be less engaged within their community and politically, with limited use or access to technology to connect socially. However, they do see their children more frequently compared to the average older person.

## Physical health problem: Health and wellbeing



### Physical health problem: Financial security



Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Physical health problem (1,041), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

## Physical health problem: Social connectedness



Note: Bars with black borders are statistically different to all older people.

Base: All older people aged 65+, England.

Unweighted base: Severe disability (n = 985 - 1,118), Older age (65+) (n = 5,517 - 5,868).

Source: Understanding Society (2013/14, 2014/15, 2015/16, 2016/17).

■ Physical health problem

▨ Older age (all 65+)

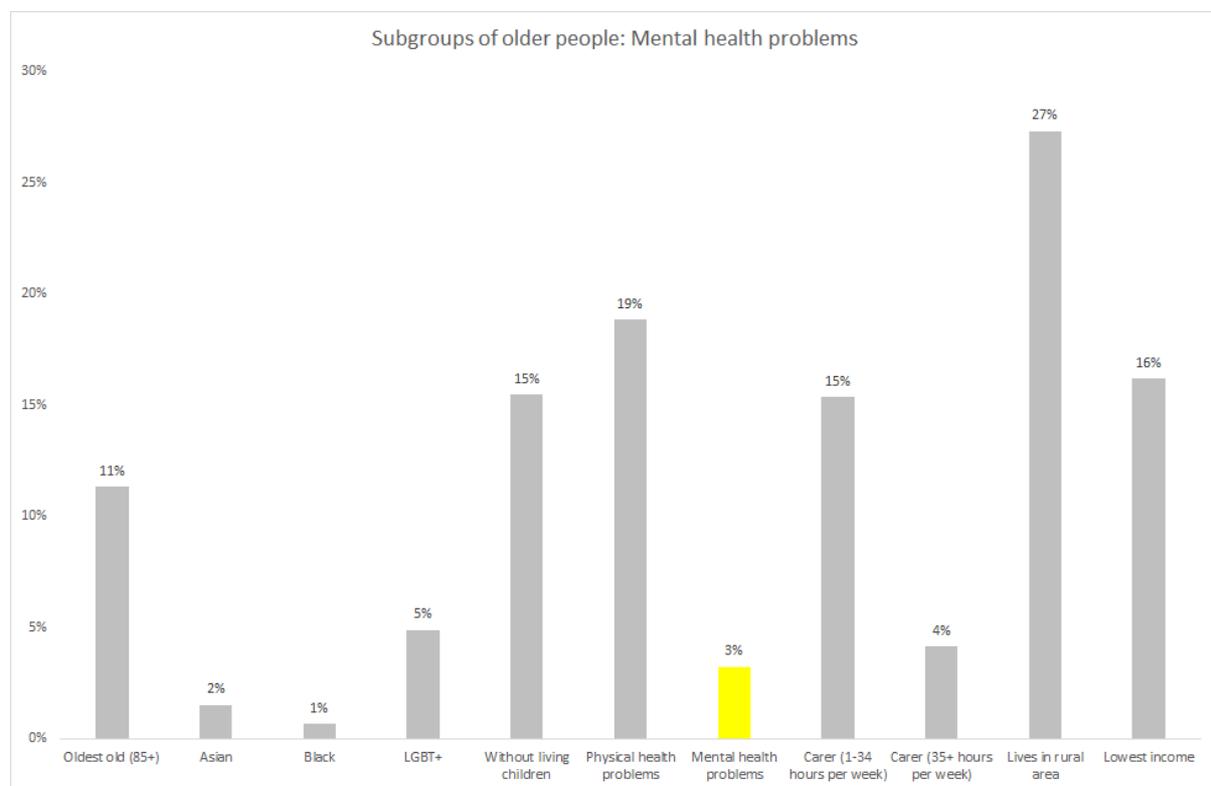
## Older people with mental health problems

### Definition

Older people with mental health problems are defined as those who record a score of 30 or more on the Mental Component Summary of the SF-12 questionnaire – a suite of questions that indicate a person's health status. Responses to the survey create a score from 0-100 which can be categorised as:

- 50 or more: no health problem
- 40-49: mild health problem
- 30-39: moderate health problem
- Below 30: severe health problem

- Approximately 3 per cent of older people are in this subgroup.
- There are 185 older people with a severe mental health problem in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of older people with a severe mental health problem compared to the average older person, and only considers differences that are statistically significant:

#### *Health and wellbeing*

Older people with a severe mental health problem are **more** likely:

- To report being mostly or completely dissatisfied with their life overall, as well as their health, and that health limits moderate activities they might do during a typical day a lot than the average older person.
- Older people with a severe mental health problem are also more likely to report having a lot of energy or feeling clam and peaceful a little or none of the time compared to the average older person. They are also more likely to be at risk of a psychiatric disorder.

- In terms of physical health, older people with a severe mental health problem are more likely to express that their physical health limits the kind of work they can do most or all of the time compared to the average older person. This (mental or physical health) meant they accomplish less most or all of the time than the average older person.
- Compared to the average older person, older people with a severe mental health problem are more likely to have had more than 10 visits to the GP or a hospital or clinic in-patient visit in the last 12 months. They are also more likely to eat fruit and vegetables three days a week or less, and to smoke, compared to the average older person.
- Older people with a severe mental health problem are more likely to care for someone inside or outside their household for 35 hours or more a week than the average older person. However, they are also more likely to be receiving care (formal or informal), or to be in need of care and not receiving it compared to the average older person.

Older people with a severe mental health problem are **less** likely:

- To care for someone inside or outside their household for less than 35 hours a week than the average older person.

### *Financial Security*

Older people with a severe mental health problem are **more** likely:

- To be in the poorest income quintile after housing costs, express being mostly or completely dissatisfied with their household income, and be in the most deprived quintile of consumer durables deprivation compared to the average older person.
- Compared to the average older person, older people with a severe mental health problem are also more likely to think they will be financially worse off the following year than they currently are and to report finding it quite or very difficult to get by financially. They are also more likely to report not being able to pay unexpected expenses
- In terms of housing tenure, older people with a severe mental health problem are more likely to live in social or private rented housing than the average older person. They are also more likely to report their home not being in a good state of repair, not damp-free, and not being able to keep it warm enough in winter.
- Older people with a severe mental health problem are more likely to be in receipt of benefits such as pension credit, housing benefit, carer's allowance and attendance allowance than the average older person. They are also more likely not to have access to a car or taxi whenever one is needed and have an annual holiday away from home.

### *Social Connectedness*

Older people with a severe mental health problem are **more** likely:

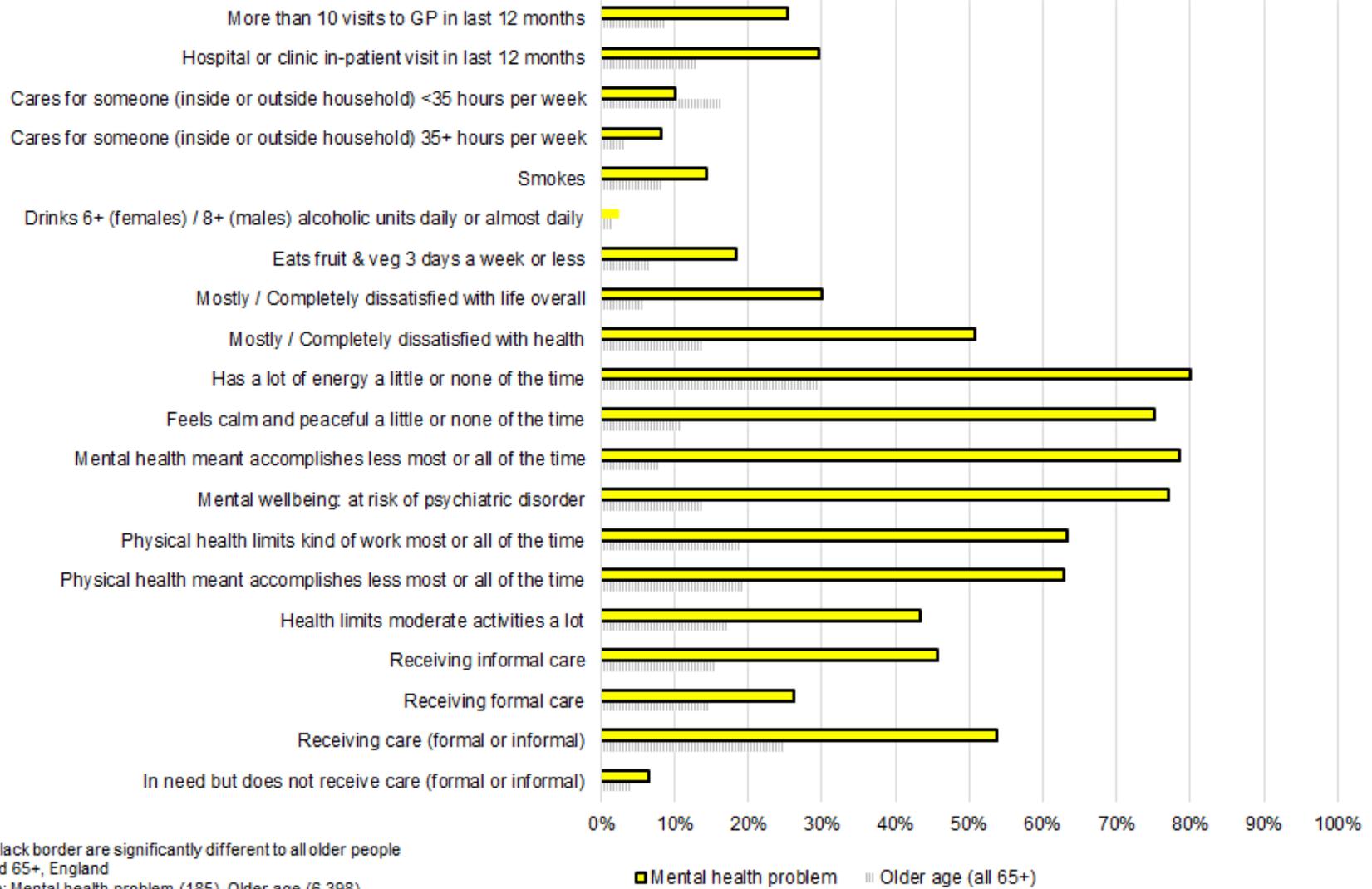
- Not to have a tablet, use or access the internet, and belong to a social website.
- Older people with a severe mental health problem are also more likely to have two close friends or less and not go out socially or visit friends when they feel like it than the average older person. They are more likely to cite health condition, illness or impairment, or disability as the reason for not going out socially or visiting friends.
- Furthermore, older people with a severe mental health problem are more likely to have volunteered or done an arts activity less than once a week in the last 12 months compared to the average older person. They are also more likely to worry about becoming a victim of crime.
- In terms of transport, older people with a severe mental health problem are more likely to be of the opinion that the standard of public transport services in their local area is poor or fair compared to the average older person. They are also more likely to travel by private car or van less than once a day or use an ordinary bus less than once a week

- Politically, older people with a severe mental health problem are more likely to report not being very or at all interested in politics than the average older person. They are also more likely to agree that people like them do not have any say in what the government does.
- Older people with a severe mental health problem are more likely to see their child(ren) less than once a week (or have no child(ren)) compared to the average older person.

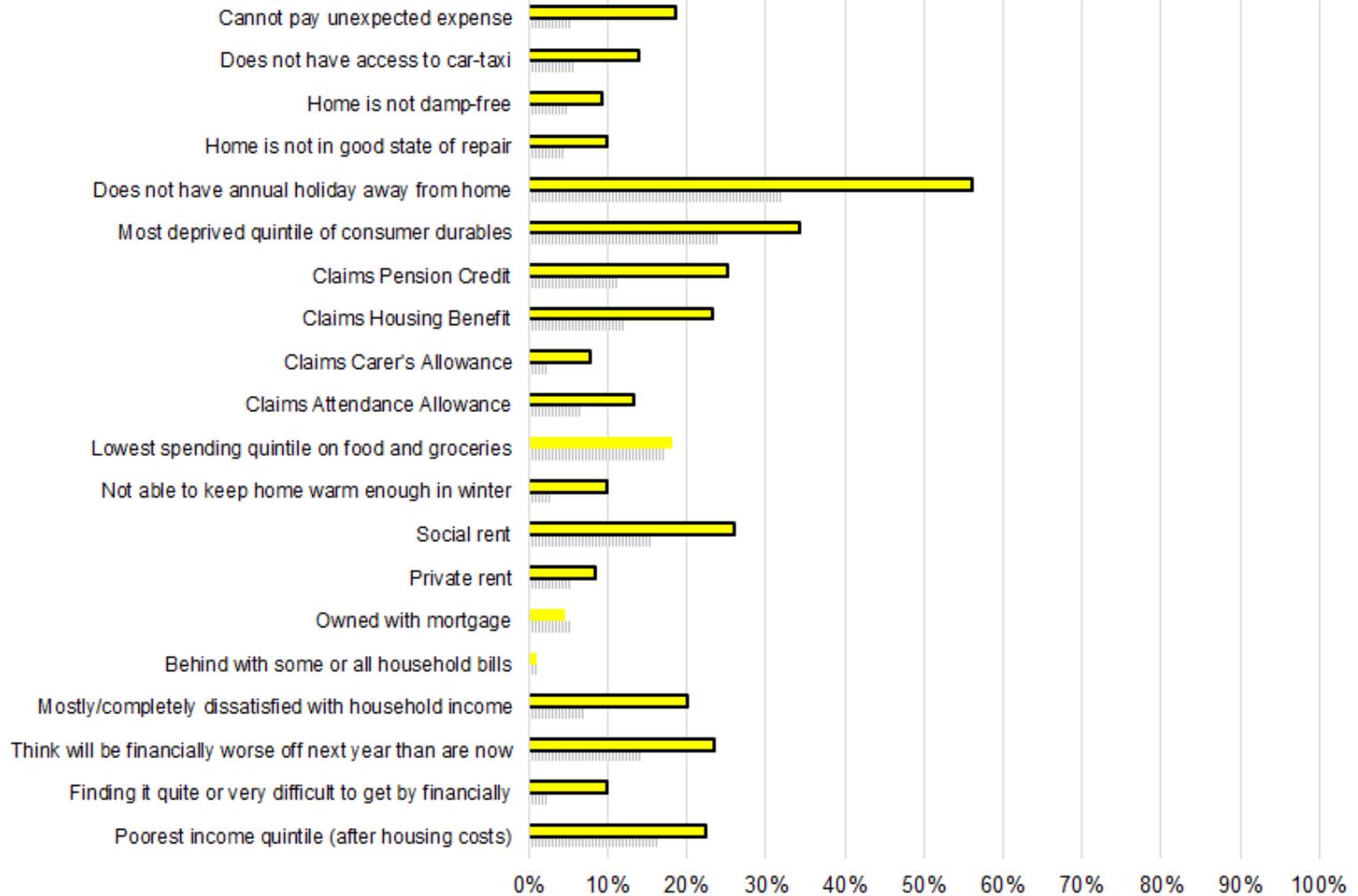
Key points about this subgroup:

1. Older people with a severe mental health problem are more likely to be disadvantaged across different measures of health and wellbeing than the average older person. They are more likely to report being mostly or completely dissatisfied with their health and life overall, have more contact with health services and be limited in what they can do accomplish as a result of their physical and mental health.
2. Financially, older people with a severe mental health problem are more likely to be worse off compared to the average older person. They are more likely to be in the poorest income quintile after housing costs and the most deprived quintile of consumer durables deprivation, express being mostly or completely dissatisfied with their household income, find it quite or very difficult getting by financially and be in receipt of benefits.
3. Older people with a severe mental problem tend to be less socially connected than the average older person. They are more likely to have few close friends, not go out socially due to their health, be less engaged within their community and politically, with limited use or access to technology to connect socially and see their children less frequently.

## Mental health problem: Health and wellbeing



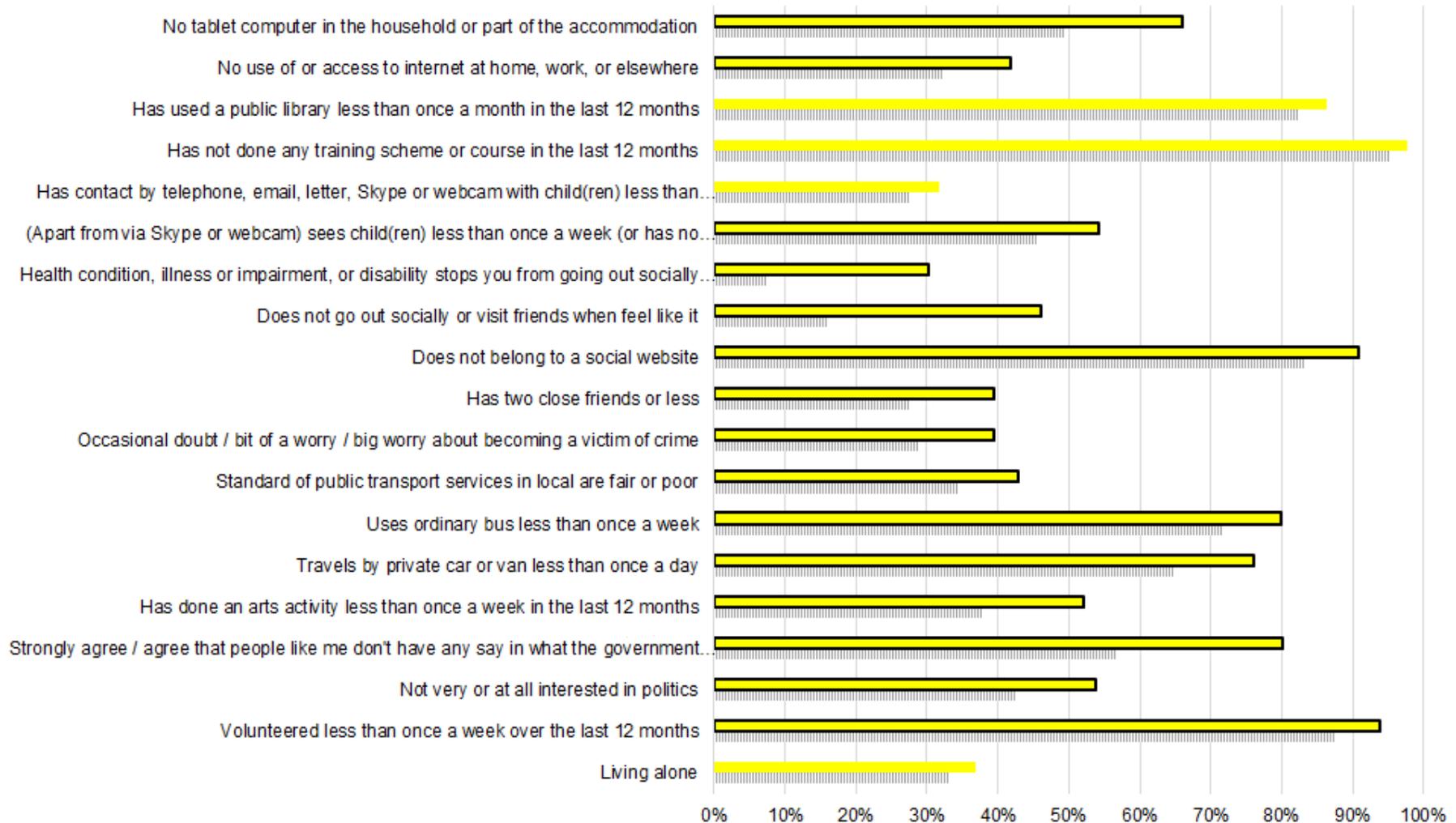
## Mental health problem: Financial security



Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Mental health problem (185), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

■ Mental health problem    ▨ Older age (all 65+)

## Mental health problem: Social connectedness



Note: Bars with black border are significantly different to all older people.  
 Base: All older people aged 65+, England.  
 Unweighted base: Severe disability (n = 113 - 185), Older age (65+) (n = 5,517 - 5,868).  
 Source: Understanding Society (2013/14, 2014/15, 2015/16, 2016/17).

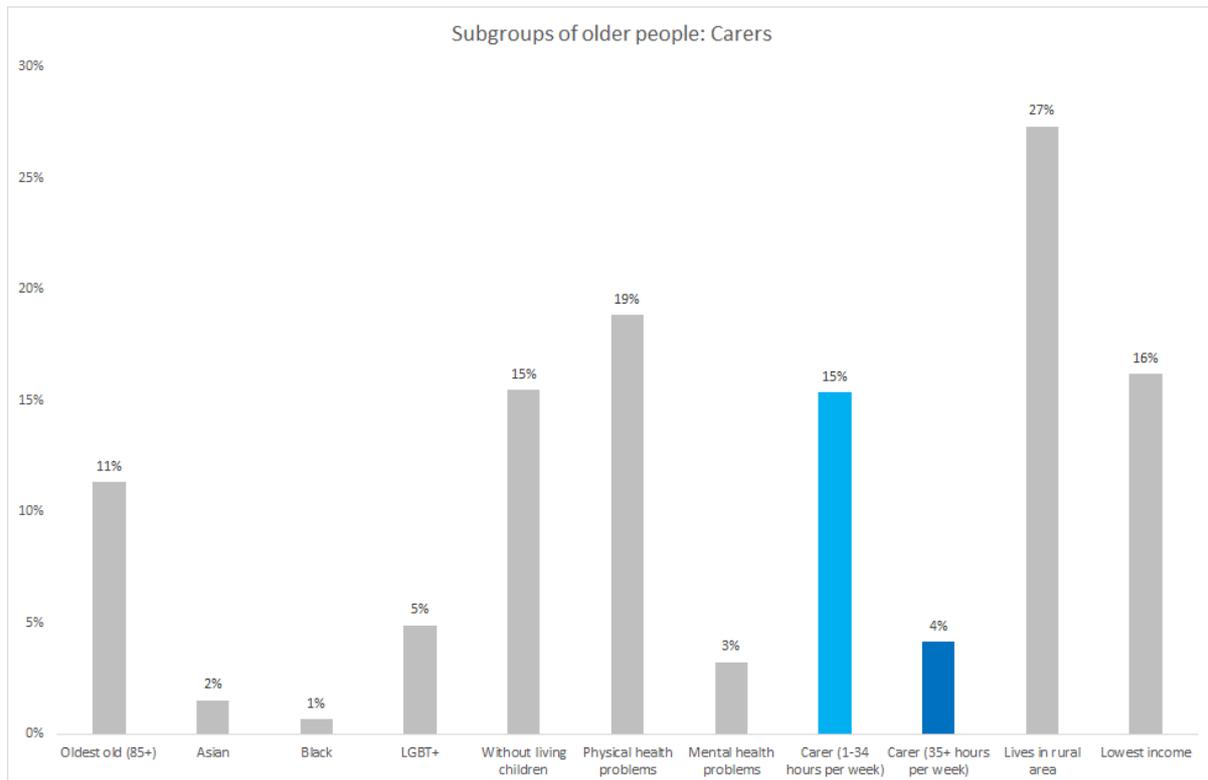
■ Mental health problems    ▨ Older age (all 65+)

## Older people who are carers

### Definition

Older people who look after someone in or outside of their household (for example a family member or a friend) is defined as a carer. We categorise carers into two groups according to how many hours a week they care.

- Approximately one in five (19 per cent) of older people are carers – 15% care for 1-34 hours per week and 4% for 35 or more hours per week.
- There are 957 older people who care for 1-34 hours per week and 245 older people who care for 35 or more hours per week in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of older carers (part-time or full-time) compared to the average older person and only considers differences that are statistically significant:

#### *Health and wellbeing*

Older people who are carers are **more** likely:

- To be at risk of experiencing a psychiatric disorder or to say their mental health meant they accomplish than the average older person.
- Older people who are full-time carers are also more likely to report not having a lot of energy or feeling calm and peaceful compared to the average older person.

Older people who are carers are **less** likely:

- To have had more than 10 visits to the GP in the last 12 months than the average older person. Additionally, older people who are part-time carers are also less likely to have had a hospital or clinic in-patient visit in the last 12 months or to eat fruit and vegetables three days a week or less compared to the average older person.

- Older people who are part-time carers are less likely to report being mostly or completely dissatisfied with their health or that health limits moderate than the average older person. They are also less likely to express that their physical health limits the kind of work they can do most or all of the time, and that physical health or mental health meant they accomplish less most or all of the time compared to the average older person.
- While older people who are part-time carers are less likely to be receiving formal or informal care than the average older person, older people who are full-time carers are less likely to be receiving informal care.
- Older people who are part-time carers are also less likely to report having a lot of energy or compared to the average older person.

### *Financial Security*

Older people who are carers are **more** likely:

- To be in receipt of benefits such as pension credit, carer's allowance or attendance allowance than the average older person. They are also more likely not to have an annual holiday away from home.
- In terms of housing tenure, older people who are full-time carers are more likely to live in social rented housing than the average older person.

Older people are carers are **less** likely:

- To be in the most deprived quintile of consumer durables deprivation compared to the average older person, while older people who are part-time carers are also less likely not to have an annual holiday away from home.
- Older people who are part-time carers are also less likely to be in the poorest income quintile after housing costs or to report that they cannot pay unexpected expenses than the average person.
- In terms of housing tenure, older people who are part-time carers are less likely to live in social rented housing or to report that their home is not in a good state of repair than the average older person.

### *Social Connectedness*

Older people are carers are **more** likely:

- To be of the opinion that the standard of public transport services in their local area is poor or fair compared to the average older person. They are also more likely to worry about becoming a victim of crime.
- Compared to the average older person, older people who are full-time carers are more likely not to go out socially or visit friends when they feel like it.
- Older people who are full-time carers are more likely to say that people like them do not have any say in what the government does compared to the average older person. They are also more likely to have volunteered or done an arts activity less than once a week in the last 12 months.

Older people are carers are **less** likely:

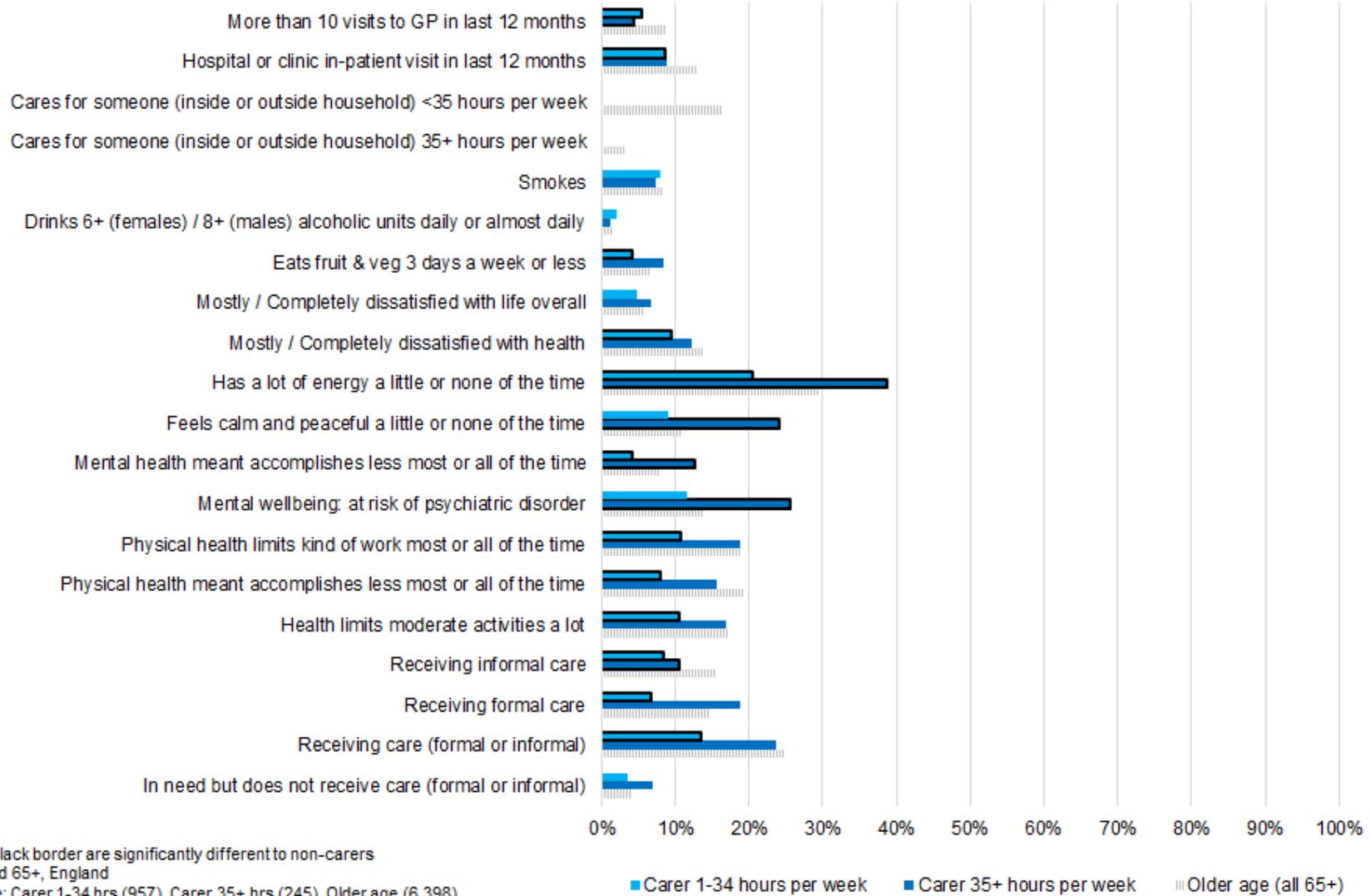
- To not have a tablet computer, use or have access to the internet, or belong to a social website compared to the average older person.
- Compared to the average older person, both full-time and part-time older people who carers are less likely to live alone, while older part-time carers are also less likely to have two close friends or less than the average older person. Older people who are part-time carers are also less likely to have contact with their child(ren) less than once a week (or have no children) than the average older person.

- Older people who are part-time carers are less likely to be isolated (not to go out socially or visit friends)..
- In terms of transport, older people who are part-time carers are less likely to travel by private car or van less than once a day compared to the average older person, while politically they are less likely not to be very or at all interested in politics compared to the average older person.

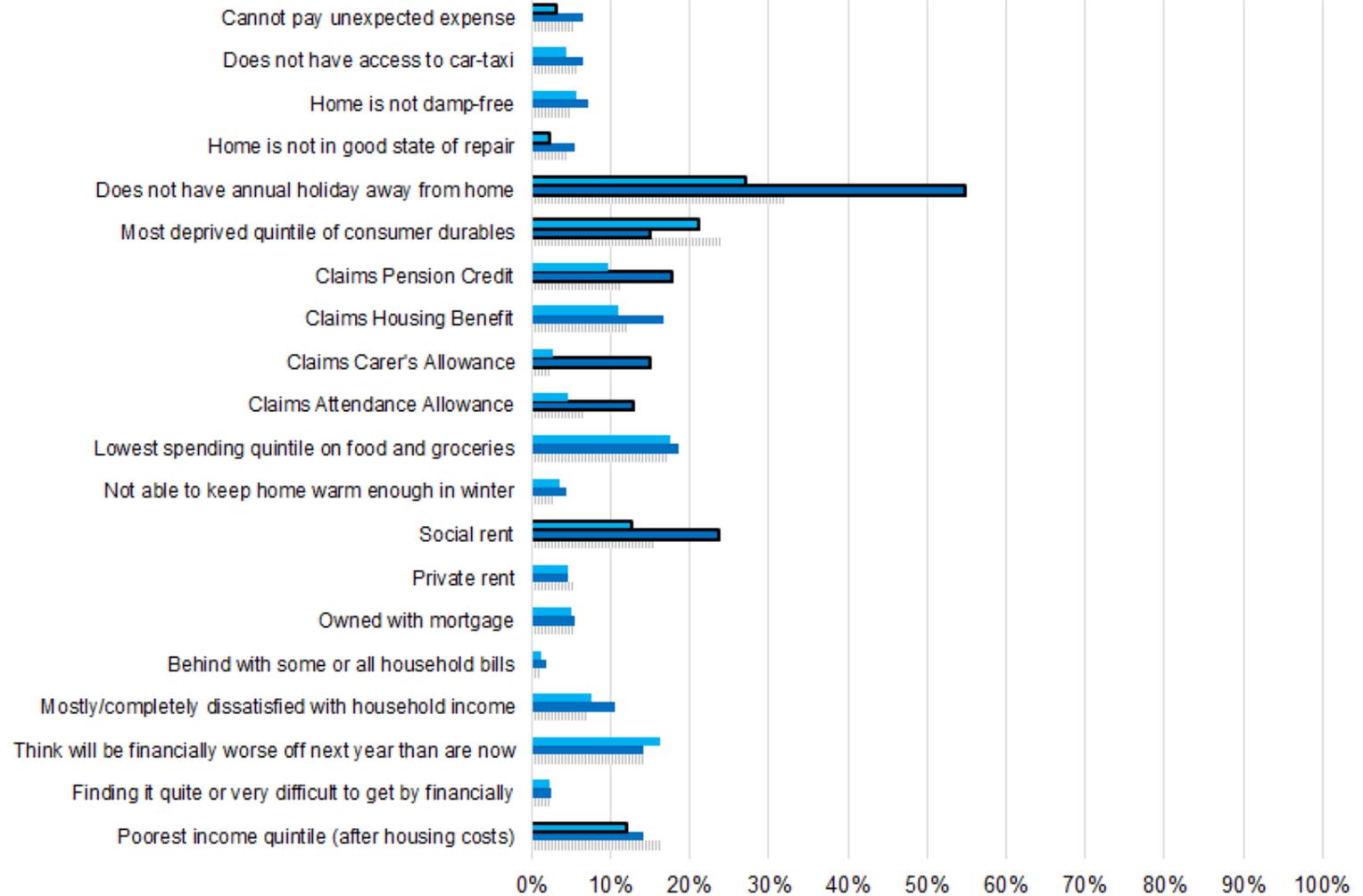
Key points about this subgroup:

1. Older people who are part-time carers appear to have better health, while those who are full-time carers appear to have poorer health compared to the average older person (although the differences between older full-time carers and the average older person are statistically significant on only a few measures). Older full-time carers are more likely to be at risk of experiencing a psychiatric disorder and be limited in what they can accomplish as a result of their mental health.
2. Older people who are full-time carers also appear to be worse off financially on a few measures compared to the average older person. They are, more likely to be in receipt of benefits, live in social rented housing, and not have an annual holiday away from home. Older part-time carers appear to be slightly better off. They are less likely to be in the most deprived quintile of consumer durables deprivation, and less likely to be in the poorest income quintile after housing costs, report being unable to unexpected expenses or live in social rented housing.
3. In terms of social connectedness, older people who are part-time carers are more socially connected compared to the average older person, however the picture is not clear for older people who are full-time carers. While both older part-time and full-time carers are less likely to live alone, older part-time carers tend to use or have access to technology to connect socially, go out socially or visit, and participate more frequently within their community. On the other hand, older full-time carers are more likely not to go out socially or visit friends and participate less frequently within their community.

## Carers: Health and wellbeing



## Carers: Financial security



Note: Bars with black border are significantly different to non-carers

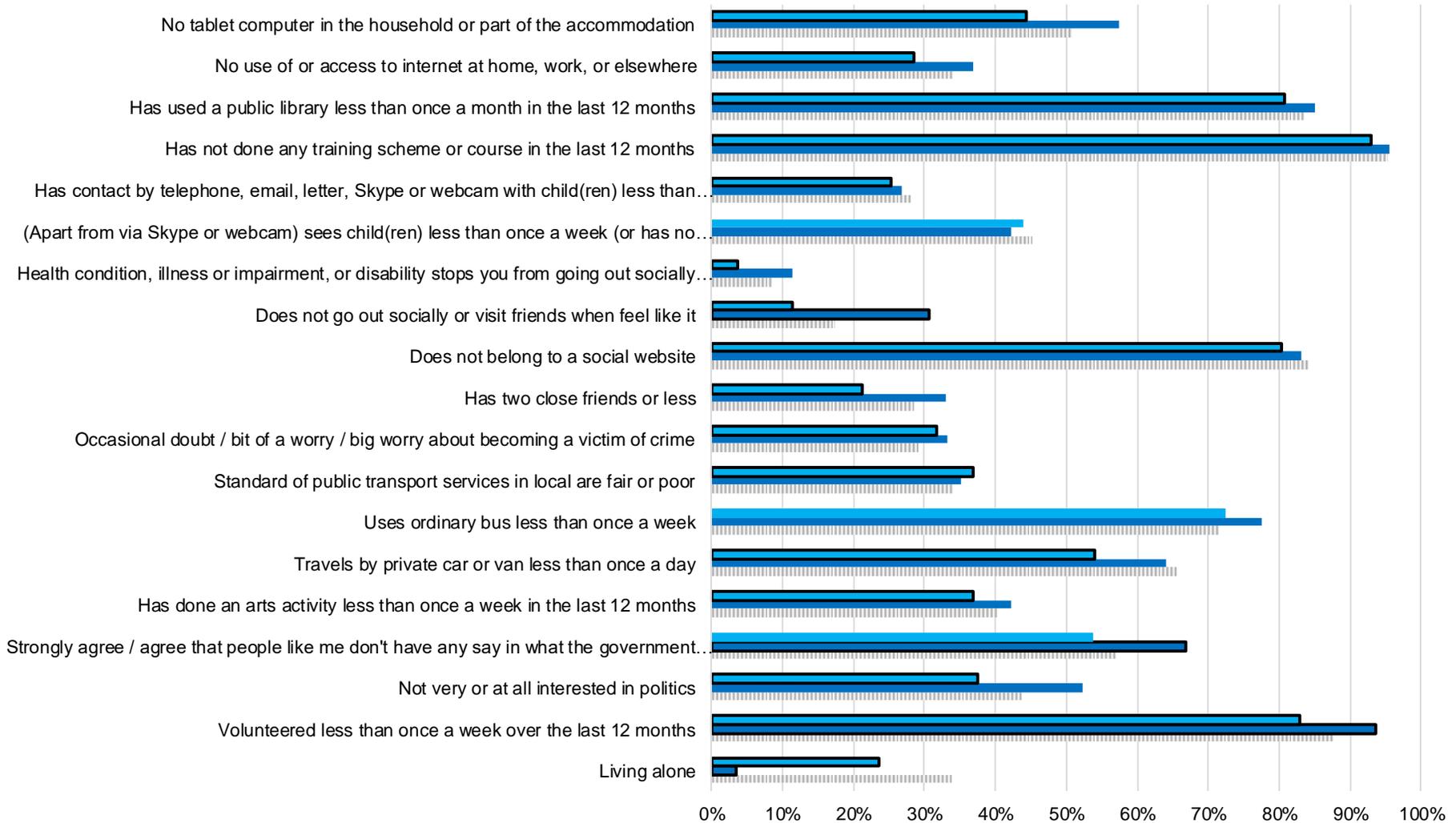
Base: Adults aged 65+, England

Unweighted base: Carer 1-34 hrs (957), Carer 35+ hrs (245), Older age (6,398)

Source: Understanding Society survey, 2016/17

■ Carer 1-34 hours per week ■ Carer 35+ hours per week ▨ Older age (all 65+)

## Carers: Social connectedness



Note: Bars with black border are statistically different to non-carers

Base: All older people aged 65+, England.

Unweighted base: Carer (1-34 hours) (n=951-1,089), Carer (35+ hours) (n=198-245), Older age (65+) (n=6,051-6,415).

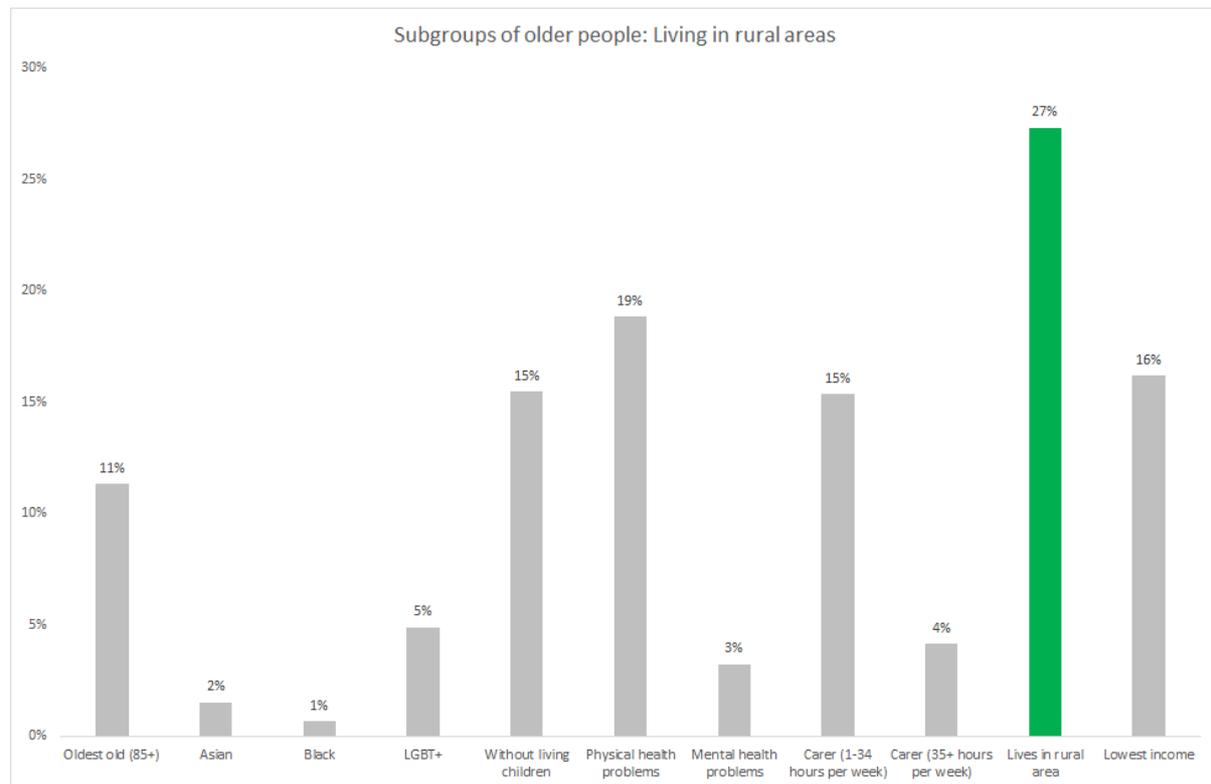
Source: Understanding Society (2013/14, 2014/15, 2015/16, 2016/17).

## Older people living in rural areas

### Definition

This is derived from the Office for National Statistics Rural and Urban Classification of Output Areas. A rural area has a population of less than 10,000 people.

- Approximately a quarter (27%) of older people are in this subgroup.
- There are 1,698 older people living in rural areas in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of older people living in rural areas compared to the average older person, and only considers differences that are statistically significant:

#### *Health and wellbeing*

Older people living in rural areas are **less** likely:

- To report being mostly or completely dissatisfied with their health, and to say that health limits moderate activities, than the average older person.
- Older people living in rural areas are also less likely to report not having a lot of energy or feeling calm.
- In terms of physical health, older people living in rural areas are less likely to say that their physical health limits them. In terms of mental wellbeing, older people living in rural areas are less likely to be at risk of experiencing a psychiatric disorder and to say their mental health meant they accomplish less.
- Compared to the average older person, older people living in rural areas are less likely to have had more than 10 visits to the GP in the last 12 months. They are also less likely to eat fruit and vegetables three days a week or less, and to smoke.
- Older people living in rural areas are less likely to be receiving informal care or formal care, or to go without care if they need it, than the average older person.

### *Financial Security*

Older people living in rural areas are **more** likely:

- To think they will be financially worse off the following year than they currently are, compared to the average older person.
- In terms of housing tenure, older people living in rural areas are more likely to live in social or private rented housing than the average older person. They are also more likely to report that their home is damp-free.

Older people living in rural areas are **less** likely:

- To be in the poorest income quintile after housing costs, or the lowest spending quintile on food groceries, compared to the average person.
- Compared to the average older person, older people living in rural areas are less likely to be in the most deprived quintile, or to report that their home is not in a good state of repair. They are also less likely to say they cannot pay unexpected expenses.
- Older people living in rural areas are less likely to be in receipt of benefits such as pension credit, housing benefit, carer's allowance or attendance allowance than the average older person. They are also less likely to lack access to private transport, or have an annual holiday away from home.

### *Social Connectedness*

Older people living in rural areas are **more** likely:

- To be of the opinion that the standard of their local public transport is fair or poor. They are more likely to use an ordinary bus less than once a week than the average older person.
- In terms of contact with children, older people living in rural areas are more likely to see their child(ren) less than once a week (or have no child(ren)) compared to the average older person.

Older people living in rural areas are **less** likely:

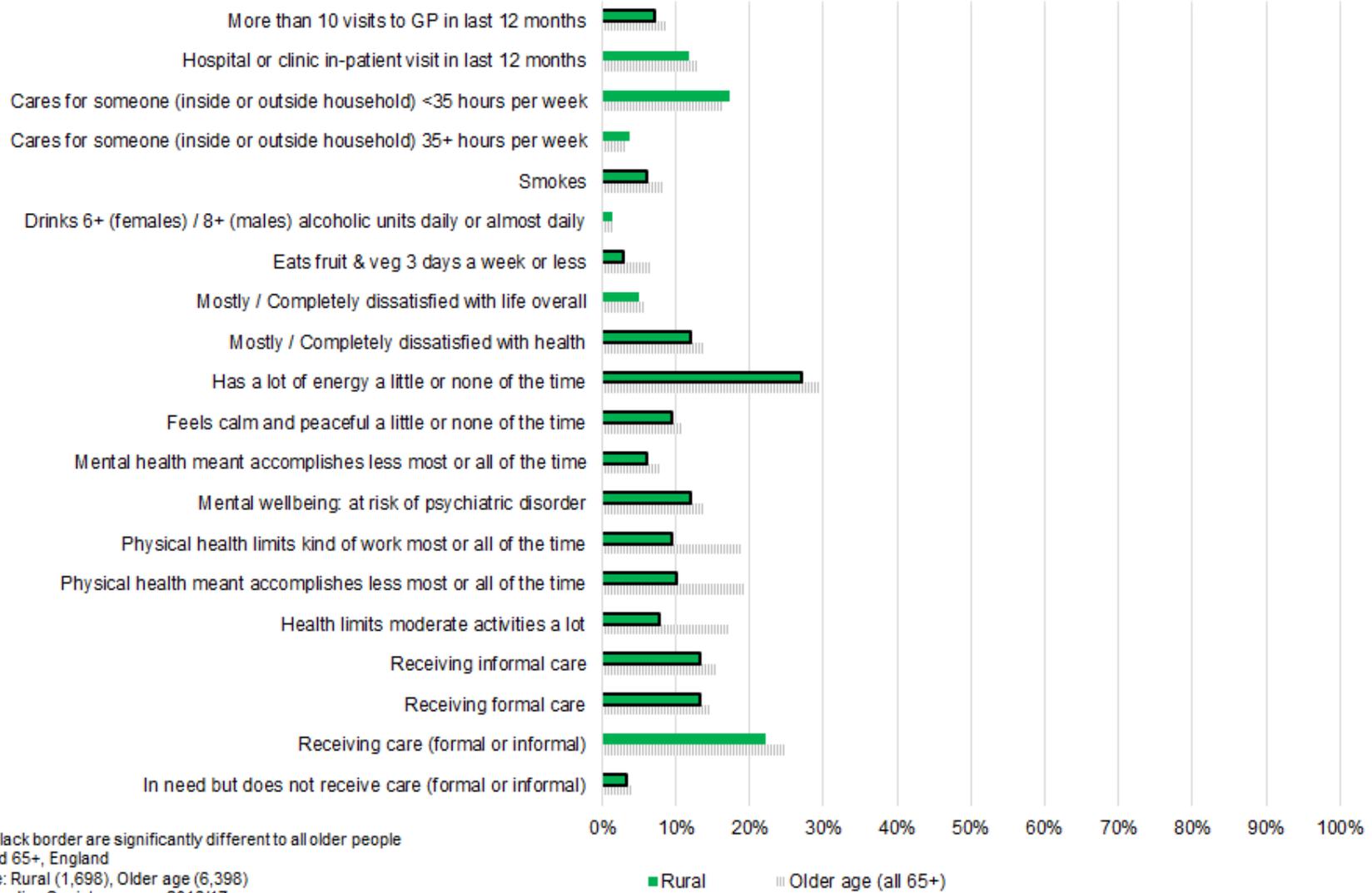
- Not to have a tablet, use or have access to the internet, or belong to a social website compared to the average older person.
- Compared to the average older person, older people living in rural areas are less likely to live alone or have two close friends or less than the average older person. They are less likely to cite health condition, illness or impairment, or disability as a reason for not going out socially or visiting friends.
- Furthermore, older people living in rural areas are less likely not to volunteer. They are also less likely to worry about crime.
- In terms of transport, older people living in rural areas are less likely to travel by private car or van infrequently.
- Politically, older people living in rural areas are less likely to say that people like them do not have any say in what the government does compared to the average older person.

Key points about this subgroup:

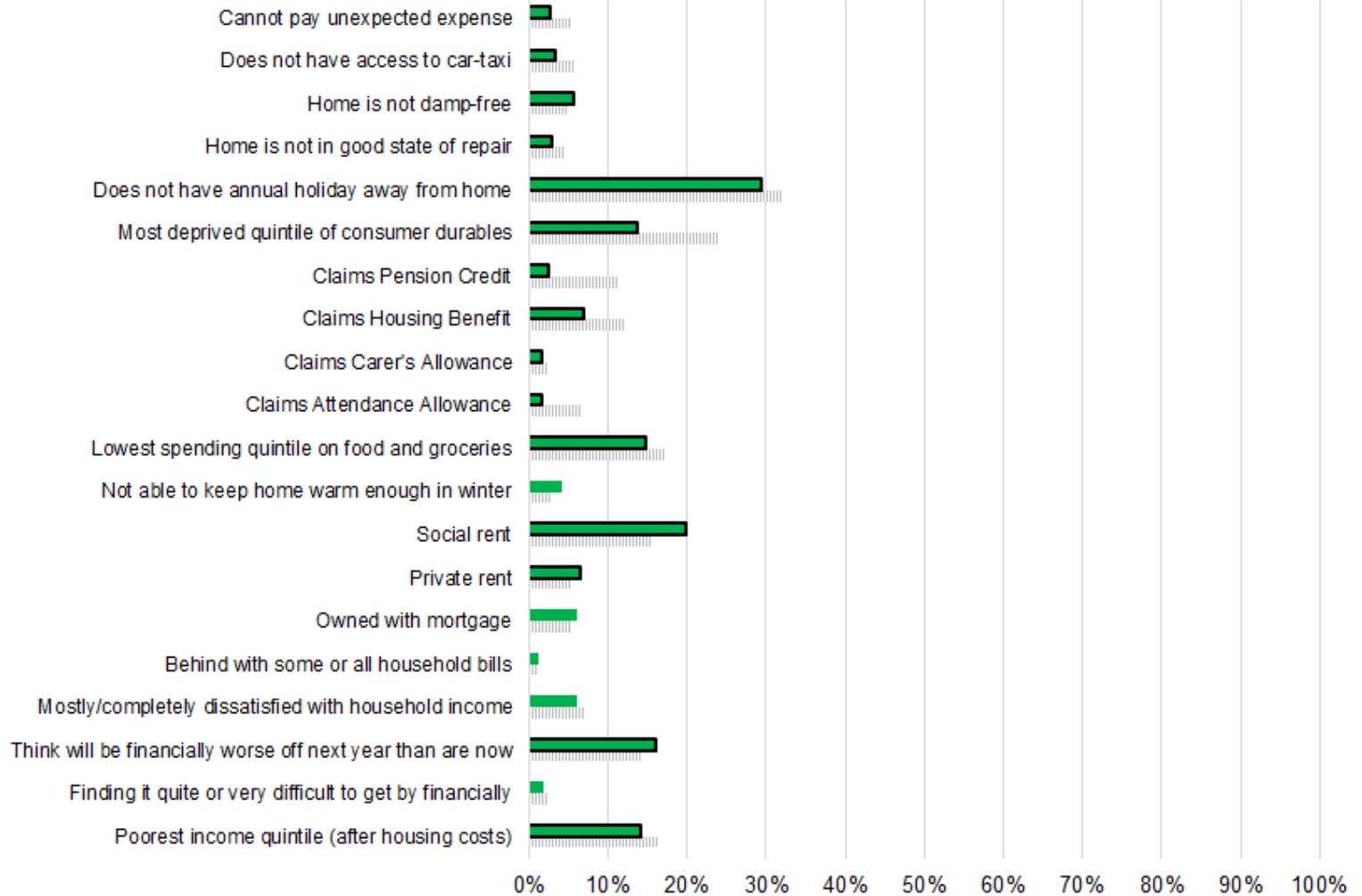
1. Older people living in rural areas have better health and wellbeing compared to the average older person. They are less likely to report being dissatisfied with their health and to be limited in what they can accomplish.

2. Older people living in rural areas appear to be more financially secure than the average older person. They are less likely to be in the poorest income quintile after housing costs, the lowest spending quintile on food groceries, the most deprived, and to be in receipt of benefits. However, they are more likely to think they will be financially worse off the following year than they currently are, and to live in social or private rented housing.
3. Older people living in rural areas tend to be more socially connected than the average older person. They are less likely to live alone, or have few close friends and tend to participate more frequently within their community. While they are more likely to be of the opinion that the standard of their local public transport is fair or poor, they travel by private car or van more frequently.

## Living in rural areas: Health and wellbeing

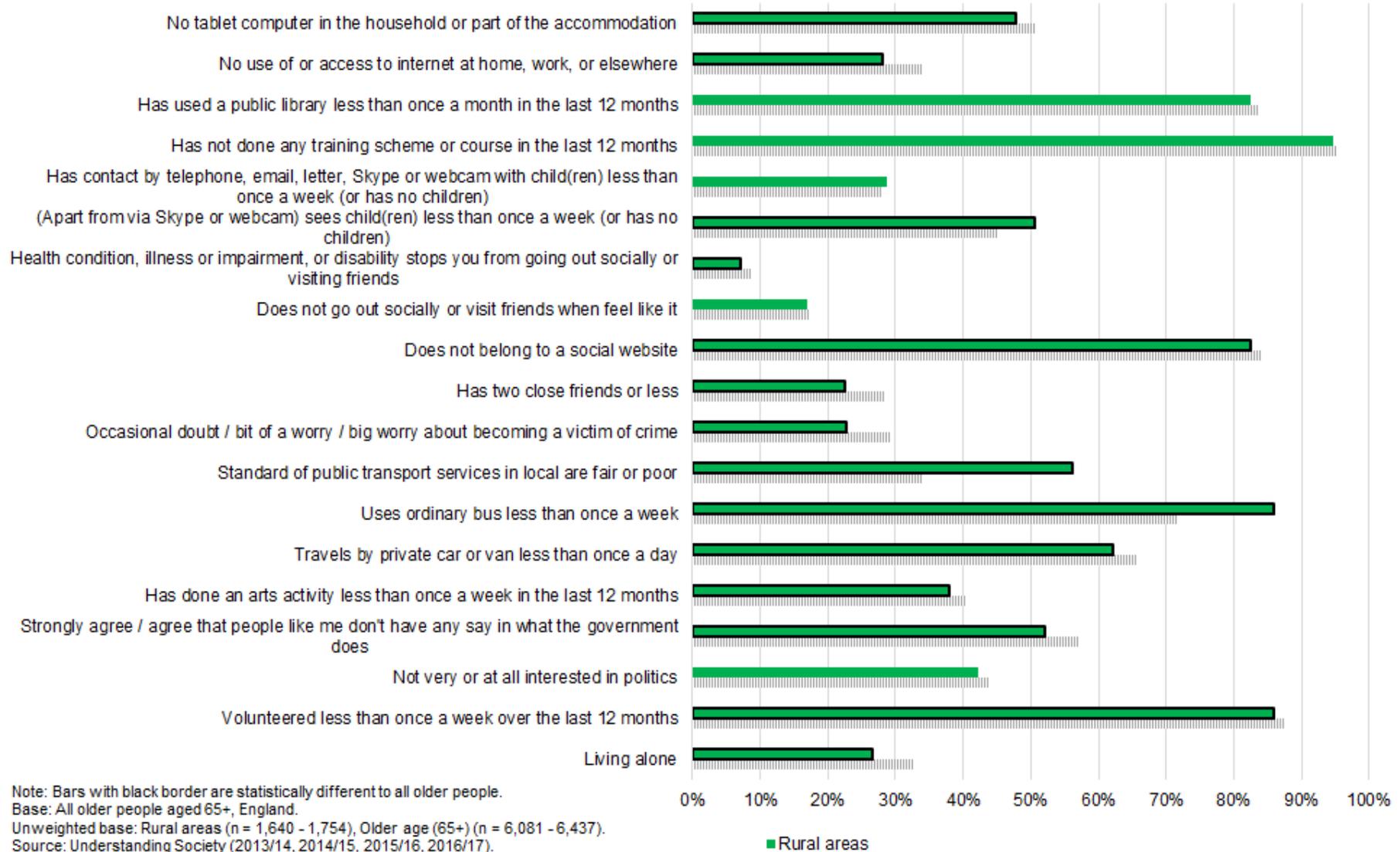


### Living in rural areas: Financial security



Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Rural (1,698), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

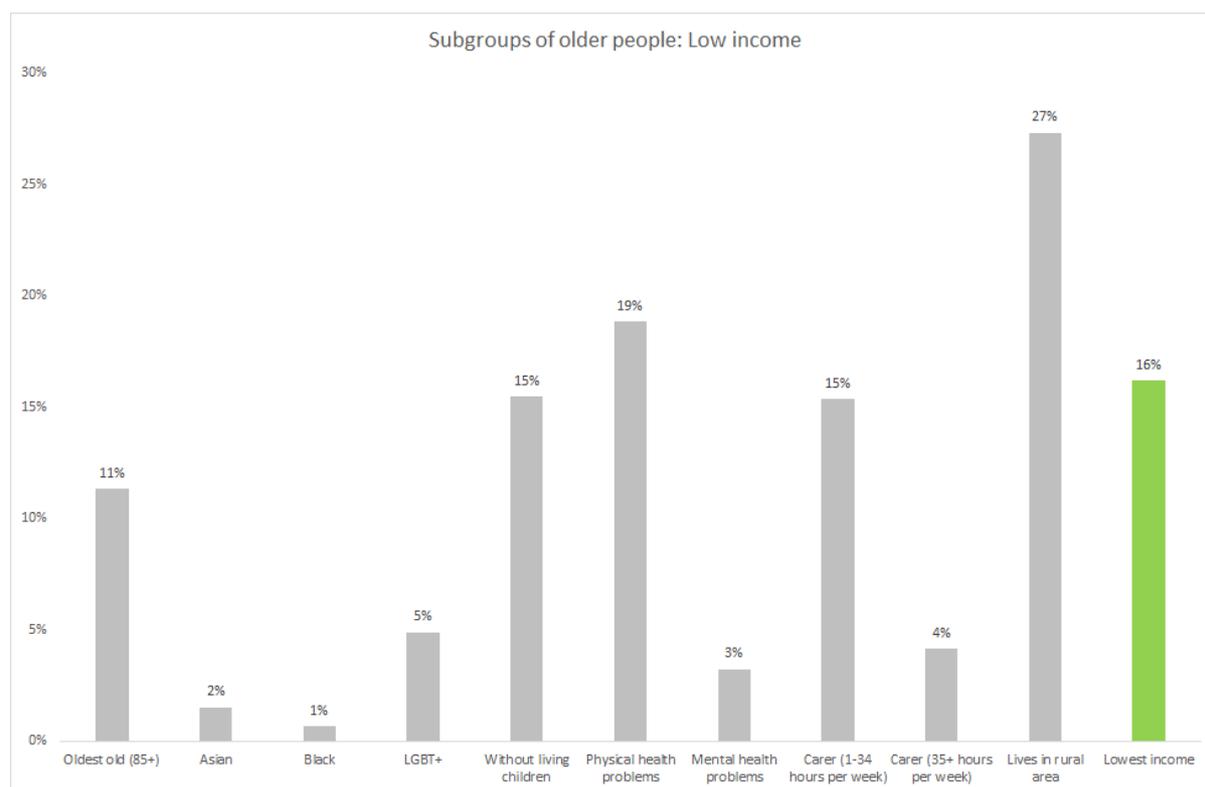
## Living in rural areas: Social connectedness



## Older people on the **lowest incomes**

### Definition

- The lowest income subgroup is defined as older people with household income, after housing costs (such as mortgage and rent payments) have been subtracted, in the lowest 20 per cent of household incomes in the whole population.
- Approximately 16 per cent of older people are in this subgroup.
- There are 966 older people in the lowest income subgroup in the 2016/17 Understanding Society dataset.



### Findings

The findings show the lived experiences of older people on lowest incomes compared to the average older person, and only considers differences that are statistically significant:

#### *Health and wellbeing*

Older people with the lowest incomes are **more** likely:

- To report being dissatisfied with their , and their health, compared to the average older person.
- In terms of physical health, older people on lowest incomes are more likely to say that their health limits they accomplish less compared to the average older person. In terms of mental wellbeing, older people with the lowest incomes are more likely to be at risk of experiencing a psychiatric disorder.
- Older people with the lowest incomes are also more likely to report a lack of energy and rarely feeling calm and peaceful compared to the average older person.
- Compared to the average older person, older people on lowest incomes are more likely to have had more than 10 visits to the GP in the last 12 months. They are also more likely to eat fruit and vegetables less often.
- Older people on lowest incomes are more likely to be receiving formal care than the average older person, as well as to be in need but not receive care.

Older people with the lowest incomes are **less** likely:

- To care for someone inside or outside their household compared to the average older person.

### *Financial Security*

Older people with the lowest incomes are **more** likely:

- To say they are dissatisfied with their household income than the average older person. They are also more likely to be in the lowest spending quintile on food and groceries, to be the most deprived.
- Compared to the average older person, older people with the lowest incomes are more likely to think they will be financially worse and to find it difficult to get by financially. They are also more likely to report not being able to pay unexpected expenses and being behind with some or all of their household bills.
- In terms of housing tenure, older people on lowest incomes are more likely to live in social or private rented housing than the average older person. They are also more likely to report their home not being in a good state of repair, not damp-free, and not being able to keep it warm enough in winter.
- Older people on lowest incomes are more likely to be in receipt of benefits such as pension credit and housing benefit than the average older person. They are also more likely not to have access to private transport and to not have an annual holiday.

Older people with the lowest incomes are **less** likely:

- To claim attendance allowance compared to the average older person.

### *Social Connectedness*

Older people with the lowest incomes are **more** likely:

- To not have a tablet computer, access internet, or belong to a social website.
- Older people with the lowest incomes are also more likely to live alone, only have two close friends or less, and not go out socially compared to the average older person.
- Furthermore, older people with the lowest incomes are more likely to have volunteered or done an arts activity less than once a week in the last 12 months compared to the average older person. They are also more likely not to have done any training scheme or course in the last 12 months.
- Politically, older people with the lowest incomes are more likely to report not being interested in politics than the average older person. They are also more likely to think that they do not have any say in what the government does.

Older people with the lowest incomes are **more** likely:

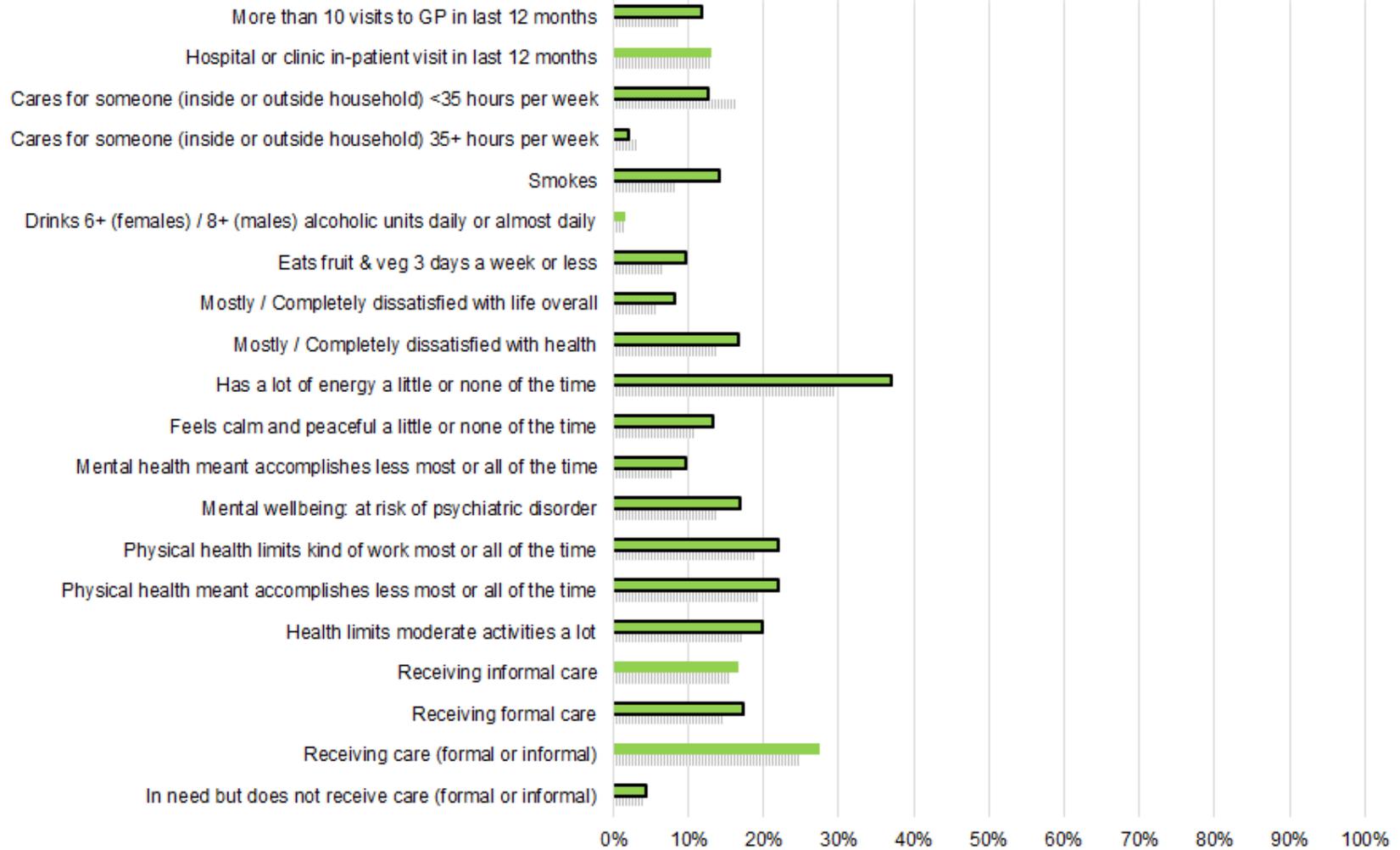
- To think that the standard of their local public transport is fair or poor. They are more likely to use an ordinary bus less than once a week than the average older person.

Key points about this subgroup:

1. Older people with the lowest incomes have poorer health and wellbeing compared to the average older person. Although they are less likely to care for, they are more likely to report being dissatisfied with their life and their health, be limited in what they can accomplish as a result of their health, eat fruit and vegetables less frequently and to smoke.

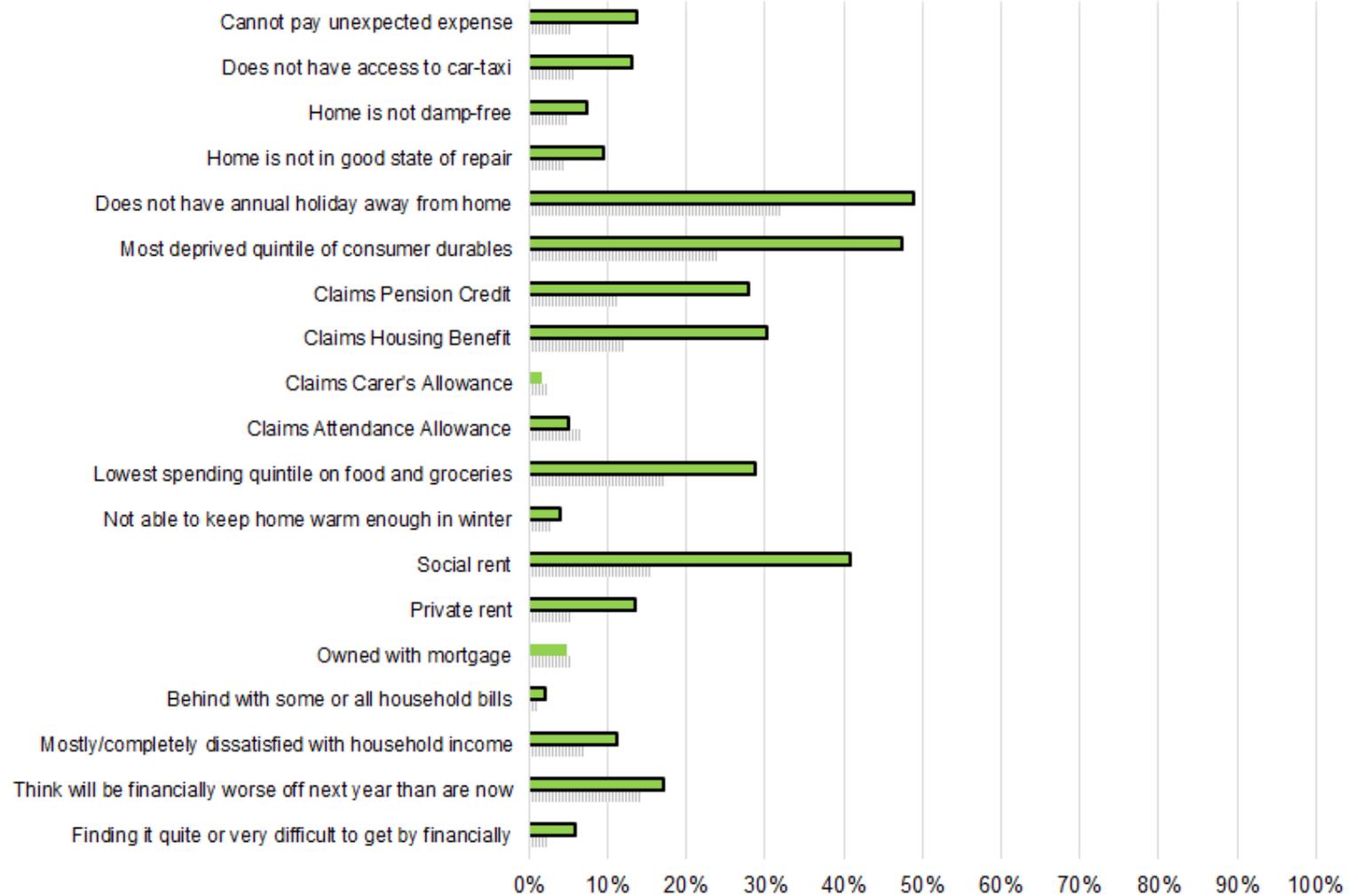
2. Older people with the lowest incomes are less secure financially compared to the average older person. They are more likely to express being dissatisfied with their household income, and report finding it difficult to get by financially. They are more likely to be in the lowest spending quintile on food and groceries, and to be deprived of consumer durables , to be in receipt of welfare benefits, and to have housing problems.
3. Older people with the lowest incomes tend to be less socially connected compared to the average older person. They are more likely to live alone, have few close friends, or not go out socially. They have limited use or access to technology, are disengaged politically and participate less frequently within their community. They are, however, less likely to be of the opinion that the standard of their local public transport is fair or poor and use public transport more frequently.

## Lowest (20%) income: Health and wellbeing



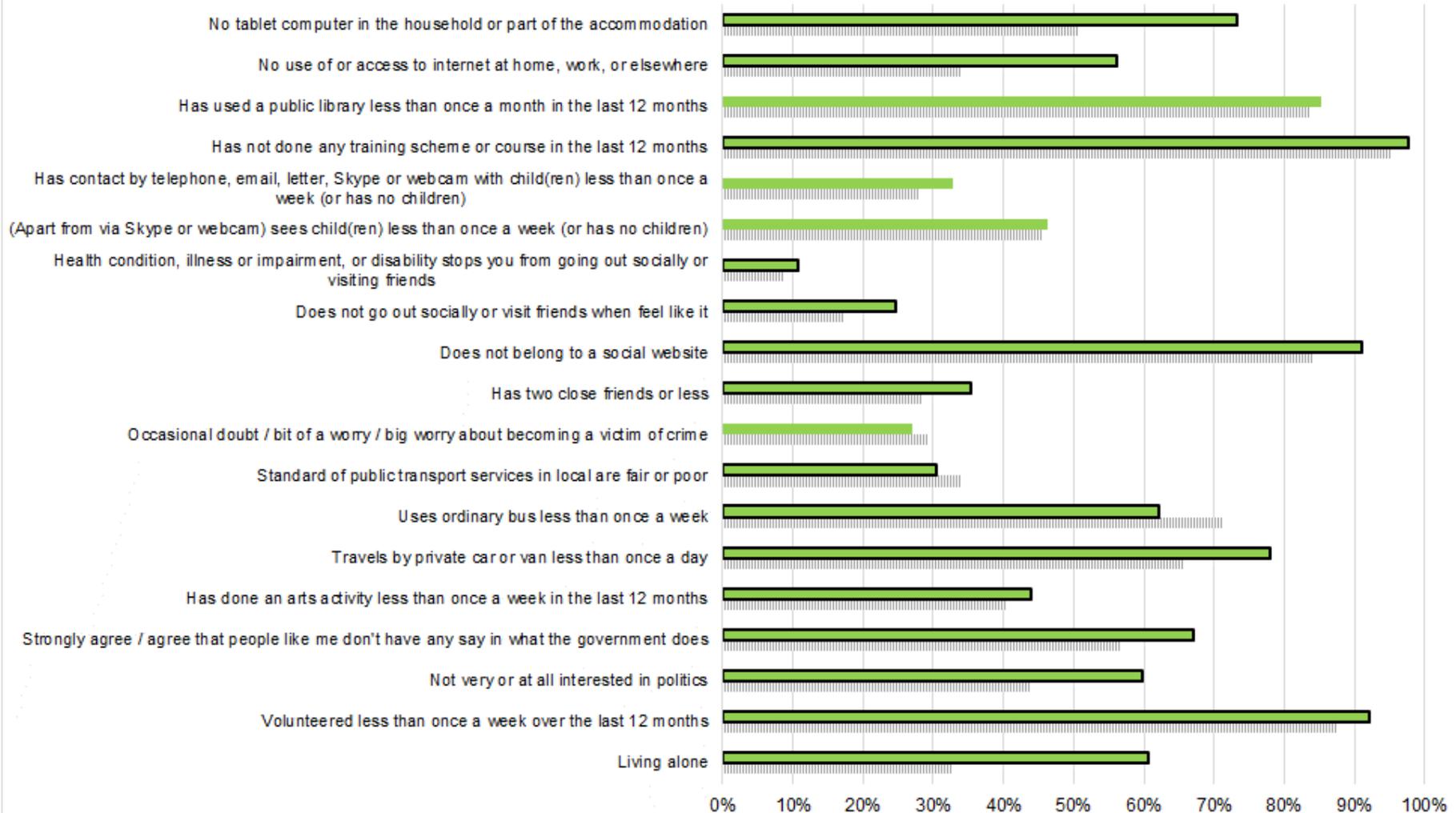
Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Lowest incomes (966), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

### Lowest (20%) income: Financial security



Note: Bars with black border are significantly different to all older people  
 Base: Adults aged 65+, England  
 Unweighted base: Lowest incomes (966), Older age (6,398)  
 Source: Understanding Society survey, 2016/17

## Lowest (20%) incomes: Social connectedness



Note: Bars with black borders are statistically different to all older people.

Base: All older people aged 65+, England.

Unweighted base: Poorest 20% of households (n = 802 - 970), Older age (65+) (n = 6,046 - 6,437).

Source: Understanding Society (2013/14, 2014/15, 2015/16, 2016/17).

## Annex

- Defining subgroups of older people
- Defining indicators of *Health and wellbeing*
- Defining indicators of *Financial Security*
- Defining indicators of *Social Connectedness*

## Defining subgroups of older people

### Subgroup: Oldest old

Year of survey: All years

Survey question: *What is your date of birth?*

**Subgroup definition: Older people aged 85+ (n=580)**

		Age group														
		16-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Life stage	Young adult (16-24)	45%	55%													
	Working age (25-64)			10%	11%	12%	12%	14%	14%	14%	12%					
	Older age (65+)											31%	26%	18%	13%	11%
Total		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
		1585	1801	1566	1803	2192	2190	2538	2367	2310	2019	2095	1738	1203	782	<b>580</b>

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

**Subgroup: Black, Asian and Minority Ethnic**

Year of survey: All years

Survey question: *What is your ethnic group?*

**Subgroup definition: Older people who describe themselves as Asian (n=358) or Black (n=162)**

		Ethnic group				Total
		White	Asian	Black	Mixed background	
Life stage	Young adult (16-24)	86%	7%	3%	4%	100%
	Working age (25-64)	90%	6%	2%	2%	100%
	Older age (65+)	97%	2%	1%	1%	100%
Life stage	Young adult (16-24)	2209	706	255	202	3372
	Working age (25-64)	12557	2733	1027	553	16870
	Older age (65+)	5778	<b>358</b>	<b>162</b>	68	6366

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

**Subgroup: LGBT+**

Year of survey: 2011/12

Survey question: *Which of the following options best describes how you think of yourself?*1 *Heterosexual or Straight*2 *Gay or Lesbian*3 *Bisexual*4 *Other*5 *Prefer not to say***Subgroup definition: Older people who describe themselves as gay or lesbian, bisexual, or other (n=245)**

		sexual orientation		Total
		heterosexual or straight	Gay/Lesbian/Bisexual/Other	
Life stage	Young adult (16-24)	90%	10%	100%
	Working age (25-64)	94%	6%	100%
	Older age (65+)	95%	5%	100%
Life stage	Young adult (16-24)	732	78	810
	Working age (25-64)	10971	734	11705
	Older age (65+)	4834	<b>245</b>	5079

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17 (sexuality recorded in 2011/12)

**Subgroup: Low income**

Year of survey: All years

Survey question: Total net household income from all sources (earnings, pensions, benefits, etc.), equivalised and put into quintiles.

**Subgroup definition: Older people in the lowest total net household income quintile (n=966)**

		Net (Equivalised) household income AHC (quintiles)					Total
		Poorest households	2nd poorest	Middle incomes	2nd richest	Richest households	
Life stage	Young adult (16-24)	23%	21%	20%	20%	16%	100%
	Working age (25-64)	18%	19%	20%	21%	22%	100%
	Older age (65+)	16%	22%	21%	20%	21%	100%
Life stage	Young adult (16-24)	857	688	687	613	464	3309
	Working age (25-64)	3255	3164	3333	3523	3552	16827
	Older age (65+)	<b>966</b>	1360	1343	1308	1376	6353

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

## **Subgroup: Physical health/functioning**

Year of survey: All years

Survey question: The SF-12 is a multipurpose suite of 12 questions designed to measure mental and physical functioning:

- i) *In general, would you say your health is...Excellent / Very good / Good / Fair / Poor  
Now I'm going to read a list of activities that you might do during a typical day. As I read each item, please tell me if your health now limits you a lot, limits you a little, or does not limit you at all in these activities.*
- ii) *Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf...Yes, limited a lot / Yes, limited a little / No, not limited at all*
- iii) *Climbing several flights of stairs...Yes, limited a lot / Yes, limited a little / No, not limited at all*

*During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?*

- iv) *Accomplished less than you would like...All / Most / Some / A little / None of the time*
- v) *Were you limited in the kind of work or other regular daily activities you do...All / Most / Some / A little / None of the time*

*During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?*

- vi) *Accomplished less than you would like...All / Most / Some / A little / None of the time*
- vii) *Were you limited in the kind of work or other regular daily activities you do...All / Most / Some / A little / None of the time*
- viii) *During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)...Not at all / A little bit / Moderately / Quite a bit / Extremely*

*These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...*

- ix) *Have you felt calm and peaceful...All / Most / Some / A little / None of the time*
- x) *Had a lot of energy...All / Most / Some / A little / None of the time*
- xi) *Felt downhearted and depressed...All / Most / Some / A little / None of the time*
- xii) *During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.) ...All / Most / Some / A little / None of the time*

The questions are combined, scored and weighted to create two scales of mental and physical health, each ranging from 0-100 where a zero score indicates the lowest level of health and 100 indicates the highest level of health. The Physical Component Summary of the SF-12 questionnaire can be sub-divided into four categories:

- 50 or more: no health problem
- 40-49: mild health problem
- 30-39: moderate health problem
- Below 30: severe health problem

**Sub-group definition: Older people with a severe physical health problem (n=1041)**

		SF-12 Physical Component Summary (PCS)				
		No disability	Mild disability	Moderate disability	Severe disability	Total
Life stage	Young adult (16-24)	83%	13%	3%	1%	100%
	Working age (25-64)	69%	17%	8%	6%	100%
	Older age (65+)	37%	25%	20%	19%	100%
Life stage	Young adult (16-24)	2425	403	115	26	2969
	Working age (25-64)	10526	2746	1356	923	15551
	Older age (65+)	2202	1445	1142	<b>1041</b>	5830

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

## **Subgroup: Mental health/functioning**

Year of survey: All years

Survey question: The SF-12 is a multipurpose suite of 12 questions designed to measure mental and physical functioning:

- i) *In general, would you say your health is...Excellent / Very good / Good / Fair / Poor  
Now I'm going to read a list of activities that you might do during a typical day. As I read each item, please tell me if your health now limits you a lot, limits you a little, or does not limit you at all in these activities.*
- ii) *Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf...Yes, limited a lot / Yes, limited a little / No, not limited at all*
- iii) *Climbing several flights of stairs...Yes, limited a lot / Yes, limited a little / No, not limited at all*

*During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?*

- iv) *Accomplished less than you would like...All / Most / Some / A little / None of the time*
- v) *Were you limited in the kind of work or other regular daily activities you do...All / Most / Some / A little / None of the time*

*During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?*

- vi) *Accomplished less than you would like...All / Most / Some / A little / None of the time*
- vii) *Were you limited in the kind of work or other regular daily activities you do...All / Most / Some / A little / None of the time*
- viii) *During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)...Not at all / A little bit / Moderately / Quite a bit / Extremely*

*These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...*

- ix) *Have you felt calm and peaceful...All / Most / Some / A little / None of the time*
- x) *Had a lot of energy...All / Most / Some / A little / None of the time*
- xi) *Felt downhearted and depressed...All / Most / Some / A little / None of the time*
- xii) *During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.) ...All / Most / Some / A little / None of the time*

The questions are combined, scored and weighted to create two scales of mental and physical health, each ranging from 0-100 where a zero score indicates the lowest level of health and 100 indicates the highest level of health. The Mental Component Summary of the SF-12 questionnaire can be sub-divided into four categories:

- 50 or more: no health problem
- 40-49: mild health problem
- 30-39: moderate health problem
- Below 30: severe health problem

**Sub-group definition: Older people with a severe mental health disability (n=185)**

### Mental health by Life stage

SF-12 Mental Component Summary (PCS)

		No disability	Mild disability	Moderate disability	Severe disability	Total
Life stage	Young adult (16-24)	46%	28%	17%	9%	100%
	Working age (25-64)	50%	30%	14%	6%	100%
	Older age (65+)	65%	23%	9%	3%	100%
Life stage	Young adult (16-24)	1373	837	496	263	2969
	Working age (25-64)	7825	4615	2167	944	15551
	Older age (65+)	3793	1316	536	<b>185</b>	5830

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

**Subgroup: Living in rural area**

Year of survey: All years

Survey question: This is derived from the Office for National Statistics Rural and Urban Classification of Output Areas. The indicator assumes a value of (1) if the address falls within urban settlements with a population of 10,000 or more, or (2) otherwise.

**Sub-group definition: Older people living in a rural area (n=1,698)****Rurality by Life stage**

		Urban or rural area, derived		Total
		urban area	rural area	
Life stage	Young adult (16-24)	83%	17%	100%
	Working age (25-64)	80%	20%	100%
	Older age (65+)	73%	27%	100%
Life stage	Young adult (16-24)	2935	451	3386
	Working age (25-64)	13973	3002	16975
	Older age (65+)	4698	<b>1698</b>	6396

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

**Subgroup: Without children**

Year of survey: 2015/16

Survey question: *Number of own children in the household. Includes natural children, adopted children and step children, under age of 16. Uses questions about age and relationships of household members.*

Survey question: *We now have a few questions about contact you have with family members not living here with you. Excluding relatives who are living in this household with you at the moment, can you tell me which of these types of relatives you have alive at the moment?*

- *Mother*
- *Father*
- *Son(s)/daughter(s)*
- *Brothers/sisters*
- *Grandchildren*
- *Grandparents*
- *Great Grandchildren*
- *Great Grandparents*
- *Step/adoptive mother*
- *Step/adoptive father*
- *None of these*

**Sub-group definition: Older people who do not have any living children (n=935)**

### Without children by Life stage

		Without children		Total
		Living with or child/ren alive	Without children	
Life stage	Young adult (16-24)	6%	94%	100%
	Working age (25-64)	65%	35%	100%
	Older age (65+)	85%	15%	100%
Life stage	Young adult (16-24)	115	2358	2473
	Working age (25-64)	10590	5331	15921
	Older age (65+)	5177	<b>935</b>	6112

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17 (without children status recorded in 2015/16)

## Subgroup: Carer

Year of survey: All years

Survey question: *Is there anyone living with you who is sick, disabled or elderly whom you look after or give special help to (for example, a sick, disabled or elderly relative, husband, wife or friend etc)?* (Note to interviewer: Occasionally a person may not think of the care they provide as special because they either may have been looking after this person for a long time or because they view it as a natural obligation to look after a close relative, or because they think it normal to provide special care for the elderly. In some cases, you may already know of someone in the household who is infirm or disabled. If you have reason to believe that someone within the household is receiving regular care because of age, infirmity or disability but this is not reported by the respondent you should ask 'And what about (*name of person*)? Do you look after them at all?' If the respondent does not agree, code answer given.

*Now thinking about everyone who you look after or provide help for, both those living with you and not living with you - in total, how many hours do you spend each week looking after or helping them?*

**Interviewer Instruction:** If it varies probe whether usually under or over 20 hours a week include care both inside and outside household

1 0 - 4 hours per week

2 5 - 9 hours per week

3 10 - 19 hours per week

4 20 - 34 hours per week

5 35 - 49 hours per week

6 50 - 99 hours per week

7 100 or more hours per week/continuous care

8 Varies under 20 hours

9 Varies 20 hours or more

97 Other

**Interviewer Instruction:** Please note that if respondent spends time caring for people within and outside the household the total time spent on both together should be entered. Include any travelling time or time spent sleeping at dependant's house if dependant is outside carer's household. If continuous care is given use code 7.

**Sub-group definition: Older people who care for someone else inside or outside their household for 35 or more hours per week (n=245) and those who care for 1-34 hours per week (n=957)**

### Carers by Life stage

		Cares for someone (inside or outside household)			Total
		Carer (35+ hours per week)	Carer (1-34 hours per week)	Not a carer	
Life stage	Young adult (16-24)	1%	7%	92%	100%
	Working age (25-64)	3%	15%	82%	100%
	Older age (65+)	4%	15%	81%	100%
Life stage	Young adult (16-24)	20	222	2871	3113
	Working age (25-64)	463	2359	13371	16193
	Older age (65+)	<b>245</b>	<b>957</b>	4944	6146

Row percentage per life stage, unweighted count

Base: Adults living in England

Source: Understanding Society survey, 2016/17

## Defining indicators of *Health and wellbeing*

### Social care

Year of survey: 2015/16

Survey question: *The next few questions are about tasks that some people may need help with and about help that you may have received in the last month. Please think only about help you need because of long-term physical or mental ill-health, disability or problems relating to old age. For each task, I'd like you to tell me which option applies to you.*

- *Do you usually manage to get up and down stairs or steps...*
  - *Do you usually manage to get around the house (except for any stairs)...*
  - *Do you usually manage to get in and out of bed...*
  - *Do you usually manage to cut your toenails...*
  - *Do you usually manage to bath, shower or wash all over...*
  - *Do you manage to use the toilet, including getting up and down...*
  - *Do you manage to eat, including cutting up food...*
  - *Do you manage to wash your face and hands...*
  - *Do you manage to dress or undress, including putting on shoes and socks...*
  - *Do you manage to take the right amount of medicine at the right times...*
- On your own / Only with help from someone else / or Not at all?*

Survey question: Asked to people who said 'only with help from someone else' or 'not at all' to list of tasks above: *In the last month, who has helped you with personal things around the home?* Interviewer: add if necessary: *"Please only think about help received because of long-term physical or mental ill-health, disability or problems relating to old age"*

- 1 *Husband / Wife / Partner*
- 2 *Son (including stepson, adopted son or son-in-law)*
- 3 *Daughter (including stepdaughter, adopted daughter or daughter-in-law)*
- 4 *Grandchild (including great grandchildren)*
- 5 *Brother / Sister (including step/adopted/in-laws)*
- 6 *Niece / Nephew*
- 7 *Mother / Father (including mother-in-law/father-in-law)*
- 8 *Other family member*
- 9 *Friend*
- 10 *Neighbour*
- 96 *None of the above*

Survey question: Asked to people who said 'only with help from someone else' or 'not at all' to list above: *And, which of these people helped you with personal things around the home*

- 1 *Home care worker / Home help / Personal Assistant*
- 2 *A member of the reablement / intermediate care staff team*
- 3 *Occupational Therapist / Physiotherapist / Nurse*
- 4 *Voluntary helper*
- 5 *Warden / Sheltered housing manager*
- 6 *Cleaner*
- 7 *Council's handyman*
- 97 *Other*
- 96 *None of the above*

**Indicator definition: In need but does not receive care (formal or informal)**

**Indicator definition: Receiving care (formal or informal)**

**Indicator definition: Receiving formal care**

**Indicator definition: Receiving informal care**

### Physical health limits moderate activities

Year of survey: All years bar 2009/10

Survey question: *Now I'm going to read a list of activities that you might do during a typical day. As I read each item, please tell me if your health now limits you a lot, limits you a little, or does not limit you at all in these activities.*

- *Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf.*
- 1 *Yes, limited a lot*
  - 2 *Yes, limited a little*
  - 3 *No, not limited at all*

**Indicator definition: Physical health limits moderate activities a lot**

### Physical health meant accomplishes less

Year of survey: All years bar 2009/10

*The following two questions ask you about your physical health and your daily activities. During the past 4 weeks how much of the time have you :*

- *Accomplished less than you would like as a result of your physical health?*
  - *Were you limited in the kind of work or other regular daily activities you do as a result of your physical health?*
- 1 *All of the time*
  - 2 *Most of the time*
  - 3 *Some of the time*
  - 4 *A little of the time*
  - 5 *None of the time*

**Indicator definition: Physical health meant accomplishes less most or all of the time**

### Physical health limits kind of work most or all of the time

Year of survey: All years bar 2009/10

*The following two questions ask you about your physical health and your daily activities. During the past 4 weeks how much of the time have you :*

- *Accomplished less than you would like as a result of your physical health?*
  - *Were you limited in the kind of work or other regular daily activities you do as a result of your physical health?*
- 1 *All of the time*
  - 2 *Most of the time*
  - 3 *Some of the time*
  - 4 *A little of the time*
  - 5 *None of the time*

**Indicator definition: Physical health limits kind of work most or all of the time**

## Mental wellbeing

Year of survey: All years

Survey question: The 12-item General Health Questionnaire (GHQ-12) is a commonly used screening instrument for measuring non-psychotic and minor psychiatric mental disorders. It contains a suite of 12 questions: *The next questions are about how you have been feeling over the last few weeks (better than usual, same as usual, less than usual, much less than usual):*

- *concentration*
- *loss of sleep*
- *playing a useful role*
- *capable of making decisions*
- *constantly under strain*
- *problem overcoming difficulties*
- *enjoy day-to-day activities*
- *ability to face problems*
- *unhappy or depressed*
- *losing confidence*
- *believe worthless*
- *general happiness*

Responses are scored using a bi-modal method e.g. *better than usual* (0), *same as usual* (0), *less than usual* (1), *much less than usual* (1) and the score for each item is summed to provide a score for each respondent that ranges from 0-12.

**Indicator definition: A score of 4-12 on the General Health Questionnaire, which indicates possible psychiatric disorder (n=899)**

## Emotional problems

Year of survey: All years bar 2009/10

Survey question: *During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?*

- *Accomplished less than you would like*

1 *All of the time*

2 *Most of the time*

3 *Some of the time*

4 *A little of the time*

5 *None of the time*

**Indicator definition: Mental health meant accomplishes less most or all of the time**

### Feels calm and peaceful

Year of survey: All years bar 2009/10

Survey question: *These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...*

- *Have you felt calm and peaceful?*

- 1 *All of the time*
- 2 *Most of the time*
- 3 *Some of the time*
- 4 *A little of the time*
- 5 *None of the time*

**Indicator definition: Feels calm and peaceful a little or none of the time**

### Has a lot of energy

Year of survey: All years bar 2009/10

Survey question: *These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...*

- *Did you have a lot of energy?*

- 1 *All of the time*
- 2 *Most of the time*
- 3 *Some of the time*
- 4 *A little of the time*
- 5 *None of the time*

**Indicator definition: Has a lot of energy a little or none of the time**

### Satisfaction with health

Year of survey: All years

Survey question: *Here are some questions about how you feel about your life. Please choose the number which you feel best describes how dissatisfied or satisfied you are with the following aspects of your current situation.*

- *Your health.*

- 1 *Completely dissatisfied*
- 2 *Mostly dissatisfied*
- 3 *Somewhat dissatisfied*
- 4 *Neither satisfied nor dissatisfied*
- 5 *Somewhat satisfied*
- 6 *Mostly satisfied*
- 7 *Completely satisfied*

**Indicator definition: Mostly / Completely dissatisfied with health**

## Satisfaction with life overall

Year of survey: All years

Survey question: *Here are some questions about how you feel about your life. Please choose the number which you feel best describes how dissatisfied or satisfied you are with the following aspects of your current situation.*

- *Your life overall.*

1 *Completely dissatisfied*

2 *Mostly dissatisfied*

3 *Somewhat dissatisfied*

4 *Neither satisfied nor dissatisfied*

5 *Somewhat satisfied*

6 *Mostly satisfied*

7 *Completely satisfied*

**Indicator definition: Mostly / Completely dissatisfied with life overall**

## Eating fruit and vegetables

Year of survey: 2010/11, 2013/14, 2015/16

Survey question: *Including tinned, frozen, dried and fresh fruit, on how many days in a usual week do you eat fruit?*

1 *Never*

2 *1 - 3 Days*

3 *4 - 6 Days*

4 *Every day*

*Including tinned, frozen and fresh vegetables, on how many days in a usual week do you eat vegetables? Do not include potatoes, crisps or chips.*

1 *Never*

2 *1 - 3 Days*

3 *4 - 6 Days*

4 *Every day*

**Indicator definition: Eats fruit and vegetables 3 days a week or less**

## Alcohol consumption

Year of survey: 2015/16

Survey question: *How often have you had 6 or more units (female) / 8 or more units (male), on a single occasion in the last year...Does not drink / Never / Less than monthly / Monthly Weekly / Daily or almost daily*

**Indicator definition: Drinks 6+ (females) / 8+ (males) alcoholic units daily or almost daily**

## Smoker

Year of survey: 2013/14, 2014/15, 2015/16

Survey question: *Do you smoke cigarettes? Yes / No*

**Indicator definition: Smokes cigarettes**

## Carer

Year of survey: All years

Survey question: *Is there anyone living with you who is sick, disabled or elderly whom you look after or give special help to (for example, a sick, disabled or elderly relative, husband, wife or friend etc)?* (Note to interviewer: Occasionally a person may not think of the care they provide as special because they either may have been looking after this person for a long time or because they view it as a natural obligation to look after a close relative, or because they think it normal to provide special care for the elderly. In some cases, you may already know of someone in the household who is infirm or disabled. If you have reason to believe that someone within the household is receiving regular care because of age, infirmity or disability but this is not reported by the respondent you should ask 'And what about (*name of person*)? Do you look after them at all?' If the respondent does not agree, code answer given.

*Now thinking about everyone who you look after or provide help for, both those living with you and not living with you - in total, how many hours do you spend each week looking after or helping them?*

**Interviewer Instruction:** If it varies probe whether usually under or over 20 hours a week include care both inside and outside household

1 0 - 4 hours per week

2 5 - 9 hours per week

3 10 - 19 hours per week

4 20 - 34 hours per week

5 35 - 49 hours per week

6 50 - 99 hours per week

7 100 or more hours per week/continuous care

8 Varies under 20 hours

9 Varies 20 hours or more

97 Other

**Interviewer Instruction:** Please note that if respondent spends time caring for people within and outside the household the total time spent on both together should be entered. Include any travelling time or time spent sleeping at dependant's house if dependant is outside carer's household. If continuous care is given use code 7.

**Indicator definition: Cares for someone (inside or outside household) 35+ hours per week**

**Indicator definition: Cares for someone (inside or outside household) 1-34 hours per week**

### **Hospital or clinic in-patient visits**

Year of survey: 2015/16, 2016/17

Survey question: *In the last 12 months, have you been in hospital or clinic as an in-patient overnight or longer...Yes / No*

**Indicator definition: Hospital or clinic in-patient visit in last 12 months**

### **Visits to GP**

Year of survey: 2015/16, 2016/17

Survey question: *In the last 12 months, approximately how many times have you talked to, or visited a GP or family doctor about your own health? Please do not include any visits to a hospital...None / 1-2 / 3-5 / 6-10 / More than 10*

**Indicator definition: More than 10 visits to GP in last 12 months**

## Defining indicators of *Financial Security*

### Expenditure on food and groceries

Year of survey: All years

Survey question: *About how much has your household spent in total on food and groceries in the last four weeks from a supermarket or other food shop or market? Please do not include alcohol but do include non-food items such as paper products, home cleaning supplies and pet foods.*

Equivalisation scales are used to adjust expenditure according to household size and composition (one would expect a couple with two children to spend more on food and groceries than a single person). There are various scales available, and we use the OECD (Organisation for Economic Co-operation and Development)-modified equivalence scale, which is used widely across Europe (including EUROSTAT and UK government departments). The scale is applied to the amount of expenditure to adjust it to reflect the different resource needs of single adults, any additional adults in the household, and children in various age groups. The scale is calculated by summing up each household member's equivalence value:

Type of Household Member`	Equivalence value
First adult	1.0
Additional adult	0.5
Child aged: 14 and over	0.5
Child aged: 0-13	0.3

Expenditure is then divided by the equivalence value to give 'equivalised expenditure'. Individuals are then split into five equal groups (quintiles) from the lowest to highest equivalised expenditure.

**Indicator definition: Older people in the lowest quintile (20%) of equivalised expenditure**

### Low income

Year of survey: All years

The survey collects detailed current income information from all adults in the household allowing for calculation of disposable household income. That is to say the sum, across all household members, of current income (after the deduction of Income Tax and National Insurance contributions) from employment and self-employment, investments and savings, private and occupational pensions, Social Security benefits and tax credits. This income is equivalised to take into account family size and composition (using the OECD-modified equivalence scale, see discussion above). Housing costs, including rent service charges, ground rents, mortgage interest (but not capital) and buildings insurance, are deducted from this total. Individuals are then split into five equal groups (quintiles) from the lowest to highest incomes.

**Indicator definition: Poorest income quintile (after housing costs)**

### Current financial situation

Year of survey: All years

Survey question: *How well would you say you yourself are managing financially these days? Living comfortably Living comfortably / Doing alright Doing alright / Just about getting by Just about getting by / Finding it quite difficult Finding it quite difficult / Finding it very difficult*

**Indicator definition: Finding it quite or very difficult to get by financially**

### Future financial situation

Year of survey: All years

Survey question: *Looking ahead, how do you think you will be financially a year from now, will you be...Better off / Worse off than you are now / or about the same?*

**Indicator definition: Think will be financially worse off next year than are now**

### Satisfaction with income

Year of survey: All years

Survey question: *Here are some questions about how you feel about your life. Please choose the number which you feel best describes how dissatisfied or satisfied you are with the following aspects of your current situation. The income of your household..... Completely dissatisfied Completely dissatisfied / Mostly dissatisfied Mostly dissatisfied / Somewhat dissatisfied Somewhat dissatisfied / Neither satisfied nor dissatisfied Neither Satisfied nor Dissatisfied / Somewhat satisfied Somewhat satisfied / Mostly satisfied Mostly satisfied / Completely satisfied?*

**Indicator definition: Mostly/completely dissatisfied with household income**

### Household bills

Year of survey: All years

Survey question: *Sometimes people are not able to pay every household bill when it falls due. May we ask, are you up to date with all your household bills such as electricity, gas, water rates, telephone and other bills or are you behind with any of them? Up to date with all bills Up to date with all bills / Behind with some bills Behind with some bills / Behind with all bills*

**Indicator definition: Behind with some or all household bills**

## Housing tenure

Year of survey: All years

Survey question: *Does your household own this accommodation outright, is it being bought with a mortgage, is it rented or does it come rent-free?*

**Indicator definition: Owned with mortgage**

**Indicator definition: Private rent**

**Indicator definition: Social rent**

## Cold home

Year of survey: Years 2009/10, 2010/11, 2012/13, 2014/15, 2016/17

Survey question: *For the next question please just answer yes or no. In winter, are you able to keep this accommodation warm enough?*

**Indicator definition: Not able to keep home warm enough in winter**

## In receipt of benefits

Year of survey: All years

Survey question: *Are you currently receiving any of these payments ,either just yourself or jointly?...Incapacity Benefit / Employment and Support Allowance / Severe Disablement Allowance / Carer's Allowance Carer's Allowance / Disability Living Allowance / Personal Independence Payments / Attendance Allowance / Industrial Injury Disablement Benefit / Sickness and Accident Insurance / Any other disability related benefit or payment / None of these*

*Are you currently receiving any of these payments ,either just yourself or jointly?...Maternity Allowance / In-Work Credit for Lone Parents / Return to Work Credit / Working Tax Credit / Council Tax Reduction / Rate Rebate / Housing Benefit / Rent Rebate / Any other state benefit or credit / None of these*

*Are you currently receiving any of these payments ,either just yourself or jointly?...NI Pension or State Retirement (Old Age) Pension / A pension from a previous employer / A pension from a spouse's previous employer / Pension Credit including Guarantee Credit & Savings Credit / Private Pension or Annuity / Widow's or War Widow's Pension / Widowed Mother's Allowance, Parent's Allowance or Bereavement Allowance / War Disablement Pension / None of these*

**Indicator definition: Claims Attendance Allowance**

**Indicator definition: Claims Carer's Allowance**

**Indicator definition: Claims Housing Benefit**

**Indicator definition: Claims Pension Credit**

## Consumer durables

Year of survey: All years

Survey question: *Could you please tell me which of the following items you have in your (part of the) accommodation... Television set / DVD/Blu-Ray player / Deep freeze or fridge freezer (EXCLUDE: fridge only) / Washing machine / Tumble drier / Dish washer / Microwave oven / Landline telephone / Mobile telephone (anyone in household) / Or none of the above?*

An index was created that adds up how many consumer durable items a person does not have. Instead of counting each item equally, a weight is given to each item that reflects the proportion of people that have the item (hence lacking an item that a lot of people have brings a bigger weight than if lacking an item that only few people have). The indicator captures the 20 per cent of people with the highest score on the index.

**Indicator definition: Most deprived quintile of consumer durables**

## Annual holiday

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *I am going to read out a list of questions related to the standards of living of people of pensionable age. These are standard questions asked of every household in the study. For each one, please answer yes or no. Do you take a holiday away from home for a week or more at least once a year?*

**Indicator definition: Does not have annual holiday away from home**

## State of home

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *I am going to read out a list of questions related to the standards of living of people of pensionable age. These are standard questions asked of every household in the study. For each one, please answer yes or no. Is your home kept in a good state of repair?*

**Indicator definition: Home is not in good state of repair**

## Damp

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *I am going to read out a list of questions related to the standards of living of people of pensionable age. These are standard questions asked of every household in the study. For each one, please answer yes or no. Do you have a damp-free home?*

**Indicator definition: Home is not damp-free**

### **Access to private transport**

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *Do all the people living here of pensionable age / Do you have access to a car or taxi whenever one is needed?*

**Indicator definition: Does not have access to car-taxi**

### **Cannot pay unexpected expense**

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *Would all of the people living here of pensionable age {if HHGRID.hhsize greater than 1} / Would you {if HHGRID.hhsize = 1} be able to pay an unexpected expense of £200?*

**Indicator definition: Cannot pay unexpected expense**

## Defining indicators of *Social Connectedness*

### Numbers of people who live alone

Year of survey: All years

Derived variable: Calculated in the survey script by summing the number of individuals per household from the household grid. This may include absent household members. Note that this count could include persons who are enumerated in the household and are subsequently dropped.

**Indicator definition: Living alone**

### Frequency of volunteering

Year of survey: 2010/11, 2012/13, 2014/15, 2016/17

Survey question: *In the last 12 months, have you given any unpaid help or worked as a volunteer for any type of local, national or international organisation or charity?... Yes / No*

Survey question: *Including any time spent at home or elsewhere, about how often over the last 12 months have you generally done something to help any of these organisations?*

**Interviewer Instruction:** If respondent volunteers for more than one group or agency, please total time spent in all groups together

1 *On 3 or more days a week*

2 *Twice a week*

3 *Once a week*

4 *Once a fortnight*

5 *At least once a month*

6 *Quite often but not regularly*

7 *Just a few times*

8 *One-off activity*

9 *You helped or worked on a seasonal basis?*

**Indicator definition: Volunteered less than once a week over the last 12 months**

### Level of interest in politics

Year of survey: All years bar 2016/17

Survey question: *How interested would you say you are in politics? Would you say you are...*

- 1 Very
- 2 Fairly
- 3 Not very
- 4 Or not at all interested?

**Indicator definition: Not very or at all interested in politics**

### Don't have any say in what the government does

Year of survey: 2011/12, 2014/15

Survey question: *How far do you agree or disagree with the following statements? People like me don't have any say in what the government does.*

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

**Indicator definition: Strongly agree or agree that people like me don't have any say in what the government does**

### Arts activities frequency

Year of survey: 2010/11, 2013/14

Survey question: (Arts1A) *I am now going to ask you about activities that you may have done in the last 12 months. In the last 12 months, have you done any of these activities? Please only include activities done in your own time or for the purpose of voluntary work.*

- 1 Dance, including ballet
- 2 Sang to an audience or rehearsed for a performance (not karaoke)
- 3 Played a musical instrument
- 4 Written music
- 5 Rehearsed or performed in a play/drama, opera/opera or musical theatre
- 6 Taken part in a carnival or street arts event (e.g. as a musician, dancer or costume maker)
- 7 Learned or practised circus skills
- 96 None of these

Survey question:(Arts1B) *And in the last 12 months, have you done any of these activities? (Please only include activities done in your own time or for the purpose of voluntary work.)*

9 *Painting, drawing, printmaking or sculpture*

10 *Photography, film or video making as an artistic activity (not family or holidays)*

11 *Used a computer to create original artworks or animation*

12 *Textile crafts, wood crafts or any other crafts, such as embroidery, knitting, wood turning, furniture making, pottery or jewellery*

13 *Read for pleasure (not newspapers, magazines or comics)*

14 *Written any stories, plays or poetry*

15 *Been a member of a book club, where people meet up to discuss and share books*

96 *None of these*

Survey question: *You said you have done (selections from Arts1A and Arts1B). Thinking about this activity (if one activity mentioned at Arts1A / Arts1B) / all these activities (if more than one activity mentioned at Arts1A / Arts1B), how often in the last 12 months have you done activities like this? Remember only include activities done in your own time or for the purposes of voluntary work.*

1 *At least once a week*

2 *Less often than once a week but at least once a month*

3 *Less often than once a month but at least 3 or 4 times a year*

4 *Twice in the last 12 months*

5 *Once in the last 12 months*

**Indicator definition: Has done an arts activity less than once a week in the last 12 months**

### **Frequency of travel by car**

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *How frequently do you travel by private car or van - whether as a driver or passenger? Please count a single trip as one journey and each return trip as two.*

**Interviewer Instruction:** Only include travel within the UK over the last year or so.

1 *At least once a day*

2 *Less than once a day but at least 3 times a week*

3 *Once or twice a week*

4 *Less than that but more than twice a month*

5 *Once or twice a month*

6 *Less than that but more than twice a year*

7 *Once or twice a year*

8 *Less than that or never*

**Indicator definition: Travels by private car or van less than once a day**

### Frequency of travel by bus

Year of survey: 2012/13, 2014/15, 2016/17

Survey question: *How frequently do you use an ordinary bus? Please count a single trip as one journey and each return trip as two.*

**Interviewer Instruction:** Only include travel within the UK over the last year or so.

- 1 *At least once a day*
- 2 *Less than once a day but at least 3 times a week*
- 3 *Once or twice a week*
- 4 *Less than that but more than twice a month*
- 5 *Once or twice a month*
- 6 *Less than that but more than twice a year*
- 7 *Once or twice a year*
- 8 *Less than that or never*

**Indicator definition: Uses ordinary bus less than once a week**

### Standard of public transport

Year of survey: 2011/12, 2014/15

Survey question: *And how would you rate public transport services in your local area?*

- 1 *Excellent*
- 2 *Very good*
- 3 *Fair*
- 4 *Poor*
- 5 *SPONTANEOUS No opinion/cannot rate*

**Indicator definition: Standards of public transport services in local are fair or poor**

### Extent of worry about crime

Year of survey: 2011/12, 2014/15

Survey question: *Now I have some questions about crime. Do you ever worry about the possibility that you, or anyone else who lives with you, might be the victim of crime?... Yes / No*

Survey question: *Is this a big worry, a bit of a worry, or an occasional doubt?*

- 1 *Big worry*
- 2 *Bit of a worry*
- 3 *Occasional doubt*

**Indicator definition: Occasional doubt / bit of a worry / big worry about becoming a victim of crime**

### Number of close friends

Year of survey: 2011/12, 2014/15

Survey question: *Now some questions about your friends. What proportion of your friends are of a similar age as you?*

- 1 All similar
- 2 more than half
- 3 about half
- 4 or less than half?
- 5 SPONTANEOUS: Don't have any friends

Survey question: *Some people consider family members as friends. What proportion of your friends are family members?*

- 1 All of them
- 2 more than half
- 3 about half
- 4 or, less than half?
- 5 Do not have any friends / consider family as friends.

Survey question: *How many close friends would you say you have?*

**Interviewer Instruction:** Enter number

**Indicator definition:** Has two close friends or less

### Number of hours spent interacting with friends through social websites

Year of survey: 2011/12, 2014/15

Survey question: *Do you belong to any social networking web-sites?... Yes / No*

**Interviewer Instruction:** Add if necessary: "This might include for business or professional reasons, dating, or just chatting or interacting with friends".

Survey question: *How many hours do you spend chatting or interacting with friends through social web-sites on a normal week day, that is Monday to Friday?*

- 1 None
- 2 Less than an hour
- 3 1-3 hours
- 4 4-6 hours
- 5 7 or more hours

**Indicator definition:** Does not belong to a social website

## Goes out socially

Year of survey: 2011/12, 2014/15

Survey question: *Do you go out socially or visit friends when you feel like it?... Yes / No*

**Indicator definition: Does not go out socially or visit friends when feel like it**

## Reason for not going out socially

Year of survey: 2011/12, 2014/15

Survey question: *What stops you from going out socially or visiting friends when you want to?...Mentioned / Not mentioned*

- 1 *Too busy / not enough time*
- 2 *Financial reasons*
- 3 *A health condition, illness or impairment, or disability*
- 4 *No public transport available*
- 5 *Public transport is infrequent or unreliable*
- 6 *Can't access the public transport that is available*
- 7 *No access to a car as a driver or passenger*
- 8 *Nowhere to go in the area*
- 9 *No-one to go with*
- 10 *Attitudes of other people*
- 11 *Fear of crowds*
- 12 *Fear of crime*
- 13 *Anxiety / lack of confidence*
- 14 *Caring responsibilities*
- 97 *Other reasons*

**Indicator definition: Health condition, illness or impairment, or disability stops you from going out socially or visiting friends**

## Frequency of seeing child(ren) over 16

Year of survey: 2009/10, 2011/12, 2013/14, 2015/16

Survey question: *We now have a few questions about contact you have with family members not living here with you. Excluding relatives who are living in this household with you at the moment, can you tell me which of these types of relatives you have alive at the moment?*

- 1 Mother
- 2 Father
- 3 Son(s)/daughter(s)
- 4 Brothers/sisters
- 5 Grandchildren
- 6 Grandparents
- 7 Great Grandchildren
- 8 Great Grandparents
- 9 Step/adoptive mother
- 10 Step/adoptive father
- 96 None of these

Survey question: *Are any of your children living outside the household aged under 16?*

- 1 Yes, all under 16
- 2 Yes, at least one under 16
- 3 None under 16

Survey question: *Thinking now about your children aged 16 or over. If you have more than one son or daughter aged 16 or over not living with you please think about the one with whom you have the most contact. Apart from via Skype or webcam, how often do you see your son/daughter?*

- 1 Daily
- 2 At least once per week
- 3 At least once per month
- 4 Several times per year
- 5 Less often
- 6 Never

**Indicator definition: Apart from via Skype or webcam, sees child(ren) less than once a week (or has no children)**

### Frequency of other contact with child(ren) over 16

Year of survey: 2009/10, 2011/12, 2013/14, 2015/16

Survey question: *And how often do you have contact by telephone, email, letter, Skype or webcam with your son/daughter (aged 16 or over)?*

**Interviewer Instruction:** If respondent has more than one son/daughter aged 16 or over not living here, question refers to the one respondent has the most contact with.

- 1 Daily
- 2 At least once per week
- 3 At least once per month
- 4 Several times per year
- 5 Less often
- 6 Never

**Indicator definition:** Has contact by telephone, email, letter, Skype or webcam with child(ren) less than once a week (or has no children)

### Training since last interview

Year of survey: All years bar 2009/10

Survey question: *In the last 12 months, that is since [interview month] [interview year - 1], have you done any [other] training schemes or courses, even if they are not finished yet? Please include any part-time or evening courses, training provided by an employer, day release schemes, apprenticeships and government training schemes... Yes / No*

**Indicator definition:** Has not done any training scheme or course in the last 12 months

### Library frequency

Year of survey: 2010/11, 2013/14

Survey question: *During the last 12 months, have you done any of the following at least once? Please only include activities done in your own time or for the purpose of voluntary work...Mentioned / Not mentioned*

**Interviewer Instruction:** Code all that apply.

- 1 Used a public library service
- 2 Been to an archive centre or records office
- 3 Visited a museum or gallery
- 96 None of these things

Survey question: *Please tell me how often in the last 12 months you have used a public library? (Again only include if used in your own time or for the purposes of voluntary work)*

1 *At least once a week*

2 *Less often than once a week but at least once a month*

3 *Less often than once a month but at least 3 or 4 times a year*

4 *Twice in the last 12 months*

5 *Once in the last 12 months*

**Indicator definition: Has used a public library less than once a month in the last 12 months**

### **Frequency of using the internet**

Year of survey: All years bar 2009/10 and 2010/11

Survey question: *How often do you use the internet for your personal use?*

1 *Every day*

2 *Several times a week*

3 *Several times a month*

4 *Once a month*

5 *Less than once a month*

6 *Never use*

7 *No access at home, at work or elsewhere*

**Indicator definition: No use of or access to internet at home, work, or elsewhere**

## Types of computer in household

Year of survey: 2016/17

Survey question: *Does your household have any of the following types of computer in your (part of the) accommodation...Not mentioned / Mentioned*

**Interviewer Instruction:** Code all that apply.

**Help:**

- Include both owned and rented items.
- Include items made available by the landlord for personal use by household members.
- Include second hand purchases. Include devices even if only used for games, excluding games consoles.
- Include computers used for business purposes by self-employed people, but not those provided by employers for work at home.
- Exclude any items which are broken and will not be repaired.
- Include hire-purchase and credit sales but not rentals with a future option to purchase.
- Exclude gifts or loans to household members from persons outside the household, but include gifts between household members.

1 Desktop computer

2 Laptop computer

3 Netbook computer

4 Tablet computer

5 Other

96 None of the above?

**Indicator definition: No tablet computer in the household or part of the accommodation**

