Objective

These two reports both published by the Joseph Rowntree Foundation in April 2007 examine the needs and resources of older people. A recurrent issue in social policy is how to fund long-term care, particularly in respect of older people. These issues are the focus of renewed interest with the establishment of the coalition Caring Choices, which is engaging in public debate through a series of seminars across the UK (Community Care, p12, 3 May 2007).

Much of the focus of those studies has been on the ageing of the population, patterns of need, and developing models of co-payment. But there are other vital issues that need to be addressed, such as understanding more about the needs and resources (in the widest sense) of people as they age.

Measuring Resources in Later Life analysed data about the needs and resources of older people, focusing particularly on poverty and hardship in later life, from five different data sets: the British Household Panel Survey the Expenditure and Food Survey the Poverty and Social Exclusion Survey of Britain the General Household Survey, and the Health Survey for England.

The second study, Understanding Resources in Later Life, is a complementary piece of work providing a qualitative examination of how older people use and value their resources, how they plan for retirement and for later life.

Findings and Analysis

Study one explored the connections between ageing and resources and found that age in itself is not a strong predictor of hardship. This finding runs contrary to assumptions that are often made. The authors suggest that those who live longest into old age tend - on average - to be the more affluent, while poorer people generally have a shorter life expectancy. Therefore “paying people more simply because they are older may not be cost-effective.” People also spend a smaller proportion of their income as they get older, although it is not clear what happens to the surplus income and whether this is saved in case of future care needs.

Nonetheless, these findings should not be misinterpreted as signalling the end of poverty in old age. The study confirmed that poverty is still an issue and “small but significant” proportions of older people live on such low incomes that they are unable, for example, to afford to insure their home contents, to replace or repair broken or worn out electrical goods or furniture or to keep their homes in a reasonable state of repair.

If advancing age is not necessarily a good predictor of poverty, neither it appears is it necessarily a good way of targeting resources on people with additional health and care needs.

The alternative of assessing levels of disability to determine eligibility for support or for extra financial support is more effective at targeting resources at those who need help, but runs the risk of missing those who fail to apply for additional support.

But there is also evidence of increasing ill-health as people live longer. This means policy needs to address the implications of declining health in later life and future generations of older people may be less healthy in general terms.

As the authors also explore, the whole question of need is one that is affected by changing aspirations and prevailing social attitudes. The authors found evidence that in future older people “will have higher aspirations than the current generation who experienced relatively low levels of affluence during their working lives”.

The second study examined the importance of a range of resources in the lives of older people. The qualitative research involved interviews with 91 older...
people aged between 65 and 84. This is the first round of a longitudinal study and two further rounds of interviewing are planned. In addition to income, the study also addressed health and well-being and wider social resources. The study found that respondents identified a clear hierarchy of the relative importance of different resources, with health being the most important. Declining health is most difficult for people who live alone and when it occurs unexpectedly.

Key among social resources is the family, which is seen as important as a source of happiness and as a "resource to draw on in times of need", although this is often accompanied by a fear of being a burden. The family tends to be of greater importance to older people whose other social networks have been eroded by the loss of friends.

The older people in the study revealed a range of attitudes to planning for later life. Whether or not people planned - or tried to plan - for the future was affected by an interplay of past circumstances, life events and attitudes. Most of those who had not planned financially for their retirement believed this has not been a realistic possibility (because of low income or unstable employment). A strong theme concerned the motivation to avoid debt, although as the authors note - younger respondents were less debt averse.

FURTHER INFORMATION
- Royal Commission on Long Term Care (1999), With respect to old age: Long term care - rights and responsibilities, Cm 4192-1, The Stationery Office
- Wanless, Sir Derek (2006), Securing Good Care for Older People: Report of the Wanless Social Care Review, The King’s
- Joseph Rowntree Foundation (1996), Inquiry into Meeting the Costs of Continuing Care: Report and Recommendations
- Joseph Rowntree Foundation (2006), Paying for Long Term Care: Moving Forward

PRACTICE IMPLICATIONS
Attitudes to old age
The assumptions made about the nature of old age may often be wrong. This is not just about social workers and other social care practitioners needing to challenge obviously ageist assumptions, but also about understanding that age of itself is not necessarily an indicator of other characteristics such as poverty, ill health or disability.

Changing Expectations
It is axiomatic that future generations of older people will have different (and higher) expectations for their lives than do current cohorts. This is also true of cohorts within the current older population. Those in their 60s and 70s may therefore have different expectations than their older peers, and there are issues about ensuring equity between these.

Health and Well-being
Health is the most valued resource for older people, but often this is only realised when it is no longer experienced. People whose health has deteriorated miss their earlier vitality. Loss of mobility is seen by older people as the biggest problem associated with ill health because of the threat it poses to continued independence. There are implications for further efforts to support people to remain fit and active for as long as possible.

Family Relationships
The death of the family and the collapse of social relationships have long been predicted, and it is clear that such interpretations are overly pessimistic. The findings from the study underline the continuing importance of family relationships in supporting older people (which for some is the only way they are able to continue to live independently), but also point to the reciprocity between generations.

Given the increased geographical mobility of people the authors highlight the possibility that future generations may be less likely to benefit from family members within easy reach.

Income and Resources
Planning for old age and making adequate financial provision is hard. Without some element of compulsion there will always be people who do not - for a range of reasons - make arrangements. For those who do there needs to be much greater confidence in the financial services industry. Younger people are far more likely to have debts and - in the longer term - may find it increasingly difficult to accumulate assets and savings, or indeed to see the value of doing so.

The authors reported widespread resentment among those people who have made efforts to save and to accumulate assets which then precludes them from financial help or requires them to spend down all their assets before getting support.

Poverty
Poverty remains an issue for many older people. For a small minority income is so restricted that people are unable to participate in normal social activity or benefit from the standards of living widely regarded as necessary. This has particular implications for the ability of older people to maintain reasonable housing conditions, and the need for a systematic approach to repairs and adaptations is identified by the authors.
Much policy debate assumes that people will work longer and retire later. How feasible this will be is unclear. Many of those in the studies had left employment before reaching pension age, often because of ill health. Given the evidence that the health of future generations of older people may not be improving (and could be getting worse) the authors comment that the prospects for longer working lives may be less good than often assumed.

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