

1.8 Summary

Chapter 2

The socio-demographic characteristics of the ELSA population

- Marriage was highly prevalent in the cohorts studied here, but at younger ages, living with a partner became more common.
- Among people reported as having children, the most common number of children was two, with the proportion of people who reported having one child increasing with age.
- Only a small proportion of people in the population aged 50 or over have one or more children living in the household. This proportion declined with age.
- The prevalence of most socio-demographic characteristics covered in this chapter showed differences by education and occupation. Men and women in managerial and professional occupations, or who have attained higher levels of education, were more likely to be married or to be living with a partner, to have more children and to have parents who were still alive.
- In many of the socio-demographic aspects analysed, the differences related to education and occupation were greater at younger ages.

Chapter 3

Socio-economic position

- Average net disposable family income for individuals aged 50 and over is £346.82 per week. Taking account of household size, this equates to an equivalent for a single adult of £243.44 per week.
- The average level of net financial assets of those aged 50 and over is £43,400 (not counting pensions). Adding housing and other physical wealth results in an average level of resources (excluding pensions) of £155,700.
- The inequality in wealth across the older population is much greater than that observed in incomes. As an indication of this inequality, and also the degree to which the 'average' wealth measures are driven by a small number of very wealthy individuals, despite average financial wealth being over £40,000, half the population aged 50 and over have less than £12,000 and a quarter have less than £1,500.
- There are a large number of individuals, particularly amongst single men and women, who have little or no wealth. A quarter of single men and women aged 50 and over have almost no wealth at all.
- Holdings of the three main forms of wealth – housing, pensions and financial assets – are positively correlated in the population. Those without housing or pension wealth also have the lowest levels of financial savings.

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- There is a strong correlation between socio-economic position and health. This holds whether socio-economic position is measured by income, wealth or other socio-economic classification. In addition, individuals from higher wealth groups expect to live longer on average.
- The average expectation of receiving inheritances is largest amongst those from the highest wealth groups. These groups are also the most likely to report high probabilities of leaving bequests.
- Individuals' subjective assessment of their own socio-economic position is correlated with both their actual financial resources and their health.

Chapter 4 **Work and retirement**

- Less than three-quarters of 55- to 59-year-old men and less than half of 60- to 64-year-old men are currently working. For women, these numbers are around 60% and 30% respectively; many working women are working part-time.
- Looking at individuals below the state pension age, there is a strong positive correlation between economic activity and health, whether health is self-reported or measured by mobility limitations.
- Concentrating just on workers, there are only relatively minor differences in hours worked and job types by health status. Similarly, there are only minor differences by health status in expectations of remaining in work.
- Looking across wealth groups, labour market inactivity rates for individuals younger than state pension age are U-shaped – the lowest wealth groups are least likely to be working, but the wealthiest individuals are also less likely to work than those in the middle of the wealth distribution.
- Single men are substantially less likely to be economically active than their married counterparts. The differences are much smaller for single and married women.
- The association of private pensions with 'early retirement' is stronger for defined benefit than for defined contribution pensions. This is true both for those who have already retired and for the retirement expectations of those who are still working.
- Expectations of returning to work, for those out of the labour market before the state pension age, are relatively pessimistic. Those in poor health, in particular, report low expectations of returning to work.

Chapter 5

Social activity

- Overall, greater percentages of women than men provide care, although this is not the case for providing care for a spouse, where rates are equal.
- Most carers provide between 1 and 19 hours of care a week. A quarter of carers provide round-the-clock care.
- In general, those in poorer health are less likely to belong to organisations such as political parties or trade unions, charities or sports clubs.
- Those in more managerial and professional occupational groups tend to be more likely to be a member of an organisation other than social clubs, where the opposite is true.
- Around 50% of people aged 50 and older say that they go to the cinema, opera or theatre or visit an art gallery or museum. Almost all say that they eat out of the house sometimes.
- Those in older age groups, poorer health or more routine and manual occupational groups are less likely to participate in these activities.
- Those in older age groups are more likely to have voted in the last general election.
- Access to email and the Internet is strongly related to age (younger people have greater access), occupational class (those in the managerial and occupational classes have greater access) and gender (men have greater access than women).

Chapter 6

Health

- There is an occupational class gradient in the prevalence of most health outcomes covered in ELSA, including: heart disease, respiratory illness, self-reported fair or poor health, having a limiting long-standing illness and mental health symptoms. Men and women in routine or manual occupational class households were most likely, and men and women in professional or managerial class households were least likely, to report having each of these conditions.
- Social inequalities in health are more marked at younger ages than older ages. For example, in the 50–59 age group, men in routine and manual occupations were twice as likely to have a limiting long-standing illness as men in professional and managerial occupations, while, among men aged 75 or older, there was very little difference between the two groups in the proportions suffering from a limiting long-standing illness. A similar pattern appeared for heart disease, hypertension, diabetes, arthritis and respiratory illness, although generally more so for men than for women.

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- Similar occupational class differences in age trends appeared for health-related behaviours. For instance, sedentary behaviour increased with age more rapidly for men and women in routine or manual households than for those in professional or managerial households.
- There is a suggestion that the variation in the social inequality in health by age is a consequence of those in routine and manual occupational classes reaching a state of poor health a decade or two earlier in their lives than their peers in more advantaged social positions. Around a third of routine and manual men in the 50- to 59-year-old group report a limiting long-standing illness, while rates for men in the professional and managerial groups remain much lower than this until they get beyond age 75; for example, only just over a quarter of professional and managerial men aged 60–74 report a limiting long-standing illness.
- People in routine or manual occupational class households were most likely to abstain from drinking alcohol or only drink alcohol on special occasions, while people in professional or managerial households were more likely to drink moderately, in line with the pattern now thought to be protective against chronic illness.

Chapter 7 **Physical and cognitive function**

- There is considerable variation in the level of physical impairment between age groups. The prevalence of reported physical functional limitation is surprisingly high at the youngest end of the sample, with 43% of respondents in their 50s reporting difficulty with mobility and 13% reporting difficulty with a basic activity of daily life (self-care). At the same time, most (58%) of the respondents in their 80s and older report no difficulties with basic activities of daily life and 17% report no difficulty with mobility functions.
- The variation in the level of impairment by occupational class is also considerable. Respondents with routine and manual occupations report up to twice as many difficulties with physical function as those with managerial or professional occupations. This occupational class disability gap is equivalent to the disability gap between age groups 10–15 years or more apart.
- Walking speed slows dramatically with age. Only around one in forty people aged between 60 and 64 walk more slowly than 0.4 metres/second, compared with one in five at age 80 and over. This deterioration in walking speed is more marked in women than in men.
- Chronological age is the strongest determinant of scores on the objective cognitive tests, whereas scores on the subjective measure (self-reported memory) are more strongly influenced by education and occupational class than by age.
- There was a very high level of forgetfulness in the sample, particularly in the older groups. Over two-thirds of the oldest group forgot to carry out actions that they had earlier been instructed to perform. Assuming that the

measures of forgetfulness used in ELSA are indicative of forgetfulness in daily life, these findings raise concerns about activities such as remembering to take medication, pay bills or take safety precautions such as turning off the cooker.

- Although older respondents in general perform less well than younger respondents on the cognitive tests, older respondents (aged 75 and over) who have a degree or higher education often performed as well as, and sometimes better than, younger respondents with no educational qualifications. This trend was particularly strong in the case of numerical ability, where the youngest group with no qualifications gave fewer correct responses than older groups with intermediate education or a degree or higher education.
- There is an interesting pattern of gender differences on the various cognitive measures. Women performed better than men on most of the memory tests, while men performed better than women on most of the executive function tests. The gender difference on memory is in line with many published studies, but the gender difference on executive function measures has received relatively little attention to date.

Chapter 8

Physical and social environment

- Density of accommodation (number of people per room) decreases with age and is lower for women than for men, suggesting that undercrowding or isolation, rather than overcrowding, may be an issue for women in the oldest age groups.
- Whereas certain durable goods, such as televisions and landline phones, are almost universally owned by members of today's older population, men and people in higher occupational classes are more likely than women and those in other occupational classes to own other goods, such as computers and CD players.
- Men and people of higher occupational status are more likely to perceive good social capital in their communities. Notably, perceived social capital deteriorates with age.
- While, in general, few people report difficulties accessing local amenities, such as a post office or supermarket, women, older people, those in poor health and those in lower occupational groups are all more likely to have difficulty accessing these services. In contrast, a far greater proportion of individuals indicate that they do not take public transport because of lack of availability.
- Adult children appear to play a central role in the social networks of the ELSA population, with more than half the sample seeing their children at least once a week.
- The disadvantage experienced by women in such areas as perceived social capital and access to local amenities is generally not found in measures of personal social networks. For example, women have more face-to-face,

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phone and written contact with others than men do, and these gender differences in frequency of contact are more pronounced than age differences.

- Younger people and those of higher occupational class are more likely to have frequent written contact with network members, possibly reflecting disparities in access to email.
- There is some evidence that the quality of social relationships improves with age, as reflected in measures of positive and negative social support from network members.