COUNTY WEXFORD REPORT

Wexford County Council

An Roinn Sláinte
DEPARTMENT OF HEALTH

Tús Áite do
Shábháilteacht Othar
Patient Safety First

hi
Healthy
Ireland

HSE

WEXFORD
AGE FRIENDLY
COUNTY PROGRAMME

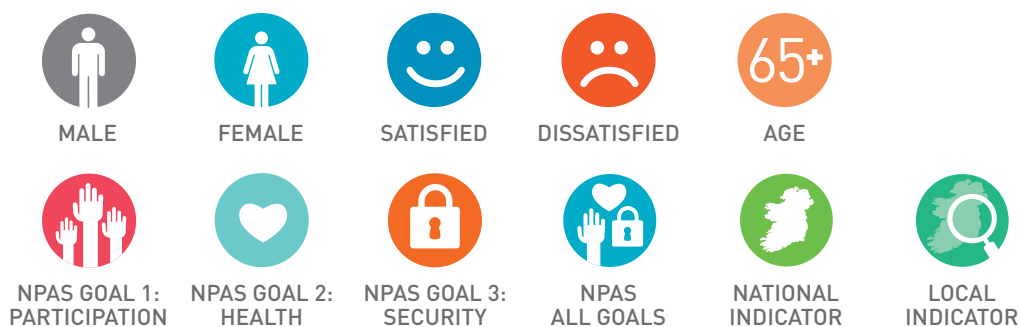The
ATLANTIC
Philanthropies

POSITIVE AGEING IN IRELAND

Headline findings of a survey carried out by the Age Friendly Cities and Counties Programme and the Healthy and Positive Ageing Initiative

ABBREVIATIONS

AFI	Age Friendly Ireland
AFCC	Age Friendly Cities and Counties
CSO	Central Statistics Office
DOH	Department of Health
EQLS	European Quality of Life Survey
EU	European Union
HaPAI	Healthy and Positive Ageing Initiative
HIPE	Hospital InPatient Enquiry
HSE	Health Service Executive
NPAS	National Positive Ageing Strategy
TILDA	The Irish Longitudinal Study on Ageing
WHO	World Health Organisation

KEY

MALE　　FEMALE　　SATISFIED　　DISSATISFIED　　AGE

NPAS GOAL 1: PARTICIPATION　　NPAS GOAL 2: HEALTH　　NPAS GOAL 3: SECURITY　　NPAS ALL GOALS　　NATIONAL INDICATOR　　LOCAL INDICATOR

CONTENTS

FOREWORD

County Wexford has a significant ageing population with 18,367 people, aged over 65, living in this county in the 2011 census and this is predicted to rise further over the coming decade.

In response to these statistics, the Wexford Age Friendly County Alliance was formed in 2015, representing a wide number of organisations in County Wexford.

In 2017, we will publish an 'Age Friendly' strategy for Wexford. This is a significant new step for us and this strategy will outline the actions that will be undertaken to improve the quality of life for older people living in rural and urban areas over the next five years.

These actions have been identified through extensive consultation with older people across the county. We have listened to your views and acquired an understanding of your needs in areas such as health, housing, transport, personal safety, the built environment, social activities and access to information.

Furthermore, Wexford County Council has commissioned statistical data to gain an insight into demographic trends around the county. The **'All Island Research Observatory'** published a comprehensive report which illustrated that the '65 plus' cohort increased by 20% between 2006 and 2011 which was the 5th highest nationally. This report identified that this age group experienced the greatest growth over this period, highlighting the significant demand on new older people services that will be required.

Tom Enright,
Chief Executive Officer,
Wexford County Council.

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SECTION 1 : INTRODUCTION

This section provides the background and rationale for the Healthy and Positive Ageing Initiative (HaPAI) and summarises the approach that is being taken to develop national and local indicators of Healthy and Positive Ageing.

The conceptual framework, based on the goals and objectives of the National Positive Ageing Strategy (NPAS), is also outlined. The links between this strategy and the Age Friendly Cities and Counties programme is briefly discussed. Finally, some demographic data for County Wexford is presented.

1.1 HEALTHY AND POSITIVE AGEING INITIATIVE

As we enter a period of rapid population ageing, it is becoming increasingly
important to develop evidence about the health and wellbeing of older people in order to inform policy at national and local level. Such evidence can alert us to possible difficulties, facilitate greater long-term planning, and ensure that we maximise the potential of all older people in our communities.

ENSURING WE MAXIMISE THE POTENTIAL OF ALL OLDER PEOPLE IN OUR COMMUNITIES

The National Positive Ageing Strategy (NPAS) was developed following extensive consultation with older people and their representatives. Published in 2013, it sets out a vision for Ireland as:

"...a society for all ages that celebrates and prepares properly for individual and population ageing. It will enable and support all ages and older people to enjoy physical and mental health and wellbeing to their full potential. It will promote and respect older people's engagement in economic, social, cultural, community and family life, and foster better solidarity between generations".

The strategy takes the WHO's Active Ageing – A Policy Framework (2002) as a 'theoretical underpinning' and calls for action on three fronts by defining active ageing as "a process of optimising opportunities for **participation, health** and **security**" (NPAS, 2013).

Arising from the publication of the National Positive Ageing Strategy and Healthy Ireland, the Department of Health (DOH) is leading a joint national programme with the Health Service Executive (HSE) and Age Friendly Ireland (AFI) - the Healthy and Positive Ageing Initiative (HaPAI).
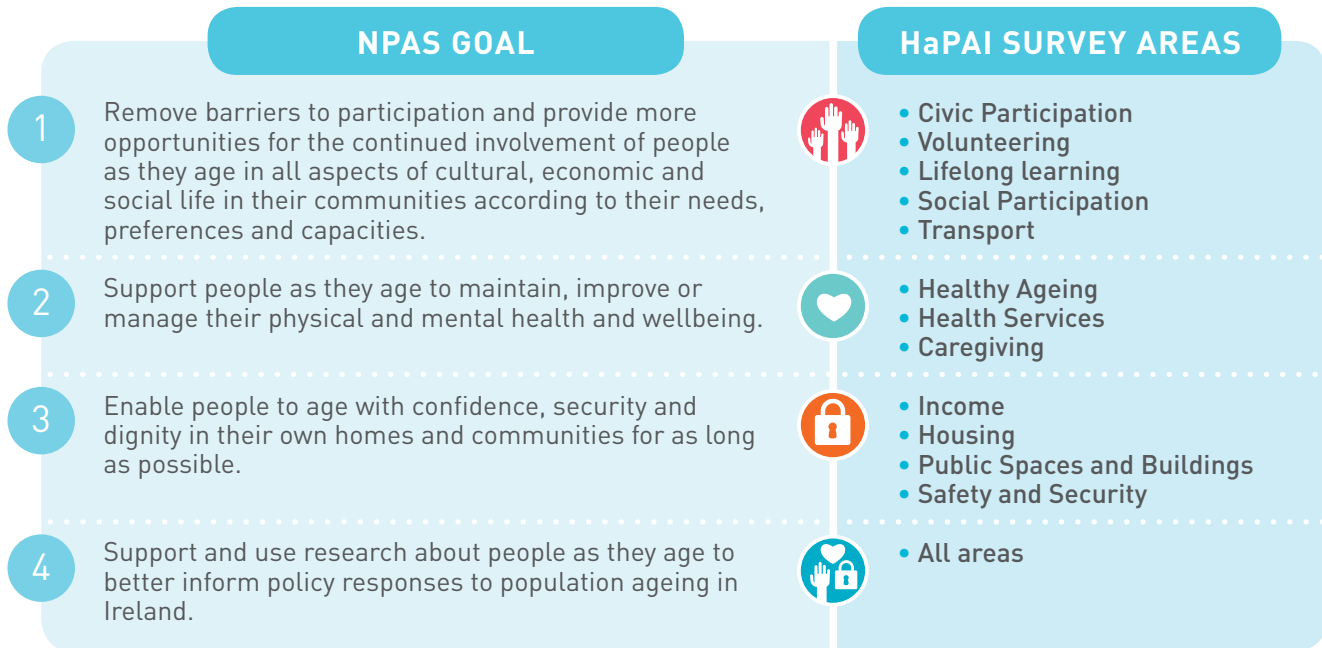
1.2 DEVELOPMENT OF NATIONAL INDICATORS

Indicators can play a vital role in the identification of trends and issues while contributing to the process of priority setting, policy formulation, and the evaluation and monitoring of progress. The Healthy and Positive Ageing Initiative has developed an indicators framework structured around the three goal areas of Participation, Health, and Security. A number of objectives have been identified within each goal area, each of which will be associated with an indicator(s) where possible. The NPAS also identifies two cross-cutting objectives relating to ageism and information provision.

Healthy Ireland, the national framework to improve the health and wellbeing of the population, has identified four high level goals and 64 actions grouped under six broad themes. Implementation of the NPAS is an essential part of the vision for creating a society in which "every individual and sector of society can play their part in achieving a healthy Ireland" (Healthy Ireland Goal 4).

1.3 DEVELOPMENT OF LOCAL AFCC/HaPAI INDICATORS

Under the three pillars of the National Positive Ageing Strategy (NPAS), four goals have been identified (see below). The HaPAI/AFCC survey asks people for their views on many of the key action areas identified in the NPAS under each of the four goals.

NPAS GOAL	HaPAI SURVEY AREAS
1 Remove barriers to participation and provide more opportunities for the continued involvement of people as they age in all aspects of cultural, economic and social life in their communities according to their needs, preferences and capacities.	• Civic Participation • Volunteering • Lifelong learning • Social Participation • Transport
2 Support people as they age to maintain, improve or manage their physical and mental health and wellbeing.	• Healthy Ageing • Health Services • Caregiving
3 Enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.	• Income • Housing • Public Spaces and Buildings • Safety and Security
4 Support and use research about people as they age to better inform policy responses to population ageing in Ireland.	• All areas

Through the Age Friendly Cities and Counties (AFCC) programme, local authorities bring together diverse organisations such as An Garda Síochána, the HSE, Universities, key NGOs, transport and service providers to streamline their work, with the interests and needs of older people at their heart. The programme develops local multi-agency planning structures, which consult with older people to develop integrated city and county strategies to promote and advance older people's health and wellbeing across Ireland.

The AFCC programme has been identified by the NPAS as being an important approach to improving the lives of older people throughout the country. In order to integrate the AFCC programme with the National Indicators programme, the HaPAI project is developing indicators that are relevant to both the implementation of the NPAS and the AFCC programme.

Many of the national data sources do not provide any information on the lives of older people on a county by county basis. To address this gap, the HaPAI project has carried out local research using a single random sample survey in a number of local authority areas. The results of these surveys will be used to inform policy development and service provision in participating Age Friendly City and County programmes.

This report sets out the headline findings of the survey carried out in the County Wexford area. A random sample survey of over five hundred people aged 55 and over was carried out in the area between July and October 2015, and further details of the methodological approach can be found in Section 3.

The growth of the population age 65 and over affects many aspects of future planning for society, by health care providers, policymakers and others. In order to plan for and meet the needs of a larger older population it is important to have an accurate picture of recent trends and future predictions.

The 2011 Census found there was a total of 535,393 people aged 65 and over in Ireland (CSO, 2011). This proportion is lower than the EU average of 18.2% (Eurostat 2013). In contrast, Italy and Germany have nearly a fifth of their population aged 65 and over.
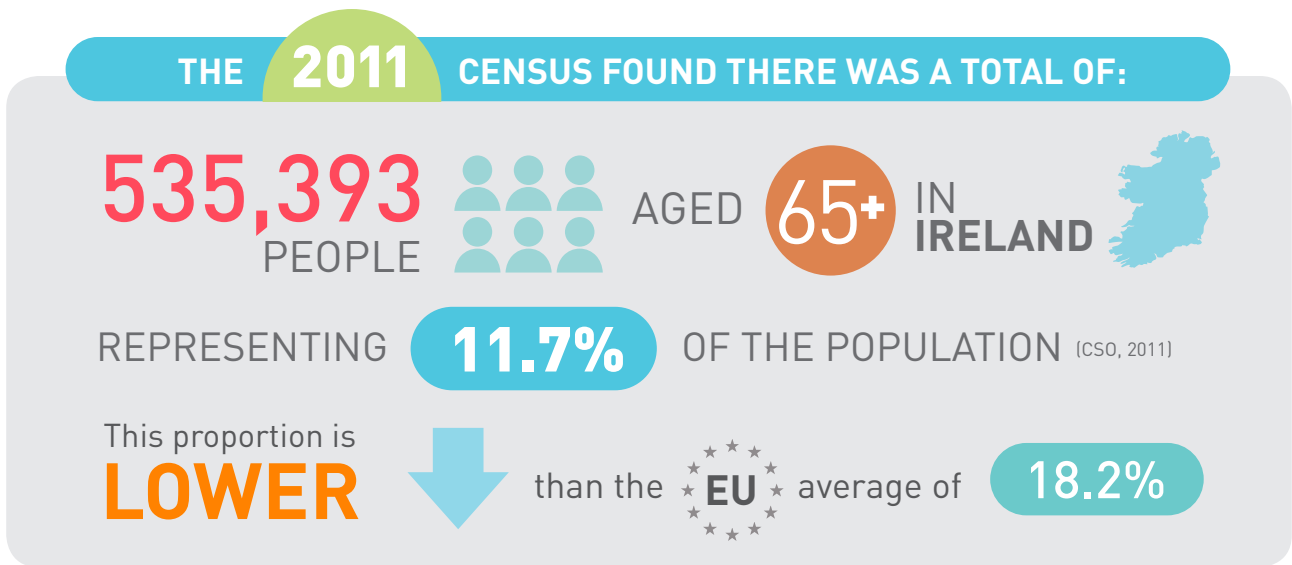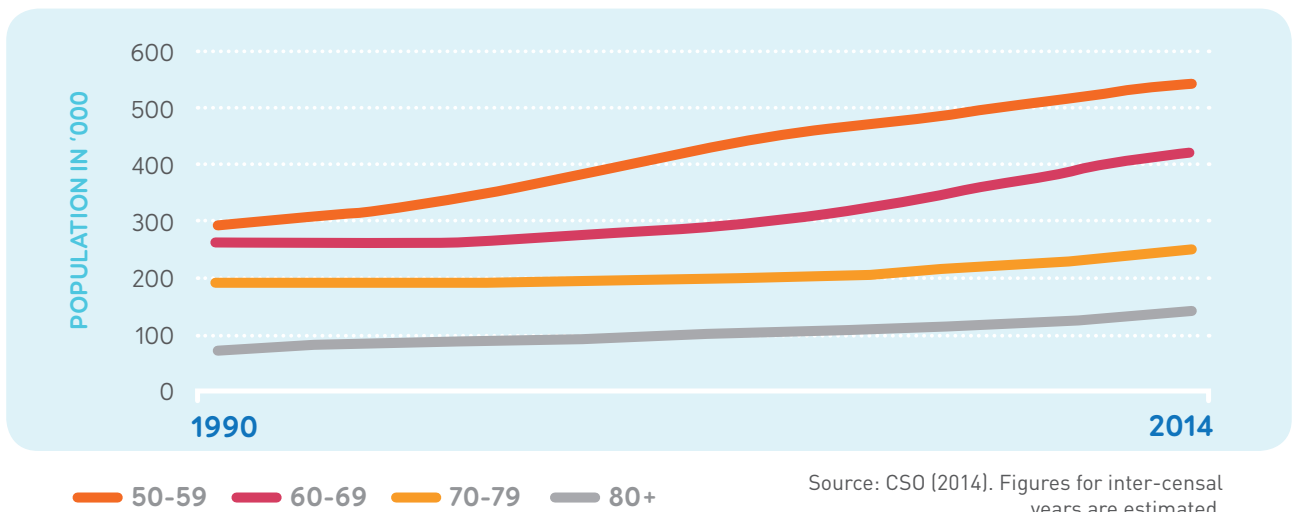
THE **2011** CENSUS FOUND THERE WAS A TOTAL OF:

535,393 PEOPLE AGED **65+** IN **IRELAND**

REPRESENTING **11.7%** OF THE POPULATION (CSO, 2011)

This proportion is **LOWER** than the **EU** average of **18.2%**

FIGURE 1.1 CURRENT POPULATION OF IRELAND AGED 50 AND OVER, BY AGE GROUP

POPULATION IN '000

1990   2014

— 50-59   — 60-69   — 70-79   — 80+

Source: CSO (2014). Figures for inter-censal years are estimated.

By 2041, there will be 1.4 million in Ireland aged 65 and over - three times more than the older population now. This older group will make up 22% of the total population, compared to 11.7% of the population in 2011 (CSO, 2013). The total population aged 70 and over is set to double from approximately 359,000 to just over 705,000 in 2046.

LOCAL DEMOGRAPHIC CONTEXT

The old-age dependency ratio indicates the total population aged 65 and over as a percentage of the population aged 15-64 (the working age population). In 2002, the ratio was 16.4%; by 2011 it had risen to 17.4%; and it is projected to rise to 30.0% by 2031 (CSO, 2013). In Wexford the dependency ratio was 19.6% (CSO, 2011).
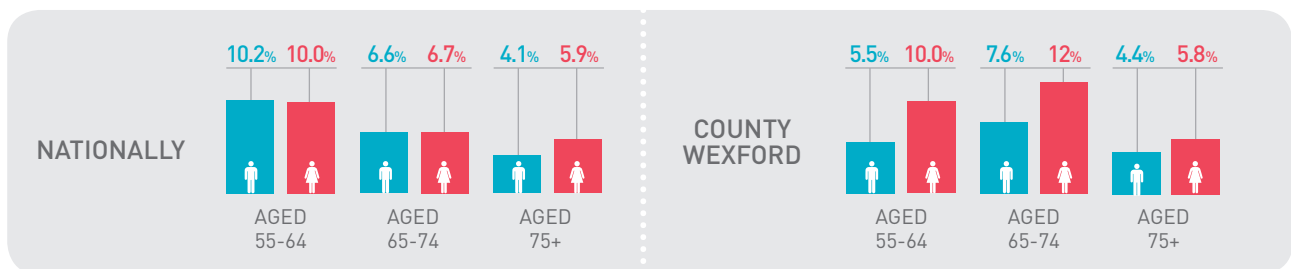
23% OF PEOPLE IN COUNTY WEXFORD

AGED **55+**

Just like other areas in Ireland, County Wexford is experiencing ageing in its population structure which will have effects into the future. According to the 2011 Census, there were 33,619 people aged 55 and older in County Wexford which was just over one fifth of the local population (23%). This was similar to the State (22%). The total age dependency ratio, which is the sum of the young and old ratios, was calculated as being 54.8% in Wexford in 2011, an increase from 51.1% in Census 2006.

When reviewing the findings of this report it is useful to bear in mind that each 1% difference reported, represents nearly 336 older people.

The age and gender profile of County Wexford is different from the national average. Wexford has fewer men in the 55-64 age group and more women in the 65-74 age group.

AGE & GENDER PROFILE OF PEOPLE AGED 55+ NATIONALLY v COUNTY WEXFORD

Source: CSO (2011)

NATIONALLY

	AGED 55-64	AGED 65-74	AGED 75+
	10.2% 10.0%	6.6% 6.7%	4.1% 5.9%

COUNTY WEXFORD

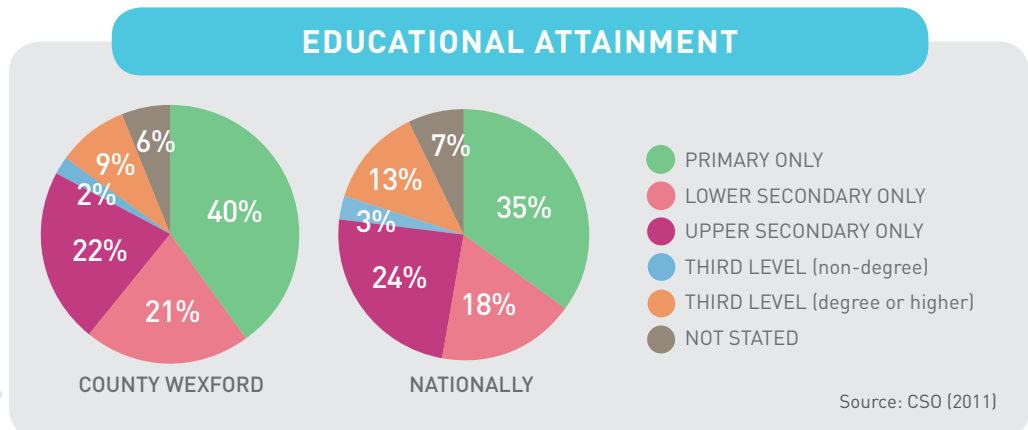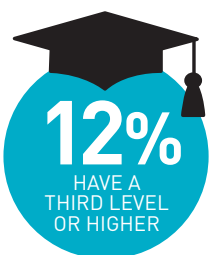|	AGED 55-64	AGED 65-74	AGED 75+
	5.5% 10.0%	7.6% 12%	4.4% 5.8%

County Wexford has quite a diverse population, with 11% of the total population identifying as non-Irish nationals compared with a national average figure of 12%.
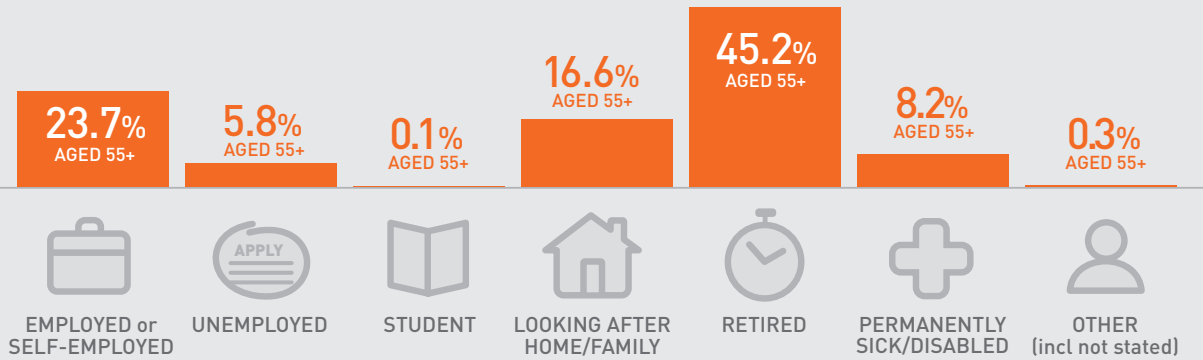
11%

Source: (Census 2011)

People in County Wexford have a similar level of educational attainment to the national average. In County Wexford 12% had third-level education (or higher) compared to the national average of 16%.
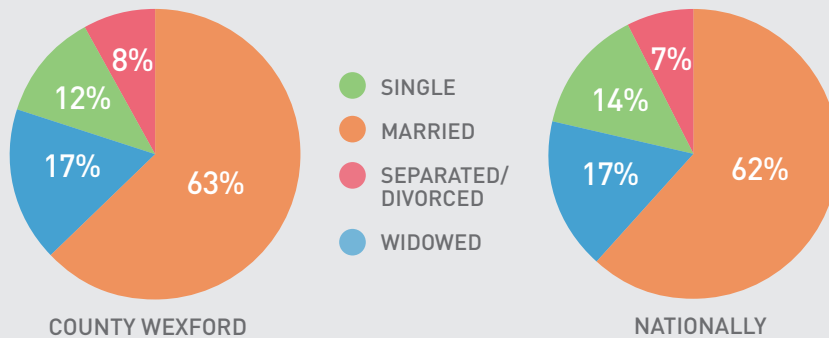
EDUCATIONAL ATTAINMENT

12% HAVE A THIRD LEVEL OR HIGHER

COUNTY WEXFORD
- 40%
- 21%
- 22%
- 2%
- 9%
- 6%

NATIONALLY
- 35%
- 18%
- 24%
- 3%
- 13%
- 7%

● PRIMARY ONLY
● LOWER SECONDARY ONLY
● UPPER SECONDARY ONLY
● THIRD LEVEL (non-degree)
● THIRD LEVEL (degree or higher)
● NOT STATED

Source: CSO (2011)

EMPLOYMENT STATUS

23.7% AGED 55+
EMPLOYED or SELF-EMPLOYED

5.8% AGED 55+
UNEMPLOYED

0.1% AGED 55+
STUDENT

16.6% AGED 55+
LOOKING AFTER HOME/FAMILY

45.2% AGED 55+
RETIRED

8.2% AGED 55+
PERMANENTLY SICK/DISABLED

0.3% AGED 55+
OTHER (incl not stated)

Source: (Census 2011)

In 2011 there were higher numbers of people employed in farming, agriculture, manual skilled and unskilled labour compared to the State averages. There were significantly lower amounts of higher professionals (3.6) and lower professionals (10.2%) than the State averages of 5.9% and 11.9% respectively.

MARITAL STATUS

COUNTY WEXFORD
- 8%
- 12%
- 17%
- 63%

NATIONALLY
- 7%
- 14%
- 17%
- 62%
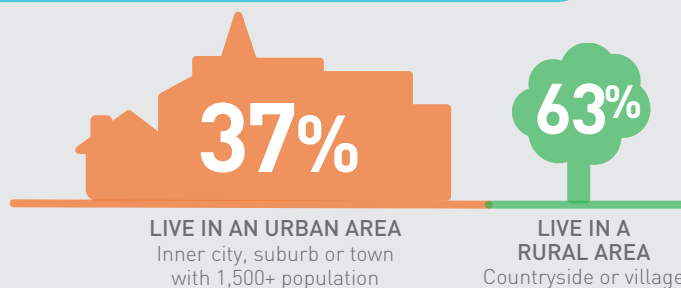
● SINGLE
● MARRIED
● SEPARATED/DIVORCED
● WIDOWED

The proportion of persons separated/divorced in County Wexford (8%) is similar to the State average.

County Wexford is a largely rural area; according to the 2011 Census, 63% live in a rural area.
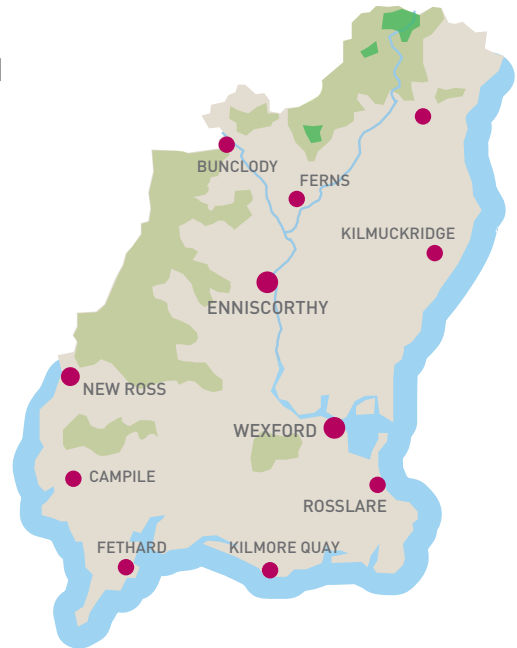
LOCATION OF HOME

COUNTY WEXFORD IS LARGELY A RURAL AREA

37%
LIVE IN AN URBAN AREA
Inner city, suburb or town with 1,500+ population
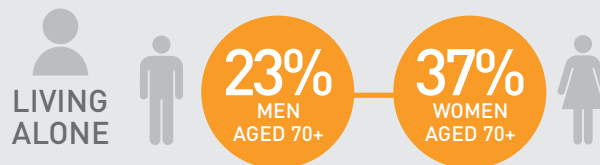
63%
LIVE IN A RURAL AREA
Countryside or village

Wexford is located in the south-east corner of Ireland and is the largest of Leinster's 12 counties in size, and fourth largest in terms of population.

It is bounded by the sea on two sides, on the south by the Atlantic Ocean and on the east by the Irish Sea. The River Barrow forms its western boundary and the Blackstairs Mountains form part of the boundary to the north, as do the southern edges of the Wicklow Mountains.

It has four main towns. Wexford and New Ross are located in the south and west of the county, while the towns of Enniscorthy and Gorey support the northern part of the county. The county has a strong network of smaller towns, villages and rural settlements which support the county's rural population.
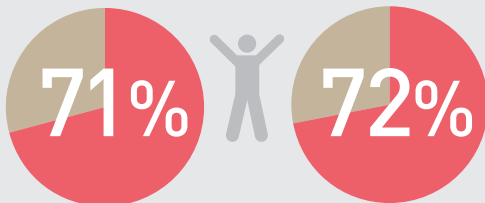
BUNCLODY
FERNS
KILMUCKRIDGE
ENNISCORTHY
NEW ROSS
WEXFORD
CAMPILE
ROSSLARE
FETHARD
KILMORE QUAY

LIVING CIRCUMSTANCES

OF THOSE AGED 55 AND OVER

96.9% LIVE IN A HOUSE

LIVE IN A FLAT APARTMENT OR BEDSIT 1.7%

NOT STATED 1.1%

LIVE IN A TEMPORARY STRUCTURE 0.3%

LIVING ALONE

23% MEN AGED 70+

37% WOMEN AGED 70+

Source: (Census 2011)

HEALTH AND WELLBEING

OLDER PEOPLE IN GOOD OR VERY GOOD HEALTH

71% COUNTY WEXFORD

72% NATIONALLY

Source: Good health (Census 2011)

ALMOST **10** OUT OF **10** AGED **55+** LIKED LIVING IN COUNTY WEXFORD
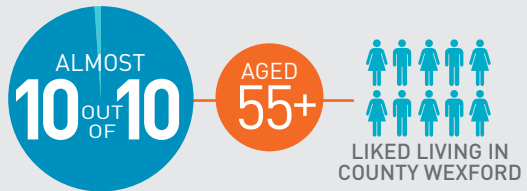
Source: Like living in County Wexford (AFCC)

7,579 EMERGENCY HOSPITAL ADMISSIONS

For over 55s living in County Wexford in 2014

+21% NATIONALLY
+11% WEXFORD
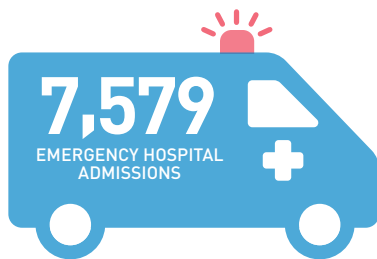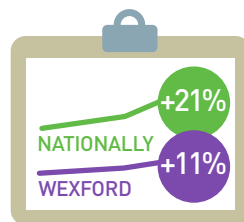
An increase of 11% in County Wexford compared with 2011 versus a national increase of 21%

APPOINTMENT
1,732 ELECTIVE HOSPITAL ADMISSIONS

For over 55s living in County Wexford in 2014
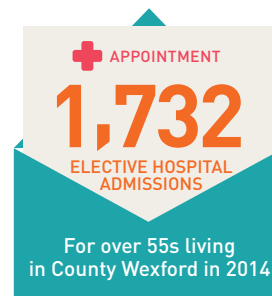
WEXFORD 0%
NATIONALLY -2.4%
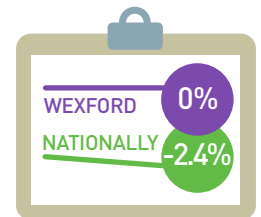
No increase or decrease in County Wexford since 2011 versus a national decrease of 2.4%

Source: HIPE, Healthcare Pricing Office (HPO), August 2015

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SECTION 2 : SURVEY RESULTS

This section presents the main findings from the county survey for County Wexford under the following 11 categories:

- Public Spaces and Buildings
- Transportation
- Housing
- Safety and Security
- Healthy Ageing
- Social Participation

- Lifelong Learning
- Respect and Social Inclusion
- Civic Participation
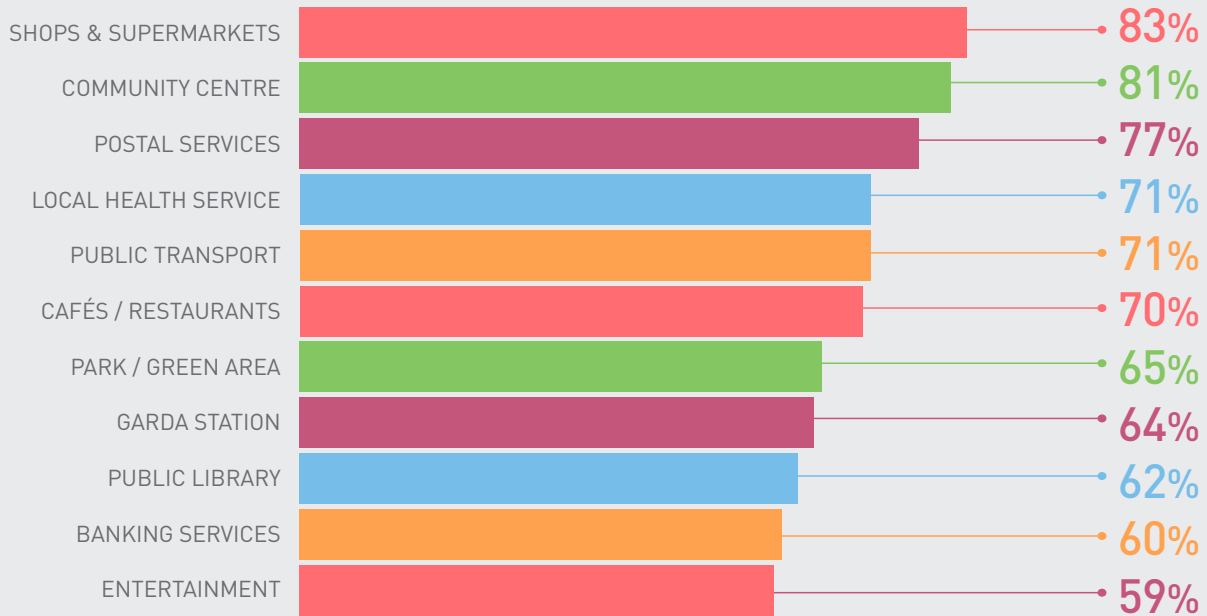- Information Access
- Caregiving

PUBLIC SPACES AND BUILDINGS

ACCESS TO ESSENTIAL SERVICES

As County Wexford is a mostly rural area, many people in the survey reported that services were not available in their local area (10-15 minutes' walk from their home). Supermarkets and other shops and a community centre or other venue where you can meet friends were most likely to be available. Cinema or other entertainment and full banking services were the least likely to be available.

Service	%
SHOPS & SUPERMARKETS	83%
COMMUNITY CENTRE	81%
POSTAL SERVICES	77%
LOCAL HEALTH SERVICE	71%
PUBLIC TRANSPORT	71%
CAFÉS / RESTAURANTS	70%
PARK / GREEN AREA	65%
GARDA STATION	64%
PUBLIC LIBRARY	62%
BANKING SERVICES	60%
ENTERTAINMENT	59%

THE SERVICES THAT WERE MOST DIFFICULT TO ACCESS

Where services were available in the local area, some were reported as easier to access than others

Most difficult to access

- 39% GARDAÍ
- 34% BANKING SERVICES
- 32% CINEMA/ ENTERTAINMENT

Easiest to access

- 79% SHOPS
- 80% POSTAL SERVICES

ESSENTIAL SERVICES INCLUDE

Postal services | Banking | Shops | Local health services (Pharmacy/ GP etc) | Garda station

SOCIAL & RECREATIONAL SERVICES INCLUDE

Cinema/ Theatre/ Entertainment | Park/ Green area | Community centre/ Social venues | Café/ Restaurants | Public library
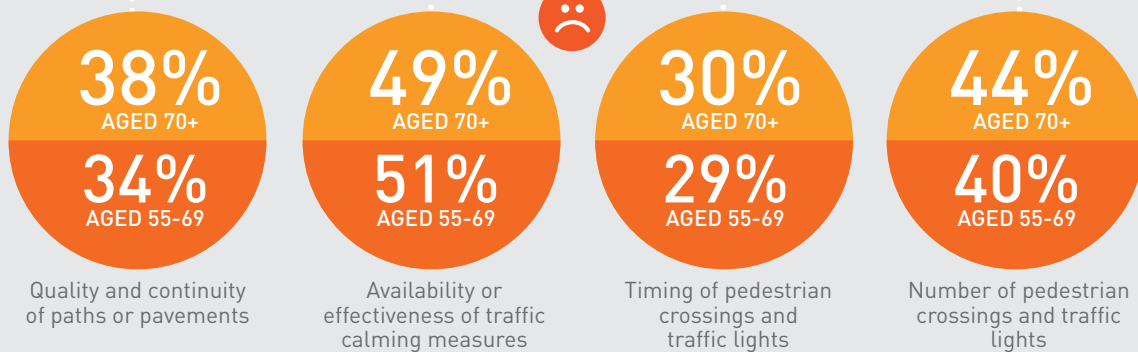
BUILT ENVIRONMENT

TRAFFIC MEASURES AND FOOTPATHS

WE ASKED PEOPLE HOW THEY FELT ABOUT DIFFERENT ASPECTS OF THE BUILT ENVIRONMENT

Most people who lived in the open countryside and villages felt that these aspects of the built environment did not apply to their local area. The rates of dissatisfaction below only include those who thought that each aspect was relevant to them (between 37% for traffic lights and 69% for paths/pavements).
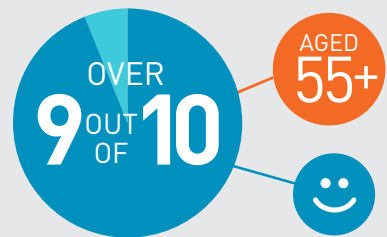
AS THEY AGE, PEOPLE ARE LESS SATISFIED WITH ASPECTS OF THE BUILT ENVIRONMENT SUCH AS THE QUALITY OF PAVEMENTS AND THE NUMBER OF PEDESTRIAN CROSSINGS AND TRAFFIC LIGHTS

RATES OF DISSATISFACTION

38% AGED 70+
34% AGED 55-69
Quality and continuity of paths or pavements

49% AGED 70+
51% AGED 55-69
Availability or effectiveness of traffic calming measures

30% AGED 70+
29% AGED 55-69
Timing of pedestrian crossings and traffic lights

44% AGED 70+
40% AGED 55-69
Number of pedestrian crossings and traffic lights

FACILITIES AND UPKEEP

RATES OF DISSATISFACTION

AGED 70+   AGED 55 TO 69

78% | **81%**
AVAILABILITY OF ACCESSIBLE TOILETS

12% | **18%**
GENERAL APPEARANCE AND UPKEEP OF YOUR LOCALITY

59% | **51%**
AVAILABILITY OF SEATS OR RESTING PLACES

OVER **9** OUT OF **10**   AGED 55+
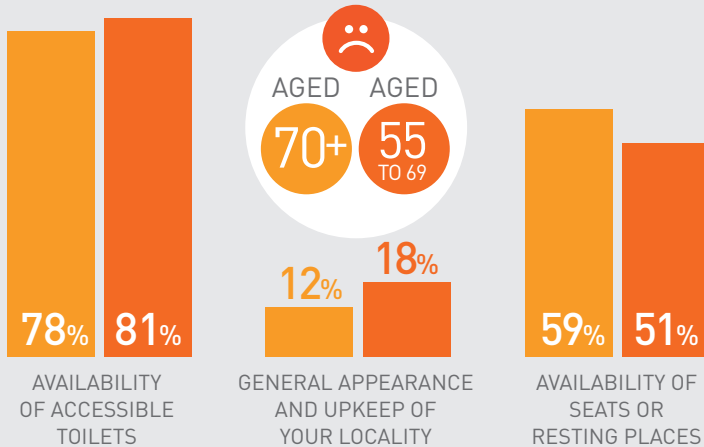
94% OF PEOPLE AGED **55 AND OVER** LIKED LIVING IN THEIR NEIGHBOURHOOD A LOT

55% AGED 70+ + **68%** AGED 55 TO 69

SAY IT IS **EASY** OR **VERY EASY** FOR THEM TO WALK A QUARTER OF A MILE IN THEIR AREA
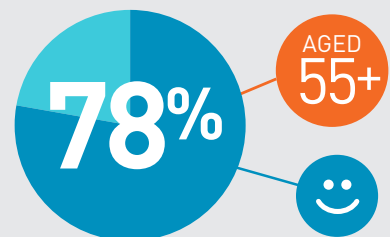
78% AGED 55+

PEOPLE **AGED 55 AND OVER** ARE SATISFIED WITH THE GENERAL APPEARANCE AND UPKEEP OF THEIR LOCAL AREA

TRANSPORT USE IN THE PAST WEEK

THE MAJORITY OF RESPONDENTS ARE CURRENT DRIVERS

78% OF PEOPLE — AGED 55-69 — AND **67%** OF PEOPLE — AGED 70+

DROVE THEMSELVES IN THE PAST WEEK

67% AGED 70+
78% AGED 55-69
Drove themselves in the past week

52% AGED 70+
40% AGED 55-69
Driven as passenger in the past week

4.7% AGED 70+
3.6% AGED 55-69
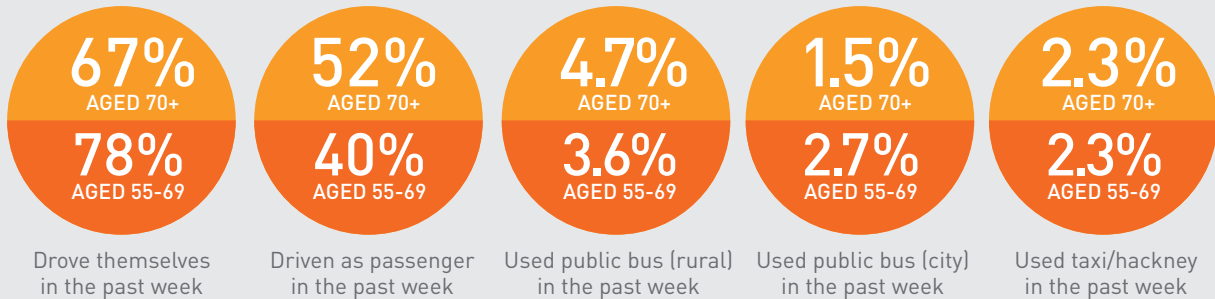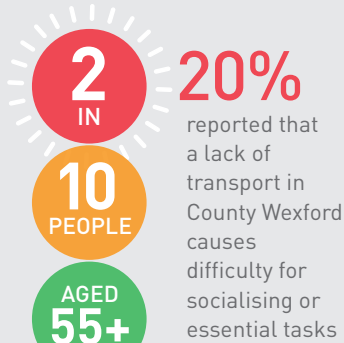Used public bus (rural) in the past week

1.5% AGED 70+
2.7% AGED 55-69
Used public bus (city) in the past week

2.3% AGED 70+
2.3% AGED 55-69
Used taxi/hackney in the past week

PUBLIC TRANSPORT

2 IN 10 PEOPLE AGED 55+

20% reported that a lack of transport in County Wexford causes difficulty for socialising or essential tasks

THIS RISES TO ALMOST

1 IN 3 PEOPLE AGED 55+

33% for those who are not current drivers and for those with walking difficulties

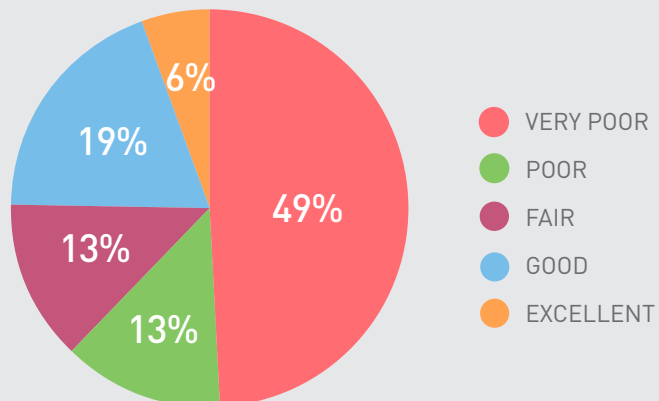**62%** OF PEOPLE AGED 55+ **RATED PUBLIC TRANSPORT OPTIONS AS 'POOR' OR 'VERY POOR'**

WHILE **25%** RATED IT AS AS 'GOOD' OR 'EXCELLENT'

By comparison, TILDA (2011) found that 50% of people rated public transport in the area as 'good' or 'excellent'

- 6% EXCELLENT
- 19% GOOD
- 49% VERY POOR
- 13% FAIR
- 13% POOR

Legend:
- VERY POOR
- POOR
- FAIR
- GOOD
- EXCELLENT

More than 1 in 4 (29%) reported that there was no public transport available within a 15 minute walk of their house, while a further 29% said that while it was available, it was difficult to access.
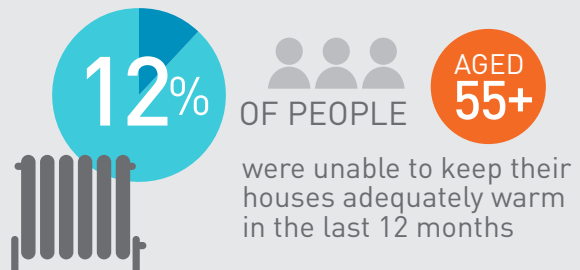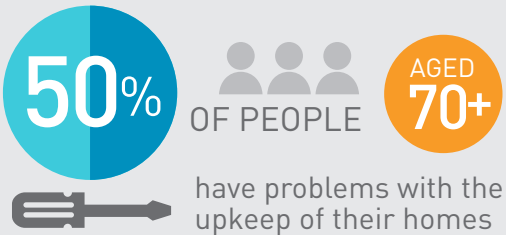
HOUSING CONDITIONS, FACILITIES AND UPKEEP

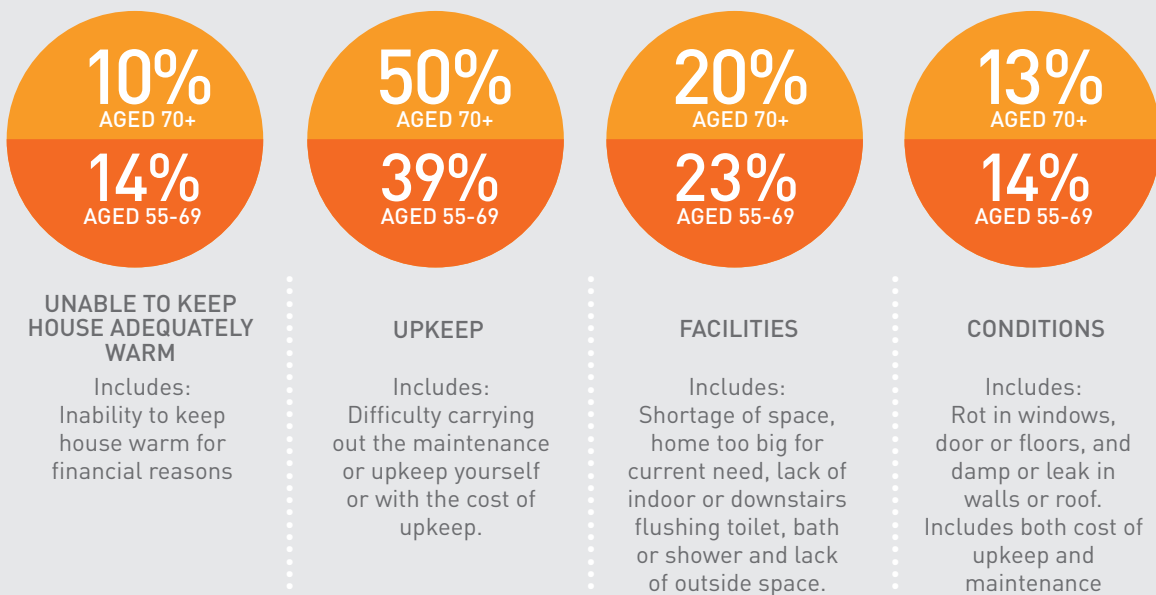### WE ASKED ABOUT HOUSING CONDITIONS, FACILITIES AND UPKEEP

99% OF PEOPLE **AGED 55+** in County Wexford live in a house

+

83% HAVE LIVED IN THEIR AREA FOR **10 YEARS OR MORE**

MOST HOMES ARE IN GOOD CONDITION, WITH **87%** OF PEOPLE REPORTING NO PROBLEMS

50% OF PEOPLE **AGED 70+** have problems with the upkeep of their homes

12% OF PEOPLE **AGED 55+** were unable to keep their houses adequately warm in the last 12 months

By comparison, the European Quality of Life survey (EQLS, 2012) found nationally that 5% of people were unable to afford to keep their house warm
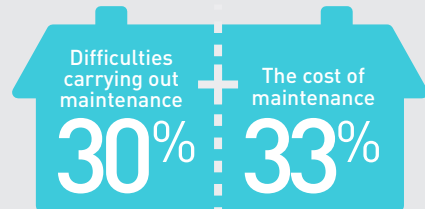
PROBLEMS WITH HOUSING FACILITIES

10% AGED 70+
14% AGED 55-69

UNABLE TO KEEP HOUSE ADEQUATELY WARM

Includes: Inability to keep house warm for financial reasons

50% AGED 70+
39% AGED 55-69

UPKEEP

Includes: Difficulty carrying out the maintenance or upkeep yourself or with the cost of upkeep.

20% AGED 70+
23% AGED 55-69

FACILITIES

Includes: Shortage of space, home too big for current need, lack of indoor or downstairs flushing toilet, bath or shower and lack of outside space.

13% AGED 70+
14% AGED 55-69

CONDITIONS

Includes: Rot in windows, door or floors, and damp or leak in walls or roof. Includes both cost of upkeep and maintenance

The most frequent problem people had with conditions was damp or leaks (9.5%)
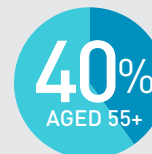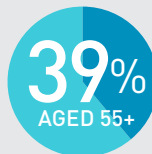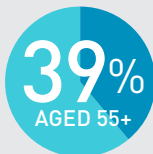
14% AGED 55+ OF PEOPLE

LIVING IN COUNTY WEXFORD REPORTED THAT THEIR HOME WAS TOO BIG FOR THEIR CURRENT NEEDS

This was the most common problem people had with facilities

Difficulties carrying out maintenance **30%** + The cost of maintenance **33%**

WERE REPORTED TO BE EQUALLY PROBLEMATIC

39% AGED 55+ would like help with bills/upkeep for housing

39% AGED 55+ would like help for adaptations or physical improvements to house

40% AGED 55+ would like non-financial help with housing maintenance

HOUSING PREFERENCES

WE ASKED PEOPLE ABOUT THEIR PREFERENCES FOR HOUSING IF THEIR HOMES WERE NO LONGER SUITABLE FOR THEIR NEEDS
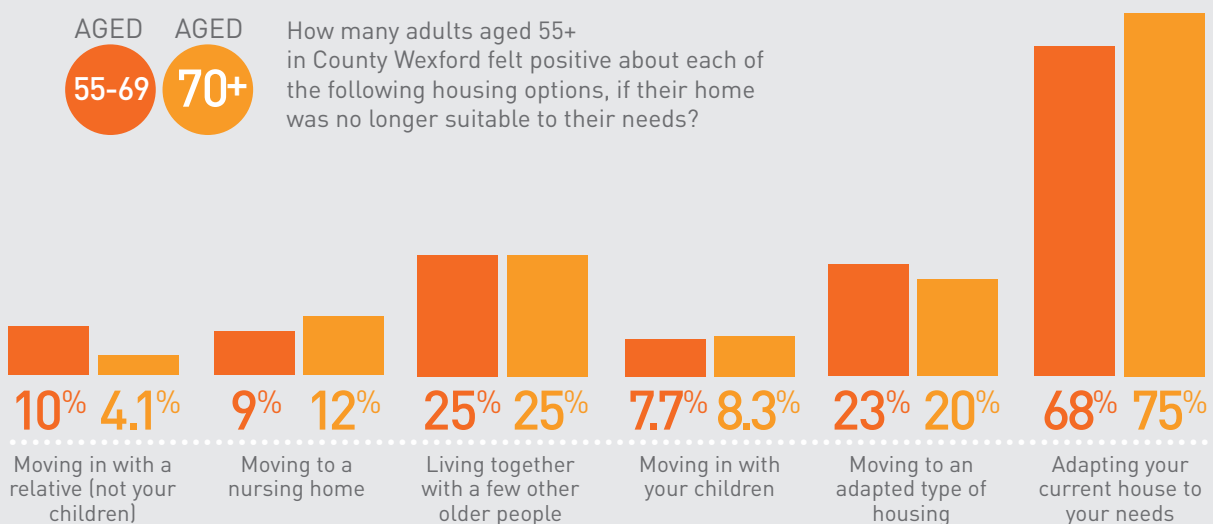
22% OF PEOPLE AGED 55+

would consider moving to an **ADAPTED TYPE OF HOUSING**

ADULTS AGED 55 AND OVER

in County Wexford were most positive about adapting their house to their needs and were least positive about moving in with a relative other than their children

AGED **55-69**   AGED **70+**
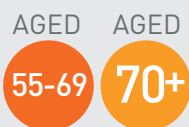
How many adults aged 55+ in County Wexford felt positive about each of the following housing options, if their home was no longer suitable to their needs?

10% **4.1%**	**9%** **12%**	**25%** **25%**	**7.7%** **8.3%**	**23%** **20%**	**68%** **75%**
Moving in with a relative (not your children)	Moving to a nursing home	Living together with a few other older people	Moving in with your children	Moving to an adapted type of housing	Adapting your current house to your needs

SAFETY AND SECURITY

HOW SAFE DO PEOPLE FEEL?

WE ASKED HOW SAFE PEOPLE FEEL IN VARIOUS SITUATIONS

26%

AGED 55+

IN COUNTY WEXFORD OVER 1 IN 4 PEOPLE REPORTED AN EXPERIENCE THAT LEFT THEM CONCERNED FOR THEIR OWN SAFETY

24% MEN

28% WOMEN

HOW FREQUENTLY DID THIS EXPERIENCE OCCUR?

ONCE

MORE THAN ONCE

44%

56%
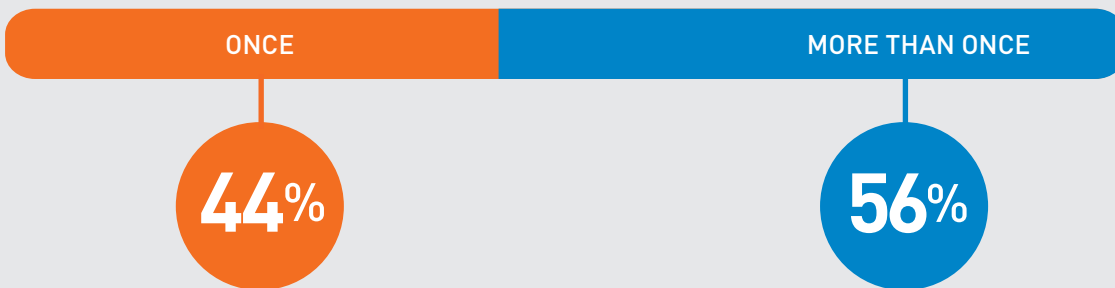
THE MAJORITY OF PEOPLE FEEL VERY SAFE

96%
feel safe at home during the day

96%
feel safe out and about during the day

87%
feel safe at home at night

64%
feel safe out and about at night

22%
of women DO NOT feel safe when out and about at night

FEELS SAFE

DOES NOT FEEL SAFE

STATE OF HEALTH

63% OF PEOPLE AGED **55-69** AND **62%** OF PEOPLE AGED **70+**
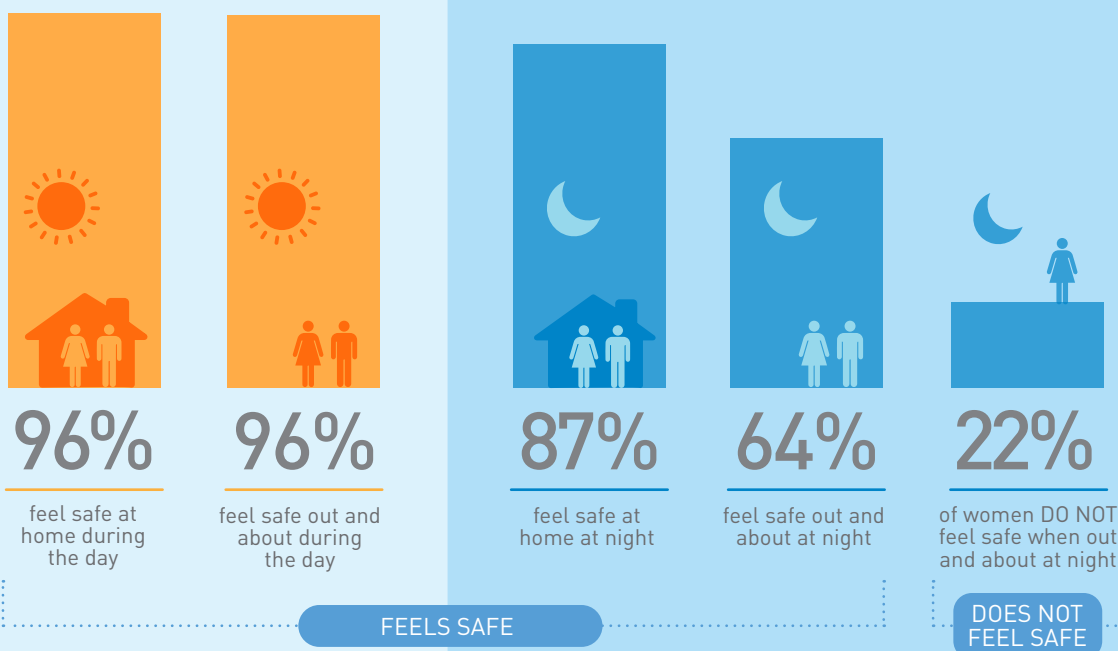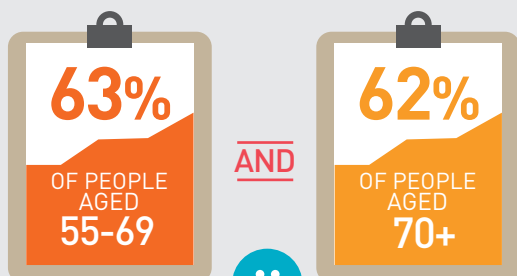
SAY THEIR HEALTH IS GOOD OR VERY GOOD

7% OF PEOPLE AGED **70+**

SAY THEIR HEALTH IS BAD OR VERY BAD

17% OF PEOPLE AGED 55+ CURRENTLY SMOKE

This is higher than the national average of 14% (TILDA, 2013).

55% OF PEOPLE AGED **55-69** | **56%** OF PEOPLE AGED **70+** have a long-standing illness or health problem
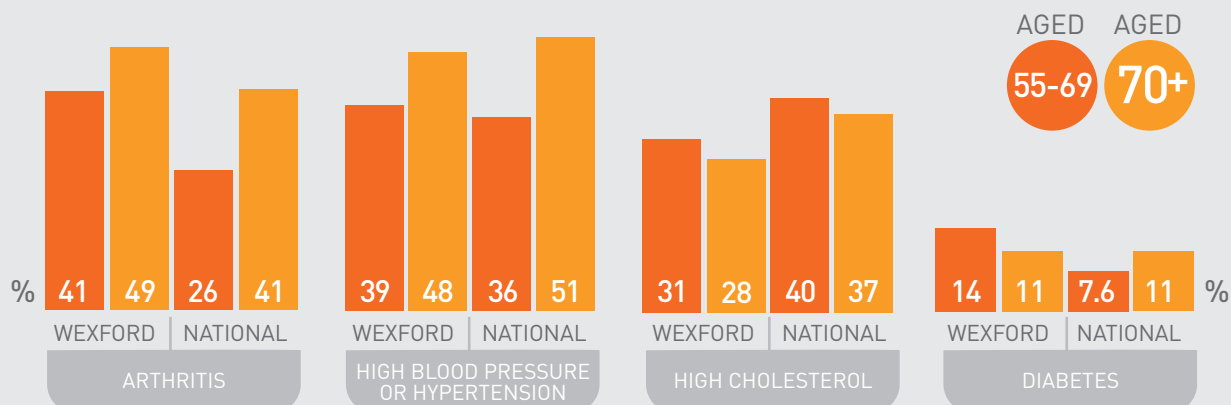
16% of these people are severely limited in their everyday activities because of this health problem

MOST COMMON HEALTH CONDITIONS

THE FOUR MOST COMMON HEALTH CONDITIONS EXPERIENCED BY ADULTS AGED 55+ IN COUNTY WEXFORD AND NATIONALLY

AGED **55-69**   AGED **70+**

	ARTHRITIS				HIGH BLOOD PRESSURE OR HYPERTENSION				HIGH CHOLESTEROL				DIABETES		
%	41	49	26	41	39	48	36	51	31	28	40	37	14	11	7.6	11	%
	WEXFORD		NATIONAL		WEXFORD		NATIONAL		WEXFORD		NATIONAL		WEXFORD		NATIONAL	

While the four main health conditions reported were common across both genders, **osteoporosis was very common among women only.** 13% reported a doctor diagnosis of osteoporosis in County Wexford. This was smaller to the national percentage for women of 18% (TILDA, 2011)

13% WEXFORD   NATIONALLY **18%**

64% OF PEOPLE **AGED 70+** have 2 or more health conditions that have been diagnosed by a doctor

TILDA (2011) found that **67%** have 2 or more health conditions

49% OF ADULTS **AGED 55-69** AND **34%** OF ADULTS **AGED 70+** DO AT LEAST **150** MINS of moderate physical activity per week

TILDA (2013) found that 45% of people aged 55+ do at least **150 minutes** of moderate exercise every week.

ASSISTANCE WITH ACTIVITIES

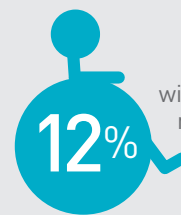ASSISTANCE WITH ACTIVITIES IN THOSE **AGED 70+** IN COUNTY WEXFORD

PERSONAL CARE

5.4%

5.4% of over 70s need assistance with personal care and **90% receive this assistance**

HOUSEKEEPING

13%

13% of over 70s need assistance with housekeeping and **88% receive this assistance**

MOBILITY

12%

12% of over 70s need assistance with their personal mobility and **80% receive this assistance**

AMONG THOSE **AGED 55-69** **4.5%** need assistance with personal care   **7.9%** need assistance with housekeeping   **7.7%** need assistance with mobility

HEALTH SERVICES

AGED 55+ REASONS WHY ADULTS IN COUNTY WEXFORD DID NOT RECEIVE SERVICES NEEDED IN THE LAST 12 MONTHS (eg medical, social or home care)

COST **6.5%**

WAITING LIST **10%**

DISTANCE/ TRANSPORT PROBLEMS **4.5%**

PREVENTIVE HEALTH SERVICES RECEIVED IN THE PAST **12 MONTHS**

66% Flu vaccination (in target group 65+)

78% Blood test for cholesterol (all ages)

87% Blood pressure check (all ages)

64% Mammogram or breast X-ray (women 55-64)

15% OF PEOPLE **AGED 55+** IN COUNTY WEXFORD ARE CURRENTLY ON A WAITING LIST AMONG THESE **27%** have been on a waiting list for more than **1 MONTH** + **61%** have been on a waiting list for more than **3 MONTHS**
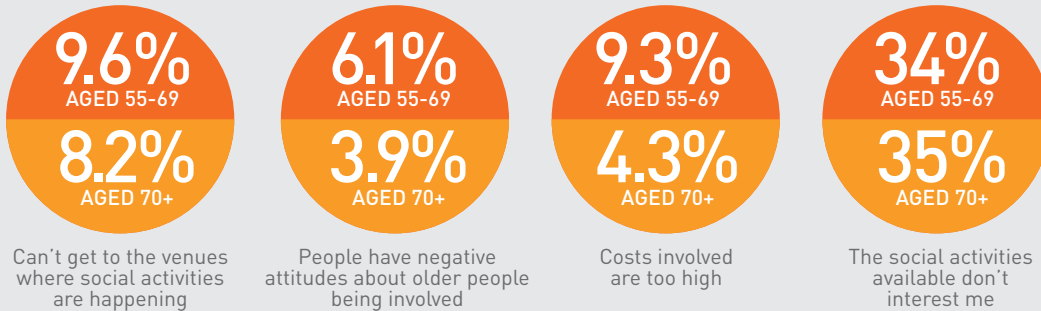
HOW OFTEN DO PEOPLE SOCIALISE

WE ASKED PEOPLE HOW OFTEN THEY SOCIALISE OR PARTICIPATE IN COMMUNITY GROUPS

MORE THAN 1 IN 4 PEOPLE — 29% AGED 55-69 — participate in a community group at least weekly — THIS IS SIMILAR TO — 27% OF PEOPLE AGED 70+

2 IN 3 PEOPLE — 72% AGED 55+ — meet socially with relatives, friends and colleagues — at least ONCE A WEEK

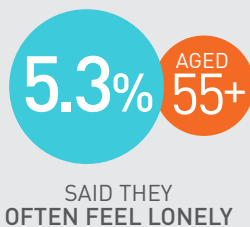**8%** — meet people socially LESS THAN ONCE A MONTH or NEVER

MAIN BARRIERS TO SOCIAL PARTICIPATION

OVER 1 IN EVERY 3 ADULTS AGED 70+ (34%) IN COUNTY WEXFORD SAID THAT THE SOCIAL ACTIVITIES AVAILABLE IN THEIR LOCAL AREA DON'T INTEREST THEM

9.6% AGED 55-69 / **8.2%** AGED 70+
Can't get to the venues where social activities are happening

6.1% AGED 55-69 / **3.9%** AGED 70+
People have negative attitudes about older people being involved

9.3% AGED 55-69 / **4.3%** AGED 70+
Costs involved are too high

34% AGED 55-69 / **35%** AGED 70+
The social activities available don't interest me

LONELINESS IN OLDER PEOPLE

5.3% AGED 55+
SAID THEY OFTEN FEEL LONELY

21% AGED 55+
SAID THEY FEEL LONELY SOME OF THE TIME

MEAN LONELINESS SCORE BY AGE IN COUNTY WEXFORD COMPARED WITH TILDA NATIONAL AVERAGE

This is a modified version of the UCLA Loneliness scale. Scores range from 0 (not lonely) to 10 (extremely lonely). Source for National data: TILDA (2014)

MEAN LONELINESS SCORE

2.5 / 2.0 / 1.5 / 1.0 / 0.5 / 0.0

NATIONAL
COUNTY WEXFORD
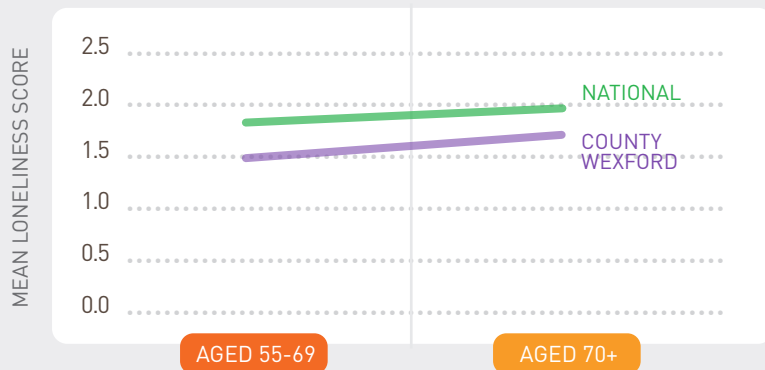
AGED 55-69 — AGED 70+

People in County Wexford aged 55-69 are on average slightly less lonely than the national average - while people aged 70+ report a similar level of loneliness

19

EDUCATIONAL ATTAINMENT

WE ASKED PEOPLE ABOUT THEIR PARTICIPATION IN LIFELONG LEARNING

11% OF PEOPLE WERE IN **INFORMAL EDUCATION OR CLASSES**

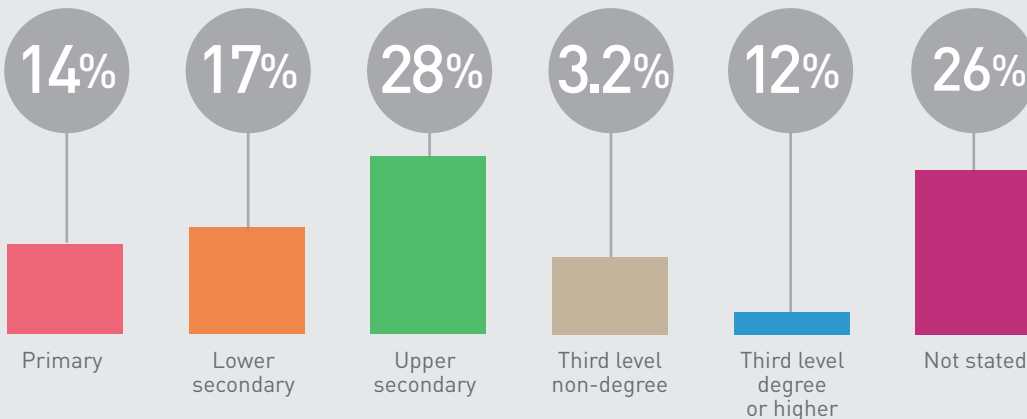**1.9%** OF PEOPLE PARTICIPATED IN TRAINING LEADING TO **A FORMAL EDUCATION**

HIGHEST LEVEL OF EDUCATIONAL ATTAINMENT AMONG SURVEY PARTICIPANTS

AGED 55+

14%	17%	28%	3.2%	12%	26%
Primary	Lower secondary	Upper secondary	Third level non-degree	Third level degree or higher	Not stated

Source: Census 2011

BARRIERS TO PARTICIPATION IN LIFELONG LEARNING

ALMOST **1** IN **4** PEOPLE AGED 55+ IN COUNTY WEXFORD EXPERIENCED A BARRIER TO PARTICIPATION IN LIFELONG LEARNING IN THE PAST **12** MONTHS

2.0% COSTS ASSOCIATED WITH TAKING THE COURSE

3.4% LACK OF TRANSPORT/ DISTANCE TO THE COURSE

13% NO SUITABLE OR INTERESTING COURSES AVAILABLE

1.8% RESPONSIBILITIES IN THE HOME

3.4% PERSONAL INCAPACITY OR ILL-HEALTH

5.7% OTHER BARRIER

RESPECT AND SOCIAL INCLUSION

PUBLIC ATTITUDES

WE ASKED PEOPLE ABOUT ATTITUDES OR BEHAVIOURS TOWARDS THEM AS PEOPLE
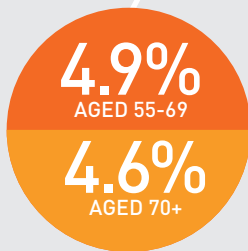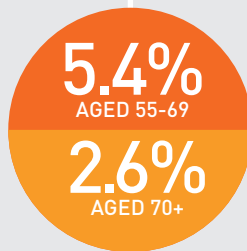
12% OF PEOPLE AGED **55+** IN **COUNTY WEXFORD** SAID THEY EXPERIENCED NEGATIVE ATTITUDES OR BEHAVIOURS TOWARDS THEM AS AN OLDER PERSON
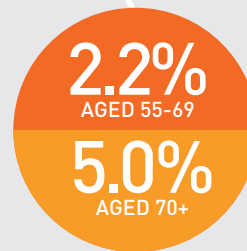
TOP **3** SOURCES OF NEGATIVE ATTITUDES AND BEHAVIOURS EXPERIENCED BY PEOPLE AGED **55+**

4.9% AGED 55-69
4.6% AGED 70+
Younger people

5.4% AGED 55-69
2.6% AGED 70+
Health professionals providing services

2.2% AGED 55-69
5.0% AGED 70+
Financial services providers

OVERALL THE **3** MOST COMMON SOURCES OF NEGATIVE ATTITUDES WERE FROM

4.8% YOUNGER PEOPLE

4.4% HEALTH SERVICE PROVIDERS

4.0% FINANCIAL SERVICE PROVIDERS

CIVIC PARTICIPATION

VOLUNTEERING

JUST OVER

1 IN **4** PEOPLE

AGED 55-69 **27%**

AND

ALMOST

1 IN **4** PEOPLE

AGED 70+ **23%**

VOLUNTEER AT LEAST **ONCE A MONTH**

17% OF THESE VOLUNTEER AT LEAST WEEKLY

OF THOSE WHO VOLUNTEER AT LEAST OCCASIONALLY

82% are satisfied with the amount of time they spend volunteering

12% would like to increase the amount of time they spend volunteering

72% are satisfied with the range of volunteering options on offer

THE TYPES OF ORGANISATIONS THAT PEOPLE VOLUNTEER WITH ARE:

AGED 55+

20% Community and social services (eg organisations helping people in need)

16% Educational, cultural, sports or professional associations (eg GAA)

14% Social movement (eg environmental/human rights organisation)

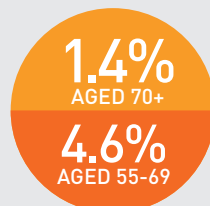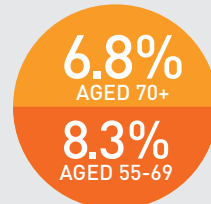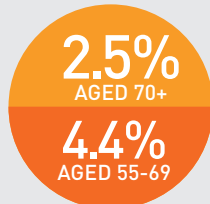**12%** Other voluntary organisations

POLITICAL ACTIVITIES

The EQLS (2012) found that

17% OF PEOPLE

AGED **55-69**

contacted a politician or public official and only

5% attended a protest

**2.5%** AGED 70+
4.4% AGED 55-69
Offered their views as an older person in an official capacity

6.8% AGED 70+
8.3% AGED 55-69
Contacted a politician or public official

1.4% AGED 70+
4.6% AGED 55-69
Attended a protest or demonstration

1.0% AGED 70+
4.8% AGED 55-69
Attended a meeting of a trade union, a political party or political action group

INFORMATION ACCESS
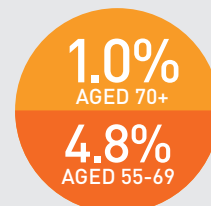
SOURCES OF INFORMATION

THE TOP THREE SOURCES OF INFORMATION FOR OVER 55s IN COUNTY WEXFORD
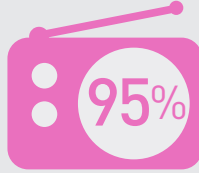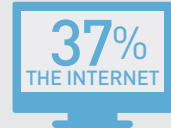
89% TELEVISION

95% NATIONAL RADIO
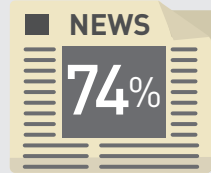
NEWS **74%** NEWSPAPERS

Less than half of people aged 55 and over in Co. Wexford get information from the internet

37% THE INTERNET

FOR PEOPLE AGED 55-69

90% TELEVISION
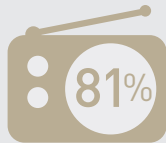
81% NATIONAL & LOCAL RADIO EQUALLY

FOR PEOPLE AGED 70+
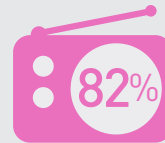
82% NATIONAL RADIO
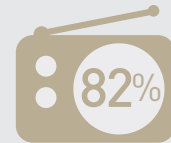
82% LOCAL RADIO

INTERNET USE

62% COUNTY WEXFORD RESIDENTS **AGED 70+** DID NOT USE the internet in the past **3 MONTHS** COMPARED TO **40%** PEOPLE **AGED 55-69**

52% PEOPLE **AGED 55-69** USED THE INTERNET MORE THAN WEEKLY

THE EQLS FOUND THAT **44%** **AGED 55-69** USED THE INTERNET (OTHER THAN FOR WORK) AT LEAST **ONCE A WEEK**

62% AGED 70+
40% AGED 55-69
DO NOT USE
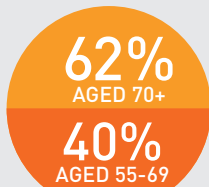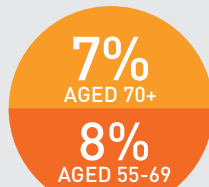
7% AGED 70+
8% AGED 55-69
MORE THAN MONTHLY (but not every week)
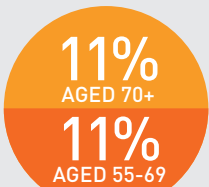
11% AGED 70+
11% AGED 55-69
MORE THAN WEEKLY (but not every day)
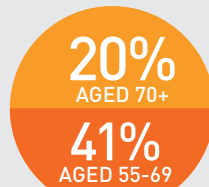
20% AGED 70+
41% AGED 55-69
EVERY DAY OR ALMOST EVERY DAY

NOTE:
'DO NOT USE' defined as those who said 'NOT APPLICABLE' to question about internet use

DIFFICULTY ACCESSING INFORMATION

MORE THAN **1** IN **10** PEOPLE **AGED 55+** HAVE DIFFICULTY ACCESSING INFORMATION ABOUT HEALTH OR SOCIAL CARE

DIFFICULTY GETTING INFORMATION ABOUT HEALTH OR SOCIAL CARE

12% AGED 70+
15% AGED 55-69

DIFFICULTY GETTING INFORMATION ABOUT LOCAL EVENTS AND ACTIVITIES

6.4%
12%

CARING FOR OTHERS

WE ASKED PEOPLE ABOUT HOW OFTEN THEY PROVIDE CARE TO OTHERS

1 IN 4 PEOPLE **AGED 55-69** AND **1 IN 7** PEOPLE **AGED 70+**

CARE FOR CHILDREN OR GRANDCHILDREN EVERY DAY OR WEEKLY

AGED 55-69

- 9.3%
- 15%
- 6.6%
- 69%

AGED 70+

- 4%
- 11%
- 6%
- 72%

Legend:
- EVERY DAY
- WEEKLY
- LESS THAN WEEKLY
- NEVER
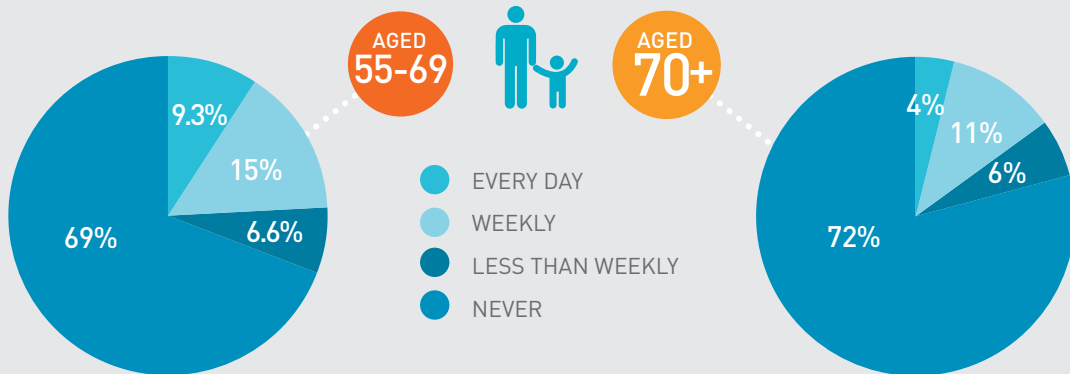
THE PERCENTAGE OF PEOPLE IN COUNTY WEXFORD AGED 55 AND OLDER WHO ARE INVOLVED IN CARING FOR CHILDREN AND GRANDCHILDREN IS SLIGHTLY LOWER THAN THE PERCENTAGES REPORTED IN THE EUROPEAN QUALITY OF LIFE SURVEY (EQLS) FOR IRELAND.

IN THE **EQLS** - 15% OF OVER 55s AND 7.2% OF THE OVER 70s ARE INVOLVED IN CARING FOR CHILDREN OR GRANDCHILDREN EVERY DAY

5.3% OF THOSE OVER 55

5.8% OF THOSE OVER 70
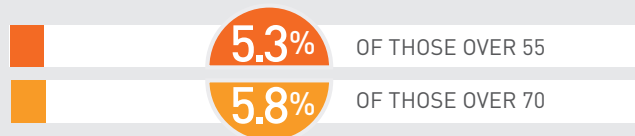
INVOLVED IN CARING FOR AN ELDERLY OR DISABLED RELATIVE EVERY DAY

CAREGIVER STRAIN

1 IN 7 OF PEOPLE **AGED 70+** DO **NOT** EXPERIENCE CAREGIVER STRAIN

MORE THAN 1 IN 4 PEOPLE **AGED 55-69** EXPERIENCE SOME LEVEL OF CAREGIVER STRAIN

CAREGIVER STRAIN IS MEASURED USING THE QUESTION "HAS YOUR OWN LIFESTYLE BEEN AFFECTED BY THE CARING THAT YOU PROVIDE IN ANY OF THE FOLLOWING WAYS?" THERE ARE 12 DIFFERENT ITEMS SUCH AS "SLEEP DISTURBED" AND "IT IS A FINANCIAL STRAIN"

3

SECTION 3 : METHODOLOGY

The target population for this survey includes all community-dwelling members of the population aged 55 and older in County Wexford. This sample did not include people aged 55 and older who were in long-term care or living in an institution at the time of survey. A multi-stage random-route sampling strategy was used to generate a sample of this population.

STUDY POPULATION
AND SAMPLE

• •

The target population for this survey includes all community-dwelling members of the population aged 55 and older in County Wexford. This sample did not include people aged 55 and older who were in long-term care or living in an institution at the time of survey. A multistage random-route sampling strategy was used to generate a sample of this population. This sampling approach involved several steps.

Firstly, a random sample of 50 District Electoral Divisions (DED) in County Wexford was selected as the primary sampling units (PSUs). Within each selected DED a starting address was selected at random. Beginning with this address a total of 10 interviews were to be completed in each of the 50 areas.

Detailed information on the approach that interviewers took to identify eligible households within each area for the survey is provided in Appendix 1. In summary, from their starting address, interviewers called to every fifth house. The interviewer asked to speak to a person aged 55 years or older in the household. One person aged 55 or older per household was invited to complete the interview. If there were two or more older people in the household then the interviewer applied the 'next birthday' rule to select one participant.

FIELDWORK AND
RESPONSE RATE

• •

A total of 502 interviews were conducted with participants aged 55 and older. Interviews were conducted in 2015.

The response rate is the proportion of selected households that included an eligible participant who completed an interview. Interviewers visited a total of 648 eligible households where a person aged 55 and older was resident. A further 280 households were visited but eligibility to participate in the survey was not determined. Based on the proportion of eligible households identified from the number of households visited, we calculated that 233 of these 280 would have contained a person who was eligible to participate. We included these households when calculating the response rate. A total of 501 interviewers were completed from 881 households, with a response rate of 57%.%.

DATA COLLECTION
METHODS

• •

Each participant completed a structured Computer-Assisted Personal Interview (CAPI) in their own home with a trained interviewer from Amárach Research. The interview contained questions on: age-friendly public spaces; experiences of discrimination; housing; safety and security; healthy ageing; health and social services utilisation;

participation in education and lifelong learning; active citizenship and volunteering; social and cultural participation; transport; and access to information. Participants were also invited to complete an additional, separate, paper-based survey on potentially sensitive topics. This included emotional wellbeing and elder abuse. This data will be available at the end of 2016.

ANALYTIC STRATEGY

This report presents descriptive data from the survey, including percentages and average values. In general, the results focus on the percentage of people aged 55+ who can be classified into a certain group, for example, those who report difficulty accessing specific services, or who volunteer. In a small number of cases participants did not respond to a survey item. These participants are excluded from the results for that survey question. Across all survey questions, no more than 15% of participants were missing a response.

PRESENTATION OF THE RESULTS

Throughout the report results are reported for different age groups and gender in order to illustrate key differences between groups in the population aged 55 and older. Results are, in the main, reported for two different age groups: 55-69; and 70+. Other age groups are reported where relevant. For example, uptake of the flu vaccine is reported for the target age group (age 65+).

NATIONAL BENCHMARKS

There are a number of national studies which collect data that is similar to this study. These include the Census, The Irish Longitudinal Study on Ageing (TILDA) and the European Quality of Life Survey (EQLS) and the Survey of Income and Living Conditions. Where applicable, we have reported this national data as a comparison or benchmark for the local data.

WEIGHTING

The response rate for the CAPI in County Wexford was 57%. Response rates typically vary among different groups within a given population such as different age groups or levels of education. This variation can lead to biased estimates when reporting results. This analysis included the application of sample weights which corresponded to the number of people in the population of County Wexford that were represented by each survey participant. Weights which were applied to the survey sample were estimated using the Census

(2011). The characteristics compared were age, gender, educational attainment (primary/secondary/third level) and marital status (married/not married).

All analysis was conducted using Stata Version 13.

LIMITATIONS OF THIS REPORT AND FUTURE ANALYSIS

The results reported here are broadly descriptive and associations between responses to the different survey items are not explored in detail. Further work will be undertaken to explore complex associations between the different variables recorded in the survey. In addition, future publications will compare results across counties. It is also important to note that while the data is broadly representative of the population aged 55+ in the community in County Wexford, it does not include, and is not representative of, individuals who live in institutional settings.

INTERPRETING DIFFERENCES BETWEEN GROUPS

The data reported in this report is based on a random sample of individuals aged 55+ living in County Wexford. Any differences that we see between groups within the county (e.g. between men and women or between different age groups), or between County Wexford and national figures, could reflect a real difference in the population as a whole, or could be due to random chance.

The size of a difference that is likely to be real rather than due to random chance depends on two issues:

1. The size of the groups we are comparing, and
2. How low or high the percentages that we are comparing are.

The Tables on the following pages provide a guide to how big the differences need to be for us to be confident that they are real differences. Table 1 should be referred to when comparing small groups, of about 250 individuals. In this report, this applies when we are comparing men versus women, and comparing age groups 55-69 versus age 70+. Table 2 should be referred to when comparing groups of 250-500 individuals (an age group in a county, or the whole county) to a national figure. In this report, this applies to comparisons between the county itself, and national data sources such as TILDA or EQLS.

TABLE 1: COMPARING SMALL GROUPS (of about 250 individuals)

INCLUDES: MEN COMPARED WITH WOMEN; AGE 55-69 COMPARED WITH 70+

HOW BIG IS THE DIFFERENCE?	How confident can we be that it is a "real" difference? (i.e., not due to chance)
9% OR MORE (percentage points)	Can be reasonably confident differences are real Example: 74% of those in the 70+ age group and 64% of the 55-69 group are dissatisfied with the availability of accessible toilets. We can be confident that this 10% difference is not due to chance.
5-8% (percentage points)	We need to be cautious with these differences. We can only be confident that they represent real differences if the percentages being compared are above or below a certain value.

Are both values being compared ...	Minimum difference needed	Example: 20% of the over 70s compared with 28% of those aged 55-69 felt positive about moving into an adapted type of housing. Both values are below 30%, therefore we can be confident that this 8% difference is a real difference between these two age groups.
Less than 30% or greater than 70%?	8%	
Less than 20% or greater than 80%?	7%	
Less than 15% or greater than 85%?	6%	
Less than 10% or greater than 90%?	5%	

LESS THAN 5% (percentage points)	Cannot be confident that these differences are real Example: 21% of women had an experience that left them concerned for their personal safety, compared with 17% of men. We cannot be confident that this 4% difference is real. This difference could be due to chance.

TABLE 2: COMPARING COUNTY DATA (250-500 people) AND NATIONAL DATA (>=1000 people)

INCLUDES: COMPARISONS BETWEEN THE COUNTY AND NATIONAL DATA SOURCES
(e.g. TILDA and EQLS)

HOW BIG IS THE DIFFERENCE?	How confident can we be that it is a "real" difference? (i.e., not due to chance)
7% OR MORE (percentage points)	Can be reasonably confident differences are real Example: 60% of people in the local authority area rated public transport as good or excellent, compared with 50% nationally. We can be confident that this 10% difference is not due to chance.
4-6% (percentage points)	We need to be cautious with these differences. We can only be confident that they represent real differences if the percentages being compared are above or below a certain value.

Are both values being compared ...	Minimum difference we can be confident is real	Example: 62% of over 70s in the local authority area have multiple chronic conditions, compared with 67% nationally. Both values are between 15% and 85%, and therefore we cannot be confident that this 5% difference is real.
Less than 25% or greater than 75%?	6%	
Less than 15% or greater than 85%?	5%	
Less than 10% or greater than 90%?	4%	

LESS THAN 4% (percentage points)	Cannot be confident that these differences are real Example: 14% of over 55s smoke, compared with 15% nationally. We cannot be confident that this 1% difference is real. This difference may to be due to chance.

APPENDIX: DETAILED DESCRIPTION OF IDENTIFYING ELIGIBLE HOUSEHOLDS

The steps taken by interviewers were as follows:

1. Within each district electoral division (DED) interviewers were given a starting address on (for example) Road 1. The interviewer called at this house and asked to speak to somebody aged 55 years or older. If there is an eligible occupant or if there was no response from the house, they made a note of the address and called back, up to four times.

2. To locate the next house, interviewers stood with their back to the front door, turned to their left and counted five doors along the road, and called at this fifth house on e.g. Road 1.

3. Interviewers continued in this manner, calling at every fifth house until they reached the end of the road; assuming they successfully identified an eligible occupant to complete an interview or noted non-responses.

4. At the end of Road 1 they turned Left on to Road 2, counted five houses from the last house visited on Road 1 and continued calling to every fifth house on Road 2 until the end of the road.

5. At the end of Road 2 interviewers turned Right on to Road 3 (counted five houses from the last house visited on Road 2), continued calling at every fifth house on Road 3 until the end of the road.

6. At the end of Road 3, the interviewer turned Left on to Road 4, and alternate right and left turns at the end of each road while keeping within the DED.

If a household was ineligible due to age of more than 55 years or the household refused to participate, was vacant or derelict, interviewers used the following procedure to locate the next house:

1. Interviewers stood with their backs to the front door, turned left and went to the next house. If they again met with an ineligible household or a refusal they continued next door to the left until they identified an eligible occupant or noted a non-response.

2. Once they obtained an interview or non-response interviewers reverted to the fifth house on the left rule (steps 2-6). This procedure was followed until the quota of 10 interviews was reached, up to a maximum of 50 households, within each assigned DED.

3. The address and outcome of each house visited was recorded (including refusals, ineligible, vacant/derelict, non-responses and completed interviews) on the response sheet by each interviewer.

APARTMENTS:
Interviewers are given a sheet with the total number of residential addresses in the first column and the target apartment or flat in the second column. If apartments are not numbered, and there are doorbells, they count the bells from top left to bottom right. If apartments are not numbered and there are no separate doorbells, they count the apartments from top left to bottom right as you face the main door of the building from the street.

RANDOM ROUTE RURAL AREA:

In a rural area where houses are more spread-out interviewers are supplied with a map of each relevant DED and given the address to call at within each DED.

HOUSEHOLD RESPONSE RATE:

In order to calculate the response rate it is important to identify which houses are excluded because they are ineligible (nobody age 55 years or older), households that could not be contacted (non-response) and which households were eligible (person aged 55 years or older) but which either co-operated or refused to participate in the survey. Interviewers record each address called at and the outcome using codes for refusals, ineligibles, vacant/derelict and non-contacts.

In relation to 'non-response' interviewers record the time called at, and the times at which they called back (up to 4 times on different days and times). They also record the final outcome after the 4 attempts i.e. not eligible due to age, refused, interview completed, or could not contact after 4 attempts. 10% -20% of interviews and adherence to random route are validated.

REFERENCES & DATA SOURCES

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Central Statistics Office (CSO) (2013) **Population and Labour Force Projections 2016-2046**. Government Publications.

Department of Health (2013) **Healthy Ireland. A Framework for Improved Health and Wellbeing** 2013-2025. Dublin: Department of Health.

Department of Health (2013) **The National Positive Ageing Strategy**. Dublin: Department of Health.

World Health Organisation (WHO) (2002) **Active Ageing: A Policy Framework**. Available at http://apps.who.int/iris/bitstream/10665/67215/1/WHO_NMH_NPH_02.8.pdf

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DATA SOURCE	CENSUS
Reference period	2011
Data collection frequency	Five year intervals
Coverage	De facto population i.e. the population recorded for each area represents the total of all persons present within its boundaries on the night of the Census, together with all persons who arrived in that area on the morning of Monday 11 April 2011, not having been enumerated elsewhere
Method of data collection	Self-completed form
Data content	Demography
Relevant policy areas	Healthcare, health, carers education, employment, transport, housing and living arrangements
References	http://www.cso.ie/en/census/ Barrett A, Savva G, Timonen V, Kenny R. (2011) Fifty Plus in Ireland 2011. First results from the Irish Longitudinal Study on Ageing (TILDA). Dublin: The Irish Longitudinal Study onAgeing. Nolan A, O' Regan C, Dooley C, Wallace D, Hever A, Cronin H, et al. (2014). The Over 50s in a Changing Ireland. Dublin: The Irish Longitudinal Study on Ageing.
Sample size	4,581,269 (total population)

DATA SOURCE	EUROPEAN QUALITY OF LIFE SURVEY (EQLS)
Reference Period	2011
Data collection frequency	Every four years
Coverage	The target population is all residents aged 18 and older, and the target sample size ranges from 1,000 to 3,000. A multi-stage, stratified random sampling procedure is used.
Method of data collection	Face-to-face questionnaire
Data content	Employment, income, housing and environment, family, health, work-life balance, subjective wellbeing and social equality.
Relevant policy areas	Family life, housing, income, life satisfaction, subjective-wellbeing, trust and social solidarity, poverty and social inclusion.
References	http://www.eurofound.europa.eu/surveys/european-quality-of-life-surveys-eqls/european-quality-of-life-survey-2012
Sample size	1051

DATA SOURCE	THE IRISH LONGITUDINAL STUDY OF AGEING (TILDA)
Reference Period(s)	Wave 1 (2009-2011); Wave 2 (2012-2013)
Data collection frequency	Every two years, Wave 3 due to finish data collection in 2015
Coverage	Community-dwelling adults aged 50+ at Wave 1 and 52+ at Wave 2, living in the Republic of Ireland (ROI). A random, clustered, stratified sampling is used to ensure population representative sample.
Method of data collection	Face-to-face Interviews in participants homes; self-completion questionnaire; nurse-led health assessment
Data content	Health, economic and social data
Relevant policy areas	Employment, Education and Lifelong Learning, Active Citizenship, Engagement in Activities, Transport, Healthy Ageing, Support and Care Services, Income, Homes, Ageism
References	TILDA data available from http://www.ucd.ie/issda/data/tilda/
Sample size	Wave 1: 8,175; Wave 2: 7,010