



‘Working together to build an Age Friendly Community for all’ The State of Ageing in BCP

October 2024

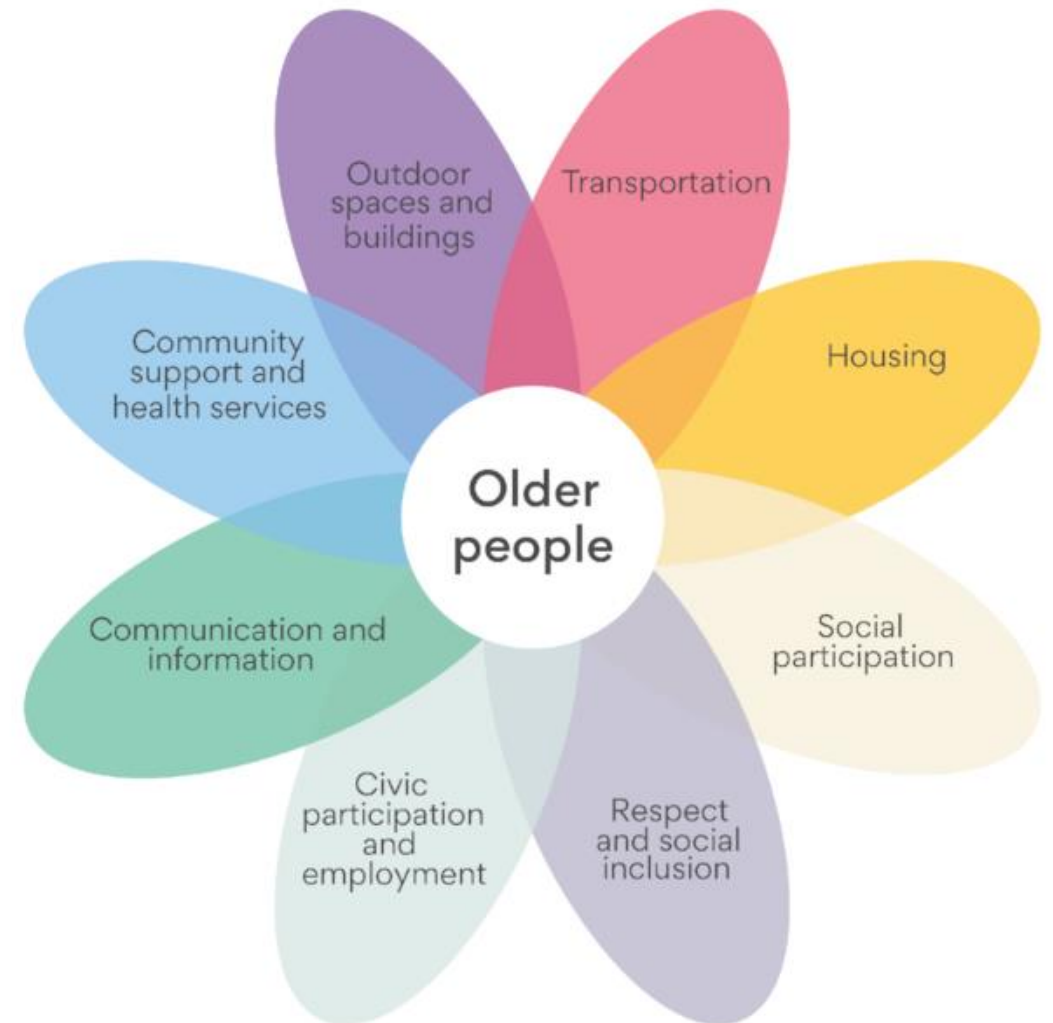


Research & Consultation Team
Marketing, Communication and Policy

Introduction

- This State of Ageing Report provides a detailed picture of older people and their experience of ageing in the BCP area. It covers people aged 50 and over in line with [national State of Ageing analysis](#).
- It presents a baseline for strategic planning to ensure all individuals can age well.
- It uses data from a variety of sources including the 2021 Census, to evaluate the experiences of older people and identify disparities among different groups.
- It also provides an insight into what an age friendly community means to older people from across the BCP area, based on conversations with local groups.
- It aims to inform policy and promote action; providing data-driven insights to guide policy and interventions; and encourage proactive measures to improve the quality of life of BCP's older population.
- This report is organised under themes that broadly follow the 8 domains of an age friendly community as recommended by the World Health Organization (WHO). These cover key areas that places and communities can address to better adapt to the needs of older adults.

WHO's 8 domains of Age-friendly Communities



Contents - State of Ageing in BCP

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& participation

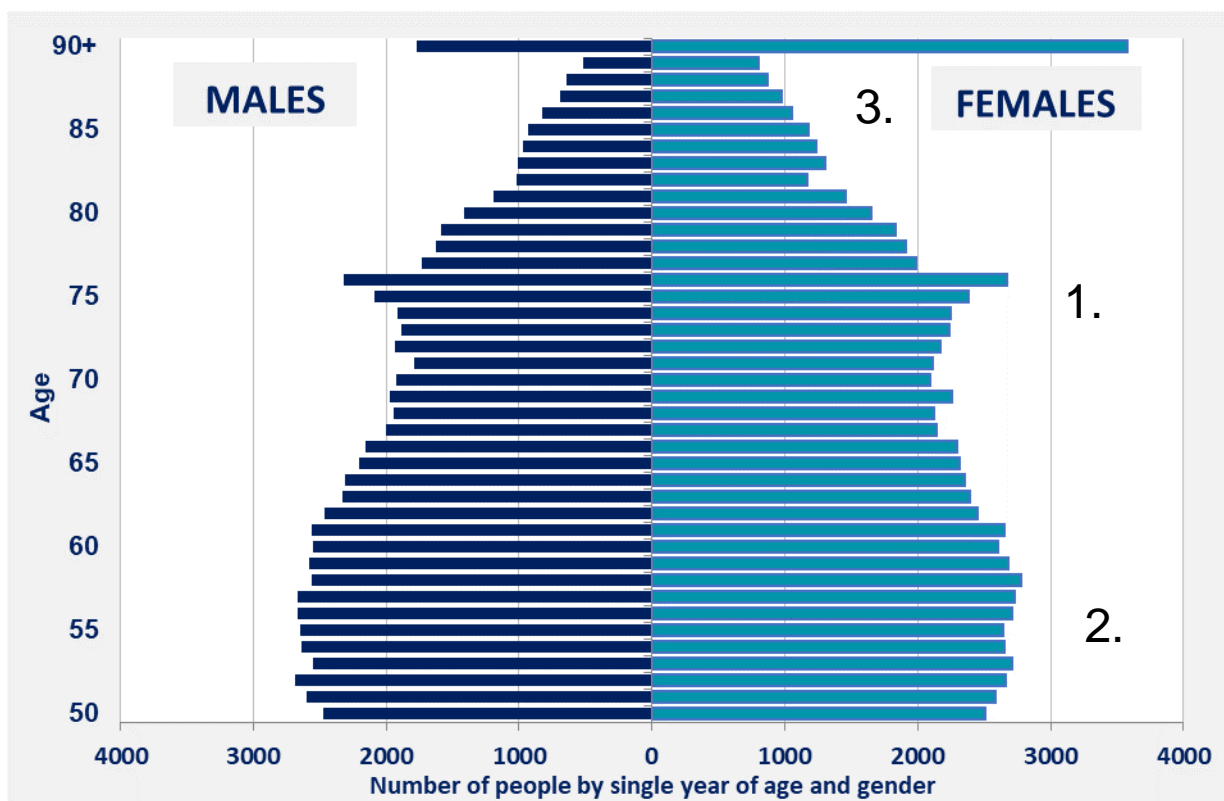
Communication
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Older people's voice and views

Demography - Our current older population in BCP

In the BCP area there are: **166 thousand** people aged 50+; **88 thousand** aged 65+; **14 thousand** aged 85+

Population of BCP by age group and gender – mid 2023



BCP has an older age profile than the national average. Over two fifths of the current BCP population is aged 50 and over (41%); around a fifth are aged over 65 (22%), and 3.4% are aged 85 and over. This compares to 38%, 19% and 2.5% respectively for England.

There is significant variation in numbers of older people within the older age bands. There are:

1. A large cohort in their mid 70s born in the post war baby boom;
2. Higher numbers in their mid to late-50s - the 60s baby boomers;
3. A higher proportion of women, particularly from age 85 onwards. 53% of the population aged 65-84 are female, compared to 61% of those aged 85+.

This variation has implications for current needs and demand for services as well as an impact on future population trends.

Source: ONS Mid-year population estimates 2023

Demography - Future growth of our older population

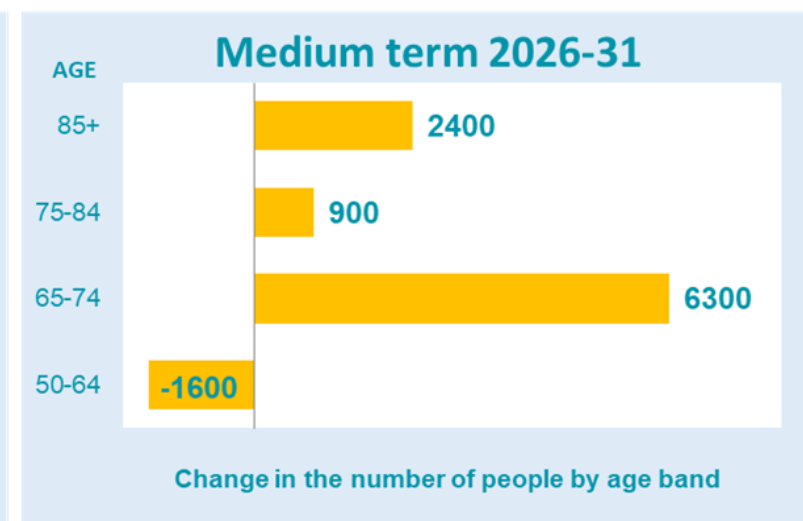
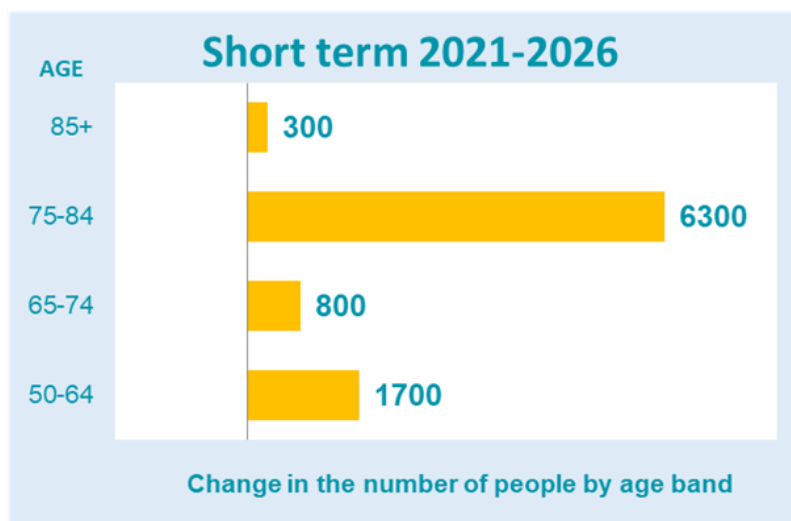
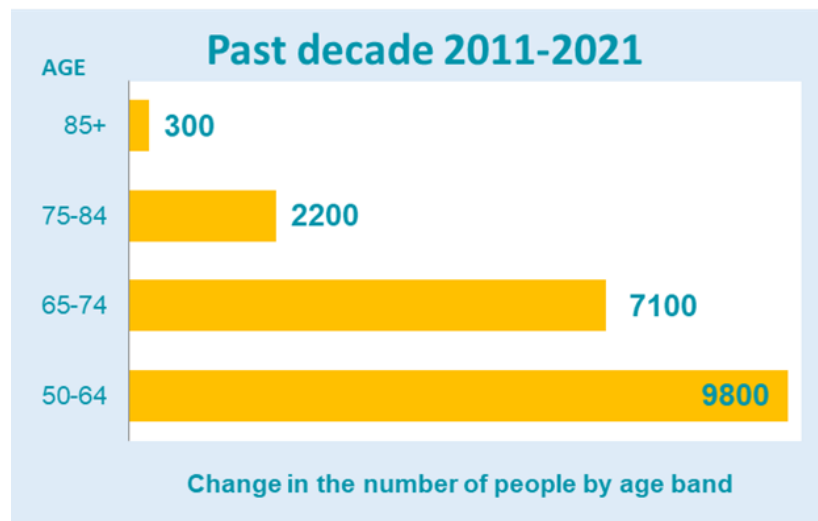
The number of over 50s could **increase by around 17 thousand**, a 10% increase between 2021 and 2031

Rising life expectancy and the transition into retirement of the 60s baby boom cohorts will result in a growing number of older people – both in numerical terms and as a proportion of the population. By **2031 there could be 181 thousand over 50s**, and **187 thousand by 2036**.

But the increase will not be uniform across age groups. In the short term most of the increase in the older population will be among people aged 75-84, as the post-war baby boomers reach their 80s. In the medium term, over half the increase will be people aged 65-74, as the 60s baby boom cohort hit their mid to late 60s, and almost a third will be people aged 85 or over.

BCP will need to consider how it deals with this demographic change to meet the needs and demands of this growing older population.

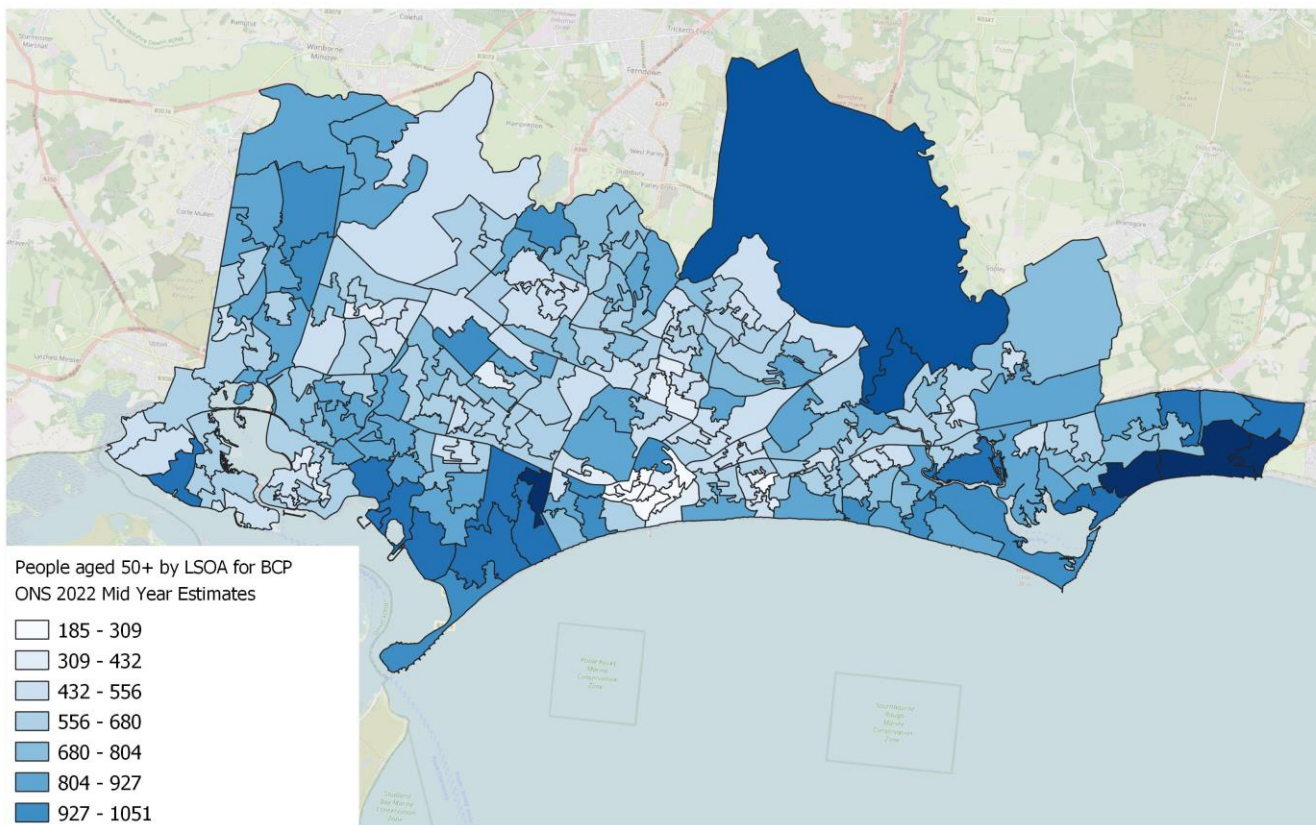
Past and forecast growth in the older population by age group 2011 to 2031



Demography - Distribution of older people living in BCP

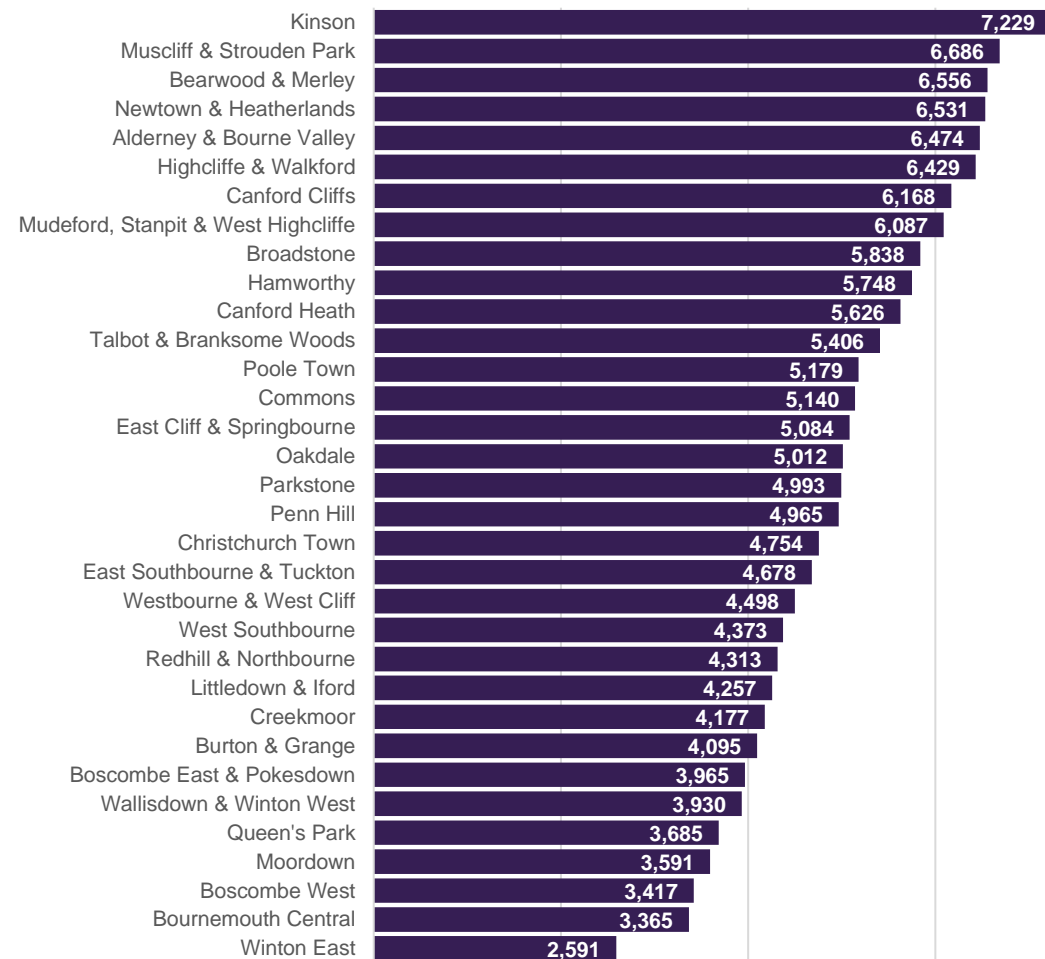
Older populations in BCP are concentrated along the coastal fringes of the Borough, within the Canford Cliffs and Highcliffe areas, and inland in the Broadstone and Commons Wards.

Number of people aged 50 and over by LSOA, 2022



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Number of people aged 50 and over by Ward, 2022

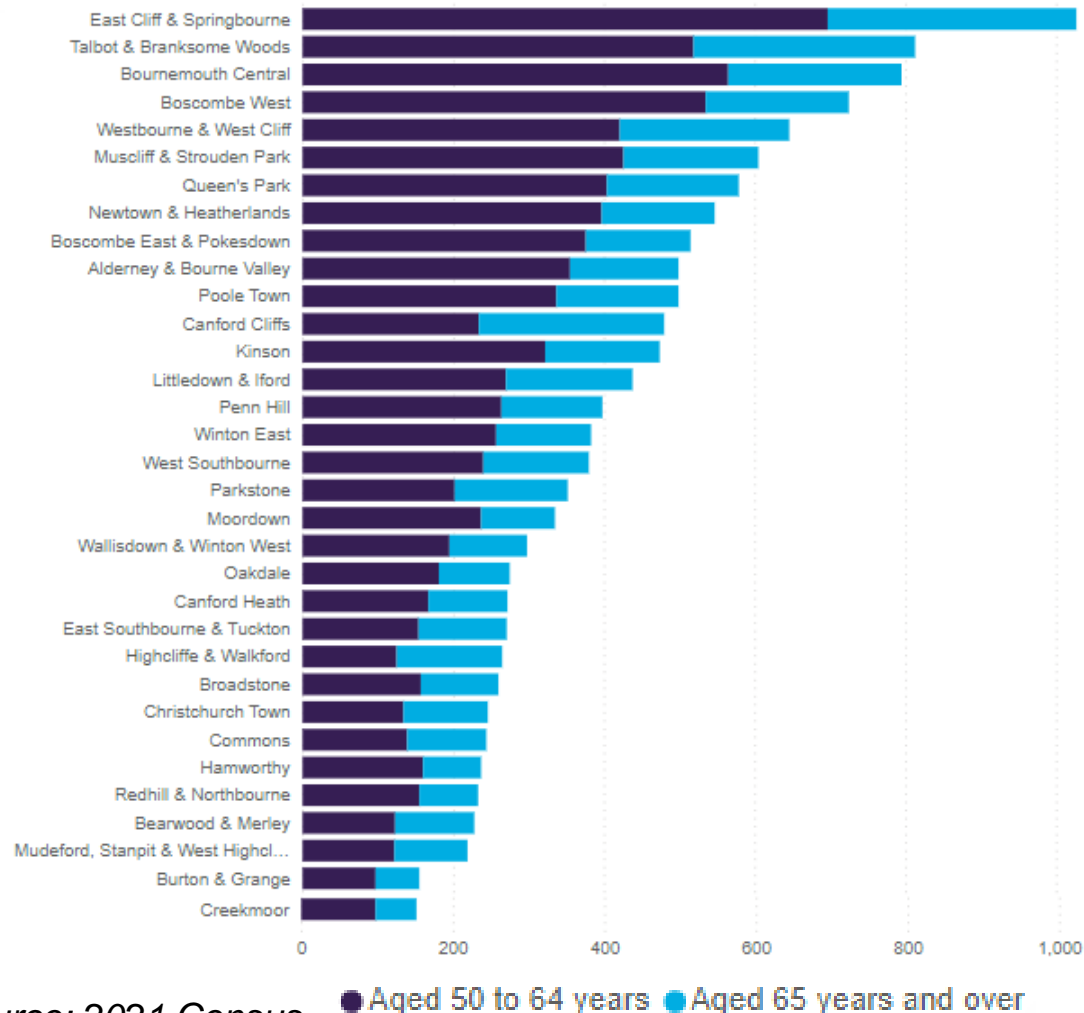


Source: ONS 2022 Mid-Year Estimates

Demography - Diversity of older people

In the BCP area 13,845 (8%) people aged 50+ identify as a minority ethnic group, compared to 18% of the total population

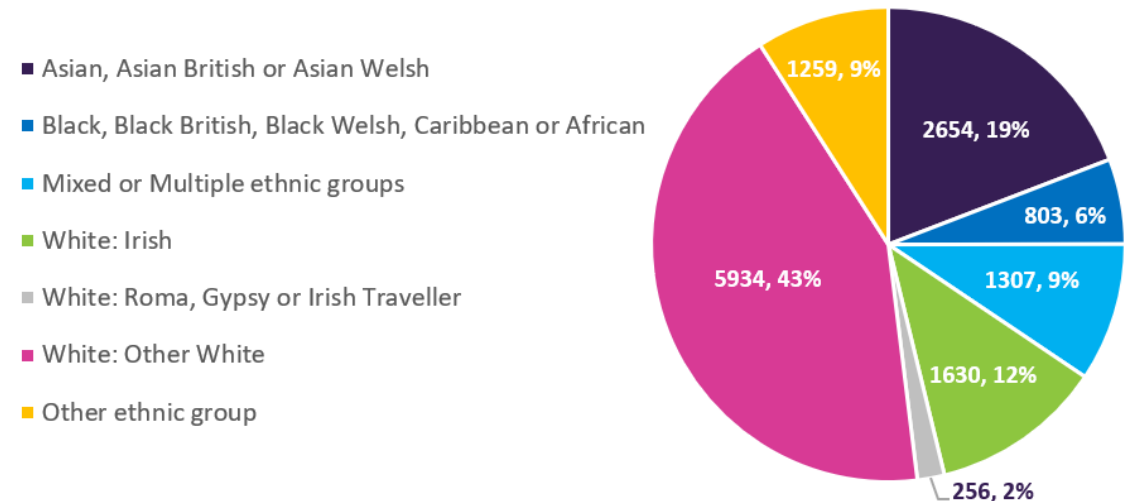
Minority ethnic population aged 50+, by ward



Our older population is becoming more diverse. According to the 2021 Census 6% of older people aged 65+ identified as a minority ethnic group, compared to 12% aged 50-64. The majority identify as White: Other White (43%), followed by Asian, Asian British or Asian Welsh (19%). There is significant variation in the number and proportion of older people from minority ethnic groups between wards, from just over 1,000 (40%) in East Cliff & Springbourne to around 150 (8%) in Creekmoor.

Just over 2 thousand (1.5%) older people aged 55+ identify as Lesbian, Gay, Bisexual, or Other (LGB+).

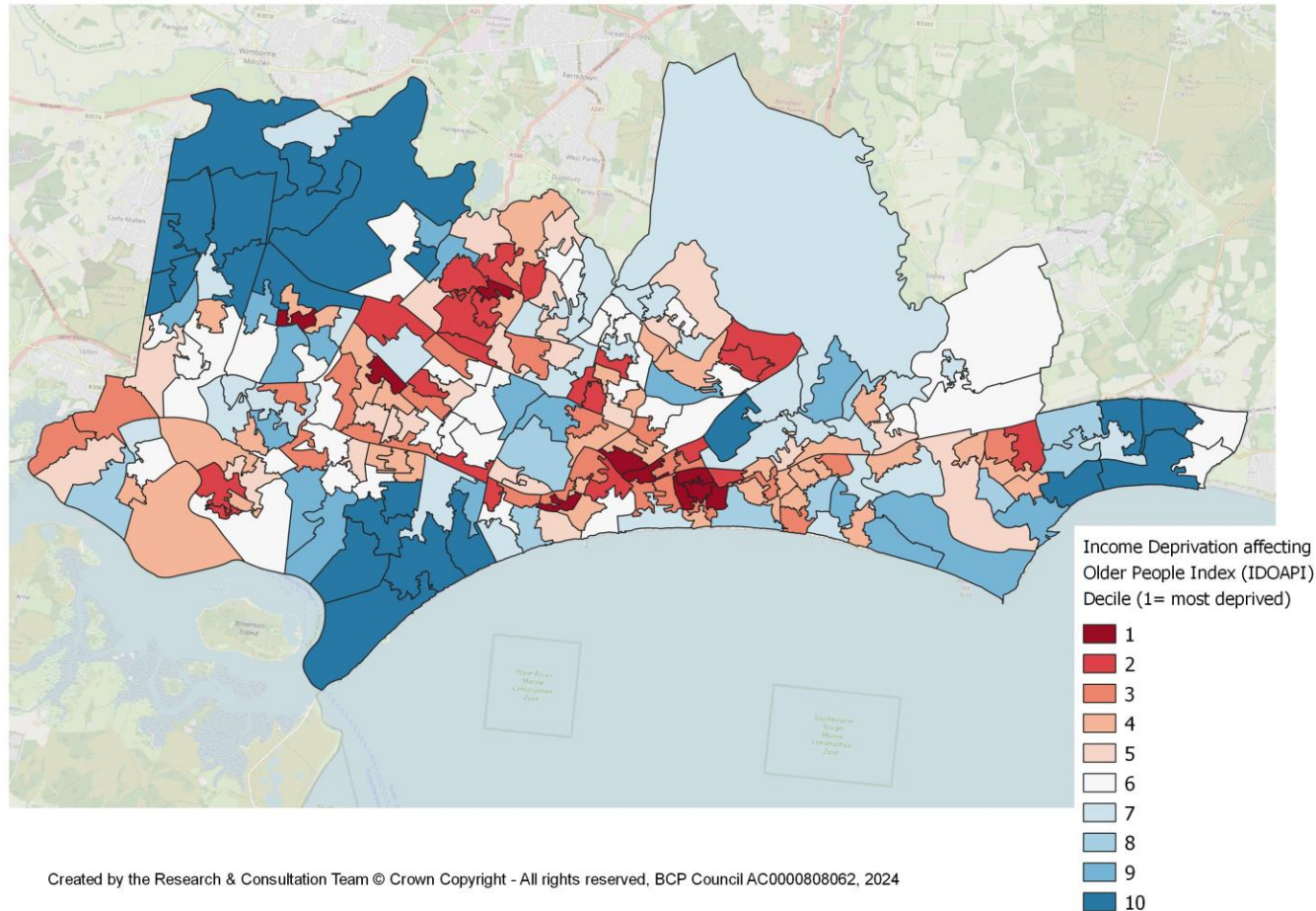
Minority ethnic population aged 50+, by ethnic group



Deprivation among older people

Around 13% of people aged 60+ in BCP are living in relative poverty. Boscombe West, Bournemouth Central, East Cliff & Springbourne, and Kinson wards have the highest levels of income deprivation affecting older people.

Income Deprivation Affecting Older People Index (IDAOPI) by LSOA



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Source: *Indices of Multiple Deprivation 2019*

BCP is a relatively prosperous area, yet significant inequalities and pockets of deprivation exist. Estimates suggest around 13% people aged 60+ are living in relative poverty in BCP. Given the strong association between deprivation and poorer outcomes, it is important to understand where these neighbourhoods lie to target services and resources most effectively.

The Income Deprivation Affecting Older People Index (IDAOPI), measures the proportion of older people aged 60 or over living in relative poverty within small geographical areas called LSOAs. 31 of the 233 LSOAs in BCP fall within the most deprived 20% of areas nationally.

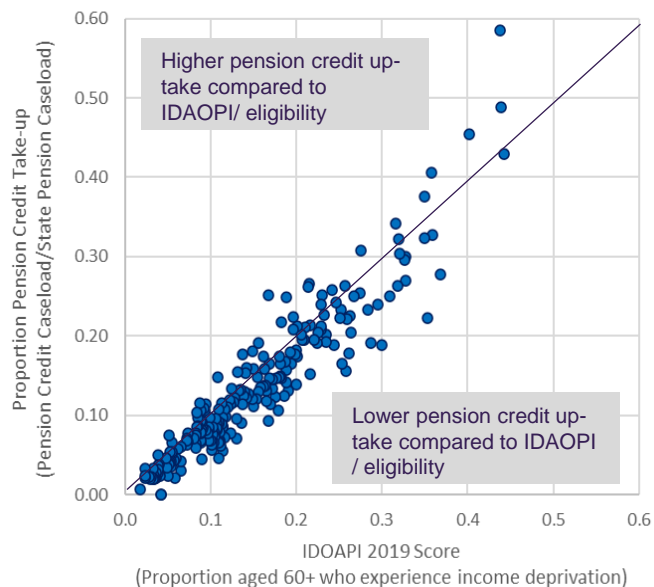
The percentage of older people living in relative poverty varies significantly across neighbourhoods from 2% to 44%. Areas with the highest levels of relative poverty generally lie within Boscombe West, Bournemouth Central, East Cliff & Springbourne, and Kinson wards.

Income – improving pension credit up-take

9,173 people in BCP received pension credit in Aug 2023, 11% of the state pension caseload.

Pension Credit brings greater security to people's lives giving them a reliable 'top up' to their income. Also, research has shown a strong connection between low Pension Credit up-take and increased NHS and social care spending. Therefore, it is important to understand where up-take for those who are eligible is lowest. National estimates suggest 6 out of 10 people entitled to pension credit claimed the benefit. Older people who either care for someone else or are in receipt of a disability benefit, those aged 75+ and single female households are more likely to be eligible for Pension Credit. This matches what we know about income poverty in later life (Independent Age 2022).

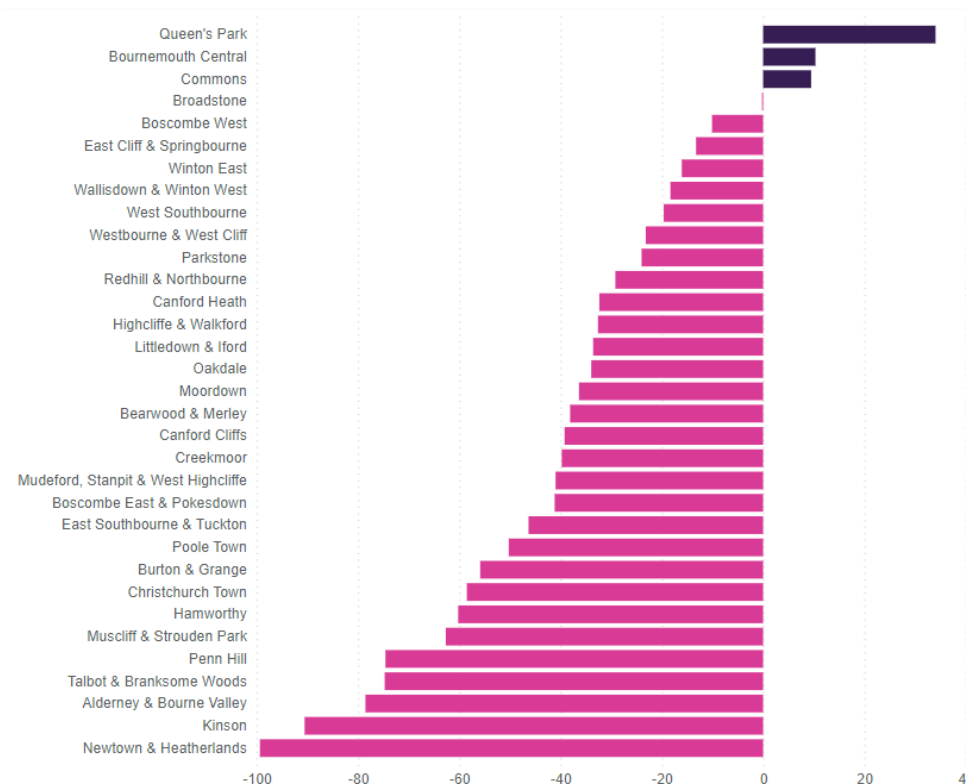
Relationship between pension credit up-take and IDAOPi - Proportion of older people 60+ living in relative poverty



Local comparison of estimated pension credit up-take (DWP Aug 2023) and the proportion of older people 60+ living in relative poverty (IDAOPi 2019) at LSOA level shows a clear relationship between the two.

It also suggests areas where pension credit up-take could be improved. Areas with the highest estimated shortfall in pension credit claimants lie within Newtown & Heatherlands, Kinson, Alderney & Bourne Valley, Talbot & Branksome Woods, and Pennhill wards.

Estimated shortfall in PC claimants, by ward



Health inequalities

Significant health inequalities exist in BCP with more deprived areas having poorer health and lower life expectancy.

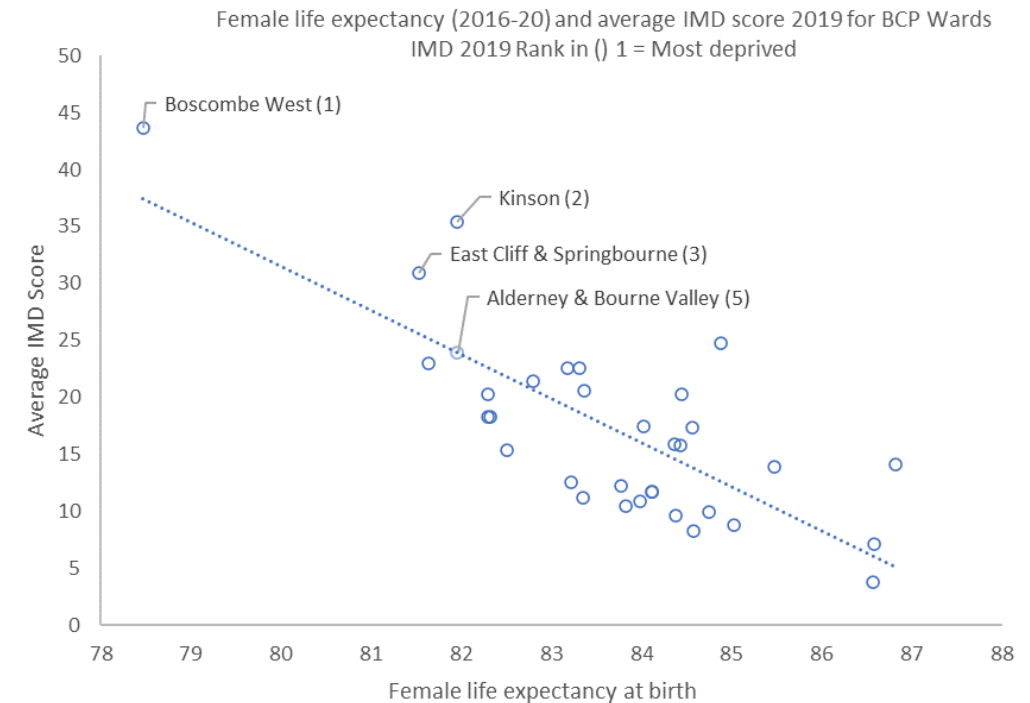
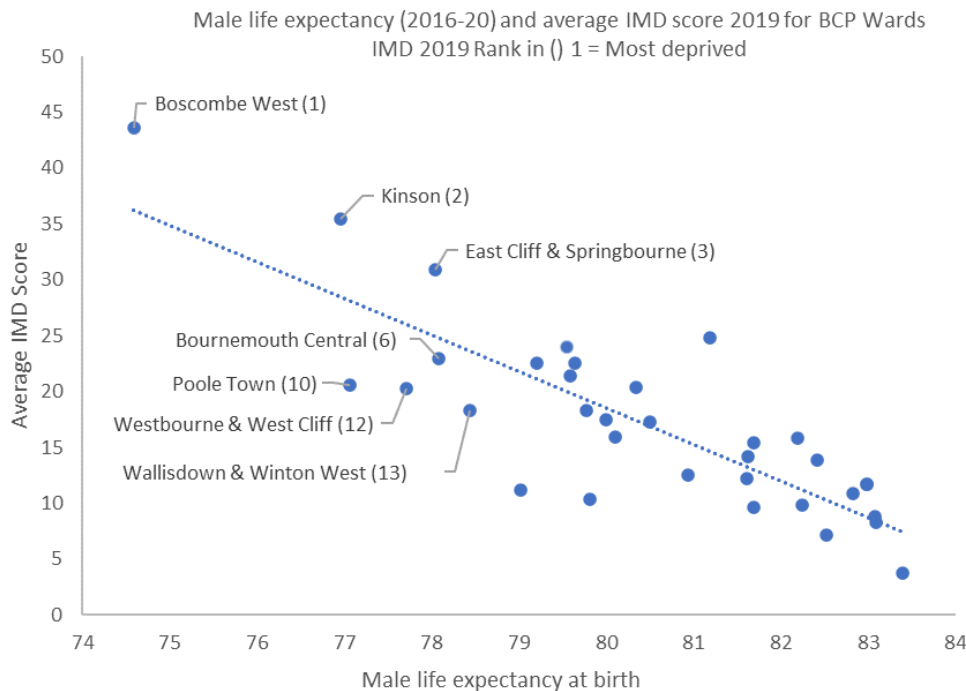
There is a clear social gradient in life expectancy for men and women in the BCP area, as there is across England. Mapping life expectancy against average deprivation (IMD) scores at ward level, shows a clear correlation between deprivation and male and female life expectancy. Life expectancy is lower in the more deprived areas (with a higher IMD score and rank). Wards with significantly lower life expectancy for males and females are highlighted below. The difference in life expectancy between the most and least deprived quantiles of LSOAs in the BCP area was 6.9 years for males and 6.4 years for females in 2020-21.

Overall male life expectancy at birth for BCP 2020-22

79.4

Overall female life expectancy at birth for BCP 2020-22

83.5



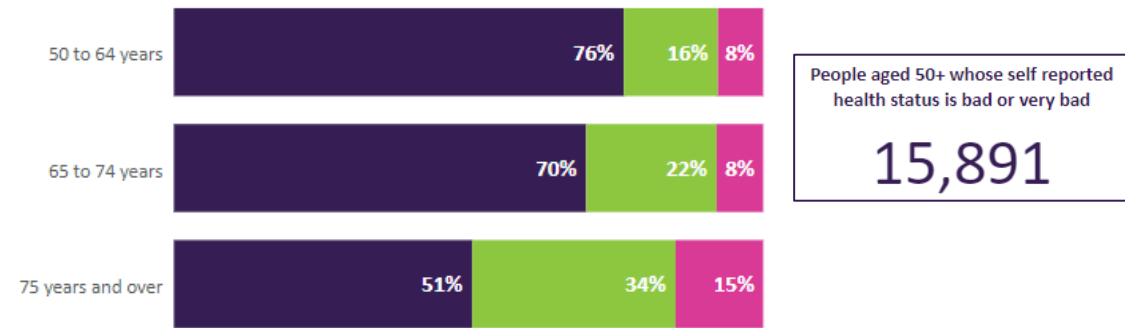
Source: Local health – Public Health Fingertips (Wards labelled above have significantly lower life expectancy than BCP overall)

Health - Disability and health status in older age

Around 16 thousand people aged 50+ rate their health as bad or very bad, and 21 thousand are disabled and limited a lot by their disability. Health status declines and disability and ill-health become more severe and limiting with increasing age.

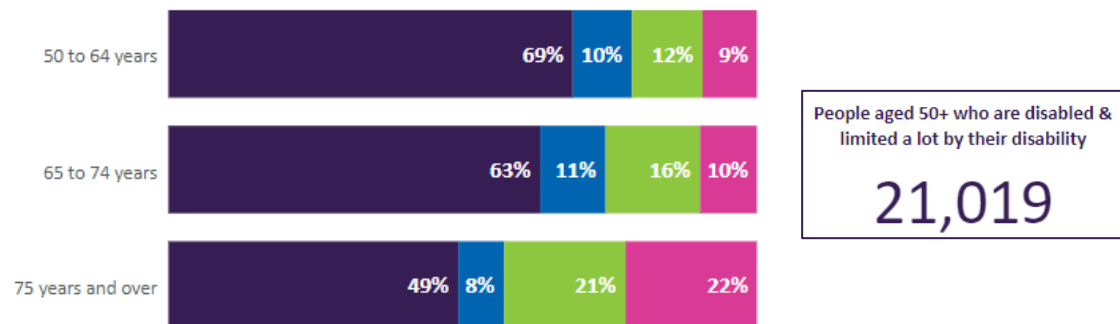
Self reported health status by age

● Very good or good ● Fair health ● Bad or very bad



Disability status by age

● Not disabled ● Has L-T physical or mental health condition ● Disabled: activities limited a little ● Disabled: activities limited a lot



Source: 2021 Census

While most people report being in very good or good health, from age 75 self-reported health status declines as levels of disability and ill-health increase. This can compromise the quality of life for older people.

According to the 2021 Census there are around 16 thousand people aged 50 or over in BCP whose health status is bad or very bad. The proportion in bad or very bad health increases to 15% for those aged 75 years and over, from 8% at age 65 to 74.

There are around 21 thousand people aged 50 or over whose disability limits their day-to-day activities a lot. This represents around a tenth of people aged 50 to 74 and over a fifth aged 75 or over.

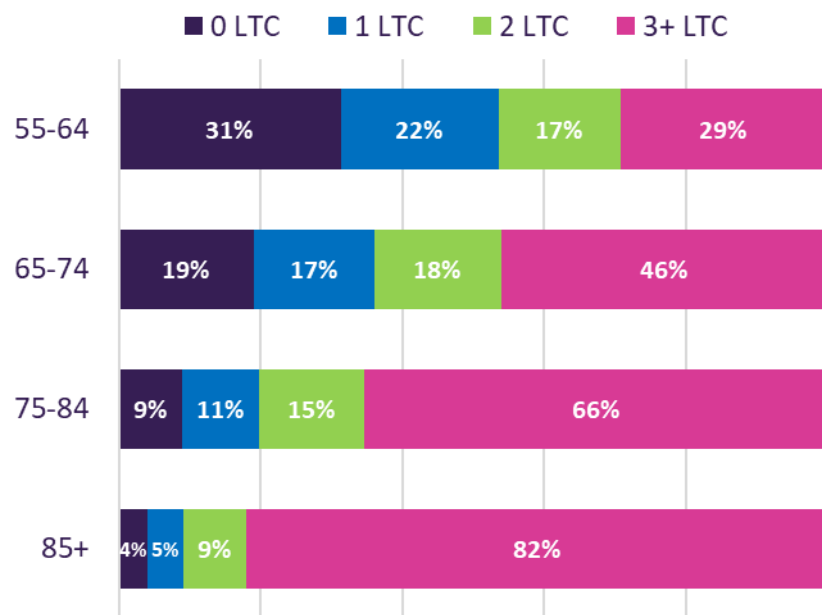
This is particularly significant given the growth in the population aged 75-84 in the short to medium term, and aged 85 and over in the longer term. As the older population increases, the number of people living with ill health and with multiple long-term conditions will increase too. This will generate significant additional demand for future care and support services.

Health - Long-term conditions affecting wellbeing

In BCP 115 thousand people aged 55 or over have at least one LTC. These can present significant challenges to people's lives. Supporting people to delay the onset and manage their LTCs is vital to maintaining health and independence.

Older people are more likely to have multiple long-term conditions (LTC), which may compromise their quality of life. LTCs can present challenges in their social lives, psychological health, and activities related to self-care, domestic lives and mobility. These present difficulties not just for individuals but also for families, and care and support services.

Number of long-term conditions by age group

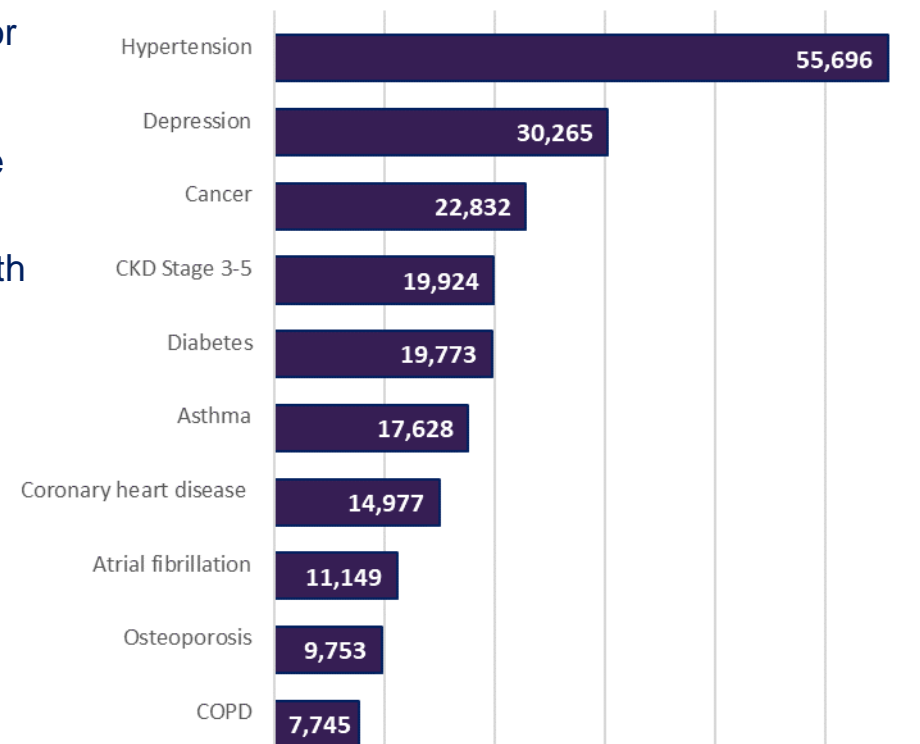


Source: DiiS March 2024

In the BCP area 115 thousand people or 80% aged 55 or over have at least one LTC. The proportion of people with 3 or more LTC increases from 29% aged 55-64 to 82% aged 85+. The top ten LTC for people over 55 are shown on the right.

Health related behaviours such as good diet and exercise, stopping smoking, and reducing alcohol consumption as well as social interaction can be effective in helping to prevent or improve a number of these conditions.

Top 10 long-term conditions 55+ age group



Health - Health related behaviours in later life

There are around 33 thousand smokers (10.1%) aged 18+ in BCP, and while a high proportion of over 55s are active, 30% are still relatively inactive doing <30 mins exercise a week.

Smoking prevalence

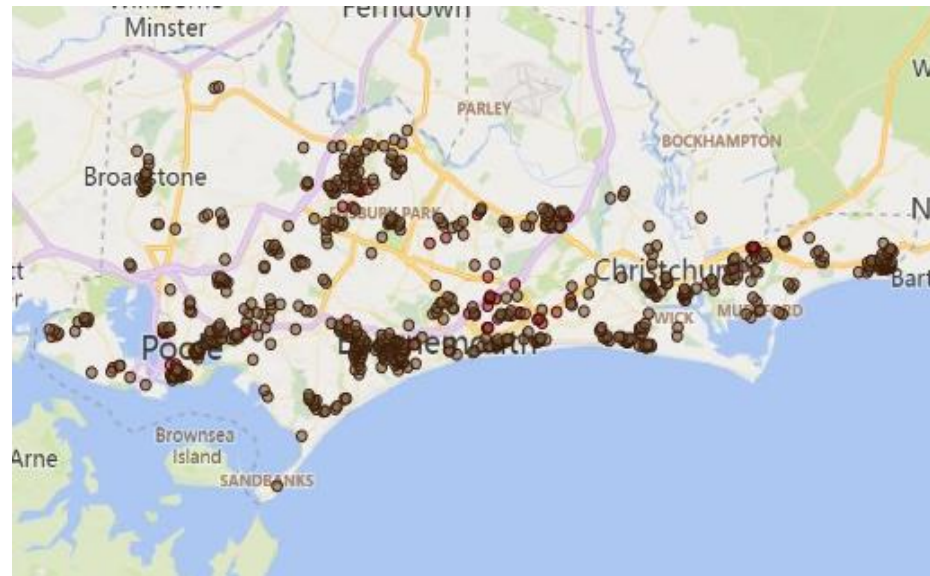
Smoking prevalence in
adults aged 18+
APS 2022

10.1%

Smoking prevalence is lower in BCP (10.1%) than both England and the South West, with an estimated 33 thousand smokers aged 18+. The proportion is higher for people in with serious mental illness and those in routine/manual occupations.

MOSAIC is a population Segmentation Tool which suggests two older population groups who are more likely to smoke. These are 'Municipal Tenants' and 'Vintage Value'. Municipal Tenants are generally aged 56-64 urban residents renting high density housing from social landlords. Vintage Value are older people aged 66+ with limited pension income, mostly living alone. They are largely found in Poole Town, Kinson, Westbourne and West Cliff, northern parts of Canford Cliffs and East Cliff & Springbourne Wards.

Distribution of Mosaic Groups 'Municipal Tenants' & 'Vintage Value'



Levels of physical activity

Active over 55s who did at
least 150 mins of physical
exercise a week 21/22

60%

Inactive over 55s who did
< 30 mins of physical
exercise a week 21/22

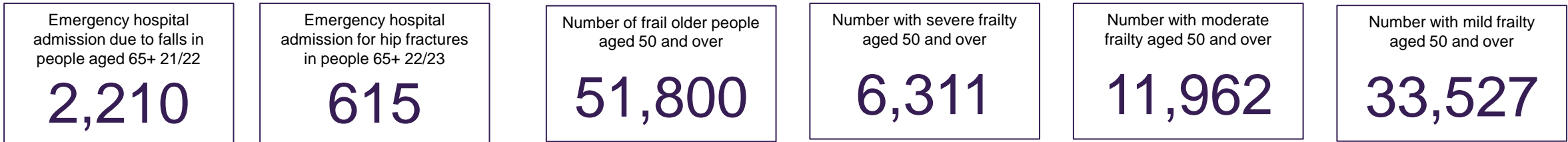
30%

The Sport England Survey for 2021/22 indicates a high proportion (60%) of over 55s in BCP were active and did at least 150 minutes of physical activity a week. Similar to levels for England. Levels reduced slightly to 53% for those aged 75+.

75% of over 55s felt it was important to do sport or exercise regularly, 80% felt they had the capability, and 83% felt they had the opportunity to be physically active. Yet 30% of older people 55+ are still relatively inactive, doing less than 30 mins a week.

Health - Frailty and falls

BCP has significantly higher rates of emergency admission for falls and hip fractures than England. 51,800 (33%) people age 50+ live with frailty in BCP, frailty is a major risk factor for falls and loss of independence.

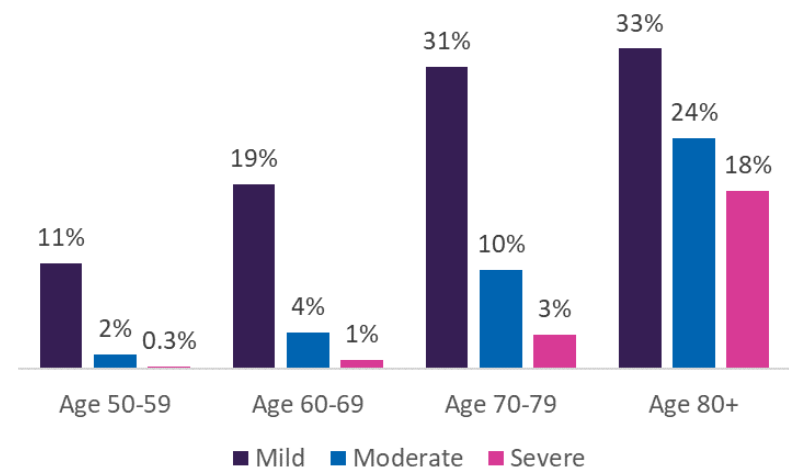


Falls are the biggest cause of emergency hospital admissions for older people. They can have a major impact on long term outcomes, including loss of independence and admission to residential or nursing care, especially if they result in hip fracture.

Emergency hospital admission due to falls and hip fractures for people aged 65+ in BCP, are significantly higher than both England and the South West.

Falls prevention initiatives are key to enable older adults to live independently for longer and reduce emergency hospital admissions.

% population by frailty level and age group



Source: Public Health Fingertips & DiiS March 2024

Frailty is progressive with age and associated with greater prevalence of adverse health outcomes, including mortality, disability, worsening mobility, falls, and hospitalization.

BCP has a high number of frail older people; 51,800 (33%) of people aged 50 and over. Almost two thirds have mild frailty, 23% moderate and 12% severe frailty.

It is critical people are aware of and have access to the right support suitable to their level of need. This may be from families, carers, community and voluntary sector organisations as well as health and care services.

Health - Dementia

4,236 (4.87%) people aged 65+ had a dementia diagnosis in BCP, a rate significantly higher than England.

Recorded dementia prevalence among people aged 65+ 2020

4.87%

Number of people diagnosed with dementia aged 65+ 2020

4,236

Estimated dementia diagnosis rate for people aged 65+ 2023

61.1%

Proportion with dementia diagnosis who live in a care home 2024 (Pan Dorset)

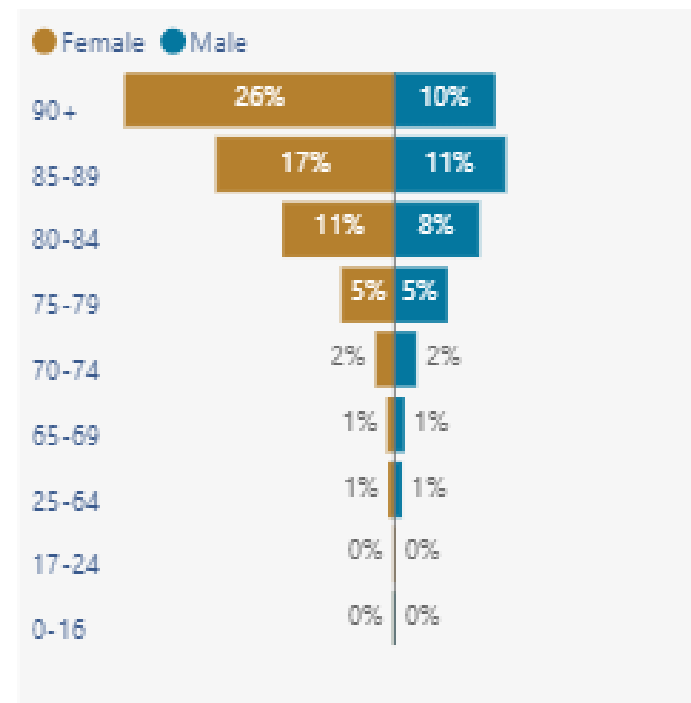
46%

BCP has significantly higher rates of recorded dementia prevalence among those aged 65+ (4.87%) than England (3.97%), and the highest rate in the South West. The estimated dementia diagnosis rate of 61.1% in 2023, remains below the national benchmark of two thirds. This benchmark represents the government's commitment to increase levels of formal diagnosis. The rationale being that timely diagnosis enables people with dementia, their carers, and healthcare staff to work together to improve health and care outcomes. Also, for people to age well with dementia steps are needed to include people, to reduce the stigma around the condition, and to offer support to sustain social networks.

The 2020 Lancet Commission Report found 40% of dementia cases might be attributable to potentially modifiable risk factors which could be prevented or delayed. These risks were: unmanaged hypertension, hearing impairment, smoking, obesity, depression, physical inactivity, diabetes, infrequent social contact, alcohol consumption, traumatic brain injury, and air pollution. Many of these risks cluster around inequalities, which occur particularly in lower socio-economic groups and in vulnerable populations.

The proportion with dementia increases with age and is especially prevalent in women.

Age & gender breakdown – Pan Dorset 2024



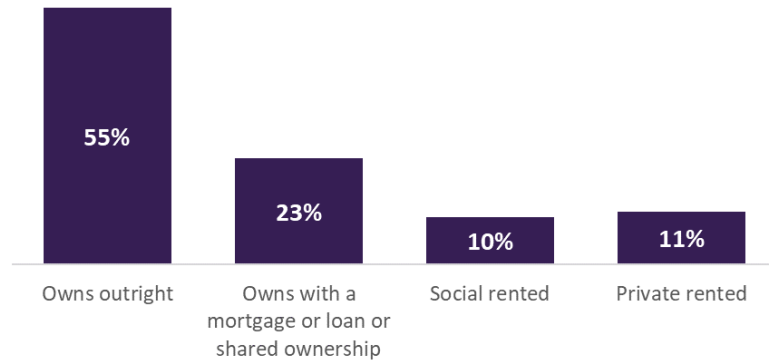
In Dorset 46% of people with a dementia diagnosis live in a care home.

Source: Public Health Fingertips & DiS 2024

Housing - changing tenure of older households

The majority of older people age 50+ in BCP own their own home, but an increasing proportion are private renters.

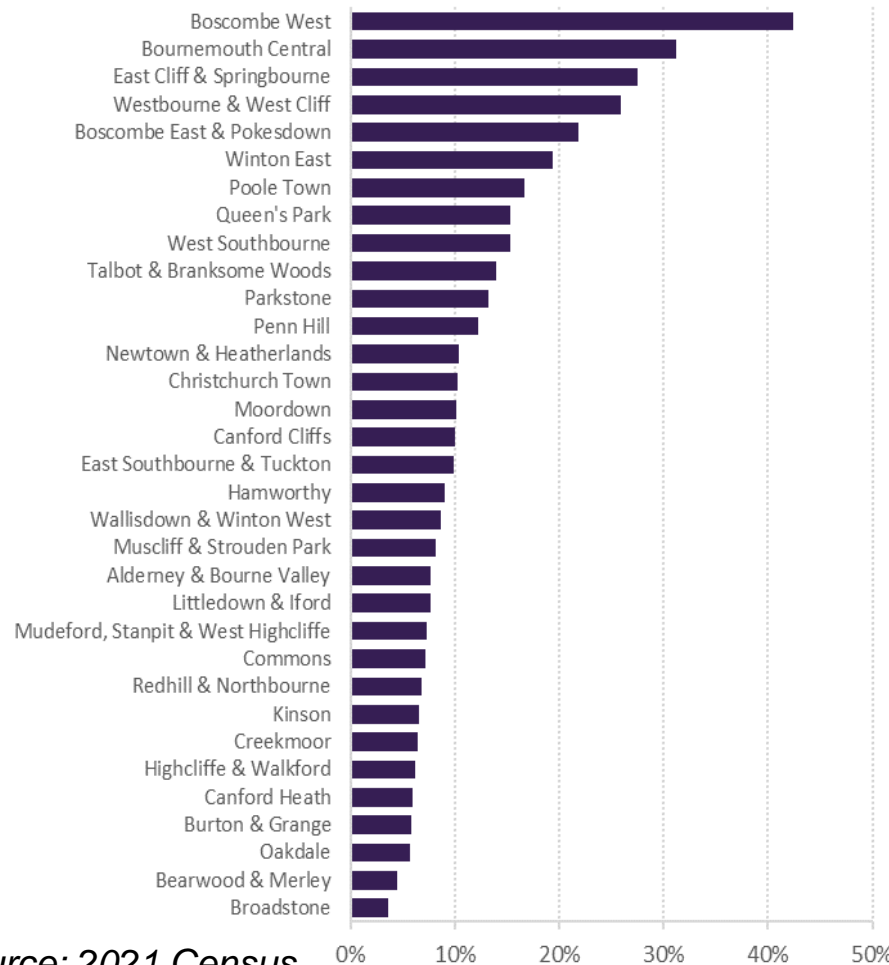
Housing tenure of older people aged 50+, BCP



Most older people aged 50+ in BCP own their home outright (55%), but increasing numbers have a mortgage (23%) or live in private rented accommodation (11%). 10% live in social rented housing.

BCP had among the highest percentage increase in older private renters over the last decade (2011-21 +10%), while older social renters have decreased (-12%) (Independent Age 2024). Given the trend of lower home ownership in younger populations this trend is likely to continue.

Percentage of older people aged 50+ living in private rented accommodation in BCP by Ward



Source: 2021 Census

Private renters have less choice in where they live, and the sector is the most expensive in terms of housing costs. Older renters have therefore become polarised in more deprived areas owing to the housing crisis.

Wards with the highest number and proportion of older private renters are Boscombe West (42%), Bournemouth Central (31%), East Cliff & Springbourne (27%), and Westbourne & West Cliff (26%).

Older private renters age 50+ also have poorer health with 65% in 'good health' compared to 73% for older homeowners in BCP. Older people living in social rented housing have the worst health status with 42% stating they were in 'good health'.

Housing - decent homes

Meeting the housing needs of the growing older population, ensuring homes are warm and safe, is a key issue for BCP. 15% of homes are classified as non-decent and 23% of homes with older adults had a poor EPC rating.

Estimated percent non-decent homes in BCP 2019

15.2%

Older households aged 66+ with EPC Band C or below 2021

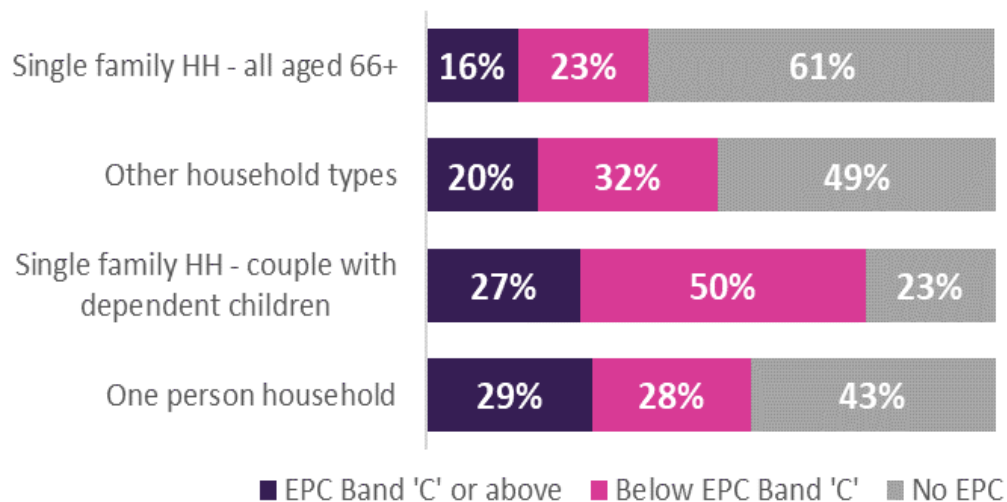
23%

Households in BCP who experienced fuel poverty 2021

11.3%

EPC rating by household type

Rating 'A' is most efficient and 'G' least efficient



At a basic level homes should be warm and safe. In BCP 15.2% of homes were classified as non-decent, 16.7% in England in 2019.

Households with older adults are more likely to be living in lower energy efficient homes. 16% of homes with people aged 66+ in BCP had EPC band C or above, and over a fifth (23%) were below EPC band C. But a high proportion of older households (61%) had no EPC rating as EPCs are only required when homes are sold or let.

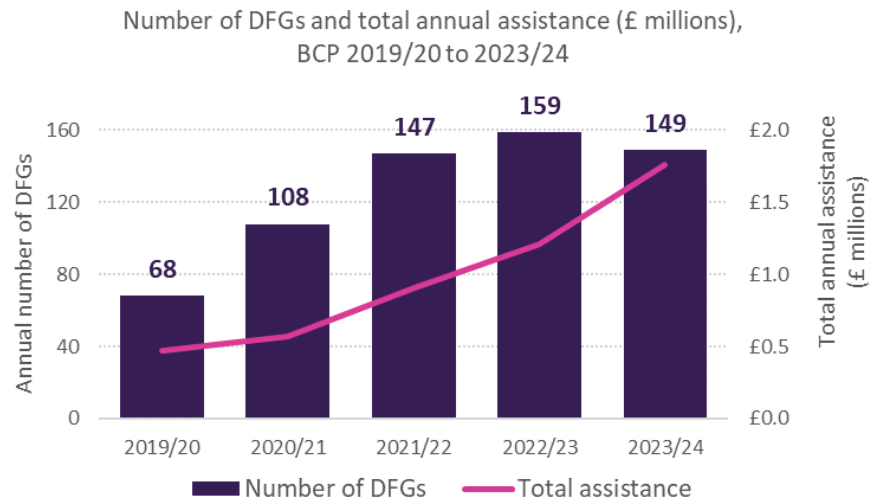
Lower energy efficiency makes homes harder to keep warm and more expensive to heat. 6 in 10 (59%) older people are likely to cut back on energy usage, because of the rising cost of living. This can increase the risk of adverse outcomes, such as respiratory problems, poor mental health, increased risk of falls and exacerbate long-term conditions.

11.3% of households in BCP experienced fuel poverty in 2021, compared to 13.1% in England. 10% of excess winter deaths have been attributed to fuel poverty.

Housing – accessible homes

A higher proportion of older adults have disabilities, and higher needs in terms of accessibility and mobility. The BCP Housing Needs Assessment predicts a 42% increase in people aged 65+ with mobility issues to 2038.

Understanding diverse needs, encouraging inclusive design, and supporting home adaptations are all necessary to ensure homes are suitable for our aging population.



Disabled facilities grants (DFG) are available to help disabled occupants with the cost of adapting their homes to meet their care needs. Home adaptations are shown to significantly improve quality of life and reduce health and care costs. In BCP 149 DFGs were completed in 2023/24 (note this covers all age groups). The number of DFGs completed has fallen, despite the budget increasing overall to around £1.8 million.

Source: BCP Service Stats for DFGs and BCP Draft Local Plan March 2024

Number of new homes to be built
annually in BCP to 2028/29

1,200

**All homes must meet
'homes for life' standard.
10% should meet accessibility
standards for wheelchairs**

BCP draft Local Plan

BCP's new draft Local Plan suggests 1,200 new homes should be built annually from 2024/25 to 2028/29.

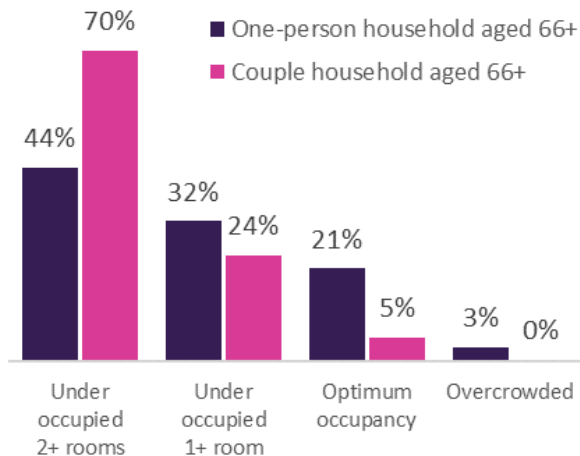
The draft plan sets out standards for adaptable and accessible homes. It will become a mandatory requirement for all homes to meet M4(2) building regulation standards for homes for life that allow for future adaptations to cater for the older people and/or disabled, including level access to main entrance. Also, 10% of new homes should meet M4(3) standards for homes to be adaptable and accessible for wheelchairs, although this is not a policy requirement due to building cost and viability. Although this cost is likely to be lower than the current average cost of a DFG grant.

Housing options

It is essential to offer a range of housing options to cater for the diverse needs of BCP's older residents. This can help older adults live independently, stay connected to their communities, and reduce social care and health costs.

Many people as they get older, especially those with less money, find themselves trapped in homes no longer suitable for them with high levels of under occupancy.

Occupancy rating of older households by HH type



Around 24.5 thousand older households in BCP experience high levels of under-occupancy. 55% of older person households occupied by a single/ couple aged 66+ have at least two spare bedrooms.

Conversely, 2% live in overcrowded households.

Source: 2021 Census

Requirements for specialist accommodation for older people aged 75+

The Housing Needs Assessment for BCP sets out the requirements for specialist accommodation to meet the needs of older people in BCP now and for the future.

		Housing demand per 1,000 75+	Current supply	Current demand	Current shortfall/ surplus	Additional demand to 2038	Shortfall by 2038
Housing with support	Market	54	3,178	2,382	796	1,078	-282
	Affordable	67	4,069	2,965	1,104	1,342	-239
Total (housing with support)		121	7,247	5,347	1,900	2,420	-520
Housing with care	Market	17	299	765	-466	346	-813
	Affordable	17	243	732	-489	331	-820
Total (housing with care)		34	542	1,497	-955	678	-1,633
Residential care bedspaces		39	1,831	1,711	120	774	-655
Nursing care bedspaces		44	2,072	1,925	147	871	-724
Total bedspaces		83	3,903	3,636	267	1,646	-1,379

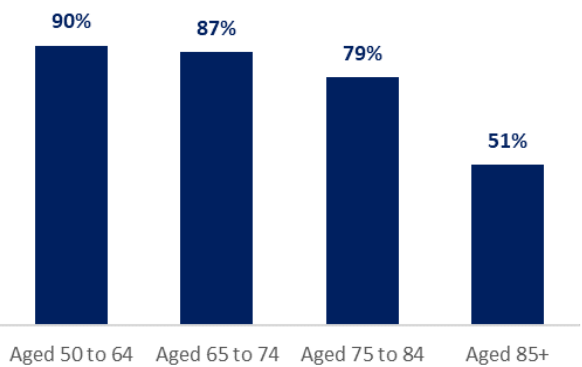
Estimates suggest a current surplus of specialist accommodation, except for market and affordable housing with care with a shortfall of around 1,000 units. There will be increased future demand for additional specialized housing of all types, including housing with support, and housing with care, and residential and nursing care due to our aging population.

Transportation



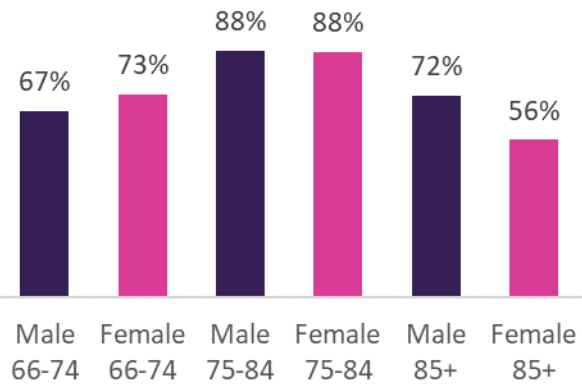
Mobility and transport are key in helping people to remain healthy, active and connected in later life.

Car ownership by age



Source: 2021 Census

Bus pass take up by age and gender



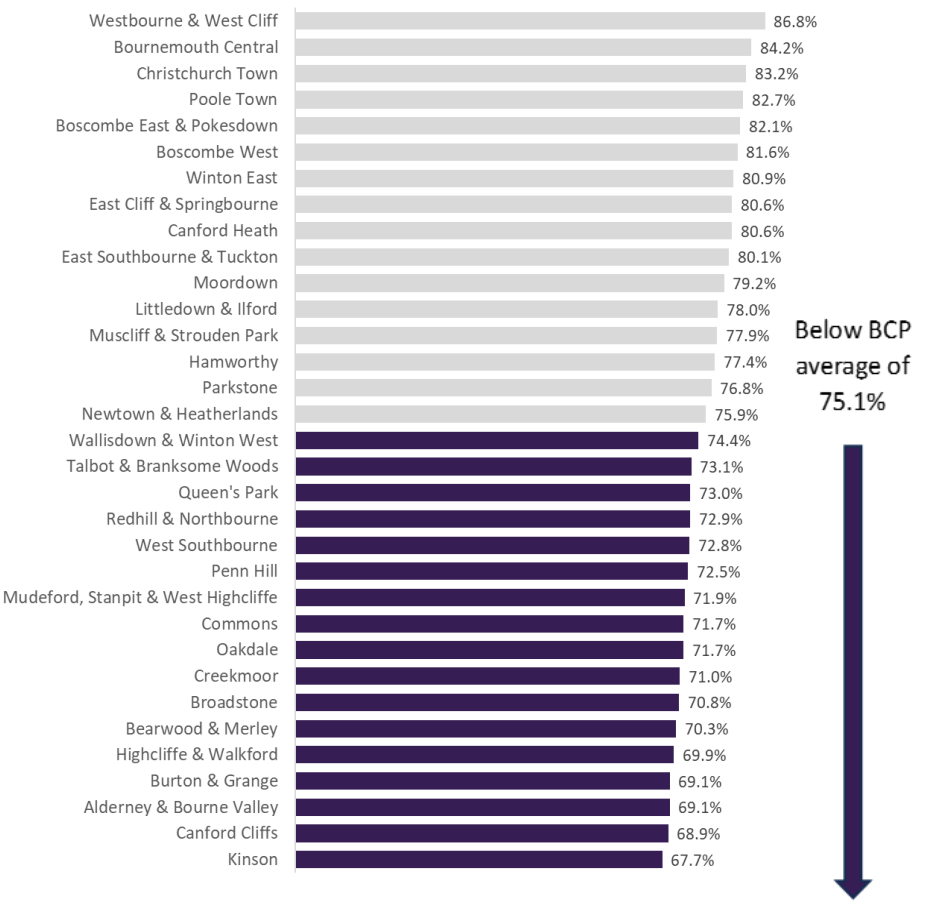
Travel options may become more limited with age as car ownership decreases and reliance on public or community transport increases.

In BCP 90% of people aged 50-64 owned a car, compared to 79% aged 75-84 and 51% aged 85+.

Evidence suggests concessionary bus passes may encourage older people to be more active, making trips they would not otherwise make if they had to pay. Three quarters of older people aged 66+ in BCP claimed their bus pass. Take up was similar for males and females overall and highest for the 75-84 age group (88%), but lowest for women aged 85+ (56%). Wards with lower take-up are highlighted to the right.

59% of people 55+ in BCP were satisfied with their local bus services, 9% were dissatisfied. 57% were satisfied with local transport information, 9% were dissatisfied (BCP Residents Survey 2023). Continuous dialogue with service users is needed to ensure services are accessible and age-friendly.

Concessionary bus pass take up by ward, Oct 2023



Source: BCP local transportation service statistics

Built environment

Ensuring urban environments support community interaction and personal independence and equal access to essential services is vital for improving the health and wellbeing of older people in BCP

Satisfaction with pavement maintenance among people aged 55+ BCP 2023

28%

Satisfaction with street cleaning among people aged 55+ BCP 2023

45%

The design of the public realm can hinder active travel and affect older people's ability to access public transport. This creates conditions for social isolation, dependency and exclusion.

Problems include poor accessibility of buildings, lack of facilities (benches & toilets), the condition of pavements including litter, and absence of signage.

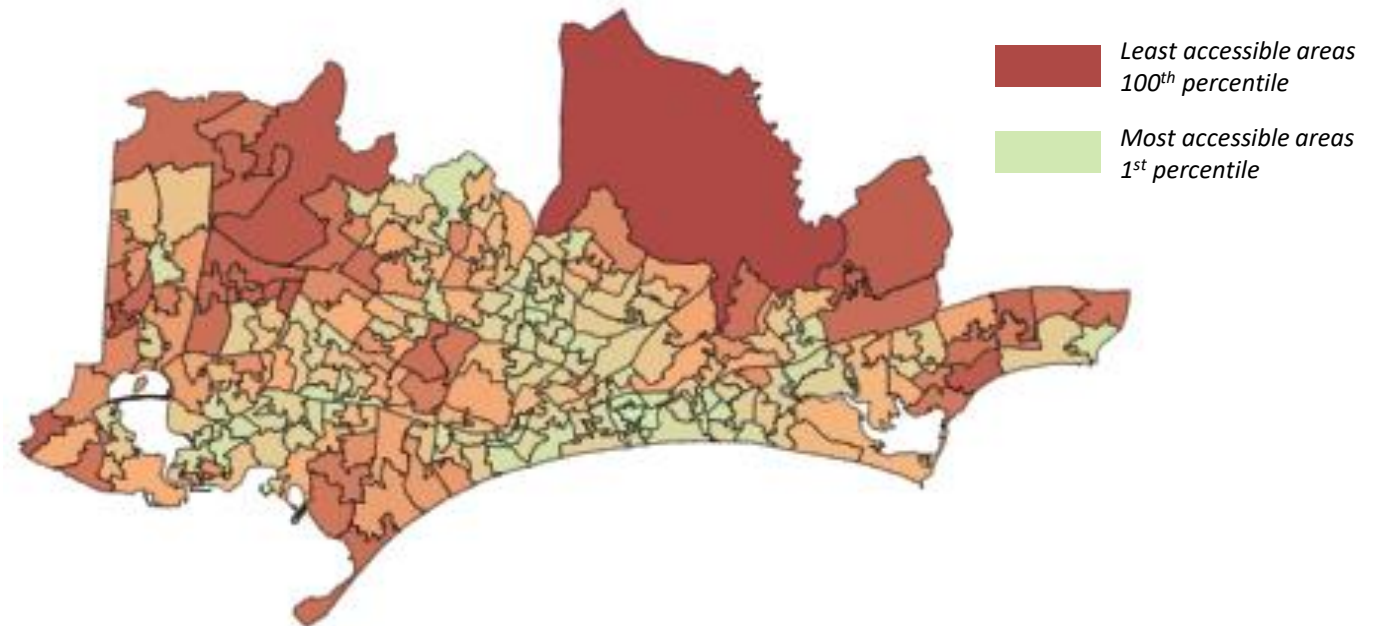
Satisfaction with pavement maintenance was 28% among people aged 55+ in BCP, 60% were dissatisfied.

45% were satisfied with street cleaning, 43% were dissatisfied. Satisfaction levels were lower among older people than those aged under 55 (BCP Residents Survey 2023).

Access to essential services such as medical appointments and grocery shopping may be limited by distance or transport issues. In BCP the average travel time to a GP by foot or public transport was 10-13 minutes and for food stores 6-7 minutes. However, access varies between areas and identifying areas with poorer access is an important first step to addressing these inequalities.

Access to Healthy Assets and Hazards (AHAH) Index – Health Services Domain

Relative accessibility to GP surgeries, A&E Hospitals, Pharmacies, Dentists & Leisure Centres for each LSOA by percentile



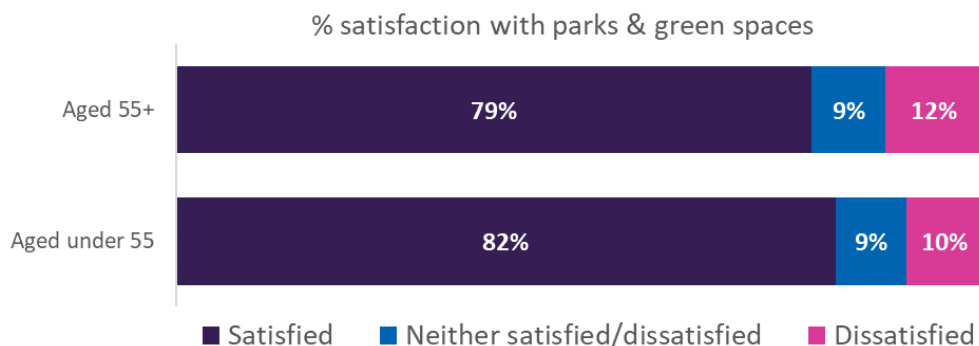
Outdoor space

The availability of outdoor spaces for leisure and recreation is important for physical and mental wellbeing and research has shown taking up physical activity in older age has clear health benefits.

Not everyone across the BCP area enjoys equal access to green space, and the health and well-being benefits this brings. 56% of people living in the BCP area live more than 300m safe walk from a publicly accessible green-space 0.5 hectares or larger.

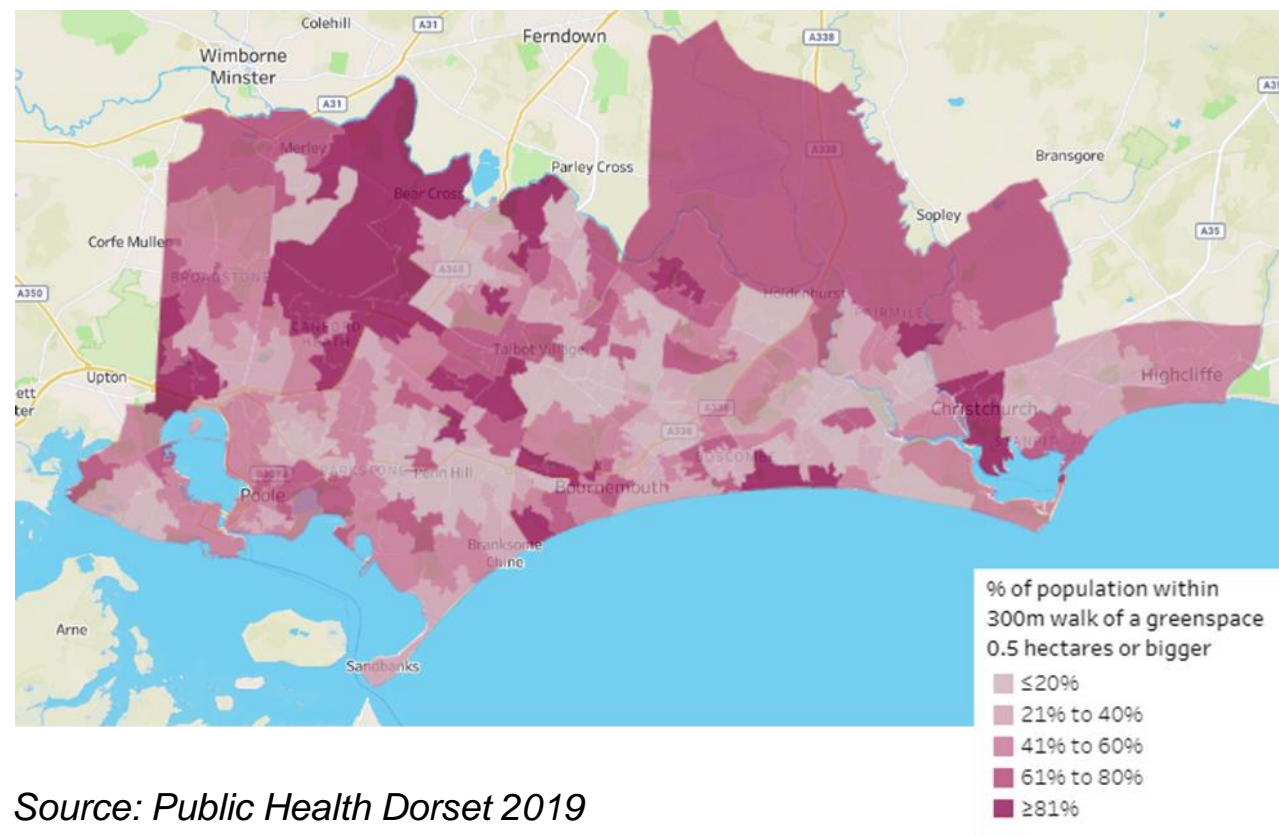
National data suggest older people, those in poor health, with a physical disability, of lower socioeconomic status, and ethnic minorities face the greatest challenges with access and use greenspace less often.

79% of older people aged 55 and over were satisfied with parks and green spaces in BCP, 12% were dissatisfied. This compares to 82% and 10% respectively for under 55s.



Source: BCP Residents Survey 2023

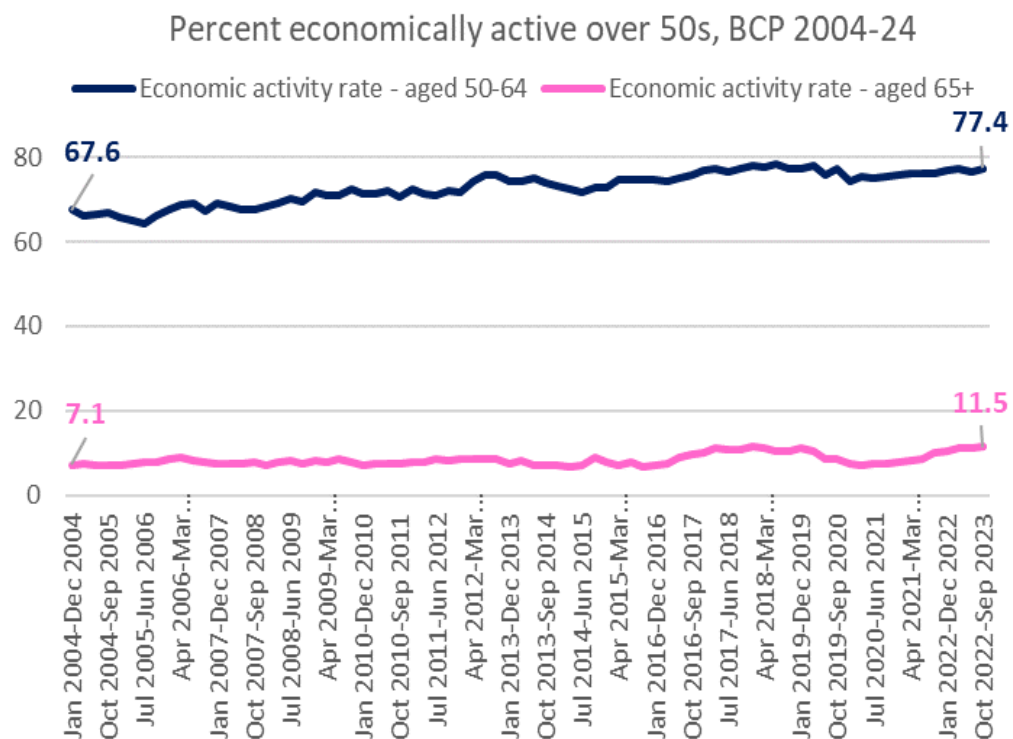
% population in 300m walk of greenspace 0.5 hectares or bigger by LSOA



Source: Public Health Dorset 2019
(300m is the WHO criteria for access to greenspace)

Employment & economic activity status

The percentage aged 50+ who are economically active has increased steadily over time. This is most noticeable for 50-64 year olds. While the largest percentage of those aged 65+ are retired the percentage who are economically active has also increased. This is linked to the increase in retirement age and financial needs exacerbated by the cost-of-living crisis.

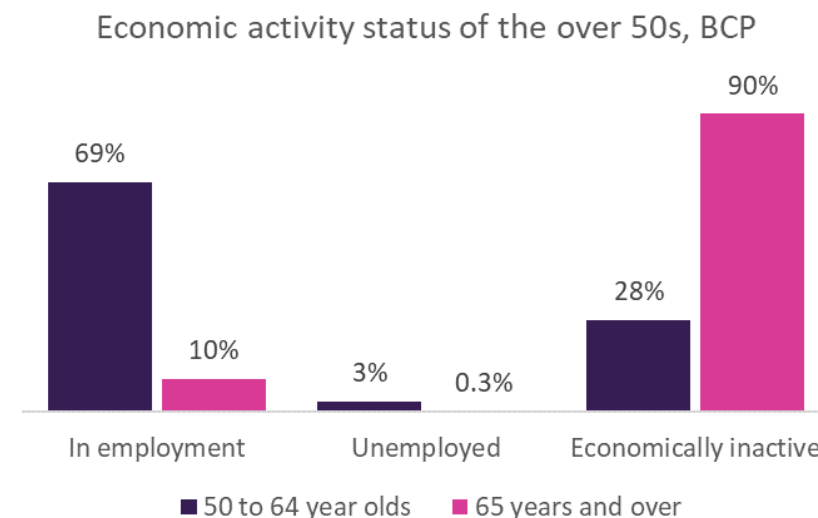


Source: Annual Population Survey

Over 50s account for around a third of the economically active population aged 16+ in BCP. The economically active include those in employment as well as those who are unemployed.

61.5 thousand people aged 50 years and over are in employment in BCP. Around 69% of 50 to 64 year-olds and 10% of those aged 65+. This figure is similar to England.

Not all of those economically active are employed with nearly 2,600 unemployed in March 2021. Post Covid this unemployment figure is likely to have now fallen.

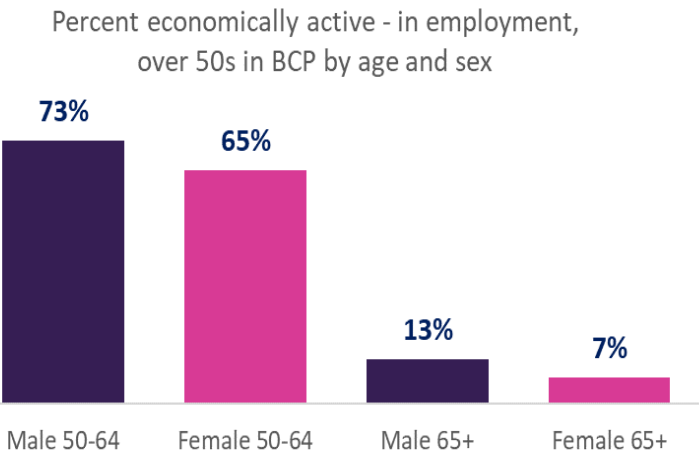


Source: 2021 Census

Working patterns and occupation

Older workers exhibit significant diversity in terms of age, gender, working patterns and occupation.

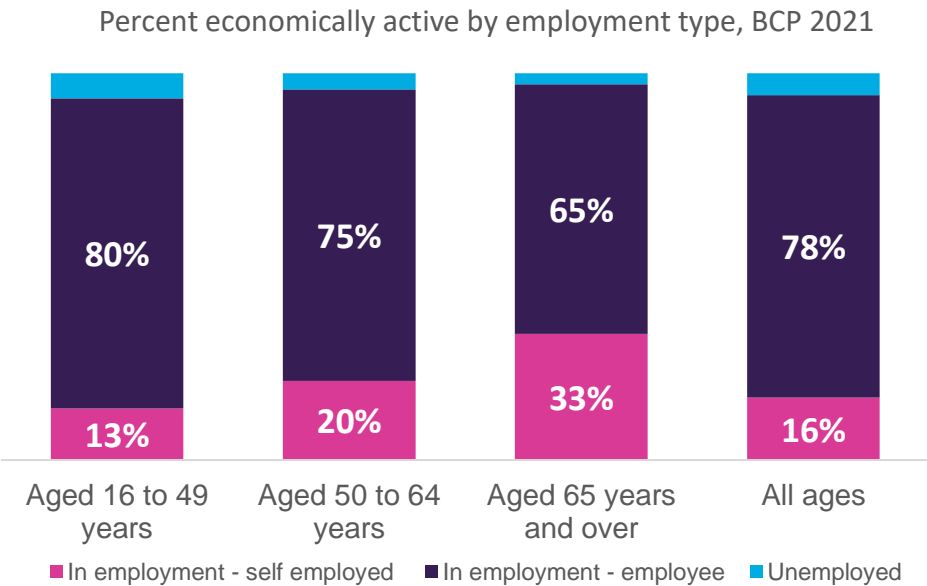
A lower proportion of older women are in employment than men



For women 65% of 50-64 year olds and 7% aged 65+ are in employment, compared to 73% and 13% for men. This is largely as caring responsibilities fall more heavily on women, and women are more likely to be ‘looking after home or family’.

Source: 2021 Census

The percentage who are self-employed rises with age, and zero-hour contracts have become more common. These contracts may be suitable for older individuals seeking flexibility but can also lead to vulnerability. Data shows an increase nationally in numbers of over 50s on zero hours contracts; 2.7% of 50-64 year olds and 4.5% aged 65+.



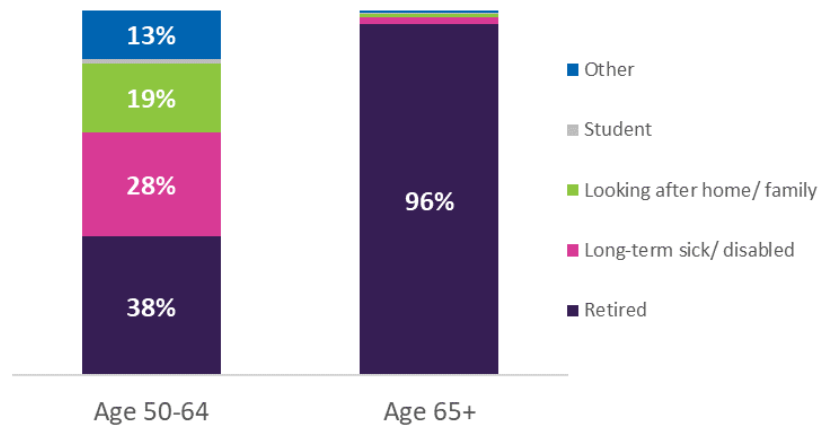
Occupations of older people aged 50+



Economic inactivity

Around 21 thousand (28%) aged 50–64, and 78 thousand (90%) aged 65+ were economically inactive in BCP. Post-covid there has been concern over the growing number of working age who are economically inactive.

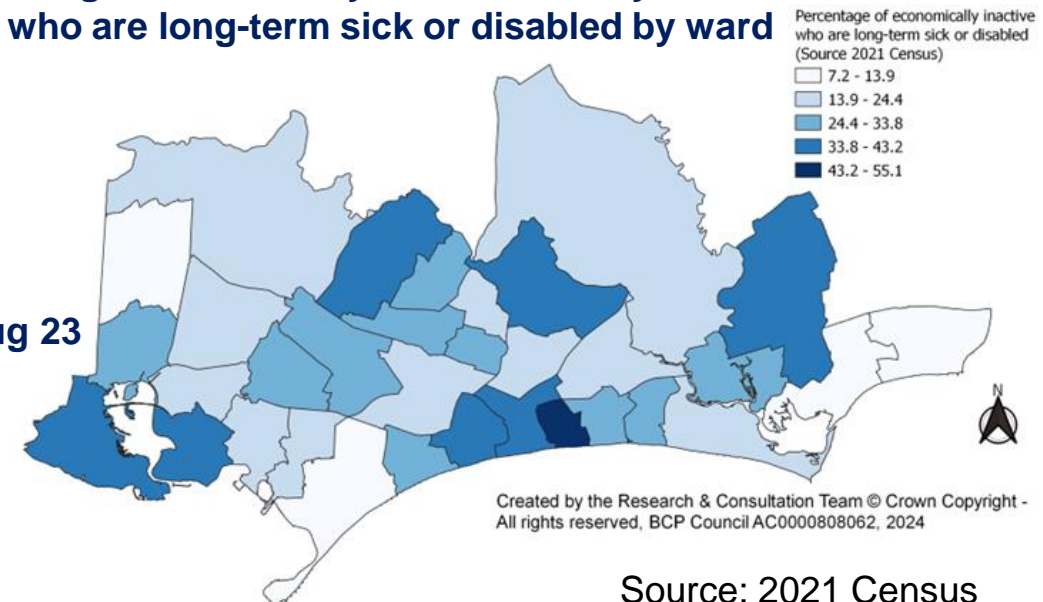
Reasons for economic inactivity by age, BCP 2021



The reasons for economic inactivity vary by age. As expected, 96% of the economically inactive aged 65+ describe themselves as retired, however 38% aged 50-64 are also retired.

28% of the economically inactive population aged 50-64 are long-term sick or disabled and most of these are considered disabled under the Equality Act. Wards in BCP with the highest levels of economic inactivity due to L-T sickness and disability are Boscombe West, East Cliff & Springbourne, and Kinson.

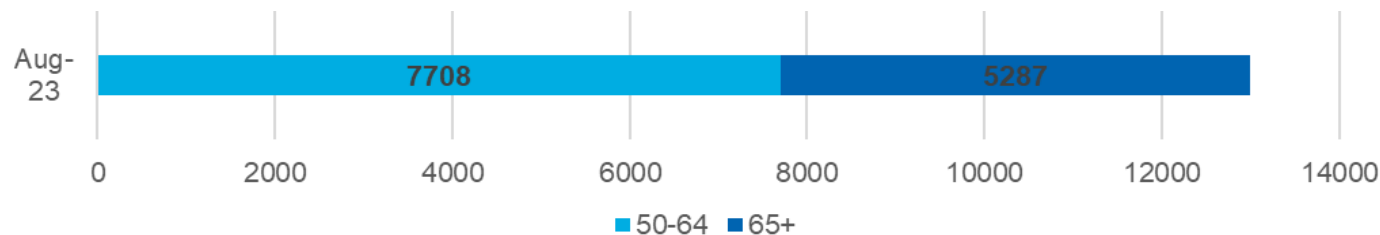
Percentage economically inactive 50-64 year olds who are long-term sick or disabled by ward



Source: 2021 Census

There has been an increase in economic inactivity due to long term sickness. Since February 2020 numbers of over 50s claiming DLA or PIP have increased by nearly 18% with around 13,000 claimants in August 2023. This represents nearly 8% of the 50+ population.

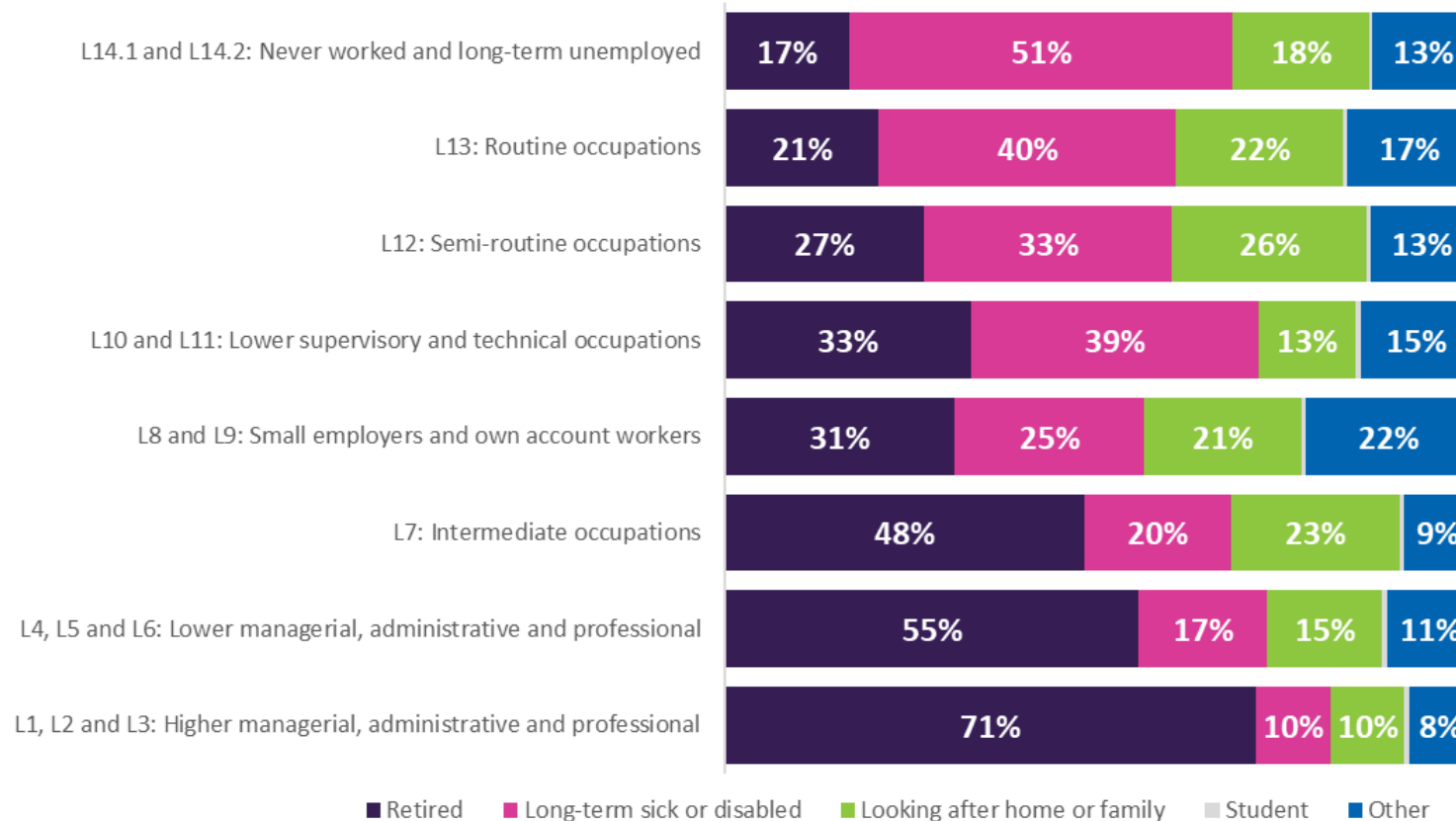
Disability Living Allowance / Personal Independence Payment Claimants, BCP Aug 23



Reasons for economic inactivity

There are large inequalities in terms of who leaves the labour market and how. It is important to support older workers to remain in fulfilling work and accommodate both changing health needs and caring responsibilities.

Reasons for economic inactivity by NS-SeC, 50-64 year olds BCP 2021



Early retirement - higher income groups are more likely to leave work by choice. Those in managerial, professional self-employed and intermediate occupations are more likely to be retired. This is likely linked to financial circumstances.

Long term sickness – lower income groups aged 50-64 are most likely to leave employment due to ill health, and not retirement.

Caring responsibilities - a substantial number of people who would like to work cannot because they are caring for someone else. This is especially the case for women and for lower to middle income groups.

Employment and qualifications

Older people are less likely to hold formal qualifications, this is particularly the case for those who are economically inactive and those who are long-term sick or disabled. It is crucial that people have access to training and development into their 50s and 60s, and that they are supported to take it up.

No qualifications aged 50-64
BCP 2021

14%

No qualifications aged 65+
BCP 2021

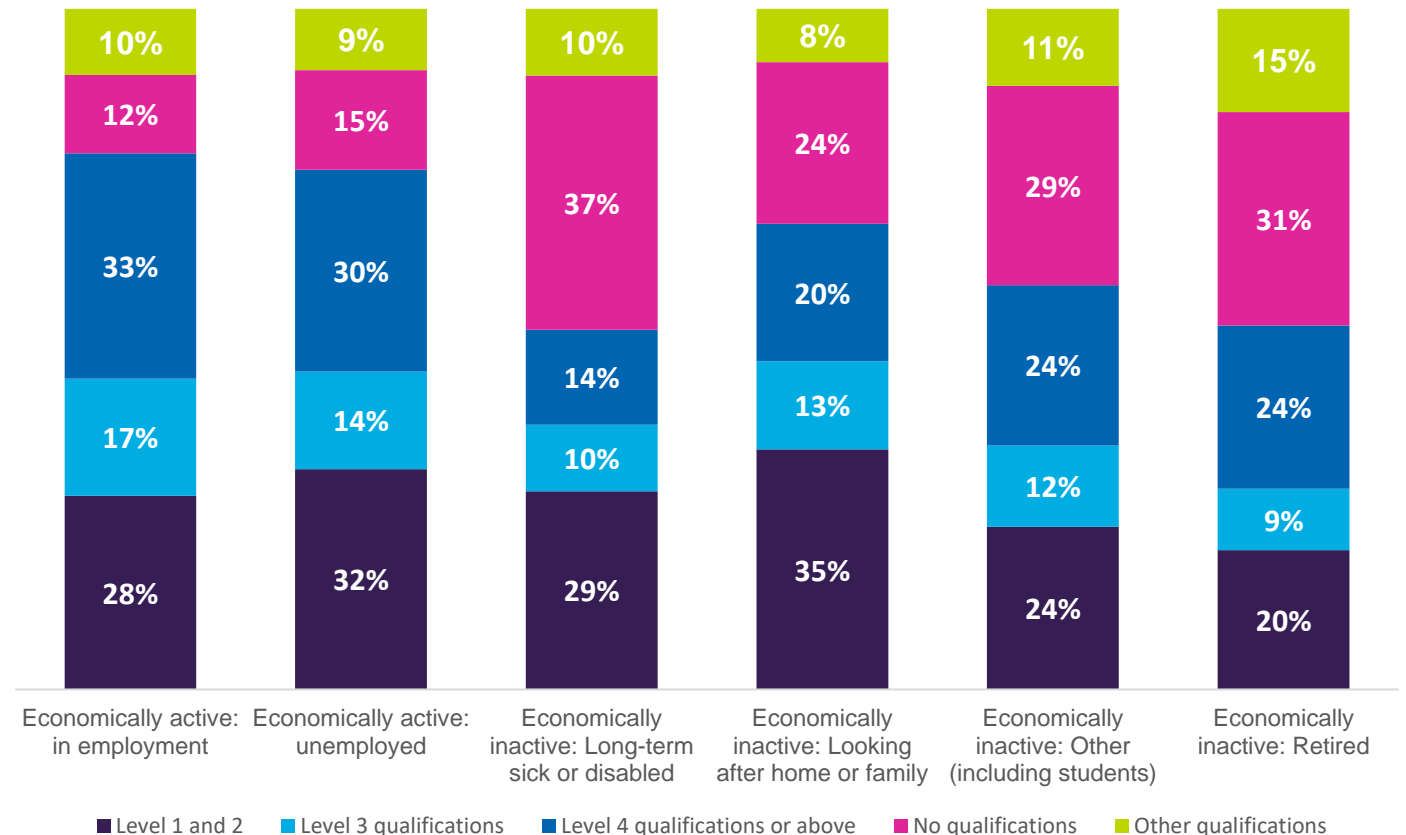
33%

The percentage of over 50s without formal qualifications in BCP (24%) is lower than across England (27%). Although this is still around 38.5 thousand people.

The older population are more likely to have no formal qualifications than the younger population. A third of those aged 65+ in BCP have no qualifications, compared to 14% aged 50-64.

The economically inactive, especially the long-term sick or disabled are most likely to have no qualifications 37%, compared to 12% for the economically active in employment.

Qualifications by economic activity type of those aged 50+, BCP 2021 Census



Participation, volunteering & unpaid care

An age-friendly community should provide older people with opportunities to be engaged in local decision making and to continue giving back to their community through paid employment or voluntary activity.

% people aged 55+ who believed they could influence decisions affecting their local area

25%

% people aged 55+ who had volunteered at least once a month in the last year

18%

Number of unpaid carers aged 50+ - BCP 2021

21,000

% unpaid carers 50+ who are women – BCP 2021

59%

% unpaid carers aged 50+ in employment - BCP 2021

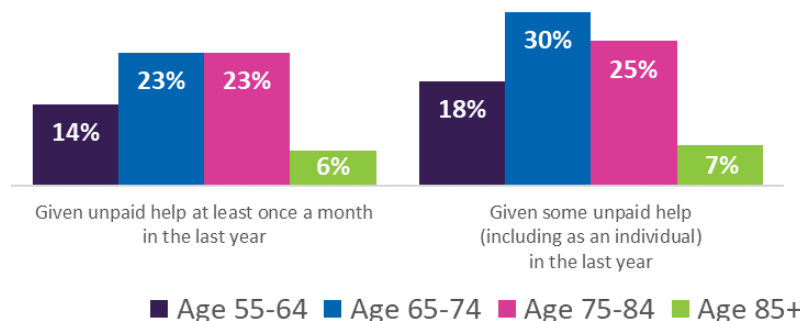
41%

% unpaid carers aged 50+ L-T sick/ disabled - BCP 2021

30%

In the BCP Residents Survey 2023 25% aged 55+ believed they could influence decisions affecting their local area. 18% respondents aged 55+ had volunteered at least once a month in the past year. This compares to 12% in the 2021 Survey. The 65-74 age group were most likely to have volunteered.

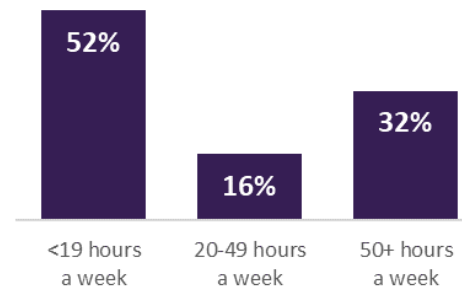
% respondents who have given unpaid help to group(s), club(s) or organisation(s) in the past year



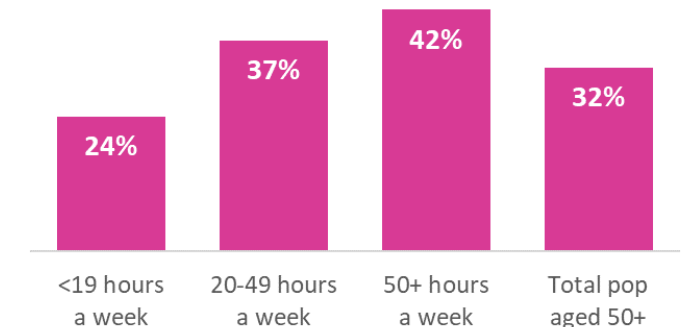
Source: BCP Residents Survey 2023

In BCP nearly 21,000 (8%) of the 50+ population are providing unpaid care. They represent 63% of all unpaid carers in BCP. 59% of unpaid carers aged 50+ are women, and 41% are in employment and juggle work and caring responsibilities. 6,300 (30%) are themselves L-T sick or disabled.

Care hours per week provided by unpaid carers aged 50+



% population aged 50+ 'not in good health' by number of care hours provided per week



Almost a third of unpaid carers aged 50+ provide 50+ hours unpaid care a week. The probability of reporting being in 'not good health' is higher for people providing more hours of unpaid care.

Source: 2021 Census

Inclusion, loneliness & isolation



Age-friendly environments should foster social connections, and a strong sense of belonging to the local area. Combatting social isolation & loneliness requires community engagement, programs, and activities.

% people aged 55+ who have a strong sense of belonging to their local community, BCP 2023

81%

% people aged 55+ who feel people from different backgrounds get on well, BCP 2023

60%

% people aged 55+ who feel safe when outside during the day, BCP 2023

93%

% people aged 55+ who feel safe when outside at night, BCP 2023

58%

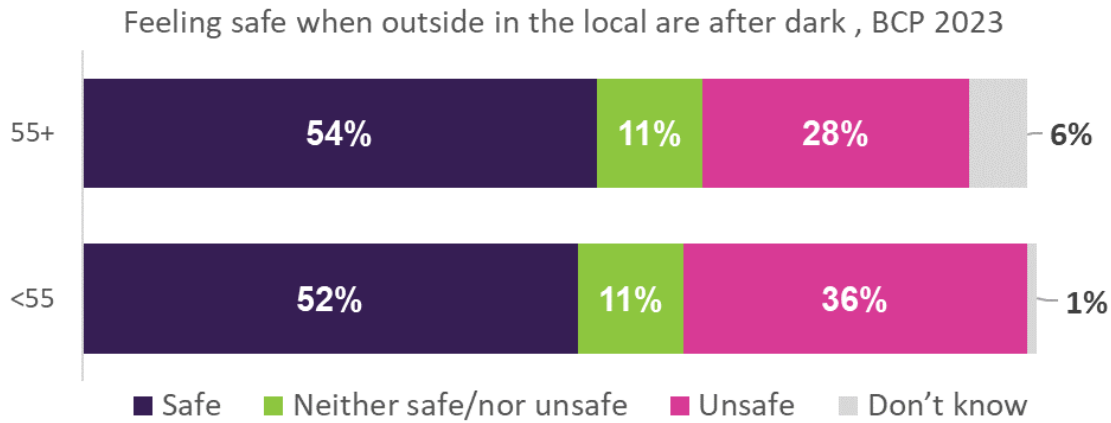
Number of households with people aged 66+ living alone, BCP 2021

26,600

% households with people aged 66+ living alone, BCP 2021

15%

Building connected communities is integral to how people feel about their area. 81% of people aged 55+ had a strong sense of belonging to their local area in BCP and 60% felt people from different backgrounds get on well. While most older people felt safe when outside in the local area during the day (93%), feeling safe after dark was lower (54%). The proportion feeling safe after dark has declined from the 2021 Survey but was similar for those aged under and over 55 although younger people were significantly more likely to feel unsafe after dark.



Loneliness is one of the major factors older people worry about and can undermine well-being and impact on quality of life.

Just over 26.5 thousand households, 15% in the BCP area, comprise older people aged 66+ living on their own (2021 Census). This is a higher than for England (13%). Older women are more likely to live alone than older men.

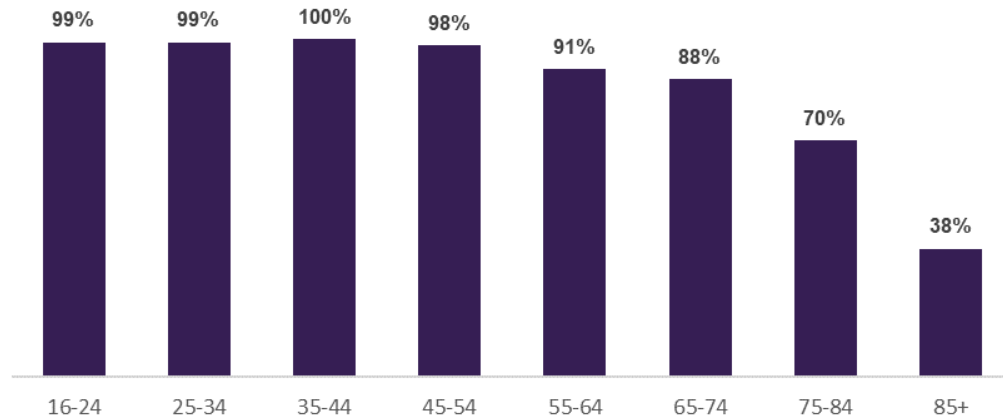
Data is limited but suggests around a quarter of adults aged 50+ feel lonely some of the time, and around 7% feel lonely often (Age UK 2019).

Communication, digital access & literacy

Staying connected with events and people, and getting timely, practical information to meet personal needs is vital for active ageing. Information should be readily accessible to older people with varying capacities and resources.

Older people in particular face challenges with the increased digitisation of information and advice services. Age is the leading determinant of how likely individuals are to access the internet, but socio-economic status is also a major factor. The 2023 BCP Resident Survey showed internet use declined with age, especially for those aged 75 or over.

Proportion using the internet at home or work, by age



Source: BCP Council Residents Survey 2023

As technology becomes more integrated into daily life, ensuring digital literacy and access for older adults is vital. Digital inclusion requires a supportive environment and interventions that address access, installation, knowledge, design, & trust barriers. Maintaining offline alternatives is also vital to ensuring people who are not able to use the internet are not left behind.

Internet use by age, UK 2023

55-64
year olds

- 88% use the internet at home
- 19% only use a smartphone to go online 📶
- 34% are narrow internet users 📶
- 41% play games on any device
- 41% use all four types of online communication platforms* 📶
- 79% are confident AND able to identify scam emails 📶
- 44% are confident AND able to recognise search engine advertising 🔍
- 73% think about the truthfulness of factual information online 📶

65+

- 69% use the internet at home
- 12% only use a smartphone to go online 📶
- 43% are narrow internet users 📶
- 21% play games on any device
- 19% use all four types of online communication platforms* 📶
- 73% are confident AND able to identify scam emails 📶
- 49% are confident AND able to recognise search engine advertising 🔍
- 80% think about the truthfulness of factual information online 📶

⬆️ More likely than the UK average
⬆️ Less likely than the UK average
📶 Among internet users
🔍 Among search engine users
*Online communication platforms = social media, messaging, video sharing, live streaming

Source: Ofcom, Adults' Media Use and Attitudes Report (2023)

Communication, digital access & literacy

Other important factors to consider in effective communication and information are the variety of languages spoken in the BCP area, and the high prevalence of hearing loss in older ages.

Estimated number of people aged 55+ who suffer from hearing loss in BCP 2022

47,000

Effective communication can be seriously impaired by hearing loss. It can affect relationships, independence, lead to feelings of disconnection and social isolation, and impact quality of life.

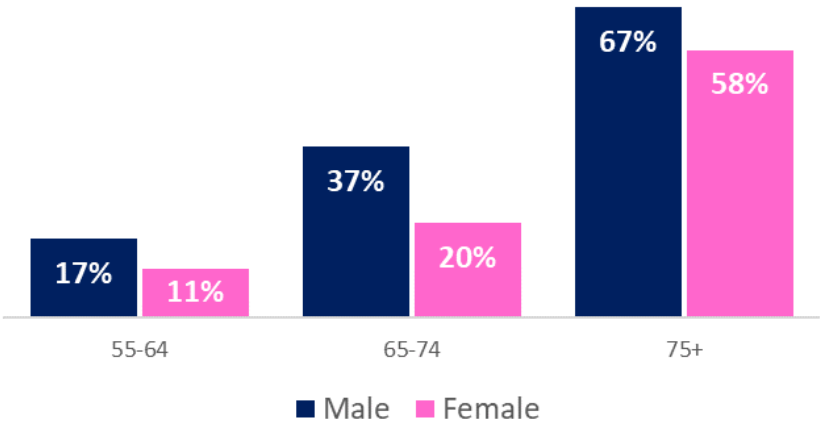
% people aged 50+ in BCP who do not speak English as their main language 2021

3%

Number people aged 50+ in BCP who do not speak English or do not speak it well 2021

1,700

Prevalence of hearing loss by age and sex



Estimates suggest around 47 thousand - a third of older people aged 55 or over in the BCP area could suffer from hearing loss.

Hearing loss increases significantly with age with national estimates suggesting 67% of men and 58% of women aged 75+ could be affected.

The variety of languages spoken in the BCP area is an important factor to consider when it comes to communication and information, especially given the increasing levels of ethnic diversity in the older population.

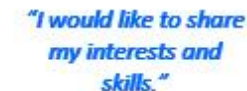
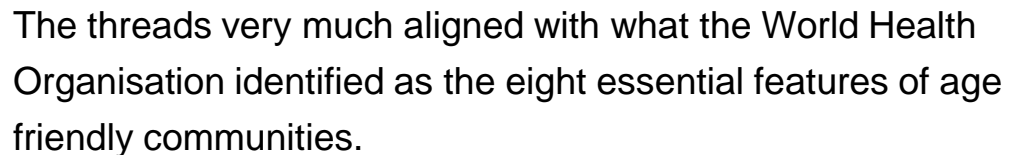
Around 5,600 (3%) people aged 50+ living in BCP do not speak English as their main language. But, of these the majority around 3,900 can speak English well. Around 1,700 cannot speak English at all or cannot speak it well. After English, the main language spoken in BCP is Polish, followed by Portuguese and Spanish. 115 people in the BCP area use British Sign Language as their main language.

Therefore, it is important to diagnose hearing loss early, provide aids, teach coping mechanisms, and implement initiatives that address hearing related social isolation.

Source: Scholes, et al, Socio-economic differences in hearing among middle-aged & older adults: cross-sectional analyses using the Health Survey for England BMJ Open 2018

Source: 2021 Census

There were key threads throughout the conversations regarding **connection, belonging, friendship, community, health and wellbeing, and the desire to remain active and useful.**



Older people's vision of an age friendly community

Older people's vision of an age friendly community in the BCP area reflects a desire for an inclusive, supportive, and peaceful community that values the health, social connections, and the well-being of all its members.



Older people valued key elements they felt contributed to an age friendly community:

- **Community and belonging:** Emphasising the importance of home, family, and a sense of belonging, particularly for those who have moved to the UK from conflict areas.
- **Wellbeing and engagement:** Highlights the role of community involvement in activities like community gardens, cooking, and eating together in enhancing wellbeing.
- **Supportive networks:** Values the support from local groups, friendship circles, and faith-based services in providing a sense of security and community.
- **Active living:** Stresses the significance of staying active through volunteering, accessing open spaces, and participating in local social groups for ageing well.

Steps to achieving an age friendly community

Older people suggested ways and made individual pledges to help achieve an age friendly community, with a focus on fostering connected communities, sharing information, improving accessibility and inclusive design.

- **Community connection:** They discussed ideas to help people connect and integrate into the community, such as volunteering, buddying with isolated individuals, supporting access to activities, developing mutual relationships, sharing interests and skills, and finding opportunities to connect neighbours and communities over shared interests.
- **Information sharing:** They proposed networking sessions, distributing information through libraries, newsletters, and booklets, alongside by word of mouth through networks.
- **Resource accessibility:** They emphasized the importance of making resources like transport, local shops, and health facilities more accessible, including suggestions for better use of existing facilities, including community hubs and sharing transport options.
- **Intergenerational engagement:** They highlighted the potential for intergenerational opportunities, like schools and colleges interacting with older generations, and community involvement in local events that bring generations and cultures together.
- **Inclusive design:** They recommended a focus on designing community gardens with wellbeing and sensory areas, improving accessibility to buildings and public spaces, and creating meeting places for social interaction.