Social Exclusion Among Older People In Ireland, North and South

Social exclusion refers to the dynamic processes of being excluded from key systems and institutions that can shape the economic and social integration of people within a society (Walker & Walker, 1997). As it involves so many different elements, it can be a difficult thing to measure and quantify. As a result, policymakers and activists are hindered in developing policies and programmes to alleviate or eliminate social exclusion among older people.

As part of its data-mining 2013 programme, CARDI funded a research team led by Dr. Kieran Walsh, National University of Ireland, Galway, to attempt to measure social exclusion among older people in the Republic of Ireland (ROI) and Northern Ireland (NI) (Ward et al., 2014). This research brief presents the summary of findings from this research and other national and international work on social exclusion.

Key Findings

- There are many gaps in our knowledge of social exclusion as it affects older people in Ireland, North and South. There is a particular lack of data on issues such as social isolation and loneliness and neighbourhood and community (Ward et al., 2014).

- Where data do exist they tend to be about ownership of items or use of services, not about whether older people are excluded from these things (Ward et al., 2014).

- Social exclusion is not inevitable among older people; although the risk increases with age (Kneale, 2012).

- The vast majority of older people in Ireland, especially in NI, get on well with their spouse, family and friends and have regular contact with them, but 15% in ROI and 3% in NI have little or no contact (Ward et al., 2014).

- Older people in NI have lower incomes than in ROI (Hillyard et al., 2010) but are more likely to have cars and central heating. They may benefit from other public services or may enjoy a lower cost of living than their counterparts in ROI (Ward et al., 2014).

- The vast majority of older people think that rubbish and vandalism are not problems in their areas; However, those in NI are more likely to state that rubbish and vandalism are problems (Ward et al., 2014).

- Older people in ROI are more likely to vote, volunteer and provide care for relatives than those in NI; they are more than twice as likely to go to films and cultural events (Ward et al., 2014).
Social exclusion and older people

An important finding from the English Longitudinal Study on Ageing (ELSA) is that although the risk of social exclusion increases with age, substantial numbers of people become less excluded over time (Kneale 2012, p107), which suggests that effective interventions can bring positive results. Kneale (2012) used data from ELSA to measure changes among older people between 2002 and 2008. The study identified several areas of society that older people can be excluded from, including housing and public transport, financial products, civic and cultural activities and social relationships.

One of the problems in measuring social exclusion is that it is not just about material deprivation. Social exclusion has many dimensions, covering many interrelated aspects of life. Moreover, there are some important differences between older people and younger people. For example, being out of employment is often seen as a key factor in social exclusion among younger people, whereas retirement from full-time employment is seen as a natural event for many older people. In addition, older people tend to spend more time in the home than younger people, many of them living alone, thus creating the possibility of greater isolation.

Findings of the data analysis

Ward et al., (2014) chose five domains of life to illustrate how older people in NI and ROI can be excluded. These areas were chosen on the basis of qualitative findings from Walsh et al., (2012). This section presents the findings of data analysis under each of the domains1.

01. Social relations

This domain seeks to capture older people’s social opportunities and participation in social activities, community groups and societies. The vast majority of older people appear to get on well with their spouse; only 20% in ROI and 14% in NI say their spouse criticises them somewhat or a lot and only 17% in ROI and 11% in NI say their spouse gets on their nerves somewhat or a lot. In addition, 93% of respondents in ROI and 97% in NI felt they could rely on their spouse a lot or somewhat if they had a serious problem. The North-South differences are not statistically significant.

Older people were similarly positive about their families and even more so about their friends. Only 6% in both ROI and NI say their friends criticise them somewhat or a lot and only 8% in ROI and 5% in NI say their friends get on their nerves. The vast majority of older people have regular contact with family and friends but 7% in ROI have contact less than once a week, another 7% have contact once a month or less and nearly 1% never have contact; the proportion in NI with only occasional or no contact with family and friends is much lower (3% compared with 15% in ROI).

Men are more likely than women to say their spouse understands how they feel about things and that their spouse never lets them down. Those living alone and those living in urban areas have a greater tendency to feel they cannot rely on other family members if they have a serious problem than people who live with others or who live in rural areas.

1. Findings must be interpreted with caution because many indicators are not directly comparable between NI and ROI. Questions may have been worded differently; or figures may be aggregated from a number of indicators; or survey methods or times may have been different.
**02. Services, amenities and mobility**

This domain is important and also topical because some services have been reduced as a result of the recession. Unfortunately many of the indicators in this domain do not capture social exclusion, only whether people are receiving services (though The Irish Longitudinal Study on Ageing (TILDA) is throwing light on the issue in ROI, e.g. in relation to transport services). As a result, the analysis in Ward et al., (2014) focuses on health and social care services.

Similar proportions of older people in NI and ROI are receiving home help services – 3.5% in ROI and 3.2% in NI. 7% of older people in ROI get help from a community nurse compared to 4% in NI.

**03. Material and financial resources**

This domain has a reasonable number of comparable indicators in Ireland, North and South. The vast majority of older people in NI and ROI can afford to have people visit for a meal, to replace worn out furniture, to keep the house warm and to afford two pairs of strong shoes. 85% of older people in ROI have central heating, compared to 98% in NI. 66% of older people in ROI have a car, compared to 77% in NI.

**04. Neighbourhood and community**

This domain has the poorest coverage of all, with only two indicators providing North-South comparisons.

Older people in Ireland, North and South, generally believe that rubbish and vandalism are not problems where they live. However, older people in NI are twice as likely (18%) as those from ROI (7%) to believe that rubbish is a problem in their area and three times more likely (11%) than those in ROI (3%) to think that vandalism is a problem (further analysis indicates that the vandalism difference is not statistically significant).

**05. Civic activity**

Older people in ROI (91%) are much more likely to vote than those in NI (69%). They are also far more likely to volunteer (49%) than older people in NI (13%), though the NI volunteers devote themselves more regularly to their volunteer activities. ROI respondents are also more likely to provide support to their relatives and much more likely (73% compared with 33%) to attend arts events and films than older people in NI. Older people in NI are more likely to be members of sports clubs than those in ROI but much less likely to participate in sports. In the case of religious observation, NI has twice as many non-attendees (23%) as ROI (12%) but also slightly more who go to church more than once a week. Those living alone, in good health and those with high incomes were more likely to look after friends or family. Likewise people with higher education levels were more likely to attend arts events than those with no qualifications.

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2. The low level of volunteering found in the study in NI concurs with the NI Census 2011 which reported that 13.7% of people aged 65-74 and 7.1% of people aged 75+ volunteered.
A cross-border measure of social exclusion

Ward et al., (2014) argue that there is a need for a relevant, valid and reliable all-island measure of social exclusion among older people. Based on their findings, they propose domains and dimensions for a measure of social exclusion among older people, as seen in Figure 1 below.

**Figure 1: Domains and dimensions for measuring social exclusion in Ireland, North and South**

Ward et al., (2014)

**Policy implications**

Effective policies, programmes and interventions require accurate, reliable and up-to-date data about the concept of social exclusion and the extent to which it affects people. Baseline data make the concept of social exclusion more concrete, facilitate the development of effective interventions and allow us to measure change over time for older people generally and for vulnerable and disadvantaged groups within the older population.

The interaction of different forms of social exclusion is an important policy consideration. Kneale (2012) argues, for example, that across many of the socioeconomic factors he considered, a consistent pattern was that “those who possess characteristics that would be considered disadvantageous are also at higher risk of experiencing social exclusion across a number of domains. If social exclusion among older people is indicative of a process of losing independence, these results suggest that socio-economic resources are an important factor in maintaining this independence (p50).”

Harnessing the contribution of older people in their communities is an important policy goal in building inclusion and participation. Walsh et al., (2012) state that “Unless older people are seen as assets and partners in community-based activities they will remain excluded from conventional pathways of participation and connectivity that younger people take for granted as part of normal citizenship.”
The social inclusion strategy Lifetime Opportunities (OFMDFM, 2006) aimed to ensure that ‘older people are valued and respected, remain independent, participate as active citizens and enjoy a good quality of life in a safe and shared community’. It had a life-course approach and included specific policies and targets for ‘older citizens’. Published in 2005, the strategy for older people in NI Ageing in an Inclusive Society (OFMDFM, 2005) set out two objectives particularly relevant to social exclusion:

- To ensure that older people have access to financial and economic resources to lift them out of exclusion and isolation;
- To promote equality of opportunity for older people and their full participation in civic life, and challenge ageism wherever it is found.

An updated Active Ageing Strategy 2014-2020 was published for consultation in 2014 (OFMDFM, 2014). The draft strategy aims to build a NI where older people are active members of the community with policy aims to create opportunities, tackle disadvantage and improve health and wellbeing among older age groups. It is positioned within The Programme for Government 2011-2015, which includes a commitment to deliver measures to tackle poverty and social exclusion.

There are currently plans in place to make NI an age-friendly area under the World Health Organization (WHO) guidelines. In March 2014, Belfast City Council published a draft action plan for consultation to become a WHO age-friendly city (Belfast City Council, 2014).

In ROI, social exclusion is central to the National Positive Ageing Strategy published in 2013. The vision of the strategy is to “promote and respect older people’s engagement in economic, social, cultural, community and family life and foster better solidarity between generations. It will be a society in which the equality, independence, participation, care, self-fulfilment and dignity of older people are pursued at all times” (Department of Health, 2013a).

Healthy Ireland (Department of Health, 2013b) also contains elements related to social exclusion. In particular, Theme 3 (Empowering People and Communities) includes “social connectedness” and Goal 4 (Create an environment where every individual and sector of society can play their part in achieving a healthy Ireland) includes volunteering and service user involvement in decision-making.

Dundalk in ROI was one of the first participants in the original WHO initiative on age-friendly cities. Since then, the age-friendly cities and counties programme was developed by the Ageing Well Network and now delivered by Age Friendly Ireland.
Lack of data

Apart from studies on material resources, notably an attempt to create an all-Ireland index of living standards (Hillyard and Patsios 2012), there has been little research in NI and ROI on defining and measuring social exclusion among older people generally. In 2012, Walsh et al. (2012) conducted a qualitative study on social exclusion as it related to older people in diverse rural communities.

Hillyard et al., (2010) and Hillyard and Patsios (2012) found that very little data is comparable in Ireland, North and South and that a mechanism to encourage the collection of comparable cross-border data would be beneficial. Ward et al., (2014) make three main points about the availability of data based on the ten data sets they examined for their study:

1. The availability of comparable cross-border data is generally poor, and the report identifies domains and measures that require improvement.
2. The availability of data on social exclusion within each jurisdiction is generally mixed, varying in quality from one domain to another.
3. The available indicators mostly identify whether or not an older person owns an item or takes part in an activity without throwing any light on why they do not own the item or take part in the activity. This hampers analysis of social exclusion.

To address this lack of data, three key steps could be taken by researchers, statistical offices and policy makers which would contribute to a better understanding of social exclusion among older people:

- The feasibility of a cross-border composite measure of old-age social exclusion should be explored. This would require harmonised data-collection across ROI and NI.
- Appropriate indicators that capture old-age social exclusion, and reasons for exclusion could be developed.
- Data is required to develop a deeper understanding of the construction and implications of old-age exclusion across the life-course.
Conclusion

Social exclusion is a concept that permits us to look beyond issues such as poverty and material deprivation to examine the extent to which older people are able to play a full and active role in society. The dimensions of social exclusion have not been well defined and neither have the relationships between the different dimensions. A lack of clarity about social exclusion means that policy makers and activists are hindered in developing policies and programmes to alleviate or eliminate social exclusion among older people. Moreover, the absence of robust indicators across the full range of domains relevant to exclusion means that we do not have baseline data in either NI or ROI to allow us to identify the areas of exclusion that most affect older people or priority groups for intervention. Nor can we measure progress over time in reducing social exclusion. Studies that compare Ireland, North and South are particularly hampered because, even in domains that have relatively good indicators, few are comparable across jurisdictions.
References

Research Team

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