

C|A|R|D|I **GRANTS**
PROGRAMME

Research Brief

**Social exclusion
and ageing in rural
communities**

Ageing population: ROI

- At the 2006 census, there were 468,000 people aged 65+ (11% of the population).
- By 2041, there will be 1.4 million aged 65 and over (22% of the population).
- Life expectancy is 76.8 years for men and 81.6 years for women.
- 95% of men and women aged 70 and over rate their health as very good (19%), good (50%) or fair (26%).
- 9.1% of people aged 65 and over are still in employment (Q2 2009).

Ageing population: NI

- In 2010, there were 260,000 people aged 65+ (14% of the population).
- In 2041 the 65+ age group is projected to make up 24% of the population (496,000).
- Life expectancy is 77 years for men and 81.4 years for women.
- 66% of people aged 70 and over rate their health as good (25%) or fairly good (42%).
- 9% of men aged 65 and women aged 60+ are still in employment (Q2 2009).

Policy on rural ageing – ROI

- A new positive ageing strategy for ROI is currently being developed, led by the Department of Health.
- The *National Action Plan for Social Inclusion 2007-2016* builds on earlier plans for social exclusion in focusing on the traditional areas of care, income support and services, while introducing new elements of participation and engagement.
- Part of the *National Rural Development Programme 2007-2013* aims to strengthen rural networks through economic diversification and supporting higher quality of life in rural areas.

Policy on rural ageing - NI

- *Ageing in an inclusive society* was the over-arching strategy for older people in NI, published in 2005. It is now being updated and published for consultation during 2012.
- *Lifetime Opportunities* is the government's anti-poverty and social inclusion strategy. It pays specific attention to older people who are past working age and commits to working toward the elimination of poverty and social exclusion in NI by 2020.
- The *Rural White Paper Action Plan* (2011) identifies policy priorities related to the themes of urban-rural linkages, access to services, rural communities and economies, and sustainable countryside.

Introduction

Understanding how social exclusion affects the lives of older people in diverse, rural settings has not been widely considered in research or policy, in the Republic of Ireland (ROI) or Northern Ireland (NI). In a bid to understand if ageing in rural communities increases or decreases the potential for exclusion in later life CARDI, as part of its grants programme, funded a research project led by Professor Eamon O'Shea at National University of Ireland, Galway (NUIG): *Social Exclusion and Ageing in Diverse Rural Communities* (Walsh et al., 2012). The aim was to explore how age and rural living combine over the course of people's lives to have an impact on the likelihood of social exclusion. This includes exclusion from material resources, social relations and services.

This research brief presents a summary of the findings from the project, and also draws on existing secondary data from NI and ROI. It includes the policy context of social exclusion and recommendations for future policy making.

Key Points

- 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).
- In ROI, 12.5% of older people were at risk of poverty in rural areas, compared to 6.8% in urban areas (CSO, 2011). In rural areas of NI, 33% of pensioners live in households experiencing income poverty (OFMDFM, 2007).
- Five indicators of social exclusion were identified: social connections and social resources; services; transport and mobility; security, safety and crime; and, income and financial resources (Walsh et al., 2012).
- Four factors were identified as factors which determine the extent to which an individual is excluded: individual capacities; life-course trajectories; place and community characteristics; and macro-economic forces (Walsh et al., 2012).
- Ageing strategies being developed in NI and ROI provide an opportunity for a new understanding and treatment of social exclusion among rural-dwelling older people using the framework.
- Maximising the participation, capacity and inclusion of older people as well as building intergenerational solidarity in rural communities is key to tackling social exclusion.

Background on social exclusion and rural ageing

Social exclusion usually 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). Since the 1980s, social exclusion has been used to expand the more traditional understanding of issues relating to poverty, low income and deprivation. It draws attention to the processes that lead to individuals or groups becoming detached from mainstream society, and the disadvantages this has on individual life-chances (Moffat & Glasgow, 2009).

Table 1 below provides a statistical overview of rural ageing across the island of Ireland.

Table 1: Statistics on ageing in rural areas

Northern Ireland	Republic of Ireland
12% of all households are pensioners living alone (NISRA, 2002).	8% of all households are pensioners living alone (Central Statistics Office, 2006).
32% of people aged 60 to 74 live in rural areas, and 28% of people aged 75+ live in rural areas (McGee et al., 2005).	49.4% of people aged 65+ live in rural areas compared to 50.6% in urban areas (Central Statistics Office, 2011).
In rural areas of NI, 33% of pensioners live in households experiencing income poverty (OFMDFM, 2007).	12.5% of older people in rural areas were at risk of poverty in rural areas, compared to 6.8% in urban areas. 9.5% in both urban and rural areas experienced deprivation (Central Statistics Office, 2011).
Weekly income before housing costs is £344 for urban areas in NI and £387 for rural areas (NISRA, 2009).	In 2009, the weekly gross income of an elderly person living in an urban area was €479.61 compared with €376.89 in rural areas, a difference of more than 27% (Central Statistics Office, 2011).

There are increasing questions on how place may influence exclusion, and how the relationship that older people have developed within their rural communities may influence the potential for exclusion. Scharf et al. (2002) found that quality of life is closely related to individuals' personal feelings about locality and space, particularly with respect to local deprivation and perceived vulnerability to crime. Scharf and Bartlam (2006) found that continuing to age in place can represent a significant challenge for some older people, with changes in interpersonal relationships, a weakening of social connections and a loss of local services.

On the other hand, living and ageing in a community over a prolonged period of time can result in an accumulation of memories, attachments and associations.

Social exclusion is multi-dimensional and can influence many different areas of people's lives. Each current framework on social exclusion points to both institutional (e.g. access to services and service provision) and social (e.g. civic activities and social opportunities) components of exclusion. There are also individual aspects, but these concentrate on inequalities in terms of financial, material or social resources rather than considering deeper aspects of individual diversity. An individual's life-course, and the perspectives that are shaped over that life-course, are necessary elements to consider in understanding exclusion.

It is important to note the interaction between different factors. For example, a lack of financial resources can also lead to social exclusion in terms of low participation in social activities. Existing conceptual frameworks of social exclusion do not deal with age-related rural social exclusion and this in turn has an impact on policy.

Understanding ageing and exclusion

Findings from the community consultation with stakeholders in 10 rural communities across the island of Ireland illustrate the complex nature of life in terms of the rapidly changing economic and social structures, the relationship with the state, the capacity for innovation and the ability to adapt. They also indicate that recognising inclusion and exclusion among older people is a difficult task, especially at the community level.

This research found that "place" (both a community of people and geographic / infrastructural context) has a definite impact on social exclusion, and social inclusion, along with the role of economic, infrastructural and social factors. Exclusion does not automatically arise in a particular place or because of an isolated failure¹ by public provision, the community or individuals and their families, but rather exclusion is more likely to arise when there are multiple and incremental failures in a rural setting.

1 The degree of the failure will have an impact on the level of social exclusion.



Indicators of social exclusion

Respondents from participating communities viewed social exclusion as a multidimensional idea. Five indicators of social inclusion emerged from the interviews with older people. These are five areas of rural life which can lead to social exclusion if they are not sufficiently strong at an individual or community level.

- 1. Social connections and social resources:** Opportunities for social connectedness and supportive relationships.
- 2. Services:** Access to health, social care, general services and infrastructure.
- 3. Transport and mobility:** Access to private transport and rural public transport schemes.
- 4. Safety and crime:** Feeling safe and secure in the home and community.
- 5. Income and Financial resources:** Having sufficient income and the capacity to budget.

Walsh et al., (2012) argue that any one of these indicators or a combination of them can lead to social exclusion. For example, poor social connection is likely to be made worse by a fear of crime, low income and the absence of community-based services or sufficient transport will increase social exclusion. On the other hand, a propensity for loneliness could be offset by community services, high levels of social capital, adequate income and feeling safe and secure. The research team argues that the findings support previous work on social exclusion and ageing for non-rural settings. However, there are patterns and relationships that are particularly evident in rural settings, such as changes in rural socialisation, geographic location and distances, and a weak services infrastructure which compound the exclusion of older people living in the countryside.

Factors influencing social exclusion

The research team, using data from across the 10 rural communities, demonstrated that there were overlapping and interconnecting factors that influence whether a person is more or less likely to be socially excluded across the five indicators. How these factors combine and interconnect in an older person's life shapes the potential of being socially excluded in their rural communities. These factors, which stem from individual and rural diversity, are:

- 1. Individual capacities:** A sense of independence; the capacity to cope and adapt; and the ability to manage risks.
- 2. Life-course trajectories:** how a person's life has developed over the years, including bereavement; health; functional independence (also related to having to stop driving); and ageing.
- 3. Place and community characteristics:** Geographic and natural elements; people in the community and community cohesion; and attachment and belonging.
- 4. Macro-economic forces:** emigration and migration; changing economics in rural areas; reduction of social services and social meeting-points; and the impact of economic recession on communities and their residents.

The research finds that it is these factors that shape the extent to which exclusion is experienced in each of the domains; an individual's ability to cope with or be resilient in the face of that exclusion; the internal choices of an individual to focus on and prioritise other areas of life; or a combination of all three of these things. These elements also determine the extent to which exclusion impacts on individual well-being and quality of life.

Comparing social exclusion across communities

Scharf & Bartlam (2008) argue that compared to urban areas, older people in rural areas are prone to specific types of disadvantage, often with multiple elements, as they age. Walsh et al., (2012) indicate that they are disproportionately affected by changes in population structure, fragile social connections and disappearing services. This can result in a "dual marginalisation", arising from age and place.

The low population density and geographically dispersed consumers found in rural areas lead to low levels of demand. As a result, policymakers often use economies of scale arguments to justify the limited provision of services – evident in the centralisation of schools, medical services, policing and limited public transport. This dual marginalisation is a very high risk factor for social exclusion.

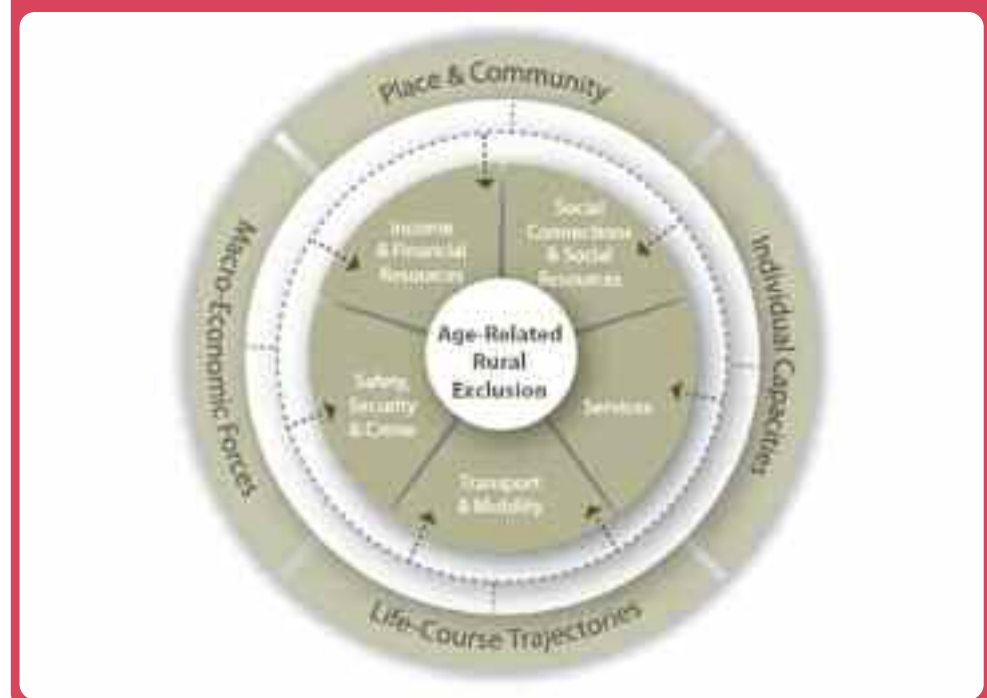
The differences in the communities studied for the research were most apparent in the domains of exclusion. For example, individuals in remote and island communities inevitably had less access to services than those in village and near-urban settings. A more complicated picture emerges when accounting for the relative impact of these experiences. This is more likely determined by individual life histories and personal preferences. A person living in one area for their entire life may react differently to a lack of services in their community, than someone who has recently moved from an urban area.

There were also many issues, concerns and advantages to rural living which were common to all communities. These include the importance of home help, the negative effects of the economic downturn and the idea that exclusion is likely if there are multiple failures, at individual, community and national level. However, the cross-over between different types of rural community and the themes that emerge is intricate and complex.

An age-related rural social exclusion framework

Walsh et al., (2012) developed a new framework, based on the indicators of social exclusion identified through the stakeholder engagement, as well as the mediating factors such as individual capacity and macro-economic forces. The resulting framework views age-related rural social exclusion as both multidimensional (in terms of the indicators) and multi-layered (in terms of the relationship between potential mediating factors and indicators). This interaction is illustrated by the hypothetical examples (see page 7). The new framework is represented in Figure 1, below. The indicators form the inner circle while the mediating factors which influence the degree of social exclusion are the outer circle.

Figure 1: A new age-related rural social exclusion framework



Source: Walsh et al., 2012

This new framework contributes to the international understanding of social exclusion among older people living in rural areas in several ways. It helps to account for the subjective and objective elements of age-related rural social exclusion and assists in illustrating the influence of individual and rural diversity on the experiences of older people across the various domains of social exclusion. It can also serve as a reference point for the development of social exclusion indicators for older people.

**Example 1:
Ann, 85 years old,
Remote rural area**

Ann lives in a remote rural area which is poorly serviced in terms of **public transport** and other necessary **services**. She depends solely on social transfers for her **income**. As a result, three of the five social exclusion factors apply.

However, Ann has lived in the area all her life and has a strong sense of **place and community**. She is stoical with a lot of **individual capacity** and experience gained throughout her **life course** means she is able to cope well with adversity.

Result: Though affected by social exclusion factors, Ann also has three significant mediating factors which mean she is at low risk of social exclusion.

**Example 2:
Barry, 70 years old,
near urban area**

Barry lives in a near urban area which is **safe**, well serviced by **public transport** and other **services**. He also has a good level of private **income** on top of state benefits. On the social exclusion factors alone, Barry is at low-risk.

However, Barry is not well-connected in the **community** as he lives on his own. Illness has also led to him becoming disabled and the distress has reduced his **individual capacity** to deal with the resulting challenges.

Result: Although Barry is at low-risk of social exclusion on the face of things, mediating factors in his circumstances have led to him being at high risk.

As we better understand what causes social exclusion, and what factors mediate against it, we can adapt policy responses to develop and strengthen the mediating factors where possible, at the individual, community and national levels.

Policy context

This section provides an overview of the policy context relevant to older people and rural social exclusion.

EU

Policies aimed at reducing social exclusion have become a key feature of social policy making in EU member states in recent years. Member states are required to present strategic reports for their country every three years which demonstrate progress towards meeting common objectives on social protection and social inclusion (European Commission, 2008). The initial action plans provided countries with the scope to address a broad range of issues that addressed the multi-dimensional nature of social exclusion. However, the recent plans have adopted a more limited view of ageing policy. They view participation in the labour market as the prime route to social inclusion, which overlooks a broad range of forms of social exclusion in later life.

Northern Ireland

There are three government publications in NI which relate to older people and social exclusion in rural areas. *Ageing in an Inclusive Society: Promoting the Social Inclusion of Older People* was a strategy document issued in 2005. The strategy focused on economic and financial inclusion as well as healthy ageing, access to facilities and services, equal opportunities and co-ordinated service provision. A revised strategy will be launched for consultation in 2012.

Lifetime Opportunities is the government's anti-poverty and social inclusion strategy. It pays specific attention to older people who are past working age and commits to working toward the elimination of poverty and social exclusion in NI by 2020. Specific mention is made of enhanced rural accessibility through rural transport, social participation to benefit the lives of older farmers and their families, and support for local authorities in filling gaps in service provision in rural areas.

The Department of Agriculture and Rural Development issued a draft *Rural White Paper Action Plan* in 2011 which identifies policy priorities related to the themes of urban-rural linkages, access to services, rural communities and economies, and sustainable countryside. In addition to the three policy strategy documents, £13 million was set aside in the Draft Programme for Government 2011-2015 to tackle rural poverty and isolation.

Republic of Ireland

While there are a range of policy documents that are relevant to older people, to date, an overarching strategy for older people in ROI has yet to be completed. A new positive ageing strategy is currently being developed, led by the Office for Older People within the Department of Health. In terms of existing documents, the *National Action Plan for Social Inclusion 2007-2016* builds on earlier plans for social exclusion in focusing on the traditional areas of care, income support and services. It does, however, consider aspects of participation and engagement for older people.

The *White Paper on Rural Development* from 1999 sought to develop a coherent and comprehensive strategy to respond to structural and social changes in rural places, and to address issues of economic and social underdevelopment in rural areas. The document stipulated the need for rural policy to be underpinned by a social inclusion dimension for rural-dwelling older people. Similarly, the *National Spatial Strategy 2002-2020*, in a broad sense focuses on exclusion and disadvantage in rural communities. The LEADER programme, which is run as a part of the *National Rural Development Programme 2007-2013*, aims to address rural disadvantage by funding local responses and initiatives, including the provision of basic services for a rural population.

Case study:

Rural exclusion in Scotland

A context-analysis involving research and stakeholder interviews was conducted on rural-dwelling older people and social exclusion in Scotland. Scotland has a low population density and high percentage of people living in “rural” areas. Since devolution in 1999, there has been a series of national statements relating to rural Scotland, the most recent of which is *Our Rural Future* in 2011. At an operational level, the rural strategy approach can be characterised by devolved decision-making; a broad partnership approach; citizen participation; attempts to ensure better policy co-ordination in central government; and, flexible support to meet diverse needs and circumstances. In terms of social inclusion, there is emphasis on raising participation, reducing powerlessness, and deepening social integration in rural communities.

Overall, policy work in Scotland has raised the national profile for older people’s issues and the positioning of older people in the governance concerns of Scotland is unquestionably in a very different place from what the situation was pre-devolution. There are remaining problems in terms of social exclusion for older people in rural areas – insufficient access to transport, housing challenges and health inequalities. However, the approach taken by the Scottish government in acknowledging the complexity of social exclusion among older people in rural areas, particularly the inter-linking areas of housing, transport, health and social care, support and contact, and participation, provides a useful insight for policy making and service development in ROI and NI.

Policy implications

Walsh et al., (2012) finds that there is a potential for “dual marginalisation” of older people living in rural areas. The authors argue for a renewed and integrated effort to maximise both the capabilities and the social participation of these people. If policies cannot meet these challenges, there is a risk that older people in these areas will become severely disadvantaged in terms of health outcomes, poverty and deprivation and quality of life. An ideal policy response would involve looking beyond standard approaches that concentrate solely on vulnerabilities or absences (e.g. income or transport) and instead looking at what can be achieved through increased investment in people and communities as a means of enhancing citizenship for all in rural areas.

The research also finds that the older population in many rural areas makes a significant contribution through providing care, volunteering both formally and informally and through financial contributions to family. Supporting intergenerational programmes on advantage and disadvantage in rural areas, including schools-based initiatives is a useful way to build positive relations and images about rural communities.

The year 2012 will see, in NI, a revised strategy for older people out for consultation while in ROI, a strategy is being developed, led by the Department of Health. These two strategies provide an opportunity for a new understanding and treatment of social exclusion among older people in rural areas. The framework developed by Walsh et al., (2012) can help to ensure that older people’s strategies take account of the values and goals with respect to the position of older people in rural areas. Furthermore, it can highlight that social organisations play an important role in maximising the participation and inclusion of older people. The existing networks can help address some of the more basic aspects of social inclusion but the more structural aspects need to be tackled through a specific longer term programme of work which plans for tomorrow’s older people.

Rural transport was identified through the interviews as an essential component in social inclusion. Recognising the current budget constraints, policymakers have the opportunity to develop a flexible and innovative approach to mobility and accessible transport in rural areas. Much can be learned from international best practice, for example the not-for-profit organisation ITN America. It provides an innovative, cost-neutral solution for transport for older people, often in remote parts of the US. The idea is that volunteer drivers can store up credits to pay for transport once they stop driving. They can also trade in their own cars to pay for transport in later life. Volunteer credits can be used to fund older people on low incomes, and adult children can buy gift certificates for older relatives to use the system (CARDI, 2010).

Maximising the participation and inclusion of older people must be at the core of future policy. This applies equally to those policies which are aimed at older people and those that have a knock on effect on rural older people.

Conclusion

The overall picture to emerge from the Walsh et al., (2012) research is one of optimism in relation to growing old in rural communities. The people interviewed were for the most part enjoying living where they lived but were conscious of the constraints that living in rural areas sometimes placed on their participation in society. It is clear that older people have contributed, and can contribute in the future, a lot to these rural communities through accumulated experience, wisdom and resilience. The impression gathered is that rural areas are good places to grow old for many people.

However, living in rural areas can contribute to the risk of social exclusion, particularly if there is not a strong connection to place and community, if the area is not well provided for in terms of transport and services or if incomes are low. Social exclusion can lead to disadvantage in health outcomes, risk of poverty and deprivation, loneliness and other situations which hamper the ability of older people to live healthy, independent lives as they age. This project helps to better our understanding of social exclusion among older people in rural areas, and points towards more nuanced policy responses.

Methodology

A qualitative study was undertaken in 10 different communities across ROI and NI, representing five different kinds: island; remote; dispersed; village and near-urban. The research involved three strands:

Community consultations: A focus group was organised with community stakeholders in each of the 10 study sites. The purpose was to gather the views of local stakeholders on ageing and social exclusion in their community.

Face-to-Face Interviews: The main body of work for this study involved 106 in-depth semi-structured interviews to gather data on the experiences of a diverse group of rural-dwelling older people. The focus was on exclusion, inclusion and participation. The sample included sub-groups of older people at particular risk of social exclusion, such as those aged 80 years and over; older people living alone; and those with a disability or a chronic ill-health condition.

Scottish Case-Study: A context-analysis, involving desk-based research and stakeholder interviews, was conducted on rural-dwelling older people and social exclusion in Scotland. The analysis assisted in identifying elements of best practice, in a similar socio-cultural context, that helped to inform recommendations for policy and practice responses for the main work.

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Published by the Centre for Ageing Research and Development in Ireland (CARDI) © Centre for Ageing Research and Development in Ireland. CARDI has produced this publication as a resource for researchers, policy-makers, older people and others with an interest in ageing research. To find out more about CARDI's grants programme please visit www.cardi.ie

This research brief is based on findings from a research project funded under CARDI's Grants Programme: Walsh et al (2012) and information collated by CARDI.

It may be cited as Social Exclusion and Ageing in Rural Communities. Dublin: Centre for Ageing Research and Development in Ireland, 2012.

This publication can be downloaded from www.cardi.ie Additional copies may be requested from:

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Our work has been made possible through funding by The Atlantic Philanthropies, augmented by grants from the Department of Health and Children in Dublin and the Health and Social Care Research Office, Public Health Agency, Northern Ireland. CARDI is hosted by the Institute of Public Health in Ireland.