

Older people

Headlines

There were approximately 63,800 people aged over 65 years living in Kirklees in 2010, almost 3 in 20 (15%) of the total population. By 2030 this could rise to 95,000, an increase of almost 50%. So by 2030, 1 in 5 of Kirklees people will be aged over 65 years. The over 85 population will rise even more from 8,200 to 15,500 by 2030, an increase of 89% (see population section for detail). These are the people most likely to have complex health and social care needs.

The health challenges for older people are different to those of working age adults. Smoking and drinking rates are low compared with the rest of the population (although many people are affected by diseases partly caused by sustained risky behaviour through adulthood), and dealing with disability and frailty, falls, dementia and depression are their significant challenges. Poor diets and malnutrition is high in those who are very old as is being physically inactive.

- Fifty years ago, 1 in 10 children could expect to live to be 100; today it is 1 in 4.
- 1 in 5 of older people live in poverty locally.
- Locally, 3 in 5 aged over 75 years were completely independent, half lived alone and 1 in 5 were dependent on another for feeding, dressing etc. The burden of disease has risen for people aged over 65 years, especially diabetes and urinary incontinence.
- Mirfield, Denby Dale & Kirkburton had the highest proportion of people aged over 65.
- The greater likelihood of long-term conditions among older people means that development of the management of these conditions and the increased emphasis on self care need to reflect the capabilities, aspirations and expectations of older people.
- As older people generally prefer to remain in their homes as long as possible, developing services to enable them to do this will be particularly important and range from 'handy persons' schemes to assistive technology and telecare.
- Projections suggest that if we continue today's model of care, an additional 1,144 care home places will be required by 2030 for people over 65 (a 52% increase).

Why is this group important?

There were approximately 63,800 people aged over 65 years living in Kirklees in 2010, almost 3 in 20 (15%) of the total population. By 2030 this could rise to 95,000, an increase of almost 50%. By 2030, 1 in 5 of those living in Kirklees will be aged over 65 years.

The over 85 population was 8,200 and this will increase to 15,500 by 2030, an increase of 89% (see population section for detail). These people are the most likely to have complex health and social care needs.

As the population ages, the costs of some age related health conditions will increase, but the population is also changing in other ways. For example, economically active pensioners were 3% of the workforce in 1992, but 5% in 2009. An increasingly older population does not just represent a cost to the public sector; it also provides an opportunity to make the most of older people's contributions to the community.

What significant factors are affecting this group?

Health functioning

Locally in 2008¹:

- People aged over 65 years had poorer health functioning than those aged under 65 years. The gap was greatest in physical functioning and experience of pain.
- Older people in Holme Valley had significantly better health than in Kirklees overall; in Dewsbury, they had significantly worse health. However, levels of mental health problems in both areas were the same as Kirklees.
- The health of older people in Dewsbury had worsened since 2005, in comparison to other localities.

Long term conditions

Locally in 2008¹, older people were more likely than those aged under 65 years to have all the major long term conditions: heart disease, high blood pressure, stroke, asthma, diabetes, pain and incontinence (also see dementia section).

- 1 in 6 (16%) older people had heart disease across Kirklees.
- Nearly 1 in 5 (18%) older people in Mirfield had heart disease.

- 2 in 5 (41%) older people had high blood pressure, slightly more than 2005. Older people in Denby Dale & Kirkburton, Mirfield and The Valleys were least likely to have high blood pressure but it still affected more than 1 in 3 older people in these areas.
- Fewer older people (3%) had had a stroke than in 2005 (5%).
- Asthma affected 1 in 7 (14%) older people, as in 2005.
- Diabetes affected more older people (16%) than in 2005 (12%), the highest number being in Dewsbury and Huddersfield South, both nearly 1 in 5 (18%).
- Urinary incontinence affected 1 in 6 (16%) older people, a rise from 1 in 8 (12%) in 2005. Dewsbury had the highest rate at nearly 1 in 5 (19%).
- Nearly 1 in 3 (32%) older people experienced back pain, rising from 1 in 4 (26%) in 2005.
- The numbers who experienced pain, including that caused by arthritis, also rose a little and now affected just less than half of all older men (46%) and just more than half of older women (57%).
- More than half (51%) of all those aged 55-64 and 65-74 were overweight, with 1 in 4 being obese, dropping slightly to 45% of those aged over 75 years. Only 1.5% of those aged over 65 years were underweight. This reflects the national situation. Estimates show an increase in the number of obese people aged over 65 years from 14,500 in 2008 to over 20,000 in 2025.

Physical dependency

- 1 in 10 (11%) of those aged 65 to 74 and 1 in 5 (21%) of those aged over 75 years were dependent (needed help with feeding, dressing, bathing/toilet).
- 1 in 5 (18%) of those aged 65 to 74 and 1 in 3 (37%) of those aged over 75 years needed help with indoor mobility (cleaning and housework, getting around inside the home).
- 1 in 9 (11%) of those aged 65-74 years and 2 in 5 (41%) of those aged over 75 needed help with mobility (shopping, getting around inside and/or outside the home).
- Each year 1 in 3 people aged over 65 years, and half aged over 85 years, fall at least once, many of which are preventable. Such falls can break a hip or other bone and then significantly impair functioning^{2(p32)}.

Behaviours

Poor diets and malnutrition is high in those who are very old as is being physically inactive^{2(p33)}.

- 1 in 4 (26%) older people were sedentary and this rose to 1 in 3 (37%) of those aged over 75 years, the highest rate of any age group.
- 1 in 10 (11%) of those aged over 65 years smoked, the lowest rate of any age group.
- 1 in 8 (13%) drank alcohol over the sensible limits, the lowest of any age group.

Living conditions

1 in 3 (34%) of those aged 65 to 74 and more than half (54%) of those aged over 75 years lived alone. By 2020 an additional 5,478 people aged over 65 years in Kirklees are likely to be living alone. By 2030, the total number of people aged over 65 years living alone is forecast to increase to nearly 35,000 and of these, nearly 23,500 will be aged over 75 years and 3 in 4 will be women³.

Nationally it is estimated that 1 in 5 older people live in poverty^{4 (p159)}.

Poor housing can increase the need for care, if older people can no longer manage in their own homes or if living conditions harm their health. Locally, 1 in 4 (27%) people aged over 65 years said their current home was inadequate for their needs, usually as the house is too expensive to heat, too large, it is unsuitable because of health problems/disability or public transport is inadequate¹. This lack of access to adequate transport networks can lead to social isolation and loss of independence.

Where is this causing greatest concern?¹

Men aged 65 and over in the Holme Valley had the longest life expectancy of 83.7 years, versus 81.6 years for men aged 65 and over in Dewsbury, a gap of 2.1 years.

Women aged 65 in every locality had longer life expectancy than men.

Women in Holme Valley had the longest life expectancy at 85.6 years, versus 83 years for women in Batley, a gap of 2.6 years.

Views of local people⁵

Older people have said that the following 12 themed areas are important to them and we should try to build support around these to improve their quality of life, sustain their independence and help them to live life to the full:

- Citizenship and involvement.
- A place to live.
- Money.
- Getting around.
- Leisure and social activities.
- Learning.
- Keeping safe.
- Health and wellbeing.
- Support in daily living.
- Carers.
- Information and access to services.
- Culture.

What could commissioners and service planners consider?⁶

Understanding the implications of the new Equalities Act and 'age proofing' services to ensure compliance.

In the next decade, the largest increase in numbers of people in this group will be amongst the 65-75 year olds. Enabling them to enter later life as well equipped as possible to lead longer and healthier lives will be crucial to both making the most of this new generation of older people but also to mitigate the impact of the significant growth in the numbers of more vulnerable older people.

Promoting positive behaviours - physical activity reduces the risk of musculoskeletal pain, mobility and balance, independence and quality of life. Inactivity can be life limiting, physical activity improves both the physical and mental health of older adults and the quality of people's lives. Not smoking and a healthy diet are crucial for a healthier old age.

The rates of long term conditions among older people means that development of the management of these conditions and the increased emphasis on self care need to reflect the capabilities, aspirations and expectations of older people.

As older people generally prefer to remain in their homes as long as possible, developing services to enable them to do this will be particularly important and range from 'handy persons' schemes to assistive technology and telecare.

If we continue today's model of care, an additional 1,144 care home places will be required by 2030 for people aged over 65 years (a 52% increase).

References

1. NHS Kirklees and Kirklees Council. Current Living in Kirklees (CLIK) survey. 2008.
2. Department of Health. Our Health and Wellbeing Today. 2010.
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_122238.pdf
3. Projecting Older People Population Information (POPPI) System.
4. Marmot, M. Fair Society, Healthy Lives: Strategic Review of Health Inequalities in England post 2010. 2010.
<http://www.marmot-review.org.uk/>
5. Audit Commission: Under Pressure Local Government report.
6. Kirklees Vision for older people.
<http://www.kirklees.gov.uk/community/care-support/livelife/PDFFiles/visionForOlderPeople.pdf>