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I just feel that no one cares

Results of Age UK's research into the mental health of people aged 50 and over.

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“Because I now feel useless and a drain on society it is very hard to stay positive and not get angry and frustrated. It’s as if people do not see you, therefore if I can avoid going out, I do. It has been a very challenging year for me and my husband.”

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1: Introduction

Over the past three years, Age UK has conducted six waves of research into older people's health and care. Our main report on the results from September 2023, **We have to take it one day at a time**, was published in January 2024. It contains an overview of our findings on: caring for others; physical and mental health; access to NHS and social care services; community life and social contact; cost of living increases; and concern about winter.

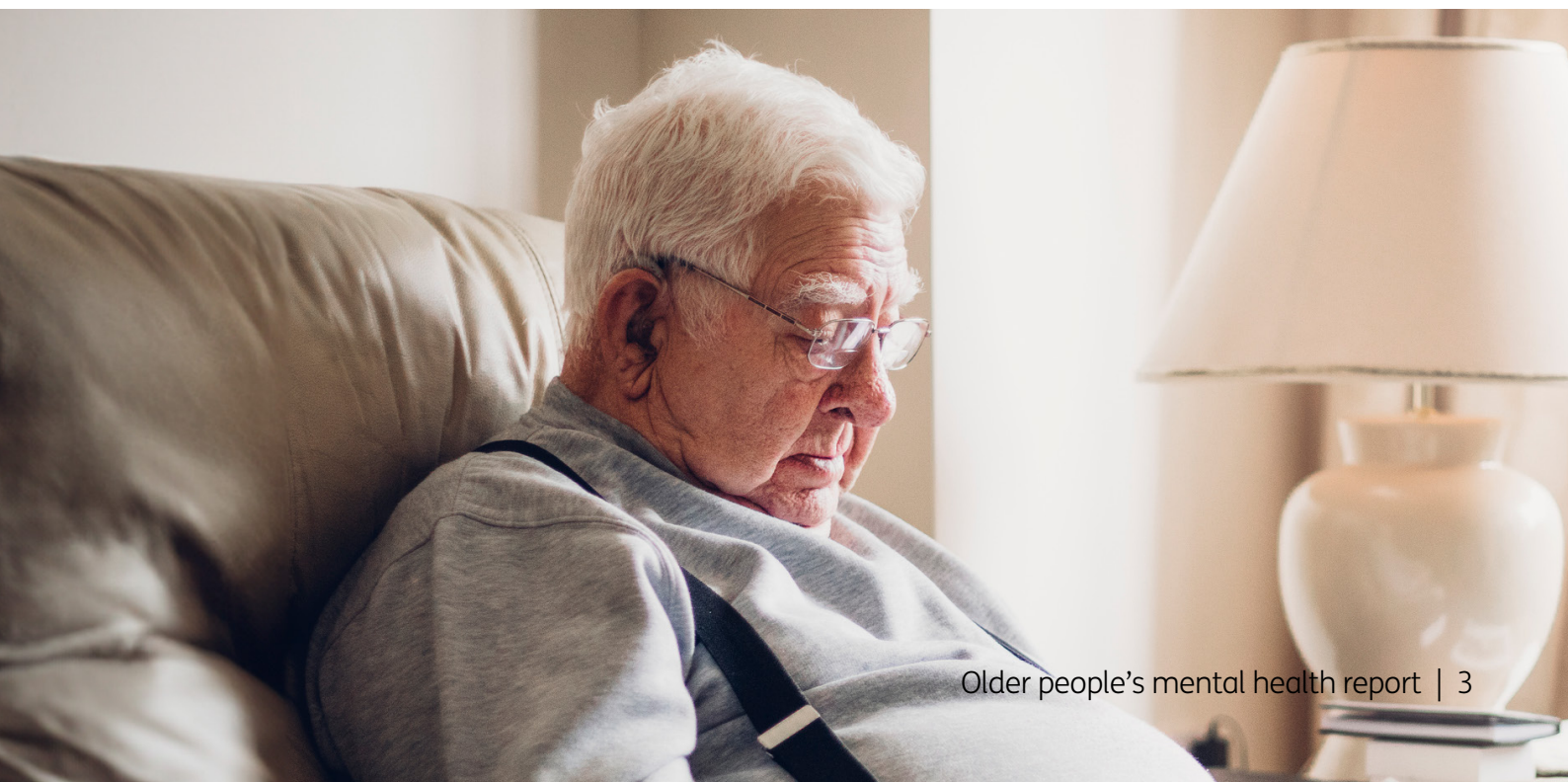
In this report, 'I just feel like no one cares', we take a deeper dive into the findings related to mental health. We asked people about changes in their mental health, what the reasons for those were, and what could improve their mental health. This report contains the results of our polling and survey work on the following topics:

- Changes in mental health
- Anxiety and depression
- Sleep and motivation
- Changes in cognition
- Caring and mental health
- Social factors, including loneliness and social contact
- What could improve mental health

For the first time in our research into older people's health and care, we expanded this most recent data collection to include people aged 50 years and over. Previous waves of research had included people aged 60 years and over. We have included some comparisons with previous years' research for the 60+ population, where this has been possible, and these are presented in boxes.

In expanding our polling to 50-59 year olds, we reveal a significant proportion of people struggling in their day to days lives, with knock on effects on their mental health. In some areas, people in this age cohort are reporting even poorer wellbeing compared to those in older age groups. Across the age range, we see sustained reports of poor mental wellbeing from a very low baseline of the pandemic, with little to no improvement in the face of the cost of living crisis and struggling NHS and social care services.

The case for investing in older people's mental health is stronger than ever. Too often an after-thought in national strategies and often invisible in major campaigns, older people's mental health is being left behind by the services and professionals that should be supporting them. This report will help to reveal how this impacts older people and what could start making a difference.



2: Methods

Representative polling:

In September 2023, we commissioned Kantar to conduct representative polling of the UK population aged 50 years and over¹. The sample included enough people from different subgroups of the population to mean that the numbers can be scaled up to represent the whole of the UK population.

- Everyone who participated was aged 50 or over,
- 13.5% of the sample were aged 75 and over,
- 53% were female,
- 43% were from more disadvantaged groups,
- 30% were living alone,
- 8% were from minoritised ethnic groups, as opposed to white groups,
- 36% reported living with at least one long term condition,
- 36% said their long term condition or illness reduced their ability to carry out day-to-day activities,
- 15% were providing care for someone else.

We have used the Office for National Statistics Mid-Year Population Estimates from 2021² to produce actual numbers of people.

Age UK in-house survey:

Running alongside the Kantar polling in September 2023, we opened our own online survey of older people's health and care.³ The survey was open to anyone aged 50 years and over. There was an option to complete the survey on behalf of someone else and 12% of responses were completed this way.

We received nearly 130,000 free text comments from over 17,000 survey participants. This is our largest response ever.

- Everyone who participated was aged 50 or over,
- 53% were aged 75 and over,
- 66% were female,
- 10% were from minoritised ethnic groups,
- 76% reported living with at least one long term condition,
- 57% were living with two or more long term conditions,
- 21% were providing care for someone else.

As the respondents to our in-house survey were not representative of the UK population, we have not included any statistics from this data source. All statistics included in this report come from the Kantar representative polling.

Data sources

1	Age UK Polling: Kantar Research Express conducted an online self completion survey between 7th September and 21st September 2023 amongst 2,621 adults in the UK aged 50+.
2	Office for National Statistics, Population estimates for the UK, England, Wales, Scotland and Northern Ireland - Office for National Statistics (ons.gov.uk)
3	Age UK SurveyMonkey online survey conducted between 7th September 2023 and 26th September 2023.

3: Changes in mental health

Almost a third (31% - 8 million people) of people said that their health had got worse over the previous 12 months. For those who told us about their mental health, the reasons included declines in their physical health affecting their mental health; hearing loss and vision loss impacting their wellbeing; and loss of independence with associated fear for the future.

“I can’t hear music any longer. Sounds are distorted. Use text for tv. Go to coffee morning on Mondays but can’t hear the conversation. Go to an art group on Thursdays. That’s the only time I meet people. Can no longer go to church because I can’t hear even with loop and it’s too far to walk. Until six months ago I had never missed going ever all my life.”

“Physical health issue is very limiting so feel life has become ‘small’. Lack of information about waiting lists gives stress.”

“Got really stressed and depressed with the roller coaster that my physical health has caused.”

We asked about how specific elements of people’s health had changed over the last 12 months. Table 1 shows the changes that were affecting people’s mental health.

I have less energy	45%
I am in more physical pain	32%
I am less independent	17%
I can’t walk as far	35%
I am finding it harder to look after myself	16%

“Due to physical issues, in pain daily and the effect of getting anyone to acknowledge there is a problem, I feel disregarded, frustrated as my daily life is compromised.”

“As each medical condition has appeared and taken its toll on the physical strength, the mental health has declined - now having regular bouts of depression and frustration due to being ‘trapped’ in a house that doesn’t meet the needs. Can’t leave the house without assistance from someone else.”

“Worried about the future how I will cope, losing my independence, how worse my condition will get.”

“My mental health has declined. The unpredictability of my condition and its rapid progression is frightening, there is no support and very few doctors, nurses or physios have even heard of it. My life is so restricted I can’t walk far or socialise, attend events. I often feel as though I have been buried alive.”

It was striking to see that, for the elements of people’s health related to independence, those aged 50-59 years were reporting significant challenges. Almost one in five (19%) said they were less independent, and 21% were finding it harder to look after themselves. As we reported in ‘We have to take it one day at a time’, many people in this age group are experiencing the onset of new long term health conditions, as well as the exacerbation of existing ones. It may be that the onset of these conditions is challenging their independence for the first time, whereas those who are older may have made adaptations, or have more modest expectations.

4: Anxiety and depression

Almost a third of people aged 50 and over reported feeling more anxious over the previous 12 months. Significant differences between different groups are shown in Table 2.

Table 2: Proportion of 50+ feeling more anxious over last 12 months

Female	36%	Male	26%
Aged 50-59	42%	Aged 60+	26%
More deprived groups	37%	Less deprived groups	27%
Living with long-term conditions	49%	No long-term conditions	21%
Carers	45%	Not providing care	29%

Again, we can see that more of those aged 50-59 are feeling more anxious, compared with the other age groups. The largest difference here is between those living with long term conditions and those without – more than twice as many with long term conditions are feeling more anxious. The reasons for this increase in anxiety given by respondents to our survey include spending too much time alone; caring responsibilities, which can be overwhelming and isolating; being unable to access health and support services; health worries; and worries about money and increased costs.

“Constant anxiety from reading the news and the impact on me regarding changes I may have to make to my house re climate change. An old age full of worry, not looking forward to the changing seasons just constant fear of extreme weather. The niggling possibility of being very cold in an old house difficult to insulate and without gas central heating. The recent cuts in bus services are depressing too. I am finding it difficult to get any enjoyment out of life now.”

“My anxiety level has become much worse and I now have periods of low mood and tearfulness.”

“Spend too much time on my own, suffer from anxiety which effects my sleep.”

“Most times I feel totally swamped and consumed with guilt and anxiety as to how I can tackle the mountain in front of me.”

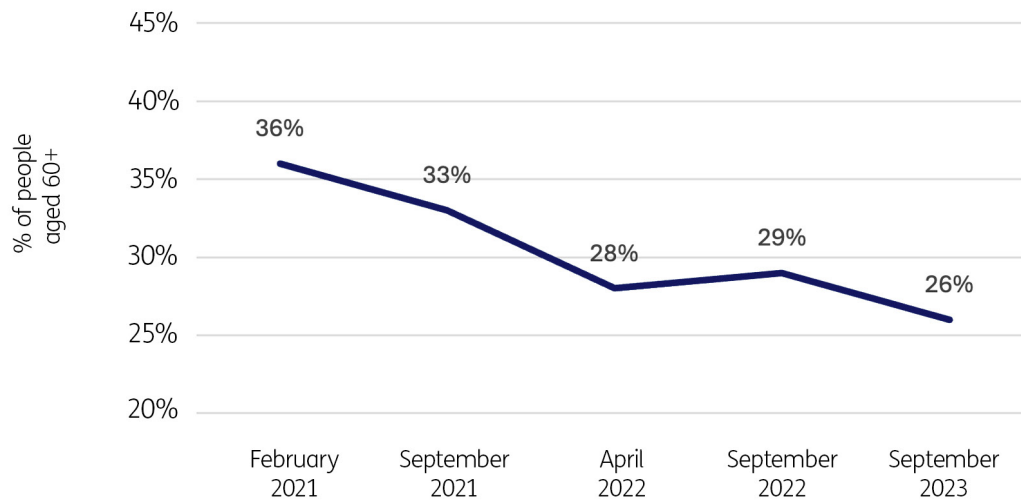
Some respondents told us about their own, or the person they were answering on behalf of's, depression. They shared how constant problems were wearing them down; their ability to cope had been eroded by isolation and by lack of support from either healthcare services or public services. Difficulties in accessing NHS services were covered in **We have to take it one day at a time**, but here we can see the impact of these challenges on people's mental health. We also heard about the impact of not being able to access mental health services. In our polling, more than a quarter (26%) of people aged 50 and over (6.7 million) were concerned about their ability to access mental health support (e.g. talking therapies or counselling).

“He feels that hospitals generally are no longer about helping people to get well and to stay well once discharged, but just about clearing beds as the money and funding that should ensure care is prioritised has been cut and/squandered on too much complex administrative systems and not put into helping people get well and stay well. My dad talks about this frequently as a source of anxiety and disappointment.”

“There is zero help for mental health, and if you do get onto a waiting list, usually over 6 months, you get a maximum of 6 counselling sessions. When each day you feel suicidal, and they refuse to change/alter medication there is no wonder so many are taking this way out.”

Changes in anxiety between February 2021 and September 2023 for people aged 60+

I feel more anxious



It should be noted that the first time point of February 2021 was during the third national lockdown, when levels of anxiety across the population were abnormally high. There has been a 10% drop in the proportion of people aged 60 and over feeling more anxious than 12 months previously. However, it is still more than a quarter of this population. With little respite between the global pandemic and the cost of living crisis, the proportion of people in this age group feeling more anxious remains stubbornly high.



5: Sleep and motivation

Almost two in five (39%) people aged 50 and over (10 million) reported not sleeping well, and more than a third (34% - 8.7 million) told us that they felt less motivated to do things that they enjoy. The significant differences between groups are presented in Table 3. These differences are similar to those for anxiety, with large differences again for people living with long term conditions and for carers.

Table 3: Proportion of 50+ not sleeping well over last 12 months

Aged 50-59	46%	Aged 65+	29%-38%*
More deprived groups	43%	Less deprived groups	36%
Living with long-term conditions	53%	No long-term conditions	30%
Carers	51%	Not providing care	37%

* Age categories 65-69 and 70+ presented as a range.

Poor sleep was reported as both a contributor towards and result of poor mental health.

“I lost my mum and feel I need to talk to my doctor about how I get over my grief as it’s affecting my sleep, feel constantly tired and exhausted.”

“Not sleeping too well is also very draining on both physical and mental health.”

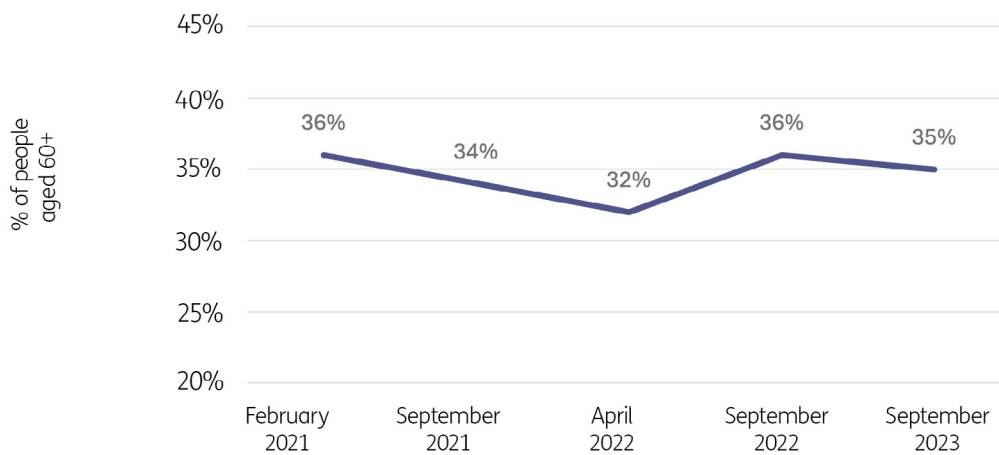
“Since I was diagnosed with breast cancer I can’t sleep as I get worried if I close my eyes, I might not wake up so my sleeping habit as got worse.”

“I am totally exhausted and run down, I sleep very badly and am in constant pain.”



Changes in not sleeping well between February 2021 and September 2023 for people aged 60+

I have not been sleeping well



Again, it should be noted that the first time point of February 2021 was during the third national lockdown. We can see that there was a drop in the proportion of people aged 60+ not sleeping well in April 2022, after all restrictions had been lifted, but that the figure increased again and is now largely unchanged from February 2021.

More than a third of people aged 50 and over reported being less motivated to do the things they enjoy. The proportions were higher for women, those aged 50-59, those from more deprived groups, those living with long term conditions and carers (see Table 4).

Table 4: Proportion of people 50+ feeling less motivated over last 12 months

Female	37%	Male	31%
Aged 50-59	41%	Aged 60+	30%
More deprived groups	39%	Less deprived groups	30%
Living with long-term conditions	56%	No long-term conditions	21%
Carers	46%	Not providing care	32%

Motivation was linked to lack of energy and poor sleep for many people, as was declining physical health and mobility.

“Have no energy or motivation and want to sleep a lot more.”

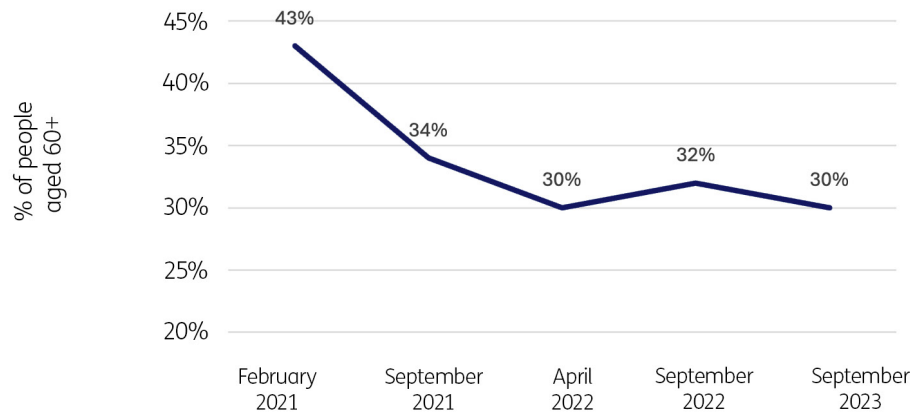
“Mobility problems make every day a struggle and motivation a problem.”

“Due to health concerns and age, feel like burden, lack of motivation.”

“Lack of self motivation to exercise, or interact with anyone.”

Changes in motivation between February 2021 and September 2023 for people aged 60+

I am less motivated to do the things I enjoy



During the third national lockdown in February 2021, 43% of people said that they were less motivated to do the things they enjoy. Almost a year of Covid-19 restrictions had been in place by this point. There was a drop in this figure of 13% between February 2021 and April 2022, when all restrictions had been lifted. However, since then, the proportion of people aged 60 and over less motivated to do the things they enjoy has remained fairly static at around 30%. This is a large proportion of that population who are losing motivation.



6: Changes in cognition

More than a quarter (27%) of people aged 50 and over (6.9 million) reported finding it harder to remember things. There were striking differences between those aged 50-59 and those aged 60 and over, and between people living with long term conditions and those without (see Table 5). We know that levels of cognitive decline and impairment are higher with age so it may be that, as with declining levels of independence, people in the 50-59 age group are noticing changes in memory and cognition for the first time.

Table 5: Proportion of people 50+ finding it harder to remember things over last 12 months

Female	29%	Male	25%
Aged 50-59	34%	Aged 60+	24%
Less deprived groups	25%	More deprived groups	30%
Living with long-term conditions	40%	No long-term conditions	19%
Carers	38%	Not providing care	25%

In our survey, people told us that they were more often forgetting names, places and words. For some this was thought to be part of ageing, and to be expected, but for others it was part of specific mental health issues such as post-traumatic stress disorder.

“I can no longer be trusted in the kitchen, I struggle to remember things, I have no recollection of my past. I have post traumatic syndrome, and depression.”

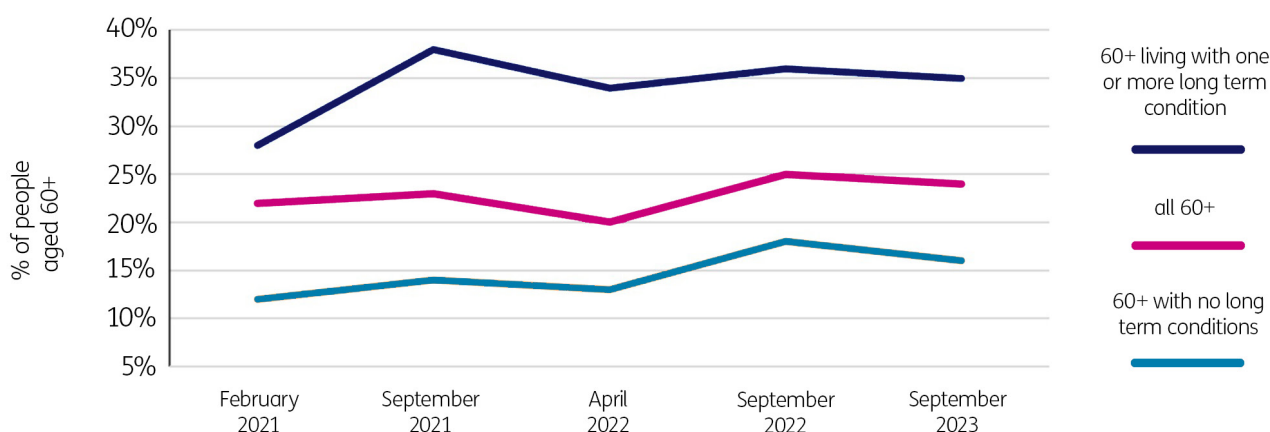
“He gets irritated by his memory loss. When he sleeps badly, he is angry and erratic. He is depressed.”

“On reaching 70 (now 79) I have noticed a decline in memory skills. Know this is to be expected but can be worrying at times.”



Changes in finding it harder to remember things between February 2021 and September 2023 for people aged 60+, including those with and without long term conditions

I am finding it harder to remember things



The middle line shows the change in finding it harder to remember things for the general population aged 60 and over. This has fluctuated between 20% and 25% since February 2021. We can see that there has been a much larger proportion of people aged 60+ living with one or more long term conditions finding it harder to remember things (top line) than those without (bottom line). These stark differences have remained fairly static since April 2022.

Almost one in five (19%) of those aged 50 and over (4.9 million) told us that they were finding it harder to process new information, with the same groups as for the question about memory having the largest differences (see Table 6).

Table 6: Proportion of people 50+ finding it harder to process new information over last 12 months

Aged 50-59	26%	Aged 60+	16%
More deprived groups	23%	Less deprived groups	16%
Living with long-term conditions	32%	No long-term conditions	12%
Carers	28%	Not providing care	17%

People responding to our survey told us that struggling to learn new skills, such as using new technologies, was frustrating and often led to increased anxiety. Others told us about the impact of mild cognitive impairment and dementia on their own, or another person’s mental health.

“Declining because everything is getting more difficult to sort out or access he doesn’t understand apps, scan codes, therefore he doesn’t bother and then he deteriorates and doesn’t feel part of this world anymore.”

“I feel mentally slower now I am in my 60s and I struggle to understand and access all the technology which is essential to everyday life now.”

“Slight cognitive impairment diagnosed nearly 2 years ago. No follow up and no meds other than for anxiety. Cognitive ability and memory now extremely poor and no support in place.”

“Dementia got worse e.g. now affecting speech. Short term memory totally gone. Lonely and depressed.”

Almost a fifth (19%) of people aged 50 and over (4.9 million) were concerned about their ability to access Dementia services, such as a Memory Clinic. The figure rose to 30% (7.7 million) for those who were carers.



7: Caring and mental health

As we reported in **We have to take it one day at a time**, caring for others can have a huge effect on mental health. Almost half (48%) of unpaid carers aged 50 and over (1.8 million) had felt anxious, more than a third (34% - 1.3 million) had felt overwhelmed, and more than a fifth (21% - 810,000) had felt lonely because of the care or support they provide.

In our survey, unpaid carers told us about the stress they were under through caring; the additional burden of carrying all the responsibility; the impact of the lack of support; and the guilt and anxiety they were carrying.

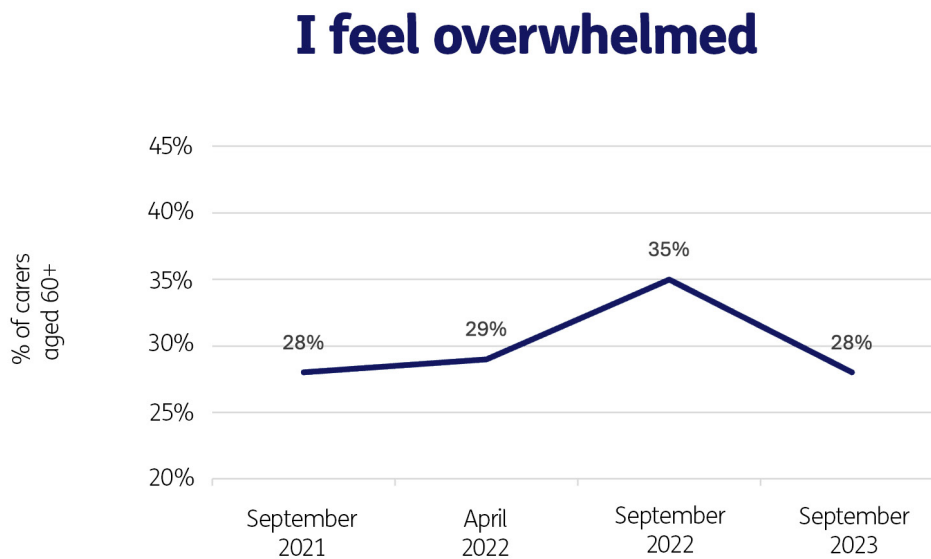
“The responsibility to care and supervise someone who can easily fall is very stressful. I only hope that my own health stands up so that he can remain in the home with me.”

“More anxious, due to my husband’s diagnosis I have become the decision maker. Children do help but don’t want to become a burden to them.”

“I find it extremely stressful providing care for my brother and it impacts on my physical and mental health but he wouldn’t manage without my support.”

“Again, looking after my husband with dementia alone has broken me and caused anxiety.”

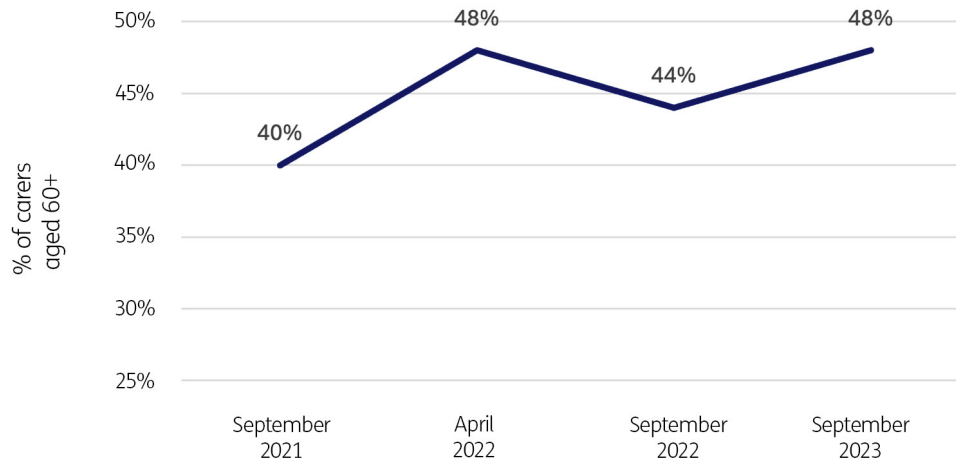
Changes in feeling overwhelmed between September 2021 and September 2023 for unpaid carers aged 60+



This figure has fluctuated between 28% and 35% of carers aged 60 and over and is currently the same it was in September 2021 (28%). The increase and the peak in April 2022 coincided with another winter of Covid-19 restrictions. We know that the demands on unpaid carers were overwhelming for many throughout the pandemic restrictions. All domestic restrictions were dropped in February 2022.

Changes in feeling anxious between September 2021 and September 2023 for unpaid carers aged 60+

I feel anxious

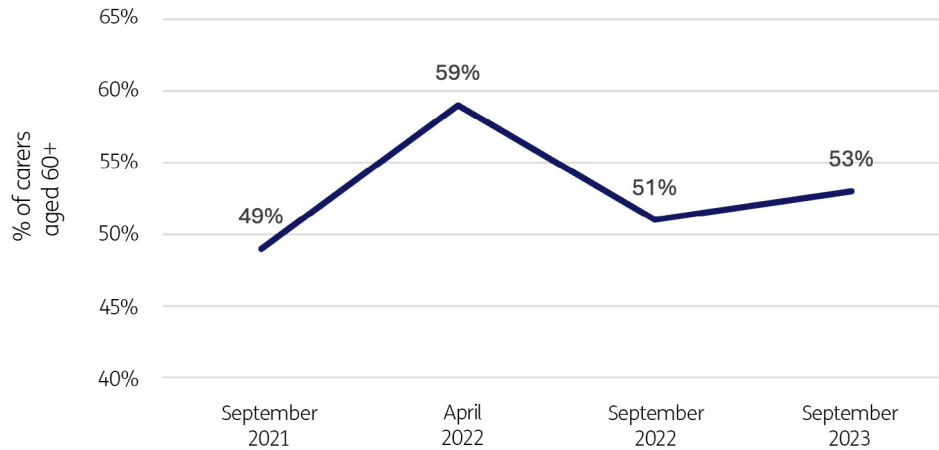


This figure has fluctuated between 40% and 48% of carers aged 60 and over and is currently the same it was in April 2022 (48%). The increase in the proportion of carers feeling more anxious between September 2021 and April 2022 coincided with another winter of pandemic restrictions. The Covid vaccination programme began its roll out from March 2022. The increase from September 2022 to September 2023 maps to the increase in the cost of living, which we know is a source of worry to many unpaid carers on limited income.



Changes in feeling tired between September 2021 and September 2023 for unpaid carers aged 60+

I feel tired

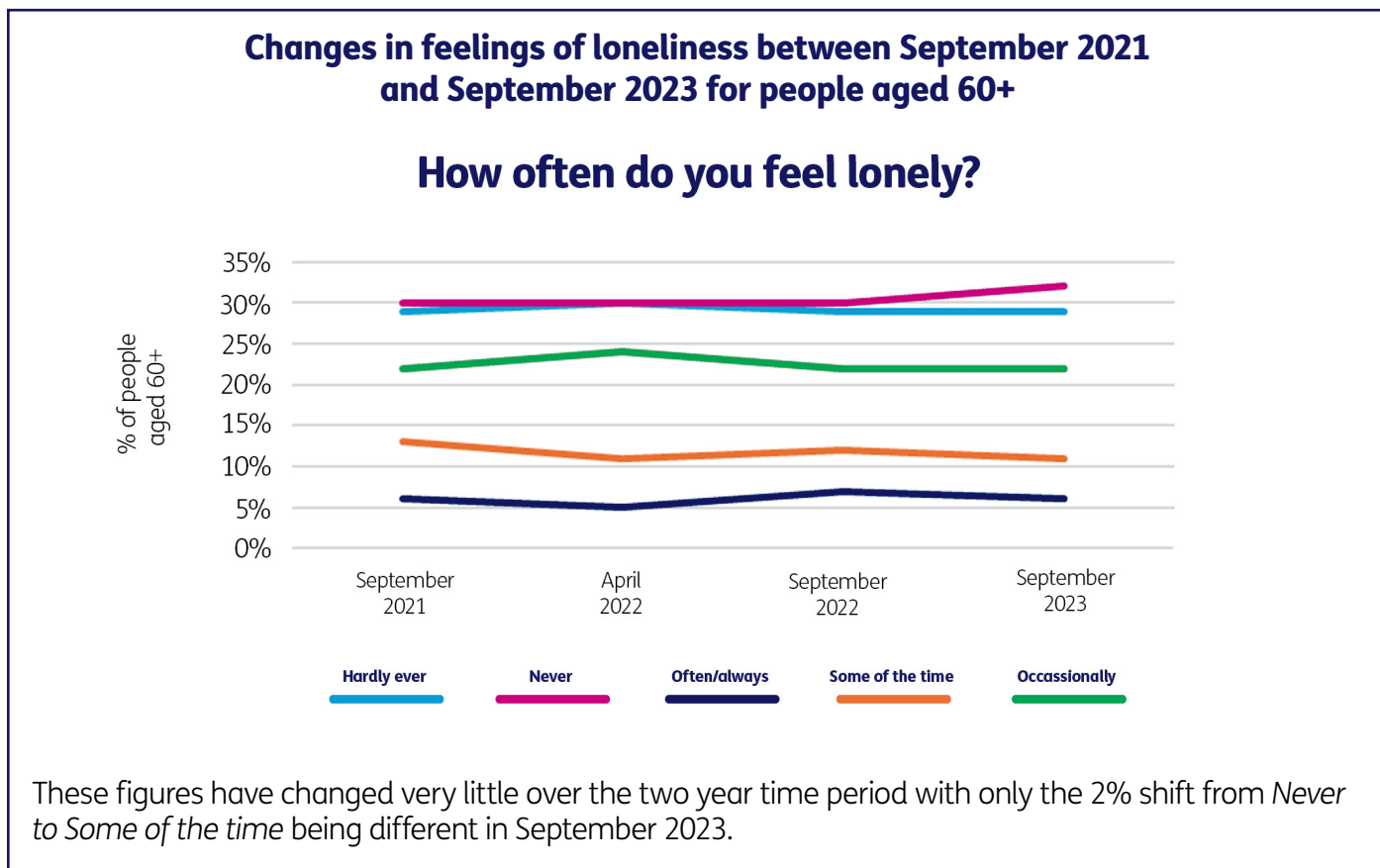


This figure has fluctuated between 49% and 59% of unpaid carers aged 60 and over and is currently 53%. This trend is similar to that in Box 6 (I feel anxious) but with higher proportions of unpaid carers aged 60 and over feeling more tired. The increase in the proportion of carers feeling more tired between September 2021 and April 2022 coincided with another winter of pandemic restrictions. The lifting of restrictions and reopening of services in spring and summer 2022 meant that many support services had reopened by September 2022. The proportion of unpaid carers feeling more tired has remained fairly static between September 2022 and September 2023.



8: Social factors

In **We have to take it one day at a time**, we reported on social contact and loneliness. More than a quarter (26%) of people aged 50 and over (6.9 million) were rarely or never going out of their homes for social activities. One in eight (13%) people aged 50 and over (3.3 million) were rarely or never having social contact with others in person, over the phone, or online. More than seven in ten (71%) of people aged 50 and over (18.2 million) reported being lonely to some extent.



In our survey, people told us about feeling isolated through living on their own; their illnesses and associated lack of mobility; through sensory or cognitive impairments; by the place where they live and lack of transport; or due to their lack of friends and family.

“He lives alone and cannot walk as far anymore due to the pain. so is effectively becoming lonelier and lonelier as he’s in doors alone all the time.”

“She has no one to talk to for days on end. Pays £80 for a carer to take her out for a couple of hours a week but her disability is isolating her more and more.”

“Increased isolation because of mobility and deafness - struggling to get help with either.”

“Because I live in a rural area with poor public transport, and I can’t afford to drive my car very often I feel very isolated.”

“Isolation from having no family and few friends. Feeling that I have nothing to look forward to but growing ever older alone, and little chance of being able to change that situation.”

“She is lonely and unstimulated. Her hearing and sight loss have closed in her world. Poor mum.”

Bereavement was a major factor in many people's mental health. Loss and grief can be regular occurrences as we get older, having a huge impact on wellbeing and people's ability to cope.

“Never thought I would be depressed, just not that sort but the last year...grief has taken over... made me uninterested in most things...having to force myself to dress, eat, go out....but it is getting better ...little by little...and I am not thinking of dying yet...”

“Since sudden death of my husband three years ago, I become much more depressed, this isn't improving with time.”

“It's mostly depressing and frustrating not able to do what I used to do (dancing, running yoga long distance walking etc). Also have no living relatives in the North and feel stuck here now since partner and all friends have died.”

“It's been a bad year with family losses and way too many funerals. I'm still tearful at times since my fathers death.”

In **We have to take it one day at a time**, we also reported on people's worries about the cost of living and about the coming winter. Two in five (40%) people aged 50 and over were worried about heating their homes enough and more than a quarter (28% - 7.2 million) were worried about getting into debt. Respondents to our survey told us they were worrying about being able to pay their bills, eat enough and generally make ends meet.

“Money worries now and worrying they will not improve and likely get worse. Dread another winter without heat and hot water and living on salad.”

“This is a HUGE worry as my wife needs to be kept warm being chair bound each and every day.”

“His mental health has deteriorated as he is so worried financially and thinks he is going to lose his house as no help at all with mortgage etc.”

“Worry about my general health, worry about cost of living and trying to make ends meet on pension.”



9: What could improve mental health?

Nothing will help

In our survey, some people told us that there was nothing that could help their mental health, either because they could not envisage a solution, or because they thought it was too late for them to improve.

“I really don’t know, I’ve tried many things, but nothing has made any difference, so don’t know where to turn now. I am sole carer since losing my husband last year so finding it very difficult.”

“Nothing as dementia is progressive and incurable.”

“I have been miserable/ depressed for so long I have no idea. Several sessions of CBT. And have paid for counselling myself but when it hits, I cannot cope.”

Access to services

In our polling, more than a fifth (21%) of people aged 50 and over (5.4 million) said that better access to their GP would help them the most. Many respondents to our survey said that improvements in physical health would be the key for improving their mental health, through access to NHS or other support services such as talking therapies, face to face contact with a GP, or specialist medical help.

“Getting on top of his physical health. He knows he won’t get better but I would hope there would be medical aids medication that would make life a little easier, more bearable.”

“I feel that easier access to a mental health specialist would help not just me but other people who need them.”

“To feel more confident that I can get a Dr’s appointment more easily.”

“For those who were caring for others, more support through activities or respite would help their mental health.”

“Going out to a social group of some kind. A coffee morning or craft class. Being able to access assessment and support for carers.”

“Regular Respite for my husband. I am his full-time carer.”

Less financial stress

One in 11 (9% - 2.3 million) said that more support with meeting essential costs, for example keeping warm, would help the most. Survey respondents said that having less financial stress, through help with bills or being able to access their pension would make the biggest difference for many.

“Being healthier financially. I am a WASPI woman. 6 extra years is a slog!”

“Less stress re price increases on all food. Fuel bills and transport costs.”

Being active

Some survey respondents said that being able to get out and about more, being more physically, socially and cognitively active would make a large difference.

“Being able to get out and about and to cease relying on others so much and to regain her independence.”

“Making myself go out and meet people, I have become rather insular.”

“Continuing to exercise, walk, play tennis, and continue with my social life. This is important for my mental wellbeing.”

Feeling valued

Many people told us that they felt older people were not valued or treated with respect. They often felt sidelined and overlooked when they came into contact with services. They wanted someone to properly listen to their concerns and take them seriously. This would improve their mental health.

“Simply knowing that someone cared. It seems when you’re past a certain age you feel written off by society.”

“Being listened to when I’m trying to let people know how terribly sad and lonely I feel.”



10: Conclusion

Our research into the mental health of people aged 50 and over has identified a wide range of factors impacting on people's wellbeing. Some of these issues could be alleviated by improved access to health and care services. Others could be improved through increased availability and easier access to social support and community-based activities. Some of the more personal factors, such as bereavement and cognitive decline are more difficult to address, but that doesn't mean there is nothing we as a society can do. Reaching out to people and offering a listening ear could be the lifeline that someone needs. Treating older people with respect and demonstrating that they are valued can be incredibly powerful. We must not fall into believing that poor mental health is acceptable for older people, or that the impact of loss and grief is inevitable and therefore does not need to be addressed. Older people respond very well to talking therapies and, with the right support, can improve their mental health and become more resilient.

What is clear from our research and wider work on this topic is that policymakers, and indeed society, lack a proper vision for maintaining and improving mental health in later life. National strategies and investment are heavily focused on early years prevention and supporting people to stay in employment. These are vital and important priorities and should be the major platforms for activity on mental health. For many older people, being able to stay in work is an equal priority for them.

However, there is not a framework for people later in life for whom returning to work is not a goal, for various reasons, or who have multiple health and care needs, each impacting on their mental wellbeing and ability to do the things important to them. For those that rely on services to meet daily needs, the nature, or lack, of those services can have a profound impact on their mental wellbeing. The feedback from carers in this report bring powerful testimony to that effect.

These and other factors are often concentrated in later life. When the older people we hear from report arriving at this point, they do not feel that something will be done to help them but instead that they might just have to give up. This is not good enough and unless there is a focus and investment across government, and particularly in the NHS, the trends we demonstrate in this report will not improve.



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