

What matters to you?

Current experiences of people aged 50 or over in Wales

.....
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Cynghrair Pobl Hyn Cymru
Cymru Older People's Alliance

Wales Seniors Forum
Fforwm Pobl Hyn Cymru



Ariennir gan
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About this research

During April and May 2023 Age Cymru worked in partnership with the four national older people's organisations to understand what really matters to people aged 50 or over across Wales, and what they need to live happy and fulfilled lives.

1200 older people told us their views by completing our survey online, offline via paper copies or by telephone, or wrote to us directly about their experiences. Almost 10% of the surveys were completed offline.

Ages ranged from 50 to 100, with 39% of respondents over the age of 70. 4% of respondents identify as gay, lesbian, bisexual or prefer to self-describe, and 5% of respondents describe their ethnicity as Black, Asian or other Minority Ethnic.

31% of people told us that they live alone. 72% of respondents identify as female and 27% identify as male, 2 respondents prefer to self-describe, and 1% of respondents prefer not to disclose. 1% of people identify as trans.

28% of people who responded to us live with a disability, and 9% of people served in the Armed Forces.

In terms of Welsh language, 9% of respondents told us that they speak Welsh, 9% read Welsh and 7% write in Welsh.

We received responses from every local authority area in Wales.

This was the fourth national survey that we have carried out together since the beginning of the pandemic. It's crucial that we hear directly from people aged 50 or over as we know that older people have been disproportionately affected by the pandemic, and the ongoing cost of living crisis, and we need to ensure that their voices are heard and continue to be heard. This report is a snapshot of the experiences and views of people aged 50 or over in Wales. It provides evidence of the specific needs of older people; reflecting a diversity of views and experiences that policy makers and practitioners need to take into account when considering what should be done to ensure that older people can live well in the coming year, and beyond.

This research has been funded by Welsh Government.

We're grateful to everyone who responded to this research and thank them for sharing their views and experiences.

Current experiences of people aged 50 or over

Access to healthcare



69% of older people had a negative experience of accessing healthcare

Older people reporting a negative experience of accessing healthcare is slightly higher than in 2022 (66%) which was an increase over 2021 (50%) but better than at the beginning of the pandemic (70%). Similar to our last three surveys, we heard again this year from people who told us they avoided accessing healthcare services. Worryingly, 11% of respondents told us they'd tried to access health care but hadn't been able to get the support they needed.

"I find it so stressful to contact the GP, so don't bother anymore. The surgery app never works and can't get through on the phone."

Many older people told us how ageism is affecting how they are dealt with.

"My issues are not life threatening but affect my everyday actions. Old age problems don't seem to be recognised. Whilst I don't believe I've ever cost the NHS much in my lifetime, I feel that now I need it it's not there."

As with our previous surveys, we heard from many older people who felt forced to pay for private medical care as they simply couldn't wait for NHS care.

"I have to pay for dentistry, podiatry and opticians. This can be very expensive and I worry whether I'll be able to afford these when I finish work."

In particular, many more told us of paying for private operations and treatment. We heard from more people this year about waits for cataract operations.

"Frustrating as lengthy wait for GP appointments and hospital tests. Have consulted privately - not insured so costly business. Will be paying for 2 cataract operations as the wait is over 2 years!"

Accessing GP surgeries and appointments

GP surgeries and integrated health care centres are the gateway to most health and care services, so ease of access is vitally important. When people are discouraged from accessing GP services, health and care issues increase, which can result in a loss of quality of life and increased long term issues.

Positive experiences



38% of older people had a positive experience of accessing GP surgeries

Some older people told us of improvements they'd seen since the Covid pandemic and how this improves continuity and quality of care.

"I have a GREAT GP! We speak monthly. She facilitates other referrals to Consultants. I am LUCKY."

Similar to our previous surveys some respondents appreciated ease of access through telephone appointments, though they'd prefer face to face consultations.

"I miss having a one-to-one relationship with a doctor who knows me (the good old days!) but can still access basic healthcare and get a free prescription."

Negative experiences



72% of older people had a negative experience of accessing GP surgeries

As with our previous research, many negative experiences older people told us of were with 8am calls to 'first come, first served' appointment systems in the hope of getting an appointment.

"Difficult to get GP appointments when needed, if you don't get in the queue first thing in the morning you can't get an appointment."

Some unpaid carers told us of the additional pressures they have in arranging appointments when they need to find someone to look after their loved one.

“Difficult to get appointments. Then finding someone to look after husband to go to appointments.”

Others told us of reductions in GP surgery opening times and accessibility problems.

“I need to have my annual blood checks and my medication review but my surgery is only open 2 days a week and is short staffed. The main surgery is not accessible due to my mobility issues and their lift is out of order.”

Some told us of difficulties in online systems not being sufficiently detailed to cope with complex health care needs.

“I have been able to access online support from my GP which I find useful, I probably should seek face to face support. It can be frustrating when engaging with primary care as my doctors surgery asks that all initial contact is digital but due to my husband’s complex health needs the AI used by the software doesn’t pick up his specific requirements and so then results in wasted time and the requirement to call the surgery (which we knew we would have to do in the first place)”

Access to treatment and ongoing checks



73% of older people had a negative experience of accessing treatment and ongoing health checks.

Older people told us about their access to ongoing treatment and health checks for various conditions.

“Poor health care provision and support if having ongoing issues at work. All the support is based on brief therapy - max of 6 sessions and then I have to start over with someone new. It does not meet my needs or take into account the situation that I have been in.”

Others told us of a mixed experience, and some people accessed services privately due to long waiting times.

“GP/ hospital based services ok, but physiotherapy services I pay privately for- you need the help when you need it, not in three months time!”

Access to surgical procedures and in-patient care

As with previous surveys, many older people told us of delays in treatment and cancelled appointments.

“Broken promises on breast reconstruction surgery (breast cancer treatment). Cancelled outpatient appointments.”

An increasing number of people told us of the difficulties they have getting to appointments.

“Worst problem was getting transport to hospital etc as car scheme very busy. Just getting around town with broken leg as can’t get to bus, had to try to get a lift, many times nobody able to help me, everyone works.”

We also heard from more older people that have paid for private health care as they simply could not endure life on an NHS waiting list.

“The wait for NHS hernia repair surgery forced me to make a personal decision to go private (against my usual principles). I know I can make those decisions where most people are not in the same position, but I fear it only contributes to undermining the NHS.”

Access to dental services



81% of older people have a negative experience of accessing dental care

We saw an increase in the number of older people telling us they were unable to access NHS dentistry this year, up from 70% last year. Many negative experiences related to long waits for emergency care and having to seek private treatment. A number of people told us of not being able to access treatment on the NHS and were faced with huge bills to get private treatment. One person told us they had to take out a loan to over the cost.

“My NHS dentist had retired and could not get any appointments. Had to go private and paying a loan of £1600 at the moment.”

Others told us that they simply couldn't afford treatment and are now living with dental pain.

“My Dentist has now gone fully private and I am struggling to find an NHS dentist , I cannot afford to have private treatment and need help now with pain in my tooth.”

Some people told us that they have to travel great distances to get dental treatment, with one person travelling over four and a half hours to access NHS dental care. In some areas we heard of dentists being closed down unexpectedly, with no explanation, with one person in the middle of treatment.

Accessing social care

20% of older people told us they had tried to access social care in the last year. Just under two thirds of these older people had asked for help for someone else with the rest needing help for themselves. Three quarters provided unpaid care for at least one person.

Those who'd asked for help for themselves were much more likely to tell us their physical health had got worse over the last year; 62% compared with 4% of all respondents. They were also more likely to say they were experiencing 'poor' or 'very poor' mental health.

The 20% of people that tried to access social care were more likely to tell us that loneliness is a challenge, that transport is a challenge, and that their home was in need of repairs. Those in need of social care also told us that dealing with bereavement was a challenge. They were also more likely to say they were not optimistic about the year ahead.



80% of older people had a negative experience of accessing social care.

There has been a 10% increase in negative experiences of accessing social care from 70% last year. We heard of issues with poor communication, from difficulties getting through to the right people, not getting call backs as promised, to incorrect information being given and poor follow up once care had been arranged.

“I spoke to my Social Worker once. She gave me information that was not correct about my future care and has failed to call me back as she promised or provide me with a copy of my care plan. As a social worker for 27 years and a manager for the majority of the time before I became ill I am appalled at the lack of professionalism and care. I called the Direct Payments Office myself and arranged a reduction in my care because I was unable to afford the nine hours but the fact is many people would not know how to go about it. I understand the staffing and workload issues but it simply is not good enough.”

Many issues related to long delays in getting an assessment and then getting the care in place.

“I am still trying to get a carers needs assessment for myself and care needs assessment for my son who lives with me and I am full time carer for. I am 70 with failing health and finding it increasingly difficult to look after him.”

In some cases care came too late.

“An unacceptable delay. My wife died long before the local authority were able to source the support she needed.”

Other concerns related to hospital discharge arrangements.

“I have had a lot to do with organising carers for my elderly father and having to push for discharge which takes too long because once there is a break from visiting carers reinstating the service takes too long.”

We also heard how time limited care leaves some older people without the support they still need.

“Good social care when my wife left hospital but not so much now.”

We heard many times from older people that they needed more help, but there was a delay in getting a newer assessment and care wasn't available in the community.

“Much less available than in the past. Longer waiting lists.”

We heard concerns from families whose loved ones had gone into residential care but still needed help themselves.

“Used social services. Thought they were there for us but after getting mum into a home they did nothing to help our plight - did the opposite in fact.”

Positive experiences

Those that had a positive experience with social care often told us how supportive staff had been in their care journey.

“Social service provision has been excellent. They have helped both my husband and me. They have been very supportive.”

But even for people that told us that social care was good, this was often with the caveat that there had been delays.

“It took a long time but was very good when it finally kicked in. I wish I could have had help sooner.”

We heard some positive examples of linking in older people with wellbeing activities.

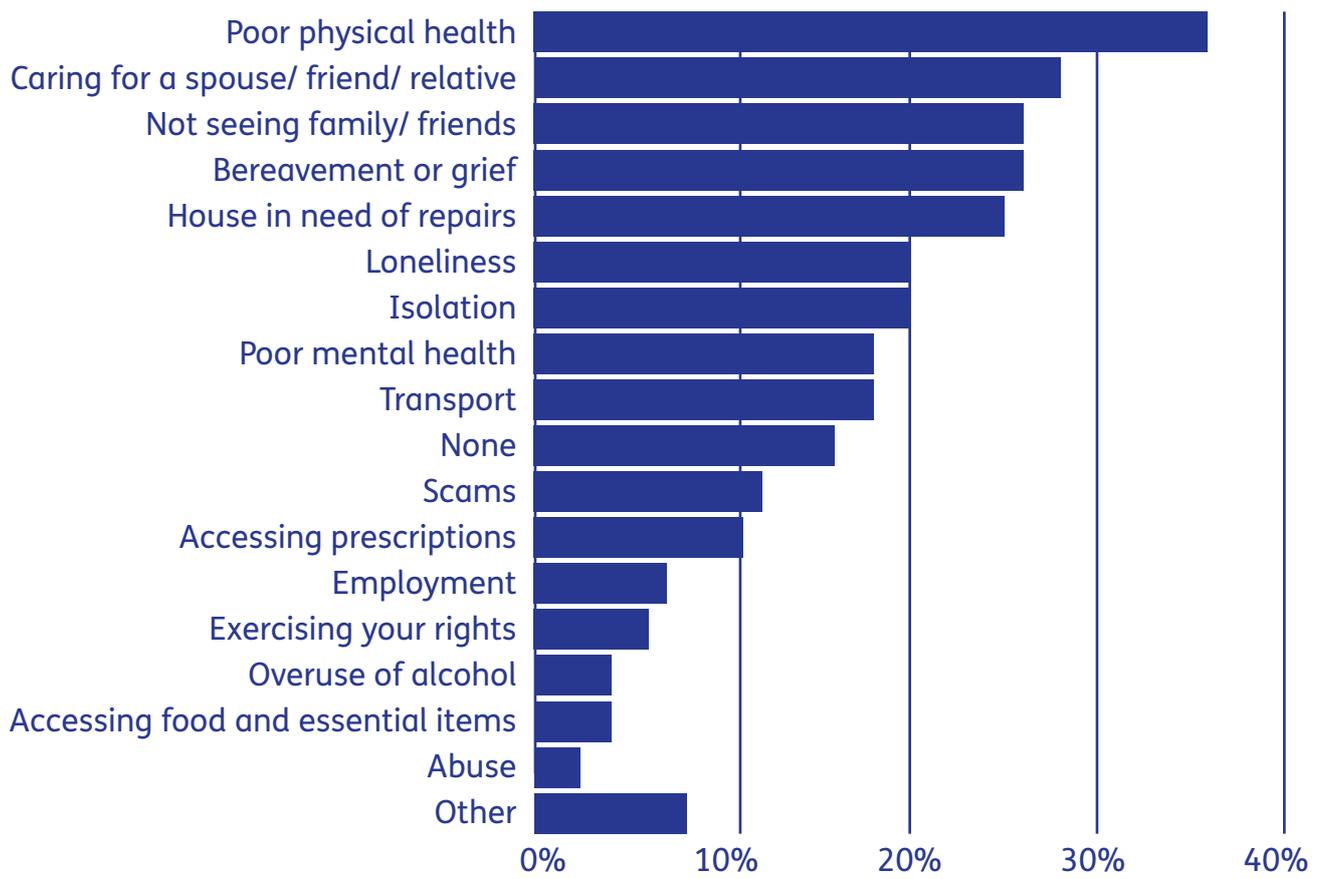
“Gardening project. Very stimulating.”

Again we heard how vital third sector services had been in helping them and how local community help was helpful to stay living independently.

“I contacted Careline after breaking leg, they have been very helpful and helped with items I need at home.”



Current challenges



For the past three annual surveys ‘not seeing family and friends’ has been the most widely reported issue, however this has now dropped significantly by 37% since our last survey in 2022.

Issues which were much more pertinent at the beginning of the pandemic such as access to food, and prescriptions have dropped hugely this year. Poor physical health has increased by 4%. Caring has increased by 10% from 18% to 28%. Bereavement and grief have also increased by more than 10% from 15% to 26%.

Loneliness and isolation has dropped from 30% to 20%, likely connected to the increase in people who are now able to see family and friends.

A new category that we added this year that could be a potential challenge was ‘House in need of repair’. 25% of people told us that this has been a challenge, with many people telling us that due to the cost of living crisis they simply can’t afford to make the necessary repairs.

Impact on mental wellbeing



20% of older people told us that poor mental health was a challenge over the last 12 months.

The concerns we heard last year on going out after the main pandemic period, have reduced, though this remains a concern for some older people across Wales.

We heard from some how networks had helped them cope better despite multiple challenges.

“Full time carer, bereavement, DWP - minimal money, worried about how to feed her cat - the priority, general money worries along with everyone else. Fab sister who pulled me up and helped me out.”

Older people who told us they are living with physical disabilities were much likely to say their mental health has been a challenge. Unpaid older carers were also more likely to say their mental health had got worse over the last year.

We heard from older people who have been struggling to get the help they need with their mental health.

“I often feel very stressed and helpless as I do not get much support and help from the services.”

It's promising, however, that a large number of people that told us that mental health had been a challenge for them over the last year were also able to tell us that their mental health was currently good. For some, this related to a good understanding by primary health care of what can help.

“Last year, I had poor health and the GP prescribed a gardening course I really enjoyed and helped me to improve my mental health.”

However, those that told us that their mental health was 'poor' or 'very poor', or that their mental health had been a challenge over the last year were overwhelmingly likely to have been facing a range of other challenges.

“Hospital services are at least 90 mins away by car impossible by public transport live in very small coastal village unable to obtain work initially due to not speaking Welsh than poor health now given up trying as waiting for surgery but waiting list at least 3 years by which time will be past retirement.”

Those that told us their mental health was a challenge were almost six times more likely to have told us they are experiencing bereavement or grief.

“My son died of cancer, very hard to get help, many agencies doing “signposting” but nobody helping.”

Those that told us their mental health was a challenge were also almost six times as likely to tell us they live with a physical disability,

“Bad health impacts on all parts of your life, like struggling to move in work, then not being able to go out to see friends.”

Others told us of life changing circumstances that have hugely affected their mental health.

“After a heart attack three years ago, my life changed drastically. I had a good job and had expected to work up to my retirement. My health meant I lost my job, my flat, my friends and social life.”

Those that told us their mental health was a challenge were also nearly six times as likely to be affected by abuse.

“My partner left me, but was abusive towards me before he left. Since then, I have suffered poor mental health and felt a terrible loneliness.”

Those that told us their mental health was a challenge were also five and a half times more likely to say they were isolated.

“I’m in my 70’s, isolated and alone with no-one to turn to.”

They were more likely to say that providing unpaid care had been a challenge than last year.

“Helping to care for a family member, you become isolated and a bit lost”

A significant minority of older people told us how the pandemic continues to affect them.

“None of the things have been that bad, but I have been suffering from mild stress and anxiety since lockdown, which was particularly bad for solo people.”

Similarly many told us of the differences they see in society since the main pandemic period:

“The most significant is loneliness & isolation post Covid. Relationships have changed. People seem less willing to interact.”

Impact on physical health



Physical health has been a challenge for more than a third of older people (36%)

36% of older people told us that physical health had been a challenge over the last 12 months, which is 3% more than the year before. 35% of those aged 50 to 64 said their physical health is a challenge, this rose to 42% for those aged 65 to 79 and reduced slightly to 39% for those aged 80 or over.

As in our previous annual surveys,, many older people told us their health was getting worse because they hadn't been able to access healthcare support. Even when they could access support it wasn't always what they needed.

“NHS is not functioning efficiently because of staff shortages and the pandemic. Waiting lists significantly contribute to health and wellbeing problems. Lives on hold create stress and poor mental health.”

Others told us how poor mobility impacts their daily life:

“I have mobility problems we have no bus service where I live.”

We heard from those whose health conditions now reduce or stop them from volunteering and of the uncertainties that fluctuating health conditions bring.

“My health in last 3 months has prevented me doing the work I enjoy - I am secretary or treasurer to 3 voluntary national organisations and on the Town Council which I've been unable to do properly.”

Older people repeatedly told us how they increasingly find it difficult to interact in their communities due to poorly maintained pavements, poor (or completely absent) public transport networks and increasing costs of travel that increase more for people with mobility and health issues.

Isolation and loneliness



21% of respondents told us that loneliness was a challenge.

We heard how some people can go for days without seeing anybody, and how being lonely and isolated can make people feel, and the impact on their mental health.

“I often feel so lonely and isolated that I want to die.”

People who had been bereaved through losing a spouse and/or family members told us how lonely and isolated they were, with some finding it difficult to cope.

“My husband passed away and I am alone in our home. My children live away, so I don’t see them very often and I feel isolated and lonely. My children always keep checking on me to make sure I am alright. It has been an extremely difficult year for me.”

We heard how living on your own can be lonely, especially at weekends, and even for people with lots of friends. Having company to visit the cinema, go for a walk, or meet up for a coffee could make such a difference, and how community facilities such as a warm hub can benefit people socially.

“Living alone is a lonely life. Warm space has made a world of difference for me. Bryncethin RFC social meets has improved my life no end. Warm spaces finishes on Tuesday....such a shame. Made new local friends there.”

We also heard how rural isolation can contribute to loneliness.

“My main problem is loneliness. Have tried everything here but I live in a sparsely populated rural area. Rural isolation is worse than urban in my opinion. It’s a killer!”

We heard from people who told us that having a disability and/or mobility issues can contribute to loneliness, especially if there are no means of getting to social activities. Having an illness can also contribute to isolation.

“Having mobility problems this stops me going to groups or classes, I see loads I would like to join but no way to get there, I feel very isolated and sometimes desperate for human contact. It is hard when you don’t see anybody for days.”

We also heard about the impact of the pandemic on loneliness as some people seemed less inclined to socialise.

“The most significant is loneliness and isolation post Covid. Relationships have changed. People seem less willing to interact.”



Transport



18% of older people found transport a challenge.

A theme that has been more strongly reflected in this year's survey in comparison to last year is issues with transport particularly public transport. 18% of people told us that transport was a challenge which is only a slight increase from last year, 3%. However, throughout the survey, lack of access to transport was more regularly spoken about than last year. Transport challenges were recorded across all local authorities in Wales. A number of respondents described public transport as 'poor'. People told us how cuts to bus services and unreliable services can impact their ability to access communities and key services such as healthcare, and can limit travel for people with mobility issues. Cuts to bus services were felt in both rural and urban areas.

"Bus services have been cut since I moved here. I had a two-minute walk to catch a bus that took me into town in 12 minutes. Now that bus has been cut altogether. With walking problems this limits travel considerably."

The lack of public transport in the evenings can impact on older people's ability to socialise.

"If I go out using buses during the early evenings there are no convenient timed service to be able to get the bus home again."

Some older people are having to be dependent on cars, including those who may wish to give up driving, as no public transport is available.

"I would like to give up my car but the buses are too unreliable."

Others have to rely on taxis, which are becoming unaffordable, or family and friends and the associated cost of fuel for cars is an additional concern. Parking can also be expensive.

"I have been struggling with public transport as you cannot use it to get to a lot of places around and no one has no choice but to use a taxi. Taxis are extremely expensive and unaffordable means of transport."

Housing



A quarter of older people's houses are in need of repair.

A key issue raised was the costs of repairs and maintenance, which for many were unaffordable.

“We had part of the ceiling come down from a leak in the upstairs bathroom and it took most of the pension lump sum I had been awarded.”

We heard about the poor condition of some houses with concerns around health and safety.

“Living in owner occupied house in retirement complex with no insulation and useless electric heating (no gas available). Very expensive to run (£380 a month). Wife and self in poor health. Mould in bathroom/bedrooms and kitchen. Will cost 1000s to put right this summer.”

People told us that it can be difficult to find help for small repairs to be carried out, and concerns were raised about finding trustworthy contractors and a fear of being scammed.

“My house needed repairs and my roof was falling apart and I have been duped by two contractors who took money from me and never completed their work, instead created health and safety hazards.”

Some comments received highlighted issues over repairs to rented accommodation.

“Had no water for two weeks before Christmas because landlord had employed workers who installed pipe work too close to ground surface. Pipes froze and broke. Four foot trench had to be dug. I had to park my car 150 metres away and walk down a 1 in 10 gradient track. Final bit was an 18 inch path with no handrail and a four foot drop one side with no rail. If I had fallen there are no near neighbours and no mobile signal.”

We also heard about some repairs and decorating being needed in housing association properties.

“Housing association are not always able financially to take up requests for improvements.”

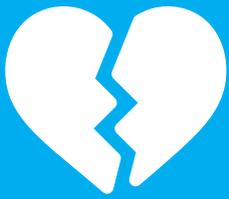
We also heard concerns over the affordability and high costs of renting accommodation, notably for those older people who are unable to retire and have to continue to work to pay rent.

“Rents are so high that it is impossible just to live on a state pension without working to supplement it.”



What matters to you?

Bereavement and grief



26% of older people found bereavement or grief a challenge.

There has been an increase of 11% since last year of older people who found bereavement or grief a challenge.

“The effects of the covid pandemic have affected family far and wide. After bereavement, increased caring responsibilities and other things everything is just that much harder to deal with these days.”

More older people told us of more than one person they were grieving for.

“It has been extremely difficult year for me, after I lost my husband, my brother passed away as well. I have become very lonely and isolated, this has also affected my mental health. I am very reliant and live with my son as I lost all the support I had and it has become very difficult for me to cope.”

People that were living with grief or bereavement were more likely to have poor physical health and were also more likely to say it had got worse over the last year.

They were more likely to have poor mental health and more likely to say it had got worse.

“My husband died two years ago and I miss him. My mother has dementia and entered a home last November as I could no longer manage looking after her alone. It was a very challenging time.”

We heard from older people who felt guilty that they couldn't do more for their loved one before they died

“Still feel guilty I couldn't help her more.”

Some told us how they are struggling to maintain their homes.

“Having been married for nearly 50 years and my husband passing away. Dealing with day to day issues especially house repairs has been a struggle. Small issues can become a mountain as you get older. You work all your life pay your taxes and all of a sudden you don't matter”.

We heard from some how vital care services have been to help them cope.

“My GP and district nurses have been very supportive during my wife’s illness and after her death.”

And from others whose faith and community have helped them with their grief.

“My only relief is that I can visit my temple and engage with my community.”

Bereavement or grief was a challenge for those aged 65-69 (28%) followed by 60-65 year olds (20%) then 70-74 year olds (18%). This is a marked change since last year, where ages were higher.



Unpaid carers



Almost 50% of older unpaid carers have increased the amount of time they spend caring in comparison to 12 months ago.

37% of older people currently look after someone or given unpaid help or support to at least one person. This is an increase of 6% since last year.

We found that there was an increase of 55% in the amount of people who found caring a challenge in the last 12 months, in comparison to last year. An increase of 18% to 27%.

With many people who are struggling to care for loved ones whilst waiting for support from social care, as well as others providing ongoing unpaid care.

In addition, of those who are providing unpaid care almost 50% told us that the amount of time they spend caring is more than in comparison to 12 months ago.

The 50 to 64 age group make up the largest majority of unpaid carers at 49%. This has increased from 40% last year. As with last year's survey, 65 to 79 year olds are the next largest age group at 45%. This has increased from 26% last year. Unpaid carers over 80 have reduced from 24% to 5%.

When asked about the effects of their unpaid caring role some said financial worries were a challenge.

"I gave up work to care for my parents so my income is low."

Unpaid carers accessing social care



Two thirds of older people who asked social services for help were asking for help for someone else.

20% of all older people told us they had asked for help from social care services and of these, two thirds of requests were because it was a loved one that needed help.

65% of unpaid carers told us they had not asked for help from social care. As such, the volume of known unpaid carers needs may be currently underestimated.

We hear increasingly from family members who are burned out from care and worry what will happen to their loved one if they're too unwell to help them anymore.

Our survey analysis shows unpaid carers are far less likely to be optimistic about the year ahead than other respondents. Unpaid carers were more likely than other older people to tell us that their physical or mental health is worse now than last year.

Specifically for the nearly 50% of unpaid carers that are providing more unpaid care, they were far less likely to be optimistic about the year ahead than other older people and again more likely to say their physical and mental health is worse.



What matters to you?

Veterans

9% of older people who completed our research are Armed Forces veterans, which is 5% more than last year. Ages ranged from 50 to 94.

68% of the veterans identify as male, 29% identify as female, and 3% preferred not to say. 45% of veterans who responded to the survey are living with a disability, which is 10% more than in comparison to last year.

We found that there were some differences from non-veterans in terms of physical health with 47% of the veterans reporting this as a challenge in the past 12 months, in comparison to 25% of non-veterans.

25% of veterans told us that they are an unpaid carer, and 42% had increased the care they provide in the last three months.

33% of the veterans are aged 50 to 64 year olds, 50% aged 65-64, and 17% aged 80 or over. 75% of veterans who responded to us are retired, 13% are working full time, with 2% of these self-employed, and 4% working part time. 2% aren't in paid work.

24% of older veterans aren't confident that they'll have enough money to live on this year. 30% of veterans told us that they don't feel confident about getting back out and about into their local community.

16% reported that they experienced discrimination in the workplace due to their age, in comparison to 11% of the non-veterans, and 26% of veterans told us that their housing in need of repair.

Employment

61% of respondents are retired, 6% less than last year's survey, and there's been a 13% increase from 23% to 36% in the amount of people working whether that be full time, part time or self-employed. 12% of people who responded are doing voluntary work, 4% are homemakers, 1% are registered unemployed and 1 person is in full time education.

8% of people told that us that they can't work due to disability or illness and 2% can't work due to caring responsibilities.

When asked whether retirement plans had changed in the past 12 months, 15% of people said yes. 8% plan to retire later, 5% plan to retire earlier and 2% plan to come out of retirement back to paid work.

78% of people who changed plans in the last 12 months to retire later, told us that this was due not being able to afford to so. This was largely attributed to the cost of living crisis, but also to reducing pension pots. One person told us that they had to have a career break due to caring responsibilities and now has to build up their finances.

Of those who responded that they plan to go back to paid work after retiring, for several people this was due to the rise in cost of living meaning they can't afford everyday costs on their pension.

Others told us that they want to come back to paid work to raise money for particular projects or trips, or because they are bored and miss working. A couple of people retired early due to burnout or bereavement but now want to return to working. One person told us that they were coming of retirement to afford medical care.

"Need additional money to pay for a hip and dental care."

4% of respondents told us that they're currently looking for paid work. The average amount of time that people have been looking for work is 20 months with 7 years being the longest wait time.



11% of older people have been discriminated at work because of their age.

Ageism in the workplace

We heard from older people who had been discriminated in the workplace due to their age.

On person told us that they were in a large training meeting of around 50 people where a younger member of staff stated they would be glad when these older workers have left the workplace, so that they could have a workplace the way they wanted. This went unchallenged by the facilitators.

Communication

Digital inclusion



20% of older people told us that it wasn't easy to access information about services and support.

Older people told us that they used various methods to find out information, including online services, local sources and communities, using the telephone and face-to-face contact to access services.

Many respondents used online services to access information and services.

"The internet and the web have information and contacts for most of us who have access. I'm lucky and became involved with IT in the late 70s."

Some respondents were worried about using the internet through fear of scams and fraud.

"I'm nervous about using online banking and even though I have online protection I get about 6-10 spam emails a day."

People told us about barriers in accessing information: many online sites not being accessible for people with sight loss; and language barriers to accessing information.

"I'm registered blind and many sites are not accessible or easy to read if you use magnification apps or use the large font etc on the computer/laptop, this needs changing."

Some respondents had help from family members to access online information.

"I have to get my daughter to help me online. I don't have any way to access information other than TV or radio or by post."

Community groups were also important in helping people to access information about services and support.

"I access all through Women Connect First, from my temple, family and friends."

“I find Older People’s forums a good place to get information, and local newsletters. But I do not go online and I’m not too good with my phone.”

For people that are digitally excluded or unable to access online services, we heard how difficult it can be for people to be able to speak to a person either on the telephone or face-to-face when they are seeking support and help from service providers. Many service providers direct people to online services, and we heard that trying to speak to someone on a telephone can be difficult and involve long waiting times. Some people reflected how important it is for people to be able to access support through telephone or face-to-face contact.

“Accessing anything is unnecessarily difficult. Impossible to speak to anyone nowadays.”



Representation in society and discrimination



70% of respondents felt that older people were not well represented in society.

Respondents told us that older people can feel invisible, ignored, forgotten and disrespected.

“We are invisible most of the time. No recognition of the caring roles we have, either elderly parents, partners or supporting our children with childcare.”

Respondents also told us of the changes in society and infrastructure such as bank and post office closures, and a move to a cashless society and an over-reliance on internet technology including smartphones which was felt to be discriminatory:

“We are largely ignored in the drive for so called progress. Everything is internet based, banks and post offices are closing, supermarket checkouts are dwindling. It’s a largely cashless society and everyone is expected to have a smart phone even for car parking. Being able to talk to real people is an important factor for older people. I am fairly good on the internet but many older people are not and it’s very discriminating.”

Ageism was felt to be an issue, and the portrayal of negative stereotypes of older people. The lack of representation in media, adverts and film was also cited as an ongoing issue.

“I think there are many negative stereotypes of older people which go unchallenged, e.g. that we are a burden on health and social care services. Ageism is a big issue and older people are increasingly socially excluded.”

It was reflected that there needs to be a more visible representation of older people from an ethnic minority background, and those older people with language and cultural barriers find it more of a challenge.

“I don’t feel there is much representation for older people from an ethnic minority background, who cannot communicate in English and those who become widows after they have been dependent on their husbands all their lives.”

The year ahead

Looking forward to



59% of older people were optimistic about the year ahead.

Many people told us of plans for the year they were looking forward to such as holidays and seeing more of families and friends.

Some were happy that they would be able to volunteer this year.

“Voluntary work is open to me again.”

Of those that were optimistic, some told us they were optimistic that the cost of living would be going down.

“Hoping inflation stabilises and COVID infections don’t rise again.”

Many people explained that they see their future positively as they have stability and supportive networks around them.

“Things are tough. Costs increasing, caring responsibilities are demanding but I have a job, I have income and I have a family I love.”

For some, a house move had enabled a brighter, healthier future. As one person told us,

“I am settled in a home that meets my needs with a wonderful garden, near to a leisure centre with swimming pool, good public transport and cycle lanes (I do not drive).”

For some, no longer providing unpaid care has allowed a fuller life than previously.

“Now my mum is being cared for I feel I can see more of my friends and family - they are all very supportive.”

Several told us retirement plans make them more optimistic.

“I am looking forward to being in control of my own time once I finish work this summer.”

Many told us that having a stable job gives them confidence for the year ahead.

“My job is permanent and I have a good employer who strives to ensure the wellbeing of staff.”

However, though older people told us they are optimistic about the year ahead, for many this is because older people are actively choosing to think positively.

“You have to stay optimistic or you would be depressed.”



What matters to you?

Challenges in the year ahead



41% of older people told us they were not optimistic about the year ahead.

The key concern continues to be the cost of living crisis across all household bills. Concerns were expressed by those that work and those that receive a state pension.

Again, we heard from people that have done everything they can to keep costs down and can no longer afford to socialise. Some have sold their cars due to costs and struggle to get out and about via public transport. Some unpaid carers told us how hard it's to keep providing unpaid care when they work full time, have childcare responsibilities and struggle with the costs of travel to provide unpaid care.

We heard from older people in work who are concerned their health may stop them from working sooner than they want to.

"I'm dependent on my health remaining good as I work physically hard, I'm not earning enough to meet my bills & am having to dip into my small savings pot."

We heard from many older people that want to retire.

"I so want to retire from work but have to keep going for another 6 years and I am exhausted and want a rest to be able to enjoy life."

A considerable number told us of multiple challenges they face in the year ahead that make it difficult to be positive. We also heard from more people this year concerned that they can't afford home maintenance.

"Energy prices, fuel prices, food prices, building material prices to get my house into a better state of repair, family illness, caring responsibilities, bereavement and everything else that life is throwing at me is all a bit too much to deal with."

Another key concern was access to health and health services. We heard from many older people about delays in access to GP, dentists and hospital appointments.

Along with this, more older people than in previous annual surveys told us that staying healthy is now their main challenge. For some they worried they would not be able to care for loved ones

"Continuing to act as a carer if my health should deteriorate."

For some a loss of health means that they have more costs to find money for.

"I'm able to do fewer jobs in the house/garden for myself. Getting about is more difficult and expensive. Everything seems to be getting increasingly expensive."

People continue to be worried about the war in Ukraine, the climate change emergency and political turmoil.

What might help

Improvements to health care services

Many respondents stated that better access to health services would help. This included:

- Improvements to make easier and more consistent access to GP appointments and primary care services
- Shorter waiting lists for hospital appointments and treatments

“Not having to wait for hospital appointment so could improve my physical health sooner rather than later as waiting can worsen health conditions.”

- Improved mental health support, and access to counselling on the NHS
- Improved physiotherapy and speech services:
- Being able to access local NHS dentists

Improvements in social services

People told us how improvements in support from social services, including social care, would help, including affordable and more visible services:

“Improved services for Care and Support in Wales at an affordable cost and good standard.”

Support for unpaid carers

Carers told us about the help they needed, including financial help and respite care.

“I need a lot more support financially, help with my debts, mortgage and energy rates. Unpaid carers should be recognised and encouraged, stop penalising by deducting Carers Allowance from Universal Credit and creating more problems.”

Help with the cost of living

People told us that more financial help is needed to pay bills as they struggle with the cost of living, including heating and food costs.

“Support off the government for people who work but are just over the amount of income to be able to claim any support towards the ever-increasing cost of living.”

We heard from people that need further information about benefits, and also from people who are not in receipt or not entitled to benefits who need financial help:

“I’m not old enough for state pension but need to severely limit my income from private pension to ensure I have enough in future. A state pension would help, access to any benefits would help. Really I’m not fit to work more than a few hours a week but can’t qualify for disability. We don’t qualify for benefits so no support available.”

We also heard from people who had been affected financially by State Pension reforms, notably WASPI (Women Against State Pension Inequality), who felt that compensation was needed.

“Compensation from DWP for not receiving my state pension at the age of 60 - as I had always believed. I have lost thousands of pounds, which would certainly help with maintaining my home, keeping me warm and putting food in my cupboards.”

Inclusive employment opportunities

The availability of employment opportunities and support was raised; some people were looking for employment opportunities as they plan for retirement, and the importance of inclusive employment opportunities was highlighted.

“Good suitable employment for those with disabilities, cultural and language barriers.”

Support with housing, adaptations, repairs and maintenance

Some people highlighted the need for accessible and affordable housing options.

“The opportunity for a rent to buy scheme, so my home outgoings would be more affordable.”

We also heard from a respondent about the need for adaptations to improve accessibility and promote independence.

“Funding to get an accessible shower, accessible access to my property, so I can be independent. To wash when I want to, to try to come and go when I want to. I really miss walking my dog so much.”

We heard from people who felt that advice on grants for home repairs and energy efficiency improvements would be of help.

“I have experience that there is a lack of support for older people with housing disrepair issues.”

Some people also told us that they need information regarding support for general home and garden maintenance.

“Help with contract to organisations that would provide help with small diy jobs such as light bulb changing.”

Improvements in transport services

Some people told us that improved and accessible transport services and infrastructure would help, including the availability of blue badges:

“More local transport facilities.”

More social groups and support for loneliness

Some people told us that they would like more social groups and activities:

“It would be good to connect with people in a similar situation. It’s hard to find time at the moment due to work, home and caring commitments. I find learning from others with lived experience is by far the best way to cope.”

Others told us that they would like support and company to help combat loneliness:



What matters to you?

Getting back out and about

91% of respondents told us that they are able to get out and about, and many enjoyed a range of indoor and outdoor activities.

“I am a very active person. I attend a Pilates class every week, a body strength class, I dance every week, I belong to three choirs and a sewing club. I love to walk and can walk around five miles before feeling tired.”

5% of respondents said that they were unable to get out and about, and 4% replied that they could get out and about, but don't. In terms of what is preventing this cohort of people from getting out and about, a high proportion said declining physical health, and others cited poor mental health, with many needing support and assistance to be able to go out, particularly for people with mobility issues.

“My carer used to take me out but I had to reduce my care. My husband will occasionally take me out but most days I am stuck at home. My mobility is poor, I have a wheelchair but need someone to push it as my muscles are weak.”

Some people told us that they lacked confidence to go out and about, and others said they don't want to leave the house.

“Since Covid and staying in my home for 2-3 years I feel uncomfortable leaving my home/village.”

Transport was cited as a reason people didn't get out and about. Reduced and unreliable bus services were mentioned, which affected people's ability to access social activities, with some having to rely on taxis. No relevant local activities was also a reason why some people told us that they didn't get out and about; some cited the need to travel further afield for such activities.

“I find taxis very expensive and unaffordable. The public buses cover very limited places and it is not easy to get everywhere with the bus service. My disability and finances restricts my ability to get out and about and visit all places that I would like to.”

The bus pass is much valued by older people in terms of getting out and about, although reduced bus services may impact on people being able to use their bus pass.

“Non driver so reliant on public transport, thank goodness for free bus pass.”

Some respondents mentioned difficulties around accessing facilities due to a lack of parking for blue badge holders.

“I can drive my car short distance e.g. to the Prom but walking is difficult. Cannot access my favourite places, cafes because of lack of blue badge parking spaces.”

Finance was mentioned by some people as the reason they didn't get out and about, and people told us about the high cost of running their own car, with some people using the car for essential journeys only and not for pleasure or days out.

“I have a car which I use to pick up and mind the grandchildren and local journeys, shopping etc. but can't afford to go for days out for pleasure.”

The accessibility of the built environment in communities is important in terms of enabling people to get out and about. Adequate seating is needed, as some people told us that they couldn't walk far and needed places to rest, and also toilet facilities so that people have the confidence to go out and can maintain their dignity.

“I need more toilet facilities to avoid embarrassing incontinence accidents.”



Finance



22% of older people told us that they weren't confident that they'd have enough money to live on this coming year.

Many people told us that they're worried about the rise in food and fuel costs and how they would be meet this on a fixed income. Some respondents told us that they were grateful for the financial support from Government but are very concerned about what will happen without this.

One person who is living with a long-term health condition affected by the cold told us that they are already limiting their heating use:

"We have received help from the government to pay fuel cost of living but I worry what will happen when it ends. Now I don't use the heating as much as I need to and when it is cold due to my arthritis I spend all day in bed when it is very cold."

Many of those who said that they were confident that they would have enough money to live on, still reflected that they were just about managing on a small pension and have to budget closely to make ends meet. Many older people are on the cusp of falling into financial difficulties in the coming year, and any extra costs that need to be met will cause them significant issues.

We also heard from a number of people who were on low income and struggling but were just above the threshold of eligibility for pension credit. One person told us that they had to come out of retirement back to work due these pressures.

"Have had to return to part time work as cannot manage on state pension and private pension - just below being able to claim pension credits."

For some, financial pressures have reduced their ability to enjoy their life.

"Although I will have enough to cover mortgage, services and essentials my quality of life has been reduced. We have cut holidays and going out."

We asked all respondents whether they receive pension credit. Only 5% of respondents currently receive pension credit, with 79% who have never applied, only 12% told us that they had applied but had not been eligible. In the survey we included information about pension credit at the relevant question and encouraged those who had not applied before, or those who may have applied previously but financial circumstances may have changed, to apply.

In addition, we heard from some people who were struggling due to financial losses from scams:

"I have lost a lot of money as a result of being duped by contractors who were supposed to fix my roof and chimney and leaks. I do not know how long I will be able to manage this year"



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