

# Executive Summary

## 1. Introduction

The Irish Longitudinal Study on Ageing (TILDA) is a large-scale, nationally representative study of people aged 50 and over in Ireland. It is the most ambitious study of ageing ever carried out in Ireland and represents a step-change in terms of data, knowledge and understanding of ageing with which to inform policy and novel research.

TILDA is designed to maximise comparability with other well-established international longitudinal studies.

More than 8,000 people aged 50 and over accepted the invitation to participate in the first wave of TILDA, and the majority of these also agreed to undertake a comprehensive health assessment.

## 2. Socio-demographic characteristics of the older population

The socio-demographic picture that has emerged of Ireland's older people reflects the social and economic circumstances that were present during their lives and consequent heterogeneity of different age cohorts. Major social changes such as the introduction of free secondary schooling and the liberalisation of the contraceptive laws are evident in educational attainment and fertility differences by age. Social processes such as the intergenerational transmission of educational attainment are also seen. Low levels of economic growth which resulted in large-scale out-migration is evident in the remarkably high proportion of former emigrants in the older population.

Among the key findings are the following:

- In the population aged 50 and over, 48% are men and 52% are women.
- Most of the people aged 50 and over (58%) are in the 50-64 age group.
- Almost 10% of older people have never been married. Men are more likely to have never married than women (13% men, 7% women).
- Most (73%) older adults live with their spouse or with a spouse and children. This proportion decreases by age and the proportion of individuals living alone increases by age.

- Older people have an average of three living children. There are differences in the mean number of living children by age cohort, education and religion.
- Most older adults (62%) in Ireland have achieved at least secondary education.
- Nearly one-quarter (22%) of older people had lived abroad for more than six months. Those with only primary education and those with a tertiary degree are more likely to have emigrated for a period of time than those with a secondary level education.

### 3. Older people as members of their families and communities

The role of the family is often emphasised in Ireland, but to date there is little evidence on what families provide to older adults, and what older adults give to their families. TILDA enables a detailed analysis of the relationship of older adults to their families and communities in terms of the contact that older people have with family members, the exchanges that take place within families and the broader networks of help and support among friends and neighbours. The findings presented here support an optimistic view that the majority of older people live relatively near to their children and surviving parents, have frequent contact with them, and intergenerational transfers are common.

Among the key findings are the following:

- Three-quarters of all adults aged 50 and over live in close proximity to at least one of their children.
- Over 70% of the age group most likely to need care and support (75 and over) live with their children or have at least one child living in the same county.
- Three-quarters of older adults whose parents are still alive see their parents frequently (daily, weekly, or several times per month).
- Half of 50-64 year olds with surviving parents provide help with household tasks to their parents, on average for 10 hours per week; over one quarter provide their parents with personal care, on average for 18 hours per week.
- Family financial transfers flow mainly from ageing parents to their adult children. Nearly one-quarter (24%) of older households have given large financial or material gifts (worth €5,000 or more) to their children in the last ten years. In contrast, only 9% of older adults have received financial transfers from their children.
- Non-financial transfers from ageing parents to their children are also very common in Ireland. Over one third of older adults provide practical household help including shopping and household chores to their adult children and nearly half provide care to grandchildren.
- Nearly one-quarter of older people in Ireland provide some form of help to their neighbours and friends, on average for 8 hours per month. Almost one-fifth of older people receive some form of help from their neighbours and friends.

## 4. Social engagement of older people

Social engagement comprises participation in leisure activities and volunteering, and connectedness to family and friendship networks. Social scientists have a long-standing interest in the effects of leisure participation among older persons. Participation in leisure activities is associated with a lower risk for negative mental and physical health outcomes and mortality. Many studies have shown that engaging in voluntary work in later life predicts better self-rated health, functioning, physical activity, and life satisfaction, and also decreases depression, hypertension, and mortality among older people. Conversely, loneliness has been shown to predict a wide variety of negative mental and physical health outcomes, such as depression, nursing home admission, and mortality. People also engage with their communities through religion, and participation in religious activities has been associated with better quality of life and health outcomes in older persons.

Among the key findings are the following:

- Approximately 90% of older people visit with family and friends once a week or more. Frequency of visits increases with age, and women visit with family and friends more frequently than men.
- One in five older people aged 65-74 do voluntary work at least once a week or more.
- Participation in formal organised activities, including volunteering, is greatest among older adults with high levels of education.
- Similar proportions of older men and women (around 10%) are engaged in high-intensity voluntary work.
- Quality of life increases with greater social integration.
- In Ireland 6% of older women and 7% of older men are socially isolated.
- Older persons with poorer self-rated health are most likely to be socially isolated.
- Among the 95% of the older Irish population who report having a religion, 60% attend religious services at least once a week. Nearly 80% of people aged 75 and over attend a religious service once a week or more.
- Over 80% of older adults voted in the 2007 general election.
- Three-quarters of the older population rely on cars as their main mode of transport.

## 5. Behavioural and physical health of older people

The promotion of active and healthy ageing is a global challenge. The European Union has set a target to increase the average healthy life span in the EU by two years by 2020. This can only be realised by prevention and health promotion, integrated care and independent living. Ongoing measurement of the prevalence and incidence of disease in a nationally representative sample of older adults is needed to predict future health care needs and to inform policy development and strategies to decrease ill-health and disability among older adults in Ireland. The

focus of TILDA's health research is on conditions that have public health significance, that is, diseases that are most prevalent among older people or that are most likely to result in morbidity, work disability and social isolation as well as health behaviours such as smoking, drinking alcohol and taking exercise. Three-quarters of older Irish adults rate their health as excellent, very good or good but this rate declines with age. TILDA is unique among longitudinal studies in the depth and quality of objective measures collected and technologies used for collection. Marked discrepancies between self-report and objective measures of health are evident in TILDA respondents.

Among the key findings are the following:

- Both cardiovascular and non-cardiovascular diseases are common in older adults with the prevalence of most chronic conditions increasing with age.
- Hypertension, angina, and stroke are more common in men; osteoporosis, arthritis and high cholesterol are more common in women.
- One in five older Irish adults is a current smoker, the highest rates of smoking are seen in the poorest and those with lowest education levels.
- Half of those aged 75 years and older report low levels of physical activity.
- Wealthier and better educated adults have the highest physical activity levels.
- Screening for cancer varies significantly by age, education and wealth. Older, poorer, less educated adults are less likely to screen for prostate or breast cancer.
- One in five older adults takes five or more medications (polypharmacy). This proportion rises to almost one in two for those aged 75 years and older. Polypharmacy is more than twice as likely in medical card holders compared with adults without cover or with medical insurance.
- Three-quarters of older Irish adults are objectively overweight or obese. Poorer individuals and those with lower levels of education have the highest levels of obesity.
- There is a significant discrepancy between self-reported disease and objective measure of disease; for example, 58% of men and 49% of women with objective evidence of hypertension are undiagnosed.

## 6. Mental health and cognitive function of older people:

The potential public health burden of late-life mental health disorders will increase as the population ages. Good mental health is associated with greater economic success, better social relationships and reduced risk of physical illness. Mental illness is not a normal consequence of ageing and can be prevented, treated and managed. The impact of mental illness on overall health and productivity is profoundly under-recognised in older adults worldwide. In addition to good mental health, cognitive function is a key marker of population health and independence at all ages. Adequate cognitive functioning is required to perform simple activities of daily living such as dressing and bathing as well as more complex tasks such as managing money, paying bills and taking medications. Cognitive impairment limits ability to carry out these activities.

Despite its importance, the implications of declining cognitive functioning on older persons' daily lives are complex and poorly understood. One reason is the lack of adequate data sources from which to derive population-based estimates of the prevalence and consequences of cognitive impairment. TILDA addresses this information gap by providing comprehensive nationally representative data on cognitive function in older adults using both self-reported and objective measures.

Among the key findings are the following:

- Depression is common among older adults in Ireland, with 10% of the population reporting clinically significant depressive symptoms with a further 18% reporting 'sub-threshold' levels of depression.
- Anxiety is more common than depression among older adults. Among older adults 13% report clinically significant anxiety symptoms while 29% report sub-threshold levels of anxiety.
- There is evidence of under-diagnosis and hence under-treatment of depression and anxiety. Of older adults with objective evidence of depression, 78% do not report a doctor's diagnosis of depression. Similarly, 85% of older adults with objective evidence of anxiety do not report a doctor's diagnosis of anxiety.
- Depression is associated with disability. Nearly two-thirds of older adults with depression have a longstanding illness or disability compared to one-third of people who are depression free.
- Depression is associated with increased medication use. Of people aged 75 and over with depression, 56% are taking five or more medications compared to 36% of adults without depression.
- Older adults with depression have extremely low rates of labour force participation. Of adults aged 50-64 without depression, 60% are in employment compared to 30% of older adults with depression.
- Health service is increased utilisation in people with depression. Depressed adults aged 75 and over have an average of 7 visits to their GP in the past year compared to an average of 4 visits among the non-depressed older population.
- Cognitive impairment rises sharply with age. Of adults aged 80 and over, 35% have cognitive impairment compared to 4% of adults aged between 50 and 64.
- There was a high level of memory impairment in the sample, particularly in the older groups. Of adults aged 80 and over, 42% forgot to carry out an action they had earlier been instructed to perform raising concerns about activities such as remembering to take medication, pay bills or take safety precautions.

## 7. Health and social care utilisation

It is important to understand how the ageing of the population will affect the demands for health and social care services. While funding from taxation currently pays around 80% of the costs of health care, nearly half of the population has supplementary private insurance, and most people face full cost fees for using primary care services. This complex pattern of entitlements to free or subsidised

services has been shown in other studies to influence the patterns of service use. Patterns of use of services are presented, taking into account individual's entitlements, health and level of disability.

Among the key findings are the following:

- Nearly all (97%) of those aged 80 or over have medical cards that exempt them from paying fees for primary care and hospital care. This compares with 91% for people in their 70s and 30% of those in their 50s.
- Nearly 60% of people between 50 and 69 have private medical insurance, dropping to 46% for those in their 70s and 32% of those over 80.
- The likelihood of being a user of GP care rises slightly with age, but is similar for all those over 70.
- The likelihood of having a hospital admission is similar for different ages over 60, but the length of stay increases slightly with age, and people over 80 are lower users of outpatient services than those in their 60s and 70s.
- The prevalence of disabilities rises with age from less than 10% of those between 50 and 64 to nearly 30% of those over 75.
- People with impairments in activities of daily living (ADL) and instrumental activities of daily living (IADL) receive on average 118 hours of help per month.
- The most common primary helper for this group is the recipients' spouse, this represents a large contribution by older adults into the care of older adults.
- Only 3.5% of people over 50 receive state provided home help services.
- Of those with both ADL and IADL impairments, 12% do not receive formal or informal help and these people constitute a potentially very vulnerable group.

## 8. Retirement and labour market participation of older people

The labour market participation of older people is important from a broad range of perspectives. For the individual, participation in the labour market can be associated with increased resource and enhanced levels of life satisfaction, if work is a source of positive social contact and engagement. At the level of the wider macro-economy, higher levels of participation among older people translate into a bigger labour force and hence increased output. If higher participation is combined with later payment of pensions, reductions in pensions can be achieved. Increased participation is increasingly viewed as a prerequisite for tackling the long-run costs associated with population ageing and this policy objective is reflected in the National Pensions Framework. Given this context, it is important to understand more fully the patterns and determinants of labour market participation among the over 50s.

Among the key findings are the following:

- Among those aged 50 to 64, 62% of men and 46% of women are at work compared to 16% of men and 8% of women aged 65 to 74.
- Of men aged 65 to 74, 82% describe themselves as retired, compared to 52% of women. However, 36% of women aged 65 to 74 report that they are 'looking after home or family'.
- For those below the State Pension Age:
  - Labour supply of older adults aged 50 to 64 in Ireland is concentrated amongst the healthiest, most educated, wealthiest and most satisfied with life.
  - For example, 53% of men and 28% of women with no or primary education are employed, compared to 70% of men and 62% of women with tertiary or higher education.
  - In the poorest quartile of this population, 34% of women and 38% of men are at work compared to 59% of women and 71% of men in the richest quartile.
  - The average number of hours worked decreases as workers move closer to age 65, suggesting some form of 'wind-down' in advance of retirement.
  - Around 25% of male and female employees expect to retire before state pension age (65). Retirement expectations are different for different education groups, with the more highly educated expecting to retire earlier.
  - Of female employees, 41% are not covered by an occupational, PRSA (Personal Retirement Savings Account) or private pension scheme compared to 20% of male employees.
  - Pension coverage varies by group. Among higher professionals, 78% are covered by an occupational pension, compared to 32% of unskilled workers.
  - Of those at currently work, 96% women and 98% of men report that they are not affected by any kind of workplace discrimination.

## 9. Income and asset levels of older people

Income levels and asset holding of older people are an important measure of material living standards. As their working lives and careers draw towards a close, older people may experience a decline in income and may have greater dependence on state transfers.

There is considerable heterogeneity in the financial position of older people. The levels and sources of income of older people vary by age group and education levels. In particular, the income levels of retirees vary by the length of working life, former occupation and level of education.

Asset holdings are also of interest as they represent a lifetime accumulation of wealth. These wealth holdings can be drawn down to replace labour income. Assets can be held as an insurance against negative shocks, such as unexpected medical costs relating to a serious illness or a positive unexpected event such as living longer

than expected. Assets may also act as a resource to help family members or to provide a bequest to them after death.

Among the key findings are the following:

- The average weekly household disposable income is €767 but around half live on under €400 per week.
- About one in eight older people have weekly disposable incomes of €1,000 or more.
- Older people who had professional or managerial jobs have significantly higher incomes in retirement than the general population largely due to occupational pension schemes and higher levels of financial assets.
- State pensions are the most important source of income among older people in Ireland and make up around two-thirds of gross income for those aged 65 and over.
- Around 26% depend on state transfers as their sole source of income.
- A majority (about 70%) own their home and have finished paying off their mortgage. The median self-valuation of current residence is €300,000 for those with tertiary education. This is just under twice the median self-reported house value amongst those with only primary education.
- Savings and financial assets (other than property) vary with level of education from an average of €14,000 for those with primary education to €60,000 for those with tertiary education.

## 10. Older people's quality of life and beliefs about ageing

With greater longevity, better health and higher expectations for old age among the older generation, the well-being of this population has become a focus for social scientists and policy-makers. Well-being is viewed as an indicator of successful ageing, a pointer to the individual's adaptability to the losses of ageing. Much interest centres on the personal, material and social factors that account for well-being in later life, with the aim of optimising the subjective experience of ageing. Accumulating research, including that conducted by TILDA, indicates that, despite negative stereotyping, people derive considerable satisfaction and enjoyment from life in their later years. Clear social divisions are evident, however, in the experience of old age, where some groups age more successfully than others.

Among the key findings are the following:

- The older population as a whole experiences a high quality of life. The mean score for older people on the CASP-19 quality of life scale is 42.7, representing 75% of the total possible score of 57.
- The best quality of life is experienced by older people with the highest asset wealth.
- The group of older people who have the lowest quality of life, by a considerable margin, are those who rate their health as fair or poor (scoring 36.3 on CASP-19).



- Older people on the whole perceive the ageing process positively, believing they have considerable control over the positive experiences of ageing, but less over the negative aspects.
- The most educated have the strongest sense of control over the positive and negative aspects of ageing.
- Older people in the highest wealth category are least aware of the negative aspects of ageing and least aware of the ageing process.

## 11. Methodology

- TILDA recruited a stratified clustered sample of 8178 individuals representative of the community living Irish population aged 50 years and over. Younger spouses and partners were also invited to participate, primarily to provide information regarding family and financial circumstances.
- Each participant underwent an extensive face-to-face interview, was left a questionnaire to complete and return and was invited to a health assessment either at a dedicated centre or in the home.
- The overall response rate to the study was 62.0%. The subsequent participation in the health assessment and the proportion returning the self-completion questionnaire is high, and collection of both is ongoing.

