

A Profile of the Health of Older People in Wales

A report by the
National Public Health Service for Wales

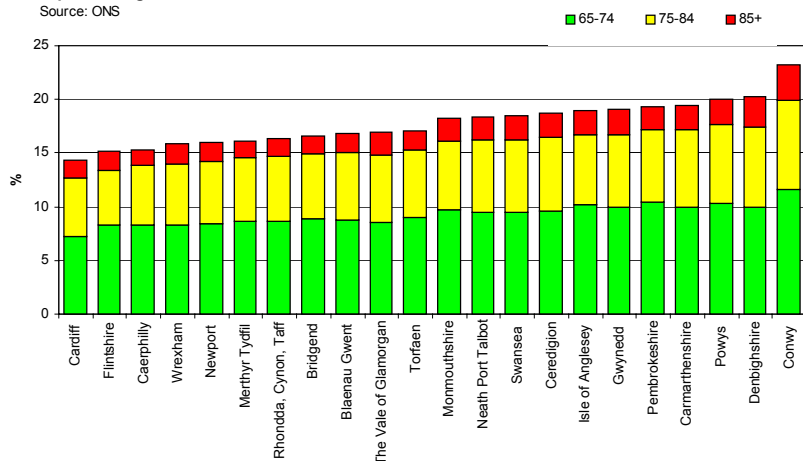
This summary highlights the content of each chapter and includes examples of analyses presented in the Profile. The Profile provides an analysis of the health of older people in Wales using routine data. A full copy of the report can be found at www.nphs.wales.nhs.uk

Background

The Profile has been produced by the Health Information Analysis Team of the NPHS in collaboration with the Vulnerable Adults Team. Data from a wide range of sources are included, reflecting the fact that many of the factors affecting the health of older people lie outside the NHS. Therefore, improving the health of older people cannot be achieved by the NHS alone and requires partnership working with other agencies. This has been made easier following the reorganisation of NHS in Wales with health and local government sharing the same boundaries. Analysis at various geographical levels is provided including all-Wales, local authority and, where appropriate, electoral division (ward).

Chapter two - Demography

% persons aged 65+, Welsh local authorities, 2002
Source: ONS



Chapter two shows how demographic patterns vary throughout Wales. Data are included relating to life expectancy, population change, ethnicity and the number of older people able to speak, read and write in Welsh.

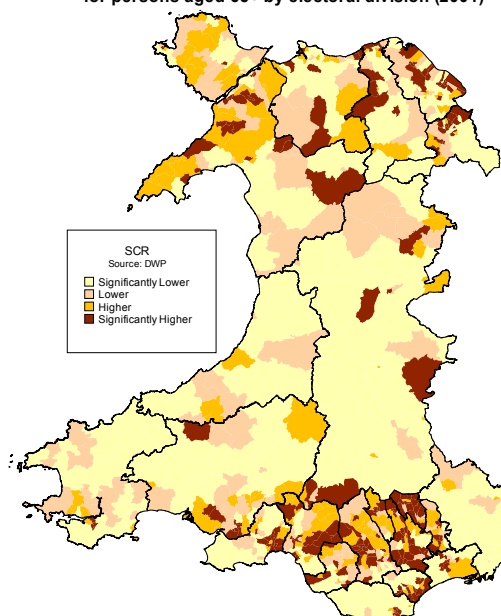
The chart displayed opposite shows the proportion of people aged 65 years and over in each of the 22 local authorities in Wales. Older people make up a larger proportion of the population in Conwy and Denbighshire, largely as a result of many people moving to the North Wales coast in retirement. Population projections calculated by the Government Actuary's department¹ indicate that the increase in the older population is expected to accelerate over the first half of this century.

Chapter three - Determinants of Health

Chapter three focuses on data relating to the key determinants of health including information on lifestyle, socio-economic status and income, housing and access to services.

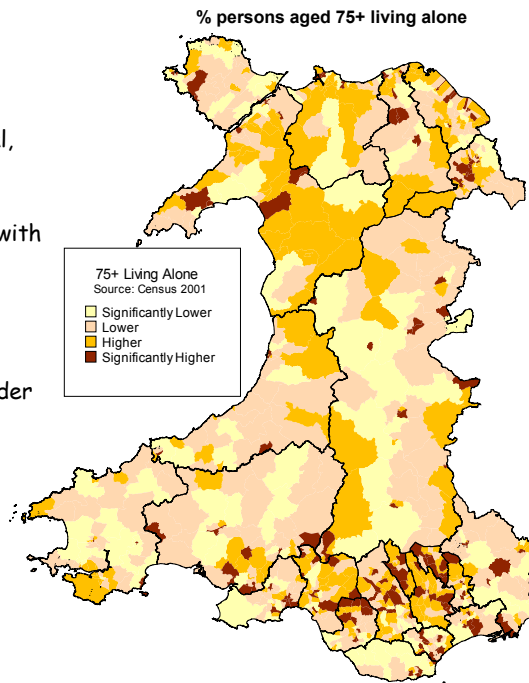
The single most important determinant of health is age. However, it is recognised that chronological age is an imperfect way of defining the older population and their needs. In common with the population as a whole, socio-economic deprivation is a major determinant of health. Among older persons, the cumulative affect of lives lived in poor socio-economic conditions has been shown to impact upon health in old age². Upon retirement from work, income falls and those who were in low paid employment when working rely on the State pension and supplementary benefit such as Income Support to meet the minimum income level set by Parliament. The map opposite shows how uptake of Income Support compares with the Welsh average among persons aged 65 years and over. It is clear that uptake tends to be higher in the south Wales valleys, and parts of Cardiff, Newport and Swansea. There is also higher uptake in parts of north Wales, specifically along parts of the coast of Flintshire and Denbighshire and parts of Wrexham. Rural areas of Wales tend to have lower uptake, but there are pockets where uptake is high.

Standardised Claimant Ratio of Income Support
for persons aged 65+ by electoral division (2001)



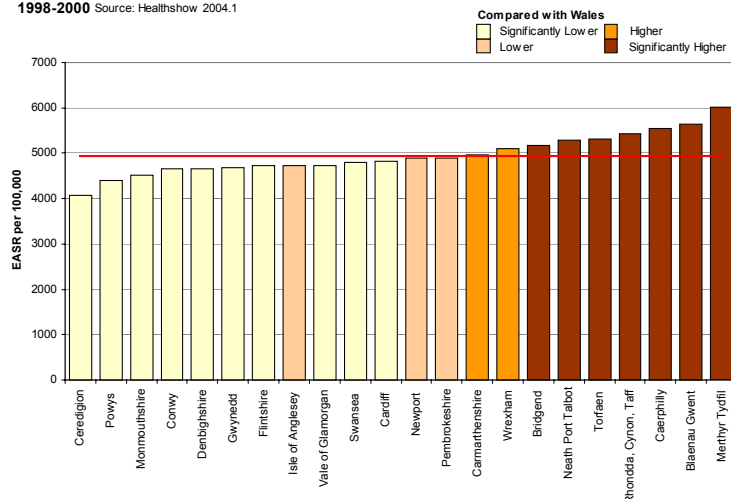
Chapter four - Dependency

Chapter four focuses on dependency, including data relating learning disabilities, physical and sensory disabilities, medical, residential and nursing care and delayed transfers of care. Whilst many older people are enjoying active and relatively healthy retirements³, advancing age is generally associated with increasing disability, loss of independence and functional impairments such as loss of mobility, sight and hearing⁴. An individual's need for health and social care is strongly influenced by the availability of informal carers. Living arrangements are important for service provision because older people living alone are more likely to utilise personal social services such as home help or meals-on-wheels compared to people living in other kinds of household⁵. The map opposite illustrates that there tend to be higher proportions of older people living alone in the urban areas, whilst rural areas generally have lower proportions.



Chapter five - Health Status

All cause mortality rate, persons 65+, Welsh local authorities
1998-2000 Source: Healthshow 2004.1



Chapter five contains information on health indicators and outcomes among older people in Wales. Information is included on general health, hospital admissions, selected general practice morbidity data, influenza immunisations, cancer registrations and mortality. The chart displayed opposite shows all cause mortality rates for persons aged 65 years and over for Welsh local authorities. The chart shows that death rates were significantly higher than Wales in Merthyr Tydfil, Caerphilly, Blaenau Gwent, Rhondda Cynon Taff, Torfaen, Neath Port Talbot and Bridgend. Significantly lower rates occurred in Ceredigion, Powys, Monmouthshire, Conwy, Denbighshire, Gwynedd, Flintshire, the Vale of Glamorgan, Swansea and Cardiff.

Chapter six- Conclusions

The conclusions draw together the findings of the Profile. It is hoped that the Profile will be used to help to inform policy to improve the health of older people in Wales both at a local level and through national initiatives such as the forthcoming older persons National Service Framework for Wales.

The limitations of using chronological age to define the 'older' population and their needs are recognised. The difficulties of measuring socio-economic deprivation among older persons compared with people of working age are also highlighted. The Acheson report⁶ noted the lack of reliable information on health at older ages in relation to social class and other indicators of socio-economic deprivation.

Advances in public and preventative health measures, progress in medical care and improvements in the socio-economic well-being of the population have contributed to the increased longevity in the population. The challenge now is to try to ensure that a good quality of life and independence are extended into old age.

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3. The Economic and Social Research Council. *Seven ages of man and women. A look at life in Britain in the second Elizabethan era*. Swindon: ESRC; http://www.esrc.ac.uk/esrccontent/DownloadDocs/seven_ages.pdf (accessed 12/08/2004)
4. Khaw Kay-Tee 'Healthy Ageing' *BMJ* 1997; 315:1090-6
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