



Transforming  
later lives

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**Someone aged 65 today  
can expect to live to 85,  
nearly 10 years longer than  
their parents' generation.**

# Transforming later lives – Our strategy

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We are living longer than ever before. Someone aged 65 today can expect to live to 85, nearly ten years longer than their parents' generation. This social revolution offers great opportunities – for the economy, for society and for us as individuals. Medical advances combined with better public health and living standards have given us extra years of life. Now we must add life to those years.

For more people to enjoy their longer lives, we need some big changes in our society. Our ambition is to transform later lives across England by taking action on interconnected and enduring societal issues that will make the most difference. We are blessed to have secure funding that allows us to commit the next ten years to achieving the greatest possible impact on people's lives.

Our vision is a society where everyone enjoys their later life. By 2040, we want more people in later life to be in good health, financially secure, to have social connections and feel their lives are meaningful and purposeful. We know that people who experience all or some of these have happier later lives. We will measure and track progress on these aims to be sure that actions are making a real difference to people's lives. Sadly, today too many people are missing out on a good later life. We believe poverty, preventable ill health and disability, loneliness and feeling undervalued must not be inevitably associated with later life. We must act today to secure a better future for present and future generations.

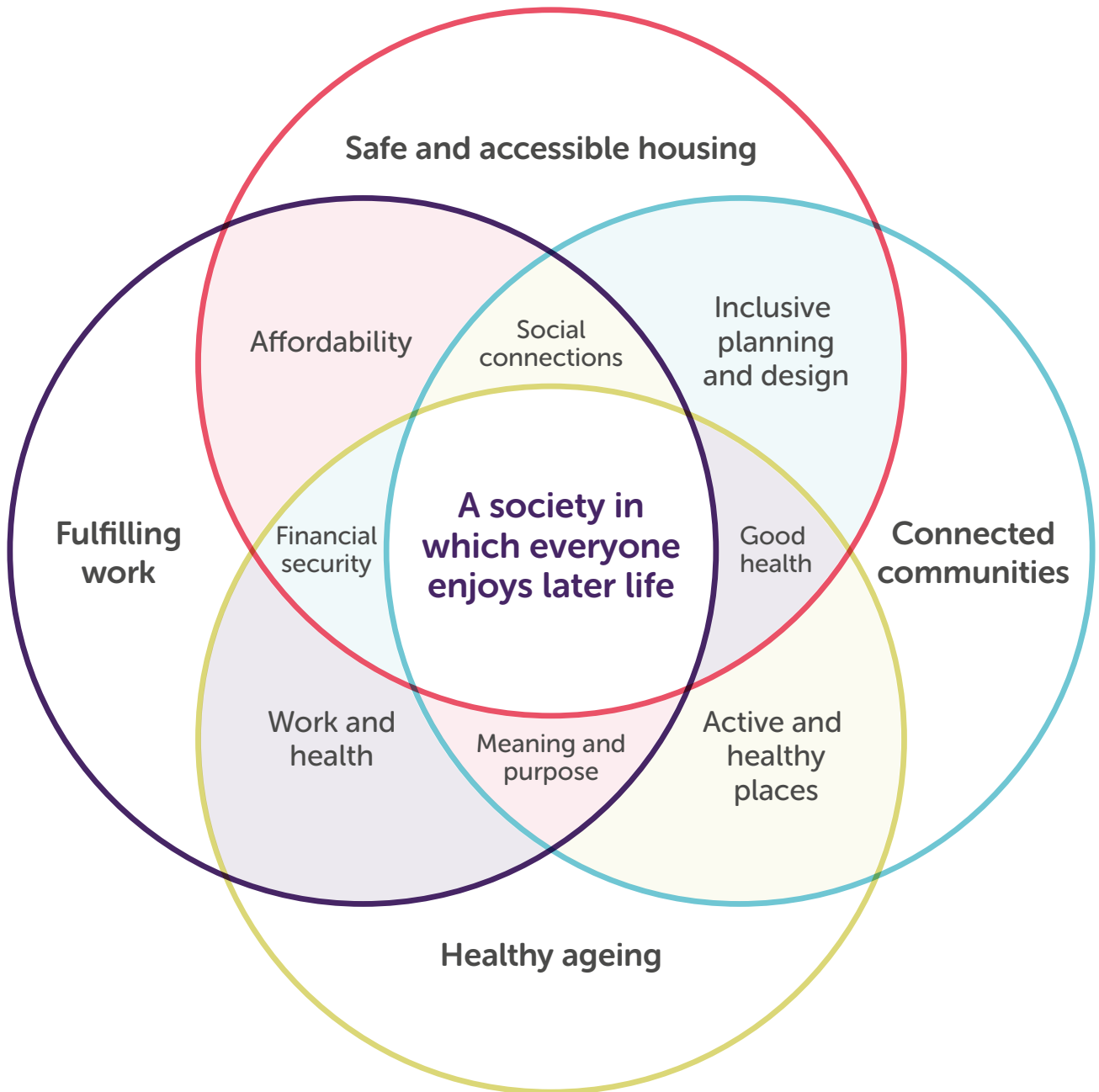
# Our priority goals

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To achieve our long-term vision by 2040, the aim of our work over the next ten years is for people approaching later life to:

- Live healthier, more active lives, reducing the risk of poor health, delaying onset, progression and impact of disease and disability
- Be in good quality work for longer, boosting savings and delaying drawing pensions
- Live in safe, accessible and adaptable homes, remaining independent and active for longer
- Live in communities where social relationships flourish, making it easier to build and maintain close connections as well as wider everyday contact.

We have chosen four priorities – healthy ageing, fulfilling work, safe and accessible housing, and connected communities. Our priorities are what people say matters most to the quality of their lives. They are also where we believe we can make significant and long-lasting changes by sticking with them over time. Finally, and crucially, our priority goals are interconnected in the real world of people's experience – we know that one of them alone can't achieve the impact we need and that progress on one leads to improvement in the others.





## Fulfilling work

### Why change is needed

Employment among people aged 50 and above has been rising steadily since the mid-1990s. Despite this, employment rates still fall off rapidly from the age of 55 onwards. By the year before people reach State Pension age, over half have already stopped working. While for many this is a positive choice, it's estimated that there are 1 million people in the UK aged 50-64 who want to be working but are not. Supporting people to be in good quality work for as long they want to is critical for their financial security now and into the future, as well as a vital opportunity to help them manage their health and improve wellbeing.

### Our goal

Our aim is for more people aged 50 and over to be in fulfilling work by:

- Improving workplace practices to help people remain in work for as long as they want
- Improving support for people seeking to return to work
- Supporting healthy working lives.

Our goal is 1 million more people aged 50-69 in fulfilling work by 2022.



## What needs to change and what we will do

We need widespread adoption of effective age-friendly workplace practices.

We want all large employers to take seriously the major shift in society as more of us live longer and to provide the flexibility and other support needed to make work better for all of us as we get older.

- We will build awareness, motivation and capability for change among employers, working with business networks, intermediaries and the media
- We will work directly with leading employers to develop, test and champion age-friendly workplace practices
- We will challenge ageism at work – in recruitment, development and progression.

We need all older people looking for work to have access to person-centred employment support that addresses the complex barriers they face.

We want to see the success rate of employment support for older jobseekers doubled.

- During 2019 we will develop and begin evaluation of new approaches to employment support in Greater Manchester
- We will actively influence Jobcentre Plus and other employment support providers to develop new ways of supporting older jobseekers.

We need a new approach to health at work.

We want people to have the right support to manage their health conditions while staying in work for as long as they want to and changes in our workplaces so that we all remain healthy for as long as possible.

- We will encourage health services and employers to develop new ways to support and promote health at work
- We will highlight the need for different kinds of support for long-term, slow-onset conditions such as back pain which are more common among older workers.

Ageing Better will influence national and regional policy to better support older workers and jobseekers, especially carers and those with long-term health conditions. In all our work we will seek to amplify the voices and experience of people aged 50 and over in the workforce.

Our goal is 1 million more people aged 50-69 in fulfilling work by 2022.



# Safe and accessible homes

## Why change is needed

The homes we live in are central to a good later life. Safe, good quality homes that meet our needs can maintain or improve our physical and mental health, wellbeing and social connections. Affordable housing is also essential to people's financial security.

Our existing housing stock is among the oldest in Europe with some of the highest associated health and care costs. It is estimated that unsuitable housing costs the NHS £624 million for first year treatment costs, largely due to hazards and falls. Multiple local planning constraints mean that far too few new homes are being built to the standards of accessibility and adaptability needed for an ageing population. We need urgent action to improve the quality of the housing we have and make sure that new housing is future proofed for all generations.

## Our goal

Our aim is for more people to enter later life in safe and accessible homes that will support them to live independently for as long as possible, particularly low income homeowners and private renters, by:

- Improving the condition and accessibility of existing housing
- Increasing the diversity of suitable homes for people approaching later life who choose to move
- Making information and advice more easily available to help people approaching later life make good housing choices.

Our goal is that by 2030 there will be 1 million fewer homes defined as hazardous and half of all new homes will meet accessibility standards.





## What needs to change and what we will do

To make more existing houses safe and accessible, we need better design and availability of fixtures and fittings suitable for all ages, stronger regulation on private landlords, innovative financial products and easier access to support to fund and carry out repairs and adaptations.

- Through the Industrial Strategy Challenge Fund, we will stimulate designers, manufacturers and retailers to develop and sell more inclusive, well designed products for the home and identify the drivers of getting these to market
- We will highlight the growing proportion of older private renters and put pressure on private landlords and government to act in support of renters' rights to improve conditions in the poorest quality private rented accommodation
- We will stimulate the market for properly advised and structured financial products to support low income owner-occupiers to access funds to repair and improve their homes.

To provide diverse housing options for people approaching later life, every new home needs to be accessible and adaptable.

- We will campaign for mandatory minimum accessibility standards for all new housing and tackle policy barriers to building accessible housing
- We will bring planners, builders, developers, architects, estate agents and citizens together to think imaginatively about housing for later life and stimulate supply to meet this demand.

We need better information and advice to support people approaching later life to make good housing choices.

- We will support local areas and national organisations to improve access to impartial information and advice about housing options as we approach later life
- We will work with the retail sector and the construction industry to advise customers about changes to their home that will help them to remain independent.

Our goal is that by 2030 there will be 1 million fewer homes defined as hazardous and half of all new homes will meet accessibility standards.



# Healthy ageing

## Why change is needed

Our health as we age is fundamental to our quality of life, allowing us to remain independent, to work or be involved in our local community, to maintain social connections and family life and other things that give us meaning and purpose. Health is a main reason for leaving work early. There are great opportunities to support healthy ageing so that more people are able to keep well, actively contributing to society and reducing the need for medical and social care.

We know that whether we smoke, how much we drink, our weight, our diet and exercise levels all have a real effect on our health. The cumulative impact can make a big difference to health in later life. And yet all of these health behaviours are amenable to change in mid-life.

## Our goal

Our aim is for more people to reach later life in good health and free of disability. That will require:

- Persistent and coordinated actions by a wide range of actors nationally
- Changes to structural and environmental factors influencing health locally
- Effective interventions to influence individuals to adopt healthy behaviours.

Our goal is for people to have five more years free of preventable disability, and to reduce the gap between the richest and poorest people in disability-free life expectancy by 2035.



## What needs to change and what we will do

National government needs to take the strategic lead in working with a range of organisations to develop and implement diverse action on the causes of ill health and disability in later life.

- We will convene national actors, including NHS, public health, local government, transport, employment, housing and leading health charities to agree actions that will make the most difference to the healthy ageing mission
- We will make the economic case for healthy ageing by modelling the costs and benefits of a preventative approach, reviewing the latest research and identifying policy initiatives from across Europe, delivering this work over 2018-20 to influence policy change.

At local level, we need a more integrated approach to healthy ageing across the NHS and local government. NHS England should ensure that local structures have healthy ageing outcomes and work with local authorities to tackle wider determinants of ill health and disability in later life.

- We will advise on the development of healthy ageing indicators in the accountability framework for newly integrated care systems and partnerships
- We will work with local areas to develop and evaluate comprehensive approaches to healthy ageing, including NHS, public health, local government, transport, employment and housing sectors and charities.

Influencing individual behaviours in mid-life needs a range of effective measures from regulation and price disincentives to social marketing and proven national and local interventions. This will require government to take regulatory action where the evidence shows it will work.

- We will commission research to understand what makes the biggest difference to people in midlife adopting healthy behaviours
- We will push for stronger regulatory measures to improve population level health on areas such as smoking, alcohol, diet and physical activity.

Our goal is for people to have five more years free of preventable disability, and to reduce the gap between the richest and poorest people in disability-free life expectancy by 2035.



# Connected communities

## Why change is needed

Relationships are what matter most to us all in the end. We rely on people close to us when in later life we experience ill health, disability or bereavement. Everyday social connections matter too: we know many people in later life feel isolated, without a sense of belonging to their community. As we approach later life we need opportunities to build strong and supportive relationships across generations and to live in communities that make it easier to stay active and connected as we age.

Our communities make a big difference to the quality of our later lives, supporting social connections, promoting healthy activity and making us feel valued. Connected communities:

- Encourage and support people to get out and about and remain active
- Are inclusive across generations and accessible for people as they get older
- Provide opportunities for people to get involved in their community.

## Our goal

Our aim is more people approaching later life to be living in connected communities, by:

- Creating the social infrastructure and physical environment for social connections to thrive
- Removing barriers to participation and creating opportunities for people to do the things they enjoy and matter to them.

By 2030, we want to see:

An increase in the proportion of people aged 50 and over who report they feel they strongly belong to their neighbourhood.

## What needs to change and what we will do

We need more local areas to recognise the strategic importance of creating places that support people to age well, with a more integrated approach to social provision and physical infrastructure, including planning and transport.

- We will encourage and support more places to become age-friendly by growing the UK Network of Age-friendly Communities to critical mass
- We will broker collaborations across social and physical infrastructure to support age-friendly transport, planning and design.

We need more accessible and inclusive opportunities for people to participate in community activities that are meaningful for them throughout their lives, including those that promote intergenerational connections, and harness the potential of virtual as well as place based communities.

- We will influence funders and commissioners to develop and test more accessible and inclusive new approaches to community participation, especially support for informal, community led activities
- We will directly stimulate new approaches to enable lifelong participation and enable people to access a wider range of opportunities.
- We will identify and evaluate existing approaches to creating connected communities, especially informal opportunities for participation, spread the learning and encourage others to replicate what works and adopt good practice.



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# How we will measure progress towards our vision

## Good health

In the best possible physical and mental health and able to live independently for as long as possible:

- Disability-free life expectancy increases (from the average of three quarters of life disability-free in the UK in 2014-2016)
- The gap in disability-free life expectancy between richest and poorest reduces (from a difference of 15 percentage points in the UK in 2014-2016).

## Social connections

Close, personal relationships and everyday contacts that provide practical and emotional support:

- The proportion of people aged over 65 who say they can only rely on their friends a little or not at all if they have a serious problem reduces (which was almost one-fifth of people aged 65 and over in England in 2015-2017)
- The proportion of people aged 65 and over who say they lack companionship often or some of the time reduces (which was one-third of people aged 65 and over in England in 2015-2017).

## Financial security

Enough income for daily life with savings for future plans or emergencies:

- The proportion of people above State Pension age in poverty reduces (almost 10% of individuals 65 and above were in persistent poverty in 2015)
- The proportion of pensioners in relative low income after housing costs declines (16% in 2016-2017).

## Meaning and purpose

Feeling valued and respected:

- The proportion of people aged 65 and over who are satisfied with their lives overall increases (less than 40% of people reported a high level of satisfaction (9-10 out of 10) in the UK in 2015-2016)
- The proportion of people aged 65 and over who feel the things they do are worthwhile increases (between 30% and 46% of people rated this as very high (9-10 out of 10) in the UK in 2015-2016).



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**In 2016 there were 13.2 million people aged between 50-69, equivalent to almost a quarter of the entire population.**



# Our focus: people approaching later life and at risk

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To achieve real and significant impact, Ageing Better will focus on where we can make the biggest difference. We know that what we do before we are old greatly affects our prospects for a good later life. That's why our focus will be on those approaching later life, a life stage between mid-life and later life (approx. aged 50-70).

In 2016 there were 13.2 million people aged between 50-69, equivalent to almost a quarter of the entire population.

Our commitment to long-term and lasting change means some results may take a generation to deliver. This in turn demands a focus on the future and the emerging trends that will affect how future generations experience later life, for example driverless cars and automation of work.

But right now there are shocking inequalities, both within and between generations. The gap is growing wider between those well placed to enjoy their later lives and around a third of people approaching later life who will miss out on the opportunities of a longer, happier life.

Many at this life stage face challenges, including:

- Stress, unhealthy behaviours, such as smoking, heavy drinking, poor diet and lack of exercise and a poor environment leading to early onset of chronic conditions and poor mental health
- Financial pressures that mean they are unable to save enough for retirement
- Exiting work early, often because of a health condition or caring responsibilities
- Little time for friends and social activities, squeezed by the pressures of work, family and caring responsibilities

While we will work to improve later life for everyone, we will focus particularly on those at risk of not enjoying their later lives.

# Why focus on those approaching later life and at risk?

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## Millions of people risk missing out on a good later life.

The proportion of people aged 60-69 who said that they did not enjoy life much of the time during the previous week was twice as high (11%) for those who had manual jobs as for those in professional roles (5%).

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## Health and disability

In Manchester, a man aged 65 can expect to have around 6 more healthy years. In Surrey, men aged 65 enjoy over 13 healthy years of life.

The difference between richest and poorest in the prevalence of chronic conditions such as heart disease, Type 2 diabetes, respiratory illness, arthritis and depression has been increasing year on year over the last decade.

Already aged 50-54, 17% of men and 23% of women have a limiting long standing illness and 6% of men and 8% of women aged 50-54 report difficulty with one or more activities of daily living.

## Work and finances

An estimated 1 million people aged between 50 and 64 are involuntarily out of work.

By the time people reach State Pension age, nearly half are economically inactive.

Over a third of women and about a fifth of men aged 55-64 in the UK have no private pension savings at all.

17% of pensioners are below 60% of median income before housing costs.

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## Homes

One in five homes occupied by older people in England failed the Decent Homes Standard in 2014.

While 73% of people aged 65 and over own their homes outright, 16.5% are social renters. The number of private renters aged 65 and over increased from 254,000 to 414,000 between 2006-2007 and 2016-2017. And numbers are expected to increase in future.

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## Social connections

People aged 45-54 are the most likely to feel lonely of all age groups (15% in 2011-2012) and the least likely to socialise, with half reporting that they meet socially with family, friends or colleagues less than once a week (2012-2013).

## Case study: Richard, 59

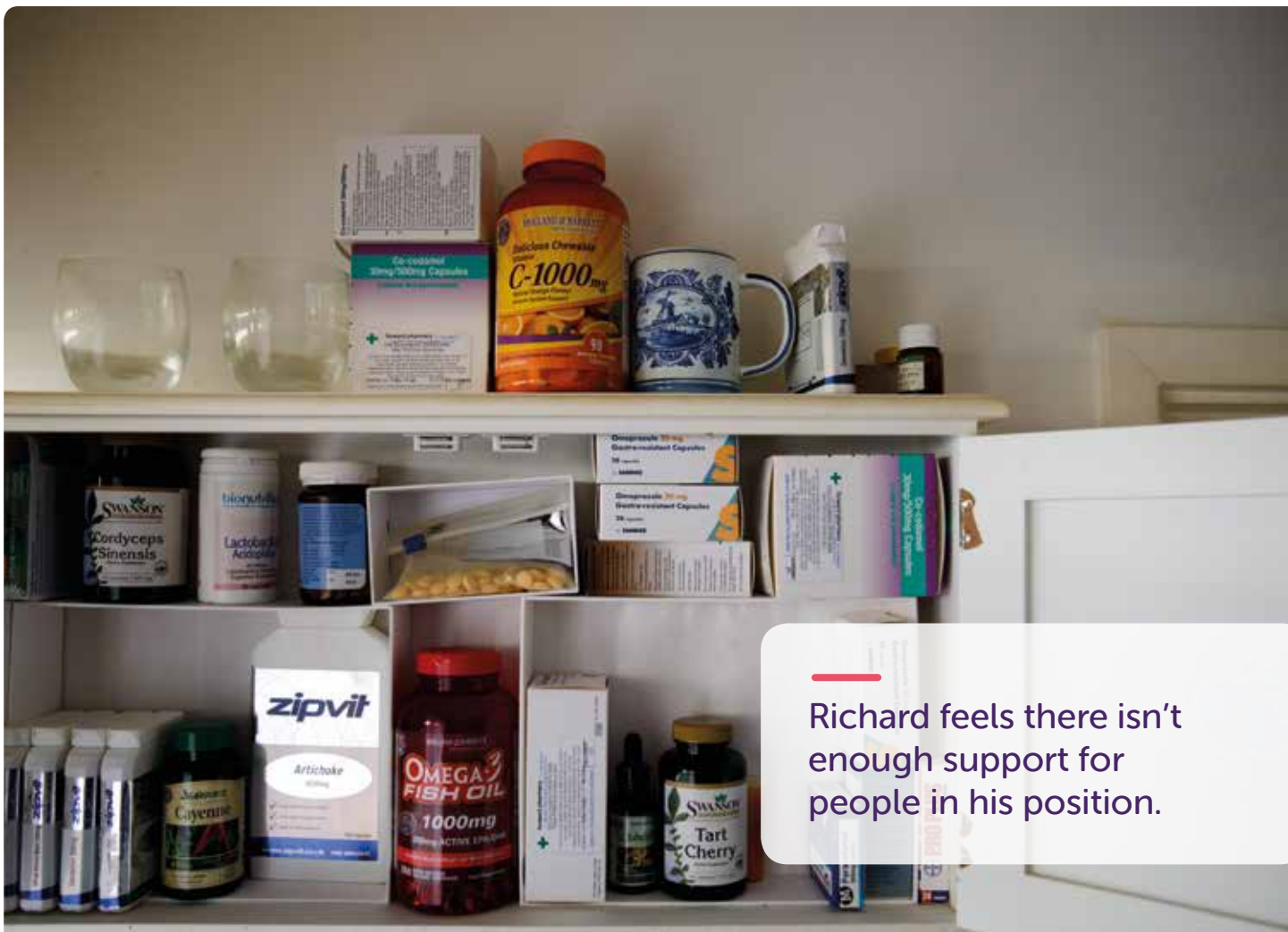
Richard was laid off after eight years as a city council refuse worker. He felt he was forced into retirement. Although he knew that his department had to make cost savings, Richard thinks his boss wanted to get rid of him, telling him he was not working fast enough.

Having always done physically demanding jobs, Richard has developed arthritis in both knees. He feels he doesn't have the skills to do anything else, but arthritis prevents him from doing another manual job.

Though now separated, Richard lived with his partner for 20 years and has three adult children. He wants to help them more, especially his daughter who recently had a child, but his minimal savings have been wiped out by his unemployment.

Richard's son tries to give his dad financial support. Richard is uncomfortable with this and wants to get back to work.

Richard feels there isn't enough support for people in his position. Back to work schemes focus on teaching younger people writing and numeracy, which Richard doesn't need. He does not own a computer and knows he would need to be computer literate to get a non-manual job. Richard is not optimistic about gaining these skills before he reaches State Pension age, and at this age he feels there is no point in trying to re-train.



Richard feels there isn't enough support for people in his position.

## Case study: Sarah, 56

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As a well as being a full-time nurse, Sarah helps to care for her ageing father who has advanced dementia and her three children who she doesn't see as much as she would like. Sarah is unhappy at work, feeling she's not valued. She would like to work closer to home, but that would mean longer hours for less money.

As a single parent, money is tight, and Sarah still supports her eldest son at university. She struggles to meet expenses most months, despite being a specialist nurse with a higher than average wage. Most of her savings have disappeared in contributing to her dad's care.

Sarah worries that she'll have to work for longer to afford any care costs in the future, and that she could become a burden on her children, especially as she has no partner.

Her weekly painting class was something she enjoyed with friends but in the past year she's been too busy to go. When she does see her friends, she feels guilty for taking time for herself when she could be helping her mum or spending time with her kids. Sarah would like to work a four-day week to better manage time with her family but feels this will never be financially possible for her.



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**We will convene others to leverage power, influence and resources.**

# Our role

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Over our first two years, we have built a respected brand with strong partnerships. We will build on this foundation to expand the range of partners we work with and act as a catalyst for change, stimulating others to act and build coalitions of support for the changes we want to see. We will convene others to leverage power, influence and resources.

We have influenced national policy to address the challenges of an ageing population. We will continue our work with government to inform policy with evidence and analysis. We will campaign to achieve specific legislative and policy changes, for example by calling for rights for working carers.

Our strategy is to influence nationally and deliver locally. Through our partnerships in Greater Manchester and Leeds, we are demonstrating the benefits of a joined-up approach to the opportunities of longer lives. We will continue to work in places to test innovative, interconnected approaches and do more to promote widespread uptake of these across the country by growing the UK Network of Age-friendly Communities.

# How we will work

We will develop our work with leading businesses to strengthen our engagement with the private sector and make the case for firms to seize the market opportunity of an ageing population. Working closely with the Industrial Strategy Challenge Fund, we will stimulate markets and the private sector to innovate and develop more inclusive products and services.

Building on our experience of co-design and early stage innovation, we will mobilise new sources of funding to support implementation at scale of the ideas and solutions that we identify, for example innovative social financing of employer based health support.

Our established credibility will be the platform for a bolder voice calling for changes in society, highlighting how many people are missing out on the opportunities of longer lives and making the case for action. We have begun to change the debate on ageing to be more positive and focused on opportunity. We will aim to shift attitudes and behaviours through intermediaries such as the media and advertisers. We will challenge ageism, pushing to keep ageing better higher on the agenda by holding events and online debates and raising our profile further.

Working closely with the Industrial Strategy Challenge Fund, we will stimulate markets and the private sector to innovate and develop more inclusive products and services.

As part of the What Works Network, everything we do will continue to be rooted in evidence and analysis. Our strong base in research equips us to explore exciting new prospects for action to transform later lives. We will use a wide range of evidence, including people's own experience, to develop a deeper understanding of what drives results, for example to find effective ways to influence health behaviours in mid-life.

Our distinctive independent status gives us a powerful platform from which to do all this. Our secure funding, thanks to an endowment from the Big Lottery Fund, allows us to stick with the issues that we know matter most to people and to persist in achieving significant improvements over the long-term. Drawing on our experience and achievements so far, we know that a sharper focus on mid-life, fewer priorities and bigger ambitions will allow us to have greater impact over ten years.

Finally, we will shape our own organisation around our new strategy and how we will achieve results through our own actions and those of others. To build the right organisation to deliver our strategy we will:

- Acquire new skills and capabilities
- Develop new networks and relationships and build larger coalitions for change
- Shape and influence the priorities of other organisations and leverage their resources to achieve our vision
- Review our governance, decision-making and organisational structures
- Seek to spend down our current endowment over a longer period, and in light of our experience and impact over the next five years consider whether to continue for longer.

In all that we do we will act in line with our principles.



# Our principles

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## **Start with the person:**

We prioritise what matters to people. We listen and act on diverse views and voices.

## **Bold and innovative:**

We speak truth to power and call on others to act. We are willing to take risks to try out new ideas.

## **Focused on impact:**

We focus on sustainable changes that make a difference to people's experience of later life, now and in the future.

## **Open and collaborative:**

We work with organisations and individuals who share our goals. We believe that by acting together, we can achieve more.

## **Grounded in evidence:**

We use evidence from people, practice and research to identify what's needed and how to make it happen.





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**We want everyone to  
have a better later life.  
If we work together  
we can achieve it.**

# Transforming later lives together

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Ambitious change demands concerted action; no single approach will achieve the results we need to see, and no single organisation can achieve this change on its own. Big ambitions to find better solutions to the interconnected issues we face, driven forward with renewed energy and focus on what works, will be the route to transform later lives for generations to come.

We believe we have a duty to push for action with a bolder voice and sharper focus. We have built a solid platform from which to be more ambitious about what is possible. We are determined that our knowledge will lead to results and believe that we have an important part to play.




But we can only achieve long-term changes in our society by working in partnership with the support and resources of others. We welcome the Government's mission to ensure that people can enjoy five extra healthy, independent years of life by 2035, while narrowing the gap between the richest and poorest. This presents an exciting opportunity for government to galvanise action by others, including the private sector, as well as taking action itself. We look forward to being an active partner in delivering on this ambitious goal over the next ten years.

We have developed our strategy in collaboration with our partners. We will engage a diverse range of organisations to build wider support for our vision and to develop new partnerships.

We want everyone to have a better later life. If we work together we can achieve it.



We need to act now to transform later lives. Join us in making that change.

 [www.ageing-better.org.uk](http://www.ageing-better.org.uk)  
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The document is available at [www.ageing-better.org.uk/transforming-later-lives](http://www.ageing-better.org.uk/transforming-later-lives)



The Centre for Ageing Better received £50 million from the Big Lottery Fund in January 2015 in the form of an endowment to enable it to identify what works in the ageing sector by bridging the gap between research, evidence and practice.