Policy Position Paper

Health Inequalities

(ENGLAND)

September 2024

Older people must have the same access to care as any other age group, based on their individual needs and an accurate understanding of their health. Within older age groups, all people should have the same opportunity to age well regardless of their socio-economic circumstances, ethnic/cultural background or any individual characteristic, and to not experience discrimination.

For health and care services, the Equality Act (2010) made it unlawful to discriminate, or treat someone unfairly, on the basis of their age. This means someone cannot be refused treatment or provided with less care because of their age alone. Despite these protections, many older people still experience worse access to key services, including mental health[i]; cancer care[ii]; and end of life services[iii].

Within this, as the largest users of health and care services, failures across the system have a disproportionate impact on older people. Indeed some of the specific issues known to the NHS and social care sector, i.e. lack of coordinated services and poor access to long-term conditions care, are exemplified by the failure to adequately treat older people.

People in later life represent an incredibly diverse set of communities with a wide range of socio-economic groups and minoritised ethnic communities, all with individual life trajectories that mean rarely will two people experience *ageing* in quite the same way. The diversity in this population is increasing all the time with people aged 65+ identifying as Asian or Black having increased by 73.8% and by 34.6%, respectively, since the 2011 Census[iv].

Part of this picture is that some of the *typical* features of ageing materialise at different points during people's lives. For example, Bangladeshi women aged 50-64 report being in poor health at the same rate as White British women aged 85 and over[v]. Prevalence of long-term conditions in minoritised ethnic communities is lower in younger age groups compared to their white counterparts, however this reverses from middle age onwards[vi]. Living in coastal areas – where there are typically higher concentrations of older people and poverty – is associated with higher incidence of health conditions and higher mortality[vii].

As a consequence, there is wide variation in both life expectancy and healthy life expectancy – the proportion of your life that you can expect to live in good health. Female healthy life expectancy at birth in the 10% most deprived areas was 7.9 years lower than in the least deprived areas in 2018-2020; for males the difference was 9.7 years fewer[viii]. Men and women

living in the 10% most deprived areas of England saw a significant decrease in life expectancy between 2015-2017 and 2018-2020[ix].

Older people today are living in these gaps – compared to their peers, there are people living both shorter lives and more years with poor health and disability. National action on life-long inequalities is of course vital. But more must be done to support those living today with the consequences of that inequality, including work to actively prevent ill health, regardless of age, and action to ensure high quality care and support is available where it is needed most.

Public Policy Proposals

- Age combined with other protected characteristics can significantly increase the risk of negative discrimination and poorer outcomes. The Government must implement section 14 of the Equality Act on *Combined discrimination* to help protect older people at risk of these outcomes.
- The Government must commit to a strategy on health inequality in later life. This should cover:
    - the impact of variable healthy life expectancy (HLE) and the actions necessary to tackle this variation;
    - identification of geographical areas that require investment in prevention activities to mitigate the risk of ill health in mid- to later-life; and
    - improve and build the evidence-base on the impact of combined discrimination with regard to health and actions necessary to mitigate against them.
- There must be improved national data collection and analytical methods applied to all health and care services. All data should be published with age alongside other protected characteristics (for example, ethnicity) and with 5 year age bands to better understand the experiences of the ageing population within different groups.
- Health and care services must strengthen their activity on the public sector equality duty, in which services are required to eliminate discrimination, advance equality of opportunity, and foster good relations. In doing so, they should recognise the disproportionate impact of poor care and under provision on older people as the group that most relies on services.
- Integrated Care Systems must do more to address under-provision of key services in more deprived areas. In particular, GP services that do not have sufficient clinical staff per head of population and areas where there is a serious lack of social care provision, both in terms of care home beds and domiciliary care.

Want to find out more?

Age UK has agreed policy positions on a wide range of public policy issues. Our policies cover money, health and care, housing and communities, and equalities issues. See https://www.ageuk.org.uk/our-impact/policy-research/policy-positions/ for more information.

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[i] Age UK (2022). *Press release: For some older people, mental health was already in a fragile place - but the worst maybe still to come.* *https://www.ageuk.org.uk/latest-press/articles/2022/for-some-older-people-mental-health-was-already-in-a-fragile-place---but-the-worst-maybe-still-to-come/*
[ii] https://www.thetimes.com/uk/healthcare/article/failure-to-treat-older-patients-harms-uks-cancer-survival-rate-prdx53qzd
[iii] Lloyd, A., et al (2015) *Why do older people get less palliative care than younger people?,* University of Edinburgh/Marie Curie.
[iv] Age UK analysis using: ONS (2023). Ethnic group by age and sex, England and Wales: Census 2021, ONS - Nomis (2011). Ethnic group by age and sex, England and Wales: Census 2011.
[v] The Centre for Ageing Better (2023), *State of Ageing 2023*
[vi] Hayanga, B., et al (2022). *Ethnic inequalities in age-related patterns of multiple long-term conditions in England: analysis of primary care and nationally representative survey data*, Sociology of Health & Illness
[vii] Public Health England (2019). *An evidence summary of health inequalities in older populations in coastal and rural areas*
[viii] ONS (2022). *Health state life expectancies by national deprivation deciles, England: 2018-2020*.
[ix] ONS (2022). *Health state life expectancies by national deprivation deciles, England: 2018-2020*