Chicken or egg?  
Social exclusion and health in older age

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Definition of social exclusion

Collins dictionary: “The act of making certain groups of people within a society feel isolated and unimportant”

WHO: “Dynamic, multi-dimensional processes driven by unequal power relationships interacting across four main dimensions - economic, political, social and cultural. . . . characterised by unequal access to resources, capabilities and rights which leads to health inequalities”

Levitas report: “Social exclusion involves the lack or denial of resources, rights, goods and services, and the inability to participate in the normal relationships and activities available to the majority of people in a society, whether in economic, social, cultural or political arenas”
Social exclusion and health

• Social exclusion of the elderly is a key policy focus
• But in research studies, poor health is often considered as
  – an indicator of social exclusion
  – a predictor or risk factor for social exclusion
  – an outcome of social exclusion
• Accumulating evidence hampered by this variety of ways that health is used
Research Questions

1. How does poor health predict social exclusion in people aged 65+ years?
2. What are the health consequences of social exclusion?
3. Are there factors that might modify these relationships?
Main findings

• Longitudinally, poor health is associated with greater social exclusion
  – Health decline increases the risk
  – Health improvements reduce the risk
  – Access to a car and use of technology can protect those in poor health from social exclusion

• Greater social exclusion is linked with health decline
  – No evidence for protection by the factors we considered
Data

• Understanding Society, the UK Household Longitudinal Survey (UKHLS)
• 5,475 adults in the main sample aged 65+ interviewed in each of the first four years
• Sample of people with information on all the variables used in the analysis = 4,169
Study design

Year 1  Year 2  Year 3  Year 4

Health  Health  Health  Health

Social exclusion score
Measures

• Social exclusion
  – Multi-dimensional
    • Service provision and access
    • Civic participation
    • Social relations and resources
  – Scores range from 0 – 15

• Health
  – Self-rated health, limiting long-term illness, GHQ

• Explanatory factors
  – area type, car access, mobile phone ownership, internet use
Social exclusion scores by selected demographic characteristics

Age 65-74: 4.04
Age 75+: 5.19
UK born: 4.39
Born elsewhere: 4.80
Increase in social exclusion by self-rated health transitions (ref: stable good health)
Increase in social exclusion by limiting illness transitions (ref: no limiting long-term illness)

LLTI onset
LLTI recovery
Stable LLTI

Social exclusion score
Increase in social exclusion by GHQ transitions (ref: stable low GHQ)
Modification of relationship between self-rated health and social exclusion by access to car(s)

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<tr>
<td>Stable poor SRH</td>
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Modification of relationship between limiting long-term illness and social exclusion by access to car(s)

Social exclusion score

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Modification of relationship between self-rated health and social exclusion by internet use

Social exclusion score

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<tr>
<th></th>
<th>Regularly</th>
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<th>Sometimes</th>
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Modification of relationship between health transitions and social exclusion by mobile phone ownership
Odds of poor health for a 1 unit increase in the social exclusion score

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<tr>
<td>LLTI</td>
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<tr>
<td>High GHQ</td>
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Summary

• Among community living older people in the UK, poor health was associated with greater social exclusion
• In turn, social exclusion was linked to health decline
• Use of a car, mobile phone and the internet are factors that protected older adults in poor health from social exclusion
• The health effects on social exclusion were unaffected by living in an urban or rural area
Policy conclusions

• To break the cycle of disadvantage, it might be more effective to target the health to exclusion relationship than the exclusion to health relationship

• Taxi schemes for the elderly and designing age-friendly hardware and software might have public health benefits