

HEALTHY AGEING:
**WORKING TOGETHER TO IMPROVE
WELLBEING IN LATER LIFE**



ISLINGTON

**ANNUAL PUBLIC
HEALTH REPORT
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What do we mean by healthy ageing?

Healthy Ageing, as defined by the World Health Organisation, is “the process of developing and maintaining the **functional ability** that enables **wellbeing** in older age”.

- Not just about physical and mental health, although health is a crucial foundation for ageing well
- But also about wider determinants and environmental factors
- Age friendly environments maximise the potential of older adults to age well and remain healthy and independent

What's important to residents?



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Quality of life

- More involvement in decisions affecting us
- Having a voice that's valued
- People listening to what is needed
- Rising cost of living
- Opportunities for intergenerational connection.
- Feeling valued as neighbours

I want to be heard and valued



Health and care

- Shared care records
- Getting to know people who provide care, continuity
- Person-centred care
- Supporting community based activities
- Reducing out-of-pocket expenses

I want health and care provided closer to my home



Environments

- Accessibility is key to independence
- Air quality is a key concern
- Consider impact of transport policies on older adults
- Improved safety in some areas

I want to be independent and safe



Key Transitions

- Support integration into new groups
- Need for pre-retirement support
- Recognise the needs and provide services for different groups e.g. older men

I am supported to remain connected to my community when I want to be



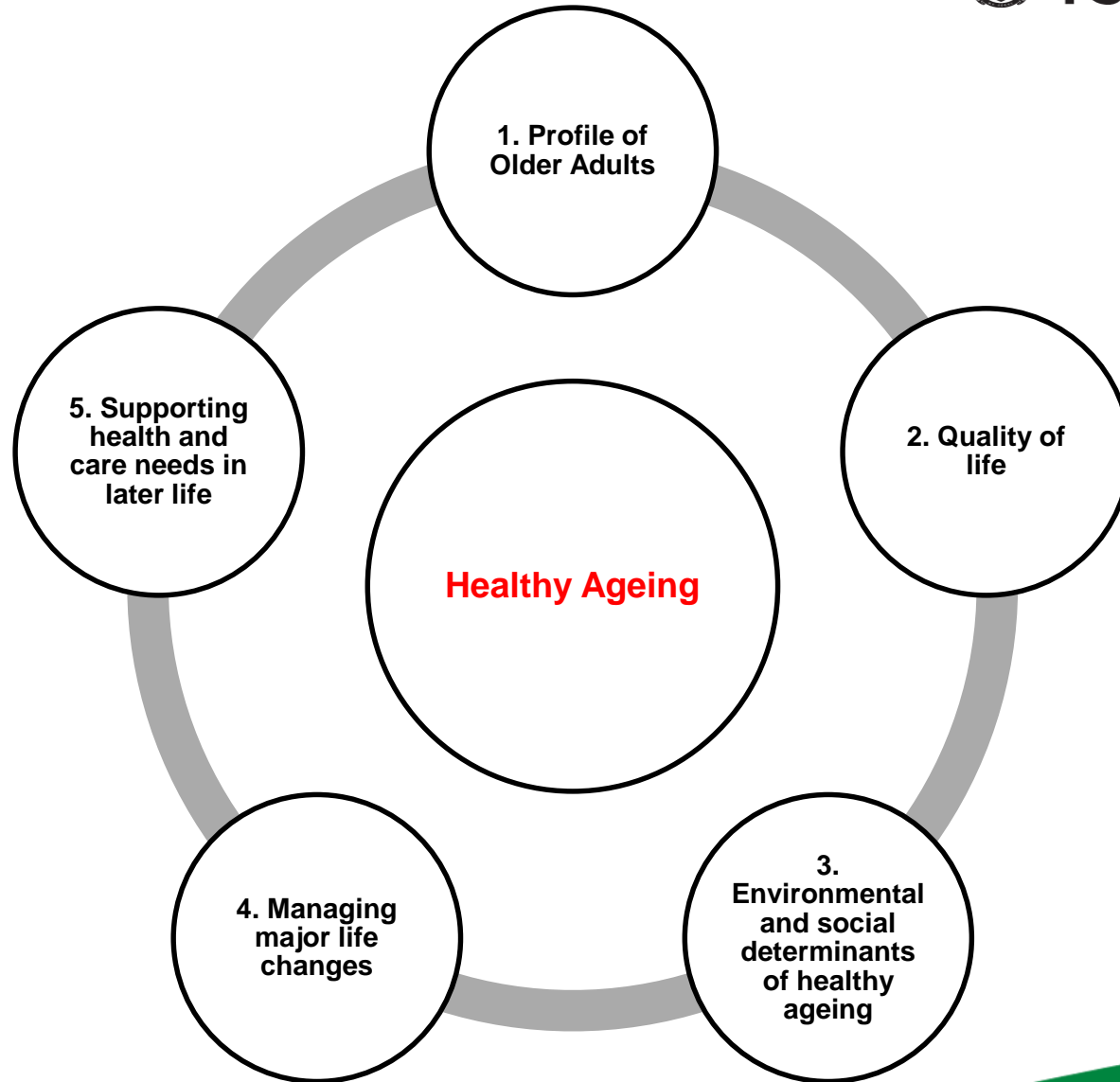
Islington's Corporate plan (2018-22): BUILDING A FAIRER ISLINGTON

APHR is a call to action aligned with Islington's vision to **“make Islington fairer and create a place where everyone, whatever their background, has the same opportunity to reach their potential and enjoy a good quality of life”**, including older adults.

The APHR highlights the opportunities for working together so that older adults (and residents of all other ages) in our community lead **healthy and independent lives**, a key objective within Islington's corporate plan.

Islington's Joint Health and Wellbeing Strategy 2017-20

APHR also aligns with our JHWS, with its focus on best start in life, preventing and managing long term conditions, mental health and wellbeing, and its overarching focus on tackling health inequalities. Supporting physical and mental health and wellbeing across the life course is vitally important to a good later life.

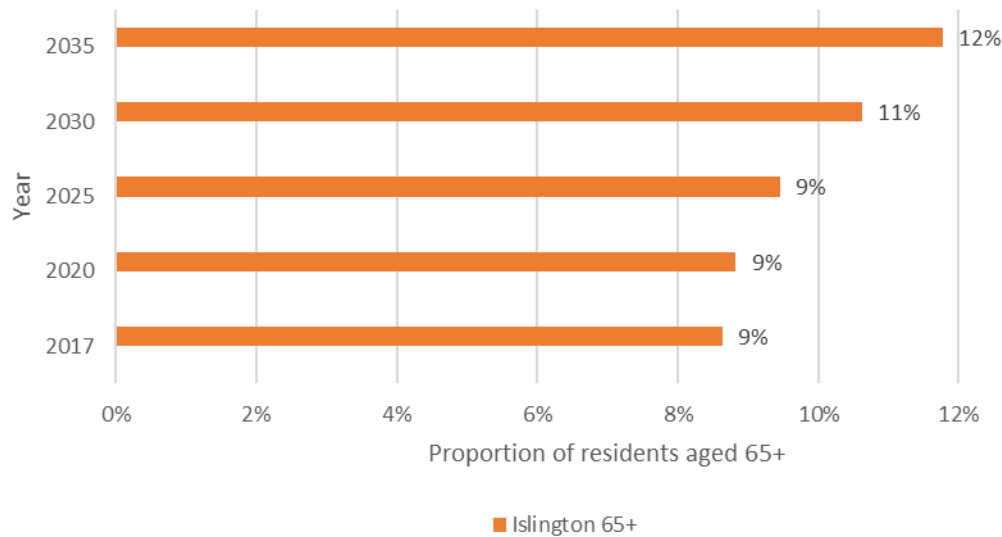


Profile of Older Adults

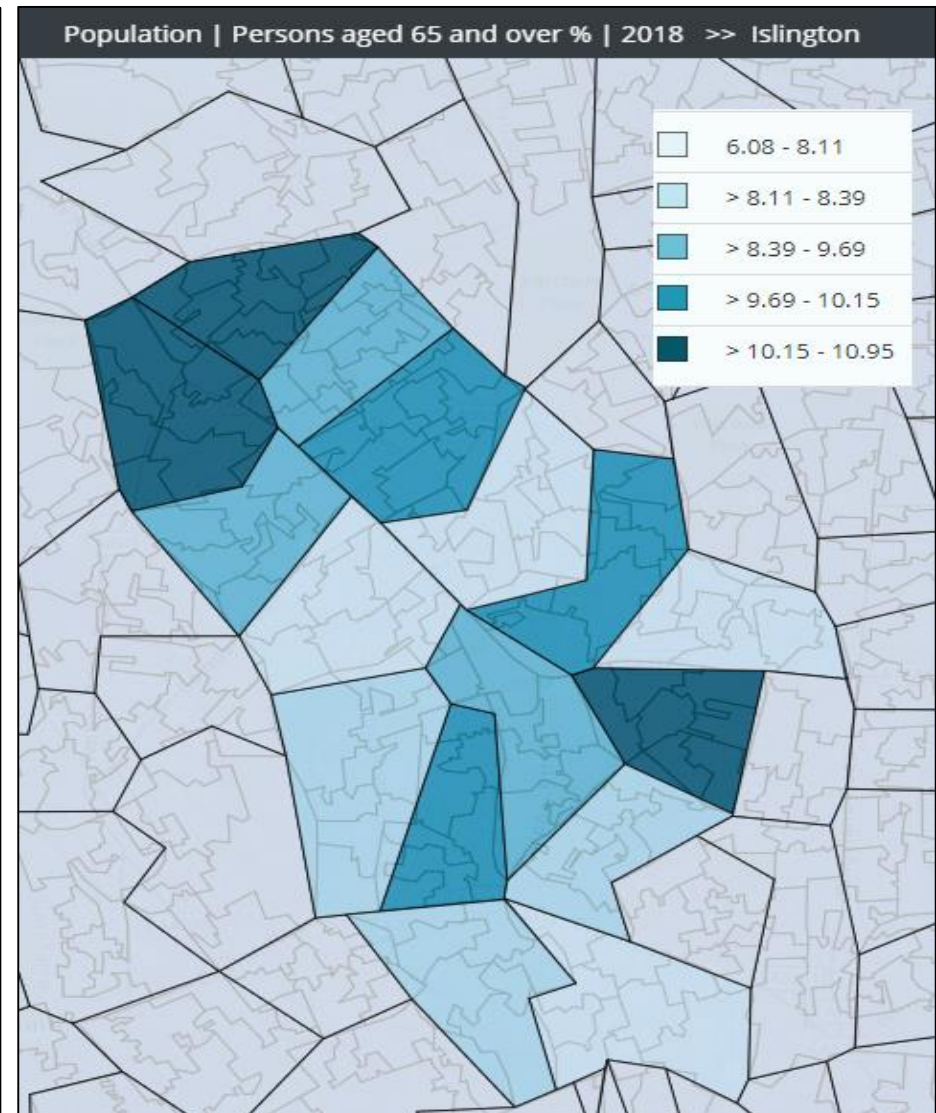


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Estimated projected change in the proportion of older adults in the population ,Islington 2017 to 2035



- In 2017, there were an estimated 20,786 older adults in Islington.
- 9% of the total population is aged 65 years and over and 1% is 85 years and over.
- The sharpest projected population increase is expected in the 'very old' (persons aged 85 and above).



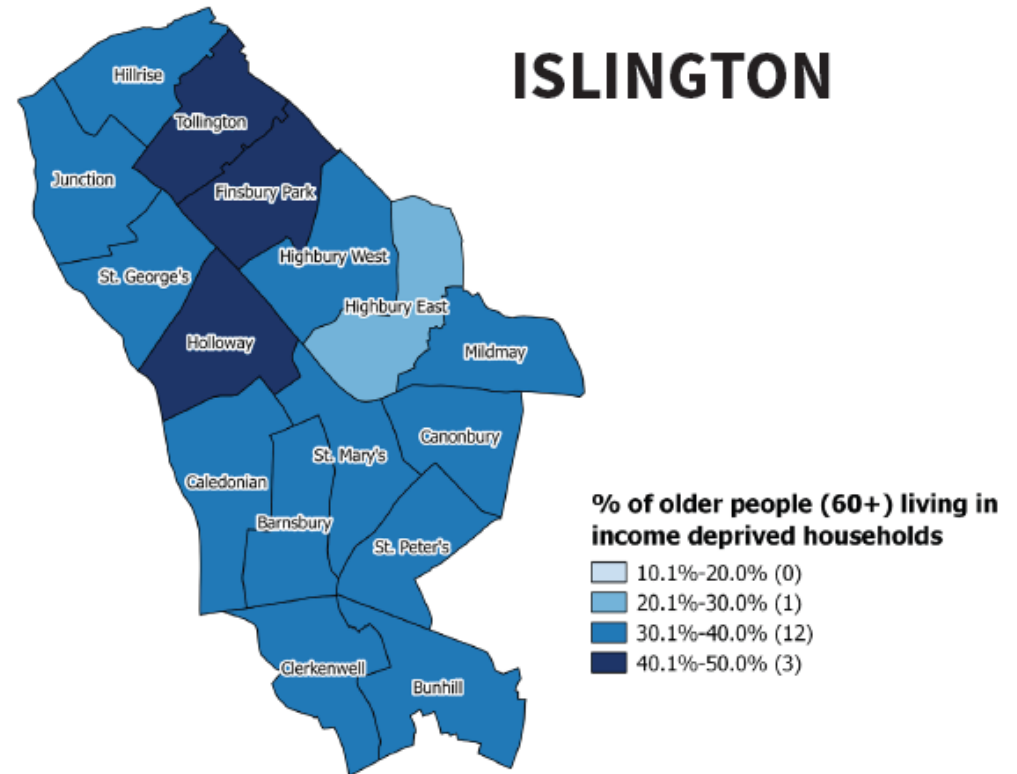
Inequalities in later life



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Income deprivation affecting older adults index, by ward, Islington

- Significant inequalities between and within our older adult population in terms of their experience of healthy ageing
- Many people live long, healthy and independent lives, many have significant needs that impact on their quality of life



Examples of inequalities in physical health and dementia

Physical health

- **Deprivation**- People living in the most deprived areas develop multi-morbidity 10-15 years earlier
- **Gender**- Women (65+) are twice as likely to have a severe frailty than older men (6% vs 3% in Islington)
- **Ethnicity**- Asian women (26%) and men (31%) are more likely to have a moderate/severe frailty compared to the Camden average (20%), meanwhile in Islington the most affected group are Black women (38%) and Black and Asian men (37%)

Dementia

- **Gender**- Dementia is an issue that disproportionately affects women, with two-thirds of people living with dementia in the UK being female; three quarters of carers for people with dementia are women. This is partially explained by the fact that women outlive men on average. Locally women account for 62% of all dementia cases in Camden and 64% in Islington
- **Ethnicity**- The Black African-Caribbean population experience a higher prevalence of early onset dementia and have a greater number of risk factors for vascular dementia

Quality of Life

Quality of life

Quality of life at any age or life stage is subjective, yet there are some **common issues** that have significant potential to impact on quality of life as we age, including: our **social networks and feeling connected** to our communities; **feeling valued and respected**; and being **financially secure**.

Key Messages:

- Social isolation and loneliness have an adverse impact on health and wellbeing. **Islington ranks 5th** highest of all London boroughs in terms of estimated risk of loneliness in the population.
- Fuel poverty is one aspect of financial insecurity in older age that can significantly impact on a person's health, wellbeing and quality of life. It is estimated that around **8% of Islington** households with residents aged 60 and over are fuel-poor. These numbers are predicted to increase by between 30-35% between 2018- 2028 in both boroughs.
- There are significant **inequalities** in quality of life amongst older residents in Islington.

Quality of life

Key Recommendations:

- Everyone has a role to play in **enhancing community connectedness**. Small acts of neighbourliness and connecting with others not only builds a more cohesive, connected community but is also one of our five steps to wellbeing that benefit everyone.
- Identify all opportunities and levers that can be used to address social isolation and loneliness through **services commissioned and delivered by the Council**, including maximising **social value** through our supply chain to promote and support quality of life in older age.
- The **social prescribing** model and service presents a key opportunity and means for linking people into VCS and community assets and services to tackle isolation and loneliness, and other key determinants.
- Take a **holistic** and approach to wellbeing and quality of life in older age, through care pathways and services focused **person centred** on older people.



Case study: North London Cares

Bridging the intergenerational gap to reduce social isolation and loneliness

- North London Cares is a charity based in Camden and Islington, which introduces young professionals to their older neighbours in an effort to help Londoners feel less isolated.
- During the winter of 2016/17, the team knocked on the door of Jane*; an older adult. Jane is a born and bred Londoner but health concerns in recent years had impacted on the connection she has to her community. North London Cares introduced her to Jill*, a young working professional. While Jill had lived in the city for several years, she also felt a disconnect, thanks to the relentless pace of the capital.
- Jill now visits Jane every week to catch up over a cup of tea. Jane offers Jill roots in London and a whole host of stories about the local area in which they live, whilst Jill shares her stories from work and her weekly adventures.
- The friends may have 56 years which separate them but they have a borough, a shared sense of humour and a common desire to connect which keeps them united, celebrating a year and a half of friendship in October.

Environmental and social determinants of healthy ageing



Environmental and social determinants of healthy ageing

Age-friendly environments, places and settings are key to ageing well and supporting independence. This includes housing, the public realm, transport and workplaces.

Key Messages:

- The proportion of **older residents who live in social housing** is particularly high in Islington; this presents both the Council and local housing associations with a significant opportunity to support many of our residents to remain independent and well in later life.
- The **quality of our public places and spaces** is important for everyone; things that make a particular difference to older people include even paving, sufficient road crossing times, places to stop and rest, and access to public toilets.
- In boroughs such as Islington, with low proportions of car ownership, **accessible, affordable, safe and comfortable public transport** is a key enabler encouraging older people to access services, maintain active lives, and take part in leisure and social activities.



Environmental and social determinants of healthy ageing

Key recommendations:

- As social landlords, the Council should **develop its relationships with older tenants** to promote and support wellbeing in later life, tackling social isolation as well as connecting older residents into key services and support in the community.
- The **healthy streets approach** should be embraced in the planning and design of all open spaces, including areas in and around housing estates and other public open spaces.
- Other aspects of **age-friendly cities** should be incorporated into policies, plans, and local schemes, including, for example, an appropriate balance between the needs of older people as pedestrians and other users of space, such as cyclists.





Case study: Affordable and accessible social homes in Islington

- New-build housing presents an obvious opportunity to design age-friendly home environments
- New homes may be built on estates where there is under-developed, unloved or unusual space, such as the Dover Court estate. Here, 81 unsightly disused garages and the existing Romford House were demolished to make way for the New Romford House, with an additional 70 homes for Islington residents.
- They have facilities designed to support independent living, such as wide passages, wide entrances, a sink and a cooking hob which move up and down, allowing people living with disabilities to be able to cook their own meals in safety.
- One long-term older resident of Dover Court said “I have all of the facilities here I need to live independently, in safety, which is very reassuring.”



Managing major life changes

Managing major life changes

Later life can be a time of major life changes, including retirement, new caring responsibilities, bereavement and changes in mental and physical health. Early support and building older people's resilience can improve their independence and wellbeing during major life changes.

Key Messages:

- As people live longer, **career planning and retirement** will undoubtedly look different in the future. Employers can play an important role in supporting older people through developing strategies and policies to support older workers in the workplaces.
- **Lifelong learning and participation** in employment for longer not only brings economic dividends to society, but also financial, health and wellbeing benefits to individuals.
- **Supporting carers** to remain physically and mentally well supports both the carer and the people they care for.

Managing major life changes

Key Recommendations:

- Employers, including the Council, should develop strategies and policies to **support older workers in the workplace**. This includes providing support for employees to assist with retirement planning, including emotional as well as financial preparedness.
- **Opportunities to get involved and volunteer** should be inclusive, welcoming and accessible to older people. Older people's involvement in a broad range of voluntary and community organisations, and not just those targeted specifically towards older people, helps to break down intergenerational barriers, combat ageism and foster cohesion.
- Voluntary and community services, and primary and community health services have a key role to play in the **identification of carers**, ensuring carers are proactively supported to access information, advice and support. Community pharmacies can also support the identification and support of carers.

Case study: Bereavement services in Islington

- St Joseph's Hospice is commissioned by Islington Council to provide bereavement support.
- This service offers volunteer-led bereavement support to adults who have experienced (or are anticipating) the death of someone they love or care about.
- They run an informal monthly bereavement support group so that bereaved individuals can meet others and share their experiences.
- It is promoted through GP practices and demand for the service is increasing.
- The service provides peer to peer support for 6-12 weeks, and those finishing the service can then take part in supporting others in their bereavement.

Health and Care Systems

The experience of old age varies significantly from individual to individual and a lot can be done throughout the life course and in later life to prevent ill-health and maintain wellbeing. As people live longer, and have health and care needs that span both physical and mental health, NHS and social care, integration has become an important priority.

Key Messages:

- Almost one in two older people in Islington have **more than one LTC** (compared to only one in twenty in people aged 16-64).
- There are around 500 older adults living with a **serious mental illness** in Islington. The physical health needs of this group are particularly high.
- Over half of older people in Islington experience a degree of frailty. There are over 6,000 falls in older adults in Islington each year.
- In 2017/18, 2,010 older adults in Islington (9,725 per 100,000 older adults) were **accessing long term support** from adult social care during the year.

Health and Care Systems

Key Recommendations:

- Health and care professionals and providers across the whole system should consider how more of a **strengths based approach** could be developed in their services, learning from the strengths based approach in adult social care.
- The NHS and health professionals should **systematically prioritise and promote prevention**, and prevention interventions across the life course, including to adults in mid and later life, in order to delay or reduce the risk of disability, dementia and frailty.
- **Social prescribing** and other approaches to **connecting older adults with the rich and diverse community assets** in our two boroughs (and in the voluntary and community sector in particular) should be prioritised, adequately resourced and embedded locally, to support prevention, early intervention and the social determinants of healthy ageing.

Case study: Choice and Control programme



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- Islington CCG's 'Choice and Control' programme for adults provides peer coaching for residents with long-term conditions, mental health needs and social care needs.
- This is the story of John,* a local resident who is nearly 65. John developed a number of physical LTCs including liver problems (due to heavy alcohol use) and high blood pressure. John had experienced abuse in the past and more recently his mental health deteriorated.
- Through the 'Choice and Control' programme, John began to work with a peer coach who linked in with other care providers. He says "The peer coach asked me about my goals, I said I only had one goal, I didn't want to end up in hospital. She helped me to see that I am going to end up in hospital. My physical health probably won't get any better, but I don't want it to get any worse, and it's up to me to manage that. She's nagged me in a nice way to be more proactive." This flexibility and joined up working made John feel in control.
- John said "I found it refreshing, just someone talking with me and listening, and interested in my physical and mental health at the same time. I'm enjoying the feeling that I am in control of my health and that I'm doing everything I can to stay out of hospital".

Overarching themes and messages

- Good health is a key foundation of a good later life, but **ageing well is much more than just good physical and mental health** in older age.
- The circumstances and conditions in which we are born, grow, and live determine how we age – therefore we need a **whole life course approach** to healthy ageing.
- It's **never too late** – people in mid and later life can benefit from interventions that promote wellbeing, prevent poor health or deterioration, detect problems early, and build resilience.
- Age-friendly communities are **inclusive communities**, and can benefit everyone.