Ashbury Parish Neighbourhood Plan Evidence Base

5. Impact of an Aging Population



Prepared by the Neighbourhood Plan Steering Group

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IMPACT OF AN AGEING POPULATION IN AND FOR ASHBURY

Introduction

'The population of Ashbury as a whole, is older than the national average. The population of Ashbury is also older than the Oxfordshire average, making Ashbury an older persons location ---' so state www.ilivehere.co.uk/statistics-ashbury-oxfordshire, drawing on data held by the Office for National Statistics and Department for Work and Pensions and that collected by the 2011 census.

'Rural communities have slowly but relentlessly become less and less sustainable and less and less self-sufficient' The Rural Coalition Prospectus 2009

'On its current course, with no change in policy and no commitment to action, much of the countryside is becoming part dormitory, part theme park and part retirement home. Only if people in rural communities have ready access to local schools, local jobs, local shops and pub and affordable homes will they and their children thrive and will the nation meet its environmental and economic needs. A newly invigorated countryside is essential for reasons that affect our national future ---- 'The Rural Coalition Prospectus 2009

These 3 statements illustrate elements of the current challenges facing Ashbury and other such rural locations. The Neighbourhood plan process addressing housing development and land use has allowed formal exploration of the data and experience of living in Ashbury for the past, present and future and has provided a vehicle to name, articulate and make visible a range of issues in ways not done so previously in one place.

This paper focusses in particular on the fast rising increase in the percentage of older people in the population of Ashbury, a trend that is evident in many other rural and urban communities. This becomes increasingly important to depict because of making visible the impact of such a population profile. Such depiction is required for determining housing demand, the type of housing requirements, development and land use for the next few decades and to highlight the importance of addressing collectively these impacts on the neighbourhood. The two are intertwined and interrelated. UNFPA and HelpAge International in their 2012 report Ageing in the Twenty First Century: A celebration and A Challenge state 'a population is classified as ageing when older people become a proportionate larger share of the total population' p12. They continue 'population ageing is a major global trend that is transforming economics and societies around the world' p16.

At present this Ageing population situation is one where there are no 'off the shelf systemic' solutions, and no one 'institution', 'system' or group has taken responsibility either nationally, at Council or local level for addressing what is laid out below, some reasons for this are stated. The paper therefore finishes with some proposals for different levels of our systems, including Housing Planning Departments and communities to take up this challenge and we recommend this is attempted during the next 5 years to meet the time requirements for a review of the Ashbury Neighbourhood Plan. The intention in the review process would include being able to state the specific age related demand for land use and development against actual identified amount and projection of need.

Background and context to the Ageing population profile

A variety of data sources and reports provide evidence for a range of the elements and challenges of an ageing population. Many of these will be drawn on to illustrate some of the causes, the impacts and some of the starter solutions already laid out.

As recently as September 2017, the Oxford Mail reported on some data and consequences for an ageing population raised as a warning by Oxfordshire's Director of Public Health (Public Health are now based in each County Local Authority). The following issues are extracted from that warning:

- Oxfordshire's growing and ageing population is at 'tipping point' with nearly 200,00 extra people predicted in the county by 2030
- The way services are run needs to change to prevent a crisis in peoples access to health and social care
- Predictions for the next 15 years show the number of people over the age of 65 will increase by 53% and those over the age of 85 by 96%
- The issue has been with us for the last decade
- The challenge of managing a growing elderly population is made even harder by a raft of other problems
- Crippling house prices are affecting recruitment in health and social care

Importantly for the way forward he finishes his warning with a 'calling for more joined-up thinking in housing development', stating that the focus needs to be on 'how people can live a healthier life in their community'. Further he calls for 'central government, organisations and residents themselves to come together ----, we have never been in this situation before which is why we do not have all the solutions to hand right away --- it is all about teamwork ---'.

This collective more whole systems way of working is a crucial element of the means to address the ways forward, required to address the issues and impacts briefly outlined in the next sections.

Ashbury Ageing Population

There are 4 main elements to strands of an ageing population in Ashbury, each creating a different set of needs at a number of different levels.

- Those currently older ageing (over 85), who have lived in the village most or all of their lives. Many have family in the village, nearby or within easy access. Many of these elderly live in single households and continue to live in what was the family home. None of these older ageing members have family members living in the same dwelling.
- 2. Those elderly now, 75 85, an increasing number, comprising many who have lived in the village most or all of their lives, some with family living locally, whilst for others family are now more scattered and like the above they continue to live in a larger dwelling
- 3. Those ageing 55 +, with increasingly less in numbers of those who have lived in Ashbury for all or most of their lives, fewer of these with family now living in the village or close by

4. Over the last few years an increasing number of those who at 55+ moved into Ashbury as a rural setting, have no family locally and are choosing to 'age' in a rural setting, many of whom having moved from an urban setting

The features of such an ageing population in Ashbury and the housing they currently occupy have been created by the following:

- Population living much longer, many older ageing living to 100, many at 80+ live in single households
 - Those at 65+ may also be caring for an elderly parent or other ageing relative, this alongside the increasing trend for those retired to have grandchildren caretaking responsibilities. These are often actions outside of Ashbury
- Trends in rural settings over the last 30 years which have led to higher percentages of older residents include:
 - Movement out: Children of family living in the village moved out of/leave village to find employment (as the local farming and other practices use increasing levels of technology and reduce the need for human input/employment)
 - House occupation has moved from multiple generation and large numbers of occupants per dwelling to single generation and smaller numbers living in one dwelling
 - Having moved out of the family house in the rural setting, the process to move back in has become increasingly difficult because there are less or no affordable housing options available for this younger adult, young family population
 - Some younger population members having moved away choose not to return to a rural setting: Village facilities for younger population are considered less than those available in urban areas
 - Movement in: 'middle age' and 'older' often with no family close by have chosen to move from urban to a rural setting in large numbers
 - This has helped fuel the increase in rural house prices and the sorts of availability of properties whether renovated, developed or new build
 - In many rural settings, though not in Ashbury many for sale properties have been bought by second home owners, also for holiday let purposes
 - New builds have often been for larger sized properties at unaffordable prices for younger ex village residents to purchase

It is noted there is 1 privately owned single storey housing stock in Ashbury, 8 owned by the Council and managed by a Housing Association and the only 2 bedroomed accommodation is small in numbers and that is owned and provided by a Social Housing Association.

Essentially Ashbury like many rural communities is significantly less 'self- contained' when compared to rural life even 30 years ago. For example

• previously a GP from the Lambourn surgery held a regular surgery in the village, he was well liked, so many of the community at that time had registered at this surgery, though relied on the village visit(s) as many had no transport of their own. This presents issues for the present day for those now ageing and elderly who continue to be registered at this practice, as there is a *very* limited bus service to Lambourn and GP practice is such that home visits are much less on offer.

- The Post office is now a visiting service
- The village had a range of shops including a bakers

Impacts of the above for Ashbury

The current impacts include:

- Reduction of intergenerational population mix
 - Isolated locations with little opportunity for intergenerational exchange, learning, role modelling, legacy work
- Reduced incentives for younger people and families to move back or into to a rural setting (lack of local employment, lack of affordable housing, lack of home business working facilities, lack of regular and connecting transport facilities)
- No structured neighbourhood 'care' system available where family is not in the village
 - No local Chiropody service (essential for ageing elderly population)
- Increasing fragility of current services and facilities in the village including the Primary School
- Increasing vulnerability of the older elderly and those living in single households and the previous family home (so size of property)
 - Increased levels of loneliness, aloness, mental health problems made visible by the development of a physical ailment, increase in the development of crisis situations (not only health related) increase in invisibility of any individual distress
 - o Isolation should driving cease and or no transport available
- Reduction of collective village alert system
- Insufficient transport links to health care and other services for the elderly and for work and social leisure activity for the younger
- Less incentive by those of younger generation to move back in to set up local businesses
- Reduction in any local workforce for any sort of 'in village' caring/support activities unless provided by the well ageing (if not caring for their grandchildren in another location or their own elderly parents in other settings around the country)
- No new build housing that is flexible to allow for use by demand in the population the elderly and the young
- No suitable housing available for downsizing for the elderly or for living comfortably if a single level accommodation is required so that the person can stay living in the village
 - Costs are associated with making structural changes to their current family house to address reduced mobility and capacities
- No housing stock in affordable price ranges for young people or young people with families
- Self- contained rural life a thing of the past
- No immediate 'off the shelf' solutions for individuals and or communities to put in place (there is a retirement centre complex in Letcombe Regis and or care homes in Swindon. Requires finances and removes them from their own rural community setting)

Alongside this there are changes in society regarding our expectations about our caring responsibilities for and to the elderly as well as for living arrangements in rural settings, so that for many we no longer live in intergenerational households. Dr. Phillip Lee Justice Minister (as cited by Laura Donolly in Telegraph paper Oct 2017) describes this living as of an 'atomised nation' which he argues is failing those in need – and notes there is more outsourcing of care.

The way forward

Collectively we are in unfamiliar and in parts unrecognised territory despite the fact that the issues we need to address have been charted and reported on since at least 2008, as the literature review undertaken for this piece attests to. It is clear that housing development options and build requirements are directly connected to the needs of the population. In this case the ageing and the young. These needs are the current housing 'demand' as all demographic data illustrates for at least the next decades.

The way forward then will include methods and processes to address a range of the causes and impacts from a collective perspective. It is worth returning to a range of some of the actions identified in the key reports reviewed for this paper for evidence of the presence and impact of an ageing population. They all have something to say about what the issues are that need addressing, the benefits of this and many identify actions required. Some of these are now listed below.

A key message is housing cannot be addressed in isolation. This is strongly voiced in many of the reports referenced here. Age UK (2010) is clear 'Districts and other agencies should consider both the quality of the neighbourhood as well as housing' p104. In the excellent Foresight Projects of future of an Ageing Population 2016, published by the Government Office for Science, they go further and in their summary the following is included:

- 1. The ageing population will change demand for housing. In part it is likely that more adaptable and specialised housing will be needed
- 2. Building suitable new homes and supporting the adaptation of the existing housing stock will be central as the population ages. It is also important that older people can move to a more appropriate sized home with ease
- 3. Housing should be considered in the context of the wider neighbourhood. Interventions that improve people's homes are less likely to be effective without similar improvements in the neighbourhood. Pages 56-7

Earlier in the report it notes poor quality housing for the elderly costs the NHS an estimated £2.5 billion per year and further that homes will be increasingly used as places of work and care. 'Appropriately designed housing that can adapt to peoples changing needs has a number of benefits. These benefits include reducing demand on health care services, enabling individuals to work more flexibly in later life --- Issues cannot be addressed in silos ' p7

UNFPA and HelpAge International (2012) say the following is needed:

- Ensuring contributions of those over 60 for an enabling environment
- Addressing diminishing mobility
- Providing affordable housing and that which is versatile

• Easily accessible transportation

They argue these will encourage ageing in place, are essential to maintain independence, facilitate social contact and permit the older person to remain active members of society.

The Rural Prospectus 2009 and the Age UK Oxfordshire report 2010 are keen to ensure that technology is used to best advances and this includes within the house build – 'an age friendly physical environment that promotes the development and use of innovations in technologies that encourage active ageing' adding a warning about just not capitalising enough on the opportunities technologies create 'telehealth care is a great win-win but there is a danger that we do not apply our imagination and energy to what it can do' AgeUK p47

For housing then there is an opportunity for some developers to develop as 'niche' expertise building for the elderly including how emerging technologies are built into the structure of the build.

It is equally important to recognise when developing ways forward that solutions take account of the distinct nature of a rural setting and recognition that the challenges for rural settings are different to those faced in urban settings (DEFRA 2013). Their report on rural Ageing research identifies in useful detail the general challenges of service delivery in rural communities. They include for example

- Lower population density impeding economies of scale, resulting in higher per capita unit costs for service delivery
- The penalty of distance the distance from providers involves higher travel costs, opportunity costs and unproductive time for staff

And recommend that solutions go beyond using price and focus more on community benefit drawing on the Social Value Act.

To complete this section one of the actions required within Ashbury parish will be to collate all the requirements and issues to address and to develop a 'vision for addressing an ageing population over the next 10 years'. As part of this there will be a need to identify a range of outcomes to work towards. For example this could include that any future housing development takes account of:

- the need to provide housing suitable for the 80+ population to live in with ease or to downsize to.
- to provide housing options that attract in the young and those with families into Ashbury and its rural setting to provide a more intergenerational community and as such allow us to maintain current facilities such as the school.

Recommendations

A key concern in much of the work reported at World, National and local levels relates to the lack of action to make the changes required from what has been very well documented as the challenges we face because of an ageing population. This is mostly because there is no one institution or political department. that is responsible for driving or leading a total agenda.

The Foresight report (2016) having been commissioned by just one Government department (Government Office for Science) notes in its conclusion 'no single department has overall responsibility to address all the challenges presented by the demographic shift faced by the

UK or to capitalise on the opportunities this presents. Rather the implications are spread across many departments' and equally that '--- Business and civil society can achieve things that government itself cannot' p101

Acting cooperatively is the way forward as echoed by AgeUK Oxfordshire in 2010. The Madrid Plan cited in the UNFPA and HelpAge International report recommends the 'older person must be full participants in the development process and also share in its benefits' p159.

It is with cooperation across a range of Institutions, services and systems that the following recommendations are made for Ashbury Parish to be party to. It is timely that the Government have just released the proposal for a national formula for calculating annual housing need. The 3 components include demographic baseline. The housing development needs of the elderly across Oxfordshire are imperative to include beyond just a 'numbers of houses to be built' approach.

1. Level 1

Oxfordshire Council and the Housing and Planning Departments could take up this baton and draw on their membership of the Rural Network to provide a supporting structure and membership of such a process. Membership should include for example:

- AgeUK Oxfordshire,
- Public Health,
- Housing Developers
- Transport systems
- Those working with a range of Digital Technologies
- NHS via CCG

And take advice from The Commission for Rural England.

What is clear is that while the problems and impacts are similar, solutions or the way they are configured for urban and rural settings are very likely to need to be different, so there will need to be sub strands to address urban and or rural settings

Rural England could be requested to take part in Level 1 and 2 and to seek funds to be used to generate the plan and actions for the way forward (although this is now and urgent)

Residents in Ashbury would be members of this group and feed in and back to Level 2 and Level 3 working

2. Level 2

Vale of White Horse would be a sub section of the above and connected to it for 2 way working, sharing and reporting. The Housing and Planning Department could hold the lead and bring other parties into the process. As most of the Vale is rural this could be its chief focus of attention.

Residents in Ashbury would be members of this group and feed into and back to any Neighbourhood Planning group review process in Ashbury and or the Parish Council (Parish Councils may be required to extend their remit as part of recognising the changing territory and nature of living in a rural parish with an ageing population)

3. Level 3

This would be Ashbury residents generated working group(s) It would important for them to define which parts of the territory they will commit to address and be fed by and feed into formally Level 1 and level 2 work.

There may be work that takes place across Level 1, 2 and 3. For example there will be other systems and institutions (such as the Church) that will wish to influence, generate and contribute to ways forward for addressing the impacts of an ageing population. Some satellite work would very much add value to the processes required.

Conclusion

It is imperative that collective action is taken in the immediate future to stem the force of the impacts of an ageing population for not only Ashbury and other rural settings but also in urban/city settings such as Oxford. As has been illustrated from the range of research reports and evidence cited in this paper, new problems in our demographic profile will be best served by different ways of working, this will include shifting the mind set of individual sector planning to collective action to deliver the outcomes now needed. Addressing quality of the neighbourhood as well as housing development is now the key to the way forward.

The content of this paper can act to steer that path and journey ahead.

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