Social care: need for and receipt of help

2

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Summary

- This chapter presents information about the need for and receipt of social care among adults aged 65 and over.
- Participants aged 65 and over were asked whether they needed help with a list of Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs). ADLs are activities relating to personal care and mobility about the home, and IADLs are further activities important to living independently.
- 23% of men and 33% of women aged 65 and over needed help with at least one ADL, and 22% and 35% respectively reported needing help with at least one IADL.
- Overall, 11% of men and 14% of women aged 65 and over had received help with at least one ADL in the last month, and 15% and 30% respectively had received help with at least one IADL.
- Both need for help and receipt of help increased with age. There was also variation across tertiles of equivalised household income, with greatest need and highest proportions receiving help in the lowest income tertile.
- 19% of men and 29% of women aged 65 and over had some unmet need with at least one ADL, and 13% and 16% respectively had some unmet need with at least one IADL.
- Among people who had received help with ADLs in the last month, most had received this from informal helpers[1] only (88% of men and 71% of women), rather than formal helpers only, or a combination of both. The picture was similar for IADLs.
- Help with ADLs was most frequently provided by a spouse or partner, followed by daughters and sons. Help with IADLs was most frequently given by a spouse or partner for men (47%) and a daughter for women (38%). Friends and neighbours were more likely to have provided help with IADLs than ADLs.
- The majority of those receiving help with ADLs or IADLs reported having received this kind of help for a year or more (84% of men and 85% of women).
- Information was collected about the patterns of care provided by formal and informal helpers. Spouses or partners mainly provided help every day, and a substantial proportion provided 20 or more hours a week (33% for men, 30% for women), while 30% and 39% respectively helped for one to nine hours per week. Most informal care was provided during the day time only (63% for men, 73% for women).
- Patterns of care provided by daughters to their mothers were different, reflecting the fact that many were not living with their parent. They were more likely to provide care once (25%) or 2-3 times per week (22%), to provide care for fewer than ten hours (68%), and mainly to provide day time care only (88%).
- Older people were asked whether they made use of a range of aids and equipment. An alarm to call for help, a grab rail or stair rail and a bath or shower seat were the most

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frequently mentioned. Women were more likely than men to use most types of equipment.

- All adults were asked about accessibility features of their homes, even if they did not currently use them. Among older adults, over bath and walk in showers were the most frequently mentioned features (and are not necessarily related to accessibility). Accessible parking or a drop off point and hand rails were also relatively common.
- The majority of people aged 65 and over did not currently use any form of mobility aid (80% of men and 69% of women). Walking sticks were the most commonly used overall. Mobility aids were used more as age increased, particularly among women, with 60% of women aged 85 and over using a walking stick, 30% a zimmer frame and 17% a manual wheelchair.

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2.1 Introduction

2.1.1 Background

Since 2011, coverage of the Health Survey for England (HSE) has been expanded to include a section on adult social care. The survey each year includes questions for older people (aged 65 and over) about their need for care, receipt of care and payment for care, and questions to all adults about their provision of informal care. These questions are now a core module of the survey, so that consistent data are collected and trends may be monitored in the longer term. In 2013, the module was more comprehensive, including questions on aids and equipment as well as greater detail about activities informal and formal providers helped with. This chapter provides findings about the need for, receipt of and patterns of social care among older adults.

2.1.2 Social care in England

Care and support enables people to do the everyday things that most take for granted: things like getting out of bed, getting dressed and going to work; cooking meals; seeing friends; caring for their families; and being part of the community.[2] More specifically, social care involves provision of help with personal care and domestic tasks to help people live as independently as possible. It affects the daily lives of several million people in England. Some 1.1 million received community-based care arranged by their local authority in 2012-2013[3] and at least a further 270,000 buy care privately.[4] While those who need care and support are of all ages, many are older people needing help because of problems associated with long-term physical or mental ill-health, disability or problems relating to old age[2]; of the 1.1 million who received community-based care, 0.7 million were aged 65 and over.[3]

A central aspect of the policies of successive governments has been to help people maintain their independence in their own homes for as long as possible. The availability of early, preventative interventions has been seen as a means of helping to reduce the need for more intensive levels of support or crisis interventions at a later stage.[2,5] However, both the previous and the current administrations have identified a range of long-standing issues related to the provision of social care, including a greater focus on reactive than preventative services; variations in levels and the quality of services; a lack of good information and advice; and a lack of coordination between health, housing and social care agencies.[2,5]

A number of factors have been seen as imposing further pressures on the demand for care services. These include the growth of the ageing population, other demographic changes such as changes in the birth rate, changes in family structures and migration between urban and rural areas, as well as changes in expectations.[6] In particular, the growth in the number of people with dementia is expected to exert substantial pressure on care services.[2,6] Both the previous and the current administrations have emphasised the importance of the personalisation of services, to help people take greater choice and control over the services they receive and stay as independent as long as possible.[2,7,8] An important aspect of this is the introduction of personal budgets to enable people to take charge of their care and support budget.

The current Coalition Government published *A vision for adult social care*[9] in 2010 and a White Paper *Caring for our future: reforming care and support*[2] in July 2012. The reforms to adult social care announced in this White Paper and enacted in the Care Act 2014[10] will have substantial impact on the assessment of care needs, determination of eligibility for care, financing, commissioning and provision of adult social services. The reforms include the introduction of national minimum eligibility criteria from April 2015 and care accounts associated with the life-time cap on care costs from April 2016. It is important in this context to have robust information on the patterns of care and duration of care received by older people (and younger adults). Data from the HSE on patterns and duration of community-based care received by older people in 2013 and 2014 will therefore provide valuable baseline information against which to assess the impact of the reforms.

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2.1.3 Aids and equipment

Equipment and home adaptations to aid daily living can be an important means to enable people with disabilities and frail older people to maintain their independence. The government has in recent years introduced initiatives to help older and disabled people to access relatively low-cost simple aids to daily living by establishing new models of assessment and delivery.[11] Recent research has suggested that assistive equipment and adaptations can have significant benefits in terms of improving individuals' quality of life and reducing the demand for health and social care services. For instance there is a strong evidence base around adaptive technologies and fall prevention.[12] However, as the authors note in their report, data on the relationship between equipment used by older people and the benefits they may produce is scarce. Consumer Focus[13] suggests that there is considerable uncertainty around the size of the market for equipment for older and disabled people; there is also a lack of good-quality publicly available data on the prices and numbers using such equipment, whether publicly or privately-funded.

In addition to policies to encourage adaptations to existing housing, the government has also promoted 'Lifetime Homes Standards' (with an emphasis on accessible and flexible accommodation) so that new-build housing will be able to accommodate the needs of an ageing population.[7]

2.1.4 Data on social care

Despite the importance of adult social care, data on social care are considerably more limited than data on other welfare state services such as health or social security. The Adult Social Care Survey collects information on user experience and outcomes from different groups of adult social care service users, and the most recent of these (carried out by the HSCIC in 2012/13) covered informal carers known to Local Authorities.[14,15] However, there has been a lack of recent survey data on the need for and receipt of social care, particularly in general household settings. Before the HSE data from 2011, the most recent national survey to cover provision of informal care was the 2009/10 Survey of Carers in Households,[16] updating the 2001/2 General Household Survey coverage of informal care providers.[17] The most recent to provide detail about receipt of community-based services by older people was the 2001/2 General Household Survey.[17]

Against this background, a module of questions was developed on social care for older people for use in population surveys and economic evaluations; within this module both shorter and longer versions are available.[18] The HSE now includes in its core the shorter version of the module developed during the study. The longer version is included in the HSE 2013, reported here, and a similar module was included in Wave 6 of the English Longitudinal Survey on Ageing (ELSA) for which data are now available.[19] The longer version is also included in ELSA Wave 7, and in the future further detailed data will become available.

It is important to remember that the HSE does not cover people in care homes, and that the module of questions about help needed, receipt of care and payments for care are asked of older people only. The questions asked about provision of informal care to others are asked of all adults; results are not covered in the 2013 report, but this topic has been explored in the 2011 and 2012 reports.[20,21]

2.2 Methods and definitions

2.2.1 Methods

Questionnaire design

Developed in 2009 and 2010, the module of social care questions was first used in the HSE 2011. The aim of the module is to deliver robust data on the need for and receipt of social care services, the characteristics of people providing and receiving informal care, and on people receiving formal care and support. More detailed information about the

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development of the questions is available in Volume 1, Chapter 5, of the 2011 report.[20]

An important aim in designing the module was to provide questions on need for and receipt of social care services among the population aged 65 and over in private households; it does not cover those living in care institutions. While social care may be needed by and provided for people of any age, older people constitute by far the largest group receiving care; and robust data are needed as policy is developed for the future funding of social care in old age. Information about social care for children or for adults aged under 65 would be valuable, but the sample size for the HSE (and most general population surveys) does not deliver sufficient numbers of social care recipients in these age groups for robust analyses, and separate development of questions specific to different social care client groups would be needed.

2.2.2 Definitions

Measuring need for and receipt of social care: ADLs and IADLs

The need for and receipt of social care is measured using a number of Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs). ADLs are activities relating to personal care and mobility about the home that are basic to daily living, and IADLs are activities which, while not fundamental to functioning, are important aspects of living independently. The ADLs and IADLs used in the HSE were carefully selected to represent a full range of key activities.[22] Table 2A shows which are included.

Table 2A

ADLs	IADLs
Having a bath or a shower	Doing routine housework or laundry
Using the toilet	Shopping for food
Getting up and down stairs	Getting out of the house
Getting around indoors	Doing paperwork or paying bills
Dressing or undressing	
Getting in and out of bed	
Washing face and hands	
Eating, including cutting up food	
Taking medicine	

The ADLs and IADLs are grouped for some questions and analyses into five categories:
1. Having a bath or shower
2. Using the toilet
3. Getting up and down stairs/getting around indoors
4. All other ADLs, summarised in tables as 'other personal activities'
5. All IADLs.

When all ADLs are grouped together they are categorised in tables as 'any personal activities'. When all IADLs are grouped together they are categorised as 'any instrumental activities'.

Need for help and unmet need

For each ADL and IADL, participants aged 65 and over were asked whether they could carry out the activity on their own, manage on their own with difficulty, only do the activity with help, or could not do it at all. The last three categories have been combined to identify those who have at least some difficulty, and therefore at least potentially need help with the activity. Where 'need' for help is discussed in the chapter, it refers to people in these three categories.

If participants indicated that they needed help for any ADL or IADL, they were then asked whether they had received any help in the last month. For the IADLs relating to shopping, housework and paperwork, participants were asked to exclude help which was provided simply because of the way household responsibilities were divided.[23]

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Unmet need has been identified where participants indicated that they needed help with a particular ADL or IADL (that is, could manage it with difficulty, could only do it with help, or could not do it at all), but had not received any help with it in the last month.

Formal and informal help

Participants who had received help in the last month with ADLs or IADLs were asked who had provided help; the ADLs and IADLs were grouped, as described above. They were shown two show cards, listing formal and informal carers as follows:

Table 2B

Formal carers	Informal carers
Home care worker/home help/personal assistant	Husband/wife/partner
Member of the reablement intermediate care staff team	Son/son-in-law
Occupational therapist/physiotherapist	Daughter/daughter-in-law
Voluntary helper	Grandchild/great grandchild
Warden/sheltered housing manager	Brother/sister (including in-laws)
Cleaner	Niece/nephew
Council's handyman	Mother/father (including in-laws)
Other	Other family member
	Friend
	Neighbour

Personal budgets and direct payments

During the development of the questionnaire it became apparent that people were not always familiar with either the process or the terminology used for social care payment systems. While there is likely to be increasing familiarity with the terms, the questions are designed to present the options independently, to avoid confusion.[24]

Personal budgets are an allocation of funding given to users after an assessment, which should be sufficient to meet their assessed needs. Users can either take their personal budget as a direct payment, or – while still choosing how their care needs are met and by whom – leave councils with the responsibility to commission the services. Alternatively, they can take some combination of the two. As a result, they provide an option for people who do not want to take on the responsibilities of a direct payment.

Direct payments[25] are cash payments given to service users in lieu of community care services (following an assessment of needs and allocation of a personal budget), and are intended to give users greater choice in their care. These are different from direct payments of social security benefits (although it seems likely that some confusion may exist for participants, despite detailed descriptions). Like commissioned care, they are means-tested and so assume that, in many cases, people will contribute to the cost of their care. The payment must be sufficient to enable the service user to purchase services to meet their assessed needs, and must be spent in accordance with the person's care plan.

2.2.3 The extended social care module for HSE 2013

HSE 2013 included the full social care module with additional questions to the 'core' short module which was included in 2011 and 2012. This section briefly summarises the additional material.

- ADLs and IADLs were divided into five groups (rather than three in the short module) for questions about the tasks for which formal or informal helpers provided help.
- A new set of questions on aids and equipment was included. This comprised household level questions about adaptations to the home as well as questions at an individual level about personal use of equipment and mobility aids.
- The precise number of hours of care provided by formal carers was included, rather than collecting banded information.
- A new question was included about the length of time for which the participant had been receiving care.
- Slightly more detail was asked about payments, including the amount paid.[26]

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2.3 Need for and receipt of care among older adults

2.3.1 Ability to perform ADLs/IADLs in the last month, by sex

The majority of people aged 65 and over reported that they were able to do ADLs on their own without help. Where people did have some problems, they were most likely to say that they could manage on their own *with difficulty*, and much smaller proportions said that they could only do these activities with help, or could not do them at all. These latter three groups have been combined to form a group who have at least some difficulty, and therefore at least potentially need help.

23% of men and 33% of women aged 65 and over needed help with at least one ADL, and 22% and 35% respectively reported needing help with at least one IADL.

Figure 2A shows the proportions of adults aged 65 and over who needed some help with individual ADLs, and Figure 2B shows the same information for IADLs. Overall women were more likely than men to report needing help for a number of tasks, though the pattern was similar for both sexes. The ADL for which help was most commonly needed was getting up and down the stairs (18% of men and 28% of women), followed by having a bath or shower

Figure 2A

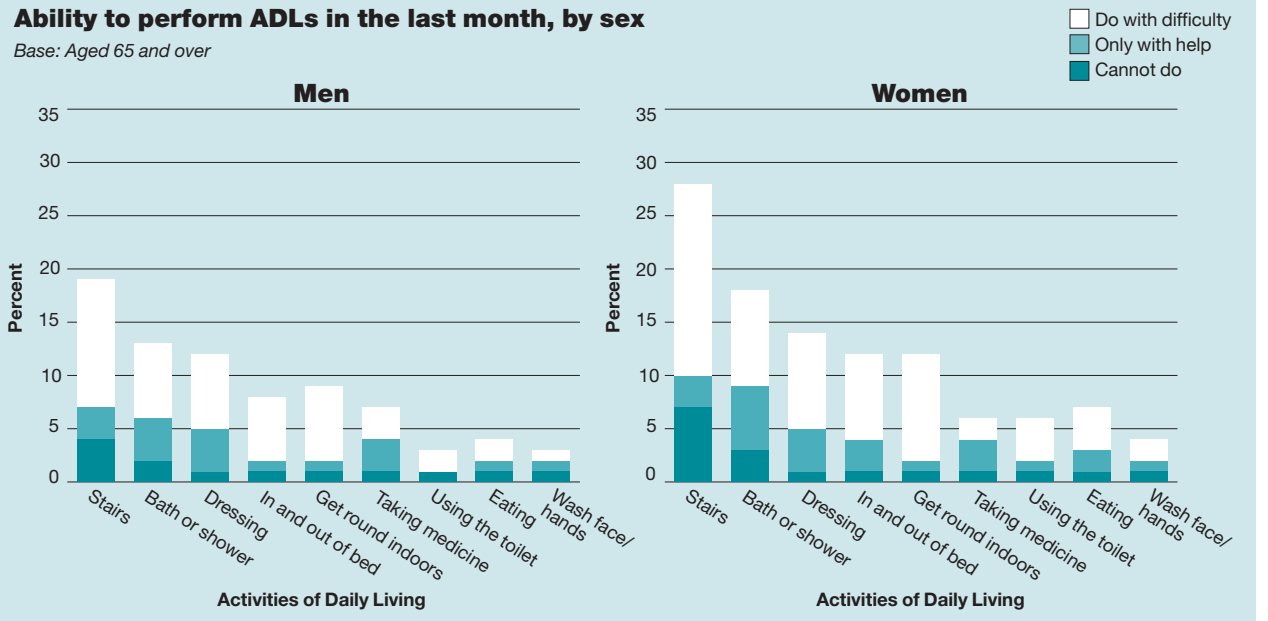
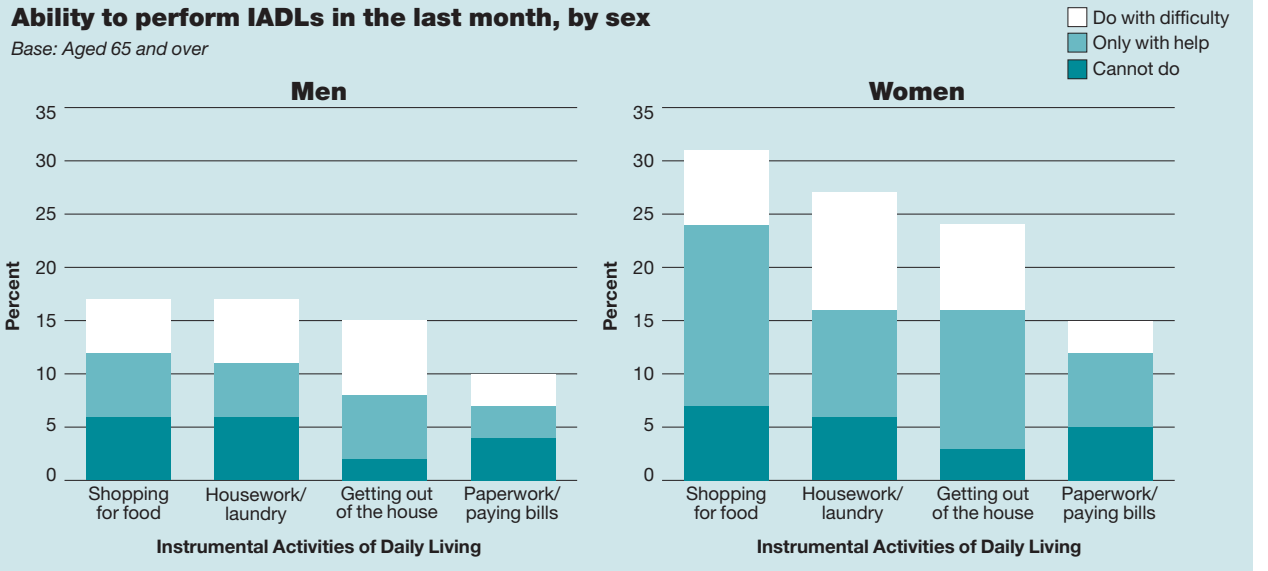


Figure 2B



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(12% and 18% respectively) and dressing and undressing (13% and 14% respectively. The tasks for which fewest needed help were washing face and hands, eating including cutting up food, and using the toilet.

More women than men needed help with each of the IADLs. While the proportion needing any help with ADLs was similar to the proportion needing any help with IADLs, when looking at individual activities the level was lower for most ADLs than for IADLs.

Table 2.1, 2.3 Figures 2A, 2B

2.3.2 Need for and receipt of help, by age

The proportion of people reporting that they needed help with tasks increased with age. Figure 2C shows the variation by age for the four ADLs for which people most frequently needed help. The age gradient was generally steeper for women than men, and was steepest for using the stairs or having a bath or shower. More than half of women and nearly two fifths of men aged 85 and over needed help with stairs (53% and 39% respectively), three times as many as among those aged 65-69.

There was a similar pattern for IADLs, with steep increases in need for help as age increased. 60% of women and 40% of men aged 85 and over reported needing help with shopping for food, compared with 17% and 12% respectively among those aged 65-69.

Overall, 11% of men and 14% of women aged 65 and over had received help with at least one ADL in the last month, and 15% and 30% respectively had received help with at least one IADL.

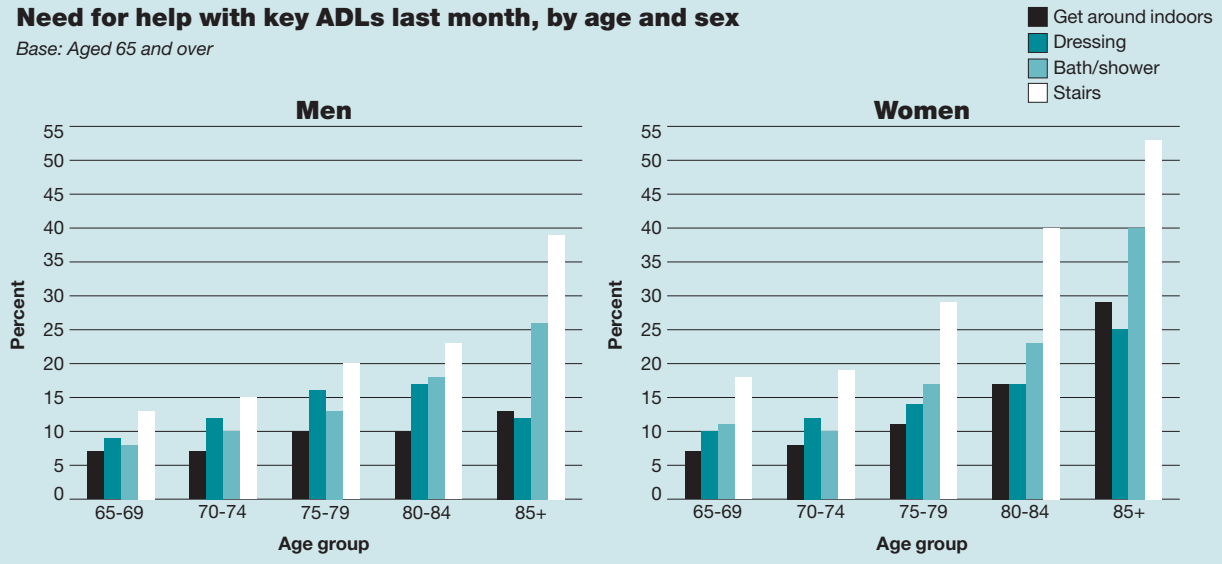
Figure 2D shows how these proportions varied by age. As with need for help, there was an increasing gradient with age for receipt of help. The proportions of men and women receiving help with ADLs were similar up to the age of 84, while women aged 85 and over were considerably more likely than men to receive help (31% of women and 20% of men). There was a different pattern for IADLs, with a steeper age gradient overall, and more women than men receiving help in each age group. 66% of women and 39% of men aged 85 and over had received help with at least one IADL.

Tables 2.2, 2.3, Figures 2C, 2D

Figure 2C

Need for help with key ADLs last month, by age and sex

Base: Aged 65 and over



2.3.3 Need for and receipt of help, by equivalised household income

Equivalised household income provides a measure which takes into account the number of people living in the household, and tertiles are used here to allow sufficiently robust analyses. The tertiles of equivalised income are based on the distribution of income for all households, and by definition approximately one third of the sample fall into each tertile. However, in this chapter, most of the analysis is restricted to adults aged 65 and over and it should be remembered that the distribution across tertiles is not equal for this age group.

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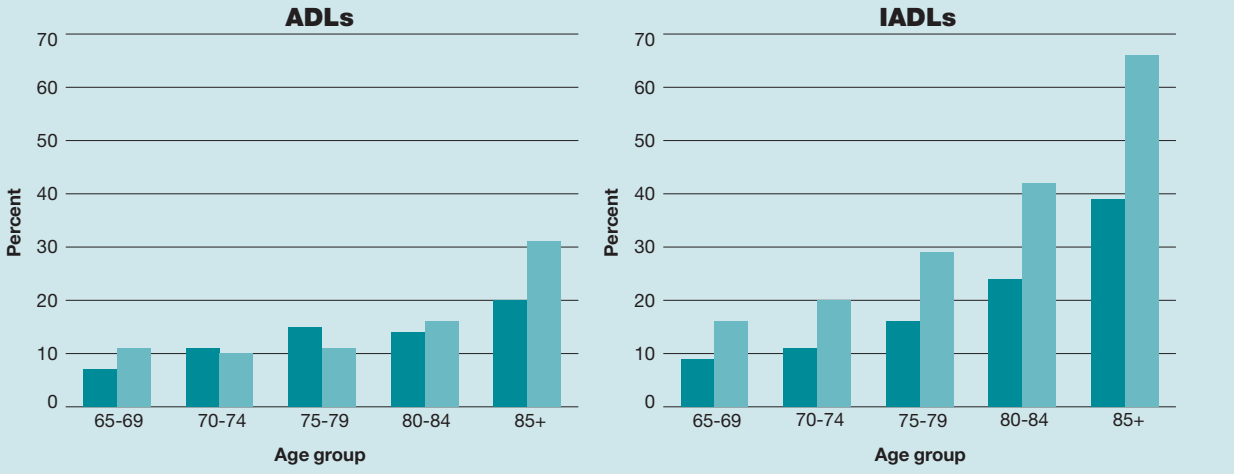
Figure 2D

Receipt of help with ADLs and IADLs in last month, by age and sex

Base: Aged 65 and over



Full details on the way that equivalised household income is derived can be found in the Glossary to this report, *Volume 2, Methods and documentation, Appendix C*.[27]

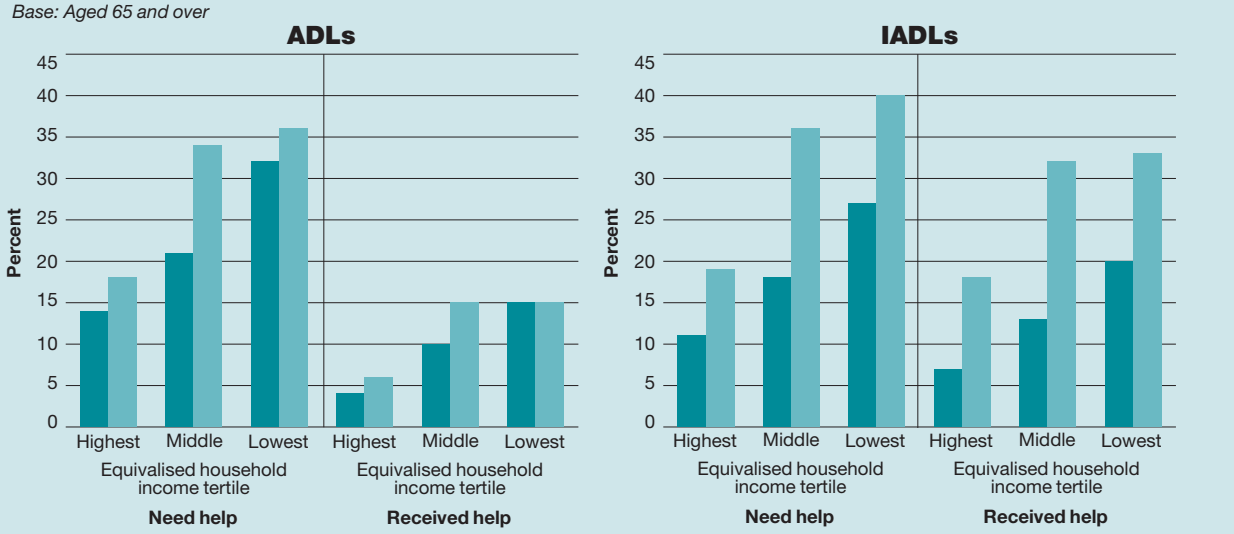
Figure 2E shows how both need for and receipt of care varied across income tertiles, for both ADLs and IADLs. There was a clear gradient in the proportion reporting a need for help with tasks, with greatest need in the lowest tertile. Correspondingly there was a similar gradient for receiving help, although the increase across tertiles for ADLs was much less steep than the increase in need.

Table 2.4, Figure 2E

Figure 2E

Need for and receipt of help with ADLs and IADLs in the last month, by equivalised household income and sex

Base: Aged 65 and over



2.3.4 Prevalence of unmet need (needing help and receiving none)

Unmet need has been defined as the proportion of adults aged 65 and over who reported being able to manage a particular ADL or IADL with difficulty, only with help, or not at all and who did not receive help with that activity in the last month. The assumption is those who have at least some difficulty with an activity may need help.

In summary, 19% of men and 29% of women aged 65 and over had some unmet need with at least one ADL, and 13% and 16% respectively had some unmet need with at least one IADL. Figure 2F shows how this varied by age group. As would be expected from the earlier data on need for and receipt of help, there was a more steeply increasing gradient of unmet

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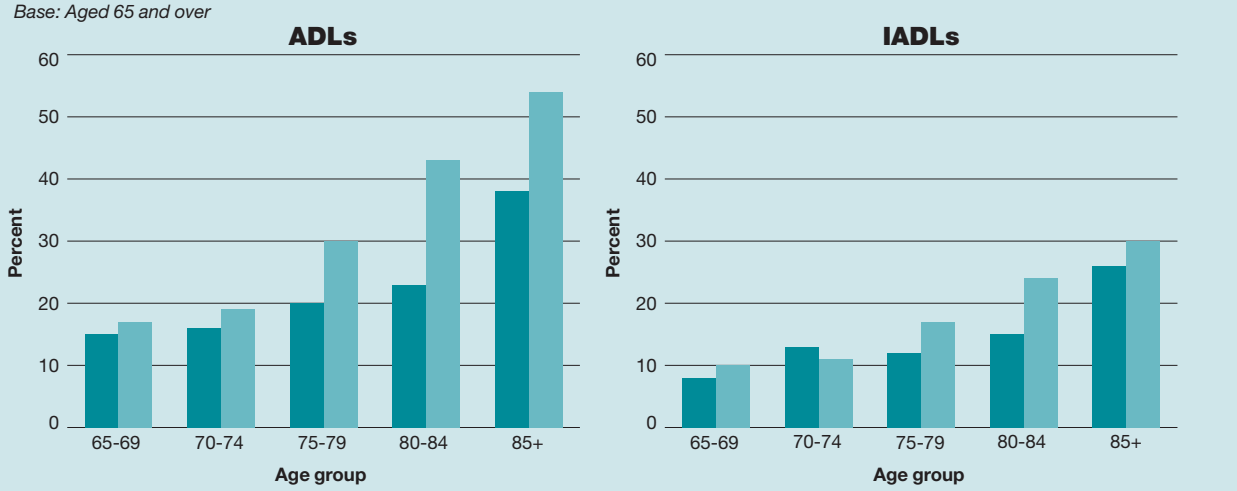
need with increasing age for ADLs than for IADLs. 38% of men and 54% of women aged 85 and over had some unmet need for ADLs.

The activity with the highest level of unmet need among older people was getting up and down stairs (14% of men and 23% of women overall, and rising to 31% and 42% respectively among those aged 85 and over). The lowest level of unmet need was for taking medicine and washing face and hands. **Table 2.5, Figure 2F**

Figure 2F

Unmet need: proportion who needed help with at least one ADL or IADL and received no help with it in the last month, by age and sex

Base: Aged 65 and over



2.3.5 Need for and receipt of care, 2011 to 2013

The proportion reporting that they needed help with ADLs and IADLs has remained broadly similar between 2011 and 2013. While the proportions were consistently slightly lower in 2013, the differences were not statistically significant. There was a similar picture for the proportions reporting receipt of care, though the proportion of men receiving care for both ADLs and IADLs was just significantly lower in 2013 than 2011. **Table 2.6**

2.4 Informal and formal helpers

Among people aged 65 and over who had received help in the last month, most had received this from informal helpers only, rather than formal helpers only, or a combination of both. Informal help only was highest for ADLs, with 88% of men and 71% of women who were receiving help mentioning this. Similarly, for IADLs, 80% of men and 76% of women had received help from informal helpers only. Figure 2G shows age patterns,[28] and it is clear that formal helpers, or both formal and informal, are more commonly involved as age increases. This reflects the increasing care needs among the oldest groups, and may also reflect the fact that older people are more likely to be widowed and to lose the support of their spouse.

Figure 2H shows which informal helpers had provided care, for ADLs and IADLs. The informal helper most frequently reported by those who had received help with ADLs in the last month was their spouse or partner (76% of men and 44% of women). This difference between men and women reflects the higher proportion of women who are widowed.[29] The next most commonly mentioned informal helpers were daughters and sons, with a higher proportion of women than men reporting help from a daughter (11% for men and 28% for women). Smaller proportions reported help from other family helpers, or friends and neighbours.

Help with IADLs was most frequently given by a spouse or partner for men (47%) and a daughter for women (38%). Friends and neighbours were more likely to have provided help with IADLs than ADLs.

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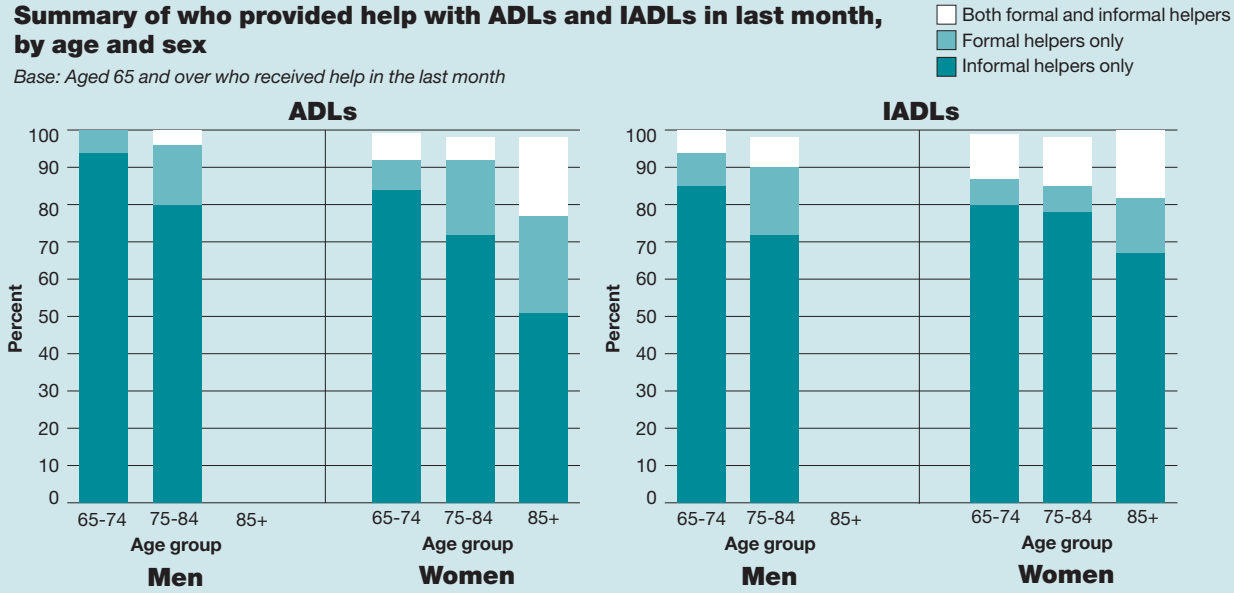
Figure 2G

Summary of who provided help with ADLs and IADLs in last month, by age and sex

Base: Aged 65 and over who received help in the last month



Note that data are not shown for men aged 85+ because of small base size.

Figure 2H

Which informal helpers provided help with at least one ADL or IADL in the last month, by sex

Base: Aged 65 and over who recieved help in the last month

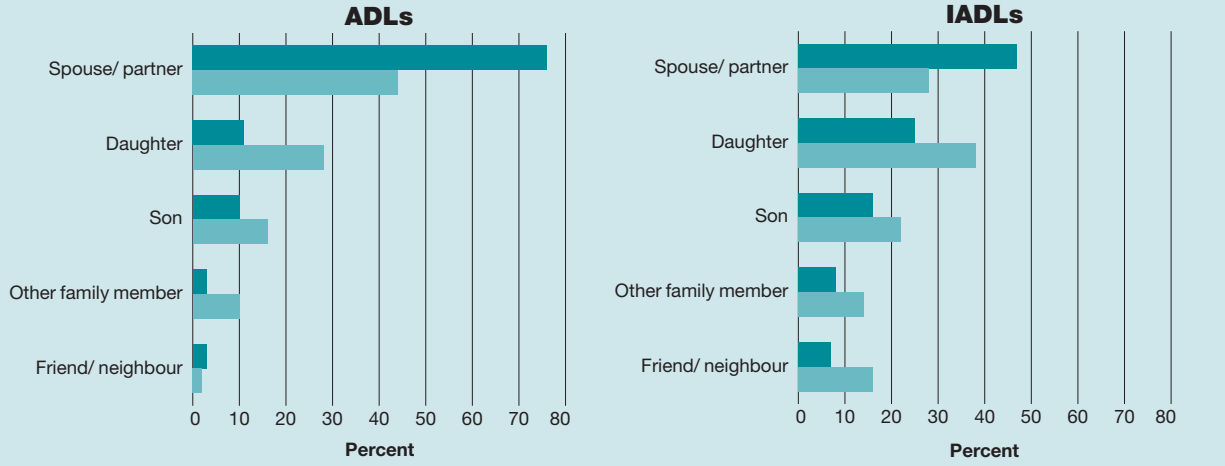
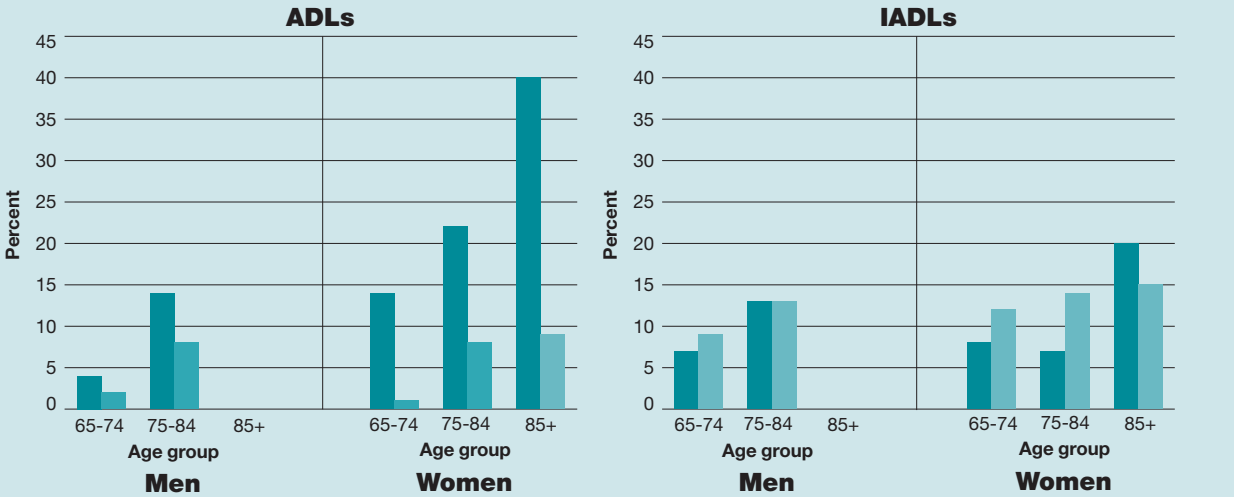


Figure 2I

Proportion of formal helpers that provided help with ADLs and IADLs in the last month, by age and sex

Base: Aged 65 and over who received help in the last month



No information shown for men aged 85+ because of small base sizes; results for women aged 85+ should also be interpreted with caution because of small bases.

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The formal helper most frequently reported as providing help with ADLs was a home care worker, as shown in Figure 2I. Among women, help from a home care worker was less frequently reported for IADLs than for ADLs. For both types of task, and particularly for ADLs, help from home care workers increased with increasing age.

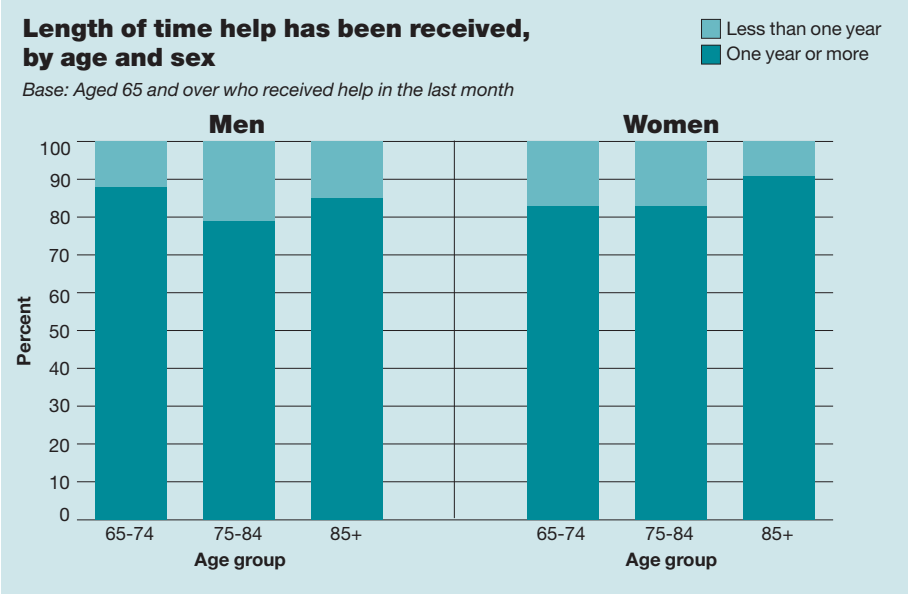
Tables 2.7-2.9, Figures 2G, 2H, 2I

2.5 Patterns of care

2.5.1 For how long this kind of care has been received

A new question was introduced for all older people receiving any help with ADLs or IADLs, to establish whether they had been receiving this kind of help for up to a year, or for a year or more. The majority reported having received help for a year or more (84% of men and 85% of women), as shown in Figure 2J. **Table 2.10, Figure 2J**

Figure 2J



2.5.2 Patterns of care in the last week from informal helpers

Those who received help with ADLs and IADLs were asked about how often they received help in the last week, how many hours of help they received, and whether the help covered day or night times. These questions were asked separately for each individual type of helper. Numbers responding for each type are small, and results are presented in the figures here for spouses/partners for both men and women, and for daughters for women (some results for sons are also shown in the tables at the end of the chapter). These should be interpreted with caution as margins of error are likely to be wide; base sizes are not sufficient for robust analysis of other types of informal helpers or formal helpers.

A small proportion did not have any help in the last week, although they had been helped in the last month.

How often in the last week

Figure 2K shows how often in the last week help was received from spouses/partners, and for women, from daughters. As might be expected, spouses most often provided help every day (83% for men, 73% for women), but the pattern was different for daughters. 41% provided daily help, while a quarter provided help once a week, and almost as many helped two to three times (25% and 22% respectively).

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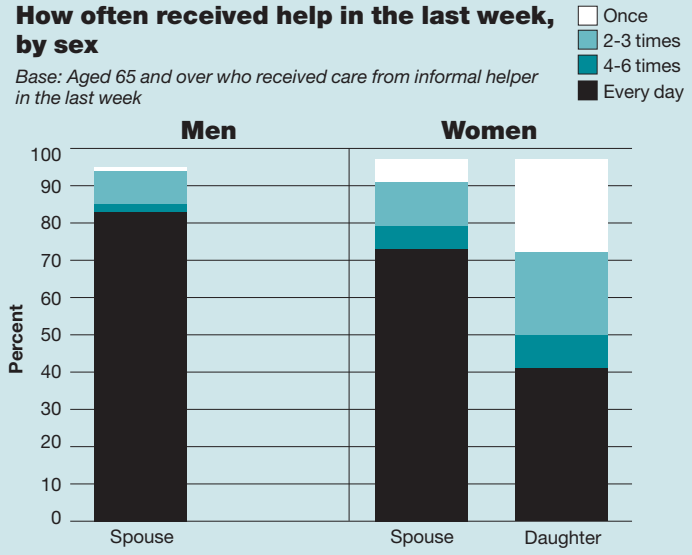
Figure 2K

How often received help in the last week, by sex

Base: Aged 65 and over who received care from informal helper in the last week



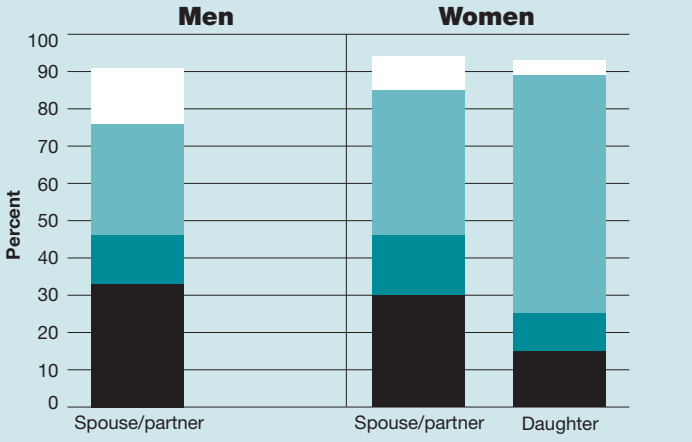
Number of hours

Reported numbers of hours of care provided by spouses in the last week were similar for both men and women, as shown in Figure 2L. The largest categories were for providing care for 20 or more hours, or for one to nine hours in each case. Relatively few provided care for less than an hour a week. The pattern was again different for daughters (who may often be non-resident), with just under two thirds (64%) of them providing one to nine hours of care a week.

Figure 2L

Number of hours of help in the last week from informal helper, by sex

Base: Aged 65 and over who received care from informal helper in the last week



Day time and night time care

Most informal care was provided during the day time (see Figure 2M), though for 35% of men and 27% of women receiving care their spouse/partner provided both day and night time care. Very few spouses provided night time care only. For women receiving care from daughters, only a small proportion received both day and night time care (12%).

Virtually all care provided by spouses/partners was during both weekdays and weekends (98% of men and 91% of women receiving care reported this). Two thirds of those who were helped by daughters reported that this covered both weekdays and weekends (65%), and most of the remainder reported weekdays only (27%). **Tables 2.11-2.13, Figures 2K, 2L, 2M**

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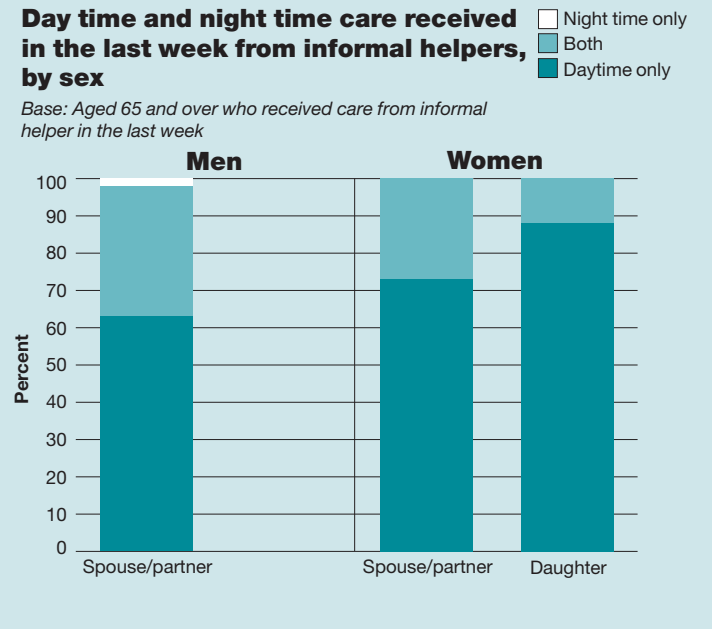
Figure 2M



2.6 Receipt of direct payments and personal budgets

Older people who were receiving formal care, or at least 20 hours per week of informal care, were asked whether they received a personal budget or direct payments. Note that only small numbers of older people were eligible for these questions, so base sizes are small, particularly for men receiving formal care, and the results should be treated as indicative. The majority reported that they did not receive either Personal Budgets or Direct Payments (83% overall and 76% of those receiving formal care among men, and 81% and 74% respectively among women). In the vast majority of these cases no local authority involvement was reported in arranging care.

Around one in ten reported that they had a Personal Budget (9% of men, 8% of women overall, 11% and 12% respectively of those receiving formal care). However, larger proportions reported that they received Direct Payments (14-20%), and these figures are higher than the estimates of take up in most local authorities. It therefore seems that, despite careful definition during questions, some confusion remains about the names for social care funding. Some participants may have confused Direct Payments for social care with direct payment of benefits into their bank accounts, as the official descriptions are almost identical. **Table 2.14**

2.7 Aids and equipment

2.7.1 Household features available (whether used or not)

All households were asked about features available in their home that would improve accessibility and flexibility for frail or older people or those with disabilities. This question was therefore about availability of the features, even if they were not currently used by the residents. Figure 2N shows, among older people aged 65 and over, how many had the features in their home; and Figure 2O compares the totals for men aged 65 and over with those aged 16-64. (This comparison is not shown for women as the results are very similar).

Among older people, over bath and walk in showers were the most frequently mentioned features (42% and 35% respectively for men, 37% and 35% for women), although it should be noted that these features and are not necessarily related to accessibility. Other features that were relatively common were accessible parking or a drop off point (32% for both men

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and women) , and hand rails (24% and 32% respectively). Hand rails were the only feature to be mentioned by a significantly greater proportion of women than men, with other features at similar levels for both sexes. Other features were much less common (see Figure 2N).

Comparing features reported by older people and the rest of the population, walk in showers, accessible parking and hand rails were much more likely to be found in the homes of older than younger adults (see Figure 2O). **Table 2.15, Figure 2N, 2O**

Figure 2N

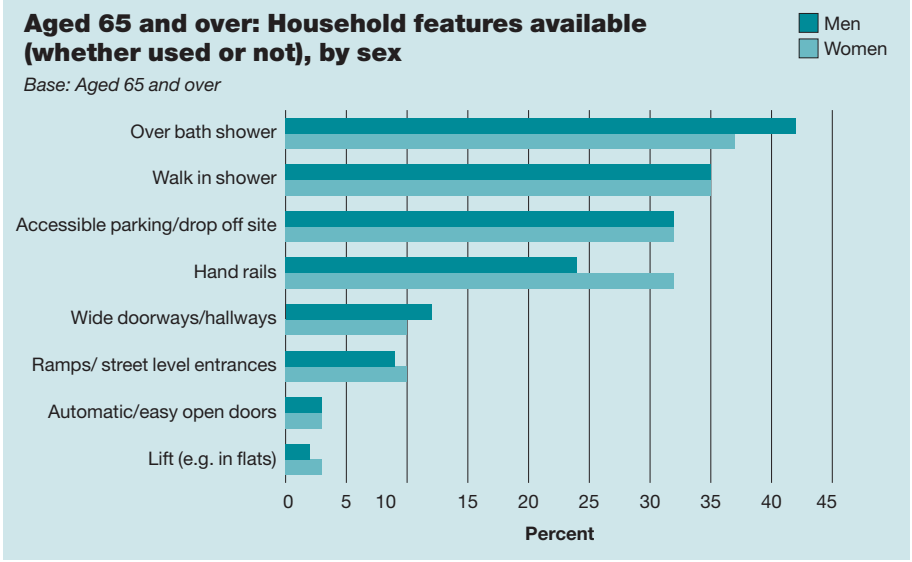
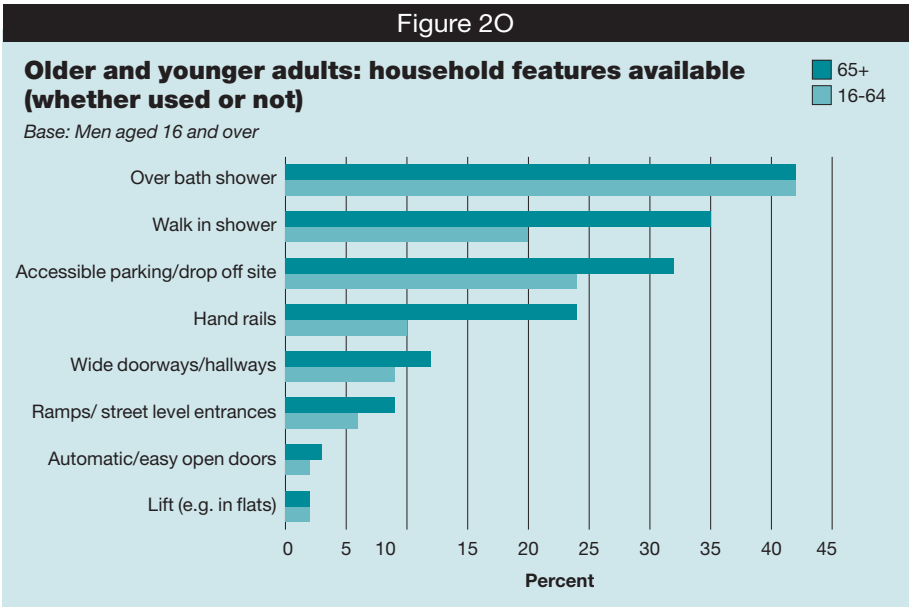


Figure 2O



2.7.2 Aids and equipment for participant's use

Older people were asked whether they made use of a range of aids and equipment, and Figure 2P shows the proportion reporting their use. An alarm to call for help, a grab rail or stair rail and a bath or shower seat were the most frequently mentioned, with women significantly more likely than men to have each of these. Women were also significantly more likely than men to report toilet equipment or a commode, and outdoor railing. Overall, fewer women than men said they had none of these aids or equipment (70% and 80% respectively). **Table 2.16, Figure 2P**

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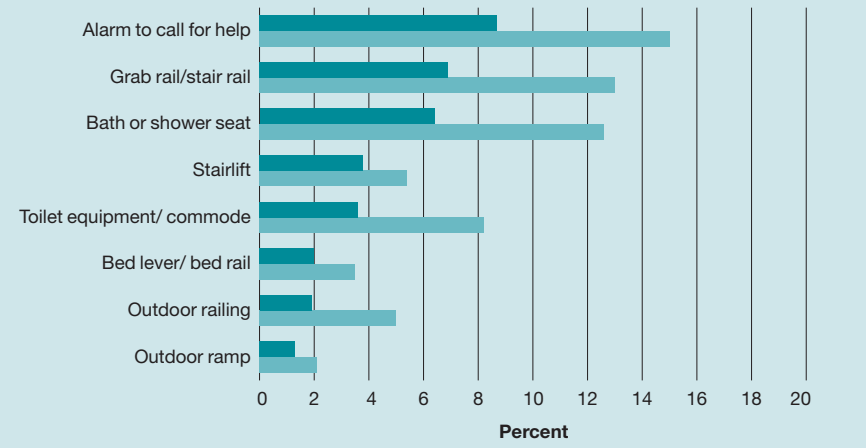
Figure 2P

Aids and equipment for participant's use, by age and sex

Base: Aged 65 and over



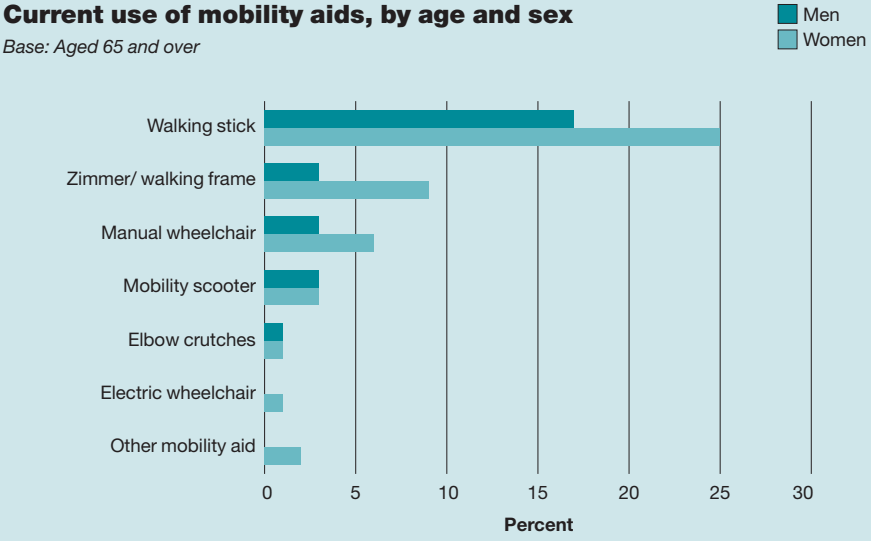
2.7.3 Current use of mobility aids

The majority of people aged 65 and over did not currently use any form of mobility aid (80% of men and 69% of women). Of the mobility aids listed, the one most commonly reported was a walking stick (17% of men and 25% of women), and other mobility aids were used by fewer than 10% overall (see Figure 2Q). However, use of such aids increased with age, particularly among women. Thus among women aged 85 and over, 60% used a walking stick, 30% a zimmer frame and 17% a manual wheelchair (compared with 41%, 12% and 10% respectively among men of this age). **Table 2.17, Figure 2Q**

Figure 2Q

Current use of mobility aids, by age and sex

Base: Aged 65 and over



2.7.4 Current accommodation type

Older people were asked whether they lived in warden maintained or sheltered housing, 'housing with care', in residential care, or other supported housing.[30] A small proportion mentioned living in warden-maintained or sheltered housing (4% of both men and women). As Figure 2R shows, this proportion increased with age among women, rising to 11% of those aged 85 and over, although there was not a similar increase with age for men.

Since the HSE is conducted among the population in private homes, it is to be expected that virtually none of the participants said they lived in residential care. Similarly, very few mentioned other forms of very sheltered or supported housing. **Table 2.18, Figure 2R**

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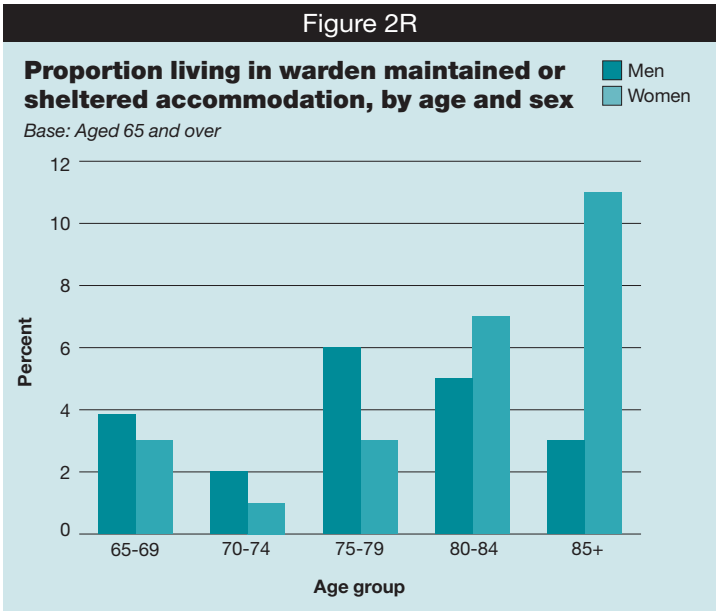
Figure 2R



2.8 Discussion

Since 2011, the HSE has included a module of questions covering the need for and receipt of social care by older people, and the provision of informal care by all adults. A shorter version of the module is now part of the core of the HSE, but a longer version has also been developed, and was included for the first time in 2013. The longer version covers aids and equipment and more detailed information about help received from informal and formal providers.

Need for and receipt of help

Just under a quarter of older men and a third of older women needed help with at least one ADL (23% of men and 33% of women), and slightly under half of these received at least some help (11% of men and 14% of women). However, the majority of older people who needed some kind of help with ADLs had at least some unmet need (19% of men and 29% of women), even if they were also receiving help with other ADLs. The definition of 'need' for help in this analysis includes people who were able to do tasks on their own with difficulty, as well as those who could not do the task without help or were not able to do it at all; and being able to do something with difficulty was more common than the other two categories. Therefore unmet need in this context may include cases where older people were just managing to achieve many of the tasks. However, with increasing age and frailty, their ability to do so is likely to diminish.

The picture was slightly different for IADLs, particularly among women. The proportions of older men and women who reported needing help with at least one IADL (22% and 35% respectively) were similar to those needing help with ADLs. However, a higher proportion received at least some help with IADLs (15% of men and 30% of women), and fewer reported unmet need (13% and 16% respectively).

Patterns of care

The majority of older people who received help with ADLs or IADLs received help from informal helpers, but the people in older age groups were more likely to receive help from formal helpers or a combination of formal and informal helpers. Men were most likely to receive informal help with ADLs and IADLs from their spouse or partner. Women were also most likely to receive informal help with ADLs from their spouse or partner, but were more likely than men to receive help from a daughter or a son, and were more likely to receive help with IADLs from a daughter than from their spouse or partner.

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Both men and women were more likely to have received help from friends and neighbours with IADLs than with ADLs. Most informal care was provided during the day time, but spouses and partners provided both day and night time care for around a third of men and a quarter of women receiving care.

Most formal help with ADLs was provided by home care workers, whereas other formal helpers were more involved in providing help with IADLs, especially for women.

Household design features

In terms of household design features, older adults were more likely than younger adults to be living in properties with a walk-in shower, accessible parking and hand rails. Older women had more mobility problems than older men, and more older women than older men reported that they lived in properties with hand rails. However, other household features that would help improve accessibility were available to relatively few participants, and there was no difference between men and women in the level of availability of the features examined.

Adaptations to existing housing to facilitate daily living can help older people to maintain their independence living at home, and a number of government initiatives have encouraged this. There is also an emphasis on promoting accessible and flexible accommodation in new build housing.[7] The government's 2011 strategy document *Laying the Foundations: A Housing Strategy for England*[31] indicated that new housing developments need to make suitable provision for the ageing population in the long term. However, there is no national regulation to enforce this strategy, and there are tensions between the need to provide low cost housing and to invest in structures meeting lifetime need.

In *A vision for adult social care*,[9] and more recently in the *3-Million Lives* campaign,[32] the government has demonstrated a particular interest in promoting assisted living through the development of telecare and telehealth services. Take-up of telecare in England could be higher: a recent study suggests that use of telecare could potentially reach twice its current level of prevalence in the older population.[33]

References and notes

1 Informal helpers include relatives and friends or neighbours.

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10 The Care Act 2014. www.legislation.gov.uk/ukpga/2014/23/contents/enacted

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12 Snell T, Fernandez JL et al. *Building a business case for investing in adaptive technologies in England*. Personal Social Services Unit, London, 2012. www.pssru.ac.uk/archive/pdf/dp2831.pdf

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18 The project *Developing Improved Survey Questions on Older People's Receipt of, and Payment for, Formal and Informal Care* was funded by the Nuffield Foundation and the Department of Health, and carried out by NatCen Social Research, the Personal Social Services Research Unit (PSSRU) at the London School of Economics and University of Kent, and the Health Economics Group at the University of East Anglia. A description of the study outcomes and documentation can be found at www.natcen.ac.uk/our-research/research/social-care-questions-for-over-65s/

19 www.ifs.org.uk/ELSA

20 Craig R, Mindell J (eds). *Health Survey for England 2011: Volume 1 Health, Social Care and Lifestyles*. Health and Social Care Information Centre, Leeds, 2012. www.hscic.gov.uk/pubs/hse11report

21 Craig R, Mindell J (eds). *Health Survey for England 2012: Volume 1 Health, Social Care and Lifestyles*. Health and Social Care Information Centre, Leeds, 2013. www.hscic.gov.uk/pubs/hse2012

22 The ADLs and IADLs included in the social care module allow calculation of the Barthel Index, a measure of ability to live independently at home for older people. This is not included in the 2013 report, but has been covered in the 2011 and 2012 HSE reports.

23 There was a change to the routing of these questions from 2013 onwards. Originally, all aged 65 and over were asked whether they needed help with each ADL and IADL, and then regardless of their answers they were asked whether they had received help for each. Many participants had neither needed nor received help, and found the repeated questions onerous. Therefore the change in 2013 meant that only those who said they needed help with at least one ADL or IADL were asked about whether they had received help. Analysis indicated that only a very small number of participants who said they did not need help for any ADL or IADL had actually received any help, and this change therefore has a negligible impact on results.

24 The questions about Personal Budgets and Direct Payments were as follows:

Local authorities/council/social services offer different ways of arranging payment for people's care. This card describes some of these ways. Please look at the card and tell me whether either of these apply for the care you receive?

1 **Direct Payments** where the council gives you a payment to meet some or all of your social care needs. You can then choose how to spend the money. (This should not be confused with benefits paid directly into a bank account which may also be called direct payments.)

2 **The local authority, council or social services manages the money** for you to meet all or some of your social care needs, and you may be able to choose which services to use.

3 Neither of these.

Do you have a Personal Budget, sometimes known as an Individual Budget? This is when the local authority/council/social services decides the amount or pot of money necessary to meet your social care needs. You can choose how to spend this money which can be used for a range of services, not just social care.

1 Yes

2 No

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25 Department of Health. *Direct Payments*. DH, London, 2009. http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/SocialCare/Socialcarereform/Personalisation/Directpayments/index.htm

26 Details about payment for care are not analysed in this chapter, as numbers of older people receiving and paying for care are small. These detailed questions have also been included in HSE 2014 and 2015, and analysis will be possible with more robust base sizes when these future years' data are combined.

27 www.hscic.gov.uk/pubs/hse2013

28 A small proportion of participants mentioned that they had received help in the last month, but did not identify any individual formal or informal helpers; therefore the bars in Figure 2G do not all sum to 100%.

29 See social care chapters in reports for HSE 2011 and 2012 (referenced in notes 21 and 22) for details of marital status among those aged 65 and over.

30 The scope of the HSE excludes those living in institutions (such as those in nursing or residential homes) and it is not clear why a very small number of individuals aged 85 and over mentioned that they lived in residential accommodation. It is possible that they were people about to move from their own home to a residential setting.

31 HM Government. *Laying the Foundations: A Housing Strategy for England*. Department for Communities and Local Government, London, 2011. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/7532/2033676.pdf

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Tables

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Notes on the tables

1. The group on which the figures in the table are based is stated at the upper left corner of the table.
2. The data in most tables have been weighted. See Volume 2, Chapter 7 of this report for more detail. Both unweighted and weighted sample sizes are shown at the foot of each table.
3. Apart from tables showing age breakdowns, data have been age-standardised to allow comparisons between groups after adjusting for the effects of any differences in their age distributions. See Volume 2, Chapter 8.4 of this report for more detail.
4. The following conventions have been used in tables:
   - no observations (zero value)
   0 non-zero values of less than 0.5% and thus rounded to zero
   [ ] used to warn of small sample bases, if the unweighted base is less than 50. If a group's unweighted base is less than 30, data are normally not shown for that group.
5. Because of rounding, row or column percentages may not add exactly to 100%.
6. 'Missing values' occur for several reasons, including refusal or inability to answer a particular question; refusal to co-operate in an entire section of the survey (such as the nurse visit or a self-completion questionnaire); and cases where the question is not applicable to the participant. In general, missing values have been omitted from all tables and analyses.

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Table 2.1

Ability to perform ADLs/IADLs[a] in the last month, by sex

Aged 65 and over[b] *2013*

ADLs/IADLs[a]		Ability to perform ADL/IADL[c]				
		Can do without help	Can do with difficulty but manage on own	Can do only with help	Cannot do	Can do with difficulty/ only with help/ cannot do
Men						
ADLs						
Getting up and down stairs	%	82	12	3	4	18
Having a bath or a shower	%	88	7	4	2	12
Dressing or undressing	%	87	7	4	1	13
Getting in and out of bed	%	92	6	1	1	8
Getting around indoors	%	92	7	1	1	8
Taking medicine	%	93	3	3	1	7
Using the toilet	%	96	2	0	1	4
Eating, including cutting up food	%	95	2	1	1	5
Washing face and hands	%	97	1	1	1	3
IADLs						
Shopping for food[d]	%	83	5	6	6	17
Doing routine housework or laundry[d]	%	83	6	5	6	17
Getting out of the house	%	86	7	6	2	14
Doing paperwork or paying bills[d]	%	90	3	3	4	10
Women						
ADLs						
Getting up and down stairs	%	72	18	3	7	28
Having a bath or a shower	%	82	9	6	3	18
Dressing or undressing	%	86	9	4	1	14
Getting in and out of bed	%	88	8	3	1	12
Getting around indoors	%	88	10	1	1	12
Taking medicine	%	93	2	3	1	7
Using the toilet	%	94	4	1	1	6
Eating, including cutting up food	%	94	4	2	1	6
Washing face and hands	%	96	2	1	1	4
IADLs						
Shopping for food[d]	%	70	7	17	7	30
Doing routine housework or laundry[d]	%	73	11	10	6	27
Getting out of the house	%	77	8	13	3	23
Doing paperwork or paying bills[d]	%	86	3	7	5	14

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living.
[b] Bases for getting up and down stairs are:
Unweighted: Men 1054 Women 1183
Weighted: Men 821 Women 988
Bases for other ADLs/IADLs vary but are of similar magnitude.
[c] This table presents row percentages.
[d] Excluding help because of the way household responsibilities are divided.

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Table 2.2

ADLs/ IADLs[a] for which help was needed and received in the last month, by age and sex

Aged 65 and over *2013*

ADLs/IADLs[a]	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
ADLs						
Getting up and down stairs						
Need help[b]	13	15	20	23	39	18
Received help last month[c]	2	4	7	5	7	5
Having a bath or a shower						
Need help	8	10	13	18	26	12
Received help last month	4	5	8	8	8	6
Dressing or undressing						
Need help	9	12	16	17	12	13
Received help last month	4	8	9	10	7	7
Getting in and out of bed						
Need help	8	7	11	9	8	8
Received help last month	4	4	6	6	1	4
Getting around indoors						
Need help	7	7	10	10	13	8
Received help last month	1	2	4	3	6	3
Taking medicine						
Need help	4	6	7	11	12	7
Received help last month	2	4	5	7	10	5
Using the toilet						
Need help	3	2	4	6	5	4
Received help last month	-	0	1	3	1	1
Eating, including cutting up food						
Need help	5	2	5	6	7	5
Received help last month	2	2	1	3	4	2
Washing face and hands						
Need help	4	2	2	4	2	3
Received help last month	0	2	2	2	-	1
IADLs						
Shopping for food[d]						
Need help	12	14	18	21	40	17
Received help last month	6	8	12	14	29	11
Doing routine housework or laundry[d]						
Need help	9	14	18	24	41	17
Received help last month	5	8	11	19	29	11
Getting out of the house						
Need help	10	11	16	17	34	14
Received help last month	6	7	9	10	20	9
Doing paperwork or paying bills[d]						
Need help	7	7	11	12	24	10
Received help last month	4	5	6	8	20	6
Bases (unweighted)[e]						
Men	*359*	*256*	*210*	*138*	*90*	*1053*
Bases (weighted)[e]						
Men	*279*	*199*	*162*	*111*	*69*	*820*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living.

[b] 'Needed help' includes those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it.

[c] Note that those who received help in the last month may not be the same people as those that need help. See Table 2.5 for summary of those needing help that did not receive help.

[d] Excluding help because of the way household responsibilities are divided.

[e] Bases shown here are for getting up and down stairs. Bases for other ADLs/IADLs vary but are of similar magnitude.

Continued…

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Table 2.2 continued

Aged 65 and over — *2013*

ADLs/IADLs[a]	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Women						
ADLs						
Getting up and down stairs						
Need help[b]	18	19	29	40	53	28
Received help last month[c]	7	4	4	6	11	6
Having a bath or a shower						
Need help	11	10	17	23	40	18
Received help last month	6	5	4	8	15	7
Dressing or undressing						
Need help	10	12	14	17	25	14
Received help last month	6	7	5	5	15	7
Getting in and out of bed						
Need help	9	8	13	12	19	12
Received help last month	4	4	4	6	9	5
Getting around indoors						
Need help	7	8	11	17	29	12
Received help last month	5	2	2	3	12	4
Taking medicine						
Need help	3	3	6	8	19	7
Received help last month	3	3	5	5	15	5
Using the toilet						
Need help	5	4	5	8	13	6
Received help last month	1	2	1	2	5	2
Eating, including cutting up food						
Need help	3	5	6	7	14	6
Received help last month	3	2	2	2	6	3
Washing face and hands						
Need help	3	2	5	5	9	4
Received help last month	2	2	1	4	5	2
IADLs						
Shopping for foodd[d]						
Need help	17	21	31	43	60	30
Received help last month	14	17	26	38	55	26
Doing routine housework or laundry[d]						
Need help	17	18	27	37	55	27
Received help last month	11	12	19	30	43	20
Getting out of the house						
Need help	12	14	22	37	52	23
Received help last month	8	10	15	24	39	16
Doing paperwork or paying bills[d]						
Need help	6	8	12	21	41	14
Received help last month	4	6	8	18	34	11
Bases (unweighted)[e]						
Women	*361*	*291*	*225*	*161*	*144*	*1182*
Bases (weighted)[e]						
Women	*292*	*224*	*200*	*141*	*129*	*987*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living.

[b] 'Needed help' includes those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it.

[c] Note that those who received help in the last month may not be the same people as those that need help. See Table 2.5 for summary of those needing help that did not receive help.

[d] Excluding help because of the way household responsibilities are divided.

[e] Bases shown here are for getting up and down stairs. Bases for other ADLs/IADLs vary but are of similar magnitude.

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Table 2.3

Summary of ADLs/ IADLs[a] for which help was needed and received in the last month, by age and sex

Aged 65 and over — *2013*

ADLs/IADLs[a]	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
ADLs						
Any personal activities						
Needed help[b]	16	20	27	29	45	23
Received help last month[c]	7	11	15	14	20	11
Having a bath or a shower						
Needed help	8	10	13	18	26	12
Received help last month	4	5	8	8	8	6
Using the toilet						
Needed help	3	2	4	6	5	4
Received help last month	-	0	1	3	1	1
Getting around indoors/ getting up and down stairs						
Needed help	14	15	20	23	39	19
Received help last month	3	4	7	5	10	5
Other personal activities[d]						
Needed help	11	14	19	22	23	16
Received help last month	6	10	12	13	15	10
IADLs						
Any instrumental activities[e]						
Needed help	15	18	23	29	49	22
Received help last month	9	11	16	24	39	15
Women						
ADLs						
Any personal activities						
Needed help	20	24	33	46	63	33
Received help last month	11	10	11	16	31	14
Having a bath or a shower						
Needed help	11	10	17	23	40	18
Received help last month	6	5	4	8	15	7
Using the toilet						
Needed help	5	4	5	8	13	6
Received help last month	1	2	1	2	5	2
Getting around indoors/ getting up and down stairs						
Needed help	18	19	29	40	54	28
Received help last month	7	4	5	7	16	7
Other personal activities[d]						
Needed help	13	15	18	25	39	20
Received help last month	7	8	8	11	24	10
IADLs						
Any instrumental activities[e]						
Needed help	19	25	35	50	70	35
Received help last month	16	20	29	42	66	30
Bases (unweighted)[f]						
Men	*360*	*256*	*210*	*138*	*90*	*1054*
Women	*361*	*290*	*225*	*162*	*144*	*1182*
Bases (weighted)[f]						
Men	*279*	*199*	*162*	*111*	*69*	*821*
Women	*292*	*224*	*200*	*142*	*129*	*987*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living.

[b] 'Needed help' includes those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it.

[c] Note that those who received help in the last month may not be the same people as those that need help. See Table 2.5 for summary of those needing help that did not receive help.

[d] Getting in and out of bed/washing face and hands/dressing or undressing/eating/taking the right amount of medicine at the right times.

[e] Excluding help because of the way household responsibilities are divided.

[f] Bases shown here are for needing help with any personal activities. Bases for other ADLs/IADLs vary but are of similar magnitude.

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Table 2.4

Summary of ADLs/ IADLs[a] for which help was needed and received in the last month (age-standardised), by equivalised household income and sex

Aged 65 and over *2013*

ADLs/IADLs[a]	Equivalised household income tertiles		
	Highest	Middle	Lowest
	%	%	%
Men			
ADLs			
Needed help[b]	14	21	32
Received help last month[c]	4	10	15
IADLs[d]			
Needed help	11	18	27
Received help last month	7	13	20
Women			
ADLs			
Needed help	18	34	36
Received help last month	6	15	15
IADLs[d]			
Needed help	19	36	40
Received help last month	18	32	33
Bases (unweighted)[e]			
Men	*168*	*320*	*298*
Women	*118*	*342*	*377*
Bases (weighted)[e]			
Men	*133*	*244*	*235*
Women	102	286	313

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[b] 'Needed help' includes those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it.

[c] Note that those who received help in the last month may not be the same people as those that need help. See Table 2.5 for summary of those needing help that did not receive help.

[d] Excluding help because of the way household responsibilities are divided.

[e] Bases shown here are for needing help with ADLs. The bases for IADLs vary but are of similar magnitude.

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Table 2.5

Unmet need: proportion who needed help with ADLs/IADLs,[a] and received no help with them in the last month, by age and sex

Aged 65 and over — *2013*

Needed help, and received no help in the last month[b]	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
ADLs						
Getting up and down stairs	11	11	13	18	31	14
Having a bath or a shower	5	5	6	11	19	7
Dressing or undressing	6	4	8	9	8	6
Getting in and out of bed	5	4	8	4	8	5
Getting around indoors	6	5	7	7	9	6
Taking medicine	2	2	3	6	3	3
Using the toilet	3	2	4	4	3	3
Eating, including cutting up food	3	1	4	3	4	3
Washing face and hands	4	0	2	2	2	2
Needed help with at least one ADL but did not receive help with it	*15*	*16*	*20*	*23*	*38*	*19*
IADLs[a]						
Shopping for food[c]	6	6	6	8	14	7
Doing routine housework or laundry[c]	4	8	7	5	13	7
Getting out of the house	5	5	7	7	16	6
Doing paperwork or paying bills[c]	4	2	5	4	4	4
Needed help with at least one IADL but did not receive help with it	*8*	*13*	*12*	*15*	*26*	*13*
Women						
ADLs						
Getting up and down stairs	12	16	25	34	42	23
Having a bath or a shower	6	5	13	15	26	11
Dressing or undressing	4	6	9	12	14	8
Getting in and out of bed	6	5	10	6	10	7
Getting around indoors	4	7	9	14	20	9
Taking medicine	1	1	2	2	5	2
Using the toilet	3	2	4	6	7	4
Eating, including cutting up food	1	3	4	6	9	4
Washing face and hands	2	1	4	1	5	2
Needed help with at least one ADL but did not receive help with it	*17*	*19*	*30*	*43*	*54*	*29*
IADLs						
Shopping for food[c]	4	4	7	6	7	5
Doing routine housework or laundry[c]	7	7	10	10	16	9
Getting out of the house	4	5	9	14	16	8
Doing paperwork or paying bills[c]	3	3	4	6	7	4
Needed help with at least one IADL but did not receive help with it	*10*	*11*	*17*	*24*	*30*	*16*
Bases (unweighted)[d]						
Men	*358*	*256*	*210*	*138*	*90*	*1052*
Women	*361*	*291*	*225*	*161*	*143*	*1181*
Bases (weighted)[d]						
Men	*278*	*199*	*162*	*111*	*69*	*819*
Women	292	224	200	141	128	986

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living.

[b] Defined as needing help (those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it) but not receiving any help in the last month for the relevant activity/activities.

[c] Excluding help because of the way household responsibilities are divided

[d] Bases shown here are for getting up and down stairs. Bases for other ADLs/IADLs vary but are of similar magnitude.

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Table 2.6

Summary of ADLs/IADLs[a] for which help was needed and received in the last month, 2011-2013, by age and sex

Aged 65 and over *2013*

ADLs/IADLs[a]	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
2011						
ADLs						
Needed help[b]	17	21	23	49	49	27
Received help last month[c]	10	11	15	27	23	15
IADLs[d]						
Needed help	15	21	23	43	55	26
Received help last month	10	14	16	37	47	19
2012						
ADLs						
Needed help[b]	18	26	28	36	54	27
Received help last month[c]	9	14	18	15	24	14
IADLs[d]						
Needed help	16	21	23	31	56	24
Received help last month	10	21	21	27	45	20
2013						
ADLs						
Needed help[b]	16	20	27	29	45	23
Received help last month[c]	7	11	15	14	20	11
IADLs[d]						
Needed help	15	18	23	29	49	22
Received help last month	9	11	16	24	39	15
Women						
2011						
ADLs						
Needed help[b]	19	28	37	55	62	36
Received help last month[c]	8	14	17	19	34	16
IADLs[d]						
Needed help	18	26	36	66	76	38
Received help last month	14	24	36	56	66	34
2012						
ADLs						
Needed help[b]	15	26	32	47	65	32
Received help last month[c]	8	13	17	18	35	16
IADLs[d]						
Needed help	13	27	32	49	71	33
Received help last month	11	26	28	43	65	30
2013						
ADLs						
Needed help[b]	20	24	33	46	63	33
Received help last month[c]	11	10	11	16	31	14
IADLs[d]						
Needed help	19	25	35	50	70	35
Received help last month	16	20	29	42	66	30

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[b] 'Needed help' includes those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it.

[c] Note that those who received help in the last month may not be the same people as those that need help. See Table 2.5 for summary of those needing help that did not receive help.

[d] Excluding help because of the way household responsibilities are divided.

[e] Bases shown here are for needing help with any personal activities. Bases for other ADLs/IADLs vary but are of similar magnitude.

Continued…

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Table 2.6 continued

Aged 65 and over *2013*

ADLs/IADLs[a]	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
Bases (unweighted)[e]						
Men 2011	*267*	*238*	*193*	*135*	*93*	*926*
Men 2012	*341*	*254*	*194*	*111*	*84*	*984*
Men 2013	*360*	*256*	*210*	*138*	*90*	*1054*
Women 2011	*342*	*268*	*228*	*175*	*134*	*1147*
Women 2012	*333*	*305*	*212*	*182*	*139*	*1171*
Women 2013	*361*	*290*	*225*	*162*	*144*	*1182*
Bases (weighted)[e]						
Men 2011	*228*	*207*	*148*	*102*	*74*	*758*
Men 2012	*248*	*180*	*155*	*89*	*68*	*740*
Men 2013	*279*	*199*	*162*	*111*	*69*	*821*
Women 2011	*267*	*209*	*189*	*146*	*112*	*923*
Women 2012	*239*	*225*	*169*	*147*	*111*	*890*
Women 2013	*292*	*224*	*200*	*142*	*129*	*987*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[b] 'Needed help' includes those who said they could do an activity but with difficulty, those who could only do it with help, and those who were unable to do it.

[c] Note that those who received help in the last month may not be the same people as those that need help. See Table 2.5 for summary of those needing help that did not receive help.

[d] Excluding help because of the way household responsibilities are divided.

[e] Bases shown here are for needing help with any personal activities. Bases for other ADLs/IADLs vary but are of similar magnitude.

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Table 2.7

Summary of who provided help with ADLs/IADLs[a,b] in the last month, by age and sex

Aged 65 and over and received help with ADLs/IADLs in the last month — *2013*

Who provided help	Age group			Total
	65-74	75-84	85+	
	%	%	%	%
Men				
ADLs[a]				
Informal helpers only	94	80	c	88
Formal helpers only	6	16	c	10
Both formal and informal helpers	-	4	c	2
None of those listed	-	-	c	-
IADLs[a,b]				
Informal helpers only	85	72	[85]	80
Formal helpers only	9	18	[3]	12
Both formal and informal helpers	6	8	[12]	8
None of those listed	-	1	[-]	1
Women				
ADLs[a]				
Informal helpers only	84	72	[51]	71
Formal helpers only	8	20	[26]	17
Both formal and informal helpers	7	6	[21]	11
None of those listed	-	2	[2]	1
IADLs[a,b]				
Informal helpers only	80	78	67	76
Formal helpers only	7	7	15	9
Both formal and informal helpers	12	13	18	14
None of those listed	-	2	-	1
Bases (unweighted)				
Men - ADLs	*52*	*50*	*17*	*119*
Men - IADLs	*56*	*67*	*34*	*157*
Women- ADLs	*68*	*51*	*43*	*162*
Women- IADLs	*112*	*127*	*89*	*328*
Bases (weighted)				
Men - ADLs	*41*	*39*	*14*	*94*
Men - IADLs	*45*	*50*	*27*	*121*
Women- ADLs	*53*	*45*	*40*	*138*
Women- IADLs	*90*	*113*	*81*	*284*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[b] Excluding help because of the way household responsibilities are divided.

[c] Data not shown because the base is too small.

[ ] Results in brackets should be treated with caution because of the small base size.

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Table 2.8

Which informal helpers provided help with ADLs/IADLs[a] in the last month, by age and sex

Aged 65 and over and received help with ADLs/IADLs in the last month — *2013*

Formal helpers[b]	Age group			Total
	65-74	75-84	85+	
	%	%	%	%
Men				
ADLs[a]				
Spouse/partner	90	64	c	76
Son	6	10	c	10
Daughter	4	12	c	11
Other family member	2	4	c	3
Friend/ neighbour	2	3	c	3
No informal helper	6	16	c	10
IADLs[a,d]				
Spouse/partner	65	40	[28]	47
Son	9	18	[27]	16
Daughter	20	22	[39]	25
Other family member	7	8	[12]	8
Friend/ neighbour	2	9	[13]	7
No informal helper	9	20	[3]	12
Women				
ADLs[a]				
Spouse/partner	69	38	[17]	44
Son	6	14	[32]	16
Daughter	26	26	[32]	28
Other family member	10	11	[8]	10
Friend/ neighbour	-	4	[2]	2
No informal helper	8	22	[28]	18
IADLs[a,d]				
Spouse/partner	58	19	9	28
Son	11	24	30	22
Daughter	28	45	38	38
Other family member	12	15	14	14
Friend/ neighbour	11	18	18	16
No informal helper	7	9	15	10
Bases (unweighted)[e]				
Men - ADLs	*52*	*50*	*17*	*119*
Men - IADLs	*56*	*67*	*34*	*157*
Women - ADLs	*68*	*51*	*43*	*162*
Women - IADLs	*112*	*127*	*89*	*328*
Bases (weighted)[e]				
Men - ADLs	*41*	*39*	*14*	*94*
Men - IADLs	*45*	*50*	*27*	*121*
Women - ADLs	*53*	*45*	*40*	*138*
Women - IADLs	*90*	*113*	*81*	*284*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[b] This table shows the categories of informal helpers who provided help; participants may have been helped by more than one category of person, and therefore percentages do not sum to 100%. Note that participants may also have been helped by more than one person within a category, for instance they may have been helped by more than one friend/neighbour. This is not shown in this table.

[c] Data not shown because the base is too small.

[ ] Results in brackets should be treated with caution because of the small base size.

[d] Excluding help because of the way household responsibilities are divided.

[e] Bases shown here are for spouse/partner. Bases for other informal helpers vary but are of similar magnitude.

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Table 2.9

Which formal helpers provided help with ADLs/IADLs[a] in the last month, by age and sex

Aged 65 and over and received help with ADLs/IADLs in the last month — *2013*

Formal helpers[b]	Age group			Total
	65-74	75-84	85+	
	%	%	%	%
Men				
ADLs[a]				
Home care worker/ personal assistant/ home help	4	14	c	8
Other formal helper	2	8	c	4
No formal helper	94	80	c	88
IADLs[a]				
Home care worker/ personal assistant/ home help	7	13	[3]	9
Other formal helper	9	13	[12]	11
No formal helper	85	73	[85]	80
Women				
ADLs[a]				
Home care worker/ personal assistant/ home help	14	22	[40]	24
Other formal helper	1	8	[9]	6
No formal helper	84	74	[53]	72
IADLs[a]				
Home care worker/ personal assistant/ home help	8	7	20	11
Other formal helper	12	14	15	13
No formal helper	80	80	67	76
Bases (unweighted)[d]				
Men - ADLs	*52*	*50*	*17*	*119*
Men - IADLs	*56*	*67*	*34*	*157*
Women - ADLs	*68*	*51*	*43*	*162*
Women - IADLs	*112*	*127*	*89*	*328*
Bases (weighted)[d]				
Men - ADLs	*41*	*39*	*14*	*94*
Men - IADLs	*45*	*50*	*27*	*121*
Women - ADLs	*53*	*45*	*40*	*138*
Women - IADLs	*90*	*113*	*81*	*284*
Women - IADLs	*90*	*113*	*81*	*284*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[b] This table shows the categories of home care worker/personal assistant/home help and other formal helpers who provided help; participants may have been helped by more than one category of helper, and therefore percentages do not sum to 100%. Note that participants may also have been helped by more than one person within a category, for instance they may have been helped by more than one personal assistant. This is not shown in this table.

[c] Data not shown because the base is too small.

[ ] Results in brackets should be treated with caution because of the small base size.

[d] Bases shown here are for home care worker/personal assistant/home help. Bases for other formal helpers vary but are of similar magnitude.

Table 2.10

For how long this kind of help has been received, by age and sex

Aged 65 and over and received help with ADLs/IADLs[a] in the last month — *2013*

Length of time help received	Age group			Total
	65-74	75-84	85+	
	%	%	%	%
Men				
Less than one year	12	21	[15]	16
One year or more	88	79	[85]	84
Women				
Less than one year	17	17	9	15
One year or more	83	83	91	85
Bases (unweighted)				
Men	*71*	*78*	*35*	*184*
Women	*116*	*131*	*91*	*338*
Bases (weighted)				
Men	*56*	*59*	*27*	*142*
Women	*93*	*117*	*82*	*292*

[a] ADLs: Activities of daily living. IADLs: Instrumental activities of daily living. See Tables 2.1 and 2.2 for individual activities.

[ ] Results in brackets should be treated with caution because of the small base size.

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Table 2.11

How often received help in the last week from informal helpers, by sex

Aged 65 and over and received help from informal helper[a] in the last week — *2013*

Frequency of receiving help last week[b]	Informal helper: Spouse/ partner	Daughter	Son
	%	%	%
Men			
Every day	83	c	c
4-6 times	2	c	c
2-3 times	9	c	c
Once	1	c	c
No help received last week	5	c	c
Received any help last week	*95*	*c*	*c*
Women			
Every day	73	41	[41]
4-6 times	6	9	[10]
2-3 times	12	22	[15]
Once	6	25	[28]
No help received last week	2	2	[6]
Received any help last week	*98*	*98*	*[94]*
Bases (unweighted)			
Men	*99*	*27*	*16*
Women	*101*	*89*	*49*
Bases (weighted)			
Men	*77*	*21*	*12*
Women	*84*	*75*	*45*

[a] If more than one helper in any category provided help (e.g. two daughters), this table includes the person that provided the most hours in the week. If both provided the same number of hours, the first listed is included.

[b] This question provides information on the number of times per week help is received, but not necessarily on how many days; for instance someone who receives help 2-3 times may receive help 2-3 times in one day, or help once on 2-3 days.

[c] Data not shown because the base is too small. Data for other family members and friends/neighbours also not shown because of small base sizes.

[ ] Results in brackets should be treated with caution because of the small base size.

Table 2.12

Number of hours of help in the last week from informal helpers, by sex

Aged 65 and over and received help from informal helper[a] in the last week — *2013*

Hours in last week received help	Informal helper: Spouse/ partner	Daughter	Son	Other family member	Friend/ neighbour
	%	%	%	%	%
Men					
No help in last week	8	[2]	b	b	b
Less than 1 hour	15	[2]	b	b	b
1-9 hours	30	[66]	b	b	b
10-19 hours	13	[9]	b	b	b
20-49 hours	22	[18]	b	b	b
50 or more hours	12	[2]	b	b	b
10 or more hours	*47*	*[29]*	*b*	*b*	*b*
20 or more hours	*33*	*[20]*	*b*	*b*	*b*
Women					
No help in last week	6	7	12	25	9
Less than 1 hour	9	4	7	3	12
1-9 hours	39	64	58	60	68
10-19 hours	16	10	12	4	11
20-49 hours	13	9	7	6	-
50 or more hours	17	5	4	2	-
10 or more hours	*46*	*25*	*23*	*12*	*11*
20 or more hours	*30*	*15*	*11*	*8*	*-*
Bases (unweighted)					
Men	*105*	*41*	*29*	*13*	*14*
Women	*106*	*131*	*78*	*50*	*55*
Bases (weighted)					
Men	*82*	*31*	*23*	*10*	*11*
Women	*88*	*112*	*70*	*44*	*46*

[a] If more than one helper in any category provided help (e.g. two daughters), this table includes the person that provided the most hours in the week. If both provided the same number of hours, the first listed is included.

[b] Data not shown because the base is too small.

[ ] Results in brackets should be treated with caution because of the small base size.

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Table 2.13

Patterns of care received in the last week from informal helpers, by sex

Aged 65 and over and received help from informal helper[a] in the last week — *2013*

Time of day/ weekday or weekend received help	Informal helper		
	Spouse/ partner	Daughter	Son
	%	%	%
Men			
Time of day			
During the day time only (until going to bed)	63	b	b
During the night time only (after going to bed)	2	b	b
Both	35	b	b
Day of week			
Weekdays only	1	b	b
Weekend only	1	b	b
Both	98	b	b
Women			
Time of day			
During the day time only (until going to bed)	73	88	[91]
During the night time only (after going to bed)	-	-	[-]
Both	27	12	[9]
Day of week			
Weekdays only	7	27	[16]
Weekend only	2	7	[12]
Both	91	65	[71]
Bases (unweighted)			
Men	*94*	*26*	*16*
Women	*99*	*87*	*46*
Bases (weighted)			
Men	*73*	*20*	*12*
Women	*82*	*73*	*43*

[a] If more than one helper in any category provided help (e.g. two daughters), this table includes the person that provided the most hours in the week.

[b] Data not shown because the base is too small. Results for other family members and friends/neighbours are not shown for the same reason.

[ ] Results in brackets should be treated with caution because of the small base size.

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Table 2.14

Receipt of direct payments and personal budgets, by sex

Aged 65 and over and received help in the last month from formal helper, and/or 20 or more hours help from an informal helper in the last week

2013

Receipt of social care payment[a]	Total
	%
Men	
All with formal help and/or informal help for 20 or more hours	
Direct payments	14
Personal budget	9
Neither direct payments nor personal budget, but LA arranged care	1
Neither direct payments nor personal budget, no LA involvement in care	82
All with any formal help	
Direct payments	[16]
Personal budget	[11]
Neither direct payments nor personal budget, but LA arranged care	[2]
Neither direct payments nor personal budget, no LA involvement in care	[74]
Women	
All with formal help and/or informal help for 20 or more hours	
Direct payments	15
Personal budget	8
Neither direct payments nor personal budget, but LA arranged care	5
Neither direct payments nor personal budget, no LA involvement in care	76
All with any formal help	
Direct payments	20
Personal budget	12
Neither direct payments nor personal budget, but LA arranged care	7
Neither direct payments nor personal budget, no LA involvement in care	67
Bases (unweighted)[b]	
Men with formal help and/or informal help for 20+ hours	*78*
Men with any formal help	*35*
Women with formal help and/or informal help for 20+ hours	*139*
Women with any formal help	*90*
Bases (weighted)[b]	
Men with formal help and/or informal help for 20+ hours	*61*
Men with any formal help	*23*
Women with formal help and/or informal help for 20+ hours	*119*
Women with any formal help	*79*

[a] Receipt of direct payments and personal budgets are not mutually exclusive.

[b] Bases shown here are for direct payments. Other bases are of similar magnitude.

[ ] Results in brackets should be treated with caution because of the small base size.

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Table 2.15

Household features available (whether used or not), by age and sex

Aged 16 and over *2013*

Household features available	Age group							Total
	16-64	65-69	70-74	75-79	80-84	85+	All aged 65+	
	%	%	%	%	%	%	%	%
Men								
Over bath shower	42	44	40	40	44	34	42	42
Walk in shower (level access or standard shower tray)	20	35	33	38	36	32	35	23
Accessible parking or drop off site	24	34	33	29	30	27	32	25
Hand rails	10	15	23	27	30	41	24	12
Wide doorways or hallways	9	12	13	12	15	8	12	10
Ramps or street level entrances	6	8	7	10	11	10	9	6
Automatic or easy open doors	2	2	4	1	5	4	3	2
Lift (e.g. in a block of flats)[a]	2	2	2	4	1	6	2	2
None of these	39	26	25	23	19	25	24	37
Women								
Over bath shower	42	39	39	34	32	36	37	41
Walk in shower (level access or standard shower tray)	20	40	35	36	37	37	35	24
Accessible parking or drop off site	24	33	33	32	27	29	32	26
Hand rails	9	20	25	33	48	51	32	14
Wide doorways or hallways	9	10	11	8	9	15	10	9
Ramps or street level entrances	6	9	7	13	12	13	10	7
Automatic or easy open doors	1	2	2	2	5	5	3	1
Lift (e.g. in a block of flats)[a]	1	2	2	2	6	7	3	2
None of these	39	25	24	22	19	19	22	35
Bases (unweighted)[b]								
Men	*2870*	*360*	*256*	*210*	*138*	*90*	*1054*	*3924*
Women	*3687*	*361*	*291*	*225*	*162*	*144*	*1183*	*4870*
Bases (weighted)								
Men	*3495*	*279*	*199*	*162*	*111*	*69*	*821*	*4316*
Women	*3565*	*292*	*224*	*200*	*142*	*129*	*988*	*4553*

[a] Excluding stairlifts, which were included in a different question.

[b] Bases are shown for wide doorways or hallways; other bases vary but are of similar magnitude.

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Table 2.16

Aids and equipment for participant's use, by age and sex

Aged 65 and over *2013*

Aids and equipment	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
Alarm to call for help	5	5	9	13	25	9
Grab rail/stair rail	4	7	6	11	17	7
Bath or shower seat	4	4	5	13	16	6
Stairlift	0	2	6	5	15	4
Toilet equipment/commode	2	2	4	8	7	4
Bed lever/bed rail	1	1	2	1	8	2
Outdoor railing	1	1	2	3	5	2
Outdoor ramp	1	0	2	2	2	1
Changes to kitchen	1	-	-	1	-	0
Hoist	-	-	1	1	-	0
Other equipment or adaptations	2	1	1	4	4	2
None of these	89	86	79	70	47	80
Women						
Alarm to call for help	4	4	11	28	50	15
Grab rail/stair rail	6	7	13	21	30	13
Bath or shower seat	6	10	11	20	28	13
Stairlift	3	2	2	12	15	5
Toilet equipment/commode	3	6	7	12	19	8
Bed lever/bed rail	2	1	2	7	11	4
Outdoor railing	2	4	6	6	13	5
Outdoor ramp	1	1	3	1	5	2
Changes to kitchen	1	1	0	-	1	1
Hoist	1	0	-	-	-	0
Other equipment or adaptations	1	2	3	1	6	2
None of these	85	83	75	51	29	70
Bases (unweighted)						
Men	*360*	*256*	*209*	*138*	*90*	*1053*
Women	*361*	*291*	*225*	*161*	*144*	*1182*
Bases (weighted)						
Men	*279*	*199*	*161*	*111*	*69*	*820*
Women	*292*	*224*	*200*	*141*	*129*	*987*

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Table 2.17

Current use of mobility aids, by age and sex

Aged 65 and over *2013*

Mobility aids currently used	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
Walking stick	8	15	19	26	41	17
Zimmer frame or other walking frame	-	1	3	7	12	3
Manual wheelchair	1	1	4	4	10	3
Mobility scooter	1	2	3	5	10	3
Elbow crutches	1	1	1	2	2	1
Electric wheelchair	0	0	1	-	1	0
Other mobility aid	-	-	1	-	1	0
None of these	91	83	77	69	55	80
Women						
Walking stick	14	13	28	33	60	25
Zimmer frame or other walking frame	2	3	7	13	30	9
Manual wheelchair	3	3	4	8	17	6
Mobility scooter	3	3	3	5	4	3
Elbow crutches	2	3	0	2	-	1
Electric wheelchair	1	0	1	1	1	1
Other mobility aid	1	1	2	3	3	2
None of these	83	81	69	57	27	69
Bases (unweighted)						
Men	*360*	*256*	*209*	*138*	*90*	*1053*
Women	*361*	*291*	*225*	*161*	*144*	*1182*
Bases (weighted)						
Men	*279*	*199*	*161*	*111*	*69*	*820*
Women	*292*	*224*	*200*	*141*	*129*	*987*

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Table 2.18

Current accommodation type, by age and sex

Aged 65 and over *2013*

Accommodation type	Age group					Total
	65-69	70-74	75-79	80-84	85+	
	%	%	%	%	%	%
Men						
Warden maintained or sheltered accommodation	4	2	6	5	3	4
Housing with care, extra care housing or very sheltered accommodation	0	1	-	1	-	0
Residential care e.g. nursing home or care home	-	-	-	-	1	0
Other type of supported housing	-	-	0	-	-	0
None of these	96	97	93	94	95	95
Women						
Warden maintained or sheltered accommodation	3	1	3	7	11	4
Housing with care, extra care housing or very sheltered accommodation	-	1	-	1	1	0
Residential care e.g. nursing home or care home	0	-	-	-	1	0
Other type of supported housing	0	0	0	2	1	1
None of these	96	98	96	90	86	94
Bases (unweighted)						
Men	*360*	*256*	*209*	*138*	*90*	*1053*
Women	*361*	*291*	*225*	*162*	*144*	*1183*
Bases (weighted)						
Men	*279*	*199*	*161*	*111*	*69*	*820*
Women	*292*	*224*	*200*	*142*	*129*	*988*

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