

 Phoenix

Insights

Public Engagement in Longer Lives

In partnership with:

NatCen
Social Research

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Phoenix Insights

To inform our approach to public engagement, Phoenix Insights commissioned NatCen Social Research and The Policy Institute at King's College London to undertake deliberative qualitative research to understand associations with longer lives and to enable people to think creatively to reimagine longer lives.



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Executive Summary

This report presents the findings of a study commissioned by Phoenix Insights which aimed to provide people with the time, space and information to reimagine how we can live our longer lives well. The research design involved four key phases:

Phase 1: Discussions with stakeholders in the field of ageing and longevity.

Phase 2: Extended group discussions with participants across the UK.

Phase 3: Peer research which involved participants carrying out research activities with friends and family.

Phase 4: A National Summit which brought together stakeholders and members of the public.

Key findings

Longer means later

When introduced to the idea of living longer lives, participants tended to automatically focus on 'later' life (after the age of 60). This produced a dominant framing of longer lives as associated with anxiety, particularly due to concerns with 'unknowns' post-70 about health and financial outcomes at the end of life.

Life phases

Across age groups and locations, participants articulated three to four clear life phases which reflected stereotypical narratives about what it means to be at different ages within our society. These consisted of the following:

- Before 30 was characterised as a time of minimal responsibility when individuals have the freedom to enjoy themselves and develop close friendships
- This was followed by 'the squeezed middle' between 30 and late 50s when responsibilities around caring for children, elderly parents and work pressures collide
- Participants then spoke about starting to slow down in the late 50s in preparation for retirement a decade later. This could include reduced hours or fewer responsibilities at work. This began a time of relaxation and recreation into the early to mid-70s
- After this point, uncertainty in quality of life was the dominant narrative

Strong stereotypes

The strength of stereotypes and assumptions around what different life stages entail posed a challenge to engaging the public in reimagining how we live. Participants in this research struggled to consider working, learning or caring differently due to what they considered to be the strength of structural barriers against doing so. Faced with obstacles, such as socio-economic inequalities, which felt beyond their control to change, they tended to refer back to the role of luck and personal choices.

Opportunities and change

Despite the difficulties of reimagining how we live in order to meet the challenges of longevity, the research uncovered aspects where people saw opportunity and do seek change, across dimensions of work and finances, learning, and wellbeing, health and caring. These have implications for policy priorities at the individual, collective and governmental levels and it is in relation to these that future engagement on the theme of longevity could gain the most traction.

Recommendations and next steps

1

Focus areas

Five key interventions emerged as important areas for focus and investment to enable people to live better, longer lives. These were:

1. Free independent career advice at any age.
2. Financial advice to help you plan.
3. Funded higher education or vocational training for all ages.
4. Paid leave to help balance commitments at key points in life.
5. Greater equality and support within the workplace.

Of these five interventions, participants prioritised policy and funding for higher or vocational training and new types of opportunity for learning throughout life. Participants considered this intervention to have the most potential to positively impact an individual's ability to live well for longer. By increasing an individual's employment choices, it was thought to have positive implications for earning potential and financial stability, factors that were linked to increased resilience more generally.

2

Principles for action

Participants held the view that these interventions should be available to individuals at any age to provide them with the knowledge, tools and opportunity to make choices that improve their experience of living longer.

The discussions on priorities for change surfaced a number of points to consider when selecting priority interventions and in deciding how and by whom they should be delivered. These included:

- Effectively communicating what services are available and how they can be accessed, so that those who need them most are able to benefit in a timely manner
- Ensuring those tasked with delivery are trusted by the general public
- Ensuring services are delivered equitably
- Ensuring interventions are aimed at increasing individual agency and empowering people to make the best decisions for them, rather than approaches favouring a 'one-size-fits-all' model

3

Future research

This study was intended to gauge where thinking amongst the general public currently stands on the issue of longevity. Further research on alternative futures will be needed to develop and add detail to priorities and considerations outlined in this report. In doing so, it will be important to reflect on which stakeholders would be helpful to include in these conversations to add the most value to any subsequent studies.

In order to support people to reimagine and consider alternative futures it will also be important to situate individual decision-making within the broader structural context and empower people to envisage alternative models through well-formulated and tangible policy proposals. Asking specific and focused questions of individuals may help overcome the tendency to feel overwhelmed by the scale of change needed

1

Introduction

1.1 Research context



This report presents the findings of a qualitative deliberative study commissioned by Phoenix Insights that aims to reimagine how we can live our longer lives well. This research consisted of four phases engaging with this aim and exploring the challenges and possible solutions: discussions with stakeholders in the field of ageing and longevity; extended group discussions with participants across the UK; peer research which involved participants carrying out research activities with friends and family; and a National Summit which brought together stakeholders and members of the public.

Longevity presents a significant opportunity to rewrite the traditional life path in order to achieve happier, healthier and more fulfilling lives, however it also presents one of our most difficult challenges. Rethinking how we could live our longer lives well requires us to challenge current conventional wisdom and cultural precedents on how we think about work, family life, social connections, learning and care. Although these are challenging conversations to have, the COVID-19 pandemic and the inequalities it highlighted, presented a unique window of opportunity to engage with the public about the kind of lives they wish to lead, and the kind of country they want to live in. In addition to this, an increase in death salience as a consequence of the pandemic has meant that people are more willing to think about and discuss issues relating to later life in a way that was not previously possible.

The importance and urgency of this work was reinforced by the stakeholders that we engaged with. Their work, for example that of Lynda Gratton, Professor of Management Practice at London Business School, highlights how societally we face a 'burning platform' in that the majority of children born in rich countries today can expect to live to more than one hundred years of age. Yet despite this increase in longevity having been many years in the making, people still

continue to structure their lives in the way they always have – regardless of the changing circumstances. As such, increased longevity will not be a gift but, rather, a challenge that we are poorly equipped to face unless we as individuals, as well as employers and government, work together to bring about real change.

Emma Twynning from Ageing Better also highlighted how the potential of longevity is curtailed by pervasive stereotypes as to what is possible in later life. These stereotypes not only help to create anxiety among younger generations about what their life will be like, but can also put barriers in the way of people who may want to push the boundaries, or stretch the definitions of what it means to be older. As such, the media also has a role to play here; government policies, individual action and employer initiatives will only get us so far without a cultural shift that longer lives are a challenge to be taken seriously, but also an incredible gift.

These challenges form the backdrop to this work, which sought to capitalise on this window of opportunity to engage with people across the UK to begin to reimagine how we could live our longer lives better.

1.2 Research aims

The overarching aim of the research was to reimagine how we can live our longer lives well. In order to address this, the four phases of the project aimed to:

Understand spontaneous associations with longer lives. When talking about this, what aspects of the life course do people think of, and how do they talk about it?



Enable people to think creatively, and provide them with the time, space and information they need to reimagine longer lives – not just for them, but for other groups of people too.



1.3 Report structure

The report is divided into the following chapters.

Chapter 2

Sets out the methodological and analytical approach of the research.

Chapter 3

Explores the meanings attached to the concept of longer lives and the associations which emerged through the discussions had by the research participants. This section also explores whether there is a need for change in how we approach living longer lives in order to benefit from the opportunity this affords.

Chapter 4

Explores barriers and enablers identified by research participants at the individual, collective, structural and governmental levels. We focus on how each were discussed in relation to three key policy areas of (1) work and finances, (2) learning, and (3) wellbeing, health and caring.

Chapters 5 and 6

Aim to set out key priorities for change and identify next steps. As in the preceding chapter, these priorities are set out according to implications at the individual, collective, structural and governmental levels, and focuses particularly on priorities within the key policy areas.

Interpreting insights – how to read the report

The report does not provide numerical findings, since qualitative research cannot support numerical analysis. This is because purposive sampling seeks to achieve range and diversity among research participants rather than to build a statistically representative sample. Instead, the qualitative findings provide in-depth insights into the range of views and experiences of the participants in the study and verbatim quotes are used where relevant to illustrate these.

In this report, we use a range of direct quotes from participants from workshops (Phase 2) and the final summit (Phase 4). We also include sections of written responses generated in the peer research phase (Phase 3). When these written responses are included, this is indicated in the description label.

2

Methodology

2.1 Research design

This research consisted of four phases. Phase 1 involved a workshop with stakeholders who were experts in the field of ageing and longevity. Phase 2 consisted of extended group discussions with participants across the UK. Phase 3 was a peer research task in which participants spoke to friends and relatives about various aspects of living longer lives. The final phase of the research involved a National Summit where stakeholders and members of the public were brought together to discuss the challenges inherent in living longer lives and possible policy responses to reframe increased longevity as an opportunity. The same members of the public (or a subsample therefore) were involved in Phases 2 to 4.

2.1.1 Phase 1: Stakeholder engagement

The stakeholder engagement phase was designed to ensure we could work with a small group of leading experts in the field of longevity and ageing enabling us to draw on their knowledge. From this, we could ensure our work contributed something new to the discussion rather than replicated that which was already known. By bringing together these experts to shape and participate in the work we also hoped to convey the legitimacy of the programme to participants thus encouraging their long-term engagement (particularly through phases 3 and 4) but also pave the way for the thinking generated to be more widely socialised.

We conducted an informal workshop with the stakeholders for this purpose. The workshop lasted for three hours, and involved stakeholders from a range of public, private and third-sector organisations. The workshop was structured by a guide and incorporated plenary discussion as well as individual exercises. The workshop was facilitated by King's College London ('KCL') and NatCen. It was a hybrid event, with participants attending online and in person at Phoenix Group's offices in central London.

2.1.2 Phase 2: Regional extended group discussions

Following the workshop with experts in the first phase of the research, seven extended online discussion groups were conducted with members of the general public in November and December 2021. Group discussions lasted 2.5 hours each and were facilitated by NatCen researchers.

The aims of these sessions were to:

- Explore what the idea of longer lives means to participants, in particular their associations, language, sentiment and the tone of discussions
- Identify common phases in an individual's life course, with an accompanying discussion of the impact that longevity might have on each
- Capture any vision statements or principles about the implications of longevity for different dimensions of life (e.g. health, care, learning, work, family units)

A topic guide for these group discussions was developed in collaboration with Phoenix Insights based on these aims and the insight gained from discussions with experts in Phase 1. A selection of prompts were also used to aid participant understanding of the context of rising longevity and support discussions. This allowed for a balance of topics being brought up spontaneously by participants and a consistency in coverage across groups. In discussion with Phoenix Insights, it was decided to focus on three key policy areas or domains of life which they could take forward in future work. These were work and finances; learning; and wellbeing, health and caring. A flexible and responsive approach was taken to facilitation, which allowed for the structure and content of the groups to evolve based on the participation and engagement of those taking part.

2 Methodology

2.1.3 Phase 3: Peer research

All participants who took part in Phase 2 were then invited to take part in the next phase involving peer research. Participants were able to reflect on their workshop discussions with their immediate networks. Those who opted to take part were briefed and given several weeks in February and March 2022 to conduct set research activities at home. The activities involved:

- Writing three pieces of advice to their younger or older self for living a happy longer life
- Asking up to two family members or friends what type of work, learning, or support they would like to do at different stages in their lifetime

All those who took part in this phase of the research completed both tasks. For details of the achieved sample see section 2.3.2 and Appendix A.

2.1.4 Phase 4: National Summit

The final stage of fieldwork was a National Summit to build on the findings from the regional discussions and peer research responses. The main aims of the summit were to present the findings from the research so far, support people to build visions of reimagined longer lives, and identify priorities for policy change in the future.

Participants from Phase 3 were invited to take part in two online sessions held two weeks apart in May 2022. Stakeholders working in the field of longevity also attended the first session and offered reflections from their field of expertise to help locate participant views within a wider context. The stakeholder contributions also helped to sensitively counter negative framings of longer lives identified by participants (such as fears about ageing) and supported participants to begin the process of reimagining and solution-forming which was then continued in the follow-up session.

During the first session, participants reflected on the challenges and tensions inherent in living longer lives in response to a series of personas. Each persona presented an individual in different circumstances and facing challenges in one of the key policy areas selected at Phase 2: work and finances; learning; and wellbeing, health and caring. These personas were reintroduced during the second session, during which participants were presented with possible policy responses to the tensions discussed during the earlier session. Participants then considered the possible benefits and downsides of each.

2.2 Ethics

Ethical approval was sought from NatCen's Research Ethics Committee ('REC'). This ethics governance procedure is in line with the requirements of the Economic and Social Research Council ('ESRC', 2005) and Government Social Research Unit Research Ethics Frameworks ('GSRU', 2005). Consent to participation and, where relevant, audio recording was sought from participants at each stage.

2.3 Recruitment and sampling

2.3.1 Stakeholders

KCL and NatCen worked collaboratively with Phoenix Insights to develop a longlist of stakeholders who would be well placed to participate in this programme of work. In doing this, we aimed to draw on a diverse range of organisations and individuals who could represent a variety of perspectives and experiences. We also made use of our networks with Phoenix Insights reaching out to its advisory board for suggestions, and KCL drawing on its Ageing Research at King's group.

Following the development of the longlist, a carefully drafted invitation letter sent from Phoenix Insights, KCL and NatCen explained the purpose of the work, what their role would be and sought their willingness to contribute. This letter was followed up with e-mails and phone calls to secure their participation. In total five stakeholders took part in the Phase 1 workshop. Three of these stakeholders also took part in the first National Summit session of Phase 4.

2.3.2 Public participants

NatCen worked with a specialist recruitment agency, Propeller Research, to recruit eight participants to each group (a total of 56). Quotas were set against key demographic characteristics (such as age, gender, ethnicity and work status) to ensure a diversity of views was captured across the sample. A screening questionnaire was developed by NatCen and used during recruitment to ensure participants met the inclusion criteria. Groups were carried out in all four nations of the UK; one each in Scotland, Wales and Northern Ireland and four in England covering different regions (London, Sheffield, Sutton Coldfield and the Isle of Wight) to ensure that geographical variations were taken into account. For details of the achieved sample see Appendix A.

All Phase 2 participants were then invited to take part in the peer research phase. In total, 21 participants opted into and completed this stage. Peer researchers were also invited to attend the National Summit. Of these, 11 participated in both sessions.

Thematic analysis was carried out for Phases 2, 3 and 4 of the research. Facilitator notes were taken during workshops and summit sessions, including using 'jamboard' which gave participants and stakeholders an immediate visual depiction of the issues discussed. All discussions were recorded and detailed write-ups of each session were subsequently completed using a standard template for consistency and ease of analysis. Thematic analysis of peer research responses was conducted using a matrix approach, with each row representing a participant and each column representing a research question. Key words and phrases from the peer research responses were input into this matrix and cross-referenced with demographic characteristics to identify trends in the responses given.

2.4 Limitations

There were two main limitations to the research which are set out below:

COVID-19 fieldwork restrictions: COVID-19 restrictions were still in place during the fieldwork period for the Phase 2 workshops which coincided with the outbreak of the Omicron variant. Therefore, it was not possible to undertake a face-to-face methodology as had been intended in the original proposal. This placed a limitation on the type of activities and technique which could be used in the groups in order to engage the public on the topic of longevity.

Challenge of reimagining longer lives: As we outline in later chapters, participants in the research found it challenging to reimagine how we might live in order to frame increasing longevity as an opportunity. The reasons for this are explored in more depth in section 3.2. As such, this placed a limitation on the priorities for policy change set out in Chapter 5 and is a factor which Phoenix Insights may need to consider in future conversations following on from this study.

3

Understandings of and associations with longer lives

3.1 Spontaneous associations with longer lives

This chapter explores the meanings which participants attached to the concept of longer lives (both spontaneous and more considered or informed) and common associations which emerged through the discussions. In particular, it sets out the context and key framings that emerged which led to the discussions reported on in Chapter 4 'Barriers and enablers for living better, longer lives' and Chapter 5 'Looking ahead – key priorities'.

Participants made a number of spontaneous associations when considering the concept of longer lives, with some of these being more dominant than others.

Longer means later

When introduced to the idea of living longer lives, participants tended to automatically focus on later life (after the age of 60) and on the idea that this meant people have more time in old age. This produced a dominant framing of longer lives as associated with anxiety, particularly due to concerns with 'unknowns' post-70 of health and financial outcomes at the end of life. They did not immediately make a connection to considering the implications that longer lives might have for decision-making in earlier life.

The idea that they could be financially secure and relatively healthy in these later years eased people's anxiety around growing older, however having such a 'comfortable' later life was seen as largely dependent on individual luck rather than as a result of structural advantage. Personal decisions too, around eating better, exercising more or prioritising sleep, were seen as only able to go so far in helping achieve this ideal.

Prominent associations with the last stage of life were largely negative and included expensive medical care, loss of independence and dwindling confidence.

“If you’ve got money and your health then it’s a wonderful time but there is always that worry about what is round the corner.”

Sutton Coldfield, Female 60s

“I think probably everything becomes a little bit more difficult in terms of your physique, your energy levels... you might not have as much disposable income, so unless you’re really prepared for age, things do become a little bit more difficult.”

Sheffield, Female, 30s

“I’ve cared for quite a few people and their world shrinks. What they used to do before... travelling gets less and the socialising gets less and it seems to shrink down to trips to the doctors, trips to the shops and the television...”

Sheffield, Female, 60s

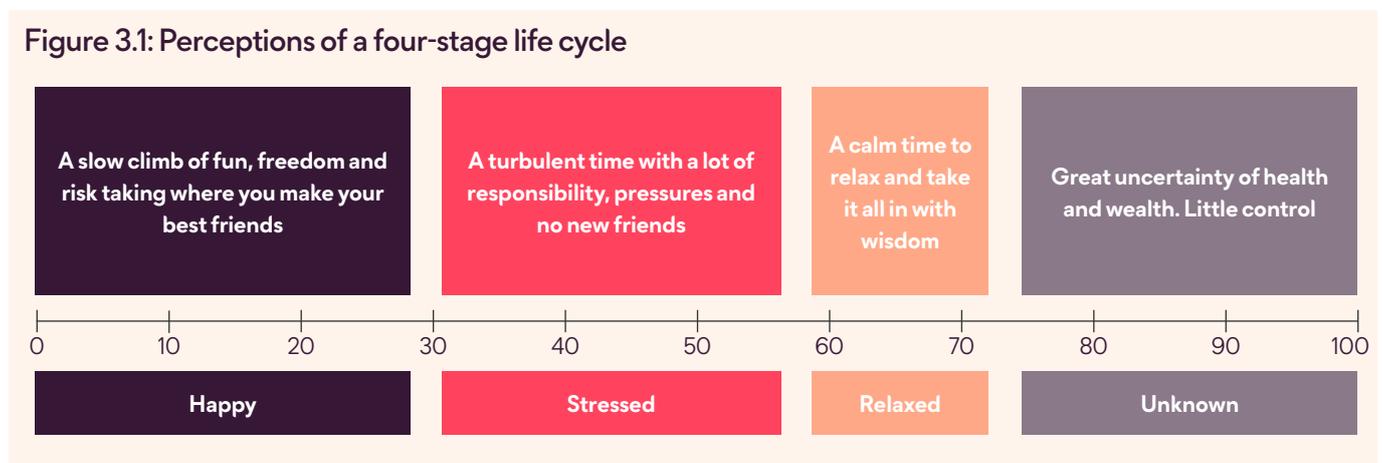
3 Understandings of and associations with longer lives

The four-stage life cycle

Participants were also asked for their associations with different ages. They described three to four clear life phases which reflected stereotypical narratives about what it means to be at different ages within our society, which we have summarised in Figure 3.1. These associations were consistent across ages and locations.

- Before 30 was characterised as a time of minimal responsibility when individuals have the freedom to enjoy themselves and develop close friendships. It was viewed as a happy time by research participants
- This was followed by 'the squeezed middle' between 30 and late 50s when responsibilities around caring for children, elderly parents and work pressures collide. It was also associated with high stress
- Participants then spoke about starting to slow down in the late 50s in preparation for retirement a decade later. This could include reduced hours or fewer responsibilities at work. This began a time of relaxation and recreation into the early to mid-70s
- After this point, uncertainty was the dominant narrative. Quality of life at this stage was seen as largely determined by luck around health and finances with the individual having little agency or control over the outcome

Figure 3.1: Perceptions of a four-stage life cycle



Perception vs. reality

Despite the agreement people seemed to come to in outlining the four-stage life cycle in their discussions, it didn't always align with how people actually experienced their lives. For example, participants referenced having to make difficult decisions in their 20s about education and careers in contrast to the characterisation in discussions as a carefree time. Both younger and older participants drew attention to trade-offs between time and health at either end of the life cycle, which had implications for individual decision-making. Similarly, people also had examples of demands of work and study before 30 limiting opportunities for travel and enjoyment of hobbies, while post-retirement was seen as providing ample time for these pastimes with no guarantee of having the health to enjoy them. Such observations highlighted a tension between perceptions of the life course when asked to describe it and what actually happens to us at different ages.

3 Understandings of and associations with longer lives

Journey of dependence

Dependence also emerged clearly as a theme. Participants considered how an individual's role changes from being a dependant in childhood and early adulthood, to being depended on by others from 30 to late 50s both at home and in work, to then becoming more dependent on others again in the later years, particularly in terms of elder care. Participants expressed anxiety at this possible loss of agency.

Participants also identified transition points through the journey of dependence as times of risk when individuals could be impacted by loneliness or other mental health concerns without sufficient support. Transitions included children leaving home or a partner passing away.

 "I wouldn't want to live to be a burden on anybody. I wouldn't want to live into really old age if I'm going to be a burden."

Northern Ireland, Female, 60s

 "As you get older, your children or your family, they've got their own lives and they tend to go their own way... from having suddenly your own family and then you've got to let them go... I'm thinking of loneliness in that way."

Scotland, Female, 60s

Case study – Working, learning and support throughout life

Peer research responses reflected the perception of a four-stage life cycle, which emerged during the workshop discussions during Phase 1. The response below depicts increasing responsibility during midlife (36 to 50) between caring duties and growing pressures in the workplace. Participants of all ages then wanted to slow down after 50 by working fewer hours and taking on new hobbies. The participant in this example expected later life (from 66 onwards) to involve heavy dependence on others for help with a broad range of daily activities.

Participant: Male, 18 to 30, Living in an urban area

18–35

Work – Working in a trade, learning on the job. Support from employer, parents.

Learning – Going to college. Support from lecturers, peers and bodies to help with finance, with fees.

Support – From parents to buy a flat, also support from friends with filling in mortgage forms.

36–50

Work – Build up my business, hire more staff for my successful business. Support from hiring agencies to find someone suitable. Support from more experienced tradesmen who have trodden a similar path. Support from banks to loan the money to build my business.

Learning – Keeping on top of the latest developments in my trade.

Support – For looking after my children. Support for home improvement (local grants).

50–65

Work – Working fewer hours. Access my personal pension. Support in understanding my pension and how to get the best out of it.

Learning – New skills such as photography.

Support – From family and friends.

66+

Work – Fully retired.

Learning – How to deal with old age.

Support – From many people in all areas, e.g. having a bath, going to hospital appointments, cleaning the house. The list goes on and on.

3.2 Rethinking longer lives

One of the aims of this research was to engage participants in reimagining longer lives. To help them with this, we developed a number of scenarios which presented some alternatives for three selected dimensions of life; working, learning and wellbeing, health or caring. However, we found that participants were resistant to change in these dimensions and the idea that people now live longer than ever before caused little reflection on how we currently live.

We found either that:

- Participants had a sense of inevitability about old age and what it would entail. They already expected to live into their eighties or nineties and had firmly held perceptions of this period as a time of decline
- The discussion felt too abstract for participants and they did not connect the notion of living longer to decisions they are currently making about work and family. There were structural barriers to doing things differently and consequences for individual choices

When further prompted, participants acknowledged the roles of chance, individual choices, and socio-economic status in determining when certain life events might happen and therefore began to consider that the four-stage life cycle (discussed earlier) may not represent everyone.

However, ultimately participants tended to revert to the four life phases when encouraged to reimagine approaches to dimensions that relate to our lives and for which there are implications of living longer; learning, work and caring.

 “I think quite a lot of these are all dependent on people’s personal situations rather than age... like if they get new jobs or if people move house... then they put themselves in situations where they might face more challenges than they ever have or they might make more friends than they ever have. And I think that could really happen at any age to be honest.”

Sheffield, Male, teens

 “I think I would try to keep pretty much everything the same. So I wouldn’t want to work longer. Definitely not. The classic societal image is that you get married and then you have kids. So I guess the problem with getting married later is then when do you have kids.”

London, Female, 20s

Summary

When introduced to the idea of living longer lives, participants tended to automatically focus on ‘later’ life (after the age of 60). While participants associated the time between 60 and 70 with relaxation, after 70 was seen as a period of uncertainty. This reflected a fixed view of the life cycle which relied on stereotypes about different life stages. There was a conceptual gap between how participants viewed longer lives and reframing increased life expectancy as an opportunity. This presents a challenge in engaging people to think about longer lives.

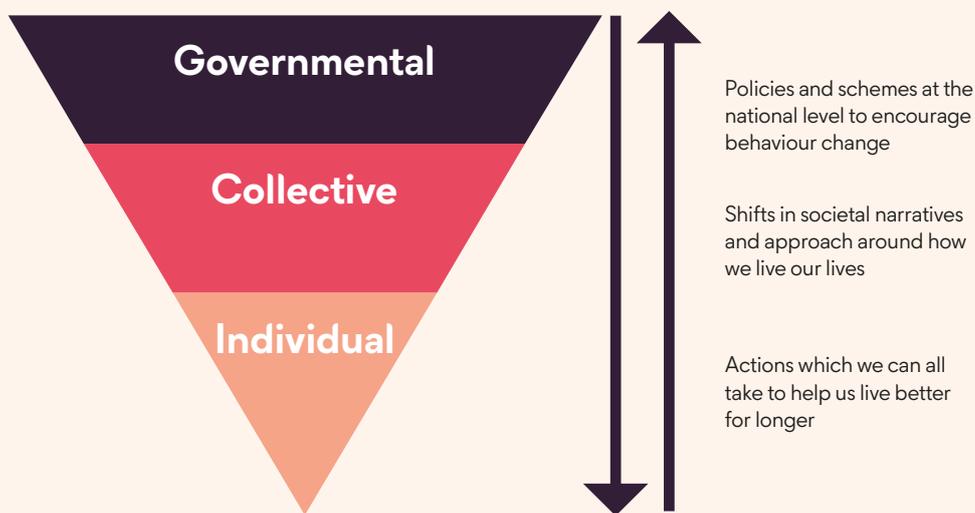
4

Barriers and enablers for living better, longer lives

4 Barriers and enablers for living better, longer lives

This chapter explores the barriers and enablers to living better, longer lives that participants identified in Phases 2, 3 and 4 of the research. These are mapped onto three 'levels of responsibility' (see Figure 4.1 below): the individual; society collectively; and governmental. These three levels emerged spontaneously in participants' reflections in the earlier stages of the research, and we then invited people to consider them further in the first summit session as a reference point for the types of actions which might be taken to improve longer lives. The section begins by addressing the overarching barriers participants thought existed to viewing living longer as an opportunity and which were raised in relation to various life stages, for example, the 'squeezed' middle age. The section then goes on to focus on barriers and enablers specific to the three key policy areas of (1) work and finances, (2) learning, and (3) wellbeing, health and caring.

Figure 4.1: Levels of responsibility



The four-stage life cycle (discussed in section 3.1) emerged as a considerable challenge for reframing longer lives. Participants tended to be wedded to an understanding of life through these four phases. This made it difficult to have conversations about alternatives, which did not follow that proscribed path, and indicated the strength of various overarching societal and structural barriers to living differently. These barriers to living differently were not unique to one policy area and included:

Individual factors: Participants referred to the weight of decisions made early in life as these were seen as determining the quality of later years. Their view was that choices around education, career and finances could be pivotal and poor decisions were hard to recover from later in life.

Participants in particular identified that socio-economic status played a considerable role in the choices that were available to individuals and when. For example, aspirations for later years depended on whether you could afford to 'enjoy' retirement with holidays and recreational activities.

4 Barriers and enablers for living better, longer lives

Collective understandings and narratives: Negative language and imagery around ageing were pervasive in the media and acted as a barrier to viewing longer lives as an opportunity.

Climate change and the rising costs of living featured prominently in these discussions. These issues made the future feel full of problems beyond the control of the individual and were considered more influential than increased life expectancy in terms of necessitating a change in how we live.

A generational divide also emerged between participants in their twenties and thirties and those aged over 60. Younger participants did not expect to be able to afford to retire and so prioritised making the most of opportunities to travel or complete their 'bucket list' earlier in life. While older participants who may have benefited from, for example, a more favourable housing market to purchase property early in life and ensure financial stability, saw retirement as the time to carry out these activities.

Necessity for government investment: Participants identified a need for the government to make difficult decisions about what to direct funding towards, for example, whether to prioritise improvements to housing or the National Health Service to meet the needs of an ageing population. This was accompanied by the challenge of how to raise public money and whether this should be done through raising taxes for younger working people.

These barriers to living differently arose throughout people's conversations on the specific policy areas outlined in the remainder of this chapter and gave rise to difficulty around the framing of longer lives as an opportunity. These considerations as they related to the three key policy areas of (1) work and finances, (2) learning, and (3) wellbeing, health and caring are explored below. Each section begins by exploring the barriers to reimagining how we currently live and then outlines potential enabling factors to address some of these challenges in the context of the three levels of individual, collective and governmental actions.

 "I know people who still live at home with their parents and they're like nearly 40... I know people who have retired early because they earned a lot of money."

Isle of Wight, Female, 40s

 "There is a hell of a lot of negative connotations and stereotypes around ageing and living longer is not necessarily viewed as positively as it should be."

London, Female, 20s

 "We're living in a time of uncertainty so I think it's quite daunting to think about what you'd do over the next seven years when we're not even sure what we're gonna be able to do in the next year or the year after."

Isle of Wight, Female, 20s

 "It's a generational thing. I wanted to do things before I'm 30 but my parents did it when they were retired and had the time and money... it all stems from the fact that they had more opportunities in buying houses and income than we had. They were on the [property] ladder sooner and paid it off so when they retire they don't have debt hanging over them."

Sutton Coldfield, Female, 30s

4.1 Work and finances

Participants had strongly held views on work and employment which dominated discussions during the Phase 2 workshops. We presented participants with alternative options for how employment could look in the future to prompt reflections around when and how much we work. One option prioritised retirement at 65 while the other prioritised a shorter working week throughout life but with no retirement age.

4.1.1 Barriers

Work

Older participants in particular held the view that the current approach of retiring completely in the mid-60s should be protected, linked to the sense that life should begin to 'slow down' after 50. This attachment to retirement as it currently exists was framed in terms of entitlement – those coming to the traditional end of their working lives had 'paid their dues' and therefore struggled to contemplate this time of relaxation being taken away from them.

In contrast, those under 40 accepted that they were unlikely to retire until much later but felt that they would be missing out on what should be a time of enjoyment and relaxation. They too struggled to see extended working life as an opportunity to have a second career or explore alternative employment options.

Shortcomings in the status quo

Participants identified other obstacles to working differently which were structural in nature. Despite older participants' desire to protect retirement in its current form, there was recognition from those at an earlier stage in their working lives that the current status quo (working five days per week with limited time off, from the late teenage years or early 20s to 60s) does not always function well for people at any age. Employment in general was felt to be too demanding and stressful and consumed people's time and energy to an unacceptable degree.

One view highlighted the challenges of managing work alongside raising a family, with female participants being more likely to mention this issue. This challenge was linked to a belief that career progression was dependent on being able to work full-time and for lengthy hours, which could not be balanced with the commitment of childcare.

Participants were positive about the idea that reduced hours could allow people to invest in and enrich other areas of their lives. This was accompanied by a view that some jobs would be done to a higher standard if people were not so overworked.

 "I worked 46 years full-time. I've had enough now. It's time for me to have a break."

Sheffield, Female, 60s

 "This just feels like you work and then you die, like honestly that is what life is right now."

Northern Ireland, Female, 30s

 "I don't get the logic of saving all these things you want to do for a time when you are less able to do it. And I mean you've heard horror stories all the time of people working 'til they're 70, retiring and then three months later dying. And not getting to do any of it, so why not just have the opportunity to do it all the time."

Sheffield, Male, 20s

4 Barriers and enablers for living better, longer lives

There was also acknowledgement of a possible role 'in work' for over 65s beyond the traditional expectation of relaxation and caring for grandchildren, however this tended to be restricted to volunteering or mentorship roles. Participants also emphasised that any type of employment after 65 should be through choice rather than necessity, as a later retirement age in return for more time off earlier in life was considered to be an unfair trade-off for older workers. At the same time, participants highlighted the possible social and mental health benefits for older people of remaining in the workforce should they wish to do so.

Finances

For participants, socio-economic status remained a key determinant for many of the choices available to individuals throughout their lives and as having considerable implications for overall quality of life. Access to finances determined at what age people could leave home and whether they could afford care in later years. One view among participants was that individuals often did not have the ability to change their financial prospects over the life course.

The housing market was a particular focus of concern for younger participants and those in London, who felt current housing prices meant they would be unable to get onto the housing ladder. Their view was that even if they did manage to purchase property, this would be at a later age than previous generations, meaning they would be paying off mortgages into retirement. The alternative for them was to spend a substantial proportion of their salary on private rent.

 “If you’ve been doing that job for 20/30 years you should be pretty good at it so... you can then train up people because you know the job.”

Wales, Male, 30s

 “I’ve stopped working but I don’t like to say I’ve retired because that’s what old people do and I don’t think I feel old enough to be put in that category.”

Isle of Wight, Male, 60s

 “Being able to travel post retiring isn’t going to be available to everyone, especially if you don’t have your own house paid out... A lot of people don’t think about their pensions so they won’t have enough in retirement, let alone that retirement is going to get longer and longer.”

London, Male, 20s

4 Barriers and enablers for living better, longer lives

4.1.2 Enablers

Work

Despite the acknowledgment of problems in the current model (working five days per week with limited time off, from the late teenage years or early 20s to 60s), reimagining the nature and length of working life was especially challenging for participants. It was felt that nothing could be done by the individual to address this as the systems in place to support the status quo operate at the collective and governmental levels, however participants did identify possible enablers at the collective and governmental levels.

Collective: The role of improved education was discussed in relation to career advice early in life. Participants felt it was important to achieving a happier working life and greater financial security. Participants also acknowledged that a shift in perception of the value and capacity of older workers will be required before change can happen. This could create the necessary conditions through which people will remain in work later.

Governmental: Participants felt government has a role in bringing forward policies which encourage or incentivise employers to take a more flexible approach to the workplace, including facilitating more part-time working. It was suggested that this process has already begun as a result of the pandemic, with many businesses adopting a hybrid work from home or office model. Seeing each employee as an individual with different circumstances was viewed by participants as a more sustainable and beneficial approach which would result in greater loyalty from employees.

 “Consider certain trades as very lucrative opportunities – I went through a more academic route, but very quickly learnt that jobs such as electrical engineering or working with renewable energy paid much better and offered better working hours and time off. I feel that this is not explained to people at an age when they are deciding what to do with their lives.”

Sheffield, Male, 20s, Written peer research response

 “I think statistically you’re less likely to be employed for a job once you are over 60... A lot of employers in my local area certainly wouldn’t look at somebody over 60 because they’ll think ‘I’d rather take on someone younger that I’m gonna get the longevity out of’”

Wales, Female, 30s

 “There must have been a point when working seven days a week was considered the norm, and now we consider five days a week the norm and everybody feels entitled to a weekend, so I think if we could get to a point where three days was considered the norm that would benefit everyone.”

Isle of Wight, Female, 50s

4 Barriers and enablers for living better, longer lives

People also thought there was a possible role for government in introducing schemes to increase the options for older workers to retrain or to stay in their current workplace. In relation to the latter, participants suggested older workers could be matched with roles to better meet their skill sets and capabilities, if these were changing with age. This was thought particularly important for those in trades or manual labour. Participants recognised desirable characteristics of older workers: flexibility, experience, less tied down by family commitments, but felt these were often overlooked by employers.



“If I needed an extra income it is quite difficult for an older person to find work but it shouldn’t be because we’ve got patience and experience.”

London, Female, 60s

Case study – Working, learning and support throughout life

Peer researchers considered ways in which the format of employment might change as we get older to facilitate people remaining in the workforce beyond the current retirement age. Participants recognised that they may not be able to afford to retire in their 60s and, instead, may need to find ways to continue working. In this example, the participant suggests that her role could move online to reduce the demands currently involved in her role as a teaching assistant as she gets older.

Participant: Female, 51 to 60, Living in a rural area or small town

18–35

Teaching assistant to gain experience of working with children.
A university course in counselling and children’s behaviour.
Support financially and a mentor to help with the course.

36–50

Counsellor for children. Helping them to work through their issues.
CPD and easier and more accessible opportunities to train in other fields to change career.
Seek advice from colleagues or family members.

50–65

Counsellor as this doesn’t involve much physical exertion on the body, only the mind and I feel I could still be doing this role in the next few years of my life.
CPD and easier and more accessible opportunities to train in other fields to change career.
Help vocationally from work line manager, parents can still offer advice.

66+

I realistically feel that in six years’ time I will still need to work in order to be financially stable. My current role as a teaching assistant will become more difficult the older I get, so I could see myself doing online tutoring. Ideally, at this age you would be considering retiring.
Something vocational like art therapy, that I can enjoy in my spare time and also do with others.
Family members, colleagues and medical professionals.

4 Barriers and enablers for living better, longer lives

Finances

In response to the barriers discussed in section 4.1.1, participants identified enablers at each of the three levels of the individual, collective and government which could help manage the challenge of financing longer lives and allowing people to have access to a greater range of choices at different life stages.

Individual: At the individual level, improved financial planning and saving was discussed. Peer research responses in particular reflected on personal responsibility in terms of financial decision-making and the need to 'be wise' with money. Those in lower income socio-economic groupings were more likely to hold this view. For example, one researcher (Sheffield, Male 20s) provided the advice, quoted opposite.

Collective: Other participants acknowledged a need for collective change in how society approaches education and advice on financial management. This included placing learning about pensions and saving on school curriculums in order to empower individuals to make informed choices about what to do with their money.

Governmental: Peer research responses identified a need for government financial support at various life stages. Responses on this theme mentioned funding for education or childcare, keeping taxation low, or through specific schemes for support with buying a house or setting up a business. This view correlated with discussions in the Phase 1 workshops in which participants recognised that current levels of governmental provision through the state pension are insufficient to sustain lengthy retirements. Those who drew attention to this issue wanted to see a revised approach to how government proposes to finance later years.



“Do not opt out of pension schemes – it’s becoming more apparent to me that this was a mistake due to rising costs and increased life expectancy. It is so important to plan for retirement from a young age. I would additionally recommend setting up private pensions as well once you are older and earn more money.”

Sheffield, Male, 20s, Written peer research response



“You need to make sure you’ve got the money to see you through that time... I don’t think the state pension will be suitable for ensuring that.”

Isle of Wight, Male, 40s

4.2 Learning

As in relation to employment and finances, participants had strong associations around when and what type of learning should be done at different ages. To encourage reflections during the Phase 2 workshops on how and why we learn, we presented participants with three possible scenarios for learning in the future. One option prioritised learning at any age which had to be managed alongside other commitments, option two prioritised fully funded learning which was limited to either between 18 and 25 or between 45 and 50, and a third option prioritised learning for those aged over 50.

4.2.1 Barriers

Before 50, learning was associated with training for employment while after 50 it was associated with a pastime, for pleasure or to 'keep the mind active'. A clear view emerged that learning should be used to 'give back' to society in some way, primarily through becoming a productive worker and contributing to the economy. Other benefits or advantages of learning to the individual were less valued.

Even when learning later in life was framed in terms of a career change, participants questioned the practicalities of this. It was suggested that current schemes for supporting older adults into work are too generic and fail to account for individual circumstances.

Female participants were more likely to draw attention to the challenges of balancing learning or retraining with caring responsibilities. This was felt to limit the learning opportunities of primary caregivers for a substantial period while children were young.

“See those who retire at 60, if the government’s going to pump all this money into educating them, what benefit would it be to society if they’re not going to use that education. Not going to use it for a job and put more money back into society.”

Sheffield, Female, 60s

“It is a big commitment to career change. If you change at 50 then you go in at the bottom ladder in your new career in financial terms.”

Scotland, Male, 60s

“If your child was ill, you know, you couldn’t take a day off because it was such an intensive training course, it was actually a nightmare, I just found the whole thing really, really challenging.”

Scotland, Female, 60s

4 Barriers and enablers for living better, longer lives

4.2.2 Enablers

As in relation to work and finances, participants thought changes in relation to when and how we learn and train to be beyond the responsibility of the individual. Collective and/or governmental enablers were considered necessary to overcome substantial barriers around the affordability and practicality of learning and training differently.

Collective: Participants who felt that the current retirement age was no longer feasible also recognised a need for societal views to change around the value and capabilities of older workers. This could further instigate change within businesses and employers in terms of the opportunities for training or upskilling given to over 50s.

Governmental: Participants were in support of government schemes to help fund learning or training for the purpose of getting people into or progressing in employment at any age, particularly for those who would otherwise be unable to afford it or balance it with other commitments. There was a broadly held view that such backing should not be limited to under 25s.

This support for retraining or upskilling at any age was based on the perception that being able to stay in the same sector or job role for life is now rare, given the fast-paced nature of technological developments. Participants highlighted the implications of this in terms of needing to upskill the workforce on a regular basis or risk falling behind economically. They felt the need to invest, and the potential for success of such schemes had been illustrated by the proportion of workers who had successfully 'pivoted' their roles in response to the COVID-19 pandemic.

Participants also identified a role for government in encouraging providers (including employers) to explore new approaches or schedules for training which would allow it to be better balanced with other commitments.

“For people who have been in the same role their whole lives and don't know of potential other options... I guess it comes back to offering support if you want to learn a new skill, want to change career or whatnot, there's a bit more emphasis on employers to continually try and train up their workforce.”

London, Male, 20s

“Continuing education at 18 was not the right thing for me, but training in my 30s was and I far more enjoyed the experience of learning than I had when I was younger.”

Isle of Wight, Male, 40s

“I think the job for life has gone anyway even if you have the same profession. You're probably going to change your job several times in a lifetime.”

London, Female, 60s.

“If it is not fully financially supported, what does someone from a poorer background do? Is that then therefore not accessible to them or someone who is a full-time carer, do they not have an opportunity to get out of the situation they're in?”

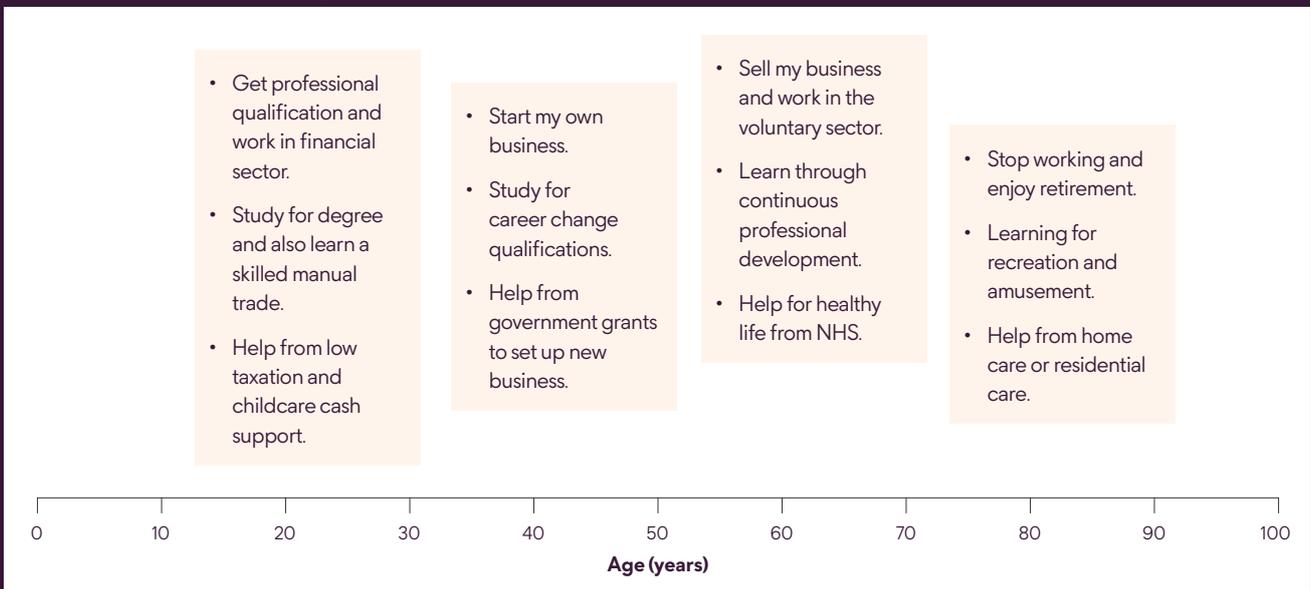
Sheffield, Male, 20s

4 Barriers and enablers for living better, longer lives

Case study – Working, learning and support throughout life

Participants recognised a need for enablers at the collective and governmental levels to be implemented alongside each other in order to make a difference for individuals. In the peer research example below, the participant acknowledged a need for additional study for career-related qualifications alongside government grants to support him in establishing a business in midlife.

Participant: Male, 41 to 50, Living in a rural area or small town



4.3 Wellbeing, health and caring

During the extended workshops, we drew participants' attention to two different aspects of wellbeing, health and caring. The first aspect considered how we might provide elder care in the future given that the population is ageing. Participants discussed innovative approaches to caring through greater use of technology, improved monetary, training and emotional support for unpaid carers, and revitalisation of residential care homes. Participants were also asked to consider how we connect with others given the rising numbers of people living alone and experiencing loneliness at all ages. We asked participants to reflect on possible policy responses which prioritised different approaches to addressing this issue. These included the better facilitation of online connections, support to form intergenerational friendships and help to maintain long-term friendships.

4.3.1 Barriers

Participants reflected that people aged between 60 and 70 today are often healthier and fitter than at any other time in the past and as such are capable of maintaining many of the same activities as they did earlier in life.

However, life after 70 was associated with uncertainty and anxiety around health and wellbeing. Participants feared loss of independence or agency as they age and lacked confidence in the National Health Service or residential care homes to meet the demands of an ageing population. Participants described distrust of care homes linked to events during the COVID-19 pandemic and felt investment was needed to transform them to provide safe and good-quality care, ensuring the dignity of the cared for.

Discussions also included reflections on the need to rethink how, as a society, we approach midlife in order to reduce the caring pressure on individuals. This is particularly in relation to the mid-30s to early 50s when childcare responsibilities can coincide with caring for elderly parents.

 “With people living longer when they are reaching retirement age of sort of 65, 70, if they’ve saved up their pensions and things, you find now that people at that age are a bit more able bodied, especially compared to previous generations.”

Sheffield, Male, 20s

 “Whereas in the, you know, post war years, people survived retirement. Nowadays it’s about living a useful life in retirement, and I think it’s how do you harness all the skills and the knowledge of those elderly people to benefit society.”

Sutton Coldfield, Male, 60s

4 Barriers and enablers for living better, longer lives

Case study – Working, learning and support throughout life

A predominant view amongst participants throughout Phases 2, 3 and 4 of the research was that government support should be reserved for the most in need or those experiencing hardship. Participants tended not to recognise a proactive role for government in supporting people to live differently and in a way which creates opportunities to live a better, longer life outside of a social safety net. In this peer research example, the participant states that, up to the age of 65, she ‘would only expect help in times of hardship’, but then sees this support as necessary as she ages.

Participant: Female, 18 to 30, Living in an urban area

	18–35	36–50	51–65	66+
Work	Part-time if at university or having kids, retail, office.	More senior positions, office based.	Still office based and with supervisory roles, but option to reduce hours or retire early.	Retired.
Learning	Degree or any qualifications required for job role.	Language or some form of hobby.	Sewing or crafts for hobby.	Any hobby I wanted to spend retirement doing.
Support	Funding for degree or qualifications from student finance or employer.	Would only expect help from government, charity or family/friends in times of hardship.	Would only expect help from government, charity or family/friends in times of hardship.	Possibly Age UK, care homes if required and government schemes for heating, bus passes etc.

Loneliness

Participants spoke spontaneously about the negative consequences of loneliness for mental health, however they tended not to speak about personal experiences. This may indicate the existence of discomfort or shame around this topic. Instead, participants felt loneliness was a particular risk for more elderly people (despite statistics indicating that it is most likely to be 18 to 24-year-olds that are affected).

Participants in midlife (early 30s to mid-50s) described being dependent on family and long-established friendships for support. This was related to the converging of commitments during this life stage, which made staying in touch harder and created few opportunities for meeting new people. This was more challenging for those who had moved away from their hometown or gone through life transitions which had distanced them from early-formed friendships. Peer research responses emphasised the importance of prioritising relationships with family and friends throughout life, despite competing time pressures from work and other responsibilities.



“I’ve gone through so many different stages, I’ve kept in contact but not on the same level as when I was a teenager.”

Wales, Male, 60s

4 Barriers and enablers for living better, longer lives

4.3.2 Enablers

In contrast to learning and work, participants saw enablers at all levels of responsibility for improved health and wellbeing.

Individual: Participants focused on personal responsibility to eat better, exercise more and have a positive attitude. This emphasis on the role of the individual may have become magnified during the pandemic when every person was urged to take actions for the benefit of wider society.

Collective: Participants agreed that there was need to value caregivers more highly within society and to provide holistic support in recognition of the emotional strain that they may be under. Within this, participants identified a greater role for the family in providing care for young children and elderly relatives. This group saw caring within the family as a cultural norm which is already well established within their communities, but which could be of benefit if more widely adopted.

Participants also suggested need for a collective change of mindset in how we treat illnesses, especially mental health, involving moving away from medicalisation to social prescribing. This could include a greater role for community groups, housing associations, leisure centres and employers in wellbeing. More needed to be done to ensure people had access to adequate information about the services and support available and at the right time.

Responses to loneliness

While there was recognition of the potential benefits of intergenerational and diverse social connections, older participants showed some suspicion towards the authenticity of friendships between different generations. This may suggest the possible need for greater cohesion and understanding between different age groups, as well as a need to promote the need to establish and invest in new connections at any age, not just early in life.

“Take care to look after all aspects of your health. Have a healthy diet, exercise and make time for sleep. Manage stress levels and take care of mental health. Use moisturisers and sunscreen always. Getting older creeps up on you – do everything you can to ensure you enjoy it!”

Isle of Wight, Female, 50s, Written peer research response

“Being Indian, we are very family orientated. My mum lived with us to the end. Me and my wife took care of her... for me, at that age, you need your family.”

London, Male, 50s

“I think when people are living within their own family network, between those they love, I think it’s better for them, at least psychologically.”

Northern Ireland, Male, 40s

“I’d be a little suspicious. I’d think what does a young person want to spend time with me for, what have we got in common and what are the ulterior motives.”

Sheffield, Female, 60s

“I think if you’re lonely, being connected with people from other age groups who you’ve probably not got much in common with and who you don’t know, I don’t think is as beneficial as going and seeing an old friend who you probably share a lot of memories with, a lot of interests.”

Sheffield, Female, 30s

4 Barriers and enablers for living better, longer lives

Participants were concerned about the possible downsides to the increasing move from face-to-face to online social interaction. While the internet was viewed as an enabler for social support and connection during the pandemic, it was felt to be inferior to in-person interactions and risked exacerbating loneliness further.

Governmental: Despite the focus on individual responsibility in maintaining good health, participants acknowledged that, when things do go wrong, either through accident, disease or the ageing process, there should be a state safety net for affected individuals. The safety net should particularly seek to protect those unable to afford care in their later years. This state safety net should exist for mental as well as physical health.

Participants gave several examples of responsibilities for government in this area, including:

- Increasing the capacity of the National Health Service to cope with the health needs of an ageing population
- Improving the remuneration of those employed as carers to recognise the importance of their role and improve the status of these positions. Participants felt doing so may attract others to take up these roles
- Reviewing planning and design within the housing sector to facilitate more intergenerational and communal living, including adaptation of facilities to cater for reduced mobility. This was seen as important to enable individuals to live with family members and in their own homes for longer and to be supported within the community, rather than moving into residential care
- Improving access to public transport as the population ages and car travel is not possible for an increasing proportion of people. Again, this was seen as important for maintaining independence and mental wellbeing

 “Although the online world connects us all so much better it is also what makes people feel more lonely in some cases... I think you can speak to 100 people over text or WhatsApp, it’s not going to make you feel less lonely necessarily.”

Isle of Wight, Female, 20s

 “There could be a question about more intergenerational living, so that older people and younger people are actually interacting more rather than being segmented and that helps improve understanding of one another and battle that loneliness issue that you’ve got.”

London, Male, 20s

Summary

Alongside being wedded to the four-phase life cycle, there were a number of overarching challenges to reimagining at the individual, collective and governmental levels which framed discussions across the three key policy areas. These included the weight placed on individual decision-making, the role played by personal finances or socio-economic status in limiting choices, the urgency of concerns about the future such as the rising cost of living and climate change, and the divide in experiences and/or opportunities between different generations.

Despite this, participants identified possible enabling factors within work and finances, learning, and wellbeing, health and caring which could help to realise longer lives as an opportunity, particularly at the collective and governmental levels. At the collective level, this largely involved changing how society perceives later life and the contribution of older people, in order to instigate change within businesses and learning providers. At the governmental level, the establishment of necessary infrastructure and incentivisation of other organisations and bodies was seen as essential to allow individuals to maximise their potential, within both the identified policy areas and wider domains of life.

5

Looking ahead – key priorities

5.1 Ongoing challenges to rethinking longer lives

A primary objective of this research study was to provide members of the public with an opportunity to consider the challenges presented by increasing longevity and to imagine how society might respond in order to reframe extended lives as an opportunity. The aim of this chapter is first to reflect on the journey which participants went on across the multiple phases of the study and assess where difficulties may remain for Phoenix Insights in encouraging the public to consider changes needed to live better, longer lives.

The chapter goes on to identify key considerations for living better, longer lives within a number of policy areas, around which Phoenix Insights can take forward the conversations started in this research. The National Summit helped develop these by sharing insights with participants from stakeholders working in the field of longevity and presenting examples of how people could be supported differently with working, finances, learning and caring. The chapter assesses how these priorities respond to the concerns or barriers identified earlier in this report and considers the implications they might have for Phoenix Insights' future work in this area. As in the preceding chapter, these are set out according to what they could mean at the individual, collective and governmental levels. The chapter outlines a number of overarching principles to be considered when delivering priorities and then focuses on the key policy areas of (1) work and finances, (2) learning, and (3) wellbeing, health and caring.

As outlined in Chapter 3, in the first phase of this research, participants found it difficult to think outside a 'three to four-stage' life cycle, which reflected stereotypical narratives about what it means to be at different ages within our society. They found it challenging to reimagine how we might work, learn and care differently given what they saw as the strength of the structural barriers to doing so. However, through the National Summit process, participants began to consider the possible solutions or ways to mitigate these obstacles in greater depth in order to live better, longer lives. Despite this evolution in how participants thought about living longer lives, tensions and challenges remained for those who took part in the research in seeing this extra time as an opportunity and perceiving ways that society might make the most of it.

There remained a tendency to see the difficulties that people might face and therefore the responses to them as dependent on individual circumstances or choices and therefore difficult to plan interventions around. In order to spur change, it will first be important for Phoenix Insights to effectively communicate that tensions faced during longer lives are more often due to societal or structural shortcomings, rather than those of the individual.

There was an underlying concern that interventions which are open to everyone without strict qualifying criteria would be abused or misused and may not benefit those who need them most. This view often referenced stereotypes about young people. It may be necessary to first address and overcome these beliefs when setting out possible policy responses in order to attain support and buy-in from the general public.

There was limited understanding of a possible role for government in delivering interventions to support better, longer lives. The prevailing view was that government sets the direction of change and provides funding and that delivery happens elsewhere but understanding of this relationship was vague. It may be beneficial to demystify the role of government in future conversations with the public around the implications of longevity in order to gather the insights on public opinion necessary to lobby policymakers for change at the governmental level.

There was also a view that the value and impact of any intervention would be determined by an individual's socio-economic circumstances. As such, participants had more difficulty in seeing how the tensions and challenges of longer lives are relevant to those who are more well off. Such individuals were seen as having greater resilience to withstand such challenges with shorter-term support needs than those in lower income households.

It may be necessary to overcome this tendency to default to income status when considering the need for interventions in order to ensure the public is able to fully engage with the possible benefits and drawbacks of proposals. Interventions might seek to address a range of challenges associated with living longer which are potentially relevant across the population and not only to those in low-income households.

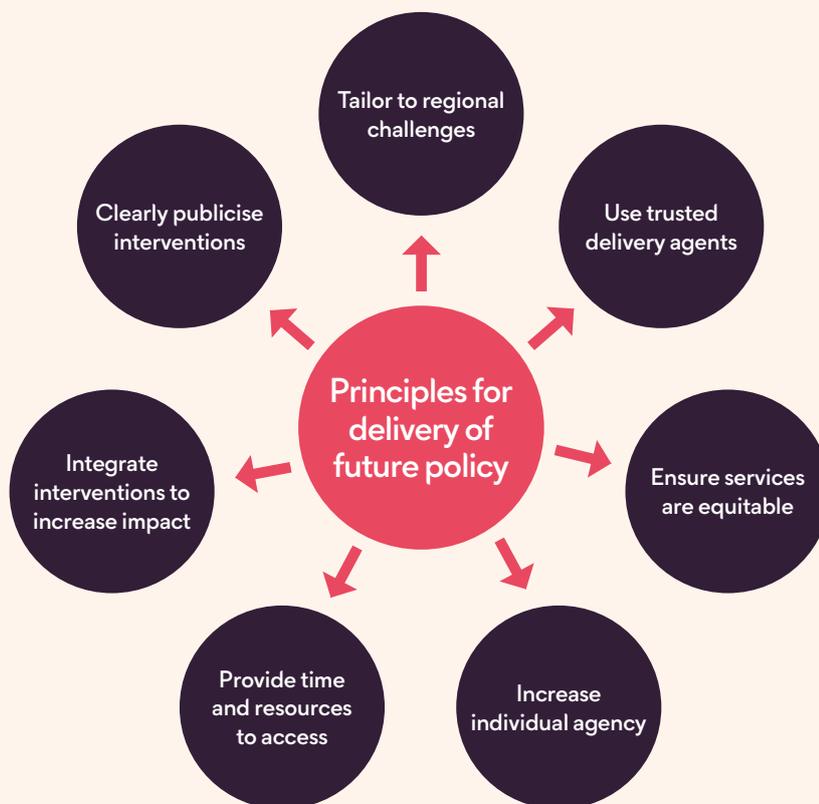
 "It's really easy to put people into boxes about how they'll do things at different times in their life but it's really hard sometimes to plan for the future dependent on your socio-economic group. So I think we need to look more at the money or the socio-economic group that people are in as to when they're gonna retire or what choices they have."

Isle of Wight, Female, 40s

5.2 Overarching principles for delivery of future policy

The following paragraphs outline a number of principles which were not unique to one policy area (Figure 5.1). These arose spontaneously in the discussions around priorities and should be considered when implementing the priorities discussed later in this chapter. Participants did not always reach consensus on these principles, and where views differed, this is highlighted.

Figure 5.1: Overarching principles for delivery of future policy



5 Looking ahead – key priorities

Participants suggested that policy interventions could be tailored to regional challenges. This acknowledged that the demographic profiles of different regions within the UK (in terms of employment status and household income) may necessitate different approaches to achieve the greatest impact. Phoenix Insights could therefore consider how future policy proposals may be adapted to reflect local area factors and how this can be effectively communicated to the public.

Participants also highlighted the importance of adequately publicising and marketing available support to ensure that those who are most in need of help can access the most appropriate scheme for them in a timely manner. Any new policies to help us live better, longer lives (for example, funded options for learning or training at every age) should complement existing services and not add confusion for possible beneficiaries.

It will be important therefore to take into account existing service provision when formulating new policy proposals to support longevity and to consider communications around any new services as a stand-alone area for investment.

One view was that no one area of policy change can individually make substantial change to people's lives. For example, provision for better career advice should be delivered alongside and integrated with funded higher education or vocational training to have the most impact. Those who held this view also reflected that the most needed or relevant area for support will vary according to an individual's life stages. A scheme to provide support with caring duties may only be applicable to an individual when their children are young or when parents become elderly and require additional care; while support to retrain may be useful at other points in life. Therefore, it will be important for Phoenix Insights to consider how policy proposals could integrate with and amplify each other, rather than focusing on one area of investment to the detriment of another.

Trust emerged as a key factor in determining how and by whom support should be delivered. For participants, it is important that delivery agents are unbiased, independent and not tasked with forwarding any particular agenda. As such, there was some scepticism towards the use of government bodies or organisations in implementing schemes directly. An appropriate role of government was seen as more distant, while charity and community organisations were more trusted with delivery. This emphasis on trust will have implications for decisions around who should provide any new services, such as independent career advice, and how they will be facilitated through adequate resourcing to do so.

Amongst participants, it was important that any support provided was done so **equitably**, however there was disagreement over how to achieve this. Discussion centred around how interventions should be targeted and who has access. Disagreement on this issue revealed an underlying assumption that change is only needed for those who are considered to be struggling, rather than being viewed as an opportunity for life enhancement. As such, one view was that in order to avoid stigmatising support users, services should be open to all regardless of socio-economic group or access to resources. In this way, such support services would be normalised and embedded, encouraging more people to seek them out. The National Health Service was given as an example of this type of approach in practice.



“Ensuring it’s all collated in the right way so that someone who wants to find these opportunities doesn’t miss out on one just because it’s got a completely different name and isn’t as well publicised as another one.”

London, Male, 20s

5 Looking ahead – key priorities

Another view was that such schemes should be specifically targeted at those who are most likely to need them but least likely to have the awareness or resources to access them, such as those in low-income households. For those that held this view, it was presumed that those in higher income groups already had access to the networks and resources to shield them from many of the challenging aspects of longer lives.

This discussion was connected to considerations around whether interventions should be optional or mandatory. While participants preferred individual agency, others acknowledged that this might lead to disparities in who benefits from such schemes.

Therefore, support which empowers and enables individuals, including the most vulnerable, to make the best decisions for themselves was favoured.

Overall, participants emphasised the importance of providing people with the time and resources to use schemes aimed at helping to lead better, longer lives. People's lives are busy with many competing commitments which may make it difficult for them to benefit from new opportunities.

 “If it’s only seen as people who are struggling who ask for that advice, then asking for that advice suddenly becomes a big deal, if it’s seen as something that everybody does then perhaps it has more kudos and perhaps it also attracts more funding.”

Isle of Wight, Female, 50s

 “If it’s not mandatory, then obviously it’s only as good as people make. So if people choose not to go to the session then it’s no good.”

London, Female, 20s

 “The issue I have is that everyone is different and not everyone is going to act in the most optimal way you want them to, so you’ve got to reflect that in encouraging certain people more than others. Some people are going to be able to seek out advice. Some people might not be, and it’s not fair to leave the people who can’t to the wayside.”

London, Male, 20s

5.3 Key priorities for change

In the first National Summit session, five main areas for consideration emerged when discussing the selected policy domains:

1. Free independent career advice at any age.
2. Financial advice to help you plan.
3. Funded higher education or vocational training for all ages.
4. Paid leave to help balance commitments at key points in life.
5. Greater equality and support within the workplace.

These were then explored in more depth during the follow-up session. Examples of how these considerations could be implemented in practice were presented to participants as prompts for further discussion. The following paragraphs outline the resulting priorities identified within each of the key policy areas.

5.3.1 Priorities for work and finances

Work

Participants prioritised measures to improve equality in the workplace. It was felt that this type of intervention would lead to greater recognition of the value of older workers and facilitate easier access to the workplace after 50. However, participants also questioned how enforceable these interventions, such as fairer hiring practices, would be and referenced the slow progress of existing legislation to this effect. For this reason, they tended to suggest that greater focus should be placed on more practical support, such as independent career advice, which is more visible and easier to evidence.

Independent career advice was thought to be important to those who have been in the same role for a long time and who are now having to change (either due to personal circumstances or changes in their sector), but are unfamiliar with the workings of the current job market. This recognised the view that people are now unlikely to stay in one role for life. Participants suggested this advice could include information about approaches to facilitate working in later life, such as reduced hours or flexible working, and the implications of this for an individual's pension.

 “I feel mentoring schemes are less likely to be available to people from a lower income, so that's the reason why you're targeting it.”

London, Male, 20s

Implications

In terms of looking ahead, participants' priorities for change around employment had a number of possible implications at the collective and governmental levels, however the dominance of the status quo in terms of work felt difficult for individuals on their own to change.

Collective: Participants felt that early access to high-quality career advice would have the most impact on an individual's life, both by informing people of the full range of options available to them and instilling an understanding of the likelihood of changing career later in life. Participants identified a role too for employers in supporting their employees' development and progression within their chosen career. However, another view was that this might lead to individuals feeling obliged to remain with a particular organisation or company for longer than they want to. Instead, this group favoured advice being available through charities or community organisations.

In terms of the format of delivery, there was a clear preference for tailored advice over generic 'one-size-fits-all' services which may not be sufficiently specific to guide decision-making. Participants made reference to the importance of informal networks of friends and family when choosing or progressing in employment. Mentorship schemes were felt to be a possible way to replicate these types of networks for those who would otherwise not have access.

Governmental: Participants recognised a need for government to legislate to introduce greater age equality into the workplace. They felt intervention at this level was needed to instigate change.

While there was distrust of government bodies delivering the support schemes under discussion, other participants recognised the possible value in utilising existing infrastructure in the form of the Department for Work and Pensions' ('DWP') Job Centres and suggested a possible expansion of their role to become a:

 “Hub of expertise and knowledge for employment generally.”

Isle of Wight, Female, 50s

5 Looking ahead – key priorities

Finances

Financial advice was seen as important for ensuring that people are able to make the most of the money they earn to fund longer lives. This extended to pensions and how much retirement is likely to cost.

However, in this policy area there was a considerable focus on personal agency and ensuring that individuals felt able to make their own decisions and choice about how best to invest or spend their money. As such, participants were critical of mandatory or automatic-enrolment schemes that were felt to discourage financial independence and merely delay having to make hard decisions about money at a later date.

 “We go out to work to get money for various other things that go on in our life and I know I as an individual have made some very poor financial choices in my lifetime and that’s possibly because I really didn’t know where to go. And I don’t like going online because a lot of times it’s jargon and you don’t totally understand it.”

Scotland, Female, 60s

Implications

Participants’ reflections under this policy area had implications at all three levels of responsibility for future focus on this theme:

Individual: Participants felt it was unfair to expect more from the individual at this time in terms of savings due to rises in the cost of living. In recognition of this, policy proposals should focus on actions at the collective and governmental levels and avoid interventions which focus only on changing personal savings habits.

Collective: Participants saw an important role for schools in improving financial literacy from early in life. Employers were also mentioned as a potential source of information and guidance, especially in relation to pensions. It was acknowledged that free financial advice is already available through charities such as Citizen’s Advice and community organisations, however it is not sufficiently publicised and participants questioned whether it was of adequate quality. This gave rise to a number of factors for consideration around policy development in this area:

- Advice should be independent and free to access so that it is available to everyone regardless of resources
- Delivery agents should be adequately funded to ensure that staff can be well trained, and advice given is of high quality
- It should be ongoing, rather than delivered on a one-off basis, to ensure that recipients are able to act on it in a meaningful way to improve their lives
- Advice should be offered through multiple channels (online, in-person, by post) to ensure that it meets the accessibility needs of all of those who might benefit from it, including those who might be digitally excluded by online-only services

Governmental: Participants were particularly distrustful of government in relation to schemes involving personal finances. This was reflected in scepticism towards government-operated mandatory or automatic-enrolment schemes. It will therefore be important to carefully consider the level of involvement of government bodies in the delivery of any proposed interventions, given the possible negative consequences on the likelihood of members of the public to use them.

 “I think an annual advice session, it’s a bit like a medical check-up isn’t it. Once a year it’s probably a very good idea.”

London, Female, 60s

5 Looking ahead – key priorities

5.3.2 Priorities for learning

Funded higher or vocational training and/or new types of opportunity for learning throughout life was seen by participants as holding the greatest possibility for impact on our capacity to live better, longer lives.

This corresponded with the expectation that the job market is now likely to change over the course of a lifetime, especially as people will be working for longer than ever too. It was seen as of particular relevance for those who may need to change career in order to carry on working to a later age.

However, as well as being of benefit to the individual, such interventions could benefit society as a whole, with investment reducing costs elsewhere by producing a healthier, happier and more resilient workforce.

Implications

Participant priorities in this area have a number of implications:

Individual: Participants acknowledged that regardless of how or by whom support in this area is provided, it will require a change of mindset, commitment and planning at the individual level to be successful. As such, it should be implemented alongside efforts to increase understanding and awareness about the likelihood of changing roles during a lifetime.

Collective: Participants were somewhat unsure about which organisations would be best placed to provide these new educational and training programmes; however it was suggested that larger companies could provide a model for smaller firms in how to encourage and facilitate upskilling of their workforce. Amazon's approach was given as a positive example where employees are given funded opportunities through their workplace to learn knowledge and skills which may help them to advance up the career ladder within or beyond their current firm.

In terms of the format of delivery, participants identified a number of key factors:

- Approaches to funded higher education or vocational training need to be accessible, that is, potential beneficiaries need to have options for studying or attending classes that will fit around their existing employment and caring commitments. Otherwise, this type of support will only be of benefit to specific demographic groups
- Schemes need to be truly affordable. Where education or training is funded, it should take into consideration living expenses, as well as those associated with the training itself. Where this is not possible, it is particularly important that study can be done alongside existing employment, again to ensure it does not exclude those who cannot otherwise afford to take part
- The content should be practical, specific and linked to workplaces to ensure that interventions lead to actual jobs for those enrolled
- Investment should be focused on knowledge and skills that are in demand within the job market and likely to lead to roles with higher earnings, for example in the STEM (science, technology, engineering, mathematics) subjects

Governmental: Again, participants did not suggest a direct role for government in delivery but discussed the funding implications of this type of support as primarily coming from government.

 “Leaves you flexibility with many options in your career and life.”

Scotland, Female, 60s

 “A lot of your manual workers...they would need some training to go into an office job or some other type of job if they want to carry on working.”

Sheffield, Female, 50s

 “It's not just it being funded. It's the fact that if you fund it you will actually feed that back into the system. So you will have people that are doing jobs more efficiently. You will have people who are more self-sufficient, people who are healthier, people who are financially more secure.”

Isle of Wight, Female, 50s

 “Gives people the flexibility to retrain or prepare for a new career. Most people don't have that facility to just give up their earnings to do that.”

Isle of Wight, Female, 50s

5 Looking ahead – key priorities

5.3.3 Priorities for wellbeing, health and caring

The following paragraphs outline the priorities that were identified around wellbeing, health and caring.

Participants recognised a need for and strongly supported interventions to redress what was seen as an imbalance between work and personal life. Support in this area was thought to be applicable to everyone, regardless of socio-economic status. This could include greater provision for paid leave from work for caring and other responsibilities. Not only would such support enable individuals to benefit from the other schemes outlined in this section, but it could have a positive effect on mental health and wellbeing and provide reassurances that individuals will have the resources and job security to look after older relatives. Participants felt it could be of particular benefit to female employees who still tend to take on a greater share of caring responsibilities within families.

In addition to action to balance commitments at work and at home, participants felt a refocusing of the healthcare system on preventative care was essential to support better, longer lives.

Implications

Participant priorities in the area of wellbeing, health and caring had a number of implications at all levels of responsibility:

Individual: Participants recognised a need for individuals to take personal responsibility for healthy decision-making around diet, exercise and stress. However, changes were needed at the collective and governmental levels to provide people with the tools and information to do so.

Collective: As with the other policy areas, participants again saw a role for schools in terms of including teaching around healthy eating, exercising and lifestyle on the curriculum.

One view was that employers should be a source of practical and wide-ranging support to help employees to balance the demands of work and personal life. Greater provision of paid leave was seen as a possible way for employers to show their commitment to their employees – which was felt to be lacking in many companies at present.

However, others cautioned that such support needed to be meaningful to create real change for individuals and not merely become a ‘tick-box’ exercise by companies and organisations. Others questioned the practicality of additional paid leave, suggesting that this would be difficult for employers to plan for and implement, for example, if multiple employees wanted time off in the same week or month.

Governmental: While participants did not specifically identify a role for government in wellbeing, health and caring, the focus on the employer as a source of support indicates that government could be expected to legislate for and/or incentivise businesses and organisations to actively enable a better work-life balance for employees.

 “Yes that would actually help some, even if it might not contribute to a longer life, it would actually contribute to how they feel inside, that yes I’m caring but I can go back to my work. I think it would help make someone feel more secure inside themselves.”

Isle of Wight, Female, 40s

 “If I’m in a workplace I want to make sure that if I actually need help or any care... that I’d actually be able to turn round to them and if I was having problems that they’d be able to help in any way.”

Isle of Wight, Female, 40s

6

Recommendations and next steps

6.1 Opportunities for future engagement on longevity

This research has indicated that the strength of stereotypes and assumptions around what different life stages entail poses a challenge to engaging the public in reimagining how we live. Participants struggled to consider working, learning, or caring differently due to what they considered to be the strength of structural barriers against doing so. Faced with obstacles, such as socio-economic inequalities, which felt beyond their control to change, they tended to refer back to the role of luck and personal choices.

In order to support people to reimagine and consider alternative futures it will be important to situate individual decision-making within a broader structural context and empower people to envisage alternatives through well-formulated and tangible policy proposals. Asking specific and focused questions of individuals may help overcome the tendency to feel overwhelmed by the scale of change needed.

It could also be fruitful to start with those areas for change on which participants to this research broadly agreed, namely the importance of funded higher or vocational training and/or new types of opportunity for learning throughout life. This was connected to the opportunity to access a wider range of employment options throughout life. Galvanising interest around interventions on which people are already likely to be motivated and engaged could lead to visioning in areas that initially seem more abstract to the public.

This study was intended to gauge where thinking amongst the general public currently stands on the issue of longevity. Further research on alternative futures will be needed to develop and add detail to priorities and considerations outlined in this report. In doing so, it will be important to reflect on which stakeholders to include in these conversations to add the most value to any subsequent studies. For example, directly involving policymakers, civil society organisations and charities or advice bodies would all have a role to play in responding to the challenges and opportunities of longevity.

In addition, more creative approaches or methodologies which link prioritisation to investment decisions could promote new thinking around the challenges and tensions of longevity as explored in this research.

Given the ongoing challenge to reimagine how we live now in order to improve the quality of longer lives going forward, Phoenix Insights could explore opportunities to facilitate intergenerational exchange so that people at an early stage in life can learn about the challenges and potential in later life in terms of work, learning, social connections and so on. Initiatives to build social capital in this way could effectively overcome the uncertainties articulated by research participants about how longer lives impact on the decisions made throughout life.

6 Recommendations and next steps

6.1.1 Work and finances

Work

While recognising a need for greater equality within the workplace to improve opportunities for older workers, participants prioritised practical support in the form of tailored and independent career advice and mentorship schemes. These were thought important to help people make the best career choice for them and support individuals to change roles or remain in the workplace as they get older. Participants felt that these interventions should be primarily delivered by charities and community organisations with a possible greater role for existing government infrastructure such as the DWP Job Centres, if carefully managed.

Finances

Participants sought wider availability of free and independent financial advice that increases personal agency and informed decision-making, including in relation to pension planning and the cost of retirement. This advice should be ongoing rather than provided on a one-off basis and offered through multiple channels (for example, online and in-person) to improve accessibility. Those involved in the research named a greater role for both schools and employers in providing people with information and guidance on financial planning. At the same time, careful consideration should be given to the extent of government involvement in the delivery of this intervention, as participants were distrustful of automatic enrolment government schemes.

6.1.2 Learning

Participants felt that funded higher or vocational training and new types of opportunity for learning throughout life had the potential to have the greatest impact of any intervention considered across the three policy domains. They saw it as a way to increase an individual's choices and to have positive implications for earning potential and financial stability, a factor that was linked to resilience more generally. The summit surfaced important principles for the delivery of this intervention: opportunities should be accessible to those with competing life commitments and truly affordable (taking into consideration living expenses alongside course fees where it is not possible to work and study at the same time); course content should be practical and linked to the needs of a workplace with a focus on skills which are in high demand.

6.1.3 Wellbeing, health and caring

Participants wanted to see greater efforts from employers to redress what they saw as an imbalance between work and personal life. This could include the greater provision of paid leave from work for caring and other responsibilities. However, participants also recognised that there could be practical difficulties to implementing this intervention (that is, effectively managing resources to ensure the continuity of business or service delivery) and a risk that such initiatives named in company policy could become a 'tick-box' exercise rather than being of genuine benefit to employees. Participants therefore identified a role for government in incentivising businesses and organisations to actively enable a better work-life balance for employees.

6.2 Future policy considerations

As noted in Chapter 5, the discussions on priorities for change within the selected policy areas surfaced a number of factors to consider when selecting priority interventions more broadly and in deciding how and by whom they should be delivered.

These included:

- Adapting policy responses to take account of local factors and regional differences to ensure impact
- Effectively communicating what services are available and how they can be accessed so that those who need them most are able to benefit in a timely manner
- Considering how interventions in different policy areas integrate with and amplify each other, rather than focusing on one area for investment and neglecting others
- Ensuring those tasked with delivery are trusted by the general public
- Ensuring services are delivered equitably. There was disagreement among study participants on how this can best be done and therefore further conversations on this point will be needed
- Ensuring interventions are aimed at increasing individual agency and empowering people to make the best decisions for themselves, rather than approaches favouring a 'one-size-fits-all' model
- Providing people with the time and resources alongside the interventions themselves, to ensure that individuals can access them and fully benefit

A Achieved sample breakdown

**Table A: Achieved sample –
Phase 1 extended group discussions**

	Criteria	Total
Region	London	8
	Sheffield	8
	Sutton Coldfield	8
	Isle of Wight	8
	Scotland	8
	Wales	8
	Northern Ireland	8
Gender	Male	26
	Female	30
Age	18–39	24
	40–59	16
	60 and over	16
Ethnicity	White	41
	Black, Asian and Minority Ethnic	15
Socio-economic grade	ABC1	31
	C2DE	25
Total		56

**Table B: Achieved sample –
peer research**

	Criteria	Total
Region	London	5
	Sheffield	3
	Sutton Coldfield	2
	Isle of Wight	3
	Scotland	3
	Wales	3
	Northern Ireland	2
Gender	Male	10
	Female	11
Age	18–39	9
	40–59	5
	60 and over	7
Ethnicity	White	15
	Black, Asian and Minority Ethnic	6
Socio-economic grade	ABC1	14
	C2DE	7
Total		21

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