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# The Future of Care: the case of the invisible older childless men ...

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**By: Robin Hadley, SRIP**

***This blog is one in a series of blogs on the Future of Ageing, published in the lead up to the ILC-UK Future of Ageing conference on the 24 November 2015***

In a recent speech to the Local Government Association Jeremy Hunt, Secretary of State for Health, said:

*“Family planning must be as much about care for older generations as planning for younger ones. A wholesale repairing of the social contract so that children see their parents giving wonderful care to grandparents – and recognise that in time that will be their responsibility too”*

With government policy directed towards the care of older people falling on to families the question is what happens to those who do not have families? What is their future?

Men are mostly invisible in both ageing and reproductive academic literature and childless men completely absent from national statistics. Why does this matter? An increasingly ageing population, and the increase in both men's life expectancy and solo living, has serious implications for the individual and institutions alike (Pickard et al., 2009). Latest figures from the Office for National Statistics (2015) show the UK population is projected to increase over the next 25 years from an estimated 64.6 million in 2014 to 74.3 million in mid-2039. By mid-2039 more than one in twelve of the population is projected to be aged 80 or over. Demand for both social and health care services increase with age and there has been much concern in the media regarding the cost and provision of such services rooted in two main areas (Wittenberg et al., 2008). Firstly, the insecure economic climate threatens both private and state pension

provision (Attanasio et al., 2004). Secondly, demand for both social and health care services increases with age. In the UK public expenditure on social care is projected to rise by 329% to £28.4 billion in 2041 (Wittenberg et al., 2008). Those needing care are projected to grow by 90% by 2041 with carer numbers predicted to increase by approximately 27% (Pickard et al., 2009).

Infertility research has shown the effects can have significant implications for identity and wellbeing (Berg and Wilson 1995; Bartlam 1996, 2004). With the childless '...at risk for social isolation, loneliness, depression, ill health and increased mortality' (Dykstra and Hagestad, 2007: p.1288). There is link between the elderly childless and poor health – especially formerly married childless men. They recorded highest incidence of excessive smoking and drinking, worse physical health, depression and sleeping difficulties (Kendig et al., 2007). A Swedish study found an increased risk of death through suicide, addiction, injury, poisoning, lung and heart disease of lone childless men (Ringbäck Weitoft et al., 2004). In Britain, there is an increasing number of solo living households with a growing number of older people living in this situation, the majority being men (Smith et al., 2005). In addition, those living on their own report poorer health and are more likely to smoke and drink (Dykstra, , 2006). Indeed, compared to childless single men aged 40-59, similar men in relationships were better off in their psychological wellbeing as well as socio-economically (Dykstra and Keizer, 2009).

Recent reports have projected there will be over a million people aged 65 and over without children by 2030 (Pickard et al., 2012; McNeil and Hunter, 2014). However, the proportion of men in that figure is hard to judge because of the non-collection of male fertility history at registration of birth (Office for National Statistics, 2014). Given that men's age of mortality has increased, there is a case that there will be more men living longer lives without having children. This has implications for the provision of health and social care in later life, given that most informal care for older people is undertaken by their adult children (Pickard et al., 2009). In later life it has been shown that relationships and social support are as important as physical health towards well being & preventing isolation & exclusion (Victor and Scharf, 2005). Extended family & non-kin give informal support to older childless people, and intense formal care is supplied by service providers. The older childless are not disadvantaged when their health is good. However, if health deteriorates the informal support declines and the formal care does

not take up the shortfall (Albertini and Mencarini, 2014). Older men are more likely to have very small support networks compared to women (Phillipson et al., 2001) with partner-less older men more likely to be placed in residential care than equivalent women (Arber et al., 2003).

The campaign group Ageing without Children (awoc.org) suggest people ageing without children include those:

- who have never had children either by choice or by circumstance;
- whose children have predeceased them;
- whose children may live very far away from them;
- who are estranged from their children.

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Robin's specialist areas of interest include men, masculinity, male childlessness and infertility, fatherhood, gender, ageing and the impact of childlessness.

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