



EMPOWERING OLDER PEOPLE TO MAINTAIN INDEPENDENCE & FUNCTIONAL ABILITY IN THE UK

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1. INTRODUCTION



The UK population is ageing rapidly (Office for National Statistics, 2023). Empowering older people to maintain independence and functional ability is essential for their wellbeing, dignity and participation in society while reducing pressure on health and social care (World Health Organization, 2021).



12.4
million
people aged 65+
in the UK (ONS,
2023)



21%
of the
population pro-
jected by 2048



85%
of older people
wants to stay
home as they
age (Age UK,
2024)

This poster critically evaluates the needs of older adults, the effectiveness of current UK policies and interventions, and applies two key theories of ageing to propose evidence-based recommendations for improving empowerment and support



3. EFFECTIVENESS OF POLICIES & THEORIES

-(UK POLICIES)-

1. CARE ACT 2014

Benefits

- Promotes wellbeing
- Prevention-focused
- Person-centred care
- Supports reablement service

Limitations

- Funding pressures
- Workforce shortages
- Unequal service provision (The King's Fund, 2023)



2. NHS LONG TERM PLAN (2019)

Benefits

- Community nursing
- Social prescribing
- Digital health and telecare
- Integrated care

Limitations

- Digital exclusion
- Regional inequalities
- Variable implementation (NHS England, 2019)



-(THEORIES OF AGEING)-

1. ACTIVITY THEORY (Havighurst, 1963)

Supports

- Encourages active participation
- Prevention-focused
- Person-centred care
- Supports carers

Limitations

- Funding pressures
- Workforce shortages
- Unequal service provision (The King's Fund, 2023)



2. CONTINUITY THEORY (Atchley, 1989)

Supports

- Maintain identity
- Preserve routines
- Person-centred care

Limitations

- Life changes may limit continuity



4. CHALLENGES ENCOUNTERED BY OLDER PEOPLE



Loneliness and isolation

Linked to poorer mental and physical health, higher hospitalisation and mortality (Age UK, 2024).



Frailty and multimorbidity

Linked to poorer mental and physical health, higher hospitalisation and mortality (WHO, 2021).



Digital Exclusion

Digital exclusion limits access to healthcare and increases regional inequalities (ONS, 2023).



Workforce Pressure

Staff shortages, increasing demand and funding pressures reduce continuity and timely access to care (Nuffield Trust, 2023).



Ageism and Stereotypes

Negative attitudes can lead to exclusion, low expectations and poorer treatment (Centre for Ageing Better, 2023).



Funding constraints

Limited funding affects service availability and creates regional variation in care (The King's Fund, 2023).



These challenges are interlinked and can create a cycle that reduces independence and quality of life.

5. RECOMMENDATIONS FOR IMPROVEMENT



1. Reduce hospital admissions through community prevention (NICE, 2022).



5. Improve recruitment and retention to strengthen care quality (Nuffield Trust, 2023).



2. Improve digital inclusion to increase access to healthcare (NHS England, 2019).



6. Strengthen integration between the NHS and social care (Care Act, 2014)



3. Expand social prescribing to reduce loneliness (NHS England, 2019).



4. Reduce health inequalities through targeted community support (Marmot, 2020).

Empowerment is achieved when older adults are treated as partners, not passive recipients of care.



6. CONCLUSION

Person-centred, preventative care promotes independence and wellbeing. Continued investment, workforce development and integrated services are essential to meet increasing demand and support healthy ageing in the future.



“The goal is not just longer life, but a better quality of life with dignity, independence and choice.”

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