

Socially Productive Activities, Reward and Well-Being after Retirement

ESRC Seminar Series Rethinking Retirement:
Activity, Unpaid Work and Active Ageing
University of Brighton
24 February, 2012

Anne McMunn, James Nazroo, Morten Wahrendorf, Elizabeth Breeze & Paola Zaninotto, (2009) *Ageing & Society*

+ unpublished work with Professor Andrew Steptoe



Background

'Third age' defined, in part, by participation in socially productive activities.

Some evidence that participation in activities in older age associated with:

- Lower levels of disability.
- Reduced mortality.
- Increased wellbeing.

Research into paid work & health shows importance of 'reciprocity.' Is the same true to unpaid activities?



Research Questions

- 1. To what extent are post-state-retirement age people in England participating in socially productive activities such as paid work, caring, or volunteering?
- 2. Does participation vary according to financial circumstances, physical health or partnership?
- 3. Do people who participate in activities post-retirement have a higher level of wellbeing than those who do not?
- 4. Are relationships between activities and wellbeing mediated by the extent to which activities are rewarding?



English Longitudinal Study of Ageing (ELSA)

Men & women living in England who were aged 50+ in 2002. Drawn from nationally representative cross-sectional household survey.

Data collection every two years.

Nurse visits to collect biomarkers & physical functioning tests every four years.



Participants & Measures of Wellbeing

ELSA Wave 2 (2004) Men aged 65+ & Women aged 60+

Well-being Outcomes:

CASP-19: Control, Autonomy, Self-realisation, Pleasure.

Mean: 42.1 for men & 42.4 for women.

5-item Diener life satisfaction scale.

Mean: 27.0 for men & 26.3 for women.

– 8 item CES-D:

12.3% depressed men & 20.1% women using 4+ cut-off.

Sample sizes:

- Depressive symptoms = 5,195.
- CASP-19 = 3,838.
- Life satisfaction = 4,308.

UCL

Explanatory Measures

Social productivity:

- Paid employment (including self-employment).
- Caring.
- Volunteering.
- Active membership of an organisation

Reciprocity:

- Reported adequate appreciation for efforts in caring or volunteering activities.
- A ratio of the amount of effort paid in v. amount of reward received in paid work.

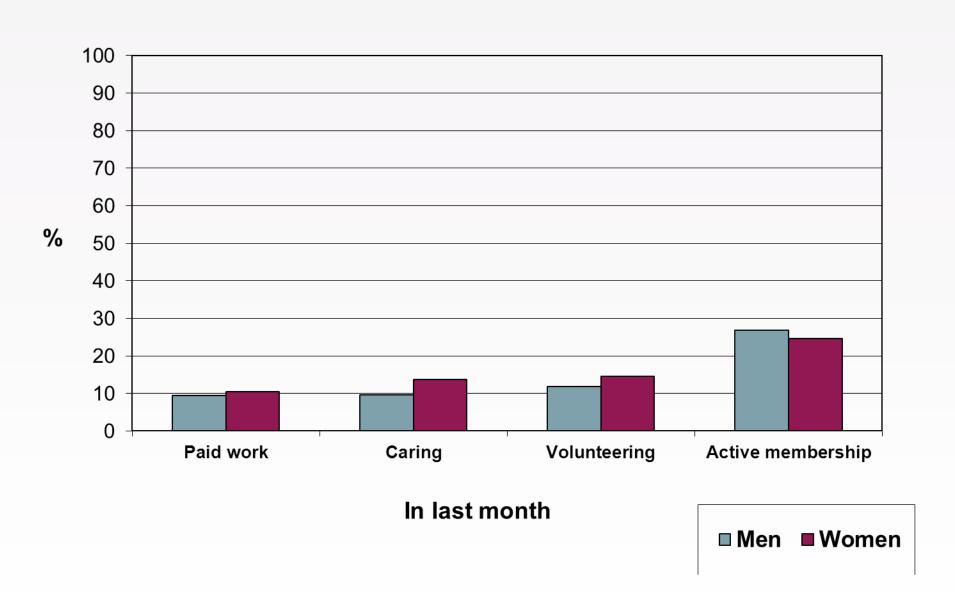
Potential predictors of social participation: age, total wealth quintiles, whether or not living with partner, long-standing illness



Levels & predictors of participation in activities post-retirement age.

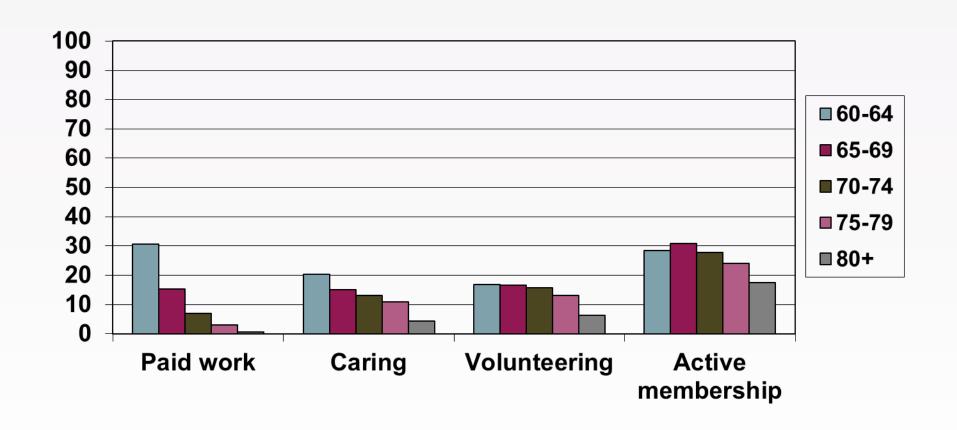


Gender differences in social activities.



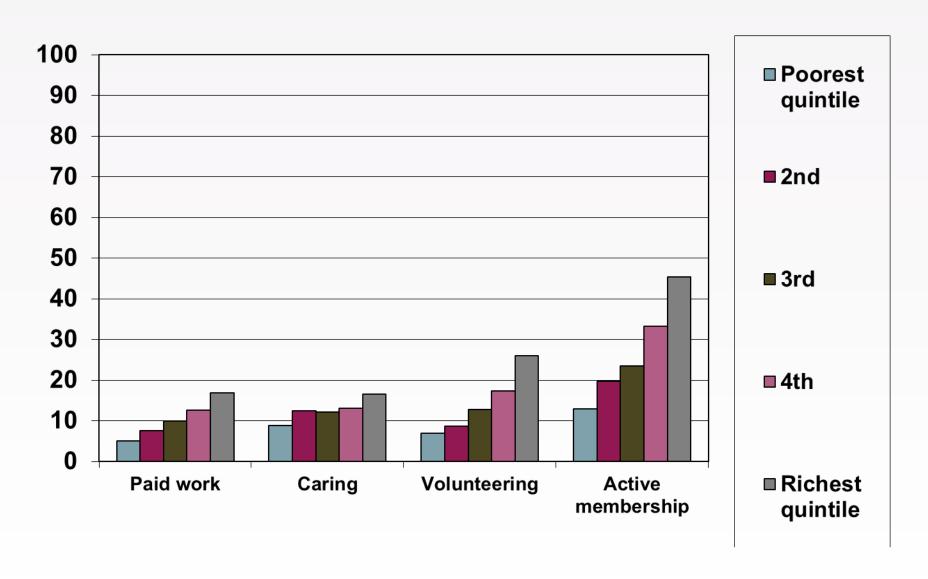


Age and socially productive activities.



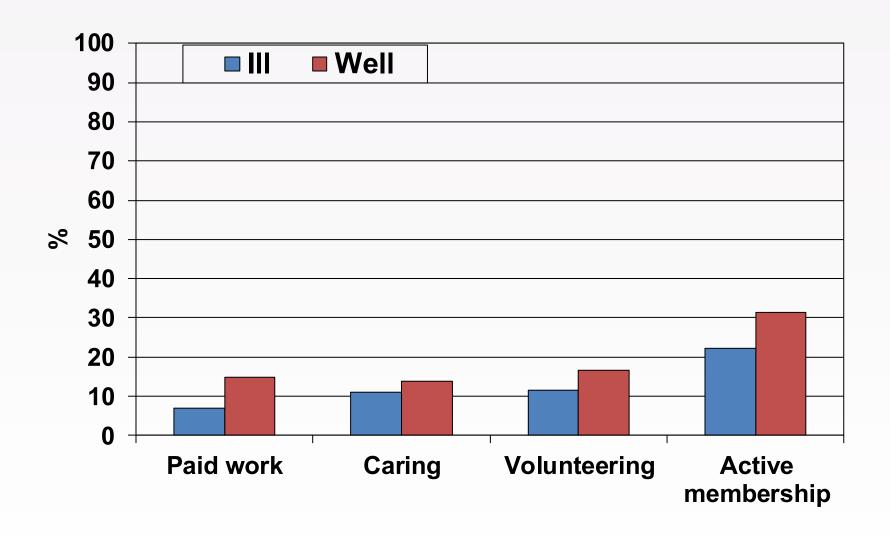


Household wealth and social productivity.



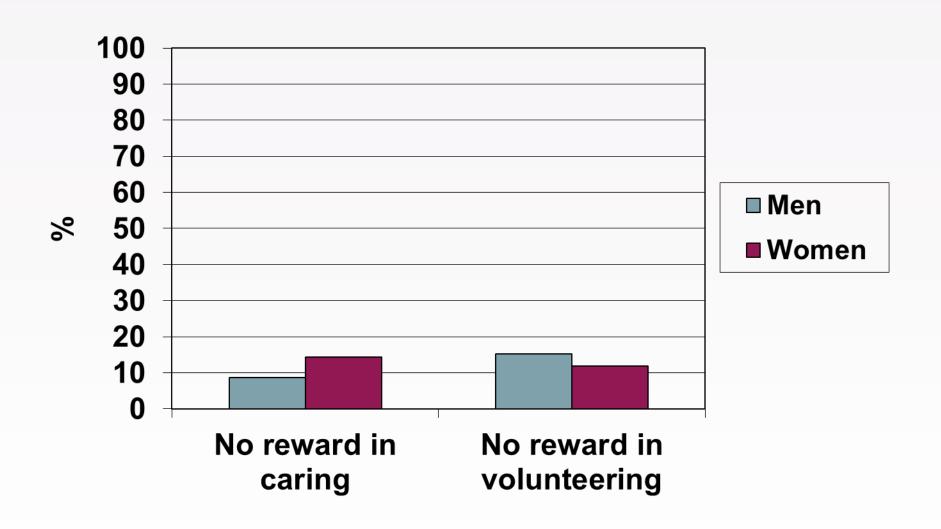


Health status and participation in activities.



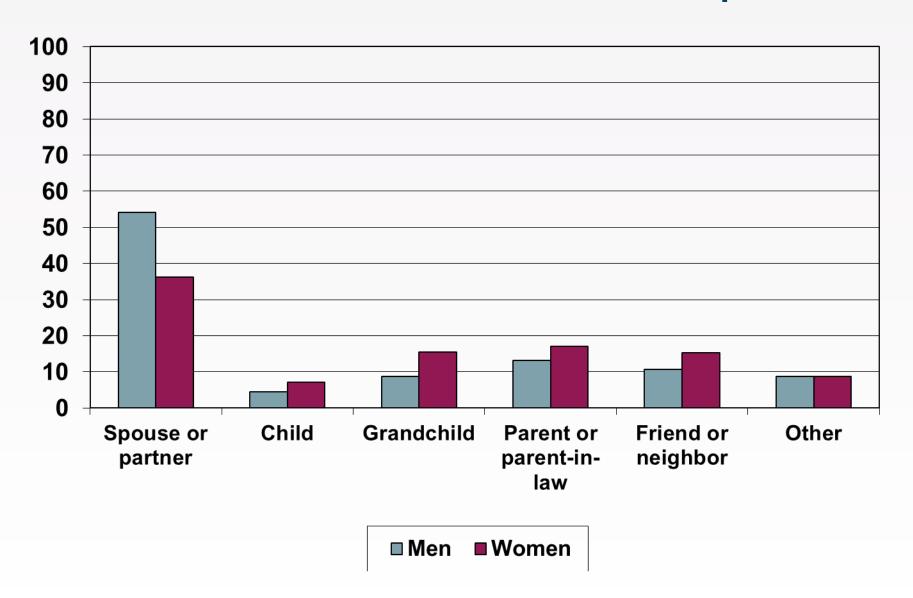


Gender differences in reward.





Gender differences in main care recipient.

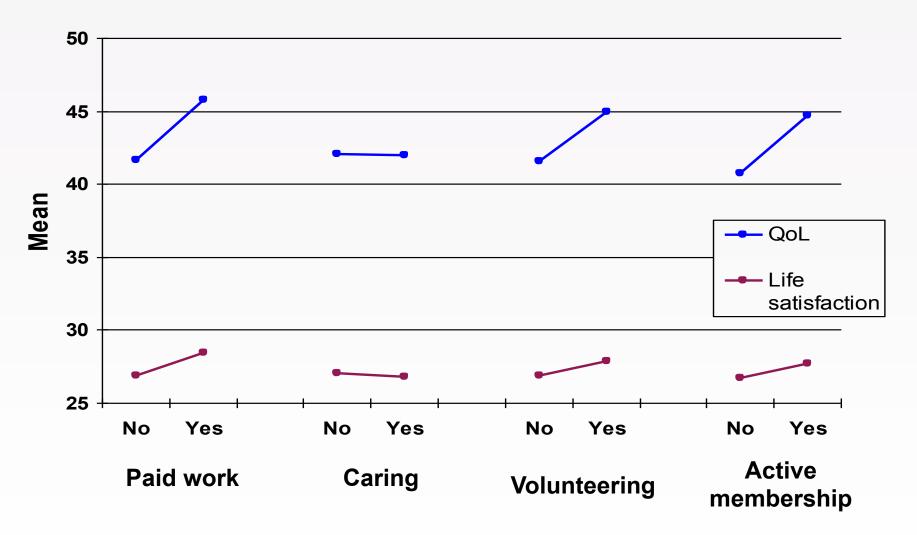




Relationships between activities and well-being.

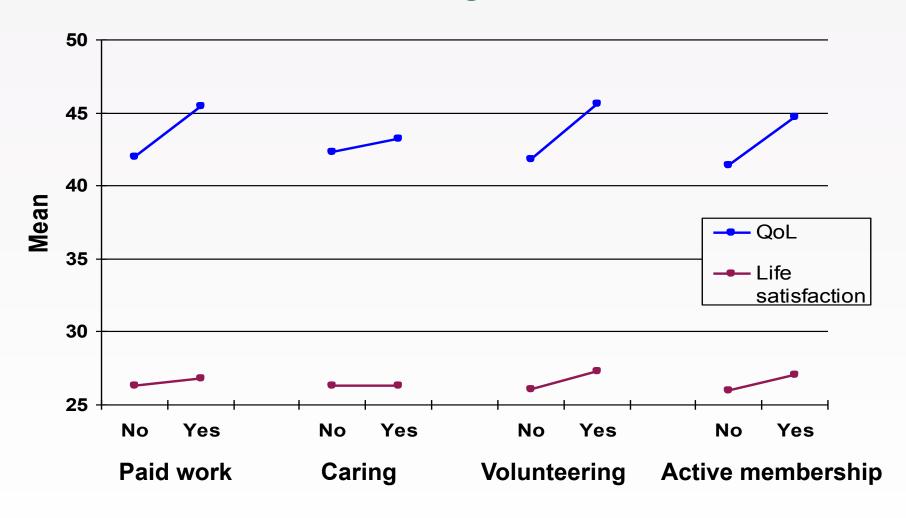


Mean QoL and life satisfaction by activities in men aged 65+.



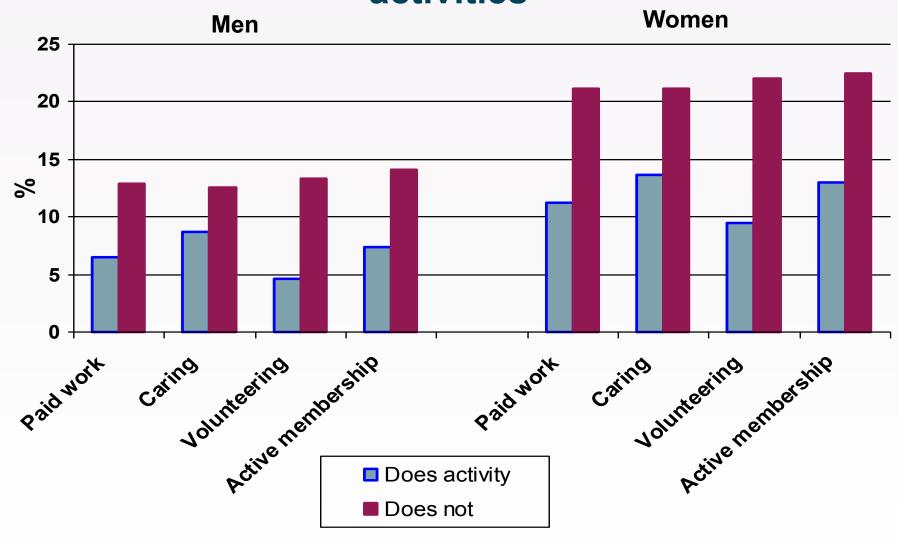


Mean QoL and life satisfaction by activities in women aged 60+.



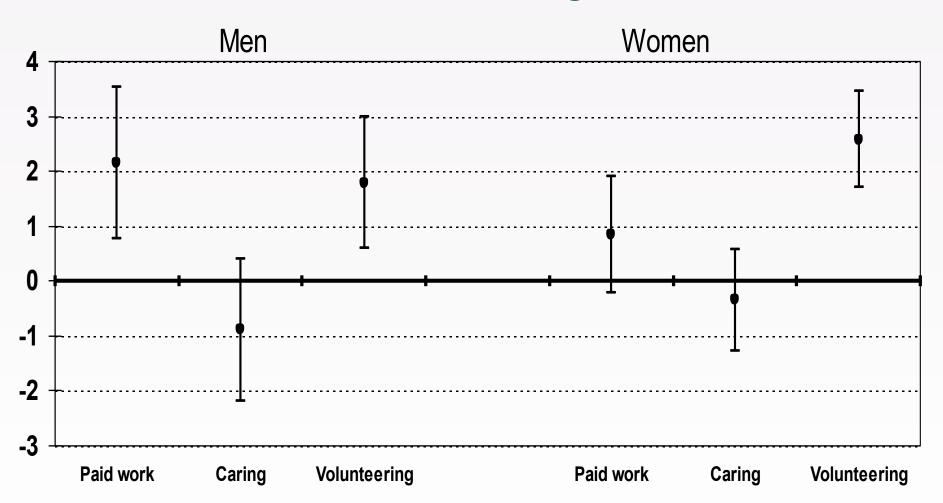


% depressed (CES-D 4+) by participation in activities





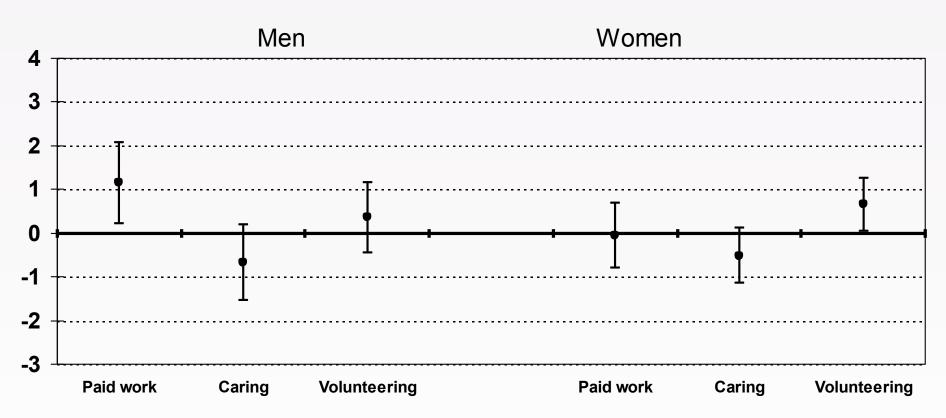
Regression coefficient for QoL for those working, caring & volunteering



Adjusted for age, longstanding illness, wealth, and living with a partner



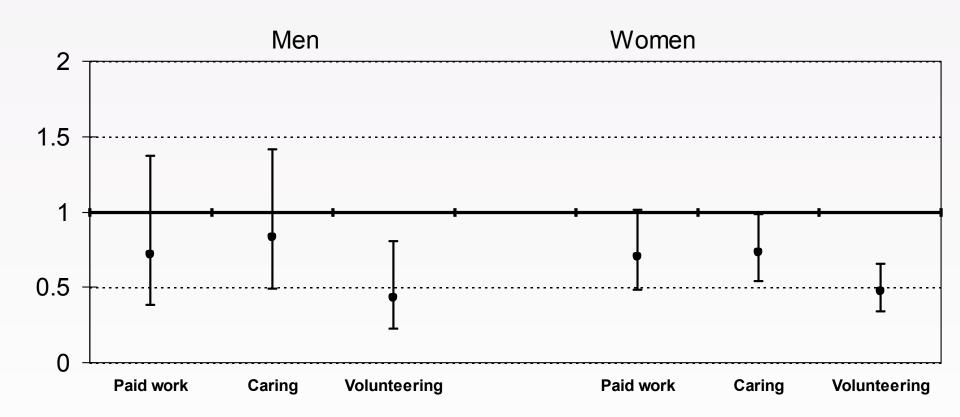
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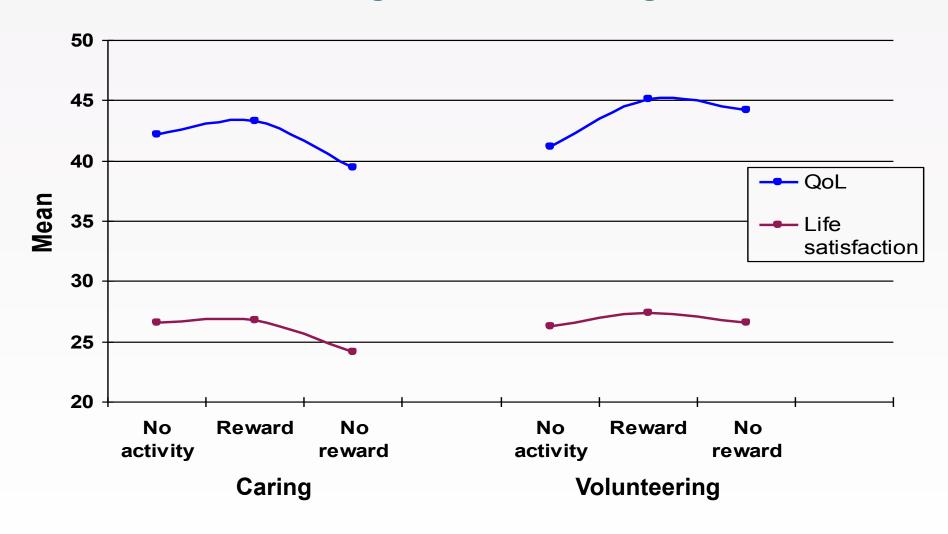
Odds ratios for depressive symptoms for those working, caring & volunteering



Adjusted for age, longstanding illness, wealth, and living with a partner

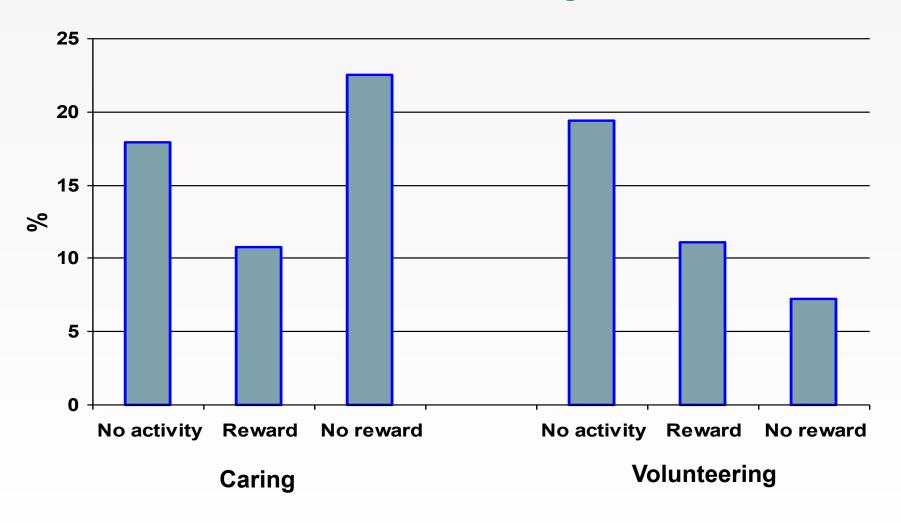


Mean QoL and life satisfaction by reward from caring & volunteering.



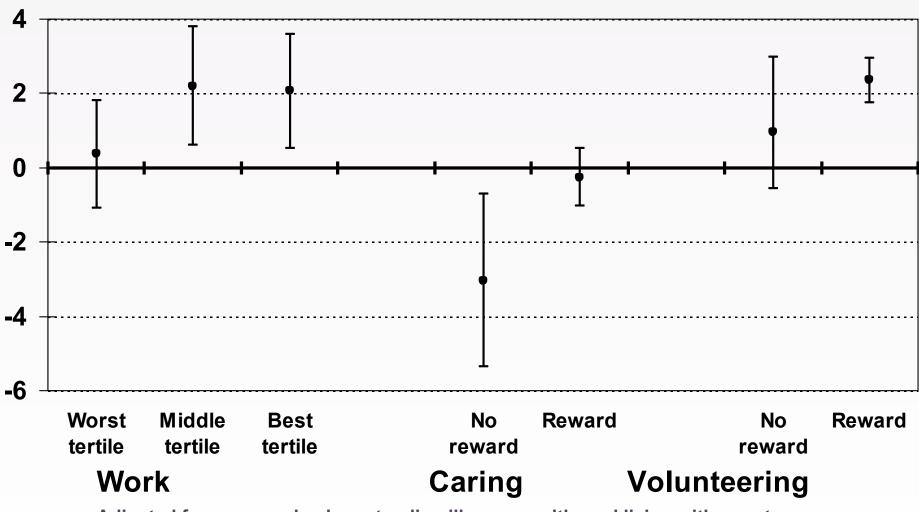


% depressed (CES-D 4+) by reward from caring & volunteering.





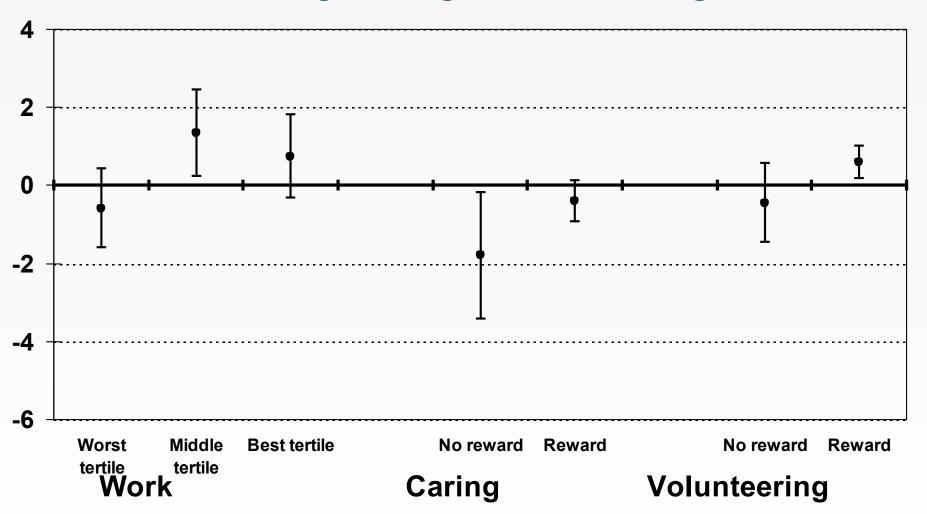
Regression coefficient for QoL by rewards for working, caring & volunteering



Adjusted for age, gender, longstanding illness, wealth, and living with a partner



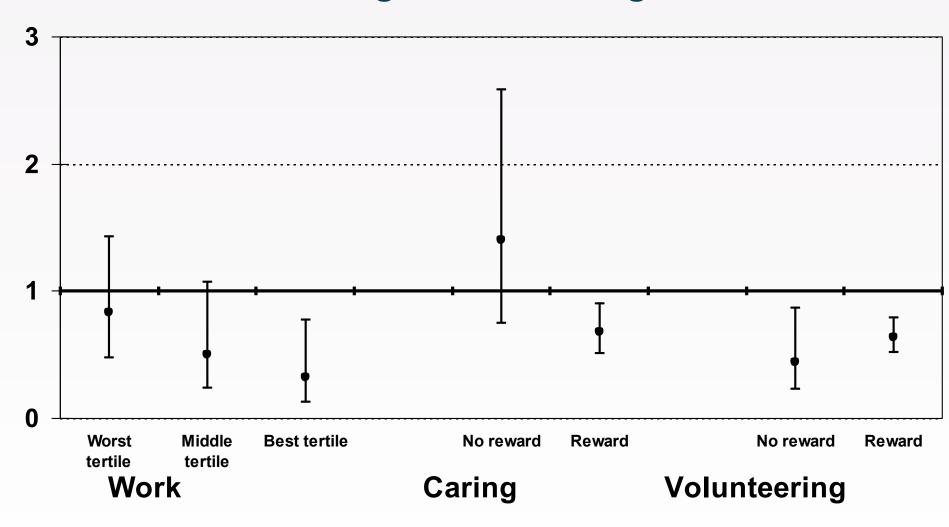
Regression coefficient for life satisfaction by rewards for working, caring & volunteering



Adjusted for age, gender, longstanding illness, wealth, and living with a partner



Odds ratios for depression by rewards for working, caring & volunteering



Adjusted for age, gender, longstanding illness, wealth, and living with a partner



Participation in activity and change in wellbeing

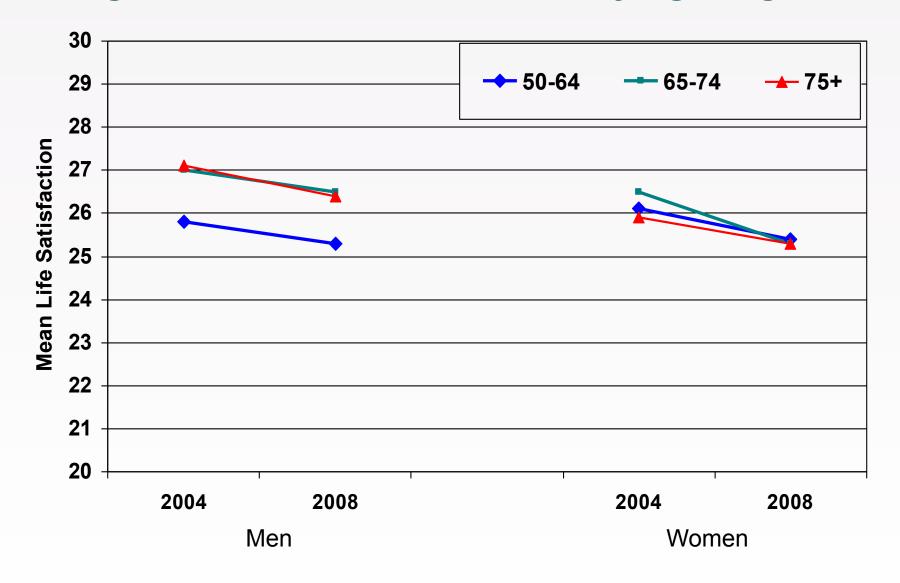
Complete case analysis of participants in both 2004 (wave 2) and 2008 (wave 4)

Life satisfaction: N = 3,542

Quality of life: N = 3,212

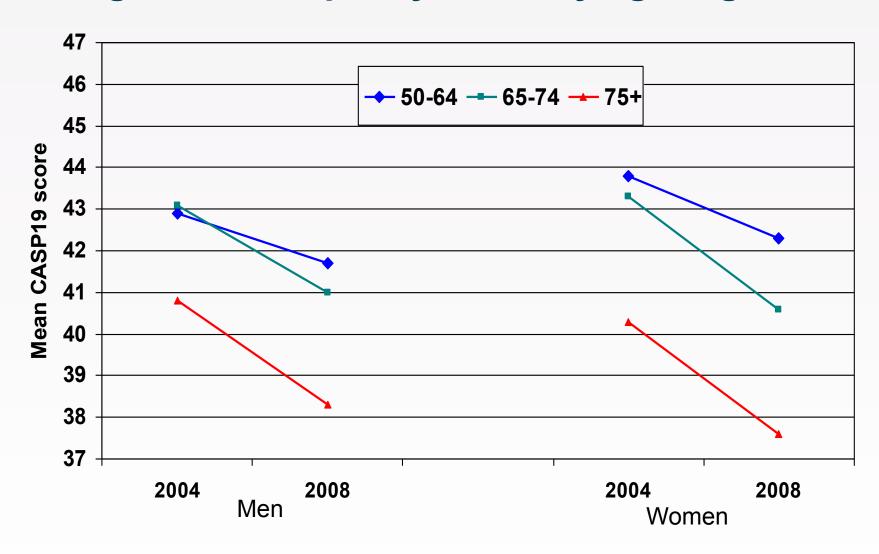


Change in mean life satisfaction by age & gender



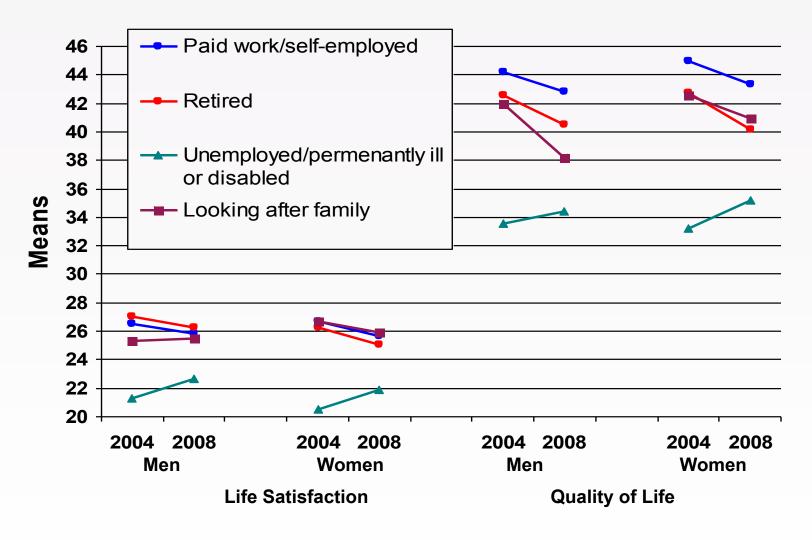


Change in mean quality of life by age & gender



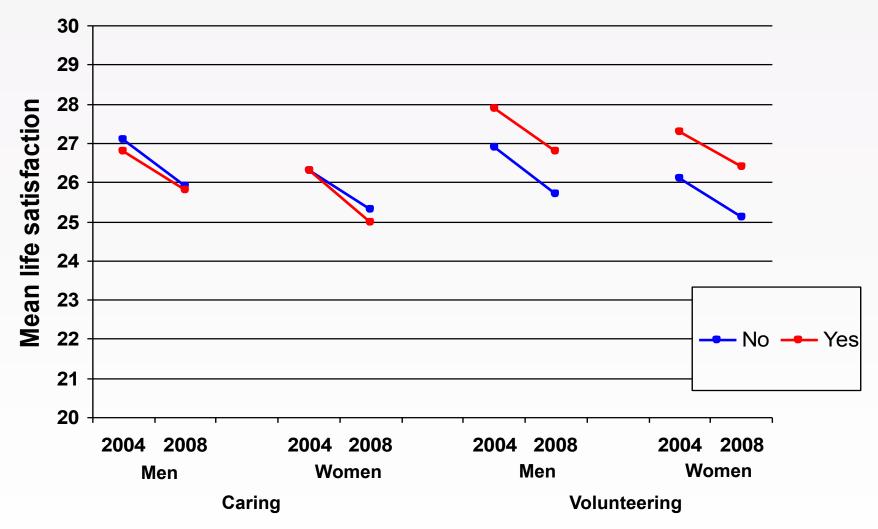


Change in mean life satisfaction and quality of life by work status at baseline in men and women.



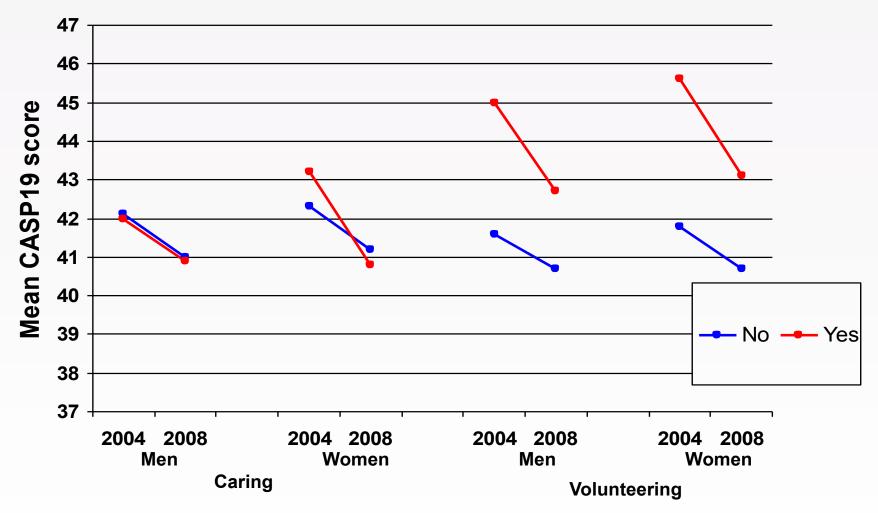


Change in mean life satisfaction by caring and volunteering at baseline in men and women.





Change in mean quality of life by caring and volunteering at baseline in men and women.





Conclusions: Who participates?

- 10-15% in paid employment, caring or volunteering.
- A quarter active members of an organisation.
- Women are significantly more likely than men to be caring or volunteering.
- Gender differences in rewards from caring
- Younger, wealthier people more likely to participate in activities.
- Well people more likely to be volunteering or in paid work independent of age.



Conclusions: Volunteering & Wellbeing

- Higher quality of life & lower likelihood of depressive symptoms for men & women.
- Greater life satisfaction for women only.
- Life satisfaction decreases at same rate regardless of whether volunteering.
- Decreases in quality of life greater for volunteers that non-volunteers!
- Volunteering = higher quality of life and life satisfaction only for those who feel rewarded.
- Volunteers less likely to have depressive symptoms regardless of rewards.



Conclusions: Paid Work & Wellbeing

- Higher quality of life & life satisfaction for men, but not women.
- Not associated with depressive symptoms.
- Decreases in wellbeing same for those in paid work and retirees.
- Paid work = higher quality of life and life satisfaction only for those who feel rewarded.



Conclusions: Caring & Wellbeing

- Amongst women, caregivers less likely to have depressive symptoms than non-carers.
- Life satisfaction decreases at same rate regardless of whether caring for both men and women.
- Greater decrease in quality of life for caregivers compared with noncaregivers amongst women.
- Lower likelihood of depressive symptoms only amongst caregivers who feel rewarded.
- Lack of reward from caring = lower quality of life & life satisfaction.



Caveats & Next steps

Caveat: Many life course predictors of both participation and wellbeing have occurred before the age of 50

Some next steps:

The impact of reciprocity/reward longitudinally

The impact on wellbeing of activity transitions

Thank you





CASP19 ITEMS

Control

My age prevents me from doing the things I would like to.

I feel that what happens to me is out of my control.

I feel free to plan for the future.

I feel left out of things.

Autonomy

I do the things that I want to do.

Family responsibilities prevent me from doing what I want to do.

I feel that I can please myself what I do.

My health stops me from doing things I want to do.

Shortage of money stops me from doing the things I want to do.

Self-realization

I look forward to each day.

I feel that my life has meaning.

I enjoy the things that I do.

I enjoy being in the company of other.

On balance, I look back on my life with a sense of happiness.

Pleasure

I feel full of energy these days.

I choose to do things that I have never done before.

I feel satisfied with the way my life has turned out.

I feel that life is full of opportunities.

I feel that the future looks good for me.