# Coexisting Disadvantages during the Life course and Late Life Social Exclusion

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## Background and aim

In recent years, the concept of social exclusion has received renewed attention in scientific research concerning inequalities, as well as in social policies, in all European countries. Social exclusion is a situation or process preventing individuals or groups from participating fully in society, and derives from multidimensional deprivation in several domains of life, economic, social and institutional (e.g., Pirani, 2013). As the various components of personal wellbeing – e.g., employment, education, health, housing, and security – are interrelated, so are their deficiencies, which may lead to *cumulative* or *coexisting disadvantage* (Bäckman and Nilsson 2011; Heap, Lennartsson, and Thorslund 2013), and indeed disadvantages in different life domains tend to appear simultaneously and mutually reinforce.

When considering the life course as an aging process where life outcomes are shaped by experiences and resources acquired earlier in the biography of individuals (Elder, Kirkpatrick Johnson, and Crosnoe 2003), one may posit that early and middle age life conditions can have long term consequences extending to adulthood and late life. This process may lead to an accumulation and persistence of disadvantages throughout the life course, entailing a lack of resources necessary to cope with the challenges arising with ageing and finally to social exclusion in later life. In addition, ageing *per se* exposes individuals to exclusionary forces, such as the loss of the active worker role, the contraction of social support networks, and most importantly, age-related health declines (Walsh, Scharf, and Keating 2017). Age-related exclusionary forces are reinforced by the life course of individuals, as the experience of (coexisting) disadvantages.

In this paper we analyze how disadvantages in various life domains experienced earlier in life (youth and adulthood) structure the condition of social exclusion in one's late age, specifically focusing on two dimensions, social and material deprivation. Exploiting longitudinal information, we investigate the appearance and persistence of coexisting disadvantages during one's life course. We extend the analysis by taking into account possible gender and cross-country differences.

#### **Data and Methods**

The present study employs 3 waves of the Survey of Health, Ageing, and Retirement in Europe (SHARE). First, we referred to Wave 5 (i.e., the survey carried out in 2013), the only one with a special module on social exclusion, to select our reference sample and measure the two selected dimensions of social exclusion, social and material deprivation.

The two indexes of social and material deprivation, our dependent variables, range between 0 (not deprived) and 1 (severely deprived). Social deprivation combines information on everyday life, social

activities, quality of neighborhood and social trust (Myck, Najsztub, and Oczkowska 2015). Material deprivation refers to the economic circumstances of the household, such as the ability to afford specific expenditure items (e.g., groceries and holidays), the need to limit expenses on necessities such as clothing and heating, and the inability to see a doctor because of costs (Adena, Myck, and Oczkowska 2015).

As we are interested in investigating how the two dimensions of social exclusion are associated with the experience of coexisting disadvantages during the life course, we then exploited Wave 3 (2009) and Wave 7 (2017), the so-called SHARELIFE waves, which include retrospective information of our target population, with a special focus on their disadvantages in the age range from 25 to 59 years. This key independent variable was operationalized as follows. For each individual selected in Wave 5 we retrieved retrospective information between 25 and 59 years old, considering possible disadvantages experienced in five different life domains. The respondents were asked whether, during the life course, they ever experienced one or more periods of (i) illness (ii) severe stress (iii) financial hardship (iv) hunger (v) employment interruptions (looking after home/family, or unemployment). In case they did, they were asked to indicate the beginning and end year of the stress period. Therefore, for each age of the life course of our respondents, we were able to calculate how many of these five disadvantages had been experienced simultaneously, from a minimum of 0 (none) to a maximum of 5 (all of them together). We then performed sequence analysis, with optimal matching technique, on these life histories, to group individuals with similar experiences life course disadvantages, in terms of coexistence and persistence (Figure 1). The first group, labelled "(Almost) No disadvantage" includes those who experienced little or no disadvantage during the life course. The "Transitory" group includes all those who reported short spells of disadvantage. In the other three groups, the persistence and coexistence of disadvantages increases progressively: while the "Recurrent" and "Persistent" groups include people who mainly experienced two to five episodes, especially in their middle age, the "Lifelong Persistent" group has a life course where several disadvantages cumulated throughout youth and adulthood. In line with the coexisting disadvantage framework, it seems that overall disadvantage never comes alone: beside individuals who almost never experienced disadvantage, substantially the first group (one third of the sample), we found that in most of the cases people experienced two or more disadvantages simultaneously, even if in different moments of the life course and for different duration.

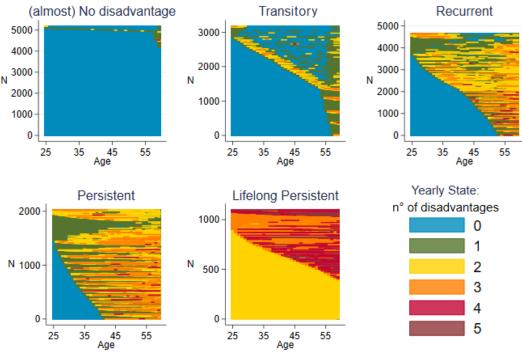
Our final sample includes individuals aged between 60 and 69 years in 2013 – 8,832 women and 7,319 men – from several European countries.<sup>3</sup> The model specification for social/material deprivation in year 2013 among these people also included, beside these types of life histories, several socio-demographic controls, measured in 2013: age, educational level, employment status, whether the respondent has a partner, subjective health status, household size, home ownership, and country of residence. In this exploratory version, analysis was performed through linear regression models, separately by gender.

<sup>&</sup>lt;sup>1</sup> The items used to build the material deprivation index are: (i) less than one room per household member (ii) poor reading or writing skills (iii) poor computer skills (iv) not feeling part of the local area (v) vandalism is a problem in the local area (vi) Local area is not clean (vii) no helpful people in the local area (viii) having difficulties to access: bank, grocery shop, pharmacy, GP (ix) waiting too long to see a doctor (x) not attending any course or club (xi) not taking part in any organization (xii) not trusting people (xiii) feeling left out of things.

<sup>&</sup>lt;sup>2</sup> The items used to build the material deprivation index are: (i) the affordability of: Meat/fish/chicken, Fruits/vegetables, An unexpected expense, A week-long vacation once a year, Regular grocery shopping (ii) keeping living costs down by Reducing heating, Wearing worn-out shoes, Wearing worn-out clothes, Not replacing glasses, Postponing dentist, Postponing doctor (iii) having payment arrears (iv) Lack of money prevents oneself from doing things that she would like to do.

<sup>&</sup>lt;sup>3</sup> Our analysis includes: Germany, the Netherlands, France, Switzerland, Belgium, Luxemburg, Sweden, Denmark, Italy, Spain, Czech Republic, Slovenia, and Estonia.

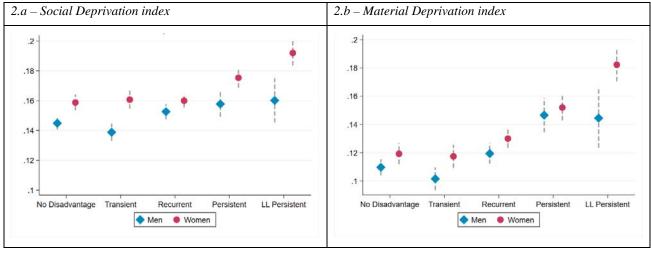
Figure 1. Groups of life histories identified according to coexisting disadvantages during the life course. Results from sequence analysis with optimal matching technique.



## **Preliminary results**

Figure 2 shows our predicted scores of social and material deprivation, by gender and "past disadvantage" group. Perhaps not surprisingly, the path is similar: in both cases women are more deprived than men, and both deprivation and gender gap increase across levels of past disadvantage.

Figure 2. Association between Social/Material Deprivation and coexisting disadvantages during life course, by gender: predicted scores of social/material deprivation for the identified groups of life histories. (2013, European people aged 60-69 years. Results from OLS regression models, net of control variables - see text).



As for social deprivation in late life (Figure 2.a), we found that for women the two most disadvantaged groups, the "Persistent" and the "LL Persistent", are almost 3 percentage points more deprived than the "No disadvantage", "Transitory", and "Recurrent" ones. As for men, differences are less marked across "past disadvantage" groups.

Similarly, the more the disadvantages cumulated and coexisting during the life course, the more materially deprived individuals are in late life (Figure 2.b). In this case, the gender gap is particularly relevant for the most disadvantaged group (the "LL Persistent"): for those women who had several coexisting disadvantages all over the life course, the score of material deprivation is around 3 percentage points higher than for the male counterparts.

In the future of the analysis, we will also explore differences in social/material deprivation depending on the country of residence. European countries differ strongly in the extent to which their (elderly) population is socially excluded, with Southern and Eastern European countries scoring the worst (e.g., Pirani, 2013); these differences may be mainly explained by the level of income inequality in the country, but also via institutional arrangements, such as the way in which the welfare system is structured (Jehoel-Gijsbers and Vrooman 2008). It could thus be expected that previous life course disadvantage is especially related to deprivation in the countries where the welfare system is particularly unbalanced in favor of some specific population segments (e.g., the elderly) and disregards other phases of life, for instance young and adulthood.

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