

**Written evidence submitted by the Advanced Care Research Centre, University of
Edinburgh (SPA0012)**

Inquiry: Transition to State Pension Age

The Advanced Care Research Centre is a multi-disciplinary research programme at the University of Edinburgh focused on examining health and social care needs in later life. Its aim is to facilitate dignified, independent living among older adults by bringing together

A. Executive Summary

A.1 Among pre-pensioners (individuals aged 60-66), there are large sections of the population living in frail health and precarious financial circumstances. In the poorest quintile of older adults, the average pre-pensioner is already classed as 'frail'. Many of these individuals are still in the labour market despite ill-health, with 24% of the poorest pre-pensioners working while pre-frail or frail.

A.2 Deferring access to the State Pension to 67 therefore leaves large numbers of older adults facing further economic vulnerability and pressure to remain in work even when frail. Their needs must be taken into account when designing policies to support the transition to pension age.

A.3 Pre-pensioners often experience precarious income trajectories. Around retirement, low or unstable incomes are not only determined by financial circumstances such as access to a private or occupational pension, but also factors such as experiencing divorce or renting in later life. These broader factors need to be considered when identifying groups that may benefit from financial support in the transition to pension age.

A.4 In the longer term, the current policy trajectory of deferring the State Pension Age while encouraging older adults to remain in the labour market is going to have to confront the reality that many individuals reach a state of frailty before they reach the State Pension Age. Without dealing with these substantial health problems, particularly in the poorest groups, delaying access to the State Pension while expecting individuals to remain in employment will increase rates of poverty and out-of-work sickness among older adults.

expertise from medicine, social science, data science and engineering.

B. Are there particular characteristics of the 60 to 66 age group to take account of in assessing how policies support the transition to pension age?

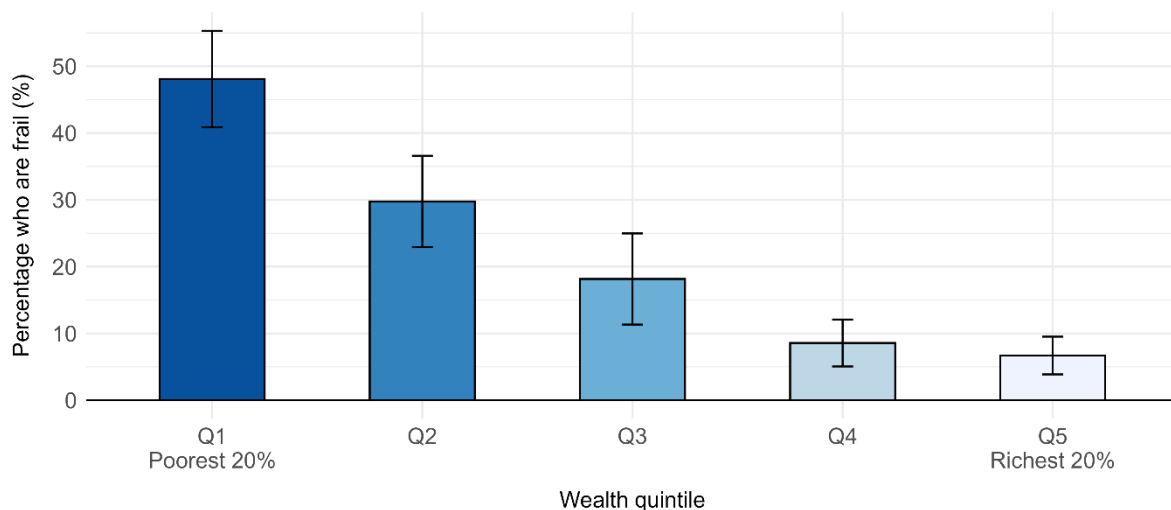
B.1 Frailty and Work in Pre-Pensioners:

B.1.1: Our research shows that significant sections of the population reach a state of frailty before they reach the State Pension Age (SPA). Frailty is a marker of general health decline in later life and frail individuals are vulnerable to significant deterioration in their physical and cognitive functioning. It is estimated to account for £6 billion of NHS spending each year¹. We created a well-known Frailty Index in the English Longitudinal Study of Ageing dataset, which is a nationally representative sample of older adults in England. Looking at pre-pensioners (individuals aged 60-66), we found that in the lowest wealth quintile (i.e., the poorest 20%), almost half of people are classed as frail (see Figure 1). What is more, when considering the average Frailty Index value, the mean in the poorest pre-pensioners was already above the threshold for frailty.

B.1.2: This onset of frailty before SPA for the most deprived groups comes in the context of an acceleration over recent years in how fast individuals develop frailty, which our research has shown coincided with the period of fiscal austerity². More broadly, this finding of a stark disparity in the onset of frailty mirrors the substantial inequalities in life expectancy which mean that, as well as reaching frailty before they reach the SPA, the most deprived groups

Figure 1: Frailty Prevalence in Pre-Pensioners by Wealth Quintile

48.1% of pre-pensioners in the poorest quintile are frail, compared to 6.7% among the richest quintile



N = 1193
Source: English Longitudinal Study of Ageing, Wave 10 (conducted 2021/2022)
Differences across wealth quintiles are statistically significant at $p < 0.001$
Error bars represent 95% confidence intervals
Frail defined as having a Frailty Index ≥ 0.2
Pre-pensioners defined as individuals aged 60-66
Wealth quintiles measured at the benefit-unit level using Institute for Fiscal Studies derived variable

¹ NIHR 2025, *New NIHR-funded tool that predicts frailty could save the NHS millions*, NIHR, Available at: <https://www.nihr.ac.uk/news/new-nihr-funded-tool-predicts-frailty-could-save-nhs-millions>

² Pugh 2024, *Frailty before and during austerity: A time series analysis of the English Longitudinal Study of Ageing 2002–2018*, PLOS One, Available at: <https://doi.org/10.1371/journal.pone.0296014>

can also expect to live significantly fewer years post-SPA compared to the most affluent groups³.

B.1.3: When assessing policies to support the transition to pension age, the government needs to take account of the fact that many of the poorest individuals are already in a state of frail health. Therefore, focusing policies around keeping older adults in work will not necessarily be effective, as many will be unable to work, or such policies will do further harm to individuals' health by keeping them in work despite having substantial health problems. Our analysis suggests that amongst the poorest groups, there are already large numbers of pre-pensioners who are working while classed as frail or pre-frail – 24.1% in the poorest quintile and 9.9% in the richest quintile. Evidence from previous pensions reforms in the United Kingdom shows that, while the deferral of the SPA meant many did remain in work, this was also associated with increased health problems^{4,5} and increased need for disability benefits⁶.

B.1.4: The government's current policies around supporting the transition to the new SPA are focused on keeping older adults in work, but this does not match up with the reality that large sections of the population are reaching states of severely poor health before they reach pension age.

B.1.5: Recommendation: *As the SPA is now increased to 67, policies supporting the transition to pension age must go beyond encouraging the affected age groups to remain in employment and should consider the financial needs of those who cannot work or for whom remaining in work would harm their health. This could include earlier access to the State Pension for financially vulnerable groups or those in poor health.*

B.2 Precarious Incomes around Retirement:

B.2.1: As well as experiencing frailty, our research shows that many older adults experience precarious income trajectories around retirement. We analysed detailed income data from over 13,000 older adults in the English Longitudinal Study of Ageing, spanning the period from 2002 to 2019⁷. Our analysis identified a number of characteristics that were associated with low or unstable incomes around retirement and that would therefore be pertinent when identifying target groups for policies supporting the transition to pension age.

³ ONS 2025, *Healthy life expectancy by national area deprivation, England and Wales*, Office for National Statistics, Available at:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthinequalities/bulletins/healthylifeexpectancybynationalareadeprivationenglandandwales/between2013to2015and2020to2022>

⁴ Carrino et al. 2020, *Later retirement, job strain, and health: Evidence from the new State Pension age in the United Kingdom*, Health Economics, Available at: <https://doi.org/10.1002/hec.4025>

⁵ Della Giusta and Longhi 2021, *Stung by pension reforms: The unequal impact of changes in state pension age on UK women and their partners*, Labour Economics, Available at:

<https://doi.org/10.1016/j.labeco.2021.102049>

⁶ Institute for Fiscal Studies 2025, *Do disability benefit claims rise when other benefits are cut?*, Institute for Fiscal Studies, Available at: <https://ifs.org.uk/publications/do-disability-benefit-claims-rise-when-other-benefits-are-cut>

⁷ Marshall et al. 2024, *Income trajectories and precarity in later life*, Journal of Population Ageing, Available at: <https://doi.org/10.1007/s12062-023-09437-2>

B.2.2: As might be expected, factors such as working in a routine occupation, lower levels of education and lacking access to a private pension were all associated with low income. However, beyond these immediate determinants, broader factors also elevated the risk of falling into a low-income group. Compared to those who own their home, individuals who were renting in later life had more than double the risk of having a low income, even when controlling for other socio-economic factors. This is concerning given a stark increase in the numbers of people who never become homeowners and continue to rent into later life⁸. Paying rent in later life represents a substantial additional financial burden, with a third of older renters being in poverty after housing costs⁹.

B.2.3: Our analysis also showed that being divorced or separated more than doubled the risk of having a low-income trajectory. The magnitude of this effect was comparable to that of having no qualifications compared to having a degree. This negative impact of divorce/separation, along with less access to personal pensions, also accounted for the increased risk of low incomes amongst women compared to men.

B.2.4: This analysis shows that a number of factors can contribute towards individuals having precarious income trajectories around retirement, and that these factors go beyond immediate financial determinants. The loss of income represented by the increase of the SPA to 67 is likely to put further strain on these especially vulnerable groups.

B.2.4: Recommendation: *Policies supporting the transition to pension age need to respond to the needs of older renters and those experiencing divorce/separation in later life, who are at substantially higher risk of having low incomes around retirement.*

C. Acknowledgments

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⁸ Age UK 2023, *Home-truths – Why older renters need more security*, Age UK, Available at: <https://www.ageuk.org.uk/siteassets/documents/reports-and-publications/reports-and-briefings/home-truths/home-truths---why-older-renters-need-more-security.pdf>

⁹ Ibid.