From Early to Later Life

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Increasing longevity is one of the most remarkable successes in history. As shown by the WHO (2018), for the first time in the history, life expectancy at birth has reached 60 years and in the next 30 years more than 2 billion people will be aged 60 years or older.

Although a longer life brings with it opportunities (not only for older people themselves but also for their family and society as a whole), it also raises important social and economic challenges. As well as the predictable pressure on pension systems, there is the risk of a demographically-driven macroeconomic slowdown. Potentially, longer lives could mean increased vulnerability to chronic disease and disability, which generates demand for health and social care. To address this pressure on services, it will be necessary to improve health on a population scale and across the entire life course. Many researchers around the world are studying this phenomenon and, together with governments and institutions, are looking for concrete solutions and policies that would make healthy ageing a reality for the majority of the population.

Over the past 30 years, the life course approach has become mainstream to seeking these solutions. The following criteria of the life course perspective have attracted the interest of sociologists, anthropologists, demographers, economists and psychologists. First, the life course perspective considers changes in human lives over a long stretch of a lifetime (such as from childhood to old age) and not just particular episodes. This leads to the strong assumption, used often in research on ageing, that prior life history has a significant impact on later life outcomes. Second, changes in human lives are analysed across several cohorts and this enables the analysis of both life-time and historical time. Third, changes in human lives are investigated across life domains (such as work and family), making this approach interdisciplinary. Fourth, the life course is studied as a combination of personal characteristics, individual actions, cultural frames and structural conditions, where micro, meso and macro levels of analysis interact.

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In this way, the life course perspective identifies ageing as a life-span phenomenon and recognises influences that happened before birth. Some of these influences are genetics, as acknowledge by Rowe and Kahn (1987). Others are environmental and economic (Ferraro et al. 2009). Taking into consideration these factors is crucial to understand the late-life outcomes and to develop the potential interventions to improve the lives of individuals in later years.

Research has suggested that the pathways through which early experiences affect later life outcomes can be organised in three life course models (Hendricks 2012). Early life conditions may affect ageing directly over time if they occur during a critical period of development. The timing of exposure may yield powerful consequences for subsequent development and may affect the efficacy of the later intervention (Elder et al. 2003). Cumulative exposure operates differently from processes noted in the previous model, but it also leads to outcomes that are embedded in individuals' experiences and not easily modified. Finally, early conditions and events may influence later outcomes by shaping intermediate life situations, conditions and roles that affect later-life outcomes.

These models present similarities and differences but they are strongly interrelated. They all contribute to the general life course approach and they all include the use of longitudinal studies, which are the only data which allow us to track and measure changes over time in large numbers of individuals. This is how they help us to disentangle the complexity of the ageing phenomenon and to gain new insights into the ageing process. Our ability to improve the effectiveness of policies for healthy ageing is dependent on such insights.

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