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Original Research

Social Exclusion in Gerontological Social Work: Examining Older Clients' Life Situations Through a Multidimensional Framework

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Abstract: Social exclusion is one of the key challenges faced by aging societies and a critical driver of the need for gerontological social work. This article examines social exclusion in gerontological social work from the perspective of social workers' perceptions of older clients' challenging life situations in Finland. The study utilizes a multidimensional framework of social exclusion, dividing it into five interconnected domains: exclusion from social relations, economic exclusion, exclusion from services, community and spatial exclusion, and civic exclusion. The data consists of seven online focus group interviews with twenty-two social workers and is analyzed using theory-driven content analysis. The results show that all five domains of social exclusion were embedded in the social workers' perceptions of older clients' challenging life situations. The domains were interconnected and overlapping, and in some cases, older clients were excluded from multiple domains building into complex needs. The findings provide a new understanding of the diverse disadvantages that older adults often experience and can be utilized when developing practices and interventions of gerontological social work.

Keywords: *Social Exclusion, Gerontological Social Work, Older Adults*

Introduction

Social exclusion in later life has been identified as one of the key challenges faced by aging societies (Scharf and Keating 2012; also see European Commission 2021). This identification has raised a question about how services, such as gerontological social work, can respond to social change and the growing social needs of the older population. At the same time, social work with older adults has not yet reached an established position, and its status and role vary significantly by country and local contexts (Grenier and Sussman 2023). Moreover, the focus of gerontological social work has often been on care and health needs instead of responding to the wide variety of aging experiences related to social problems (Seppänen and Ray 2023). In this article, we aim to increase understanding of the challenging life situations faced by older adults receiving services of gerontological social work. For this, we utilize a

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multidimensional framework of social exclusion in later life (Walsh et al. 2021) through which we examine Finnish gerontological social workers' perceptions of older clients' challenging life situations.

Although the concept of social exclusion has been seen as a potential term of analysis for social work (Washington and Paylor 1998), there have been different understandings and definitions (Davidsson and Pettersson 2018), and it has been rarely used in the context of gerontological social work. In its simplest form, social exclusion can be considered the separation of individuals and groups from mainstream society (Moffatt and Glasgow 2009). In social work research, social exclusion has often been connected to other related concepts like vulnerability and marginalization (Virokannas et al. 2020; Närhi 2002). Some researchers do not distinguish between social exclusion and marginalization (Närhi 2002), while others connect social exclusion to political discourses, seeing it more as a way to categorize and stigmatize people (Kuronen 2022). However, all these concepts include common traits as they refer to complex life situations seen and understood as multidimensional and dynamic phenomena.

Like in many other countries, in Finland, the aims of gerontological social work have been to ensure and enhance the well-being and quality of life of older adults and their families, support older adults' capabilities, and resolve social problems that impact their everyday lives (Pöyhönen and Seppänen, 2016; Rossi et al., 2018). Moreover, emphasis has been placed on practices through which social workers make visible the structural inequalities and disadvantages in older age, thereby acting as catalysts for the empowerment of older adults (Rossi et. al., 2022; Ray and Seppänen, 2017). Similar aims have been outlined in international research, where gerontological social work has been described as a means to reduce inequalities and enhance the rights and inclusion of older adults across diverse and often marginalized social locations (Swinford et al. 2020; Azulai et al. 2022; Donnelly and Torres 2023).

Finland is one of the Nordic countries wherein the state-centered welfare model has been strong and has remained so despite large reforms in social and health care services. In Finland, the public sector has held a significant role in elder care, especially in gerontological social work, which is currently provided by regional wellbeing services counties funded by the state. The state's role is also strong in the setting of requirements for services: what and in which terms different services must be provided for older adults are stipulated by legislation on social welfare and elder care. In Finland, the eligibility criteria regarding access to a qualified social worker has been limited to older adults who have a range complex needs (see also Ray et al. 2015; Azulai et al. 2022). In practice, the definition and assessment of older adults' "complex needs" have been ambiguous leading to the risk of inadequate support (Kinni and Tiilikainen 2024). Hence, more multifaceted means are needed to elucidate the diverse life situations of older adults and how they develop the need for gerontological social work. The framework of social exclusion offers a useful tool to make these multidimensional and dynamic processes visible.

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Multidimensional Framework to Later Life Social Exclusion

The multidimensional framework of social exclusion in later life as used in this study divides social exclusion into five interconnected domains. Economic exclusion refers to poor material conditions and lack of financial resources. Exclusion from social relations is understood as disconnectedness, inadequate levels and quality of intimate relationships, social networks, social support, and social participation. Exclusion from services refers to challenges in access and use of services, as well as the appropriateness of the service infrastructure. The domain of community and spatial exclusion is connected to amenities and built environment, safety and sense of belonging. The fifth domain, civic exclusion, involves barriers to societal participation and symbolic aspects of exclusion, such as ageism and discrimination. (Walsh et al. 2021.)

Evidence from existing research shows that older adults can experience exclusion in one of these domains or a number of these domains simultaneously (Scharf et al., 2005; Van Regenmortel et al. 2018). In addition, disadvantages in one domain are often interrelated with disadvantages in other domains (Dahlberg 2021). For instance, outcomes in one domain can contribute to or trigger other forms of exclusion (MacLeod et al. 2019). The highest levels of social exclusion have been found in older adults who do not receive adequate help or care in their daily lives (Dahlberg and McKee 2016). Moreover, it is known that older adults are often affected by social exclusion for a longer period than those in younger age groups (Scharf and Keating 2012).

There are several factors that can lead to exclusion in later life, including the uncertainties and changes that come with aging and the ways in which older adults are considered, treated and represented within societal structures, norms and polices (Scharf and Keating 2012). However, some older adults are more at risk of social exclusion than others. These risk groups include older adults experiencing critical life transitions and those who belong to minority groups (Walsh et al. 2017), as well as people with accumulated disadvantages, such as family disruptions, poverty, and ill health in earlier life phases (Kamiya et al., 2014). Considering such risk factors, it is important to note that later-life outcomes are not simply individual consequences but also the consequences of a complex interrelationship between structural, cultural, and interactional processes (Van Regenmortel et al. 2018).

Previous research has examined social exclusion in later life across community-dwelling older adults (Paine et al. 2022; Van Regenmortel et. al. 2018) and older adults in long-term care facilities (Villar et al. 2021). To our knowledge, the multidimensional framework of social exclusion in later life has not been used in research focusing on gerontological social work. Moreover, in the context of social and health care services, there is a lack of comprehensive understanding of the diverse disadvantages that can take hold in older adults' lives and develop into a need for social work. Using group interview data collected with professionals working in gerontological social work, we examine gerontological social

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workers' perceptions of older clients' challenging life situations and how these reflect the different domains of social exclusion.

Material and Methods

The data used in this study has been collected as part of research project, entitled "Gerontological social work responding to complex needs of older adults" (GERIT), carried out in collaboration with the University of Helsinki, the University of Eastern Finland, and the University of Lapland. The main aim of the project was to explore the emergence and development of the challenging life situations of older adults, how older adults' service needs are recognized within the service system, and how these needs are addressed using methods of gerontological social work

The data consisted of seven audio-recorded focus group interviews with twenty-two social workers. The interviewees were selected based on the following criteria: they worked in public social services and were working with older adults at the time of the interview. All interviewees were women who had studied social work at Finnish universities. The interviewees' work experience in gerontological work varied from a few months up to twenty years. The interviewees worked in four public welfare service organizations in different areas of Finland. According to the Finnish Advisory Board on Research Integrity, ethical committee approval was not needed for this type of study (TENK 2019). Research permissions were applied for and granted from the municipalities where the participants were recruited, and informed consents were obtained from all participants.

Each focus group consisted of two to six social workers and two researchers who moderated the discussion. At least one of the interviewer-researchers was a qualified social worker. Some of the interviewees knew each other before the interview, but most of the social workers participating in the focus groups were not familiar with each other. The method of focus group interview was chosen due to the aims and nature of the study: we were interested in the professionals' shared views (Linhorst 2002; Bloor et al. 2001). The role of the interviewer was to steer the discussion towards specific themes and provide an interview situation where participants are able to share information and compare experiences related to their work. The themes included older clients' life situations and the need for gerontological social work, the success of social work, the relationship between an older client and the social worker, collaboration with other professionals and the site of social work.

The focus group interviews were carried out using an online meeting platform (Microsoft Teams) in June, September, and October of 2021. Online interviews offered the possibility to include professionals working in different parts of Finland in one focus group. We found that this means of inclusion was important for creating opportunities to share information and experiences with colleagues across organizations and geographical contexts. Conducting the focus groups online was also safer due to COVID-19 and more economical than face-to-

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face interviews (Allen 2014). The focus groups' sizes were kept small so that participants would have a better opportunity to respond to questions posed by the researchers and respond to the ideas of other participants. All interview participants kept their videos on so that everyone could see each other's faces and non-verbal communication. Each focus group interview lasted circa two hours and was recorded using a separate voice recorder. Altogether fourteen hours of recording were transcribed verbatim into a total of 156 pages (Times New Roman, font size twelve).

The data were analyzed using theory-driven content analysis. The analysis began with reading the interview transcripts several times. In the second phase, sections of the data wherein social workers describe older adults' challenging life situations were extracted and formed into a new file. In the third phase, analysis was focused on how the different domains of social exclusion were present in the social workers' descriptions related to older adults' challenging life situations. At this point, we grouped the interview excerpts into the five domains included in the theoretical framework: economic exclusion, exclusion from social relations, exclusion from services, community and spatial exclusion, and civic exclusion. These groups formed five analysis themes, and, as anticipated based on previous research, the domains were found to be interrelated and overlapping. In some cases, older adults' challenging life situations were connected to multiple—two or more—domains. This finding led to a sixth analysis theme of multiple exclusion (Table 1).

Table 1: Analysis Themes and Sub-Themes

Exclusion from Social Relations	*Economic Exclusion*	*Exclusion from Services*	*Community and Spatial Exclusion*	*Civic Exclusion*
Lack of close ones and everyday life support	Small pension	Difficulties accessing services (e.g., digitalization)	Poor living conditions	Lack of autonomy
Disrupted family relations	Debts and debt-recovery processes	Complexity of (applying) services	Living in a remote area	Age discrimination
Abusive family relations	Difficulties paying bills	Denied or waiting for services	Changes in living environment	Lack of recognition of social needs
Social isolation and loneliness	Risk of homelessness	Lack of adequate services	Homelessness	
Multiple Exclusion Interconnected and cumulating disadvantages Complex needs				

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In the results section, we examine these themes in more detail using illustrations from the data. The excerpts are identified with the codes "G" and "P" to refer to individual group and participant numbers, respectively.

Results

Exclusion from Social Relations

One of the most dominant forms of social exclusion was exclusion from social relations. The social workers described working with older clients who do not have anyone close to them to help them with practical issues and everyday matters: "There are these lonely clients who do not have that informal carer or friend or cannot take care of things; then they ask for us" (G1, P2). Many clients were perceived as being socially isolated—not having and wanting to be in contact with other people. At the same time, many missed having someone to talk with. Interestingly, loneliness was not seen as a single reason for the need for social work, but it was rather intertwined with social isolation and unmet social support. The reasons for being totally alone were seen to be connected to a client's past life events and circumstances: forced relocations, not having time for raising a family, or investing too much in work life, for example.

Exclusion from social relations was especially evident in situations of functional decline and increased care needs, even in end-of-life care, as shown by following excerpt:

> And there's this growing phenomenon, if you talk about palliative care, then there are these lonely [older persons] or that the relationship has broken off and then when they are about to decease or have deceased, we start looking for who organizes the funeral and where the family members are. (G1, P2)

The social workers described that an older person may have children and grandchildren but may no longer have contact with them. In some cases, the reasons for disruptions in family relations were connected to substance abuse and forms of abuse that had led to a restraining order. The social workers had also faced many older clients who had close ones and family members, but social relations were challenging in different ways. One client group consisted of older couples where the informal carer was burdened and exhausted by the carer role. This exhaustion led to disputes or even abuse between the caregiver and the cared one. Many older clients also experienced different forms of abuse or mistreatment by those close to them, which were described by the social workers as difficult to address:

> And then, I don't know what is the hardest […], but if there are family members who carelessly financially abuse. It is ethically really hard to accept that you are doing that. [The older person] has worked hard to gain assets after war. And for all this

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> hard work, then just suddenly when the person is at a point that they should only enjoy life, then everything is taken. And without conscience, it is really tough for professionality then, I have to say. (G1, P1)

According to the social workers, abuse and mistreatment in social relations took many forms, but the most common was financial abuse—taking the older person's money or controlling its use in different ways. For some older adults, this led to debts and difficulties making ends meet, building into forms of economic exclusion.

Economic Exclusion

Financial challenges were described as highly prevalent in the life situations of older clients. For many older adults, economic exclusion meant a lack of money due to low pensions; high costs of housing; healthcare and medication; and debts and foreclosures. The social workers described economic exclusion as a cumulation of different life events, as the following excerpts show:

> It is [cumulation of problems] a long-term problem. So, there are the past life events. There are, you can see people who have been let go from their jobs in the 1990s economic depression and have stayed [unemployed] and are now 70 or something. They have lost their job and are left penniless without a new job. And then there's debts and pension has been small. (G2, P4)

> Often there is illness that causes financial catastrophe, which leads to many things. And alcohol also in a big role in causing the problems. So, there's no clear answer of what causes them. (G3, P1)

> It can be. Now it comes to mind that in childhood there can also be some form of exclusion. So, it follows through life always. (G3, P2)

For older women who had invested in family life and taken care of children, divorce was described as a life event that led to financial challenges. Having no education and a precarious work life made it difficult to gain financial security in older age. Many of the social workers notes that the guaranteed pension offered by the state was described as too little, and in the case of any sudden expenses, such as hospital visits, the older adults' financial situation easily went downhill. "Even though they have the basic income, they live really tight. And some have to go to breadlines" (G2, P1). The older clients could also have ongoing debt-recovery procedures, which means that they have to allocate part of their small pensions to cover debts from, for example, mortgages, hospital bills, consumer loans, or offences made in their past.

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As shown in the previous section and in the following excerpt, family relations played a role in economic exclusion of older clients:

> Consumer loans have been taken. Wanted to see the world with the husband and taken much [loan] and then the husband has died, and everything is left, tens of grands of loan. And then there are those who have wanted to give preheritance to children and have taken a loan for that. (G5, P2)

According to the social workers, older clients' financial challenges were also connected to limited capabilities. Some older adults did not have the skills or understanding required for paying bills. In some cases, this lack of understanding has led to cuts in electricity and evictions due to unpaid rent. Paying bills on time was also described as difficult due to changes in the services system, particularly the digitalization of bank services. Many older clients were noted as not having the skills to use digital devices, and paying bills physically at the bank was too expensive for them because of increased service costs. We examine exclusion from services in more detail in the following section.

Exclusion from Services

The social workers described how older clients face challenges accessing and receiving the services they need. As for banking, digitalization was seen as a critical driver for older adults' exclusion from services:

> I see that one thing impacting is current society, which has digitalized so much that older adults cannot keep up and get their tasks done. As a social worker, it sometimes feels that it's difficult, and there is a lot more helpless person somewhere there, so that is also causing it [exclusion]. (G1, P4)

The digitalization of services had led to situations where the social workers' older clients could not find information or apply for social and healthcare services on their own. Many of the clients did own a smartphone or computer but lacked digital skills. Accessing services was difficult, even impossible, for those who lived in remote areas where services were not offered nearby. A lack of transportation or other resources often led to a situation where the older adult is left out of services despite his or her needs. Difficulties in accessing services were also connected to issues related to guardianship, as described by one of the interviewees:

> There are these borderline cases I have, where there are some legal issues. With older adults who are cognitively declined, who do not have family members or have an ill spouse who has taken care of things until this point but then gets ill, and how to pay the bills in the bank. It has been overwhelming to organize. You can't do anything else but wait for the guardianship and hurry it up. It has sometimes taken up to a year. It is so long time and things may end up in crisis. (G1, P4)

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In addition to bank services, social and healthcare services were perceived as complex and hard-to-reach for older clients with complex problems. Some older clients have had mental health problems for a long time, up to decades, which led to cumulating disadvantages and difficulties in accessing and receiving services. In addition to a lack of adequate services, the social workers described that some older adults were denied services due to their own actions, such as use of alcohol, aggressive behavior, or anosognosia. In other instances, older adults might refuse help despite a severe crisis in their life. When other service providers, such as home care, give up on a client in such a situation, the task of persuasion was often left to the social workers.

> If it's really clear that the person needs home care or help in financial issues but then the client refuses, then it's always social works' task to solve the barriers. (G4, P2)

> Well I had one example of a man who lived alone. He had psychiatric symptoms and used alcohol to some extent, living conditions were very poor and there were no close networks. Only relative lived abroad, old sister. He was physically in poor shape, and then in addition to other help, he would have needed regular home care visits. Time and time again, I persuaded to contact evaluation of home care services. Then the first time the nurse went for a home care visit, the client said that he doesn't need anything, just go away. [He said] I will do these myself, take care of my legs and do this and that. Then immediately, the home care team informed that he doesn't need or want. And I saw the need so strongly. He was in such poor condition. (G6, P2)

As this section's excerpts show, exclusion from services is not only connected to difficulties faced in accessing adequate services but also the lack acknowledgement of different needs and recognition within the services. Collaboration between different authorities, professionals, and organizations was noted as critical when providing services, as put by one interviewee: "The smoother it is, the better. It raises frustration as a social worker when you are trying to get services, you see that client has needs, but the queues are so long in every healthcare sector that you just don't get it" (G2, P1).

The social workers described that many older adults are turned away or are not heard in social and healthcare services, which may increase distrust and result in clients opting out of help when it is offered. These challenges were also faced in cases related to living conditions, which we examine from the perspective of community and spatial exclusion in the next section.

Community and Spatial Exclusion

In the social workers' interviews, community and spatial exclusion were connected to the socio-material aspect in the everyday life of older clients, especially as it relates to housing.

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Many of the interviewees described poor living conditions: flats and houses that were dirty or did not have proper facilities. These problems were often connected to a lack of financial resources, but it was difficult to find alternative accommodation. Sometimes the older adult did not have enough money to pay the rent and ended up being evicted, leading to acute risk of homelessness and spatial exclusion. Interestingly, the social workers also brought up emotional bonds that the older adults had with their homes despite the poor conditions:

> Comes to mind this example, I must be straight that I have seen many living conditions, and there was this person who was living in such shocking circumstances. I thought that when I get her in another accommodation, it was a clean home and had services and others, but she still missed the old home. Even though she knew that it wasn't possible. It was a change for her to accept that she couldn't live there. (G3, P1)

Another interviewee described being in a similar situation when she was finding ways to get an older client into a new apartment from a remote location with poor living facilities. The older client received an eviction order from the distraint officer. However, he was convinced that it would be cancelled, so he did not want to take any action. This cancellation did eventually occur, but the social worker was doubtful whether the client could manage long in his own home:

> And then I worked my ass off for a few weeks to get him this and this, but then the eviction was cancelled, and he was really happy (laughs). But my strong guess is that when it's autumn we have to return there. He cannot maintain the winter there, but accepting it [is difficult]. It's his life. He has always lived like this, and that's how it is. (G1, P1)

Many older clients, like the one previously described, live in neighborhoods and homes that they have lived in for decades, which fosters a strong sense of belonging. This belonging is not always challenged by living conditions that seem inadequate from a professional's perspective. The social workers described having to balance the older clients' wishes with the risks that impacted not only the older person but also neighbors, such as the risks of fire or pests. In addition, spatial and community exclusion was connected to functional disabilities that made it a challenge for clients to move inside and outside their homes. Having poor vision or physical disabilities led to exclusion from the community and surrounding environment, especially if the older person did not receive help from other people. Subsequently, some older adults described in the interviews were bound to their homes, which led to increased needs for support and assistance. For such clients with no informal carers or family members, professionals of social and healthcare services were the only ones able to help with daily living.

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Civic Exclusion

Elements of civic exclusion were also found in the social workers' descriptions. As shown in the previous sections, the question of self-determination was often present when working with older clients. In many cases, the social workers described balancing the older adults' choices and decisions with the professionals' views of the clients' needs. Older adults' autonomy was highly emphasized by saying that help was given "not by force" (G5, P2). On the other hand, some of the social workers described how ~~that~~ lack of resources and willingness to negotiate may lead to neglect – a form of civic exclusion – if the older adult is left without adequate help.

In addition to individual factors, the social workers described how older clients' life situations are impacted by age discrimination, which was found to be widely present in society, particularly at the policy and service level. "Unfortunately, an older adult is not on the priority list in healthcare" (G2, P1), one of the interviewees stated. The fact that older adults are not prioritized in the services system was seen to be connected to the general attitudes towards later life and the aging population:

> The status of older adults and their services is so subsidiary. […] If you think coldly and mathematically and economically, it is the part of society that doesn't provide us anymore. They are only regarded as expenses. And it unfortunately shows. […] I am not saying that it's single professionals or groups of professionals that cannot encounter older adults but rather it's the structures that are built like that. There are no resources so it's not possible. (G2, P3)

Generally, forms of civic exclusion were present in the social workers' descriptions of how older adults' needs were recognized and perceived in society. According to the interviewees, older adults' needs are often medicalized, which has led to a situation where both their social problems and the need for gerontological social work are not acknowledged well enough. The following excerpt elaborates on this idea:

> Attention should be turned to the fact that older adults are not only those who need care. They need good care, of course. But that's not the only thing. Older adults have other needs as well. And in any case, what is their position in society, they are not just objects of care and treatment but also other actors of society as well. It's been said that there should be more resources in care facilities. Well, what about the other domains of life than the care […] They have other needs, that's the thing. (G2, P4)

The social workers' acknowledgment that older adults' needs are often being reduced to only health-care related needs indicates forms of institutional and societal ageism. Based on our

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analysis, ageism was a critical driver in civic exclusion, but it was also more widely present across the domains of exclusion impacting older adults' opportunities to participate in society.

Multiple Exclusion: Manifesting Complex Needs

The domains of social exclusion described in previous sections could accumulate in individual older adults' lives, and we found this form of multiple exclusion in the social workers' descriptions. Oftentimes, an older adult would come into the service system with one issue, but after assessing the client's life situation, the issue was found to be impacted by several things, such as poor health, financial problems, and abusive relationships. Specifically, challenges in living conditions were often connected with mental health problems. These multiple needs were often missed in the first needs assessments done in care management and came up later when a professional started to work with the older adult. The complexity of a client's life situations and their multiple needs is described especially well by one of the social workers:

> Well, I met one client yesterday. [..] He did not have any friends or carers in the world. He said that everyone had died. Close ones had died. He had a cat he considers close. This cat is the most important in the world, and they are going to die together. This client has had big financial challenges for a long time. He has big health problems. He hasn't received services he has applied for. He believes that he has the right to some services, but the criteria is not met. He has difficulties walking due to the illnesses, and he very clearly states that he has mental health problems; he has tried, he has been suicidal. But then he has been saved in the last moment. The biggest barriers are the financial problems. Then he has insecurity, and he has started to hurdle and there has been clean ups. He doesn't manage the applications. He doesn't have a smartphone, doesn't have a computer. Taking care of things is difficult. He has many problems, for example with teeth. […] In every direction there is a problem. And I wonder how to ease this situation. (G2, P4)

Many of the social workers described working with older clients with complex needs as being the core of gerontological social work. As evident in the above excerpt, these clients were older adults with problematic life situations and long-term, cumulative disadvantages that have not been addressed by other services. For older clients whose life situations were embedded in multiple domains of social exclusion, gerontological social work was seen to offer the possibility to work with the older adult's life challenges in a more comprehensive way.

Discussion

The multidimensional framework of social exclusion in later life has been found to be useful for providing understanding of the diverse disadvantages of older adults and how these older

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adults are impacted by the multiple domains of life and society (Walsh et al. 2021). This impact was evident in our analysis where we examined gerontological social workers' perceptions of older clients' challenging life situations. Following our theoretical framework, all five domains of social exclusion were found in the data. In addition, the social workers described a form of multiple exclusion where the older client's life situation manifested complex needs that intertwined several domains of exclusion. In previous studies, this intertwining has been referred to as multiple or deep exclusion (Dahlberg 2021), but, to our knowledge, multidimensional exclusion has not been examined in the context of gerontological social work or from the perspective of complex needs.

Our findings show that older clients' life situations are impacted by disadvantages in different spheres of life, such as social relations, financial situations, health, and living conditions. Our findings also show that these spheres are often closely intertwined or interconnected. This interconnection was especially evident from the perspective of economic exclusion, which impacts the older adults' possibilities to access adequate services and receive the support they need. However, economic exclusion itself was impacted by social relations, as seen in instances of financial abuse and dependency of adult children (see also Kinni et al. 2023). Importantly, the older clients' life situations were found to be influenced by earlier life phases, such as precious work and family life (Grenier 2021), emphasizing the need to examine social exclusion in later life from a life-course perspective. As our findings indicate, working with an older client calls for the understanding of older adults' unique life histories and how inequalities develop over time (Seppänen and Ray 2023).

The framework of social exclusion acknowledges the life-course features of older age disadvantage, including cumulative inequalities and the changes that occur and impact the processes of exclusion over the course of a life (Walsh et al. 2017). These disadvantages can be a result of individual life experiences and critical life events, such as bereavement, falling ill, and relocation. Cumulative disadvantages can also arise for older adults who belong to a racialized group, identify as a sexual minority, live with a disability, or have low income and education levels. To date, studies linking theories of intersectionality (see Calasanti and Kiecolt 2012) and social exclusion have been scarce; however, as noted by Serrat et al. (2021), the acknowledgement of diverse social positions and their non-additive effects on later life inequalities should be a key priority in future research related to exclusion. Here, utilizing an intersectional life course perspective (Ferrer et al. 2017; Holman and Walker 2021) could offer a valuable tool for connecting different the different theoretical approaches.

From the perspective of social work practices, it is important for social workers to recognize both the life-course factors and the diverse social locations impacting older adults. For example, an older person may have experienced different types of abuse throughout their life, not only in older age, which inevitably affects the way a social worker may work with the older client. On the other hand, it is important to acknowledge that older adults' situations can change and the need for social work may vary from long-term psychosocial

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work to more temporary support. Moreover, the impacts of disadvantages and vulnerabilities are different for older adults in diverse positions and also affected by societal changes. For example, our data highlighted the recession of the 1990s and the fees charged for services, which have resulted in financial exclusion for current older generations. This societal change draws attention to the need for structural social work and challenges social workers to pursue actions that have an impact beyond individual life situations.

From the perspective of multidimensional exclusion, our findings have shown that some older adults have very complex needs related to accumulative disadvantages across the different domains of social exclusion. As our example of multiple exclusion illustrates, social workers encounter older adults who may have faced one adversity after another and, at the same time, dropped through the service systems and their safety nets. For these older adults, gerontological social work is often the final alternative wherein support is offered from or sought from. Working with highly challenging life situations requires strong professional competencies from the social workers, as well as adequate resources and organizational structures that support continuity when working towards social change (see also Soukiala and Pietilä 2024; Kinni and Tiilikainen 2024). For an older adult with complex needs, the process of change is often slow, and it may, in the beginning, include only the aim of maintaining the current situation and preventing it from getting worse.

The core of gerontological social work is in supporting the autonomy and empowerment of older adults. Based on our findings, social workers often work with older adults who refuse to receive help and services. This refusal may lead to dilemmatic situations where the older adults' own decision contradicts with the service systems and professionals' evaluation of needs and life challenges. From the perspective of social exclusion, this means that an older person is not only the subject of exclusionary acts but an individual agent making choices that may increase the risk of social exclusion. In the most challenging cases, a social worker may be balancing between the client's self-determination and neglect (Rossi 2021). These situations call for skills and resources that enable relationship building and continuity in client work (Willis et al. 2021). Relational skills are also needed when working with other professionals on behalf of the client (Azulai et al. 2022). These skills play an important role in supporting older adults' access to appropriate and adequate services.

Drawing on the findings, it is important to note that the older clients' life situations were mostly viewed from the individuals' perspective. Questions about older adults' own capabilities appeared to be more pivotal than questions of social justice or societal inequalities, which may indicate the weak role of structural social work in the Finnish context (Matthies, 2022). However, it was evident that the social workers understood and described their work as being closely connected to political decision making, as well as structural circumstances and norms. The social workers' perceptions also underlined the importance of equal access and treatment in services (see also Rossi 2021). Moreover, societal factors, such

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as digitalization and ageism, were found as critical drivers for exclusion, indicating that social workers acknowledged their impact on their older clients' life situations and needs.

While we did not examine digital exclusion in this study per se, based on our findings and previous research, it is evident that being excluded from the digital world increases the risk of being excluded in various domains of life (Buchert et al. 2023; Ekoh et al. 2021; Seifert et al. 2021). In the social workers' interviews, digitalization was closely connected to challenges accessing services, which highlights the importance to develop public services so that they are accessible to older adults who do not have the capabilities or resources to use digital devices. Moreover, services should be developed to improve and support digital inclusion in older age, not only from the perspective of services but also from that of social well-being. Having the ability to use digital devices and access the internet may help older adults in maintaining and initiating meaningful social relationships. Therefore, more support should be provided for older adults who wish to engage with other people digitally. Overall, aspects of digitalization should be considered across the different domains of social exclusion. This consideration would call for acknowledgment of digital exclusion as a complex and multidimensional process, consisting of structural, environmental, individual, and socio-technical drivers (Poli et al. 2021). In future research, it would be useful to examine these drivers in more detail from the perspective of the social exclusion domains.

In addition to tackling digital exclusion, our findings highlight the need to address ageism at all levels of society to prevent and reduce social problems in later life. This needs calls for means to raise awareness of aging and ageism in the professional community, as well as to foster intergenerational solidarity across society (Azulai et al. 2022; Donnelly and Torres 2023). One way to accomplish such feats could be to increase the understanding of the human life course and aging in social work education and among social and health care professionals in general. Additionally, social workers and other professionals working with older adults could make more effort to highlight the diversity and resources available in later life. Aging is not only about being frail and needing care but also about participating and contributing at different levels of society.

This study does have some limitations that must be acknowledged. We have examined older clients' life situations from the perspective of social workers—not older adults themselves. Therefore, analysis is focused on professionals' perceptions of their clients' life challenges, which may differ from the older adults' own understanding of their experiences and needs. In future studies, it would be important to give voice also to the older clients' views regarding different domains of social exclusion and gain a more nuanced understanding of social exclusion in gerontological social work by recruiting older adults from diverse marginalized locations. Our data has been collected in Finland and among Finnish-speaking older adults, which provides only one societal and cultural context on the topic. The Finnish welfare model is based on the principle of universalism, and as a result, the coverage and level of basic services and social security have been fairly high compared to

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many other countries. As such, findings may have been different in countries with different welfare models and ways of organizing social work services.

Additionally, our data has offered only snapshots of the older clients' life situations and, therefore, lacks more in-depth analysis of the processes behind older clients' complex life situations and needs. As the data is based on the social workers interviews and their perceptions of the older adult's life situations, we have not been able to analyze life-course factors and the intersections of the diverse, often long-term, social positions the older adults may have held. As noted earlier, an intersectional life course perspective would be important to consider in future studies; however, this would require data collection from older adults themselves. In future research, it would also be important to examine how gerontological social work and social workers working with older adults contribute to reducing social exclusion in later life.

Social exclusion impacts the well-being of older adults, as well as the equity and cohesion of an aging society (Walsh et al., 2017). As highlighted by Seppänen and Ray (2023), there is a need to shift the perspective from the older person being a problem to the older person *having* a problem. As we have highlighted in this discussion section, this shift calls for in-depth understanding of the life challenges that older adults face and how individual and societal life-course factors create and reinforce oppression in later life. Based on our findings, the multidimensional framework of social exclusion offers a useful tool for strengthening the knowledge base of gerontological social work and increasing understanding of the interplay between societal factors and individual life histories and circumstances of older adults. From the perspective of professionals working in gerontological social work, our study has shed light on the diverse life situations and disadvantages older clients face, which helps to detect when and where processes of gerontological social work are needed. The findings and implications of this study can be used when developing practices and interventions aimed at reducing social exclusion in later life, as well as social work education.

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Informed Consent

The authors have obtained informed consent from all participants.

Conflict of Interest

The author declares that there is no conflict of interest.

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