

Preparing for an Ageing Society: Discussion Paper Response from Independent Age

About Independent Age

Independent Age works to keep older people independent and out of poverty by providing them with practical support, financial help and lifelong friendship.

We focus on supporting those who:

- are over 70
- are in financial need
- are lonely or isolated
- have made a sustained and significant contribution to society, particularly through voluntary work

The charity is currently developing its services in order to better meet the needs of older people in today's society. Our aim is make sure that all those we help are receiving their entitlements from statutory and other providers and then to provide additional support tailored to the individual's particular needs. This support is likely to be a combination of:

- regular befriending and support from an Independent Age volunteer visitor
- financial help in emergencies
- additional practical support, such as providing household items and toiletry packs for hospital visits
- membership of the Independent Age community, including regular correspondence, magazines and cards on birthdays and at Christmas
- increasingly, the opportunity to meet and correspond with other members of the Independent Age community

Our Research

Please find below the research we have drawn from the last three years which is appropriate to the questions in the discussion paper. Our response covers three areas:

- I. Activities and social opportunities in later life
- II. Activity in the community in later life
- III. Support in later life

It is well known among our beneficiaries that the best way to fight against the onset of old age is to be as active as possible, both physically and mentally. It is also the case that physical decline is often synonymous with mental decline. For example, in our experience, when a beneficiary experiences reduced independence this may mean a reduced social life, the prospect of which can induce feelings of anxiety and depression. Independent Age welcomes recognition of this important issue, as well as the opportunity to represent the views of those it supports. The answers given below utilise three main pieces of research conducted by Independent Age in 2007 and 2008:

- Our **Annual Survey 2008**, in which a series of topical questions on life, society, and our services were posed to 6,500 of our beneficiaries, to which 3,315 of our beneficiaries responded.
- Our **Annual Survey 2007**, with data based on the responses we received from 2773 beneficiaries.
- A series of **focus groups and interviews** conducted by Dreamtime Research Ltd on behalf of Independent Age in 2008. Seven focus groups were held comprising between three and seven beneficiaries, and lasted between one and a half to two hours. Eighteen depth interviews were conducted involving one interviewer and one respondent, and in some cases they were paired, involving some couples. These lasted between forty five minutes and an hour and a half. In total, 69 respondents were interviewed across three regions in England, including the North East, the Midlands and the South West.

With regard to the identity of respondents, our Annual Survey 2008 revealed the following:

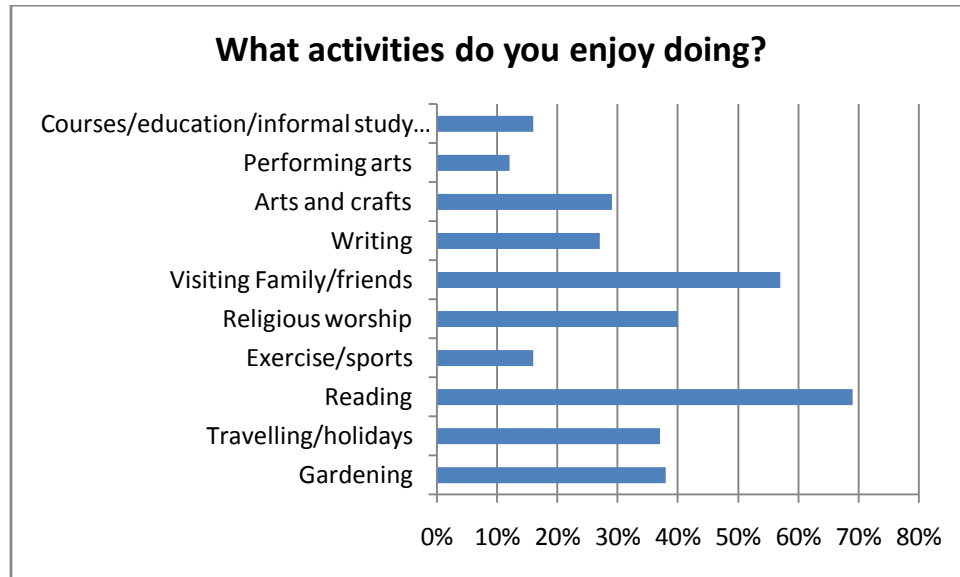
- 75% were female and 25% were male.
- 64% lived alone, 27% lived with a spouse/civil partner, 4% with children, 3% in a care home, and 2% with friends or relatives.
- 3% were under the age 60 (Independent Age criteria has changed in recent years), 18% were 60-69, 43% were 70-79, 31% were 80-89, and 5% were over 90.
- 46% live in a town, 29% live in a village, 19% live in a city, and 6% live in open countryside.

We recognise that these respondents are not a perfectly representative group of Britain's older people. We do believe, however, that these results offer some real insight into the lives of older people and raise questions which we will examine in further research during 2009. We will be conducting a series of focus groups in eight localities across the UK, which will focus on the development of services to address the needs and concerns of older people in their communities. The research will draw on the overarching theme of isolation and will seek to identify points at which individuals could benefit from additional help and support in later life. We look forward to sharing the results of this research with you over the coming months.

Activities and social opportunities in later life

What activities do our beneficiaries currently undertake?

In our Annual Survey 2007 we asked the following:



It is immediately clear that the most common activities currently enjoyed by Independent Age beneficiaries are reading and visiting family and friends. Religious worship, travelling/holidays and gardening are also very significant.

During the focus groups a number of individual activities were also mentioned, and included:

- Being busy in their communities via volunteering for charities or for the local church
- Daily brain exercises such as crosswords and Suduko, as well as quiz shows such as "Countdown"
- Reading

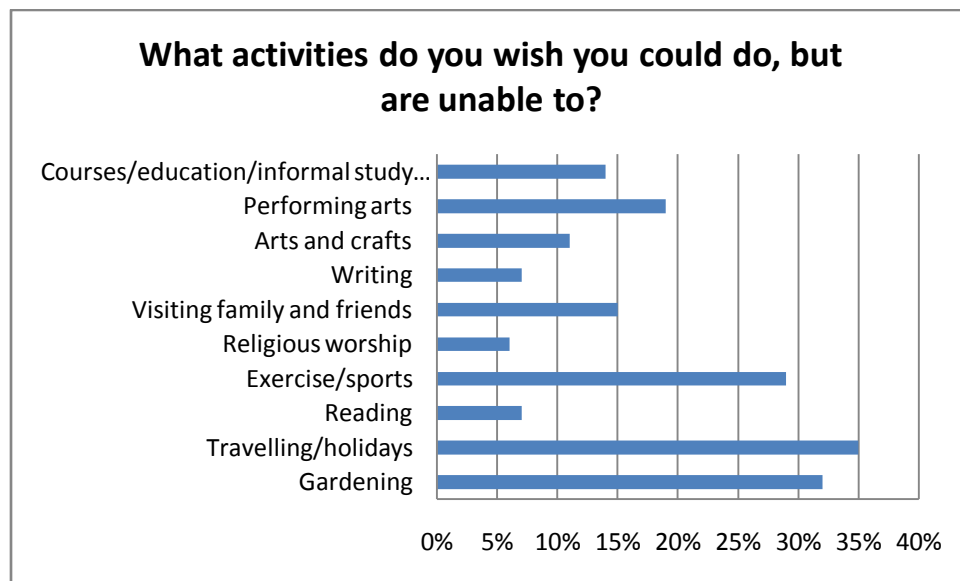
It is very clear from the number of beneficiaries that enjoy visiting family and friends that social activity is regarded as highly important. This point was reinforced during the focus groups, in which social activity, including basic conversation, was frequently mentioned as being vital to staying physically and mentally active. Pets were also referred to as being a great way of getting some exercise, but also meeting new people.

Beneficiaries that used email or the internet had found a beneficial new media. Not many of our oldest and loneliest annuitants had access to the internet, and not all had a wish to learn. However, those that did have access to the internet tended to be less lonely and had a more positive outlook. Many beneficiaries did not like to telephone their relatives but the advent of email had, for some, brought back the letter. In some cases the internet allowed those with increasing mobility problems access to huge amounts of free information and allowed personal hobbies and interests to be pursued.

A number of our younger and more physically able respondents had an interest in continued learning, and a small number were members of the University of the Third Age. Informal learning was more common, with a significant number of respondents expressing an interest in genealogy.

What activities would our beneficiaries like to do to remain active in later life?

In our Annual Survey 2007 we asked:



The results here demonstrate that travelling/holidays, gardening, and exercise/sports are activities that the highest proportion of beneficiaries would like to do, but are unable to. It is interesting to observe that each of these activities involves a physical dimension.

In our Annual Survey 2008 we also found that:

- 64% of our beneficiaries say that learning new things is essential, very important or quite important to their wellbeing. In contrast to this only 14% said they had this completely.
- 46% said that taking part in sport or leisure activities is essential, very important or quite important to their wellbeing. In contrast to this only 10% said that they had this completely.

The most predominant theme throughout the focus groups was that many respondents suffered a degree of isolation. The preferred methods of remaining active in later life almost always contained a social dimension. This perhaps indicates that a method of encouraging greater physical activity in older people would be to introduce a social element to any opportunities available.

Throughout the focus groups there was a clear desire for more social opportunities enabling respondents of the same age to interact with each other. The success of the focus groups themselves was a clear demonstration of this. Many participants relished the opportunity to meet and communicate with those that had similar interests and concerns. The fact that the group was set up with the purpose of listening to their needs and concerns was an added bonus. One beneficiary said:

"I'd love a coffee morning a bit like this and we could just meet and chat, meet people".

The number of beneficiaries commenting that they would like to get out of the house more often was also very significant. Holidays, travel and day trips were all regarded as a great opportunity to get out of the house and meet other people, often of the same generation, but were unfortunately a very rare occurrence for most. It is important to note that simple day trips would be hugely welcomed. Many

respondents expressed a desire to visit places where they had grown up, or been evacuated to during the war.

Activity in the community in later life

What are the benefits of community activity?

Due to the way in which Independent Age has taken on its beneficiaries in previous years we have found that a strong desire to undertake work in the community is very common among our beneficiaries. Although representing a sample bias, this enables us to view the benefits that taking part in community activity can withhold for some older people.

Volunteering and community work is seen by many of our beneficiaries as a source of stimulation, but probably more notably than that, it provides a sense of value. During the focus groups, one of the greatest changes beneficiaries observed about getting older was that they moved from feeling like valued and worthwhile members of society, to feeling they have little or nothing to contribute. In particular, for beneficiaries that had held responsible jobs and taken an active role in society during the course of their lives, this was a very significant change. It became clear that the less beneficiaries actively did, the less they felt that had a value or worth to society. A number of beneficiaries expressed a desire to volunteer for Independent Age. One man said:

"I've still got a brain and a car and I get around ok. Money is my problem...But I still want to help, it's what I've always done...and if I keep someone company, take them out for an afternoon...or fetch a bit of shopping then they're better off, everyone is".

One woman said:

"I had a very busy and interesting life until I retired".

Our Annual Survey 2008 also revealed some interesting views on the role of older people in society that could perhaps indicate how an increased role in the community would be beneficial. 46% of respondents tended to disagree, or disagreed strongly that society values people over 65. In contrast to this, 89% tended to agree, or agreed strongly that people over 65 have valuable experiences to share. It could be argued that one way of addressing this anomaly is to provide older people with an outlet in which they can use their skills and interact with other members of society, potentially via community projects.

Another interesting aspect of the research among our beneficiaries regards intergenerational activity. During the focus groups it became clear that for the vast majority of our respondents, aside from contact with family members, interaction with younger generations was very rare, and that tension was often evident between our beneficiaries and younger people that in live the same locality. In particular, respondents commented on feeling intimidated by the younger people living near them. Community projects may be an effective way of addressing this tension, as well as encouraging knowledge sharing between generations.

What are the barriers to taking part in community activity?

In our Annual Survey 2007 we asked, "If you are not able to do the activities that you enjoy, why not? The answers received fell into four interrelated categories:

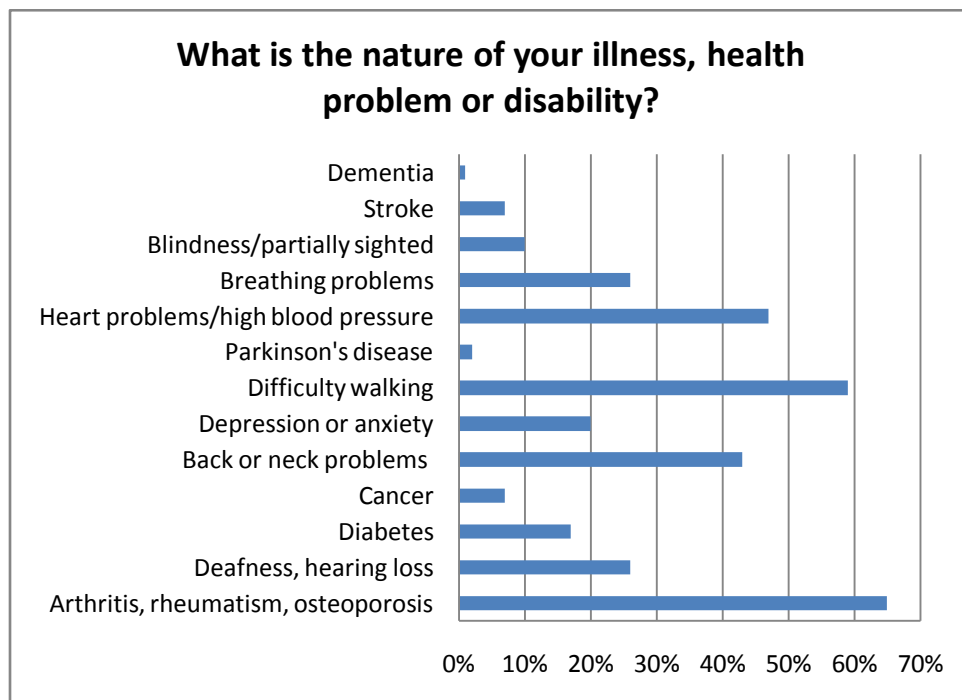
1. Finance
2. Health problems
3. Mobility
4. Transport

While these are largely practical barriers to engaging in increased social/physical activity, given the nature of community engagement, it is reasonable to draw some parallels here. It is also important to note that consideration of practical barriers should not be considered in isolation to emotional barriers. In our experience, practical barriers can give rise to, or exacerbate, emotional barriers and vice versa. Please find below some information relating to emotional barriers, and some of the practical barriers specified above.

Health problems

In our 2008 Annual Survey we found that only 19% of respondents said they had good health completely, 48% said partially, and 20% said they do not have this. There are a very wide spectrum of health issues in question here, but it is interesting to note the number of respondents falling into the "partially" category. Could this suggest that while health problems are certainly a consideration for a number of respondents, with the right help and support, these problems do not have to be completely inhibiting? Could community programmes be tailored to accommodate some of the health problems suffered by some older people?

In our Annual Survey 2007 we asked beneficiaries, "do you have a long term illness, health problem or disability which limits your daily activity or affects your quality of life", and 73% said yes. We also asked:



The most prominent problems include arthritis, rheumatism, osteoporosis, difficulty walking, heart problems/high blood pressure, and back or neck problems. As discussed below, one key feature of the majority of these problems is that they have an effect on mobility. The question must therefore be asked, what can be done overcome or accommodate these issues?

Mobility

In our Annual Survey 2008 42% of respondents said they have this partially, and 8% said they do not have this. Again, the number of respondents falling into the “partially” category suggests that with the correct adaptations community projects should be able to accommodate accessibility needs. In addition, it is important to note that those stating they “do not have” mobility, should not be ignored. During the focus groups we frequently found that those older people with the greatest mobility problems were the loneliest, and enjoyed the focus groups to the greatest extent. It is worth considering whether this group could, with the correct support and given tailored, appropriate opportunities, benefit the most from increased community engagement.

Transport

Lack of appropriate transport is undoubtedly a major barrier regarding greater community engagement, and indeed increased social and physical activity. In our Annual Survey 2008 we found that 85% of beneficiaries believe the ability to get around is essential or very important to their wellbeing. In our Annual Survey 2007, however, 31% of respondents felt that their local public transport did not meet their needs. During the focus groups it was also frequently stated that the loss of private transport was a major cause for concern.

Emotional barriers

The most appropriate evidence we currently have regarding emotional barriers to community engagement was gathered in the focus groups, often in relation to discussions about loneliness. While not specific to community engagement these discussions perhaps offer an insight into some of the factors that might act, or have acted, to restrain older people from becoming more involved in their communities. Relevant issues raised were as follows:

I. The changing nature of society

It was often stated that people are “far busier” in current times, and are less likely to take an interest in their neighbours. Community programmes may offer a solution to this, although they must be targeted in a way as to capture the attention of those that, due to recent experience, have become increasingly reluctant to engage with those living in the same locality.

The focus groups also revealed that while the majority of respondents had not been victims of crime, fear of crime was a very significant problem. This fear may play a role in deterring some older people from actively engaging in community activity.

II. Bereavement

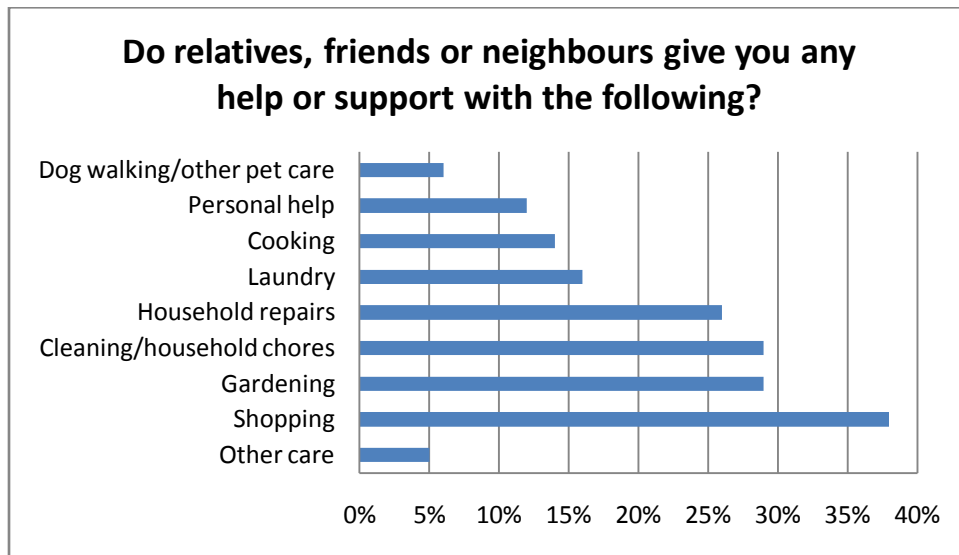
Another very prominent factor we found to contribute to increased social isolation, was the death of partners or those in social groups. It could be beneficial to undertake research into the effects bereavement may have on an older person’s confidence and willingness to engage in social activity.

III. Knowledge and skills

Consideration should be given to the nature of community projects and how best to attract older participants. As previously discussed, given that many of our beneficiaries attach a great degree of importance to having a use, doing something of value, or sharing their knowledge and skills, it is vital that community projects recognise this. It is possible to infer that unless older people feel they have something valid to contribute, they will be reluctant to take part. Or alternatively, if they feel that their knowledge and skills are an important part of the project, they will be more enthusiastic to get involved.

Support in later life

In our 2008 Annual Survey 81% of beneficiaries said that they receive less than 35 hours help and support per week, 9% said 35 to 50 hours and 10% said more than 50 hours. However, the following question produced some interesting results. We asked:



We had a good response to this question, with 93% of respondents citing an answer. This suggests that while the vast majority of our beneficiaries receive less than 35 hours per week help and support, they do receive a certain amount. The emphasis here is on low level care needs. In particular, shopping, gardening, household chores and repairs are particularly prominent. All of which, despite representing low level care needs, are essential to an individual's wellbeing. It is important to consider what happens to those individuals who have no contact with friends or family (5% of Independent Age beneficiaries have contact with friends and family once a year or never).