

# Ensuring communities offer what older people want

**COMMUNITY MATTERS**

ILC-UK and Age UK Seminar Series



# Community Matters: Ensuring communities offer what older people want

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'Ensuring communities offer what older people want' is the last in a series of three seminars sponsored by Age UK - exploring how communities need to adapt to an ageing society. This briefing provides background for a discussion seminar which will explore how to ensure the future communities deliver the sort of services and activities which an ageing society demands.

In the seminar we will consider what communities provide for older people, how these needs may change (or stay the same) as they age. We know from research on isolation and loneliness that social connections remain an important part of quality of life for many people as they get older, yet as the 'loneliness epidemic' continues to hit headlines it is clear that this is not being fully addressed in communities. Exploring how activities and services can maintain and building on social networks is key to maintaining wellbeing within the community.

Elsewhere, we will explore the services, amenities and activities available to older people in their communities – from village shops, to post offices, to libraries and adult education classes, and how these enhance wellbeing for older people. A community can take many forms, and in this session we will also be considering the approaches to be taken from different kinds of setting – from urban to rural – and the challenges that lie in providing services to these distinct regions.

On average, at age 65 men will live another 9.2 years and women another 9.7 years in 'Good' health (ONS 2014). Increasing gains in health life expectancy mean that we are seeing a larger group of active and healthy older people both seeking and providing a great deal from and for their communities. At the same time, there is a group of older people who are frail, who may have multiple health problems but who should not be assumed to have lost interest in their communities. Discussion of how communities can be ready for ageing need to take into account these differing needs and need for tailored approaches to ensure communities are offering services, amenities and activities to older people regardless of circumstance.



# Community of all shapes and sizes



While we consider communities it is important to note that they come in many different form, and cities, towns, villages, and hamlets have their individual advantages and challenges. Large scale urban settings may have far more services and choice of amenities on offer for the older people living there, but it is often harder to foster a sense of community and for people to have a sense of ownership over the area. The World Health Organisation Age-Friendly Cities and Communities initiative has focussed on many of these issues also covered in the Community Matters series in developing their age-friendly city checklists, based on focus groups with 1500 older people and 750 caregivers and service providers (WHO 2007). The initiative has also encouraged other, non-urban communities to become age-friendlier.

There are many acknowledged challenges with providing services to rural areas and as such many services may need to be 'rural-proofed' (DEFRA, 2013) to ensure that all receive an equitable services regardless of where they live. This is particularly important given that proportionately more people aged 65+ live in rural areas than in urban areas and the rural older population is also expected to grow older quicker over the next decade (TNS BMRB and ILC-UK 2013). While the 'rural-proofing' guidance issued by DEFRA is aimed at local authorities and formal service providers, the need to adapt activities to fit around the geography of an area remains vital for community-led and voluntary sector initiatives too.

As well varying in their geography, communities also differ widely in terms of deprivation and disadvantage which can have a considerable impact on getting ready for an ageing population, such as through social capital that could be invested in community schemes in some places but not others. For example, the New Dynamics of Ageing funded project Call:Me which examined the process of developing community activities led by groups of older people in several disadvantaged inner-city neighbourhoods in Manchester. One of the chief concerns raised by participants in this project was the long term sustainability of the activities both in terms of financial and human support (Murray et al 2013).

There are many issues identified by older people as factors in allowing them to age independently, but these are fundamentally underpinned by freedom from ageism and discrimination on the basis of age (Audit Commission 2004). Alongside this, the engagement from older people in its creation, design and delivery is held up as a crucial part of service provision aimed at this group. Despite calls to recognise the diversity within an older age group and to adapt activities and services to the specific needs of the community, user-led service design or consultation is far from universal.

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(TNS BMRB and ILC-UK 2013)


# Social connections

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Over three and a half million people aged 65 and over live alone (ONS 2013a) – and over half of those aged over 75 (ONS 2010). Older people living in the community can experience multiple forms of social exclusion, including social isolation and loneliness. Social isolation and loneliness are often used interchangeably, though they have distinct definitions. While social isolation refers to the amount of contact an individual has with others, someone may be lonely even if they have a great deal of contact with other people, but their relationships and contacts do not provide a quality social experience.

For the latter part of the twentieth century and beyond we have seen increasing mobility of families around and away from the country, alongside an increased divorce and separation rate for couples, including older couples. There has also been an increase, due to longevity increases and divorce, in the numbers of people living alone aged 45-64 (ONS 2013a) which will grow the numbers of people living alone in older age in future. A recent RVS (formerly WRVS) report highlights 'the fragmented nature of families today' and that 15% of their respondents aged over 85 live over an hour's drive away from their nearest child, which has a considerable impact on their face-to-face contact (WRVS 2012). We are also seeing rises in the numbers of people who never had children and are approaching later life without the support of family members.

There are a number of services which seek to address loneliness and social isolation among older age groups, including but not limited to befriending schemes, telephone services and helplines (such as Silverline, launched in 2013) and sessions such as those run by Contact the Elderly, who organise Sunday afternoon teas at neighbourhood houses.



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(ONS 2013a)

# Shops and services



In recent years, smaller town high streets have been struggling to stay afloat and many stores in town centres have closed down – according to a 2013 survey looking at 500 UK town centres, at a rate of 16 shops a day - although the rates of closure are slowing (PwC and the Local Data Company 2013). Some types of shops have bucked the trend, with convenience, betting, charity and coffee shops among those seeing an increase in their numbers. High streets are faring better than shopping centres and retail parks, with vacancy rates at 20%, 29% and 37% respectively (Deloitte 2014).

Typically, the Post Office has been at the heart of the high street in its role as a provider of financial services and advice to older people. However, since the 'Network Change Programme' announced in May 2007, there have been many closures of local post offices. A report examining the impact of these closures highlights the disadvantages of having to seek out another post office on older people (Consumer Focus Wales 2010). The research also found that the post office plays an important social role as well as an administrative function in communities.

Another prior 'hub' of the community, the pub, has also been suffering. Figures from the most recent Pub Tracker from CGA and CAMRA (2014) show an increase in the numbers of pubs closing - up to 28 pubs a week for the period April to December 2013. The threat to pubs has seen a small number of local areas taking steps to buy and manage vacant properties – but this rise in 'community pubs' is as of yet quite small scale.

For the last few years, numbers of public libraries have been falling, as local authorities seek budget savings and have instated closures, often of smaller libraries with more limited 'catchment' areas. As well as their book and media lending services, libraries have traditionally offered space for people living in the community to meet, find out about local information and services, as well as often having space to support other community activities such as meetings and classes. However, visits to libraries and borrowing of books by adults have been falling in recent years (CIPFA 2013).

Often, libraries are the only point of access to the internet for the 17% of the population (ONS 2013b) who do not have an internet connection at home. For rural communities without broadband coverage this is a particularly important role being played. Libraries often also house digital skills classes for older people and the rates of closure will have a knock-on effect of these groups getting online.

Public toilets (or lack thereof) have been found to be a significant contributor to older people's willingness to travel to public spaces for activities, shopping and so on (Help the Aged 2007). While council-operated public toilets have been falling, other publically accessible toilets (such as those in cafes and shops) are available (Bichard and Knight 2012) and projects such as the Great British Toilet Map are seeking to improve information and access about these facilities (see <http://greatbritishpublictoiletmap.rca.ac.uk/>).

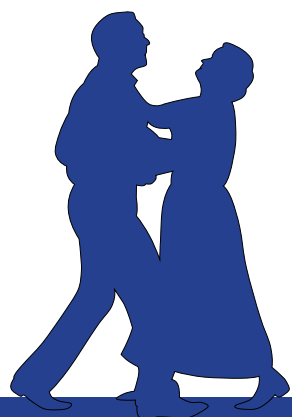
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(PwC and the Local Data Company 2013)

With calls for the better integration of services between the health and social care systems, GPs are in the firing line for taking on increased responsibility as a signposting service to the variety of services available in different settings. There has been a drop in the number of single GPs (1,949 in 2004 to 1,266 in 2009) in line with the trend towards larger practices and multidisciplinary teams in local practices (Kings Fund 2011). The need for investment in community-based premises for GPs is noted by the Royal College of GPs in their 'Vision for General Practice in the future NHS' (RCGP 2013).

More visits are made to community pharmacies than any other NHS care setting – 438 million a year in England alone and is an access point to health for 1.6 million patients every day (NHS England 2013). Despite this, research from Gidman and Cowley in 2013 suggests that among their research group there are low levels of understanding of the full role of the pharmacist as a provider of information as well as medicine dispenser. In a recent Call to Action, NHS England suggested that there is a role for community pharmacy to build on the strengths of community pharmacy, for example, as an access point for people from deprived populations and the range of pharmacies in communities (e.g. based in a supermarket, on the high street, in health centres, and so on) (NHS England 2013).

# Activities, education and fun



Older people's groups providing social, leisure and education opportunities are run informally around the countryside, with some large networks in place such as local Age UK (see <http://www.ageuk.org.uk/about-us/local-partners/>) and Age Concern groups, and other groups established and run in a more ad-hoc way, often with support (financial or administrative) provided by local authorities and councils, although anecdotally this support is falling due to the general budget cuts being undertaken by local governments.

Figures from the National Institute for Adult Continuing Education suggest that there is a decline with age in adults describing themselves as current or recent learners, although according to their definition of learning (which includes public, private, voluntary and informal sector based learning), participation in learning for those aged over 75 has risen (figures for the decade up to 2006) (McNair 2007). Organisations such as the University of the Third Age also play a role in providing educational and leisure opportunities for older people and are seeing success – with over 900 U3As in the UK at the end of 2013

Open space in neighbourhoods, including access to natural features has been shown to have various benefits on health, wellbeing and quality of life (see, for example, Sugiyama et al 2009 who find that quality neighbourhood open space is relevant to both psychosocial and physical aspects of older people's lives). In an analysis of data from Understanding Society and the British Household Panel Survey, White and colleagues have also published preliminary results from research showing a positive effect on general and mental health among those living within 5 kilometres of the coast (White et al 2013).

Participation in learning for those aged over 75 has risen (figures for the decade up to 2006)

(McNair 2007)



# Case Studies

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## Vital Ageing Network, Minnesota, U.S.A

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Vital Aging Network's (VAN) mission is to "promote self-determination, civic engagement, and personal growth for people as they age, through education, leadership development, and opportunities for connection". VAN help older people to become agents for social change in their communities by training them to assess the needs of their neighbourhoods, gather resources, and initiate new programs. Older people with VAN training have created a variety of community projects catering to the needs of their peers, including specialised walking paths, and schemes to befriend isolated older people.

In October 2012, VAN began their 'Wellness 50+' programme in two Minnesota communities. This 3 year project will see two self-directed teams of older adults create strategies aimed at increasing wellness among the older members of their community. The VAN trained teams will engage with a cross-section of community members and organisations to discover the needs of older people in the area before formulating their strategies. VAN will help ensure the initiatives success by connecting the teams with local, regional, state, and national resources. For example, if a community decides that helping older adults cope with chronic disease is a priority, VAN will connect the community with Wilder Foundation Health and Wellness Programs so that the evidence-based Chronic Disease Self-Management workshop can be brought to the community (Sutie, 2014), (VAN).

## The City of Wodonga and the BUDEE Project, Australia

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The BUDEE project aims to build relationships and cultural understanding between older adults from the Bhutanese community in Wodonga, Australia and the wider community.

The Wodonga City Council, through their Settlement Assistance Program, identified that older adults from Bhutanese backgrounds were more likely to be socially isolated than their counterparts in the wider Wodonga community. The Program highlighted that this was a significant issue as more than 600 Bhutanese people had settled in the Wodonga region since 2006.

The BUDEE project aimed to tackle this problem by developing social networks between older adults from the Bhutanese community, and developing networks between older Bhutanese people and the wider community. The project accomplished this by pairing older Bhutanese people with a family member or a trained City of Wodonga volunteer, known as a BUDEE. The BUDEE supported their partner so that they could participate in a range of coordinated activities.

The BUDEE project has been a success, with many older adults from the Bhutanese community continuing to attend the coordinated activities and the City of Wodonga taking steps to expand the program. Older Bhutanese people who quit the programme are also being targeted with home visits by a Bhutanese worker and assessment officer. The aim of these visits is to identify any additional barriers to participation that have been missed by the project (Seniors Online Victoria, 2013).



## The Village to Village Network, International

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The Village to Village Network is the largest and fastest-growing of all the age-friendly development networks, with 120 members in the U.S.A, Australia, Canada, and the Netherlands, and an additional 100 Villages in development.

The sessions have proved popular, with some libraries providing two sessions a week and having to cap the number of people who can attend. The social connections facilitated by the Top Time sessions have resulted in attendees forming their own private activity groups, including a book group and a theatre group (Suffolk Libraries) (NIACE, 2009).

## 'Ways of Attracting Adults to Keep Learning' Europe-wide

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The 'Ways of Attracting Adults to Keep Learning' project encourages adults to learn through "learning by doing". Participants make a report of their own town which involves actively finding out the origin and the history of street names, researching historic events, recoding anecdotes, stories and recipes, taking and scanning digital pictures and processing all the information with computer software. The older learners then work in groups to create reports on what they have learned.

Funded with support from the European Commission and active in 7 countries, the project encourages participants to use ICT and computers, learn English and use the Internet to acquire, select, assess, store, produce, present and exchange information. In the process, they have to communicate and participate in collaborative networks, keeping in touch and exchanging information with other adult learners.

The results of the investigations are published step-by-step on a website and the final town reports are printed and distributed at the end of each project. The publication of the reports helps to sustain the project in the longer term by sharing the experience of lifelong learning with the wider community (University of Leicester, 2009), (GRUNDTVIG).

# Questions for discussion

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- What activities are currently available for older people in their communities, and are these suitable or prepared for an increasing number of people accessing them? What else should be available?
- What role do local services and shops play in building a community, what the future of these services looks like and what can be done to ensure they support ageing in the community? Does the onus need to be on local businesses or is further support needed? What else is needed in communities as the UK ages?
- How can family connections, friendships and social ties can be supported and better integrated into community activities?
- What needs to be done to ensure that people who are frail or housebound remain in touch in their communities?
- How can we ensure that the experience of growing older remains at its highest quality across rural, town, suburban, and urban settings?
- How can we ensure that the experience of growing older remains at its highest quality across advantaged and disadvantaged communities?
- Do older men and women need different services and activities?
- What steps need to be taken to ensure community engagement is used universally when making decisions in communities?
- How can we ensure that fun and playfulness are kept at the heart of activities for older people in the community?



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