

Involving older people in improving their well-being

Shaping our Age

Voices on well-being

A summary report of research
with older people

November 2011



Well-being is coming here to the [community] centre



Well-being is in your head, isn't it?



High expenses, cost of living these days is leading to not having a sense a well-being



Summary

Introduction and background

Shaping our Age is a three-year, Big Lottery Funded project and unique partnership between WRVS, the Centre for Citizen Participation at Brunel University and the Centre for Social Action at De Montfort University. The project aims to provide new ideas and insights to the emerging issues around ageing by:

- Exploring how older people aged 65 and over understand and define their well-being (Phase One of the research)
- Selecting five WRVS services to participate in action and development projects (Phase Two)
- Developing participatory ways through local activities in which older people can help each other to achieve well-being (Phase Three)
- Providing the learning that can help to enable and support older people to improve their well-being (Phase Four).

The context

The numbers and proportion of older and very old people will continue to grow significantly. The debate surrounding this tends to frame older people as a problem especially at a time when cuts in public spending are imposing financial constraints on systems of care and adding to the 'cost burden' on a decreasing proportion of taxpayers. *Shaping our Age* challenges these negative perspectives and highlights the opportunity for older people to be supported and enabled to be active contributors to society and to challenge notions of dependency.

This report presents a summary of the key findings from Phase one of the project, in which a diverse range of older people define their well-being, the factors that shape it, the barriers to well-being, the impact of services on well-being and suggested improvements. Participants shared their views and concerns with us in focus groups and qualitative research interviews.

Definitions of well-being

Participants define well-being as feeling healthy, free from pain and able to lead a positive life. They describe the feelings of well-being as: happiness, contentment, satisfaction, peace of mind, comfort, enjoyment and euphoria. Well-being is also associated with feelings of self-worth and achievement.

Causes of well-being

By far the most frequently mentioned aspects that contribute to well-being are *relationships and social contacts* with family, friends and neighbours, providing fun,

support and feelings of belonging and being valued.

Also important is *getting out* and having a range of enjoyable *interests and activities* to fill the day. *Keeping busy* and having an active social life help to divert attention from problems arising from ill health and impairments. Particularly important are *groups and clubs*, which also provide structure to people's lives and 'something to look forward to'. The well-being benefits gained from *volunteering, supporting others and campaigning* include meeting people, feeling useful and building self-esteem.

Good health – Physical or mental health is for many the foundation for a positive, active and happy life. People who are able to foster a *positive outlook* and develop *self-motivation* are seen to be better placed to achieve well-being. This also seems to apply to people whose *faith, religion or spirituality* plays a central role in their lives.

Having sufficient *personal finances* to live comfortably and free from worry is considered to be highly important to well-being.

The impact of services on well-being

Positive aspects include good relationships and professional attention from GPs, good hospital services and treatment and support from a range of other health services including chiropodists and occupational therapists. Local council services contribute positively to well-being, especially housing, library and housing services. The voluntary sector is appreciated and associated with locally based services and personable volunteers. Concessionary bus fares and the social benefits of public and community transport are highlighted.

Participants identify far more **negative aspects** of services, especially so for health services where their main concerns include poor communication and difficulties in making appointments in GP surgeries. Poor treatment from hospital staff was a common theme along with a range of other issues including poor hospital hygiene, poor mental health and counselling services and poor disability awareness and understanding. Negative and discriminatory attitudes towards older people within public services are highlighted including lack of respect, empathy, listening, compassion and a neglectful culture.

Concerns are raised about irregular and inefficient public transport services, poor connections and access issues for older disabled people. Poor care services at home and in some residential homes is a concern for some. The cuts in public expenditure are causing anxiety and worry, particularly the closure of community centres, libraries, post offices and potential cutbacks in transport services and concessionary fares. Older people experience difficulties in accessing information about services, especially in an era of increasing use of electronic communication.

Barriers to well-being

The problems arising from having poor physical health and impairments are seen as the main barriers to well-being, especially conditions which create severe and

chronic pain, having negative impacts on mental health, mobility, social life, hobbies and activities. The ill health of others, especially close family, can also be a barrier to well-being especially for carers. Having *mental health* problems is a common issue raised and especially for people with depression and dementia. Other health problems mentioned include insomnia and the side effects of medication. A major impact of poor health is *fear of personal dependence*.

Isolation and loneliness in old age are considered by many to be serious problems and especially so for people who face barriers getting out of their homes, the recently bereaved and people unable to speak English.

Limited finances and poverty in old age are a concern for many. The main issues highlighted are inadequate state pension and unclaimed benefits.

Suggestions for improving well-being

Older people themselves have many suggestions for improving their well-being. Overall, there is a general desire that older people can play a more active role in improving their own well-being. At the same time, there is also a sense that many would need the help and support of others to achieve this. Particular improvements suggested by participants include *getting involved* in groups and activities, volunteering, campaigning and shaping services and policies. Suggestions for helping to facilitate wider forms of involvement include support for black and minority ethnic older people, better access for older people with physical and sensory impairments and reliable/accessible public and community transport.

A key message is to *treat older people with respect and equality* and to improve communication, build trust, give people more time and value the whole person.

There is a call for *practical help and support* in people's own homes by reliable competent and trustworthy people, in particular for help with small jobs about the house and garden and shopping. There is a need for *support at critical times* such as following bereavement, failing health, dealing with, and coming to terms with, impairments.

Participants call for more *intergenerational work* to build positive understanding.

The importance was raised of *providing relevant and accessible information* and promoting this information effectively to older people. This includes information on entitlements. There is also a need to challenge the assumption that all older people can use or have access to the internet.

A number of suggestions are put forward in relation to *personal finance* including help with on-going financial information about pensions, investments and savings.

Conclusions

The findings from Phase One of *Shaping our Age* challenge negative attitudes towards ageing and outdated perceptions that older people have little to offer. From

the outset, a key concern was to enable participants to engage in discussions and share their own views, experiences and suggestions for change.

In defining well-being, there is no one view but a complex picture emerges which tends to define well-being in both subjective and objective terms and at personal, family, community and societal levels.

Participants identify a range of factors that affect their *well-being*. While issues such as health, personal characteristics and faith featured prominently, the main factor highlighted is *relationships and social contacts* with family and friends and within communities. This highlights an important aspect of well-being in that for many older people it is best achieved in conjunction with others at the levels of the family, friends, neighbourhood and community. It is important to say that many older people are already building such relationships and social capital through involvement in a range of voluntary and community activities particularly at local level.

Discussions around services highlight both positive and negative aspects. On the one hand, these reveal that some services and approaches to helping people are working well and are greatly appreciated. However, at the same time, it also reveals how some services and professionals (and particularly health services) are falling far short of the expectations of older people.

Much of the discussion in relation to barriers centres on health and impairment issues although social, cultural and financial constraints are also highlighted. The focus of discussion on health and impairment reflects thinking around traditional models of ageing and disability with an emphasis on personal adjustment and medical interventions. This highlights the importance of the relationship between ageing and disability and health, re-emphasising the social aspects of all of these.

In keeping with participants' analyses of well-being and what shapes it, there is a strong message that it is about people being able to do what they want to do – to have choice and control. This finding highlights that the promotion of *individual and collective agency* is a vital component in achieving and sustaining well-being at both individual and societal levels. Older people may also need practical help and sufficient resources to facilitate this engagement. However, it also makes clear the importance of structural issues, including structural barriers and constraints. A key tension to emerge during the discussions and which runs counter to these aspirations for involvement and empowerment, shared by both older people and current policymakers is the negative impact of '*the cuts*' to public/voluntary services and to transport, which are undermining the positive aspirations to self-help and mutual aid within social policy.

In the next phases, *Shaping our Age* aims to explore new ways of involving older people in the development of services and support to enhance their own well-being. The issues raised in the consultations have contributed to the selection of five services. We plan to enable and support older people to be actively involved in a process of development and learning. The learning from the programme will inform WRVS and will be disseminated widely to inform service development at wider levels.

Thank goodness
the free bus has
been ... saved
for the moment



The desire to get
up and go



Well-being is
independence,
definitely
independence



WRVS is a charity and we are only ever as good as our volunteers. We currently have a team of **45,000** amazing volunteers of all ages, men and women, from all backgrounds – but we would like to be able to help more people across Britain.

If you think you could help and have a few hours to spare every week or fortnight, or if you would like to make a donation, please call us on **0845 601 4670** or visit **wrvs.org.uk**

Help us make Britain a great place to grow old.

**The full report is available to download at
wrvs.org.uk/shapingourage**



Registered charity 1015988 & SC038924
WRVS, Beck Court, Cardiff Gate Business Park,
Cardiff CF23 8RP

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