Bereavement – learning from Ageing Better

Introduction
Ageing Better is a test and learn programme. It is collecting information and insights from across 14 partnerships to identify learning that will be useful for other programmes and organisations delivering activities aimed at reducing social isolation in people aged 50+.

This paper focuses on our learning from Ageing Better on bereavement and its role as a risk factor for social isolation and loneliness. It is based on learning and contributions from Bristol, Cheshire, East Lindsey, Isle of Wight, Leeds, Middlesbrough, Sheffield and Torbay.

We have grouped our national learning from Ageing Better into three themes:

- **CONTEXT** - We know from Ageing Better that the reasons for social isolation are many and varied and happen for a myriad of reasons including macro issues such as inequalities and deprivation as well as personal circumstances. These often occur in combination meaning people’s situations are complex.

- **CONNECTIONS** - The people who are most socially isolated (where isolation is entrenched and embedded) will need some level of one-to-one support to help address their isolation.

- **ECOSYSTEM** - The Ecosystem is fundamental to addressing social isolation as it is the space where individuals connect with the community. It works preventatively to keep people socially connected and steps in when social isolation occurs. It includes interventions that people ‘need’; activities and groups people ‘want’ to engage with; opportunities and provision for people to set up their own groups; and community development which includes age friendly activity.

This paper’s topic of bereavement features in each of the three themes. It starts by exploring the insights from Ageing Better about bereavement as a risk factor for social isolation and loneliness. It considers how important person-centred connections are in supporting bereavement and provides examples from across Ageing Better around the ecosystem Ageing Better areas have developed to support people experiencing bereavement.

At the end of this report we provide links to specific learning reports from Ageing Better areas on this topic. Please also see our Ageing Better - summary of key learning graphic which gives context as to how our learning around bereavement fits tnlcommunityfund.org.uk
Context

Bereavement as a risk factor for social isolation and loneliness

Bereavement is a key life event which causes a significant change in social connections and support networks which can lead to people feeling lonely and becoming socially isolated. Bereavement is also linked to a wide range of other factors which are in themselves risk factors for social isolation and loneliness. These include depression, loss of self-confidence, poverty and financial worries.

This has been found across Ageing Better areas. Ageing Better Middlesbrough found that 14% of the people they were working with on a one-to-one basis said that bereavement was the reason why they felt lonely. Areas have also developed specific interventions around bereavement as a result of the prevalence of this risk factor in their communities.

Bereavement is a unique experience which feels different for everyone. How an individual feels may also be affected by whether they have experienced other bereavements or losses before, and the emotions and memories connected to these.

Our Ageing Better learning to date has particular resonance with bereavement. Not everyone who is bereaved experiences social isolation and loneliness immediately and it can be a risk factor at any time. We have learnt the importance of taking a holistic person-centred approach by treating each person as the individual they are. Grief and bereavement are life events and trauma which for some people may require the support of a specific intervention such as counselling or mentoring and in some situations mental health interventions. However, people can also be supported to establish new social connections and involvement in interests, networks and groups at a pace to suit them.

It is important to appreciate that there is not necessarily a ‘closure’ or ‘end point’ for a bereaved individual. Many people will carry their losses with them throughout life and therefore the space to talk and to be listened to, remain valuable for many years.

Models of bereavement

Although loss and bereavement are highly individual experiences, there are a number of theoretical models which can help us understand how some people may experience it. In UK society, a common way of talking about grief is to use a linear model involving ‘stages’ that an individual moves through from one stage to the next, ultimately reaching the final stage of acceptance, closure or moving on.

However, there are a number of non-linear models which conceptualise grief in a different way, challenging the idea that grief will eventually disappear with time. One example is from Stroebe and Schut who believe that an individual switches between two different forms of grieving; one that is ‘loss-oriented’ (for example thinking about the loved one) and one that is ‘restoration-oriented’ (for example being distracted from grief by other activities).

Another example is from Tonkin, which suggests that rather than ‘moving on’ from grief, it is instead always with us but other parts of our life grow bigger over time so that the grief does not consume our life as much as it did previously.

There are many other models of grief and there is no ‘right’ way to grieve. Individuals often put expectations on themselves, thinking for example “I don’t know why I still
feel like this” and by being aware that there are lots of different models rather than only a linear sequence, it can help both the individual who has experienced the bereavement and the staff or volunteer who is working with them in the community.

Sharing a bereavement and “unresolved” grief
A message we heard several times when researching our learning around working and engaging with BAME communities was how hard the reality of being in another country separated from family and loved ones was as people aged. We heard that it was particularly difficult for people in the UK when people “at home” died and they were not always able to be part of a shared grieving process for loved ones who were back in their original country. We heard that people were struggling with their mental health because of this unresolved grief.

This earlier learning highlights the negative impact on people’s wellbeing of not having been a part of a “shared” bereavement process and so able to grieve together with family and friends. During the Covid-19 crisis people are worrying about friends and relatives abroad and at home who become ill and with whom they can’t physically be with, some of whom may die. This is likely to be a longer term issue as the country moves into recovery.

Men and bereavement
In an earlier learning report we explored more about working and engaging with older men as they are more likely to be socially isolated than women. This helped highlight the wide amount of research in this space. It also suggested some of the reasons for this:

- Men tend to build social relationships differently to women and this can make them vulnerable to social isolation as they age.
- Older men often rely on their partner to maintain friendship groups and social networks. As a result, men who are bereaved or divorced are at risk of becoming isolated.

This was reflected within Ageing Better. Camden undertook research which showed that men may be more dependent on their partners for social contact and to arrange social engagements and activities with friends, family or others. They also found that married men rely on their wives or partners to organise their social activities.

This “dependency” however leads to a loss of social contact and increased levels of loneliness when men lose their partners.

Key Messages : Everyone has a different experience of bereavement and feels grief in a way that is unique to them but it is a key risk factor in social isolation and loneliness as connections and support networks inevitably change. The loss of social networks can have a particular impact on men and we are finding people struggle with their mental health when there is unresolved grief. This may be particularly important during the Covid-19 crisis.

Working with people who are bereaved
There is no way to predict how an individual may feel when experiencing a bereavement, whether it is recent or in the past. Feelings may include depression, anxiety, anger and guilt as well worry about the impact on other people or about practical and legal factors. Added to this can be the uncertainty about what the future now looks like.
For many people, bereavement and loss are likely to have additional physical effects. The emotions and physical feelings caused by bereavement and loss are likely to lead to behavioural changes, even if someone is attempting to ‘carry on as normal’. This might include sleep disturbance, changes in appetite, absent-mindedness, strong focus on practical tasks, over-activity, or social withdrawal, plus many other possible changes to behaviour.

Workers or volunteers in community settings may not be able to detect the behavioural changes in someone they are working with; it will depend on the size of the changes and how well they know the individual. On the outside it may appear that someone is ‘coping well’, but this may not reflect their internal emotions.

When staff and volunteers are working with someone who has experienced bereavement, an automatic response can be to become a ‘fixer’; to help them to feel better by trying to find ‘solutions’ for their situation, regardless of whether they need or want advice at that point in time. Another common reaction is to share your own experience in a similar situation and to reassure them that there is ‘light at the end of the tunnel’. Often these reactions are because we do not know what else to say. However, in many cases, these two reactions may not be helpful for the individual.

Again, earlier Ageing Better learning as to the importance of a person-centred approach is directly applicable here as it is important to take time to listen to the person; acknowledge the loss and the person’s current emotions associated with it first, before offering anything practical. It is important that individuals feel listened to and can talk about their own experience without their experience being compared to that of anyone else as it is unique to them. Take the person and what they are telling you seriously and do not inadvertently devalue their emotions.

After taking the time for this acknowledgement, it can then be valuable to ask the individual what would be helpful for them. This gives them a chance to ask for advice, practical support or peer support when they are ready for it rather than giving it when it is not asked for, which can be experienced as overwhelming or dismissive.

**Key Messages**: Working in a person-centred way means it takes time to get to know a person and gain their trust. This is an important step to helping them open up about their experience. Support cannot be one size fits all. It is important to take time to understand the person and find ways to support them that is right for them. Giving people the opportunity to meet others who have experienced bereavement may be beneficial.

**Specific Interventions/activities within Ageing Better**

We have provided some case studies below of the variety of specific interventions provided through Ageing Better that have supported people with bereavement.

Broadly speaking there are three types of intervention that have been developed:

- **Time limited projects** - these projects work over a fixed time period to support people working through their bereavement. In common with our wider learning, time limited interventions can be valuable in helping people use these projects as a stepping stone to wider more informal social connections.

- **Social projects** - these projects provide social opportunities for people who are keen to restart fun social activities following the loss of their partner. Although the sessions may not exclusively target the bereaved, they create an environment where attending on your own is expected and the sessions are set...
up to easily welcome new members who arrive on their own.

- Reducing stigma - these projects aim to encourage people to think about and plan for losing a loved one or to create a space when this topic could be discussed naturally.

**Time limited projects**

*Ripple Effect - Ageing Better in Sheffield*

The Ripple Effect project offers one to one support, generally over 12 sessions which can be weekly, bi-weekly or as required with the early sessions almost exclusively happening at home but with the aim of moving sessions out into the community where appropriate. The project offers both emotional support which allows people to process their grief and adapt to new circumstances together with practical support which can in turn lead to people opening up, talking and accepting emotional support.

The original delivery model which stated that each intervention would last 12 weeks quickly proved to be unrealistic since the impact of bereavement goes on for an indefinite period of time, with times of “crisis” such as anniversaries, birthdays and Christmas. However, the project is a short-term intervention which aims to bring people to a point where they have other social contacts whilst acknowledging that for the housebound and those who have severe mental health issues it might be very hard to get out of the door.

There is no real separation between the emotional and the practical support delivered by the project, but the offer of practical support often provides the “foot in the door” with participants who would find it more difficult to reach out for emotional support. It is vital to offer practical support to those whose distress means that they are not able to manage day to day administrative tasks or those who have lost the person who always did the practical tasks such as laundry, cooking a meal, paying bills or going food shopping. The project is careful not to set up a dynamic of giver and recipient and instead encourages the approach of doing the practical tasks together or of involving the bereaved person in as much as possible.

*Grief and loss group - Ageing Better Middlesbrough*

The Grief and Loss group was set up in Middlesbrough to provide emotional and practical support for people experiencing bereavement and loneliness through small groups over six weekly sessions.

Staff work hard to build a relationship with the participants. This starts before the first session as staff visit everyone at home to talk about what they can expect from the group and to help them feel less daunted about going along.

Group members know that they can pick up the phone and speak to staff outside of the meeting. Staff also encourage participants to share their feelings and make the group a safe space to be sad. The sessions are led by participants and do not follow a rigid format.

*Walk & Talk - Ageing Better Middlesbrough*

Walk and Talk (stroll around a local park with coffee afterwards) was set up in Middlesbrough following a conversation with a woman who was bereaved and explained that she couldn’t sit and talk about it round a table but would be able to talk if she was walking with someone.

The walks work really well as people do talk about their experiences, but do not feel pressured to talk while walking but instead can open up about their feelings in their
own time at their own pace.

*Listening Ear - Brightlife (Cheshire)*

Listening Ear set up bereavement peer support groups, members of which (max 15) had been through a close family bereavement and were experiencing social isolation and/or loneliness. Community volunteers with a counselling qualification attended a bespoke “Friendship after Bereavement” (FAB) coordinators course.

One to one listening or low-level counselling sessions were delivered for a maximum of 6 weeks. Once complete the participant was progressed to the FAB group stage, meeting one and a half hours per fortnight in a group room where peer support and social activity took place. Because of the nature of the referrals the team found that the need was for specific counselling skills rather than listening.

*Step One Charity - Ageing Well Torbay*

Step One charity offers a six week bereavement course which runs 4-6 times per year. Each course has around 10 people attending and explores people’s emotional responses to loss e.g. week one covers feelings and the affects of grief, denial, isolation, anger, depression and acceptance. The group is a safe space from which supportive friendship groups have formed e.g. among people who have lost children.

Some of the previous participants have set up their own fortnightly bereavement support group which initially started with the support of two staff members until the volunteers felt confident to take on the lead. This group also offer 1-1 support to people suffering loss.

People can also be referred to another delivery partner where they need help in sorting out practical issues around money and benefits.

*Life, loss, learning and legacy group - Time to Shine (Leeds)*

The ‘Life, Loss, Learning and Legacy’ project used video storytelling as a means of coaching 5 groups of older bereaved men across Leeds to tell and share their overlooked, unheard stories of lived experience. These groups of older bereaved men have used video-storytelling to affect positive personal and social change by challenging their perceptions, building relationships and identifying and meeting their support needs through personal 1-2-1 Goal coaching.

The project is not right for everyone as some men don’t feel ‘ready’ at this stage of their grief to take part in a project and some men affected by physical or mental health conditions don’t have sufficient support in place to engage at this time.

The groups varied in size from 3 - 6 men per project. The project found the dynamics between individuals in a group did not always work due to personal differences. As a result sessions are managed and led more closely by the facilitator. Challenging confrontations such as these are useful learning; they encourage men to empathise and understand different viewpoints to their own. As in previous Ageing Better learning the importance of food was highlighted - the opportunity for a free lunch created space for conversation and friendships between older men and provided a break from difficult conversations.

For many of the participants the project increased their confidence and self-belief, whilst reducing their social isolation. They learnt new ways to manage, discuss and process loss and bereavement as well as presenting the first opportunity to volunteer for many.

*Share, Talk and Remember (STAR) peer-support group - Bristol Ageing Better*

The STAR group is a bereavement peer-support group in a neighbourhood of Bristol.
It was set up by a group of six local residents, with support from a community development worker. The group meets twice per month and offers a safe space to talk about the bereavement, to laugh, cry, share stories and listen to others.

The group is peer-led, it is not time-limited (people can attend for as long as they wish), there is no selection criteria (e.g. age), it is free to access and there is no waiting list or referral needed. The group has clear boundaries around not being a counselling service, but can help with signposting if someone in the group needs more specialist support.

Bristol Ageing Better are supporting the STAR group to share their model with others in the city by co-delivering introductory workshops and training.

**Social Projects**

*Social Tables - Time to Shine (Leeds)*

Shared Tables in Leeds was devised to answer a need for opportunities for older single people to share a meal together in a local restaurant. Single people without families living locally said they felt particularly lonely at weekends so Saturdays and Sundays were chosen as the most desirable times to hold a Shared Table. Shared Tables was found to be particularly helpful in reducing loneliness amongst the bereaved.

Participants report how the project offers a different experience from traditional social opportunities as the dates, times and venues are decided by older people themselves. Being in a smaller group having a meal at a local restaurant at the weekend creates a different atmosphere from larger drop-in events during office hours. Also, in providing a supportive group of peers, Shared Tables has been beneficial to people suffering mental ill-health and particularly to people beginning to socialise again after bereavement. Table hosts describe how participants share stories about loved ones and feel able to talk openly to a small group with similar experiences enabling in-depth personal conversations that would be very “unlikely” at coffee mornings.

**Reducing Stigma**

*GraveTalk - Middlesbrough Ageing Better*

GraveTalk is a guided conversation about grief and death using question cards and was set up to see if it would help reduce loneliness for people who were bereaved. Meet ups were held in a mixture of community and church settings. The sessions attracted a small number of people and some people who came along wanted to talk about their loss and others did not. Staff said GraveTalk, on its own was not the right place for people who had suffered a bereavement and wanted support but they felt people valued having a space for deep conversation about taboo subjects.

*Dying to know? - Age Friendly Island*

The Isle of Wight Programme has organised a Celebrating Age Festival for the last 3 years. As part of the Festival an event called “Dying to Know?” was facilitated providing information on preparing for end of life. A one stop shop bringing together a range of exhibitors, conveniently housed under one roof, to discuss and demonstrate their products and services in relation to dying including solicitors, who delivered presentations on probate, power of attorney and wills highlighting the importance of planning ahead and gaining professional advice. There were also Funeral Directors, and Ministers on hand to share advice on funeral planning, eco friendly funerals as well as paperweights, jewellery and keepsakes incorporating...
ashes of a loved one. There was also a display and stand from specialists in equipping people with the know-how and tools to face grief especially after cancer and bereavement.

**Further information**

- **Ageing Better Middlesbrough** - [Spotlight on bereavement & loneliness](#)
  YouTube film - [Coping with Grief and Loss](#)

- **Time to Shine (Leeds)** - [Grief Takes Many Forms](#) learning report
  Shared Tables - [Shared Tables](#)
  Setting up a shared table - [Toolkit](#)
  Film about - [Community Connections through shared meals](#)

Link to some short films created as part of the **Life, Loss, Learning and Legacy project**

- **Ageing Better learning reports** - [Working & engaging with older men](#)

More information on the Ageing Better Programme together including insights from across the programme are available at **Ageing Better**