Covid-19 Transition Phase – learning from Ageing Better

Introduction

Covid-19 is an unprecedented situation affecting the lives of people across the globe, but which is particularly impacting on the older and those classed as "vulnerable". The lockdown restrictions in England are slowly being lifted or relaxed. There remains, however, considerable uncertainty about the future including fears around the likely re-emergence and increased spread of the virus through a second national wave or specific geographical spikes leading to restrictions being reimposed.

There is now a timetable for the withdrawal of the furlough scheme and other central government schemes as the economy pause button is shifted. There are announced dates for the relaxation of restrictions on those who had been asked to shield together with the withdrawal of central support to those individuals. Overall, we are now in transition from people being mostly in their homes to a situation where people are now circulating more and with different people.

As we went into lockdown, we wrote a short paper with our ideas on the impact of Covid-19 based on 5 years learning from Ageing Better, the cessation of face-to-face methods of delivery to that of telephone and online and implications as we all experienced some form of "social isolation". During the lockdown phase (March – June) we began collecting in-time thematic learning from within the Ageing Better Programme resulting in our two reports on Telephone Befriending and Bridging the Digital Divide.

As restrictions lift nationally, the Programme and the work of the 14 areas are also experiencing an important transition point. This is an opportunity to revisit that first briefing paper and to share the insights from Ageing Better teams provided over the last 2- 3 months, relevant to funders and the sector on the next phase of activity under the cloud of Covid-19.

Context as we move into transition phase

The context for individuals aged 50+ is changing. Our insights from across the Ageing Better Programme suggest that:

- **Understandable fear and anxiety about Covid-19 continues -** The initial strong, clear message from central government about the need to stay at home at the start of lockdown was largely understood and implemented by the

majority. So successful was the message and the behaviour change it required that it has embedded a real sense of fear and anxiety for many of either leaving their home or being around groups of other people. This creates a real tension between the value of connecting to and with other people on the one hand and the very real and present danger of contracting the virus for others. This is particularly the case for people aged 50+ as all the messages and statistics indicate that the older someone is the greater the health dangers of contracting Covid-19.

- **Reconnecting people to groups and social situations will not always be straight forward -** The longer that people have spent in lockdown in their homes and away from groups and other social situations is likely to have led to a decrease in confidence and an increase in anxiety levels so impacting on a person's ability or desire to reconnect with wider social groups or activities. This is not just because of Covid-19 but also because of a drop in their own confidence or wellbeing. This is what we have heard is happening on the ground and is coming out of the telephone befriending calls and conversations that areas are having with individuals. Lack of confidence was an already identified risk factor for social isolation and loneliness from earlier Ageing Better work and learning.

- **People have different attitudes to risk and attitude to exiting lockdown -** During the initial phase of the lockdown there was a spirit of "we're all in this together". The expectation was that everyone would stay at home whenever possible. As the restrictions are relaxed there are now very real differences in people's perceptions of the risks and how they apply to them, and subsequent levels of risk they are prepared or able to take, added to a degree of confusion. The lockdown has been a unique experience in people's lives and as the situation changes and restrictions lifted there is an understandable mix of responses. Ageing Better teams tell us that there are people over 50+ keen to get out and about as soon as possible but also large numbers of people who are extremely worried and anxious about going out at all and for whom a personal lockdown will continue.

- **More people are likely to have experienced social isolation for the first time or were returned to social isolation -** Lockdown restrictions meant that people who already had some degree of social isolation or loneliness and were perhaps part of Ageing Better funded activities and work were suddenly back in that position. There is now an additional group of people who, pre-lockdown had been socially active and/or economically independent and who suddenly had social isolation imposed upon them and in many cases also becoming dependent on others for food and medical supplies.

- **Specialist mental health support will be needed -** We know that lockdown has impacted on people's mental wellbeing in a range of ways. This includes anxiety, depression as well as bereavement. Through telephone befriending and emergency hub work we know that access to mental health support has been an identified need that has been met more easily in some areas than others. The fact that Ageing Better partnerships had established networks of delivery and referral partners has been important, particularly so in being able to link people into mental wellbeing provision and peer support e.g. Middlesbrough, Sheffield, Torbay (peer support) and Bristol (mental health support for BAME groups). For some, existing mental health problems will have been exacerbated and for others new problems will have emerged because of the unique stresses and strains lockdown has placed on people. The longer

term impact is unclear.

- **Bereavement and unresolved grief support is needed -** We know from earlier Ageing Better learning that bereavement is a risk factor and contributing factor to social isolation and loneliness. The experience of bereavement during lockdown has been further complicated and made more traumatic for many as a result of the fact that people haven't been able to visit ill friends and family or to attend funerals. This means that for many people the grieving process is incomplete or unresolved which is likely to have an impact on future mental health.

The wider context in communities has also shifted. Our insight across Ageing Better at the macro level indicates:

- **The crisis has highlighted and deepened existing inequalities -** These include the impact of Covid-19 within BAME communities, those with pre-existing physical health conditions as well as the impact of poverty in terms of access to food and to IT equipment/internet. Ageing Better areas had already reported that the calls to helplines had now moved from mainly being linked to emergency food and medicine provision to a wider range of requirements including bereavement support, and financial advice. Additionally areas have commented that they are also becoming more aware of people with multiple, and complex needs. This is likely to increase as the economic impact of the crisis hits with very real concerns for the impact of job losses and recession on people aged 50+.

- **Perceptions and images of people aged 50+ -** Public Health guidance was very clear around the increased health risks for older people and so they, together with people shielding were asked to self-isolate prior to formal lockdown. The main messages during this have been that older people are "vulnerable" and dependent "recipients" of food and medicine and other support rather than as contributors to society both economically, professionally, as well as through a range of volunteering. It is very important that as we move out of this emergency lockdown phase we look at recalibrating the messaging and images and emphasise the contributions people aged over 50 make with examples and stories around "reciprocity" rather than "dependency".

There are also some opportunities the lockdown process has created:

- **More people are reaching out -** Ageing Better has spent a considerable amount of time trying to reach socially isolated people. Through the support structures placed around Covid-19 more people who were "unknown" are now in contact with Ageing Better areas. This presents an opportunity (and a challenge) to reach and engage this cohort of people as well as the people with whom we were already working. More people in the community now also have a practical understanding and appreciation of what it is to be socially isolated.

- **Greater interest in digital opportunities -** Our work on Bridging the Digital Divide highlighted the value to many of the online and digital world during the lockdown. As the lockdown eases there is considerable opportunity to reach and engage people who would now like to be able to get online.

- **A greater range of creative approaches -** Areas have been able to effectively

deliver a range of activity as well as ways to keep connections with individuals and groups in ways other than face-to-face such as through telephone calls, telephone befriending, online groups etc., We have also heard that some people have been more connected than ever before as a result of the increase in online activities and different ways of delivery that areas have set up. Some of these methods of delivery have been found to have specific applications for particular groups of people e.g. more men using telephone conferencing.

- **Increase in volunteering and local support -** There has been an increase in the number of people formally volunteering, helping out in local areas as well as supporting neighbours and mutual aid initiatives.

- **Increase in partnerships and less bureaucratic ways of working -** There has in general been a great deal of practical partnership working on the ground in order to respond to Covid-19 and delivery of emergency/local services. These partnerships have included CCG's, Local Authorities, GPs, as well as a range of voluntary sector organisations. There is an increased appetite and shared ambition to build on these relationships as we move tentatively into recovery. Because of the emergency nature of the situation and a reduction in what could be done "normally" people found ways to get things achieved. Many of these have meant reduced admin or bureaucracy and have been impactful – there is again an appetite to keep this "let's just do what needs to be done" attitude and so a revisiting of some of the previous rules to see if they are really needed.

Action

As well as the adoption of new ways of working and delivery methods, working in a Covid-19 environment has also highlighted the continued importance of a number of Ageing Better principles. One of these is the importance of working in a person centred holistic way – so taking time to build a relationship of trust with an individual in order to find out what it is that they want to achieve and what we can build on in order to help that connection happen.

Our insights during this transition phase suggest a need for the following to help achieve this:

- Recognition of the importance of a connector role – as set out above, people will be in different practical and emotional places. A person centred approach needs someone with the time and skills to build and develop a connection with a person and provide the right support at the right time. This can include a challenge to encourage someone lacking confidence to take the step to reconnect with wider activities. But it can equally mean recognising the practical limitations of a person's situation and supporting them through activities and sessions that they can do from home. We have heard how important telephone befriending has been in providing people with a feeling of "connection" and of the flexible delivery of services to meet the different needs of people – maintaining that person centred approach.

- Time – A further element of working in a person centred way is also working at the pace of that individual. This has increased resonance at this point of the crisis bearing in mind the points raised above about people's varying levels of anxiety and risk. We have also learnt that there are different milestones on a spectrum of engagement or connection and they may be different for different people rather than there being a fixed route and timescale to any kind of "finishing line". So it may not be practical or possible for someone to

move from a telephone befriending service into something else at the moment and that's fine.

- A blended model of delivery – as the transition happens there is likely to be a need for a blended model of delivery that includes digital, telephone and face-to-face offers. As we highlight above, online resources and activities have been a lifeline for many people. In our Bridging the Digital Divide report, however, we also identified that online is just not possible for a group of people aged 50+ and that therefore we need to advocate for the provision of activity and resources via hard copy as well as via telephone and face-to-face. This mixed delivery model is not only person centred but also allows increased flexibility as we move into the current transition phase with a number of uncertainties around face-to-face delivery which includes:

  i)   Restarting face-to-face activity will take time, is dependent on a range of factors broader then the activity itself and including the impact of social distancing on the activity, as well as the provision of transport, toilets and refreshments etc.,

  ii) There is likely to be a reduction in the number of people able to attend sessions - we are envisaging that most activities will not be able to cater for as many people to attend as previously because of the need to physically distance.

  iii) There are likely to be local and possibly national lockdowns that happen over the coming months – there are warnings of a further surge of numbers in the autumn and possibility of reimposed lockdown restrictions which mean that there is likely to be a need to maintain telephone and online services for the foreseeable future.

  iv) There is an opportunity to be creative and imaginative about delivery - We have heard that areas continue to think imaginatively in looking at the possibility of delivering face-to-face activity e.g. exercise or craft classes which are also filmed for an online audience etc.,

- Increased partnership working – we found through our telephone befriending work how important the triage of calls was to ensure those with complex needs could be signposted to appropriate support. There is likely to be an ever-shifting landscape of support (particularly mental health support) that will vary from area to area. Staying connected to and aware of the wider support available will be essential in meeting people's evolving needs. It will also be vital to keep across the government guidelines and rules around social distancing and the safe operation of activities. There is also considerable opportunity for harnessing the successful partnership working established during the emergency provision phase to develop new ways of working between the third sector and statutory partners. Keeping on top of all this change will take time and organisations will need the resource to maintain their awareness of the variety of activities and support on offer.

- Local mapping - Linked to the need to keep connected to partners is the need to undertake some local mapping to establish what services, organisations and support is available. This is partly a recognition that not all agencies or services may still be running. Resources are tight and will likely get tighter in the future and it is important not to replicate provision but instead identify appropriate referral partners, networks and any gaps in provision. This also builds on learning from successful emergency hub provision which allowed people to be linked to the support that was right for them e.g. advice on

benefits/debt or mental health peer support etc., This will also help build networks and partnerships with agencies working with particular groups and communities such as carers, specific BAME communities and so help access language skills as well as specialist knowledge and support.

- Revisit the local Ecosystem - In our national Ageing Better learning summary, we talk about the Ecosystem as "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, that includes age friendly activity." In the medium to long term and once the mapping of the local ecosystem has taken place this can help identify where the gaps are and how to fill them. We know the importance of having a range of activities and groups available for people to "connect" with or for them to be supported into via the "connector" role discussed above as they move out of social isolation. This links into insight from areas that people are being "held" by services currently but that as time goes on and fewer people are able to volunteer there will be a need to connect people into other activities and services. We will need functioning local ecosystems.

- Using appropriate imagery and wording in communications – we had good insight from across Ageing Better of people aged 70+ not recognising themselves as vulnerable or frail as per Public Health messages. We have found across Ageing Better it is important to use imagery and language that relates to the real life experiences of people aged 50+. This becomes more important as we stress more nuanced Ageing Better messages and look to emphasise the contributions people aged over 50 make with examples and stories around "reciprocity" rather than "dependency".

- Capitalising on volunteering – we know there has been a considerable response to both formal and informal volunteering from a wide range of people and there is considerable opportunity to harness and funnel this enthusiasm into new areas. We also feel there is considerable opportunity for those currently shielding or at risk of going back to shielding in future lockdowns to be part of volunteering/peer support opportunities, particularly telephone befriending. Some people had been volunteering whilst on furlough and again as a number of these return to work we need to look at developing broader flexible opportunities for them to continue to be involved in the local community. This also has huge potential to build upon greater intergenerational activity and we think there is particular opportunity for this around Bridging the Digital Divide.

Further information

- [Telephone Befriending](#)

- [Bridging the Digital Divide](#)

- [Covid-19 Ageing Better Learning](#)

More information on the Ageing Better Programme together including insights from across the programme are available at [Ageing Better](#)