



Ageing Better:

Learning Report No. 3 - Groups at Risk of Marginalisation

October 2018



**NATIONAL
LOTTERY FUNDED**





Crossgates Lunch Club, Leeds

About the Ageing Better programme

Ageing Better is a National Lottery funded programme set up by the Big Lottery Fund, the largest funder of community activity in the UK. It aims to develop creative ways for people aged over 50 to be actively involved in their local communities, helping to combat **social isolation** and **loneliness**. The programme is running from 2015-2021 and is delivered by 14 cross sector **partnerships** across England.



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The aims of Ageing Better

The programme aims to enable people aged 50 and over to be:

- Less isolated and lonely;
- Actively involved in their communities, with their views and participation valued more highly;
- More engaged in the design and delivery of services that improve their social connections.

It also aims to support:

- Services that improve the planning, co-ordination and delivery of social activities;
- The future design of services by developing better evidence about how to reduce isolation and loneliness for people aged 50 and over.

“Getting involved has got rid of my depression, my family live far away and I started to become very tearful, but since joining the **project** I have made lots of friends and I feel happier¹”

(Participant, Leeds)

Glossary: Words that appear in a **bold blue** format feature in the glossary at the end of this paper.

¹ Time to Shine Evaluation Interim Report: The Beneficiary Experience, University of Sheffield, 2016

Ageing Better principles and activities

The Ageing Better programme is designed to test what works in reducing social isolation and loneliness in those aged over 50. It has set out to achieve this by avoiding imposing top-down models and instead encouraging the development of different local activities and structures which share fundamental approaches to delivery. This is underpinned by mechanisms known as **structural enablers**: being focused on neighbourhoods; **asset-based**; using volunteer approaches and combatting stigma through positive ageing.

Each partnership is based on the skills and experience of people aged 50 and over, making use of the unique nature and assets of each area, to meet locally identified needs. This allows each partnership to develop its own activities and events based on key strengths, resulting in a range of different activities being taken across the 14 programme areas. Further details of the range of activities, including one-to-one and group activities, community development/neighbourhood approaches and intergenerational work, can be found in a **previous report** in this series.

Partnerships are encouraged to **test and learn** throughout their programme, building on evidence and shared learning so that their work has the most impact possible. This allows them to respond to challenges, honestly reflect and share what has been less successful and capitalise on opportunities to fill gaps in services whilst exploring new approaches.

This Series of Reports

Ecorys and Ageing Better are actively sharing early knowledge and exploring emergent trends in this series of reports, combining quantitative and qualitative data so that learning from the national and partnerships' own local evaluations can improve wider services for people aged 50 and over.

Themes explored in these reports will be examined in more detail throughout the life of the programme to ensure that knowledge is generated and retained on an on-going basis.



Digital Buddies, Cheshire

About this report

This report has been written by Ecorys, the lead independent national evaluator of the Ageing Better programme, for the Ageing Better 2018 Making Connections Annual Conference. It shares the early lessons collected from the 14 partnerships, including information on the overall impact of the programme².

The report has a specific focus on groups of programme participants that we think are more likely to be marginalised and at risk of loneliness and social isolation, and where there are gaps in understanding what works to address these issues for these participants.

These groups are:

- Black, Asian and Minority Ethnic (BAME);
- Lesbian, Gay, Bisexual, and Other;
- **Carers**;
- Those living alone

The report contains early reflections on how the programme has helped reach and engage these groups, supporting ongoing discussions.

We know that social isolation and loneliness affect other different groups that can also be marginalised, in addition to those that are the focus of this report. We will continue to collect data and information on all programme participants, and explore the diverse experiences of people aged over 50 reached by the programme in future reports.

Information feeding into this report

A number of different sources of information have fed into this report to provide as full a view as possible:

- Surveys of over 22,000 programme participants across 250 different Ageing Better projects, which tell us about the changes they have experienced through getting involved in the programme. We report on these changes where they are **statistically significant**.
- Insight captured from one-day visits to each of the 14 programme areas, including interviews and focus groups with people delivering projects, and recent visits to additional projects.
- Feedback from a wider meeting of 25 stakeholders from the partnerships to reflect on lessons from the experience of delivery so far across all areas.
- Research based on local evaluation reports and other relevant documents from partnerships.

² Ecorys lead the evaluation partnership, which also includes Bryson Purdon Social Research and the College of Health and Life Sciences at Brunel University



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Programme achievements

Who is taking part?

Partnerships are testing different ways to involve people aged 50 and over that reflect the diversity within their communities.

So far, Ageing Better partnerships have worked with around 80,000 participants and 14,000 volunteers³.

³ Figures up until September 2018

80,000
participants

14,000
volunteers



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Programme achievements (contd)

What has changed for participants?

Social isolation and loneliness

“It plays a very big role in reducing isolation. Particularly for myself – I live on my own... It keeps me up and out and I enjoy the things I do⁴”

(Participant, Isle of Wight)

Our independent survey results from over 3,500 participants showed that, on average, participants are less socially isolated and less lonely⁵ after participating in Ageing Better. These positive changes are in line with our data showing that participants are in contact more with their families, friends and other people after getting involved in Ageing Better.

Involvement in community activity

Our data shows that participants are more actively involved in their communities following participation in Ageing Better. Helped by the variety of different approaches provided by Ageing Better (see [previous report](#)), they are taking part in a greater range of social activities⁶ and are members of more types of clubs, organisations and societies⁷.

Health and wellbeing

Current evidence shows that participants are reporting better mental **wellbeing**⁸ and overall quality of life^{9,10} after taking part in Ageing Better activities.

“I feel I have more confidence in myself. Able to tackle things I did not think I could and... [to be involved with] a successful group of people who enjoy themselves¹¹”

(Participant, Middlesbrough)

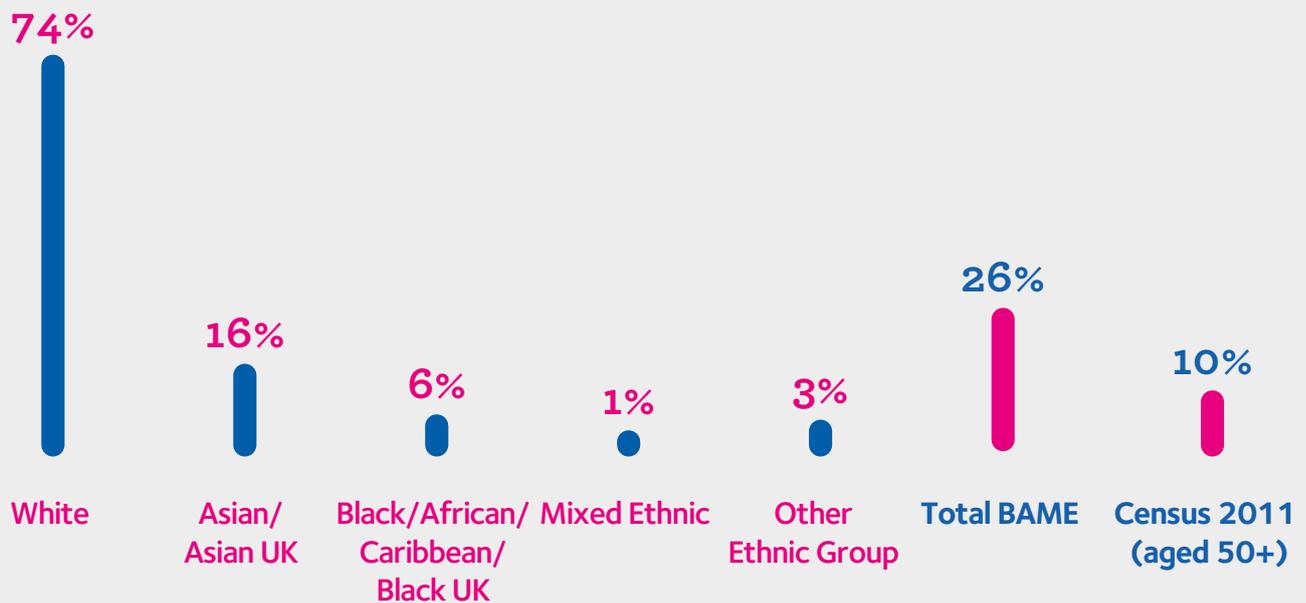
-
- 4 Age Friendly Island Local Evaluation, National Development Team for Inclusion, 2017
 - 5 Mean score change from 3.3 at entry to 3.0 at follow-up on the De Jong Gierveld Loneliness Scale (scored from 0 as the least lonely to 6 as the most lonely) across 4,441 respondents
 - 6 Participation in social activities compared to other people of the same age. Mean score change from 1.4 at entry to 1.7 at follow-up (scored from 0 as much less participation in social activities than most to 4 as much more) across 5,471 respondents
 - 7 Types of club, organisation or society of which participants were members. Mean score change from 1.0 types at entry to 1.2 at follow-up across 4,950 respondents
 - 8 Mean score change from 21.2 at entry to 22.7 at follow-up using the Short Warwick-Edinburgh Mental Wellbeing Scale (scored from 0 as the lowest level of mental wellbeing to 35 as the highest) across 4,522 respondents.
 - 9 Mean score change from 61.2 at entry to 65.3 at follow-up using the EQ-VAS Scale (scored from 0 as the lowest self-reported health to 100 as the highest) across 1,849 respondents.
 - 10 Mean score change from 0.58 at entry to 0.60 at follow-up using the EQ-5D-3L Scale (scored from 0 as the lowest self-reported health to 1 as the highest) across 1,944 respondents.
 - 11 Evaluation of Ageing Better Middlesbrough, Teeside University, 2017

What has changed for volunteers?

Getting involved in projects as a volunteer provides an opportunity to increase people's social connections, which can be beneficial if they are at risk of or directly affected by isolation and loneliness. Many Ageing Better projects support volunteers aged over 50 to take active roles in their local communities. Many volunteers have found this to be a positive experience:

“It opened up a whole new world for me¹²”
(Volunteer, Manchester)

Ethnic Background (14 Ageing Better areas)



Base (survey respondents) = 20,540

Comparing the figures from Ageing Better participants to those from the Census show that Ageing Better is reaching a greater proportion of people who identify as BAME (26%) than are found among those aged 50 and over in the same areas (10%).

¹² Volunteer interviews, Greater Manchester, 2016

¹³ Volunteer interviews, Hackney, 2016

One way that Ageing Better projects are positively engaging older BAME people is by working in close partnership with organisations that already have strong links to people from a range of ethnic backgrounds.

The Sheffield partnership has run Art Therapy taster sessions, linking in to existing groups and helping build relationships with BAME communities. A mixture of one-to-one and group-based approaches to therapy are used, depending on the setting that is most suitable and comfortable for participants.

Another successful approach has been using the existing personal networks of participants to encourage further and broader engagement.

Emerging learning from the Leicester partnership has suggested that projects have reached target populations, including BAME individuals and groups, better through families and friends than by **statutory** referral routes such as through GPs or Adult Social Care.

Other partnership areas have also provided valuable learning on what works with similar groups in different settings.

Knowing Me, Knowing You (part of the Middlesbrough partnership) have explored the stigma among loneliness in certain groups, with patriarchal family structures sometimes acting as a barrier to those experiencing loneliness seeking support.

A key theme across Ageing Better has been that many groups have particularly enjoyed activities which connect them to their cultural background as well as to other people. Providing support and activities that are sensitive to cultural attitudes and practices has been particularly important.

“It's that Irish connection, although Leeds is my home, I will always have a soft spot for Ireland... I love Irish music, go to the Irish centre, it's the connection¹⁴”

(Participant, Leeds)

Part of this recognition of the importance of cultural background has been awareness of the importance of language, with some people aged over 50 being unable to speak to neighbours or others due to the lack of a shared language.

“That's why I came, [I had] no-one to talk to, my neighbours are not Chinese¹⁵”

(Participant, Leeds)

Providing activities where participants can speak comfortably to others in their own first language has been particularly welcomed. An additional learning is that language needs to be taken into account in marketing, with a “word of mouth” approach often being particularly successful while ensuring cultural sensitivity.

14 ageuk.org.uk/our-impact/policy-research/loneliness-research-and-resources/connecting-cultural-to-reduce-loneliness

15 Time to Shine Evaluation Interim Report: The Beneficiary Experience, University of Sheffield, 2016 Learning Report No. 3 - Groups at Risk of Marginalisation | 9

Lesbian, Gay and Bisexual participants

Existing Ageing Better data shows 95% of participants are heterosexual. The sexual orientation of the remaining participants is shown in the following chart.

Lesbian, Bisexual, Gay or Other (14 Ageing Better areas)



Base (survey respondents) = 16,749

Our data clearly shows that Ageing Better programmes are recruiting a larger proportion of participants who are lesbian, gay, bisexual or other (5%) than were found in the general population of those aged 50 or over in the UK at the last census (1%).



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This higher proportion of participants who are Lesbian, Gay, Bisexual or Other has largely been the result of focused work by a small number of projects, which were organisations that worked consistently with these and similar groups before the Ageing Better programmes commenced delivery.

Camden's LGBT* Connect project engaged around 200 older LGBT+ people within the first two years¹⁶. It was based on a welcoming environment, providing the opportunity for people to connect to others with shared experiences. Social events and activities are run across the borough, providing advice, signposting and personal support.

Different projects take different approaches based on the exact local context and the strengths and needs of potential participants.

The LGBT+ Life Coaching and Support project in Hackney provides life coaching and peer support for older LGBT people. The service provides four sessions of life coaching and an LGBT coaching ally who supports participants to help them reach their own specific goals.

Particularly important has been offering shared services, a welcoming environment and a safe space for older LGBT+ people.

The Sage project in Leeds focuses specifically on older LGBT+ people. It offers fortnightly informal drop-in sessions, supported by volunteer 'buddies'; social events and activities. Creating a safe space for interaction to help like-minded people meet each other has been key to their success

“[I] felt I wouldn't be welcome in the gay community, complete with walking stick... Since joining Sage I feel quite able to go¹⁷”
(Participant, Leeds)

¹⁶ OPM Group, Ageing Better in Camden Evaluation Synthesis Report of Year 1 and 2, Nov, p. 60

¹⁷ Combating loneliness amongst older LGBT people: a case study of the Sage project in Leeds, University of Sheffield, 2018

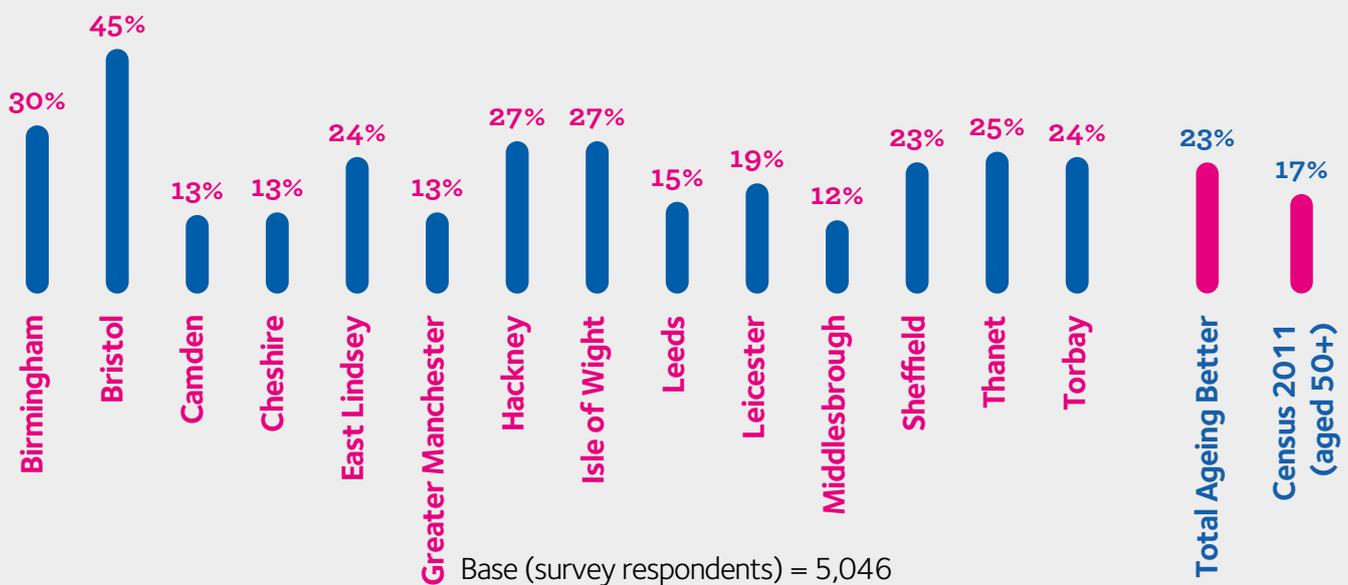




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Participants who are Carers

Carers (14 Ageing Better areas)



This data shows that Ageing Better is engaging a larger proportion of carers (23%) than are found across the 14 programme areas as a whole among those aged 50 and over (17%).



Big Lunch - Connect, Hackney

Providing clear support in a variety of ways to link carers to each other and the local community has been particularly important.

Care for Carers, part of the Isle of Wight partnership, is a project that provides support to carers over the age of 50 who do not know what help is available to them, and empowers carers through facilitating opportunities to get involved in their local community.

Learning from the partnerships suggests that engagement can be encouraged by providing activities that offer the opportunity for carers to attend together with the person they care for. In addition, various projects have taken specific approaches to enable them to test and learn about the best way to work together with carers.

Growing Older Together, part of Ageing Well Torbay, tested how to better support people with learning disabilities who have become carers for their parents or family members. They found that some families were initially reluctant to get involved as they had not realised the degree that they were becoming mutual carers.

“A very big thank you, it’s absolutely marvellous, it’s brought in new friends on the same wave length, we know how each other is feeling¹⁸”

(Participant/Carer, Isle of Wight)

¹⁸ Age Friendly Island Local Evaluation, National Development Team for Inclusion, 2017



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Participants Living Alone

Living Alone (14 Ageing Better areas)



Base (survey respondents) = 5,105

As may have been expected given the Ageing Better focus, the programme is successfully engaging a considerably larger proportion of those living alone (51%) than are found across the 14 programme areas as a whole among those aged 50 and over (27%). While people living alone are not necessarily socially isolated or lonely, it has been identified as a statistically significant risk factor¹⁹.

¹⁹ ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/health--wellbeing/rb_june15_lonelines_in_later_life_evidence_review.pdf



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Although Ageing Better programmes are reaching significantly more people aged over 50 living alone, the prevalence of those living alone means that most projects have adopted general approaches to reach this group as part of their overall engagement activities. However, some projects do have a specific focus on those who live alone

The Outreach Team in Middlesbrough have worked closely with large numbers of people living alone. Their work suggests that people without any close family or whose family live far away felt particularly lonely on weekends, and that those who lived alone also felt constrained from interrupting the family time of others²⁰.

One approach that has worked is providing direct connections to help support older people to link back into existing community networks, as in the More Than a Mealtime project in Leeds, which matches members of the community with volunteers to visit them, share a meal and help build their confidence and wellbeing.

“I wouldn’t have gone for a meal on my own, I might have gone to a café, but a pub or restaurant, I wouldn’t do that on my own...now I have been a couple of times [to the shared tables] I would go to a restaurant or pub on my own, I wouldn’t dream of doing it alone before²¹”

(Participant, Leeds)

²⁰ Ageing Better Middlesbrough: Learning Report, 2017

²¹ Evaluation of Time to Shine: Year 2. Interim Findings, University of Sheffield, 2017

Learning so far

The programme is generating valuable learning. After taking part in Ageing Better, participants are, on average, less socially isolated and lonely, taking a more active role in their communities and getting involved in delivering and designing projects. Ageing Better is helping organisations to develop better ways of working, and increasing skills, capacity and knowledge among participants helping to deliver and design programmes.

Over the course of Ageing Better, partnerships and projects have faced challenges, including how best to reach those in more marginalised circumstances considering the barriers to engagement such people might face; ensure messages are culturally sensitive; and provide the most suitable blend of activities based on the local context and the needs of groups that can be marginalised.

Dealing positively with these challenges has already led to developments in how partnerships and projects work, with the overall approach to test and learn having helped support and encourage partnerships and projects to continually refine and develop their work. Further learning on this will be collated and shared in future reports.

Looking forward

In our role at Ecorys as the independent evaluator and learning partner for the Ageing Better programme, we will work with the Big Lottery Fund and the Ageing Better partnerships to generate learning from the programme and share this through future reports and learning events.

In future we will look in more detail at the change in social isolation and loneliness among groups at risk of marginalisation and examine the different contexts and approaches that enable positive changes to be achieved within communities.

We will share our findings as we learn and use them to influence wider service design.

Ageing Better partnerships are also planning to come together and explore in more detail the challenges and successes of engaging groups at risk of marginalisation and to share learning that will support improved project design and delivery for groups at risk of marginalisation and for other groups.

For further details about Ageing Better and our plans for the evaluation, please see biglotteryfund.org.uk/ageingbetter or contact us at ageing.better@ecorys.com

Partnership websites

Birmingham	ageingbetterinbirmingham.co.uk
Bristol	bristolageingbetter.org.uk
Camden	ageingbetterincamden.org.uk
Cheshire	brightlifecheshire.org.uk
East Lindsey	tedineastlindsey.co.uk
Greater Manchester	ambitionforageing.org.uk
Hackney	connecthackney.org.uk
Isle of Wight	agefriendlyisland.org
Leeds	timetoshineleeds.org
Leicester	leicesterageingtogether.org.uk
Middlesbrough	ageingbettermiddlesbrough.org.uk
Sheffield	agebettersheff.co.uk
Thanet	agelessthanet.org.uk
Torbay	ageingwelltorbay.com

Glossary Definitions

Asset-based

Asset-based approaches focus on the positive aspects of individuals and communities, valuing their capacity, skills, knowledge and connections. They are based on the strengths people and communities bring. These assets can act as the foundation within upon which to build better outcomes.

Carer

A carer is used in this report as referring to anyone who looks after or gives special help to someone who is physically or mentally disabled. This could be a relative, wife, husband, partner, child or friend.

Partnership

Partnership refers to the individuals and organisations (partners) that oversee and support the delivery of Ageing Better in each of the 14 programme areas. Each partnership selects a variety of projects that best meet local needs.

Project

Each project is made up of one or more activities, with multiple projects in each partnership. Projects can take different approaches to working with people over 50 – they could involve working in a group setting with LGBT+ people; raising awareness about particular issues; or working to improve levels of physical activity.

Social isolation and loneliness

There is no single agreed definition of social isolation or loneliness. In general, social isolation refers to the number and frequency of contacts with other people that a person has, and loneliness refers to the way that a person views this contact (for example whether it is a fulfilling connection). Social isolation is an objective state, whereas loneliness is subjective.

Statistically Significant	Figures are said to show a statistically significant change if it is likely to be a real change and unlikely (but not necessarily impossible) to be due to chance. It does not necessarily mean that changes are important.
Statutory	Statutory organisations are created by law, for example the NHS, Clinical Commissioning Groups, or local authorities.
Structural Enablers	Underlying ingredients that help to create the right conditions in local communities to reduce the numbers of people experiencing or at risk of loneliness.
Test and Learn	Test and learn gives partnerships ‘the flexibility to try out a range of approaches. It also means recognising and sharing when things haven’t gone as intended, as well as when they have been successful, to create practical learning for others. Using this learning, the programme aims to improve how services and interventions to tackle loneliness are delivered, and ultimately contribute to an evidence base to influence future service development’ ²² .
Wellbeing	Wellbeing means feeling good, functioning well and being able to respond to challenges in life positively.

²² 2018 Knowledge and Learning Programme Briefing, Ageing Better. Big Lottery Fund, May 2018, p. 2.



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