EXECUTIVE SUMMARY
of the Time to Shine local evaluation

Produced for Leeds Older People's Forum

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Time to Shine

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03 | Social isolation and Loneliness: The Challenge

Many older people experience social isolation and/or loneliness and this can severely damage their health and well-being.

Social Isolation is 'an objective measurable state of having minimal contact with other people, such as family, friends or the wider community', whereas **loneliness** is 'a subjective, unwelcome feeling of lack or loss of companionship. It happens when we have a mismatch between the quantity and quality of social relationships that we have, and those that we want'.[1]
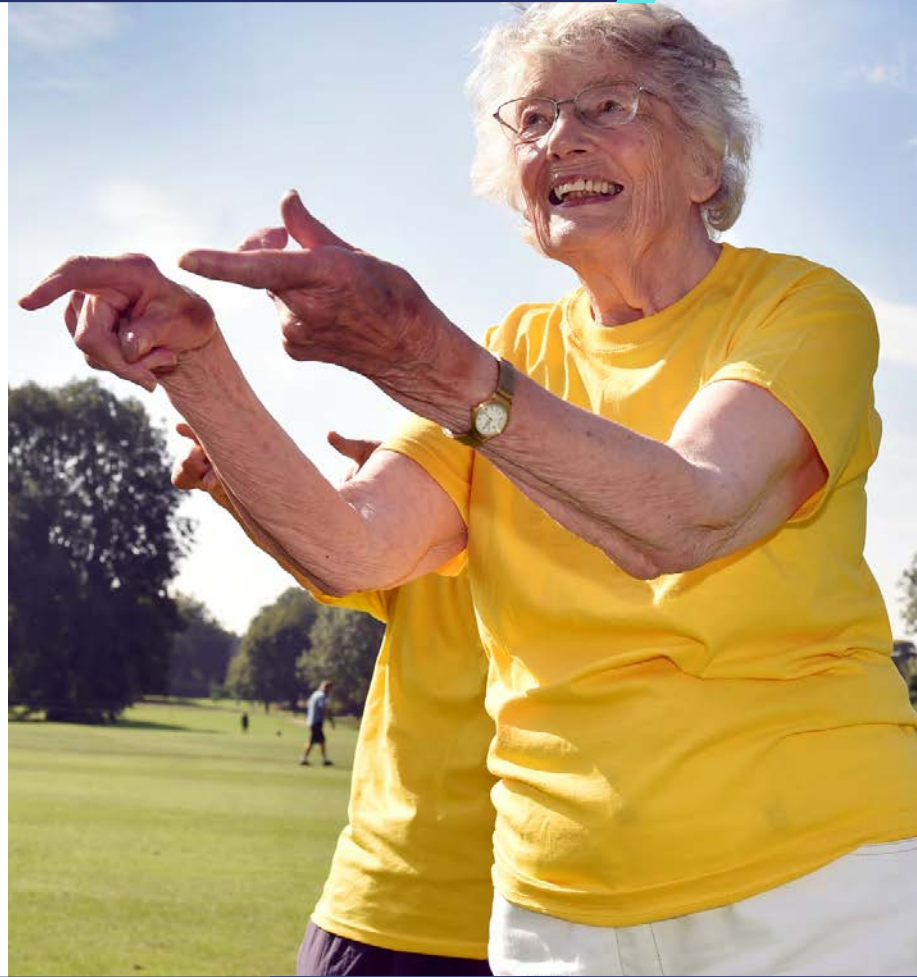
- Over 1 million older people are persistently (chronically) lonely, with the number of people aged 50+ experiencing loneliness set to reach 2 million by 2025[2]

- Approximately 50% of individuals aged over 60 are at risk of social isolation[3]

- COVID-19 has exacerbated loneliness for some people[4]

- Lonely people are more likely to suffer from dementia, heart disease and depression, increased mortality rates and a poorer health related quality of life score[5]

In 2020 around 254,000 people living in Leeds out of a population of **800,000** were aged 50+ and **161,000** were aged 60+[6]

Like the rest of the country, the population in Leeds is rapidly ageing. The fastest growing population group in Leeds is aged 80+. This is set to grow just over 34,100 to just over 51,000 (a 51% increase) by 2043.[7]

Estimations show that in Leeds there are large numbers of older people who are not connected. This could determine if people in Leeds age well.

In Leeds an estimated:[8]

52,438 older people feel lonely (50+)

26,000 do not have someone to rely on if they have a serious problem (55+)

22,232 did not use the internet in the last 3 months (55+)

Data in the social isolation index highlights areas of the city where older people (65+) are most likely to feel lonely, with many of these correlating with the most deprived areas in the city [9]

Time to Shine (TTS) was part of the Ageing Better (AB) programme - a six year, £80 million National Lottery Community Fund investment - to improve the lives of people aged over 50. AB aimed to address social isolation and loneliness within 14 local communities across England. TTS received £6m funding to reduce loneliness and social isolation amongst older people living in Leeds.[10]

Key features of Time to Shine included:

- A co-produced approach to management, design, delivery and evaluation. This was achieved through a partnership of local organisations and by involving older people. TTS was led by Leeds Older People's Forum, a local voluntary sector group

- An emphasis on Test and Learn – to try out new innovative ideas, test if they are successful, and learn by adapting future initiatives.

- Over 105 projects, services, and campaigns. These were of varying sizes and led by local delivery partners.

- Some interventions/projects targeted all lonely older people, whilst others targeted specific groups of older people, such as older men, LGBT+, Black, Asian, and Minority Ethnic individuals.

- Interventions ranged from one-to-one support in the home, to group-based activities in community venues, to city-wide campaigns aiming to raise awareness about loneliness and age discrimination.

The 14 AB programmes were evaluated nationally by research-based consultancy, ECORYS. Each programme employed an additional independent evaluator for their own local evaluation. The Centre for Loneliness Studies, led by Andrea Wigfield at the University of Sheffield and supported by a team of researchers, evaluated the Time to Shine programme. The team involved local older people as peer researchers to help guide the study and collect some of the data. The main local evaluation methods of Time to Shine included:

Questionnaire of older people involved in Time to Shine

1,893 respondents **before** TTS involvement

893 respondents **after** TTS involvement

Interviews & Focus Groups

56 Stakeholder Interviews (approx. 10 each year for 5 years) with staff, delivery partners and core partnership members

38 In-depth interviews

24 Focus Groups with older people involved in TTS

Case Studies

13 Project/intervention Case Studies

Quarterly project monitoring returns; Test & Learn Case Studies

Other

10 Volunteer Listeners capturing stories of 26 older people

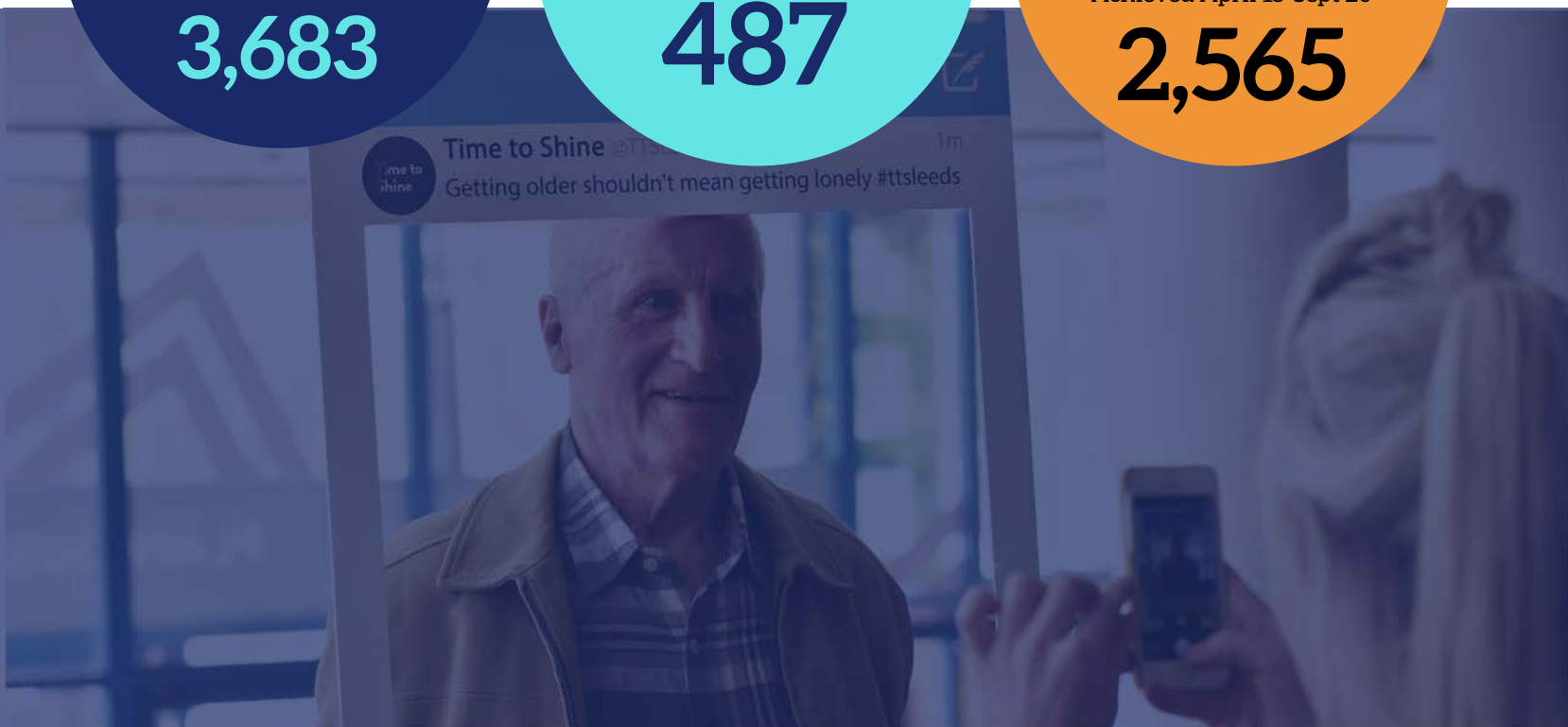PhD on co-production using focus groups and sensory interviews

07 Did Time to Shine meet its target outputs?

The Time to Shine programme overachieved against the targets initially set, reaching and engaging with more older people as both beneficiaries and volunteers than planned. TTS also engaged with more older people in the specific target groups- older men, LGBT+ and Black, Asian and Minority Ethnic individuals - than anticipated.

Target and achieved numbers of participants, volunteers, and volunteer hours from April 2015

People involved in the programme	Older people who regularly participate or volunteer	Volunteers of any age	Volunteer hours
Target **15,000**	Target **10,000**	Target **1,000**	Target **No target**
Achieved **20,767**	Achieved **10,040**	Achieved **1,797**	Achieved **58,486**
March 2021	March 2021	Sept 2020	Sept 2020

Characteristics of TTS Beneficiaries against targets

Older Men
TTS Target
2,000
Achieved April 15-Sept 20
3,683

Older LGBT+
TTS Target
250
Achieved April 15-Sept 20
487

Older Black, Asian and Minority Ethnic
TTS Target
600
Achieved April 15-Sept 20
2,565

08 | Did Time to Shine meet its aims and outcomes?
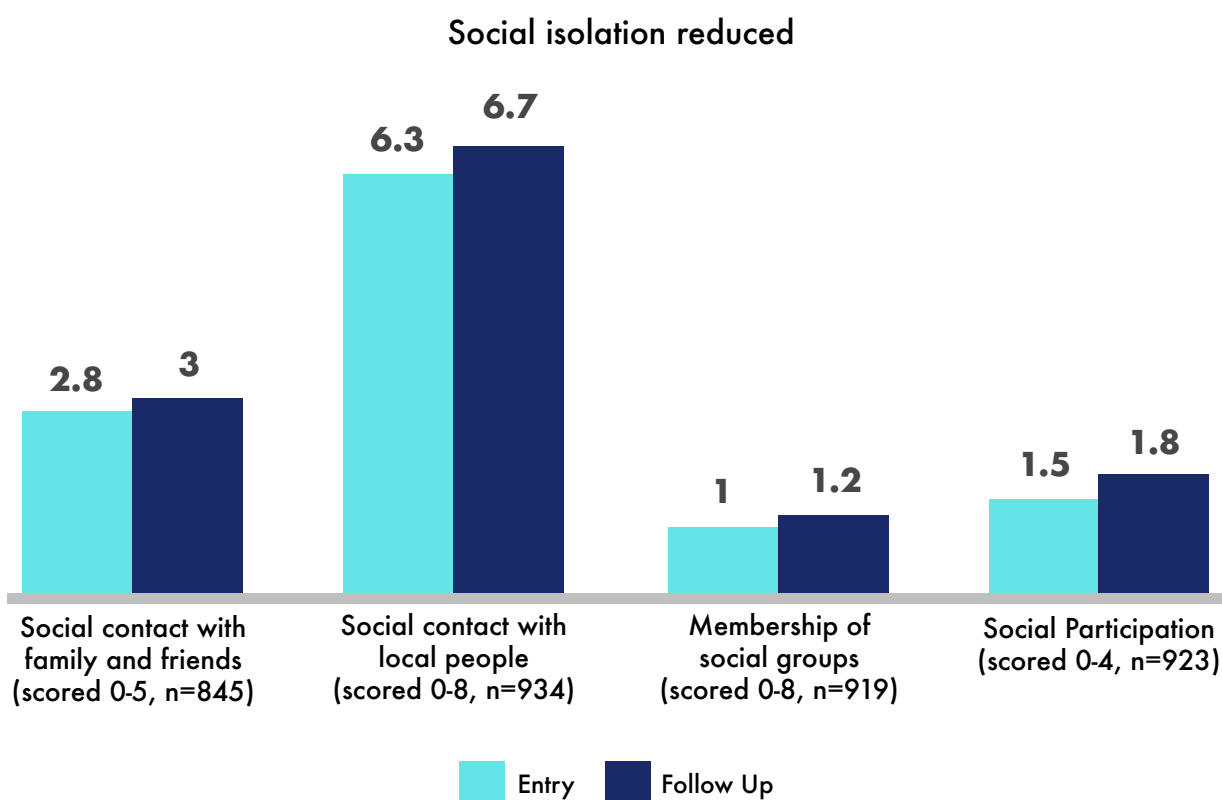
TTS had four main programme aims:

Aim 1: Each year beneficiaries report that they are less isolated as a result of a project intervention.

Aim 2. Project beneficiaries feel confident and able to participate in their communities by 2021.

Aim 3: Older people have been actively involved in managing, designing, delivering and evaluating the programme.

Aim 4: The wider partnership will expand each year and will work better together to coordinate services and support for isolated older people.

The local evaluation findings show that older people who participated in TTS have become less socially isolated and less lonely, and have experienced improvements in their well-being. Many of these improvements have been proportionately greater than those experienced in the AB programme overall. Some groups of older people who are especially susceptible to social isolation and loneliness have particularly benefited from their involvement in TTS. In the following graphs n= sample size.

Social isolation reduced

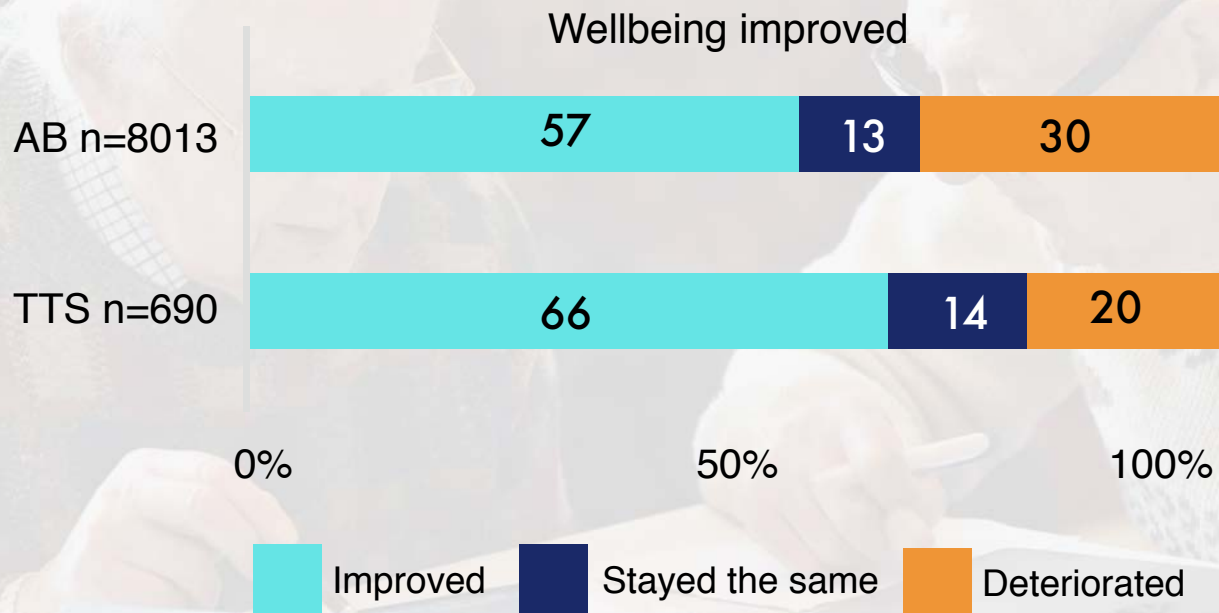|	Entry	Follow Up
Social contact with family and friends (scored 0-5, n=845)	2.8	3
Social contact with local people (scored 0-8, n=934)	6.3	6.7
Membership of social groups (scored 0-8, n=919)	1	1.2
Social Participation (scored 0-4, n=923)	1.5	1.8

The questionnaire responses show that social contact with family and friends, contact with local people, membership of social groups, and social participation have all improved following older people's engagement with TTS.

Wellbeing improved

	Improved	Stayed the same	Deteriorated
AB n=8013	57	13	30
TTS n=690	66	14	20

0% 50% 100%

■ Improved ■ Stayed the same ■ Deteriorated

Two thirds of older people who completed a questionnaire before and after their involvement in TTS reported an improvement in their well-being as measured by the Warwick-Edinburgh mental well-being scale.[11] This is higher than the percentage improvement in wellbeing across the Ageing Better programmeas a whole (59%).

Beneficiaries were less lonely

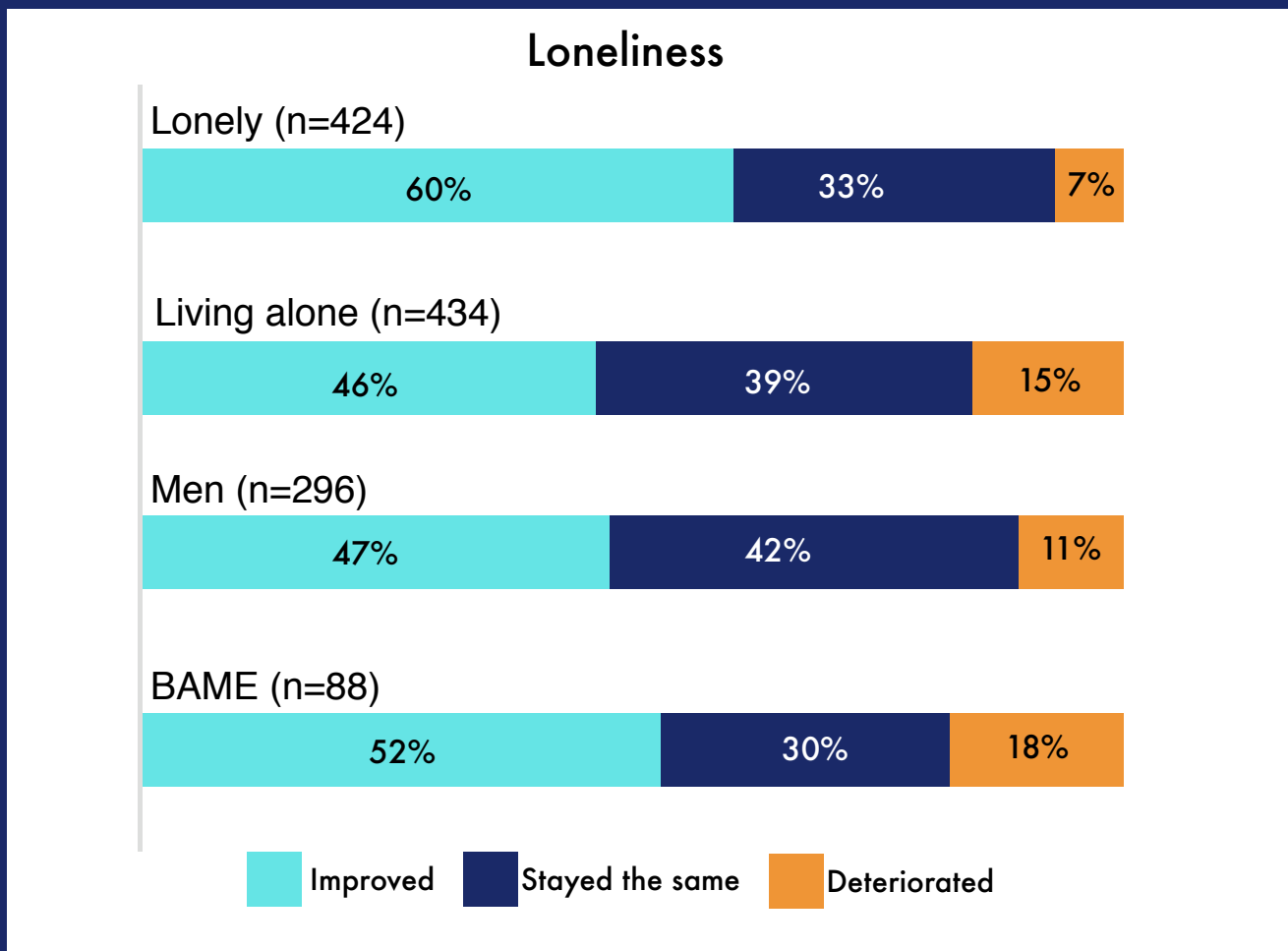|	Before	After
De Jong Gierveld	3.3	3.1
UCLA	5.8	5.2

■ Before ■ After
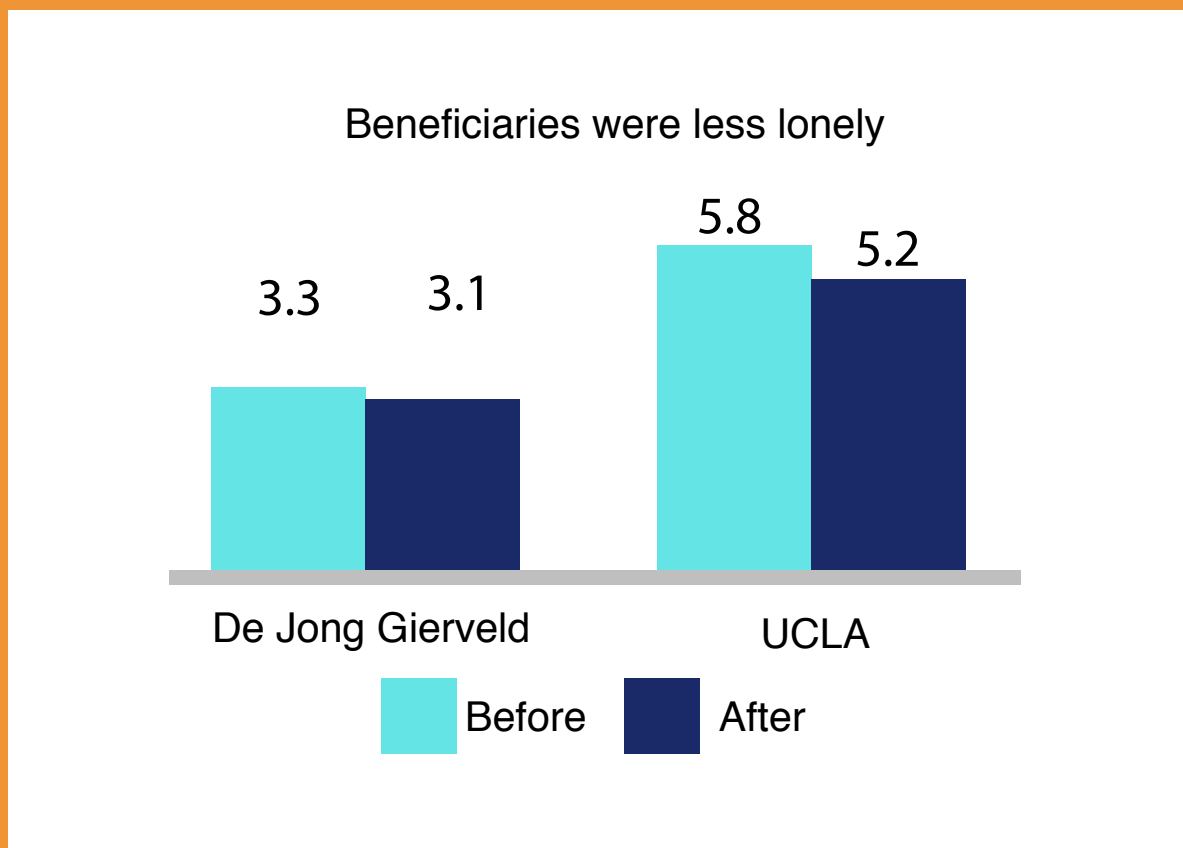
Older people's feelings of loneliness significantly reduced following involvement with TTS as measured through the questionnaire by two measures of loneliness (De Jong Gierveld[12] and UCLA).[13]
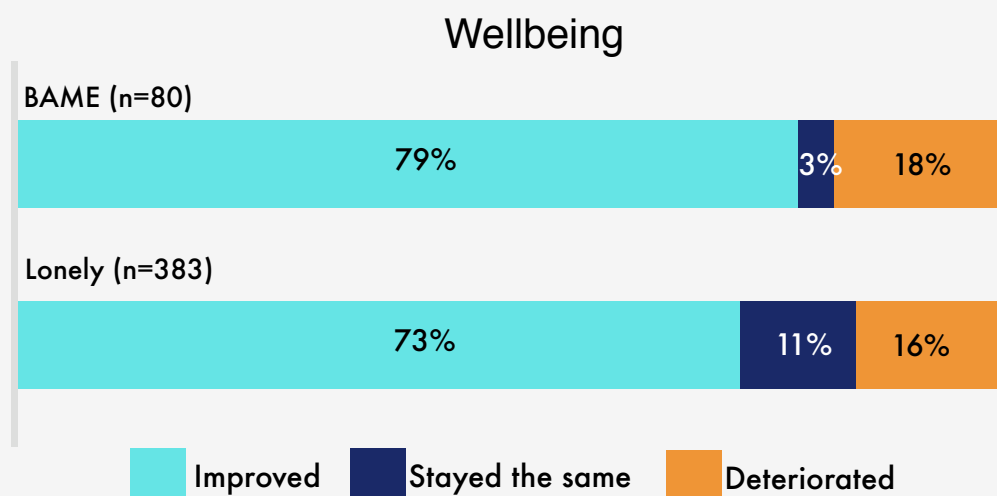
Some groups benefited more than others

Loneliness

Lonely (n=424)

Improved	Stayed the same	Deteriorated
60%	33%	7%

Living alone (n=434)

Improved	Stayed the same	Deteriorated
46%	39%	15%

Men (n=296)

Improved	Stayed the same	Deteriorated
47%	42%	11%

BAME (n=88)

Improved	Stayed the same	Deteriorated
52%	30%	18%

■ Improved   ■ Stayed the same   ■ Deteriorated

Some TTS beneficiaries benefited more than others. Those who were lonely prior to getting involved in TTS and Black, Asian and Minority Ethnic respondents gained the most in terms of improvements in well-being and reductions in loneliness. Those living alone and men were also more likely to experience a reduction in loneliness.

Wellbeing

BAME (n=80)

Improved	Stayed the same	Deteriorated
79%	3%	18%

Lonely (n=383)

Improved	Stayed the same	Deteriorated
73%	11%	16%

■ Improved   ■ Stayed the same   ■ Deteriorated

There were broader benefits for older people

Sense of community belonging

Belonging & Connection

New connections & friendships

Older people gained a greater sense of community belonging, connection to others, and formed new friendships as a result of their involvement in TTS, as these two quotes from older people demonstrate:
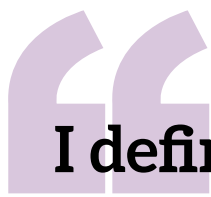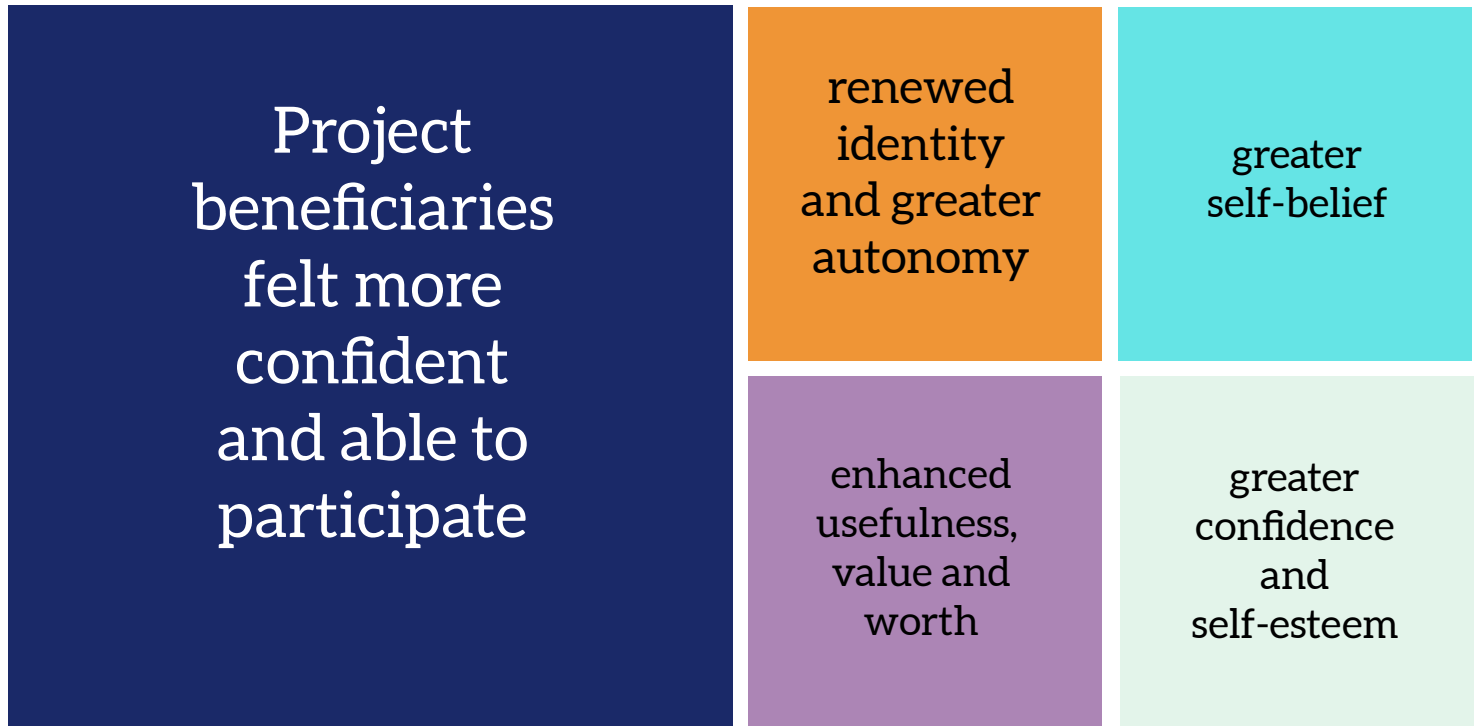
" I think it's just been enjoying being part of a group. It's like a sense of belonging, isn't it? A sense of belonging to that group of people who were all very - everybody's very friendly and it's just nice to be a part of it.

" So it's exactly what Time To Shine has brought to me. I can't walk through the city without seeing people who know me now, through different areas and it all stemmed from [names Time to Shine project].

One of the key findings of the local evaluation is that older people who have engaged in TTS have reported feeling more confident and able to engage and participate in their wider communities.

Project beneficiaries felt more confident and able to participate	renewed identity and greater autonomy	greater self-belief
	enhanced usefulness, value and worth	greater confidence and self-esteem

> " I definitely feel I've got more confidence, like for instance, I would never ever have talked in front of a lot of people before, which is something I feel I can do now.

> " It just makes you think about what else you want to do. It gives you a sense of purpose and a goal. Thinking about what else you want to do out there.

TTS adopted a **co-production** approach which has supported this enhanced community participation. TTS had an inclusive approach to service management, design, delivery, and evaluation which has involved older people, as well as voluntary and public sector partners.

CO-PRODUCTION has created a rebalance of power between individuals, groups, organisations & society

Older people contributed to every level of the programme

1,512 older people **have become volunteers**

"

The active engagement of older people donating their time and energy has been fabulous, really building a knowledge base. This means the project is being led by people with lived experience, and that engagement can reduce social isolation for them.

The TTS programme commissioned delivery partners to tackle ageism and discrimination and increase the accessibility of communities and organisations. This further supported the growth in confidence amongst older people to engage in their local community. This was achieved through initiatives such as Age Friendly Ambassadors, the Friendly Communities programme, and Age and Dementia Friendly campaigns such as Age Proud Leeds.

178
Age Friendly Ambassadors

210
Dementia Friends

34
Organisations Dementia Friendly and Age Friendly

Friendly Communities Project and Age Proud Leeds

Aim 3. Older people have been actively involved in managing, designing, delivering and evaluating the programme

The local evaluation found that older people have been actively involved in the TTS programme overall, as well as in the individual projects and interventions. This has included active engagement in management, design, delivery, and evaluation.

Management

Contribution to core partnership meetings, steering groups,and co-commissioning	237 older people volunteering at Leeds Older People's Forum and TTS

Design

Older people's views gathered through surveys, interviews, focus groups, workshops, and observations	656 older people and their carers were consulted on the design of the programme and projects

Delivery

Contribution to service delivery, core partnership, and steering groups	1,228 older people volunteering with delivery partners

Evaluation

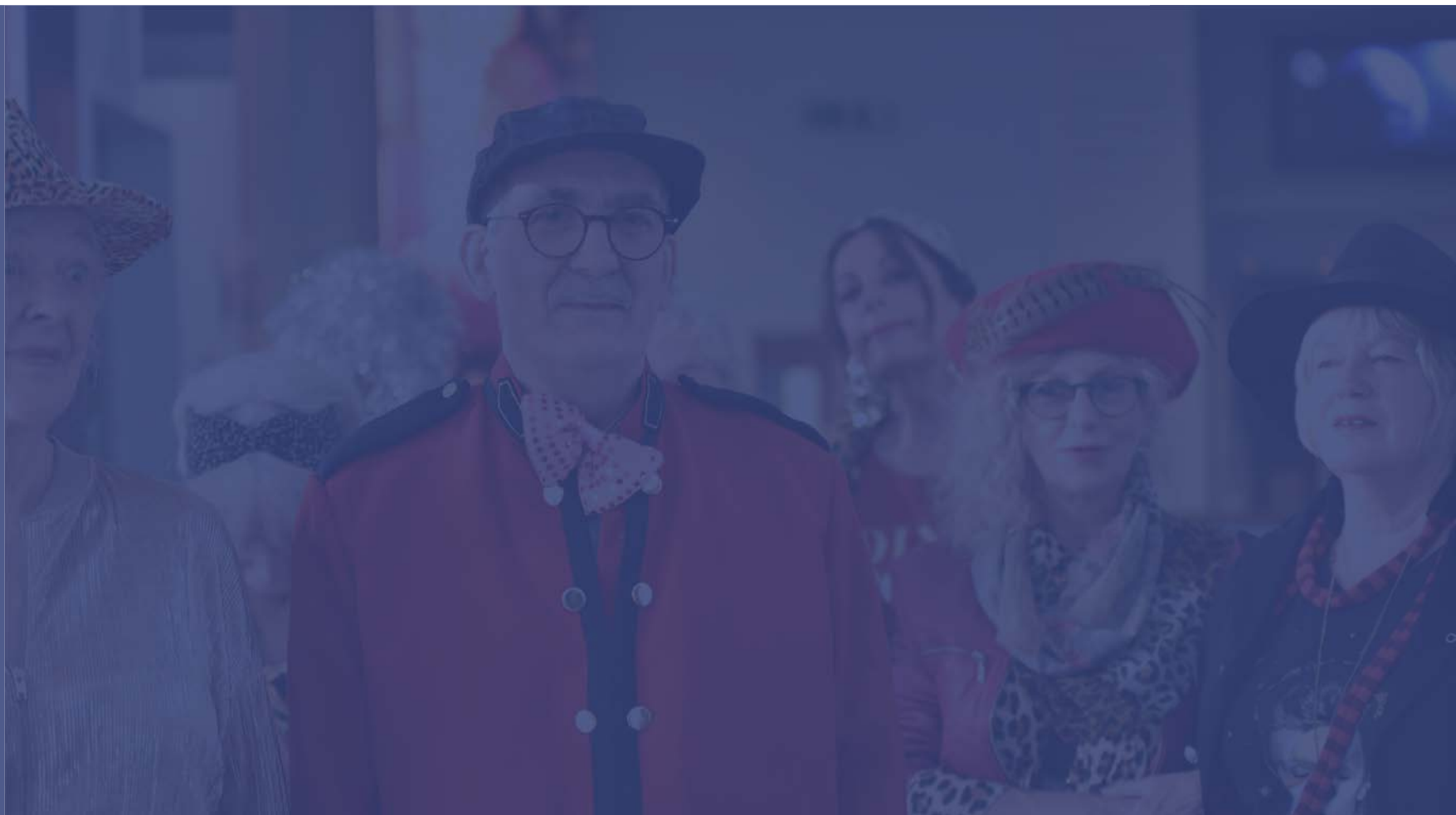|	
Volunteers as peer researchers, Volunteer Listeners, and evaluation subgroup panel members	37 older people trained and actively working as researchers, and 10 Volunteer Listeners trained and supported

Aim 4. The wider partnership will expand each year and will work better together to coordinate services and support for isolated older people

TTS has achieved much success in its approach to partnership working, with existing partnerships strengthening and new partnerships forming. Organisations involved in this enhanced partnership model have reported benefits through shared resources, better referral pathways and improved coordination of services. A 'Test and Learn' approach adopted by TTS enabled challenges in partnership working to be identified and addressed as the programme progressed.

Partnerships include community groups and strategic partnerships with commissioners, policy makers and citywide providers

Delivery partners report benefits in partnership working - sharing resources, improve referral pathways and the coordination of services

271 new partnerships

Better coordination of services resulting in systems change

The challenges and benefits of partnership working were identified by using the test & learn approach

There are many reasons why TTS has been so successful in meeting its target outputs and outcomes and achieving the aims originally set for the programme. A flexible and targeted commissioning strategy which was reviewed midway through the programme meant that any gaps in delivery could be filled over time. Specific groups of older people were identified as in need of support and delivery partners who could deliver bespoke interventions for them were recruited. The adoption of a 'Test and Learn' approach meant that new and innovative ideas could be tested and later adapted, if required, without the pressure of a need to succeed first time. A range of local delivery partners were co-commissioned to co-design and co-deliver the projects and interventions. This ensured that older people felt comfortable accessing the services which were often run by locally recognised organisations in local communities. The role that older people played in the design of the services meant that they were more likely to meet the direct needs of older lonely people in the city.

Targeted commissioning process

Test and learn

Co-production

Range of local delivery partners

Range of local projects

10 Challenges of Time to Shine and Lessons for the future

Although Time to Shine has been overwhelmingly successful it has not been without its challenges, both in terms of programme delivery and evaluation. Key learning from these challenges has been incorporated into both the TTS programme and evaluation, where possible, and where this has not been feasible it provides insight for future initiatives.

Challenges

- Many lonely older people faced barriers to engagement including low literacy and confidence, physical and mental health conditions, difficulties in accessibility and/or transportation to venues, caring responsibilities and perceived stigma around loneliness, ageing or asking for help.

- Delivery partners encountered challenges in balancing the need to work in partnership, avoid duplication of services, and share referrals, whilst protecting the sustainability of their organisation.

- Loneliness scales such as De Jong Gierveld and UCLA are not always user-friendly, can be distressing to answer for some individuals, and have wording which can be interpreted differently in different cultures.

- Delivery partners and older people, at times, felt evaluation was a burden, being asked to participate in evaluation activities for both the national and the local evaluation. This meant that sometimes it was difficult to recruit older people to participate in individual interviews and focus groups.

- Capturing the breadth of systems change is difficult in the absence of a system of recording this across the city. Programme legacy could not be fully documented as the evaluation ceased before the end of the programme's service delivery.

Key lessons learnt:

- The many barriers that lonely older people experience need to be addressed in the design and promotion of interventions/projects to ensure that those most in need of support are able to participate.

- Delivery partners need additional support to ensure they are able to work in partnership, particularly where there are competing interests.

- Mixed methods approach to evaluation is essential: quantitative loneliness scales should be supported by in-depth qualitative techniques.

- Delivery partners and service providers could benefit from additional support to engage with evaluation requirements. Where there are numerous evaluation demands these need to be coordinated effectively to reduce evaluation burden.

- Consider establishing a method to map system change for future programmes and ensure where possible that programme evaluation continues beyond the life of the intervention/s.

11 Further details

For further detailed discussion of each of the themes outlined in this evaluation report summary, see the series of final reports:
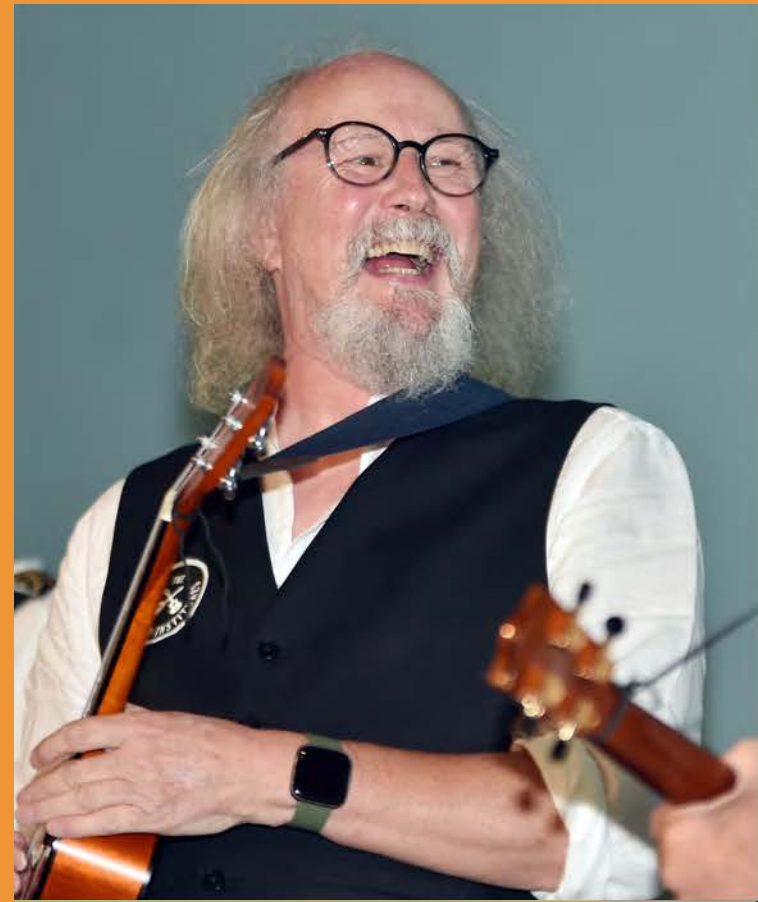
- **Report 2:** Time to Shine Evaluation Methods

- **Report 3:** Process Evaluation

- **Report 4**: Intervention typologies

- **Report 5**: Motivations and Barriers for beneficiary engagement

- **Report 6**: Participation, engagement and outcomes for older people

- **Report 7**: The impact of Time to Shine on project beneficiaries

- **Report 8:** COVID-19 impact on the TTS programme

- **Report 9:** Legacy, systems change and sustainability

- **Report 10:** Test and Learn: Understanding the experiences and challenges of frontline organisations

05 | References

1 Peplau, L. and Perlman, D. (eds.) (1982) Loneliness: a sourcebook of current theory, research and therapy, New York: Wiley and Sons.

2 Age UK 2018, All The Lonely People

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4 Office for National Statistics (2021), Mapping loneliness during the coronavirus pandemic, https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/mappinglonelinessduringthecoronaviruspandemic/2021-04-07

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6 ONS, Mid-year population estimates, 2020, https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland

7 ONS, Population projections for local authorities: Table 2, https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/localauthoritiesinenglandtable2

8 'State of Ageing in Leeds' report (2021 -forthcoming), Leeds City Council, Leeds Older People's Forum and the Centre for Ageing Better.

9 http://data.ageuk.org.uk/loneliness-maps/england-2016/leeds/

10 Both the AB programme overall and the TTS programme had an extension of funding for an additional year (7 years in total) but evaluation data was not collected during this additional period.

11 Ng Fat, L., Scholes, S., Boniface, S., Mindell J., & Stewart-Brown S. (2017) Evaluating and establishing the national norms for mental well-being using the short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS): findings from the Health Survey for England. Quality of Life Research, 26(5), 1129-1144

12 De Jong Gierveld, J., & Van Tilburg, T. (2006). A 6-Item Scale for Overall, Emotional, and Social Loneliness: Confirmatory Tests on Survey Data. Research on Aging, 28(5), 582–598.

13 Russell, D. (1996). The UCLA Loneliness Scale (Version 3): Reliability, validity, and factor structure. Journal of Personality Assessment, 66, 20–40.