

Supporting older people to overcome social isolation and loneliness

Mima Cattan, Leeds Metropolitan University on behalf of the British Gas Help the Aged Partnership Isolation Campaign

Executive Summary

In October 2000, the British Gas Help the Aged Partnership launched a campaign to combat isolation and loneliness amongst older people. A MORI survey revealed that nearly one million older people are acutely isolated and over one million people aged 65 and over (12 per cent) feel trapped in their own home.

To ascertain what older people need to overcome isolation and loneliness and whether services set up to help them are actually meeting those needs, further research was commissioned from Mima Cattan of Leeds Metropolitan University.

The research included interviews and focus group discussions with 170 older people, 23 project staff, and a survey of 139 projects and services in the north of England. Services ranged from activities supporting homeless older men, to home visiting schemes for housebound older people and broad-based community development programmes involving older people.

Key Findings

The older people we interviewed said they want:

- To be involved in planning, developing and delivering activities that target social isolation and loneliness
- Practical, flexible, and low-level assistance that helps them to remain independent, gain the confidence to identify their own solutions and supports them in retaining their own social networks
- Individually tailored solutions to meet their specific needs, with a variety of activities available within their local neighbourhood or within reasonable travelling distance
- Transport that takes their mobility needs into account

- Services that cater for specific groups such as carers, ethnic minorities, older men, those with hearing impairments or mobility problems, and those who have been isolated for a long time
- Support and encouragement to learn new skills as well as the opportunity to share their skills with other older people

The implications for projects seeking to alleviate isolation are:

- The need for effective strategies for managing waiting lists, so that even if services cannot be offered immediately, older people are still offered some initial contact or support
- More creative ways of identifying isolated and lonely older people, especially those living in rural areas
- Training for project and service staff to counteract negative stereotypes and images of older people
- Proper resources for volunteer visiting schemes to provide social support and skills sharing for housebound older people
- Further evaluation into interventions, such as volunteer visiting schemes, that older people consider helpful but for which there is little research evidence

Overview

'I've gone three years without talking to hardly anyone.'

The main finding of the research is that services and projects which aim to support isolated older people are often not providing what older people themselves want.

Older people said activities should be tailored to their specific needs and many preferred small task orientated groups like a cooking class, to sitting in a large group in a community centre.

They said loneliness and social isolation needed different approaches. Those who are isolated usually require practical help or resources, whereas those who are lonely may need social support and extended social networks.

The majority of projects surveyed, however, ignored this differentiation and tended to provide general social activities for older people rather than activities tailored to their specific needs.

What older people want

'I tried going to clubs a couple of times but I knew it wasn't for me. It was overwhelming and I didn't like everyone fussing over me. I would rather have a smaller group where everybody has something in common.'

'I sometimes go out in the morning to the nearby paper shop. It makes you feel independent when you can do something like that.'

Older people want to remain independent, and make their own choices about what constitutes an acceptable quality of life. Often they become isolated because of mobility problems and need flexible services and support to help them overcome their particular difficulties.

Many emphasised their desire to maintain long term friendships and social contacts. Services need to support those social networks rather than replacing them with new activities that are not necessarily desirable or appropriate. One older wheelchair user was offered transport to a community centre for example - but not to reach a close friend who lived in the same street.

Older people identified barriers to their isolation which had simple practical solutions:

- For one older woman living on her own, a major barrier to getting out and about was a sticking door which she found difficult to open. She simply needed someone to repair it
- A 75-year-old woman said although she had been assessed as needing a wheelchair, she was not eligible to have the ramp installed which would actually enable her to get out
- A housebound woman in her late 70s said she really wanted to attend a

writing class so she could write a book about local history, but the only activity she had been offered was a weekly group for older people

Dealing with loneliness

'I'd do anything to just see some people, even cutting the grass. At least people nod and say hello.'

'I go out to try to stop being lonely. I sit and talk to people in the park....I get lonely a lot, that's why I go out a lot.'

'I've been known to come back with just a loaf of bread when I've spent a whole day at the shops. But it's not the bread that's important.'

Acknowledging that you are lonely can be a painful experience for older people who have become isolated through ill-health, loss of significant others, loss of mobility or a visual or hearing impairment. Services need to be sensitive to this and understand that older people may deny feeling lonely because of the stigma attached to it.

'I console myself by the fact that I'm not the only one and others are in a worse position.'

The older people we spoke to described a range of coping strategies to deal with the sometimes overwhelming feelings of loneliness, including comparing their situation with others 'who are worse off', sitting in a car park, or going to the library or shops simply to be among other people. Alcohol and 'the doctor's pills' sometimes helped to overcome loss and loneliness. By recognising different types of coping strategies, service providers could target services and activities more appropriately.

Why services are not accepted

Some older people said they were simply not interested in accessing services and felt happier on their own. They do not want to become a burden on others, or to be seen as receiving 'charity'. Many

assessment processes are not sensitive to this, and fail to explore the emotional and psychological barriers to accepting services.

Older people who have become isolated or lonely often lack the social confidence to accept services and might need time to build up trust. They might prefer help with practical problems (changing light bulbs, decorating etc) where they can develop a relationship and take time to consider the options available to them. Services need to recognise that some older people lack the desire or confidence to take part in group activities. Service providers should consider how best to reassure individuals and tailor services to meet their individual needs and wishes.

Failure of current provision

'About two years ago I was invited to go on a trip with a group for older people. It was cancelled at the last minute and I was very let down. I haven't been asked to go anywhere since.'

'I used to belong to a group but they stopped coming to collect me. I used to enjoy going but I've got used to not going now. I've got used to being in, it isn't worth the hassle.'

For an isolated older person, making the decision to seek help or join an activity may have been a long and difficult process. Finding themselves on a waiting list at that critical point could put them off the whole idea. This study found that many services do not manage their waiting lists strategically, they do not offer links and support in the meantime or prioritise those who are most in need. Consequently, the most confident tend to take the places that are available, while those who are perhaps most isolated or lacking in self esteem may miss out on opportunities.

The study also suggests a geographical inequity in the provision and availability of services and activities to prevent isolation. Older people in rural areas are at a particular disadvantage, with the

multiple problems of poor public transport and few amenities and services within an acceptable travelling distance.

Transport

'Sometimes my nephew takes me out in the car at the weekend, but apart from that and going to the hospital and GP, I never get out because there is no transport.'

The availability of accessible and appropriate transport is a major priority for older people, particularly in rural areas.

Access to community activities is often limited by the number of wheelchairs a mini-van or bus can carry. In rural areas, access to services and activities often depends on private transport. In one project, a rural volunteer car driving scheme found that its services were called upon far beyond the original aims of the project simply because there was no other easily accessible transport available to older people and their carers in that area.

Tailoring services, avoiding stereotypes

'The day centre is boring, not interesting at all, but I wouldn't want to stop going unless I had somewhere else to go. People don't tend to want to do the things I want to. They think that because I have a stick I can't do much.'

The research suggests that many older people are 'making do' with services that don't actually meet their needs simply because there are no other options available to them. Older people would ideally like to have easy access to a wide range of activities to meet their varying interests, abilities and needs – but many projects tend to provide 'cover-all' social activities to alleviate loneliness and

isolation. This also ignores the needs of specific groups such as ethnic minorities, carers or older men. Although some organisations provide services for these groups, more resources are required to meet the growing demand.

Our study suggests that services should take a more proactive role in challenging negative attitudes and stereotypes of older people. Some day centres were felt to patronise older people and encourage a culture of helplessness rather than one of social activity and participation.

Befriending and volunteering

'I really appreciate him coming, I enjoy his company. He has been a great friend to me. We chat and he does odd jobs for me.'

'There are times when I'm very lonely, but I get a phone call from my befriender which I appreciate greatly. She is a wonderful friend, we talk about everything and anything.'

Unlike other research which suggests that individual interventions like befriending schemes are ineffective, this study suggests that many older people highly value one to one support. But they stress the importance of shared age, culture, interests, personal history and background to ensure mutual benefit - it is the quality of contact that counts.

'I became extremely lonely and depressed after having to give up work. I didn't know what to do with all the time I had. That's what made me turn to volunteering. Loneliness is a killer.'

Volunteering provides many older people with a continued role in life, which can help to alleviate their own loneliness and isolation. Volunteer visiting was felt to be equally important among older people living in their own homes, in sheltered accommodation and in residential homes.

Identifying isolated older people

The research found that **practitioners remain conservative in the ways they target and identify isolated older people**. Few attempts have been made to be creative in considering new ways to identify and support older people. Some suggestions for identifying isolated older people include:

- Targeting information and support at groups with a high risk of social isolation. Key examples are those who experience ill health, poverty, depression or mental health problems including dementia, those who have been bereaved or have intensive caring responsibilities
- Identifying the times when people are more likely to need help, for example after bereavement, coming out of hospital or moving house. Any changing pattern of contact with voluntary or health services may also be an indication that older people are in need of support
- Establishing systems within primary care trusts to identify older people at risk, and those who are isolated
- Identifying the most likely routes through which isolated older people

might access information

- Identifying creative ways of communicating information, such as through handyperson or gardening schemes, hairdressers, or home carers

Principles of good practice

There are many examples of good practice in supporting older people to overcome isolation and loneliness. Case studies are provided in the full report but some key principles are:

- Older people do not want to be treated as passive recipients of information, support and activities, or to feel 'done to' rather than properly involved
- They want meaningful activities where they are involved in planning, developing and often delivering services with and for their peers. They want to be seen as a resource rather than a burden
- Many older people want purposeful activity where they can learn new skills as well as sharing the skills they have.

To obtain a copy of the full report priced £8 including p&p, please send a cheque made payable to Help the Aged to:

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Help the Aged
207-221 Pentonville Road
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British Gas Help the Aged Partnership

Working in Partnership
Making the lives of older people warmer and less isolated

British Gas joined forces with Help the Aged in January 1999 in a multi-million pound partnership to address two major issues for older people – fuel poverty and isolation. The objective of the Partnership is to ensure that older people are properly included in society and are able to make choices that enable them to enjoy full and independent lives.



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