

Cambridgeshire Older Peoples Reference Group



Cambridgeshire Community Study

*'Unsung heroes in a
changing climate'*

Final Report

February 2010

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‘Unsung heroes in a changing climate’

Final Report



**A report on behalf of the
Cambridgeshire Older People's Reference Group
by
Dorothy Runnicles MA**

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‘Unsung heroes in a changing climate’

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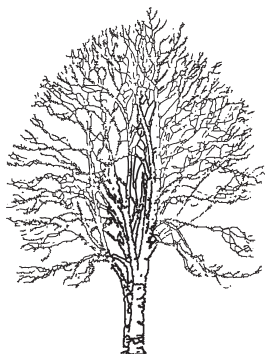
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Background and context to the study

About Cambridgeshire Older People's Reference Group (COPRG)

Cambridgeshire Older People's Reference Group (COPRG) is a self governing community group which is run by Older People for Older People.

Our membership consists of one person from community groups of all sizes across the county who agree to join our "linking" structure.

In this way we aim to strengthen the voice of older people across the county. COPRG works to support community groups and advise and assist service providers in the statutory, voluntary and commercial sectors working in partnership where appropriate.

In 2006, COPRG representatives undertook a series of visits around the county's villages and towns, where meetings were held in sheltered housing units/residential care settings, and where we learned of the relative isolation of residents from the mainstream of village/neighbourhood life. They spoke of transport problems, and inconveniently located bus stops, which made outings more difficult. The need for more activities, and lack of relevant information, was mentioned by both residents and wardens. We heard how efforts to provide an exercise class had failed because of prohibitive costs. Some of the issues raised were taken up and resolved, but many were beyond our brief, although residents' issues were raised at county meetings with officers and councillors. Surprisingly we also discovered that informal support was the mainstay of many older people's lives. This self help is largely unrecognised by paid care and service providers.

Following this we wanted to learn more about older people's involvement in community groups and to use the study to provide evidence to policy makers and service providers from the perspective of a community group. This focus supports our efforts to improve services for older people in the county, in particular the 85% plus who do not receive social care services.

Methodology

Various methods of obtaining information were used. These included postal questionnaires, focus groups, village studies, study of parish plans and village and organisations' newsletters. This was supplemented by interviews with community group members, statutory and voluntary organisations, service providers. The internet proved to be a good source of information. In the first stage of the study we were able to map the 157 groups which responded to our initial enquiries. Subsequently we were able to increase this to 260 groups from which we collected information as a sample of the total picture of community activity.

We discovered that little has been written about community groups and their contribution to our social fabric.

*'The social ecology of small community organisations and their contribution needs to be better understood. At least equal to the amount of knowledge of small business dynamics' from **Low flying heroes, micro social enterprise below the radar screen**: New Economics Foundation: Macgilivray, Alex; Conaty, Pat; Wadhams, Chris; 2001*

Emerging data about voluntary organisations and community groups

In February 2008 the Cambridgeshire Voluntary Sector Infrastructure Consortium (CVSIC) estimated that there were 11,732 voluntary organisations and community groups in Cambridgeshire. CVSIC go on to claim that this is a small proportion of organisations and people compared with the Quality of Life Survey undertaken by the County Council which recorded 68% of the population as volunteers, or 387,736 people (see Appendix 2 on p31).

Whilst the 260 groups studied comprised mainly of older people we have discovered that many older people are involved with a wide range of groups outside those classed as older people's groups. This sample provides a snapshot of voluntary and community activity.

Our information to date is that Fenland is the only district council which has a directory of community groups, although it does not claim to cover all such community groups in the area. Of the 29 Fenland groups listed, 62 per cent also appear on www.cambridgeshire.net.

There is no Council of Voluntary Service (CVS) covering Cambridgeshire as a county service. However, four Councils of Voluntary Service in the districts were approached for information on community groups. The Cambridge CVS, which also covers South Cambridgeshire, was attempting to update its information base on community groups in Cambridge City and South Cambridgeshire District. 'In South Cambridgeshire there are probably 300 voluntary groups and up to 1,000 different community activities,' according to www.cambridgecvs.org (2009).

Various (statutory and non-statutory) organisations are working to improve information on community groups in the county. For instance, Hunts Forum of Voluntary Organisations informed us that they are updating information. Fenland CVS has produced a directory 2009 listing 185 member organisations however, community groups do not have a separate index.

There is neither a clear nor a consistent picture of how much locality activity is taking place which is run solely by and for older people. Neither CVSIC nor the Quality of Life study commissioned by Cambridgeshire County Council provides information relating directly to older people's volunteering and community activity. However, our other methods of enquiry reveal that people over 50 (now regarded as an age yardstick) constitute the major group contributing to community activity, self help groups and inter-generational voluntary sector common interest societies.

Demography and population changes

Demographic changes have resulted in a higher number of older people living longer, of whom 85% do not receive social care services. The current lower birth rate indicates that this figure rises in real terms so that more older people will lack vital social care services unless provision is changed. Meeting the needs of our vulnerable and socially isolated people is the challenge facing us all. Some communities, in conjunction

with service providers are more successful than others in assisting this. We have been able to identify the contributions to neighbourhood support and networking made by older people, which for some of them is a natural process and part of normal living. These are the 'unsung heroes below the radar screen' who are seldom recognised for their massive contribution.

Mid-2007 resident population estimates were released by the Office for National Statistics (ONS) on 21 August 2008. The figure for people aged over 65 in Cambridgeshire was 89,800, that is 15.3 per cent of the total Cambridgeshire population. Looking ahead, local authority forecasts of the expected increases in Cambridgeshire's over-65s population are:

2007 people over 65 = 89,800

2011 people over 65 = 102,800

2016 people over 65 = 124,300

2021 people over 65 = 141,899

By 2021 the number of people aged over 65 will be 21.17% of the total population.

Figures from

<http://www.cambridgeshire.gov.uk/community/population/forecasts/Populationforecasts.htm>

Changing times

Social and economic change

The period of this study (April 2008 to April 2009) coincides with a period of social and economic change within Cambridgeshire, as well as nationally and internationally. These changes may influence the attitudes and values of workers and citizens towards older people, and are likely to affect the availability of resources for them. Concerns regarding the sustainability of voluntary organisations which provide some essential services are also becoming more apparent.

The previous culture of voluntary sector provision has changed from being grant aided to that of commissioning and tendering. There is now a growing awareness of the business potential of social care services as voluntary and commercial interests increasingly engage and compete for their provision. Voluntary organisations are now providing these services as social enterprises.

There has been some progress in developing approaches and services to sustain older people at home. However there remain gaps in the extent of provision and evidence of unfairness in the health and social care system which have been documented and widely publicised. The media has become instrumental in drawing attention to inadequacies inherent in the present social care system which is considered unfit for purpose. The need for a holistic approach to the promotion of well-being for all citizens underpins recent policy documents.

Ageism is attracting widespread attention and its manifestations need wider understanding. More people are becoming aware of the personal implications of this endemic issue. Society had to learn that what constituted sexism and racism during the last century and what cultural norms were not acceptable. This is beginning to happen in relation to attitudes and behaviour towards older people.

As this study has identified, the need for collective wellbeing is becoming recognised and expressed in some of our localities in different ways in order to strengthen communities. Individuals are able to mobilise others to fulfil community needs and interests in self help community groups. These are often issue based or responding to an unmet need and run by older people. These groups are autonomous and control their own agendas.

In addition it appears that an increasing number of unemployed people and those retiring early are seeking opportunities to acquire new skills through volunteering e.g. through volunteer bureaux. These volunteers help to fulfil the agendas of other organisations.

Active ageing has become a term which has had some practical outcomes for older people in the County by providing locally accessible exercise groups e.g. through the Cambridge 'Forever Active Forum' supported by the City Council and 'Living Sport' which is promoted by a joint partnership in other parts of the County. However, active ageing relates not only to physical exercise but to social inclusion, for example, having direct involvement in the planning, provision and monitoring of services. An organisation led by people who use social care services and their carers is being developed in the County.

The Government 'Change Up' programme and capacity building projects intended to benefit the voluntary and community sectors, has had sub

regional grants via CSVIC. It has been difficult to discern from locality groups any outcomes from these initiatives for older people in the County. We do know that help has been given to the development of ITC. However, 71% of older people are not IT literate (Audit Commission). In addition the promotion of Parish Plans by DEFRA has stimulated some interest in both local participation and the diversity and changes happening in communities.

In Cambridgeshire, the Cambridgeshire Older People's Partnership Board was launched at a Cambridgeshire Celebrates Age event in October 2007. It has initiated a partnership between interested councillors, officers in the voluntary and statutory services and representatives from some older people's community groups.

The Cambridgeshire Together Board, which comprises representatives from key organisations across the county's public, private and voluntary sectors, has responsibility for promoting the well being of local people, the environment and the economy. Cambridgeshire Together recently developed a strategy for older people to promote a joined-up approach to service delivery. Following a period of consultation in 2008, this strategy was published in 2009 entitled 'Cambridge Older People's Strategy 2008-2011'. It has been approved by the County Cabinet but has yet to produce an action plan and decisions on its implementation, timing and monitoring are awaited. Partnership working and personalisation of services are key and recurring themes.

At regional level, strategies for the economy, health and social wellbeing have indicated the range of possibilities for improvements for people generally and identified specific implications for older people and gaps to be addressed. It is unclear how these are being interpreted at local level by service providers.

Safeguarding older adults – recognition of abuse and neglect

There is an increased awareness in training about the abuse and neglect of older people under legislation. This includes the Human Rights Act 2008 and the Mental Capacity Act 2005.

In addition a new Safeguarding Vulnerable Adults Policy and a protocol for joint working between the Office of the Public Guardian (OPG) and Local Authorities was launched in December 2008.

This policy provides a framework for delivering the OPG's role in safeguarding vulnerable adults, as the Mental Capacity Act 2005 introduced a statutory duty for the Public Guardian to supervise, investigate concerns and regulate Court appointed Deputies. The policy is supported by the OPG's Safeguarding Vulnerable Adults Procedures and Guidance document.

The Equalities Agenda

In addition there has been a growing recognition that older people need to be made aware and informed of what constitutes their rights under the new equalities legislation. Many older people's action groups and organisations have been involved in working towards the inclusion of age discrimination in the Single Equality Act 2009. However, there is still concern about the need to safeguard older people's rights under the provision of goods and services which is not yet clearly defined. For several years action groups have been raising the issue that self funding older people in care homes are not protected by the provision of the Human Rights Act. In addition self funding residents of care homes are cross subsidising those who are supported by local authority grants by paying additional fees. National and regional campaigns to provide fair treatment for older people have been attempting to highlight these issues of inequalities. In Cambridgeshire the Cambridge Law Centre has been able to offer training on a short term basis for community groups. This has included some limited casework.

Literature Review

Whilst the literature on Community Groups review appears limited, we include notes on some titles of relevance to this study.

Low flying heroes, micro-social enterprise below the radar screen

New Economics Foundation: MacGillivray, Alex; Conaty Pat; Wadhams Chris; 2001

Micro social enterprises (MSEs) is a new term invented by the authors to define a wide range of small, energetic, informal organisations operating at a community level, motivated by social and environmental causes. Resources of all kinds are usually tight and as a result the work of such groups is usually innovative, inclusive and effective. Community business, local self help groups and mutual aid are other terms that capture many

aspects of the phenomenon. This book looks at the functioning of these small organisations, focusing in particular on MSEs in Hastings and Birmingham.

'The social ecology of small community organisations and their contributions needs to be better understood. At least equal to the amount of knowledge of small business dynamics.'

'powerful institutions are continuously seizing the bright ideas and innovations of the MSEs and claiming the best of the bunch as their own'

Comments on above: 'The radar screen' which measures community activity is failing to pick up huge numbers of small, dynamic, informal groups in Cambridgeshire's communities. Older peoples' groups form part of this milieu. They are part of the informal, unrecognized and unregistered community groups. The COPRG study is based on a community of interest i.e. the well-being and quality of life of older people.

Don't stop me now: Preparing for an ageing population

Published by the Audit Commission 17 July 2008

Because of the importance of this report we considered a summary would be useful.

England's population is ageing

- Councils have a local area leadership role to ensure that older people can live independently and actively, with a good quality of life, for as long as possible.
- As the population ages, the challenges and opportunities differ between areas; each council must lead an appropriate local response.
- The ageing population will be increasingly diverse: stereotypes about older people are misleading, so councils need information about the diversity of their local people.
- Older people - as citizens, volunteers, and service users - are an important resource for local action to tackle social isolation and support independent living.

Most councils should do more to create an environment in which people thrive as they age

- Central government's Opportunity Age initiative to improve the quality of life of all older people has had limited impact.

- Only a third of councils are well prepared for an ageing population, though a further third are making progress.
- The vigour of local action by councils is often not determined by the extent of local need.
- Older people experience councils as organisations that view them in terms of care needs, with little focus on diversity and opportunities.
- All councils need to understand their older communities and shape both universal and targeted services accordingly.
- Increased awareness, better engagement and innovation could help many older people without significant expenditure.

All councils should work with older people to age-proof mainstream services

- Councils need to engage with older people in commissioning, designing, and delivering both mainstream and targeted services.
- Older people's champions and representative boards can play an important role in assessing and evaluating the effect of local services on older people's lives.
- Councils can deliver significant benefits from age-proofing mainstream services, often at low cost.
- Age-proofed mainstream services provide benefits for other members of the local community, including people with disabilities and parents with young children.
- Marketing and promoting existing services to older people can increase take-up and support independent lives.
- The best councils innovate to adapt mainstream services for older people and work with public and private sector partners to drive improvements.

Councils should target services to tackle social isolation and support independent living

- Targeted services should focus on the underlying causes of dependency in later life.
- Councils should lead local statutory agencies and the community and voluntary sector in making the most effective use of local resources.

- There are many older people ready and willing to contribute to community life: local authorities and their partners should mobilise this resource

Overcoming stereotypes and recognising diversity

'Older people are not a homogeneous group. Ageing affects people in different ways'.

'Age based assumptions and categorisations can inadvertently influence public service planning'

'A good understanding of the local communities should underpin the strategic approach to an ageing population'.

Age Proofing Mainstream Services

Delivering this broader role is complex. Community engagement and service delivery need to be underpinned by a sound strategic approach that is based upon:

- good local partnership working;
- strong community leadership;
- a change of culture that ensures a shared, cross-cutting approach, without sole responsibility resting within adult social care;
- a good understanding of the local older population; and
- An innovative approach to finding solutions.

Councils need to take a two-tier approach to understanding their expenditure on the wider older people agenda:

- delivering age-proofed universal services should be an essential part of core business in each directorate, to ensure equal access for all. As such it should not incur additional cost, or be quantified separately; and
- providing targeted services in addition to core mainstream services. These bring additional costs which need to be quantified and evaluated.

Examples of notable practice to outline approaches for effectively:

- understanding, engaging and mobilising the older communities
- age-proofing mainstream services
- developing and delivering targeted services based on the needs of the older community.

Targeted services that promote independence include:

Well-planned, targeted services support independent later life. Typically they will include services aimed at tackling social isolation, helping build social networks, and providing low level support in the home. Targeted services play a crucial role in preventing the onset of social isolation and physical and mental deterioration.

Opportunities to provide low level interventions are often missed - and information is not always used effectively to target the right people at the right time.

'We need to be better at delaying dependency. We see people who have had the loss of lifelong partner, two years later they have a rundown house, they have become more isolated and there has been physical and mental deterioration. You can trace the dependency back to the loss of the partner. We need to use our information better to target people and have the right services to refer them into at the right time.' **Director, Adults & Communities**

Targeted services should be aimed at those in the older community who have not yet become dependent, but who have started to develop early signs of isolation or ill health. The purpose of these services is to help delay dependency and maintain independence for as long as possible. Services should be focused on those older people most at risk. People in several categories are at high risk of social exclusion particularly those:

- aged 80 or over; and people
- living alone who have no living children;
- not having access to private car and never using public transport or
- not having access to a phone
- living in rented accommodation; and/or
- low income with benefits as their main source of income

Councils should play a leadership role in delivering targeted services. Many low level interventions can be provided in the community, in partnership with social enterprises and through volunteer schemes.

Targeted services will be of low to medium cost and should be delivered alongside mainstream services. Councils need to understand their community to be able to plan and design the particular

additional services that will have most impact for the people they serve. The costs of these services should be quantified and their impact should be evaluated.

Further issues explored in relation to communities are:

- developing resource centres as community hubs;
- help with essential repairs and small jobs;
- working with health partners to delay dependency;
- mobilising the community to tackle social exclusion;
- making use of technology to keep people independent; and
- innovative solutions to improving essential services delivered by others.

With the right planning, traditional day centres can become more widely accessed community hubs with the potential to appeal to a broader section of the community by delivering education, leisure services and opportunities for social networking.

Older people who are starting to become more frail often need some basic support around the home. Offering assistance with small repairs can reduce health and safety hazards, keeping them safe and secure in their homes for as long as possible.

Partnerships are fundamental to effective local intervention. Local GPs can identify older people who have started to become socially isolated and need help to get back in touch with their communities and the services on offer. These people often turn to their GP for help and advice.

Working jointly with other health partners in the community can also be key to providing essential preventative services - such as falls prevention programmes. Some falls' prevention programmes are leading the way in partnership working and evaluation.

Some targeted services are more specialised and use technology to help people stay independent. Some areas have created social enterprises to deliver services to older people who need low-level help.

Innovative solutions could be considered in resolving some complex problems such as providing comprehensive transport options for a diverse older population.

Important additional data

- 71% of people aged over 65 have never used the internet
- 60% of childcare in the UK is provided by grandparents
- 75% of people aged over 65 voted in the 2005 General Election
- Only 15% of people over 65 receive social care

Residential care services

Only 3% of over 65s, 18% of over 80s, 28% of over 90s live in residential care (see fig.1).

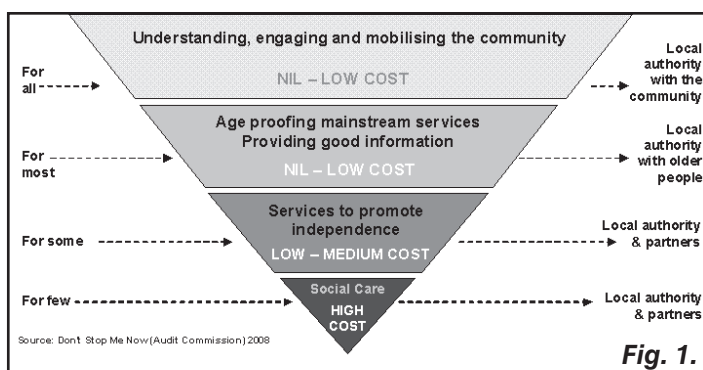


Fig. 1.

Relations between Government and Voluntary Community Sector in England

a Home Office report dated November 1998 states

'It is important that distinctive needs of community groups are taken into account as their concerns and perspectives may differ from other voluntary organizations. A code of good practice will be developed to facilitate and reflect this.'

Nothing about us without us, disability oppression and empowerment

University of California Press Charlton, James I: 2000

The UK Older People movements have been learning from the Disability movement both in the UK and in USA. 'Nothing about us without us' a slogan which 'derives its power from its location of the source of many types of (disability) oppression and its simultaneous opposition to such oppression in the context of control and voice'.

The Disability Rights Movement (DRM) 'is a liberatory beacon of hope for many. The praxis of empowerment means and has meant creating or increasing the options available to people with disabilities in their everyday lives'.

The emergence of consumer/user led organisations in Britain and the growing awareness of engage-

ment of people who use services in their planning, implementation and monitoring is at an early stage. More evidence about its usefulness is emerging e.g.

Person Centred Thinking with older people, practicalities and possibilities

Helen Bowers et al.: 2007, reprint 2008, HSA Press

This study reports on developments on person centred thinking with older people in 8 pilot areas across England. Workers in the field of social care have been engaged in innovatory programmes in different settings e.g. day care, residential care and domiciliary care.

Seven dimensions to achieve a good life are listed:

1. *Being active, staying healthy and contributing*
2. *Continuing to learn*
3. *Friends and community – being valued and belonging*
4. *The importance of family and relationships*
5. *Valuing diversity*
6. *Approachable local services*
7. *Having choices, taking risks*

Key amongst these seven elements is the importance of relationships and networks. In other words having people in your life with whom you have good close relationships and with whom you do certain things that are important to you.

Person centred care is a key focus of development in health and social care for older people since the introduction of the Department of Health's 'National Service Framework for Older People, 2001'.

Monitoring Poverty and Social Exclusion (2008)

Joseph Rowntree Trust, Palmer, Guy; MacInnes, Tom; Kenway, Peter

This report raises two relevant issues:

1. Long-standing illness and disability

One third of adults aged 65 to 74 and half of adults aged 75 and over report a limiting long-standing sickness or disability. Both proportions are similar to a decade ago. For those aged 65 to 74 the proportion with a limiting long-standing illness or disability increases as income decreases. The differences in income are less for those 75 and over.

2. Help to Live at Home

Tangible regular data on social exclusion among older people is very limited. However data is available on two subjects namely: Help to live at home and ability to travel.

Building a good life for older people in local communities

<http://www.jrf.org.uk/knowledge/findings/socialcare/014.asp>

Includes discussion of links with locality based services.

Neighbourhood-based service models provide useful lessons in developing solutions with older people. Underpinned by values of neighbourly support and reciprocity, such models offer opportunities for sociability and friendship, education, mutual support, practical assistance, advice and advocacy. Central to the approach is:

- the search for ways to involve everyone with emphasis placed on finding creative solutions to maintain social relationships: even in the face of restriction; and
- providing accessible and flexible support.

Such groups draw upon the social capital in the locality and reinforce and extend its currency. They offer the potential to connect the values and preferences of older people within a network of community groups to support a 'good old age'. They provide the bridge linking older people within localities to statutory services.

Older people shaping policy and practice

<http://www.jrf.org.uk/knowledge/findings/foundations/044.asp>

Includes discussion of the need for services to recognise the following:

- Communities, community organisations, family/friend/community networks (often of older people themselves) are the greatest providers of support to older people.
- Definitions of 'quality' need to be driven more by older people themselves.
- Services need to be more holistic, responsive and adaptable to people's needs.

Additional information from JRF publications:

'Providing care and support to those who need it is everybody's business. A shocking 80% of those who need home care do not receive it from the state.'

'England's social care system should support people with special needs or disabilities and their carers.'

Advocacy in Social Work (Theories in social work series) (Paperback)

Brandon, David and Brandon, Toby: BASW 2001

Includes a debate about the role of advocacy in professions and recognises the complex nature and philosophy of advocacy. This difficulty and complexity has led to the construction of user led services and organisations.

Why Life Speeds Up As You Get Older: How Memory Shapes Our Past

Draaisma, Douwe; Pomerans, Arnold and Erica: (7 Sept 2006) CUP

This book focuses on the importance of engagement.

"If you want to lengthen the perspective of time, then fill it, if you have the chance, with a thousand new things. Go on an exciting journey; rejuvenate yourself by breathing new life into the world around you. When you look back you will notice that the incidents along the way and the distance you have travelled have heaped in your imagination, all the fragments of the visible world will form up in a long row, and that, as people say so fittingly, presents you with a long stretch of time"

The Black Swan: The Impact of the Highly Improbable

Taleb, Nassim Nicholas: (Feb 2008) Penguin

Offers insight into the impact of the credit crunch and climate change which could be relevant.

Quality not Inequality

(Age Concern, Summer 2008)

8 out of 10 people in Cambridgeshire and Peterborough are very concerned about the quality of care that they or a loved one would get in later life, research by Age Concern reveals. The findings of the study provide evidence of how the care system is routinely failing older people and their families. Cambridgeshire Age Concern states that "radical reform of the care system is urgently needed".

Analysis of data

Characteristics of groups

It became apparent during the study that it was important to distinguish the different characteristics and origins of groups active in communities. From our initial analysis of responses we were able to categorise the groups into three types:

1. Self help community groups within which older people are involved
2. Faith and church supported groups
3. Groups run by specialist organisations

1. Self help community groups within which older people are involved

There are an estimated 8,032 community organisations with 88,352 volunteers active in the county (CVSIC).

We became aware that older people are involved in many of the community groups across the county involving all ages. They often arise in villages and neighbourhoods spontaneously where common interests are supported and followed in a range of informal regular groups which sustain the fabric of our neighbourhoods and villages. They often provide supportive networks and create the social fabric of our communities “below the radar screen”.

We gathered information through questionnaires and interviews from 127 community groups out of our total sample and have information on the numbers of people involved i.e. members, volunteers and trustees for 97 of these groups. This sample involved 6,800 people who were beneficiaries, volunteers or trustees of groups operating in localities on a weekly, fortnightly or monthly basis.

All of the activities offered by these groups could be characterised as promoting active ageing, raising local issues, networking and supporting social inclusion.

Of the groups in the sample, 2 had waiting lists because the size of accommodation available for their weekly or fortnightly meetings was inadequate.

The majority of groups met in village halls but other venues included pubs, hired rooms/halls, day centres, residents' homes, church halls, community rooms in schools and school halls, community centres, colleges, recreation halls, memorial halls, sports and social centres, youth clubs,

united services clubs, public halls, village institutes and university centres. In our sample there were 3 examples of groups in sheltered housing units and 1 community self help group lived in a residential care home. The range in membership size was from 7 to 2000 plus.

Most of the groups in the sample provided some transport to help people attend meetings and events.

Activities reported by the sample of groups

These illustrate the wide range of shared interests, hobbies and social engagements which enrich the lives of participants.

1. **Meetings** – all the groups in our sample had meetings. The majority had weekly or fortnightly meetings.
2. **Recreational, leisure, fun and social events** – most of the groups had a range of activities. These included bingo, quizzes, card and board games, competitions, entertainments, raffles, whist, exercises, line dancing, walking, other games, socials, bridge and dominoes. Groups provided some or many of these activities in their programme.
3. **Learning opportunities – stimulating activities** – these included speakers, crafts, computer club, demonstrations and information exchange in their list of activities. In addition this was a forum for sharing skills and knowledge. Groups provided some or many of these activities in their programme.
4. **Outings and holidays** – these included study trips, seaside, shopping trips and special interest visits. In addition, 6 of our sample arranged holidays for groups of members.
5. **Lunches** – a minority of groups provided lunches. It was more common for groups to provide coffee, teas and light refreshments.
6. **Befriending and visiting** – groups in our sample offered mutual support, informal networks and crisis support, visiting the isolated and housebound who were identified locally, friendship visits during sick periods and visits to hospitals. This appeared to be a very important supportive activity which helped sustain older people.

7. Special events - some groups listed celebrations, auctions, sales, parties, Christmas and birthday events, Harvest festivals, Cambridge Celebrates Age events and consultancy work in their activities e.g. when Councillors or service providers need to share or request information and views. Shared food featured significantly at these events.

8. Transport – a small number of community transport schemes were in the sample. They provided transport for special needs, e.g. to access hospital, doctor, shops etc. They each had different rules. However, community transport schemes are not consistently available across the county. There is a postcode lottery involved depending on where you live.

9. Supporting other groups – a small number of groups list fundraising and providing goods for other groups in need, both locally and abroad amongst their activities. The community group in the residential care home runs a scheme for supporting Kosovo.

About the people involved

Information was obtained from key stake-holders in community groups run by and for older people. These community groups took place mainly in the day-time. Many people who provided this information lived alone and of those the majority had lived alone for more than five years. Their age tended to be in the 66–86+ age group. The majority of the respondents had a role in running the groups and these included secretary, organiser/manager, catering, treasurer and chairman.

Interestingly, we found that people over the age of 85 continued to be engaged in active roles in community groups. The number of people aged 50–65 were fewer. Other evidence suggested that many of these 'younger' older people are still in work and, or committed to providing family care to their children or elderly parents. Younger 'older' people were more likely to be involved in community groups and activities which took place in the evening.

Of those older people active in community groups many said that they had a handicap or disability and/or lived with someone who had. A small number of people advised that they were family carers of seriously disabled people. As well as family caring, many older people who were active in community self help groups, were also befriending

neighbours on a daily basis. Some people told us that they paid for some help in the house and that most of this help was from relatives or friends. A minority had help with jobs such as gardening etc.

We were surprised to find the number of people with disabilities who were also supporting others and were active leaders in community groups. However, this confirms the data from the National Statistics Office which states that 62% of women over 75 have a limiting long term illness compared with 58% of men. In the *2002/03 Family Resource Survey (UK)*, the most common limitation reported by men and women was mobility, followed by the ability to lift, carry or move objects and manual dexterity. The most common condition was musculoskeletal disorders, followed by heart and circulatory problems and respiratory diseases. However, despite their physical limitations, those who provided us with information continued to play an active part in community life.

See literature review '*Monitoring Poverty and Social Exclusion*' 2008 – Joseph Rowntree Trust, which corroborates this description.

Many people see these illnesses as an inevitable product of ageing and thus responses to them differ in terms of support, recognition and personal definitions. These conditions do not always impede them from engaging with their neighbours and groups in a mutually supportive way. Often these long term conditions have been handled successfully for many years and they have learnt to live with them as 'expert patients'.

What members say about groups

- We make sure that these elderly people have an afternoon of enjoyment and entertainment.
- Holding meetings with speakers and outings for anyone in the village/locality wishing to attend – in practice retired people
- To stimulate the minds of the elderly
- A place to meet providing coffee, lunch, tea
- Getting people out of their homes and meeting other people also helps to point them in the right direction if they need it
- Helping each other, weekly meetings, teas, dinners, trips
- Friendship and community involvement
- We provide fellowship, entertainment, occasional meals and outings
- To provide a sociable day out with lunch and entertainment for elderly lonely people
- Good food and company with lots of entertainment

Diversity amongst community groups

The study revealed a wide range of different characteristics underlying the variety and diversity of groups.

These varying characteristics of groups included:

- Self governing groups based on place
- Size – i.e. number of participants from 7 – 2,000+
- Resources available including the type of premises which could be used and its cost if any; administrative support within the group or from another source; support with empowerment especially at crisis points, and the skills and energy of the key volunteers
- Funding support through various sources ranging from local fund raising, special events and grants and self funding
- Some were county wide e.g. COPRG, Cambridgeshire Older People's Enterprise (COPE), WI, University of the Third Age (U3A), WRVS
- The age of many key volunteers was higher than anticipated (65-80+)
- The degree of active participation by members varied widely between groups. In some groups all members were active participants whereas other groups kept members in touch via a newsletter

Cultural differences and diversity

During the study we undertook focused interviews with men and women in the *Indian Community and Cultural Association (ICCA)* and the *Cambridgeshire Chinese Community Association*. Information was also gathered on *The Cambridge Ethnic Communities Forum (CECF)* and the *African Community Association*.

Men and women carry different roles and we had evidence of several married couples working together and supporting each other in their voluntary work. In the Indian cultural groups there was evidence of respect for elders and assistance given by other community members with the support and running of the older people's club. The Chinese Community Association supports their older peoples clubs and appears to give status and respect to the role of older people. This was thought to encourage good inter-generational relationships.

Sustainability and barriers

'We could do with some more, younger members. At 60, they don't see themselves as old.'

(An 86 year old group secretary)

'Don't count me in to your older people's group – I'm only 60.'

(Invited to join the over 50's club)

We discovered that the maintenance and survival of groups often depended on the extent of age discrimination and retaining the energy and commitment of a few people. It also depended on a strategy for succession and democratic governance. Hence it is possible to track the rise and fall of groups if they lose key volunteers without capacity planning and finding replacements. Sustainability can be helped if development support is in place e.g. in Burwell a Community forum assists community groups in the village in a number of ways to sustain their independent work. It appeared that this was not the case in most other areas.

Few respondents said that they had access to computers and IT. In addition support from an outside organisation or worker was seldom available. Most felt that there was value in networking with other similar groups and were able to give evidence of this locally.

One organisation offering support is *Care Network* which continues to respect the identity and independence of community groups and provides empowering services to maintain autonomy.

A key task for community volunteers, is working to sustain membership and meeting overall purposes in a democratic structure. In a few areas sustainability is assisted by the work of community development workers as they help to empower and support local groups and initiatives

Several older peoples groups have been developed by 'all age' community organisations in geographic localities. New informal structures and volunteer responses had also emerged where community cohesion and social capital were evident. The village studies showed how neighbourhoods can respond pro-actively to local shared interests and needs e.g. Lolworth

and Burwell. Further examples are found in the Petersfield area of Cambridge – PACT has promoted the organic growth of initiatives such as

'Friends of Mill Road Cemetery', a 'Streets for People' group and the 'Cherry Trees Over 50s Club'.

Case studies

Friday Bridge Senior Citizens held in the Tower Hall Community Centre.

- This club offers a wide range of events and activities offered at regular fortnightly meetings.
- These include information sharing, raising local issues and concerns, socialising, active games e.g. carpet bowls, floor curling putting game, quoits, darts, hoopla, plus cards and dominoes. Various outings ranging from lunches with speakers, events inviting other clubs are arranged.
- Members come from a wide area and the club has a waiting list of people wanting to join.

Not Quite Over The Hill Club

- This club meets weekly and has attendance of 80 plus members. The total membership is about 100 and there is a waiting list of 20. This waiting list is needed because they cannot accommodate more people in the community centre.
- The club is connected with the Kings Hedges neighbourhood partnership and referrals are made to the club by workers attending the partnership.
- As well as weekly meetings, other events are organized, for example outings, visits, and an annual holiday.
- The group started with a drop-in coffee morning to which 5 people came along. Gradually attendance outgrew the building. The club now hires larger accommodation in a larger community centre.
- Speakers are booked for the meetings. There is a news letter distributed to 600 people in the neighbourhood. However the main communication that supports the club is by word of mouth. The club has a very positive reputation locally.
- The group is self funding and has an active committee of 10 members together with 4 extra members who take regular extra tasks. There is a constitution and AGM. For parties, food, e.g. a ploughmans lunch, is prepared by a small group. Everyone plays an active role in maintaining and extending the activities of the club, e.g. one lady organises an annual holiday.

University of the Third Age in Cambridge

- This organisation is an example of self-help Community Group of Older People. It offers educational and social activities for those no longer in full-time employment. Its members benefit from the 287 courses held weekly or fortnightly in term time and from special events and outings. Activities are held in various venues in and around Cambridge. These are organised and taught by the members themselves. In 2008/09 there were 2,018 members with 18 trustees and two employees.
- The following examples of U3A activity were given:
March U3A holds talks, events, lunches and meets monthly at Trinity Church, March. There are also U3A groups in Ely, Melbourn, St Neots and Sawston.

Women's Institute

The Women's Institute in Cambridgeshire plays an important part as a diverse organisation which includes a number of people over 50 across the county. Nationally the WI has 6,500 branches. Within the Cambridgeshire area there are 71 Institutes, six of which are in the City of Cambridge.

Camlets – Only Connect – Timebank – Credit Unions

These are all self help groups exchanging goods, services and/or credit facilities. They include a number of older people who share the values, interest and benefits of these ventures. These groups provide an alternative and complementary economy to that which prevails.

2. Faith and church supported groups

There is no one source of information on faith group numbers in the County. The Cambridgeshire.net lists 222 groups (15/04/09) under the category of 'Faith and religion'. This is not an exhaustive list of churches or faith groups in Cambridgeshire, but it is a list of those which have chosen to display information on this website.

Our village studies and Parish Council enquiries indicate that there are often a range of churches/faith groups in each moderately large village e.g. 5 in Burwell, and more in each town. Larger towns are likely to include hundreds of faith and church groups.

Many of these groups indicate that they undertake community work. From local information we know that this includes work supporting older people which is mainly undertaken by people over 50.

We had a sample of 29 faith groups from which we got information about activities, participation and numbers benefiting. We established that about 1,000 older people benefit from services provided.

This sample of churches and faith groups illustrates the extent of volunteering and provision for and by older people in the county.

On average this means that each group provides services for 35 people. Using this average we estimate that the 222 groups listed on Cambridgeshire.net could be providing services and support for up to 7,770 older people. About half of our sample, 15, listed 243 volunteers involved in their groups. These volunteers are mainly over 50.

In addition we found that faith groups commonly provide separate activities for older people. Some also positively strive to include older people in their general activities e.g. through help with transport.

Some activities are open to all irrespective of church/faith group membership. It is the aim of some to reach out to wider groups within their locality and use their facilities, resources and volunteers to this end.

People commonly attend more than one activity on a regular basis. Faith groups are well positioned to undertake work in physical and mental health crisis situations and with vulnerable people. Many individual members of faith groups and

churches are involved in social action and crisis support. Leaders also offer crisis support and other forms of pastoral care to older people. They often play a significant role in end of life care.

Indian Community & Culture Association (ICCA)

The ICCA over 50s club is for disabled and elderly. ICCA is the parent association which supports it. The over 50s club was established in 2000 with 6 members and has now grown to 40 members. It is held at Bhart-Bhavan which is also a temple.

Dial a Ride pick up members and take them home. Exercise, minutes of last meeting approved by members, speakers, hot meal made by members.

Funded by *Community and Voluntary Forum Eastern Region (COVER) 2001*. A 50p donation from members as a commitment. Celebrates birthdays, has seaside trips. Members belong to COPE and COPRG.

The older peoples group always engages annually with the CCA programme with a multi-cultural event which illustrates Indian culture. Representatives of other community groups are invited to attend.

It is common for younger members of the family to look after the elderly. Status and respect for elders is still a common factor in the Indian community. This could be described as a cultural norm and at variance with the wider society. A number of married couples work together in complementary ways in their voluntary efforts.

'If you need to consult, talk to a man, if you need action, talk to a woman.'

ICCA Chairman's wife aged 86

More than half of the groups hold weekly or monthly lunches at pubs or village halls. Some groups meet weekly in members' houses. Most have older people influencing their programmes which cover inter-generational activity and specialist older people's groups. In our sample church and faith groups have programmes which include seated exercise classes, craft clubs, fellowship groups, study groups, information sharing, talks, demonstrations, advice, outings and visits, history groups, recreational activities, knitting club and mental health promotion groups.

Within the county there are examples of ethnic organisations which support older people's groups e.g. the Indian Community and Cultural Association (ICCA) and the Chinese Community Association. These associations have established and supported older people's groups. There was clear evidence in our discussions that elders were empowered to take leading roles. Both groups provide transport for their elders.

3. Groups run by specialist organisations

Sources of data about groups run by specialist organisations

There appears to be no comprehensive listing or source of information on the number and vast range of voluntary societies in the county. 19 voluntary societies concerned with the wellbeing of older people volunteered to participate in the study. Information was also collected by various supplementary methods including focus groups, internet searches etc. From the sample we estimated that there were 4,440 beneficiaries attending groups run by these organisations. In addition to this sample studied, we identified further groups using cambridgeshire.net thus expanding the number to 44 with an estimated 10,282 beneficiaries attending these groups (Feb 09).

Parkinson's Society Support Groups

Support for people with Parkinson's disease and their carers. They meet weekly and monthly in various parts on Cambridge. There are 2 part time support workers and volunteers including users of the group. We gained information from a person in middle life who is living with Parkinson's disease. He was able to describe his use of the group and also told us about his wife's attendance at a carers' group run by the Parkinson's society.

A semi structured interview was carried out with a support worker who outlined the progress the Parkinson's Society has made in reaching people affected by the disease including family carers. This proactive approach has meant less post code lottery in the County by extending accessible provision. This relies on the availability of transport.

This is one example of very many support groups which exist across the county for people living with disabilities, illnesses, cancer, Alzheimer's, long term conditions etc.

About voluntary societies

Voluntary societies provide a range of services and meet a range of interests for all ages. Running groups is one part of their activity. These societies are often not age defined. Voluntary societies now include social enterprises i.e. business with a social purpose and sell these products/services for profit to raise funds to support activity. Some voluntary societies are openly competing to tender for the opportunity to supply services for the central and local government rather than relying on fund-raising and grants. Some of these organisations work in partnership with those in public services.

The sample of 44

Of these voluntary societies and groups, all benefited older people amongst their users and also benefited from the help of older people amongst their volunteers, trustees, fund-raisers and members.

The examples described in the study are part of the estimated 3,700 voluntary organisations in Cambridgeshire with 40,700 volunteers involved. These figures are from the CSVIC, the Cambridgeshire Infrastructure Consortium, 02/08. We have been able to classify the groups run and supported by specialist organisations into 5 groups:

1. **Support groups** covering disabilities, illness and genetic conditions and including support for carers. These groups are run by workers in the voluntary and statutory sectors.

GIG

The Genetic Interest Group covers over 130 charities which give support to families and individuals with genetic disorders. Contact can be made through <http://www.gig.org.uk>.

No figures of beneficiaries are available. However they cover inter-generational support to all ages.

Cambridge Cancer Help Centre (Life Line)

which provides drop in facilities and support for people living with cancer and their carers. The centre was founded in 1986 with the object of giving help and encouragement for people with cancer and their families.

Carers' Groups in Cambridgeshire

- **"Cambridgeshire Carers' Services** is a specialist organisation developed by Cambridgeshire County Council (CCC) and managed by a Carers' Partnership Board. Carers' groups are run for and by carers whilst developed and supported by two part-time project workers employed by the CCC. The *Carers' Partnership Board* has launched the *Carers' Strategy for Cambridgeshire 2008/11*. The groups meet once a month in various locations in Cambridgeshire e.g. Fulbourn, Litlington, Soham, Cambridge and Huntingdon to discuss common issues. There is also range of activities available including pamper days, reflexology and massage. Information on support and local activities is available in the magazine which is produced regularly." ***The voice of a carer who is an older person and member of COPRG and the Carers' Partnership Board***
- It was suggested that this type of information should be more widely available via parish magazines and newsletters to older people carers who are not aware of the services and support available.
- The chair of the Carers' Partnership Board is the present Chief Executive of Crossroads which provides respite support for up to 3 hours a week for carers. In 2005-2006, Crossroads (Cambridge City) delivered more than 30,000 hours of support to Carers in Cambridge City. Crossroads Cambridge City has been awarded a three star excellent service rating for domiciliary care following the February 2009 Inspection.

2. Support for veterans and their spouses.

A wide range of national organisations exist and we have become aware of a few of these networks within the county.

British Legion Women's Groups are active around the county. Older people volunteers visit housebound members and provide grants e.g. Guyhirn Royal British Legion Women's Section meets in the village hall monthly. They have 20 people attending and 6 volunteers.

The **British Korean War Veterans Association, Ely and District Branch** is about the welfare of ex-servicemen. We were told that 90 people attend monthly meetings at a hotel in Ely.

The **Grenadier Guards Association** meets bi-monthly in various pubs. There are approximately 80 people in the Branch. Their activities include lunches, visiting and outings.

3. Retirement groups including retired union members' groups

UNITE – the National Federation of Royal Mail – has approximately 60 attendees. The Federation has 650 members. A group of officers and a committee organise a yearly programme of events such as coffee mornings, Christmas lunch and outings. It meets at St Andrew's Church Hall in Cambridge.

The **NHS Retirement Fellowship** has 45 people attending monthly at Kirkgate Church in Walsoken. Activities include speakers and outings. This group is listed on the Fenland Club Directory.

Two more **NHS Retirement Fellowships** have been identified on Cambridgeshire.net. Contact details for these are available.

TGWU Retired Members Association which includes campaigns for a better deal for pensioners, educational meeting, advice on pensioners' problems, deputations and lobbies. United efforts with other groups on behalf of pensioners and social activities.

UCU active in Cambridgeshire and other Trade Union Retired Members groups e.g. Unison

4. Physical recreation and leisure groups

Cambridge and Coleridge Athletic Club uses the University Track at Wilberforce Road, Cambridge twice weekly for running, stretching and other athletic activities. 64% of the attendees are over 50 years.

Living Sport is extending physical exercise groups across the county. There are a number of private gyms used by all ages.

Thursday Tea Dance Club meets weekly at the Queen Mary Centre, Wisbech. There are 50 people attending for dancing only.

March Leisure Club is also listed on Fenland Club Directory. There are 200 people attending on a weekly basis at the March BRAZA Club. Activities include keep fit, line dancing, arts and crafts, short mat bowls, scrabble, dominoes, crib, day trips and holidays.

The '**Forever Active Forum**', sponsored by the Cambridge City Council, holds exercise sessions for the over 50s. More than 700 people attend these weekly groups.

5. Gender specific clubs

A number of *Probus* clubs for men have been identified in various parts of the county.

Ely and District Probus Club meets fortnightly at Ely Cathedral Centre. There are 50 people attending.

Ramsey and District Probus Club has 71 people attending monthly at the George Hotel, Ramsey for lunches and outings.

Granta Probus Club meets monthly at Wolfson College. There are 80 in the Branch and 34 attend regularly for lunches, speakers, mutual support and outings.

Huntingdon and St Ives Probus Club meets monthly at the Dolphin Hotel, St Ives for lunches, outings, information, befriending, visiting and mutual support. They have 61 people attending.

6 further **Probus Clubs** in Cambridge, St Neots, Chatteris, Wisbech, March and Cromwell were listed on Cambridgeshire.net with contact details

6. Day Centres

50 day centres were identified in Cambridgeshire sponsored by a number of sources and covering a variety of purposes. The best practice examples were those functioning as a hub for local older people e.g. the day centre in Burwell (see box on following page).

We were impressed by the extent to which workers, paid and unpaid, interacted with other services to the benefit of those attending. Much partnership work happens in the village and this provides a flexible response to new needs and new members. The staff and volunteers have locality knowledge and interactive networks which are a central feature of the community cohesion.

The policy and practice of the centre reflects an understanding of how all stakeholders, staff and volunteers, help to maintain and strengthen a wide range of facilities, activities and support relevant to the engagement and needs of older people. It reflects a locality focus and a person-centred approach which helps to maximise well-being. It also compliments other support services.

The coordinator expressed the importance of local knowledge and of pro-active outreach work to older people in isolated situations and hamlets. By encouraging access to the centre of visiting services they are able to maximise its usefulness to older people.

Focus on Burwell and District Day Centre

This day centre was built 20 years ago and is a charity for Burwell and district older people. It has been developed as a resource centre for wider facilities from which those attending and 60 older volunteer helpers can benefit. The Burwell Day Centre also provides lunch for those attending Monday to Friday and sends meals on wheels to those unable to attend through illness or who prefer to eat at home. The meals provided are freshly cooked by one paid worker and volunteers who cater for around 70 lunches a day.

As well as providing an open access facility for older, vulnerable people, with an activity programme throughout the week, the centre also has other services visiting on an intermittent basis. The day centre has its own bus and collects people who could not otherwise attend including some residents in the local care home. Others came by scooter, bus, car service or on foot (the day centre being in a 'flat' village means it is accessible for local older people).

A coordinator and a skeleton of paid staff are supported by a rota of 60 volunteers who help on a regular basis. Most of these volunteers are themselves older, retired people. One volunteer has spent time and energy fund-raising for the centre in addition to the work undertaken by the coordinator in this area. Two driver volunteers are due to retire (one aged 80) and it is difficult to replace volunteer drivers. In terms of governance, the day centre is overseen by a group of local older trustees who know the area and support the innovative and enthusiastic coordinator and her team. The part-time deputy who supports and covers for the coordinator in her absence is very experienced in work with older people. Most members attend twice a week but there is flexible access to meet needs as requested.

Currently the *Primary Care Trust (PCT)* and *Social Services* recognise 15 of those attending as having special needs and pay a grant to support the centre. A social worker attends every fortnight and makes assessments of people at the centre to confirm the basis of their needs e.g. social interaction and nutritional support. The centre then receives a Social Provision Order which is a contract between Social Services and the Centre staff. At the time of the visit (Dec 08) they received payment for 15 places at the Centre each day, although they provide for more people in need than this and hoped for approval for further financial support.

There was a comfortable relaxed, welcoming and open door atmosphere. People arriving early for their special Christmas events spoke positively about the role of the centre in terms of providing support, fun, information, a shop for small purchases, chiropody, help with hearing aids, equipment for those with sight problems through *CAMSIGHT*, massage, reflexology and hair-dressing. Flu injections are an annual event and other residents in the village attend for this purpose. Information and advice on pensions, benefits, etc. are given during periodic visits from the Pensions Service and the *Citizens Advice Bureau (CAB)*.

Community Police Support Officers regularly call in, especially following problems in the village (distraction burglaries, etc). *CAMTAD* (hearing aids) meets at the Day Centre one morning each month and Burwell Sight meets at the DC one afternoon each week. A mobile library also calls at the Day Centre. Occasional outings are arranged using the centre bus and volunteer drivers and also annual events take place in the Centre.

The centre is used by 30 older people per day assisted by a group of volunteers who undertake various jobs on a rota basis. People attending can come more than once a week. No less than 60 volunteers are engaged in this rota.

Characteristics of neighbourhoods, villages and parishes

The information on villages and neighbourhoods derived from a variety of sources including the study of a number of villages and neighbourhoods, a review of local magazines, websites and parish plans. This information produced a snapshot of some of the activity and participation in villages and neighbourhoods in the county.

There are 240 parishes and towns listed in the County. The majority have parish councils, some

have town councils and some will only have parish meetings (smaller places). Some Parishes cover more than one village and hamlet. There is no definitive list of villages available. In Fenland there are 12 Parish Councils and 5 Town Councils. The Parishes commonly cover more than one place and 490 places in the County, analysed by postal address, are in Cambridgeshire.

The village studies complemented the examination of parish plans and revealed different characteristics of the many villages in relation to their concern with vulnerable and isolated people.

Lolworth Village Study

The population of Lolworth consisted of 136 people of which 65 were males and 71 females. There were 56 separate households. 17 people were aged 65 or over. 15 people had a long term limiting illness. This village study was chosen as a case study because of its size, relative isolation and long term reputation in supporting community cohesion. Information of this village was collected from current residents, a past resident and a visiting family helper.

It is in an isolated position with constricted sole access via a major road (A14) with no through road. It has no pub, no bus, no school, no doctor, no shops and the population is too small for a parish council.

One older informant, has lived in the village for 28 years, and is currently a semi-retired farmer with a physical disability caused by a farming accident. He is also the sole carer for his disabled wife. Some privately arranged home help and family help support them. However, because of the ethos of mutual help in the village, there is apparently no fear of future neglect. At 69, he is fully engaged 3–4 times per week with community activities. These stem from his role as church warden and extensive engagement with residents and village interests.

These include:

A weekly village club is held at the well used village hall. It has a licensed bar which attracts evening visitors and runs a range of activities which include quiz nights, wine tasting etc.

The club arranges intermittent outings from the village for special events. The village hall is run by a local resident's hall committee. It is well used for family, social and community events. Weekly children's clubs for two age groups take place there run by local people. Because it is small, a large marquee has been purchased to extend the facilities. This is also used on the village green for summer events.

A major flower show is organised bi-annually. At the most recent event, 400 entries of local produce and flowers were made by all ages.

Each year, two Village Meetings are held which are well attended by residents and at which local issues are discussed and decisions on action taken. There is regular contact from the district and county councillors who provide relevant information. It appears that the village networks provide good access to the needs of the community including the sick and elderly. Help and transport are arranged informally to meet expressed needs. New residents, sometimes, take their time before joining village events.

One long term visitor and carer who has worked in Lolworth for many years reflected that there is extensive community cohesion and mutual support within the village. During her close association with families there for many years she confirmed the help given by key members of the village. She gave evidence of one older person with whom she worked who required more support than she could offer. He had a social service care package to maintain him living at home. No other recipient of a social service care was known.

Despite its geographic isolation and difficult access this small community in Lolworth illustrates how cohesion and caring networks have benefited people who encounter crisis and problems.

Much of the community activity of villages depended on people having time and interest to spend in the village. Some places contained more commuters than others. Village transport facilities varied which impinged on the wellbeing of those who weren't driving.

Parish Plans

Where they exist, Parish Plans provide information on population including gender and age, types of tenure and other relevant locality data. Not all parishes have undertaken this task of reviewing the life of the village/parish including the good things about an area and also the things which need to change or to be improved. Parish Plans cover all sorts of social, economic and environmental issues. The plan is usually put together by a small team of volunteers who carry out a survey of village residents to find out what people think should go in the plan. These appear to promote discussion on quality of life in the locality.

Communication

The existence of a post office or shop clearly represented a point of contact for residents in villages. The well used notice boards and windows of this focal point indicate the importance of post offices as information points. The availability of informal drop in centres and coffee shops also improved the sharing of support and networking.

Pubs also play a crucial part in providing opportunities to meet and contribute to lessening social isolation. In some examples, pubs were the meeting place for weekly lunch clubs, special village events and a hub for information sharing. Some of the larger villages have libraries which have extended their services e.g. by providing access to IT facilities and to advice and information which contributes to wellbeing. Some libraries are adopting a wider outreach and are used as a facility for group meetings.

Active ex-servicemen's clubs still exist in some areas especially where they have opened up their membership. The Burwell example provides a useful, informal setting for a mixed membership of all ages, men and women and offers a range of activities including a thrift club run by a woman member.

Newsletters and other types of media

Most villages had some form of newsletter or magazine which gave general information and details of community activities and contacts. There was a large range in the number of events taking place in different locations. In Burwell, 35 community groups are advertised in the bi-monthly 'Clunch' magazine. Much depended on the availability of meeting facilities e.g. village and church halls, clubs and community centres. Another variable was the enthusiasm and participation of residents. Whilst there were specific age related activities mentioned in some magazines and newsletters, many of the activities and opportunities were open to all.

In one village, the need for up to date information was met by a fortnightly newspaper delivered to all houses.

118 villages in Cambridgeshire are listed on www.villagesonline.com. The type and content of these websites vary.

Differences in prevailing values and cultures

It was evident in some villages that the emphasis was on keeping things as they are in the interests of those with power. This limited the extent of social inclusion and perpetuated stereotypes of older people and others who were not part of the dominant group. Parish studies and plans provide some evidence of variation of basic prevailing ethos across the different parishes. This was illustrated by those conducting the plans.

However, more evidence indicated that the need to keep abreast of changing times had enabled other places to prosper. A growth of tolerance and acceptance of diversity was illustrated by the Linton study with more people contributing to the village society as volunteers to create a more caring cohesive community .

Linton Village

'Linton has changed over time and has only survived and prospered because local people have adapted to new circumstances'.

Linton Parish Plan

This appears to be one example of a village which has sought to keep abreast of changing times.

'On the plus side we have seen the tremendous influx of new people bringing their skills and enthusiasm, their willingness to buy or provide new services and themselves to further enrich our culture'. Linton Parish Plan

The preparation of the parish plan encouraged participation of residents and gave independence to findings. There are a range of community groups in Linton, one of which is the *Linton ACE* (Activities and Care for the Elders) which has its own website. Another example is the VIPs Club which meets monthly for visually impaired people. There is also a monthly tape recorded newsletter for blind and partially sighted people. A further practical help scheme involving voluntary visiting to isolated people is run by Linton LIFE which was originally supported by Care Network. It offers one to one befriending to isolated individuals and is run by a dedicated group of volunteers.

Linton News provides regular community information and is delivered to all residents.

'There is not enough to do here, poor bus services, lack of services'. Coton Parish Plan

Promoting social inclusion

A DEFRA (Department of Environment, Food and Rural Affairs) East of England award for 'building country life' emphasises that the fundamental quality of a community is the way in which it includes all groups and individuals, particularly the most vulnerable in a cohesive and mutually supportive community.

We identified a number of different characteristics between villages and the extent of community cohesion. This varied with the prevailing ethos of the residents. A caring, interacting community appeared to exist in some community places more than others.

'There is a strong sense of a supportive community; there are no serious social or major communal problems. There is an excellent support system for the vulnerable members of our community'. Dullingham Parish Plan

The Dullingham Parish Plan also outlined the importance of emergency cover for vulnerable people in times of extreme weather, prolonged power cuts and disruption to other essential services and utilities.

The plan suggested forward planning and the implementation of an action plan:

- Identify people at risk
- Identify named resident/neighbour to check on them
- List phone mobile phone numbers for emergency contacts

In other areas of the county Magpas Community First Responders co-ordinate teams of members of the public who volunteer to attend serious medical emergencies in their local towns and villages. There are currently 33 of these voluntary groups across Cambridgeshire.

Reaching the hard to reach

The Burwell and Lolworth Village Studies and the Linton Parish Study illustrate good practice where social inclusion appears evident. However social inclusion is not just about people wanting to join community groups, but also about being a 'good neighbour' to those who live alone and prefer to maintain a private world.

Those parishes which appeared to be most socially inclusive benefited from the active engagement of parish councillors in diverse local community groups.

Another specific variation applies to the degree of local knowledge, concern and interest shown by others in relation to the vulnerable and "hard to reach" older people. We have shown the multiplicity of ways in which some local communities are seeking ways to be socially inclusive without invading privacy.

As our study indicates practices across the county vary. The Burwell village example however provides us with a model of good practice which is possibly replicated elsewhere.

Health and social services are seeking to make significant improvements for older people and carers but need to promote positive attitudes to older people within their services and localities. Front line workers are in a good position to develop a holistic approach including promoting preventive services and health. There are currently many information and communication gaps

between agencies involved in enabling people to live independently in their own homes. For example the home help services provided by the voluntary and commercial sectors are not in touch with statutory service providers at the level of individual and personalised care.

A number of strategies to tackle social isolation have been identified. Specific village community groups and agencies attempt to contact the 'hard to reach' individuals who may need help. Age Concern and Care Network work to promote or provide village warden schemes in 18 villages across the County. Some informal networks also provide access to and for individuals who are living in isolated areas.

The annual October programme of Cambridgeshire Celebrates Age has tackling social isolation as one of its objectives and has found that inter-generational events are a good way of reconnecting isolated older people.

Building Social Capital

Central to the approach discussed in the Joseph Rowntree report summarised in the literature review is a description of the main success criteria for 'building a good life for older people in local communities'

- the search for ways to involve everyone with
- emphasis placed on finding creative solutions to maintain social relationships: even in the face of restriction and
- providing accessible and flexible support.

Locality links, networks and partnership working

We discovered that in a few areas, informal linking mechanisms between different local community groups have been established. Also some links have been made between local service organisations and community groups, but the pattern is varied. Over-all, it appears that links between the infrastructure of county organisations and locality networks is not widely established. However, connection has been achieved in some localities between service providers and their member organisations e.g. the Fenland CVS (Council of Voluntary Service). Other CVS groups in the County have different mechanisms for linking their member groups. Apart from COPRG there is no attempt to link community groups across the county. Community groups are

not directly engaged with CVSIC and no community groups are listed as members of Cambridgeshire Together.

“Supporting community life in our Village”- The Burwell Community Forum.

This voluntary forum started as a community organisation in the 1980s and now includes a County District and Parish Councillor, the local Extra Care Housing Manager, and the District Nurse. Its purposes include giving support to the many community groups and activities in the village with help and small grants, planning and implementing wider events, and providing a community Lunch and Coffee Bar.

A major, bi-annual event is the “Burwell at Large Exhibition”- the showcase event for local clubs, classes and organisations which take place in the Village College. These include a range of weekly/regular events targeted at older people, though most are for all ages. At least 35 community groups/organisations exist in Burwell.

The Burwell Community Forum produces The Burwell Information Booklet issued as part of a 'welcome' pack to all new residents which lists emergency, medical, welfare, refuse services, parish and other councillors, available buildings and activities for all age groups including senior citizens.

Fenland District Council organises Golden Age Fairs which include exhibitions each year in a few villages across the district. These fairs are held in different villages each year. At these events information is available on different services and organisers are able to give details of services and help for older people. By this means, some service providers are able to advertise and promote their services. However, community self help groups of older people are not included.

Some of the voluntary societies and charities we identified e.g. Probus, WI, U3A, Parkinson's Society, Alzheimer's etc enable people with common interests and needs to meet regularly in accessible points. One example of how statutory services provide links between family carers is provided through the Carers' Partnership Board and informal Carers' Groups which meet in different localities across the County.

In the neighbourhood of Kings Hedges/Arbury, the Cambridge City Community Development team has developed a locality partnership board, linking a range of community centres activities, on which older peoples groups and others are represented. The Arbury Festival started in 1997 attracted about 5,000 people last year and all local organisations and schools, contributed to the colourful procession. This important local community event links local organisations in Arbury/Kings Hedges.

Community Organisations also work to link and make known statutory, voluntary and other community groups e.g. through AGM displays and events providing information to members. A few examples include the *Petersfield Area Community Trust* which holds an annual street party/summer event attracting around 400 members. It also involved links with businesses and other community interests. Another local street party is held by Gwydir Street Residents Group and residents bring out and share tables, food and drink. Local businesses and groups also participate. These events help to build social capital.

Some groups have formed links with others to share common interests, e.g. through joint meetings, special events, shared meals, outings and holidays. For example, in *Wicken the Older Peoples Group* shares events with a similar one in Willingham. In Petersfield, the Cherry Trees Over 50s have had joint meetings and events with the nearby *Indian Community Association Over 50s club*. They share outings with *Friends of Disability*.

Over the past four years, the *Cambridgeshire Celebrates Age* project has been focusing its development on District and locality "Hubs". Inter-generational and service links are formed through the partnership programmes of activities — with schools, nurseries, and higher education centres joining in the programme, as well as other service providers and community groups.

A number of Churches and Faith groups join together in localities to share worship and other events. The Inter-faith movement also encourages this to happen.

Cambridge CVS recently conducted a study in South Cambridgeshire exploring the possibility of establishing more structured networks, (Networks and Neighbourhoods 2008)

Some of the county wide organisations promote networks. They arrange quarterly meetings for their members, e.g. Age Concern, Cambridgeshire Older Peoples' Enterprise, Cambridgeshire Older Peoples Reference Group and Cambridgeshire Older Peoples Partnership Board. In addition special activities are evident and some groups provide newsletters.

Tackling discrimination

This phenomenon is not new. Dr Alex Comfort argued in 1977 that :

'The concept of ageism is part of the prejudice against the elderly. Ageism is the notion that people cease to be people, cease to be the same people or become people of a distinct or an inferior kind, by virtue of having lived a specified number of years ... like racism, it needs to be met by information, contradiction and when necessary confrontation. And then people who are being victimised have to stand up for themselves in order to put it down.'

A Good Age (1977): Comfort, A.

Age discrimination involves a set of beliefs, attitudes, norms, and values used to justify age based prejudice and discrimination. The term is used frequently to describe discrimination against older people. It comprises of:

- prejudicial attitudes towards older people, old age, and the aging process
- discriminatory practices against older people
- institutional practices and policies that perpetuate stereotypes about older people

This study has focused on older people and their social care needs as well as their contribution to society. Improvements suggested would help across all the groups to promote equality.

Because age discrimination is deeply rooted (to the extent that older people themselves some-

time hold ageist views) it is difficult to tackle even when the problem is recognised. Our evidence indicates that the single most effective strategy is to involve older people, users of services and carers and to recognise the 'unsung heroes' at community level who are themselves essential to promoting social inclusion.

Ageism is attracting widespread attention. It needs wider understanding as to how it affects older people's daily lives. Fortunately, more people are becoming aware of its personal implications. We all need to raise awareness of attitudes and behaviour which are prejudices towards older people.

One example of evidence of ageism, is the extent to which older people are patronised by those providing services. The main aim of older people working for older people and speaking up for themselves is to achieve dignity and respect through working in a partnership of equals. However, few professional workers are skilled in the art of empowering their users to engage in this way.

As our study indicates practices across the county vary. The Burwell village example however provides us with a model of good practice which may be replicated elsewhere.

Health and social services need to promote positive attitudes to older people within their services and localities. Front line workers are in a good position to pursue a holistic approach to older people's care. However, this aim has to still to be translated into partnership practice in most areas.

'Improving services for older people' recognises that 'Older people greatly value good physical and mental health but they also stress the importance of being able to participate in life. They want to maintain independence and dignity in older age, have choice and control and crucially be part of mainstream society.' *Improving services for older people: Roberts, Emily; King's Fund*

Our study confirms that older people are significant contributors to our social fabric. However few workers understand what this means in terms of how to promote engagement and the empowerment of service users.

Findings

The most striking discovery of this study was the evidence of many thriving and diverse groups across the county, run by and supporting older people.

'Most councils should do more to create an environment in which people thrive as they age'. Increased awareness, better engagement and innovation could help many older people without significant expenditure.' **Don't stop me now – Preparing for an ageing population:** Published by the Audit Commission July 2008

The findings of this study corroborate and expand many of the recommendations made by the Audit Commission in this report.

Increasing Awareness

Having direct involvement of older people in the planning, provision and monitoring of services appears a minority practice. Current provision shows scant regard for outcomes or mapping unmet needs. One example where this is changing is Care Network which has prepared a business plan for collecting older people's stories and providing a voice for users.

Statistics from the Eastern Region Public Health Observatory provide a range of evidence of long standing illness, aspects of disability and accidents. This data is relevant for the development of policy and practice of service providers as they respond to changes in local demography.

Falls are a major cause of immobility and deterioration. Some progress has been made in the prevention of falls.

Some village communities have actively responded to difficulties faced by residents in attending and accessing events, services and shopping facilities by setting up community transport schemes, lift shares and community minibuses. There continue to be gaps in transport provision and therefore access to services and advice in times of crisis. However the county council community transport officer now publishes community transport booklets describing who can use community transport, how to use it and how these schemes link with other forms of transport.

Better Engagement

At locality level there are variations in the extent to which older people are empowered to participate in the social life of communities. However, their contribution in maintaining the social fabric is vast and their work in the community as volunteers is in addition to their roles as carers of; grandchildren, spouses, neighbours and other family members. Many older people are involved in supporting inter-generational activities in their neighbourhoods, villages and faith groups.

Three examples of welcoming new arrivals to village communities were found in Burwell, Lolworth and Linton. This included welcome packs and other ways encouraging participation in the community.

Self help community groups involving older people are often spontaneous, issue based or responding to an unmet need in localities. Some of these may be regular but informal gatherings for recreation and social support meeting in houses, halls, clubs and pubs. Often this approach is neighbourhood based and likely to involve a small number of committed participants.

There is an imbalance between the participation and engagement of older women and men in community groups and locality activities. The Health Survey for England 2005, published by the National Centre for Social Research, Nat-Cen, identifies women as more likely than men to report participating in at least one organised association. This has implications in social care settings and also in finding ways of supporting men at home.

As this study shows, the need for promoting well-being amongst older people is being recognised and expressed in some of our localities. However, this response is variable, depending on the values and attitudes of local leaders.

User and carer engagement with service providers is beginning to emerge in Cambridgeshire. Moving this engagement beyond the tick box is the next step for most statutory and voluntary services.

The promotion of active ageing by public sector organisations is now a more common theme and has had some practical outcomes for older people. In some areas, locally accessible exercise groups are provided through the 'Forever Active

Forum' supported by the Cambridge City Council and through 'Living Sport' which is promoted by a joint partnership in other parts of the County. However, active ageing relates not only to physical exercise but to social inclusion.

Innovations

These include situations where older people exercise more voice, choice and control in their lives.

Examples of good practice from the study include:

- Three examples of welcoming new arrivals to village communities were found in Burwell, Lolworth and Linton. This included welcome packs and other ways of encouraging participation in the community.
- According status to community elders in order to maintain a sense of identity, purpose and choice. This was found in our study of the ICCA and Chinese Community Association.
- User and carer engagement with service providers is beginning to emerge in Cambridgeshire. Moving this engagement beyond the tick box is the next step for most statutory and voluntary services.
- Current provision shows scant regard for outcomes or mapping unmet needs. One example where this is changing is the 'Care Network' which has prepared a business plan for collecting older people's stories and providing a voice for users.
- Some village communities have actively responded to difficulties faced by residents in attending and accessing events, services and shopping facilities by setting up community transport schemes, lift shares and community minibuses. There continue to be gaps in transport provision and therefore access to services and advice in times of crisis. However the county council community transport officer now publishes community transport booklets describing who can use community transport, how to use it and how these schemes link with other forms of transport.

Aspirations and hopes:

- Partnership working - forging and maintaining positive and equal partnership relationships between community groups

and other external groups and organisations has been achieved in some localities e.g. Arbury/Kings Hedges neighbourhood working and CCA steering group. The role of User Led Organisations (ULO) as partners is beginning to emerge.

- Some outreach services are encouraging user access e.g. the use of the Burwell Day Centre for a range of other services on a sessional basis and extending outreach through home delivery of meals in times of illness or incapacity.
- Real opportunities to access information and services via web portals and an increase in computer accessibility thereby reducing the imbalance experienced by older people in this area. The Government *Change Up* programme and capacity building projects intended to benefit the voluntary and community sectors, has had sub regional grants via CVSIC. It has been difficult to discern from locality groups any outcomes from these initiatives for older people in the County. We do know that help has been given to the development of ITC. However, 71% of older people are not IT literate (Audit Commission).
- Extending, sustaining and developing new interest and activities in the community, neighbourhood or village, perhaps in conjunction with neighbouring villages. Wicken and Willingham jointly organise events and extend social inclusion via these means.

- Encouraging consultation and involving village residents of all ages in decision making as new needs emerge and solutions are tried e.g. the Linton Parish Plan *Keeping abreast of change*.
- Improving information and advice via regular newsletters, website links, one-stop shops accessible to village residents and community groups, *Golden Age* fairs in Fenland District.
- Maintaining and promoting good emotional and physical health e.g. links with outreach services, health and wellbeing including the *Forever Active* programme in Cambridge and *Living Sport* in areas of the county, Cambridgeshire Celebrates Age (CCA) promotes taster sessions for new learning and engagement of older people in local activities.
- Promoting dignity, respect and wellbeing for all residents and ages, via the *Dignity in Care* campaign.
- Dignity in death and dying are emerging as areas of attention and improvement plans for these services are now evident. The need for improvement in services for people with dementia is becoming more urgent. Recent estimates suggest that over 80 year olds stand a 1 in 5 chance of developing dementia.
- Promoting financial stability - by maximising access to job opportunities, financial and welfare benefits and financial advice is a particular challenge
- Encouraging a sense of safety and belonging and building inclusive communities.

Conclusion and acknowledgements

Conclusion

We hope that this study helps to achieve better understanding of how many older people are contributing to their families, neighbourhoods and communities and how services can work together in producing a fairer society.

Most of all, we hope that the voice of older people will be strengthened and taken into account and that we too will be regarded as an equal partner.

We have identified the innovative and collaborative practices that have involved older people which can bring support to other older people and promote social inclusion. We have become aware that some service providers are attempting to

empower older people's efforts to act collectively, although others lack these skills.

It has been nationally recognised that the present varying eligibility criteria for older people requiring extra social care/support has had the effect of reducing the numbers of people receiving support at home.

We hope that we have revealed some of the gaps and inequalities in service provision in Cambridgeshire.

This study illustrates how the width and diverse contribution of many community groups enhance

the quality of life and individual living of many older people. They also act as an important resource for tackling social isolation. These groups are widely initiated, supported and run by older people within an all-age citizens' network at community level.

We note the many stereotypes that surround us and have evidenced some of the contributions made by older people even those with long term limiting illness and disability who contribute to our communities' wellbeing.

*Central to our approach has been the 'the search for ways to involve everyone with an emphasis placed on finding creative solutions to maintain social relationships: even in the face of restriction'. **Building a good life for older people in local communities:***
<http://www.jrf.org.uk/knowledge/findings/socialcare/014.asp>

It's not just a question of more resources but how these resources are distributed and used. It is also about changing prevailing attitudes and the barriers encountered. Responsive, innovative public services, particularly in times of financial restrictions are essential to maintaining and enhancing the quality of life for all in communities.

The need to continue to develop and support the services which promote wellbeing, prevent ill health and social isolation is paramount. The

social fabric which sustains local, community life cannot operate in a vacuum. The pressure to restrict public services must take into account the longer term consequences. Meeting the needs of our vulnerable and socially isolated people is the challenge facing us all.

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Disclaimer

Whilst recognising the help given by many people, COPRG takes responsibility for possible mistakes and omissions.

Appendices

Appendix 1 - Bibliography

1. **Advocacy in Social Work:** Brandon, D.; Brandon, T. (2001). *Birmingham: British Association of Social Workers (BASW).*
2. **Assisting Ageing:** IDeA; The Beacon Scheme (2004-05). *London: Improvement and Development Agency (IDeA).*
3. **Building a Good Life for Older People in Local Communities:** Godfrey, M; Townsend, J; Denby, T (2004). *York: Joseph Rowntree Foundation* Available at: <http://www.jrf.org.uk/publications/building-good-life-older-people-local-communities>, [accessed on 9 Dec 2009].
4. **Cambridgeshire Older People's Strategy 2008-2011:** Cambridge County Council (2008) *Cambridge: Cambridgeshire County Council.*
5. **Compact on relations between Government and the Voluntary and Community Sector in England:** Home Office (1998 - reprinted May 2008). *Birmingham: Commission for the Compact* Available at: http://www.thecompact.org.uk/shared.asp_files/GFSR.asp?/NodeID=100318 [accessed on 9 Dec 2009].
6. **Creating Effective Community Networks in Urban Regeneration,** Skelcher, C; McCabe, A Lowndes, V (1996). *York: Joseph Rowntree Foundation.* Available at: <http://www.jrf.org.uk/node/3143>, [accessed on 12 Dec 2009].
7. **Critical Mass - How One Thing Leads to Another:** Ball, P. (2005). *London: Arrow Books Ltd.*
8. **Don't Stop Me Now - Preparing for an Ageing Population:** Audit Commission (2008). *London: Audit Commission.* Available at: <http://www.info4local.gov.uk/documents/publications/898755> [accessed on 9 Dec 2009].
9. **Healthy Futures – A Regional Health Strategy for the East of England 2005-2010:** EERA (2005). *Suffolk: EERA.*
10. **How to Thrive Past 55: What Science Tells Us About Ageing Well:** Wilson, D (2008). *London: Help the Aged.*
11. **Independent Living; A Cross-Government Strategy About Independent Living for Disabled People:** Offices for Disability Issues (ODI) (2008). *London: ODI.*

12. **Living Well with Dementia: A National Dementia Strategy:** Department of Health, SCLG & CP, SCPI, SR (2009). *Leeds: DH.*
13. **Low Flying Heroes: Micro-Social Enterprise Below the Radar Screen:** MacGillivray, A; Conaty, P; Wadhams, C (2001). *London: New Economics Foundation (funded by Joseph Rowntree Foundation).*
14. **Monitoring Poverty and Social Exclusion 2008:** Palmer, G; MacInnes, T; Kenway, P (2008). *York: Joseph Rowntree Foundation.* Available at: <http://www.jrf.org.uk/publications/monitoring-poverty-and-social-exclusion-2008> [accessed on 12 Dec 2009].
15. **Nothing About Us Without Us - Disability Oppression and Empowerment:** Charlton, J I (2000) *USA: University of California Press.*
16. **Older People Shaping Policy and Practice:** Older People's Steering Group (OPSG) (2004). *York: Joseph Rowntree Foundation.* Available at: <http://jrf.org.uk/publications/older-people-shaping-policy-and-practice> [accessed on 9 Dec 2009].
17. **Participation Works!:** New Economics Foundation (1998). *London: Centre for Participation.*
18. **Quality, Not Inequality:** Age Concern (2008). Available at: <http://www.ageconcern.org.uk/care> [accessed 9 Dec 2009], or freephone 0800 009966.
19. **Regional Social Strategy – A strategy to achieve a fair and inclusive society in the East of England:** EERA (2004) *Suffolk: EERA.*
20. **Regional Social Strategy Action Plan, 2007-2010:** EERA (2007). *Suffolk: EERA.*
21. **Research Report to: Age Concern in the Midlands and Eastern Regions of England:** Dwyer, P; Hardill, I (2008). *Nottingham: Nottingham Trent University.*
22. **Responsibility for All, A National Strategy For Social Inclusion:** Howarth, C; Kenway, P; Palmer, G (2001). *London: The Fabian Society.*
23. **Tackling Social Exclusion:** Pierson, J (2002). *Routledge: Taylor and Francis Group*
24. **'That Bit of Help' - The High Value of Low Level Preventative Services for Older People:** Clark, H; Dyer, S; Horwood, J (1998) *Bristol: The Policy Press and Joseph Rowntree Foundation.*
25. **The Black Swan: The Impact of the Highly Improbable:** Taleb, N N (2007). *London: The Random House.*
26. **Too Old; Older People's Accounts of Discrimination, Exclusion and Rejection:** Bytheway, B; Ward, R; Holland, C; Peace, S (2007). *London: Help The Aged.*
27. **Top Down Meets Bottom Up: Neighbourhood Management:** Taylor, M (2000). *York: Joseph Rowntree Foundation.* Summary available at: <http://jrf.org.uk/publications/top-down-meets-bottom-neighbourhood-management> [accessed 9 Dec 2009]
28. **Why Life Speeds Up as You Get Older: How Memory Shapes Our Past:** Draaisma, D; Pomerans, A (translator); Pomerans, E (translator) (2006). *Cambridge: Cambridge University Press, p207.*

Appendix 2

Information on voluntary and community groups in Cambridgeshire from the CVSIC February 2008

The Voluntary and Community Sector as a partner in Local Area Agreement delivery

What do Cambs VCOs look like? (best estimate)

- **Voluntary organisations: c 3,700 voluntary groups and 40,700 volunteers**
(based on membership survey of 60% infrastructure organisations)
- **Community organisations: 8,032 community groups and 88,352 volunteers**
(based on analysis of village populations against number of community groups & population)
- **Cambridgeshire: 11,732 voluntary and community groups = 129,052 volunteers**
- **Average of 167 groups per infrastructure organisation × 22 = c 3700 voluntary groups and 40,700 volunteers**
- **Average of one community group for every 71 members of the population (570,200)**
- **8,032 community groups and 88,352 volunteers**
- **However 'Quality of Life' survey recorded 68% population volunteer or 387,736 people!**
- **So VCS data only accounts for 1/3 all volunteering.**

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