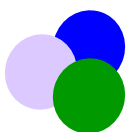
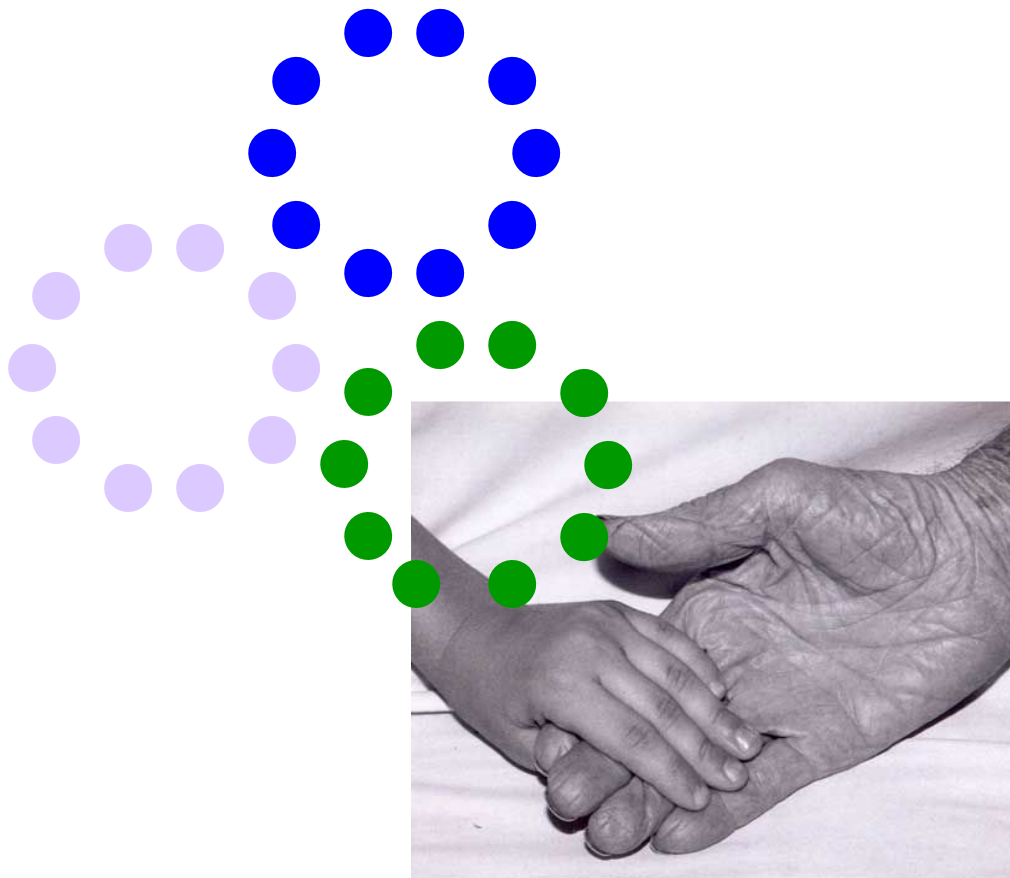




University of Brighton

Wellbeing, Health and Occupation for Older People Research
Group

**Older people's perceptions of a partnership between the
University of Brighton and the local older people's community**



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Clinical Research Centre for Health Professions

A CUPP funded project

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Executive Summary

The purpose of this study was to enable the WHOOP Research Group, based in the Clinical Research Centre for Health Professions at the University of Brighton, to take the first steps to determine whether there is a perceived need amongst older people for the establishment of a wellbeing, health & occupation centre.

The study afforded research staff from the WHOOP research group to engage with people from the Eastbourne and Hastings locality. This enabled them to establish how the university academic community and the local older people's community could share their valuable expertise and knowledge to contribute to the overall health and wellbeing of older people locally, regionally and nationally.

The project identified a number of issues regarding the development of the proposed centre. Using research tools such as the theme board technique and focus group interviews, researchers have been able to interface with participants from within the local community. It has provided opportunities to discuss in depth with older people their views and aspirations for the proposed development. The research methods enabled participants to develop their perceptions through the use of images and a small group focus group interview. These methods allowed older people to express clearly their thoughts on how the university might enable them to live an active, healthy lifestyle and to achieve greater wellbeing in later life.

Firstly, the study highlighted how participants saw the potential in the way the university could interact with the elderly community.

- Participants saw an opportunity to use the university's staff and students' experiences and expertise to feed into their own experiences. Developing a number of programmes, facilities and activities using university's valuable knowledge and skills could benefit older people to improve their life satisfaction in later years.
- Participants identified that older people would welcome more opportunities to interface with the university and its staff. Focus groups reported that this engagement would allow people to seek advice on a number of issues such as fitness and exercise, ways to improve health and wellbeing, and advice on diet and nutrition.
- The location and transport infrastructure surrounding any potential centre was considered to be important issue. Many reported that a physical facility which was located in a central location would be important to the older people's community. Many noted that poor transport links would prevent people from using the wellbeing centre.

- The wellbeing centre should offer a balance of activities to meet a range of interests and abilities. This would be important to meet the needs and aspirations of a diverse group of individuals. To achieve such goals, many reported it was important to ensure that older people have every opportunity of using university facilities. Locating the centre within the grounds of the University of Brighton would be an advantage, as older people would be able to benefit from this location.
- Intellectual challenges and opportunities to take up courses in a variety of subjects would be welcomed, and could be aimed at a range of interests. Many recognised a need to build up intergenerational relationships and projects. Participants felt that older people had a wealth of knowledge and skills that could be valuable in working with younger people. Many reported that working with younger people in an educational and non-educational setting would allow both age groups to challenge stereotypes.
- The image of the centre would need to be developed in a different way from most day facilities available within the community. It would need to reflect an 'active age' approach and a positive image which moved away from the stereotypical ideas of older people that exist within society.

Acknowledgments

The Wellbeing, Health and Occupation for Older People Research Group would like to thank all the participants who were kind enough to take time to discuss their ideas, opinions and issues regarding the Wellbeing, Health and Occupation centre for older people. We would also like to thank the advice and guidance we have received from John Appleyard, (Hastings and St Leonards Seniors' Forum), Brian Wyld (Help the Aged), Kirsty Henshall (WRVS), Polly Rodriguez (CUPP), and the WHOOP group steering members, and to Keith Girdler, Age Concern. Your contribution to the project has been appreciated and most valuable. We would like to thank CUPP sincerely for funding this start up project.

Introduction

As a society it has become apparent that largely due to advances in medicine and technology people's life expectancy has changed and as a nation we are living longer. The notable changing demographics have led to a shift in the perception of what it means to be old. Traditionally the term 'old' used to mean frail, vulnerable, and dependent. However, there are changes in the use of term, largely due to older people themselves. The image of the older person is slowly changing to include independent, active, individual choice and healthy ageing (Joseph Rowntree Foundation: 2004)

Central and local government also recognises and identifies with the changing demographics. The development of the National Service Framework for Older People has led to the reinforcement of a person centred care approach to promote health and wellbeing in older age. As a result there is a growing awareness within the health and social care professions of the need to ensure that all older people have the opportunity of experiencing greater life satisfaction and well being in their later years.

The Clinical Research Centre for Health Professions Wellbeing, Health and Occupation for Older People (WHOOP) Research Group recognises the changing demands in the population and that improving the quality of life for older people should be at the heart of all provisions provided within the community. However, it has been recognised that some groups within communities fall into the 'hard to reach category'. This might be due to poor health, mobility, transport issues or the rural areas which they may reside in. The WHOOP research group believe that improving quality of life and wellbeing is something that should be done in conjunction with older people themselves. Improving life satisfaction can be something as small, but nonetheless is important, as offering artistic, social, and educational opportunities, as well as providing support and advice to older people. In addition it has been recognised that there is considerable research of relevance to older people carried out within the University of Brighton, which should be disseminated to older people locally as well as in the usual publication routes.

In 2005 the WHOOP research group received £5,000 funding from the Community University Partnership Programme (CUPP) to establish how the University of Brighton community of staff and students might best interface with older people to add to and learn from their experiences in a positive way. Thus the WHOOP group carried out a short project '*To determine whether there was a perceived need for the development of a Wellbeing, Health and Occupation Centre for Older People*' and examined what the perceptions of such a centre were.

Background Information

A definite trend has been observed when examining the demographic changes that have taken place in the UK's population over the last 50 years.

The UK's population is ageing at an accelerated rate. Since 1951 there have been dramatic increases in people aged 60 and over. The 2001 census noted that the proportion of the population nationally aged 60 and over has increased to 21 per cent from 16 per cent census in the 1951 census (Census 2001). This is contrasted to a declining proportion of the population aged under 16. This evident change in the age balance of the population means that for the first time there are more people aged 60 and over than there are children. This change is the result of declines both in fertility rates and in the mortality rate (Health Development Agency 2005, Census 2001). The continual ageing of the UK's population reflects that there is now a longer life expectancy for people aged over 60, which could reflect improvements in the standard of living and health care.

The distribution of the population demonstrates that there is a higher proportion of people over the age of 60 living in rural and coastal areas where isolation and exclusion from services and society are key issues. East and West Sussex have the highest population of those of state pension age and East Sussex has over twice the population of over 75 years old, 22.8% more than the general population in England 16% (Census 2001).

For most people, retirement from full-time employment is a major life changing event and requires a paradigm shift. The central issue in retirement is replacing the time spent in work with other activities. Several studies have reported a positive relationship between the number of performed activities and life satisfaction in retirement (Oakley & Pratt, 1997). The trend towards earlier retirement and increase in life expectancy means that individuals could spend up to a third of their lifetime in retirement.

Living to a 'ripe old age' is something that all individuals wish to aspire to given that we live in good health in that time. However within society the idea of growing old is met with negative ideas about what it is to be old. Often these ideas are misconceptions and stereotypes which are generalised to apply to the greater population of older people. When individuals retire they are soon labelled with the notion that they are on the decline, vulnerable, and dependent on families and the State to take care of them (Phillipson and Smith 2005).

This notion of growing old under a negative cloud is slowly changing with regards how older people see themselves and how the rest of society views this group. Older people and society are beginning to challenge these preconceived ideas of ageing and there have been recent shifts in what it means "to grow old". An increase in the ageing population is not only localised to the UK, it is a growing concern globally and there is a growing momentum among older people as they begin to overturn the traditional stereotypes of ageing.

The Joseph Rowntree Foundation's recent research shows that many older people start to enjoy a more balanced lifestyle after retirement. Many people continue or start to enjoy healthy, active and meaningful lives as they grow older (Department of Health 2005). It is also recognised that if there are those

who have health and social care needs, the services which are available should be managed to promote and encourage quality of life, independence and individual choice. The report suggested that statutory and non-statutory organisations should be developing ways in which this approach can be upheld by listening to older people and their concerns about their health and wellbeing (Joseph Rowntree Foundation: 2004).

The idea of listening to older people has become a strong reality within communities all over the UK. There has been a growing interest in involving older people in strategies and policy making at local government levels. Older People's Forums have been established independent of local councils to raise the political profile of older people, to act as an advocate and to provide a voice for older people. Forum's such as these take on the challenge of important issues faced by older people and the general community to improve the social, health and wellbeing for older people, and to ensure that all have a right to quality of life. Forums have been established all around the UK with the specific purpose of creating an opportunity working in partnerships with both voluntary and statutory organisations to make improvements for older people within the community. Forums such as Hastings and St Leonards Seniors Forum, Wokingham Older People's Forum, Shropshire Older People's Forums have established special interest groups, which concentrate on issues such as crime and safety, transport, quality of life, pensions and finances, isolated older people, health and exercise (Hasting Borough Council: 2006; Wokingham District Council: 2006; Shropshire County Council: 2006).

The promotion of quality of life in older age is attracting increasing policy interest. While for some people old age will be a time of increasing dependency and loss of control, for many it will be a time in their life for personal fulfilment. Old age contains many opportunities for positive change and productive functioning (Joseph Rowntree Foundation: 1999, Bowling *et al*: 2003)

Facilities within the community which are commonly referred to as day clubs or day centres endeavour to provide facilities for those who wish to continue living in their own homes but may need support during the day time. They centre on improving and maintaining the quality of life, to promote independence, facilitate friendships, and provide social contact. Services such as these prove to provide a vital facility within the community by delivering a number of activities which are designed to keep older people active and socially included within their communities. They endeavour to provide a place to support and encourage social interaction. Facilities such as WRVS and Age Concern have a wide appeal as they provide safe and secure environments where older people can go to meet and socialise with friends and take part in activities such as line dancing, Tai Chi, yoga, card games, arts and craft activities, day trips and quizzes. Day facilities often provide facilities for older people aged over 65, but many older people come to use facilities provided by such places as Age Concern and WRVS on a referral basis, following assessment by a social worker.

The emphasis upon quality of life has led to a significant change in the way that older people are viewed within health and social care settings. In recent years there has been the development of the National Service Framework for Older People which sets out a guideline for improving the quality of health for older people in their later years (National Service Framework: 2001). The recent shift in the way older people's voices are being heard within the community, may suggest that as we are increasingly living in a society where we are living longer, expectations of older people are changing. The traditional stereotypes of older people are being challenged by older people themselves to present an age positive approach. The demand on our health and social care systems requires health professions and social care provision to adapt approaches and attitudes towards older people to include improving the way we live and to encourage and promote strategies so that older people can enjoy a longer sense of wellbeing (Department of Health: 2001).

Context of the study

The high proportion of older people settled within the local area of Eastbourne offers an ideal opportunity for University of Brighton staff, particularly those professions who are well represented in the university, for example, members of the Allied Health Professions, Sports Scientists, Pharmacists, Medical Practitioners, Social Workers and Nurses. All these professions deal with older people on a regular basis in clinical and rehabilitation environments, but all would like to embrace the opportunity to engage with older people from the local vicinity. Professionals such as these would welcome the opportunity to work together with older people in a proactive way to promote and improve wellbeing and good health among older people. The establishment of a wellbeing, health and occupation centre could possibly host opportunities for the university community to work with members of the older people's community to promote health issues which are of concern to older people generally. The establishment of such a centre might also provide an opportunity for older people who are not necessarily accessing health and social care services to access university staff experience and expertise. The student and staff community within the university could also benefit from the experience and expertise of the local older people population.

The University of Brighton and members of its academic community may be able to contribute substantially to the health and well-being of older people in the community, due to the range of professional expertise that is available.

Over the last two years a group of academics and researchers from across the university have come together in a research group termed WHOOP." A number of projects have emanated from these group discussions, but the group has identified a priority which is the possible development, as a pilot study, of a Well-being, Health & Occupation Centre for Older People. WHOOP includes representatives from local charitable trusts and the voluntary sector for example Age Concern, Help the Aged WRVS and CUPP who are also keen to see the development of the proposed centre.

Aims

The first aim of this study was to enable the WHOOP Research Group based in the Clinical Research Centre for Health Professions at the University of Brighton, to take the first steps to determine whether there is a perceived need for the establishment of a wellbeing, health & occupation centre. The study aimed to allow research staff from the WHOOP research group to engage with people from the Eastbourne and Hastings locality to determine how the university can best unite with older people's communities to add to their experiences in a positive way. The study aimed to identify what form the centre should take if there was such a perceived need, and the second aim was to identify what the centre might offer and what expertises and recourses from within and outside the university would be required to run the centre.

Objectives of the study were:

- To identify older people willing to contribute to the proposed study.
- To gather data regarding the perceived need/benefit for a WHOOP Centre using eight focus groups.
- To use the data generated to determine a) the nature of a WHOOP Centre, b) the type of activities the centre could offer, c) the expertise required to input into the centre, d) determine the best venue and location for a centre.
- To feedback to all participants and a wider older people's audience the outcomes of the feasibility study.
- To provide a basis for the development of further research questions and activities concerning older people.

Methodology

The methods employed in this project were based on generating qualitative data related to the notion of the development of a well-being, health and occupation centre for older people within the Eastbourne area. The most pragmatic and effective way of achieving the aims and objectives set out above was to utilise and facilitate a number of focus group interviews, which additionally employed the use of the theme board technique (Wilkinson, 2004; Bligh, 1992).

The theme board technique originated from within advertising, marketing and management was a method used to develop concepts and ideas for staff and clients. Subsequently the method has been used in postgraduate medical education in small group discussions and inter-professional learning as a means of exploring individual and shared perceptions, examining preconceptions and fostering new insights in relation to particular issues. This technique which mainly uses graphic images from a range of non-professional magazines can be carried out by individuals and within a group setting (Bligh, 1992, Parsell et al; 1998).

Focus group interviews were employed to enable researchers and participants to come together to discuss and explore participants' theme boards and their perspectives of the proposed centre. The use of focus group interviews is well established within social sciences. Originally the method was used as a market research tool. Focus groups have commonly been used since the 1980's within 'social action research', particularly within health related research (Wilkinson: 2004). Focus groups are largely based on a small group of individuals having an informal discussion in response to a series of questions. The researcher acts as the facilitator, posing questions to the group of participants.

The purpose of focus groups is to allow researchers the opportunity to draw upon a number of participants' responses, feelings and beliefs about a particular topic or issue, which is not necessary feasible in a one-to-one interview, observation or questionnaire survey. Focus group interviews elicit a multiplicity of diverse views and opinions at any given time. Therefore, this method allows researchers to obtain larger amounts of information in a shorter period of time (Wilkinson: 2004). Typically focus groups are tape recorded and the data transcribed then analysed using qualitative techniques. Recording focus groups allows researchers to ensure that they use participants' comments accurately (Polgar and Thomas: 1995)

Focus groups are an effective tool to use within research and in particular for this study, as they can be used at the preliminary or exploratory stages of a study. There are disadvantages to using focus groups, as the findings cannot be generalised to the whole population, mainly because of the small number of participants, and therefore findings can only be applied to those who participated (Kreuger: 1988)

These two qualitative methods allowed the researchers to draw upon a broad wealth of experiences, views, attitudes and opinions (Morgan and Kreuger, 1993). This has allowed the researchers to identify key issues towards the possible development of the need for a WHOOP Centre, and the ways in which the university could add to the positive experiences of older people within the community.

The use of theme board techniques and focus group interviews allowed participants the flexibility to express their opinions in a safe environment, as both tasks allow participants' responses to be facilitated and discussed between group members rather than just the researchers. This may enhance the quality of the data and allows for a more open exchange of ideas (Sim and Snell 1996).

Recruiting volunteers for the study

Participants were recruited through a number of avenues. Firstly, links with local voluntary organisations were explored. Organisations such as WRVS, Age Concern and the Hastings and St Leonards Senior Forum offered their support to recruit participants particularly from the 'hard to reach category'

within the Eastbourne and Hastings area. Posters advertising the WHOOP project were displayed and circulated among the organisations' members. Other methods of recruitment was also used such as, recruitment adverts which were placed in the local papers, and posters and leaflets were displayed throughout the local community (See Appendix One). Lastly, a number of older people who had previously participated in a university project expressed their willingness to be updated on new developments in older people's research at the university. Information about the project was circulated to these individuals via a routine newsletter, which in response attracted a number of participants.

Recruitment was mainly localised to Eastbourne and surrounding areas. The study included participants of 50 years of age and over. Due to the strong links with John Appleyard, Chair of the Hastings and St Leonards Seniors' Forum, one focus group interview took place in Hastings. It was felt that this locality might enable the researchers to access older people who fall into the "hard to reach" category. The study excluded older people currently receiving medical treatment in hospital or nursing home settings, and those with Dementia/Alzheimer's disease.

The methods chosen to recruit volunteers were aimed at attracting participants who were diverse in culture and backgrounds, and who had different interests, experiences, opinions, perspectives and ideas of ageing.

Ethical consideration

The research proposal for the study was submitted for ethical approval to the University of Brighton Ethics Committee; approval was granted in April 2005.

Confidentiality was observed throughout this study and every precaution was taken to ensure that the identities of participants were protected throughout the study. Participants' information was stored in a secure environment to which only the researchers involved in the study had access. Confidentiality within the focus groups were strictly observed, and transcripts and tapes was encoded to ensure anonymity.

How the study was conducted

Participants who were being recruited through voluntary organisations were encouraged to get in contact with the research officer to discuss the project and to raise any questions they might have. Participants were also given an information sheet which gave further information about the project. (See Appendix Two). If participants were still willing to pursue their interest in the project they were invited to attend a focus group session, which were held in a convenient locality within the community. There were five focus groups held over four different venues (See Appendix Three):

- Age Concern Eastbourne – 2 Focus Groups
- WRVS Eastbourne – 1 Focus Group
- Hastings Community Learning Centre – 1 Focus Group
- University of Brighton – 1 Focus Group

A total of twenty seven individuals participated in the study between June to October 2005.

Focus groups were always facilitated by two researchers. The professional backgrounds of the facilitators varied and as an outcome, each researcher brought a different perspective to the study. Researcher bias and subjectivity are commonly understood as inevitable and important by most qualitative researchers. Most qualitative researchers will consider personal and professional discovery essential to learning about qualitative research (Cochran-Smith & Lytle: 1999). It allows researchers to become increasingly aware of their biases, blind spots and cognitive limitations. The research team comprised of two researchers with a Physiotherapy background and a research officer with a social science background. It was important to recognise the integral role that the researchers play in the planning, designing and the data collection process and to identify researchers' values, biases and judgements. Identifying with these personal and professional qualities from an early stage allows researchers' to contribute to the robustness of the research. (Hammell and Carpenter: 2000). All focus groups were facilitated by two researchers.

In order to minimise researchers' influences over the questions asked and the participants, a steering group was established from the early stages to ensure that any research material produced was objective and enabled all older people to participate at a level which they were comfortable with. Additionally the methods used were discussed in the steering group meeting to ensure that the research tools used did not inhibit participants and minimised the researchers' influences. The theme board technique enabled participants the freedom to explore their ideas free from researcher input. The focus groups were an opportunity for the group to come together with the researchers to discuss these ideas. The theme boards were used as a tool to guide researchers through the participants' thoughts surrounding the proposed centre. It effectively allowed participants to interact with each other to explore their interpretation of a wellbeing, health and occupation centre for older people (Bligh: 1992).

At the beginning of every focus group participants had the opportunity to informally socialise with other participants and staff over refreshments before each session started. This provided an opportunity for participants and staff to acquaint themselves with each other. Time was allowed for introductions. A short presentation was then given to participants, telling them a little about the university, the WHOOP research group and the research project (See Appendix Four). A copy of the presentation was given to all participants along with a programme laying out the focus group sessions (See Appendix Five). After the presentation was completed participants were given the opportunity

to ask the facilitators questions. Before the theme board task was carried out, all participants were asked to read and fill out a consent form if they still wanted to participate in the study (See Appendix Six).

Once formalities of obtaining consent and allowing opportunities for questions was completed, the research officer proceeded to give the participants questions to consider when constructing their theme boards.

1. What do you think older people would gain from involvement with the University of Brighton?
2. What could the University and its staff gain from the involvement of older people in this study?
3. What do you think the university could offer the local older people's community?
4. What images come to mind when you think about an older people's Well-being Health and Occupation for Older People's centre?

The research officer explained the origins of the research method, what the purpose was in using the tool, and what participants would have to do to construct a theme board. Once the activity had been explained, participants were given 25 minutes to construct and complete their theme board.

The materials available to help in the theme board construction were:

- 8 x A1 sheets of plain card/paper
- Magazines (of a non professional nature)
- Glue
- Scissors
- Blue Tac
- Marker Pens

Participants were asked to use the images from the magazines which portrayed their ideas. On completion of the short task facilitators took the theme boards and displayed them so that all participants could see the images. Examples of participant's theme boards are displayed below.

Theme Board Three



Theme Board Four



Theme Board Five



Once the theme board construction was complete and displayed participants were asked to sit with the facilitators of the focus group to discuss some of the images that they had displayed on their theme boards. Participants were encouraged to use these images to open up discussion about the proposed centre. When the theme boards had been fully constructed, a focus group interview then took place.

The focus group interview lasted up to one hour. In order to ensure accuracy each focus group was recorded to document participants' responses. Facilitators used the following questions as a guide to further explore participants' opinions and perceptions regarding the university's interface with older people.

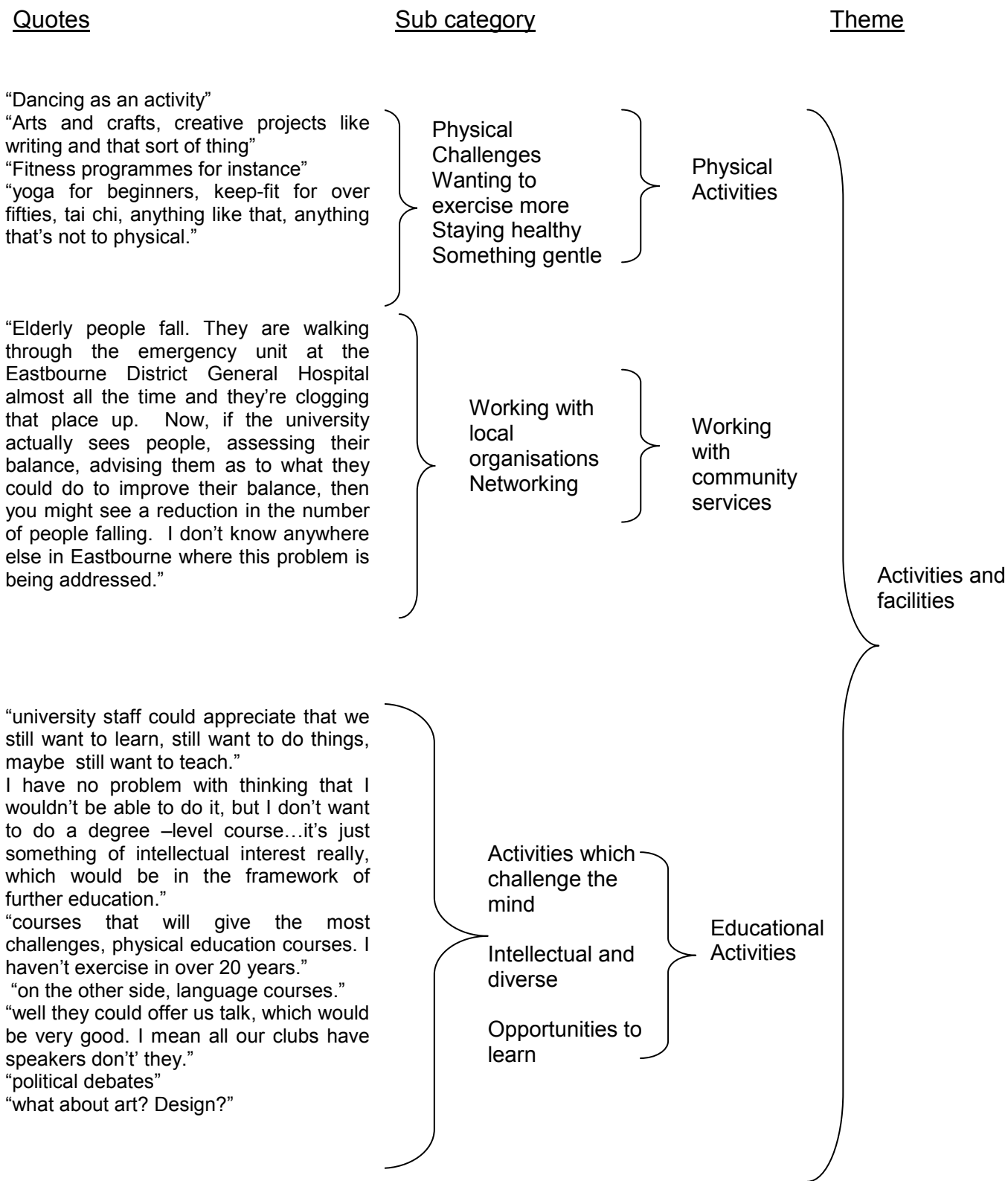
1. What might attract you to become involved in the Well-being Health and Occupation for Older People's centre?
2. What do you think an older people's Well-being Health and Occupation for Older People's centre can offer to make it appeal to a greater age range (50 years and over)?
3. What facilities do you feel a centre should offer older people?
4. What might you think the university could do to improve the quality of your life?

Before the close of the focus group interview participants were given the opportunity to comment further on any issues that were raised during the focus groups interviews.

Development of categories and themes

Once each focus group interview had been completed, the digital recording of the interviews was transcribed by a member of staff who was independent of the study. Once all interview recordings had been transcribed, transcripts were reviewed by members of the research team. Transcripts were examined line by line for reoccurring themes. The data is analysed by employing a constant analysis method, which gives way to allow the researchers to constantly compare each piece of data with data collected earlier in the research study (Glaser and Strauss, 1967). This method of data analysis has originated through a grounded theory approach, which allows researchers to ensure reliability of the data collected (Burnard: 1991). Researchers were able to individually develop themes and categories from the transcripts (Please see diagram 1 on page 17). Once this had been completed a meeting was held to discuss and to finalise these themes.

Example of developing categories
Activities and Facilities



Feedback conference

A feedback conference was held after the analysis of all data was completed. On 9th February 2006 the Clinical Research Centre for Health Professions WHOOP research group invited participants from the study, key representatives from the local community, research and academic staff from the University of Brighton (See Appendix Seven) to attend the WHOOP feedback conference held at the University's Eastbourne campus. The purpose of the conference was to allow participants, researchers and local representatives an opportunity to come together to hear the feedback from the research that was conducted. The conference was also an opportunity for participants to continue their input into the project and discuss key areas for development, which affect older people daily and funding opportunities (See Appendix Eight).

Findings

The results presented below are the outcomes of participants' theme boards and focus group discussions. The two methods employed in this study have assisted in developing participants' views and to identify key issues that have stemmed through discussion of the proposed development of a wellbeing, health and occupation centre for older people. Participants' responses have been arranged into seven different themes.

1. The perceived image of the wellbeing centre
2. Transport and access
3. Activities and facilities
4. Advice and information facilities
5. Intergenerational activities
6. Safety within the community
7. Research activity

1. Perceived image of a wellbeing centre

The perceived image of most participants was that the centre should be located in a physical location, a building. Many participants' responses identified with the idea that the centre should be in a place that people could go and visit and interact with other people.

Many believed if the centre were to offer a virtual provision that many older people would not benefit from the provision the university could offer. Some participants suggested that offering a virtual centre would mean many older people would continue to feel isolated and not be able to access it. Offering only this type of provision could potentially fail to meet the needs of those who may be finding it difficult to access services.

FG 1 *“actual physical thing rather than the virtual thing. So that people can meet, rather than a virtual centre.”*

1.1 Appearance of a centre

When participants were asked what the centre should look like, many responded that the centre should offer space that is versatile. Somewhere which would allow people to meet, but would benefit from engagement with other users and staff. Many felt that the centre needed to be bright, friendly and fun in order to encourage a welcoming atmosphere.

FG 1 *“I think maybe a social room with sort of chairs and tables.”*

FG 1 *“It’s got to be large, yes it’s got to be large and sunny.”*

FG 2 *“Yes it’s got to be cheerful you know, not like some old people’s places, it’s got to be young, young not old.”*

FG 3 *“You’d have a big room where you did the dancing and the exercises and the rest of it wouldn’t you?”*

1.2 Perception of the term ‘wellbeing’

All focus groups recognised the term wellbeing would have to meet a multitude of diversities and interests. Participants stated due to the diversity of older people the centre would need to find a balance to meet different people’s interpretations of what is meant by ‘wellbeing’

FG 2 *“Everybody has a different level of wellbeing.”*

FG 2 *“We’re all different ages as well”*

The centre would need to create a balance between those people that would be using it and the facilities that it would provide in order to try and cater for people’s different perceptions of wellbeing.

2. Location and access to proposed centre

2.1 Public transport

Transport issues were often a problem experienced by many older people in the local vicinity, and with a large proportion of elderly people living without access to a vehicle there is a heavy reliance upon local transport links to the town centre. These links are the only form of transport for many people, which provide vital access to local facilities and amenities such as day centre services run by Age Concern and WRVS, or to shops and health and social care services.

Participants were asked what might attract them to a wellbeing centre. Many reported some fundamental issues regarding the location of the centre. On many occasions participants vocalised their concerns regarding access to the centre if it were located in the Meads. Stating one of the major concerns for older people was the lack of transport this argument was also supported by many participants who agreed that it would be difficult to use the provision, many older people not having access to their own vehicle.

FG2 *“There’s a lot of people that haven’t got transport. They can’t drive. They’re unable to drive, maybe they’re epileptic or something and they just cannot drive. How do they get there?”*

2.2 Location of a centre

It was clear from participants’ responses that it would be important to consider the location carefully, and it was imperative to take the opportunities available to ensure that there were sufficient transport links to the centre. This was echoed throughout all of the focus groups.

FG1 *“Well I think most important in there is transport. We must have means of transport to get to the centre, wherever it would be.”*

It was suggested that the lack of transport to the centre could possibly result in many people choosing not use the provision that the proposed centre could offer older people. Therefore, it was argued by many participants that the location of the centre needed to be in a central location and near adequate transport services in order to maximise and encourage participation. Some participants stated their concern with the cost of transport. Some reported that if transport was cheaper they might use facilities more often, but because they find transport service expensive at the moment they are unable to attend day facilities, such as those already provided by WRVS and Age Concern, once or twice a week. In many situations they would like to use these facilities more often than they do now.

FG 4 *“I mean I know there’s people...I’ve heard them talking downstairs [in the WRVS centre]. They’ve said they’d come for four days a week if they could afford the transport. I’ve heard them say that.”*

However, some participants felt that those people who fell into the ‘hard to reach category’, i.e those who are living in isolated rural areas, or who are not as financially well off, would still experience difficulties accessing the resources the centre would offer.

FG2 *“if you’re going to set up something like this, it’s probably going to have a base, maybe at the university and that you would do a visiting service because if you don’t do that you will not get to the people that may be in real need.”*

Some participants reported the best way to engage with the hard to reach group would be to provide an alternative facility. This would take the benefits of a physical centre out into the community to older people who might normally find it difficult to access services on their own. Participants’ commented that it would be beneficial to develop a mobile service.

FG 4 *“I don’t think it has to be in a building, no, not necessarily because I think it could go out to the public...more of a mobile.”*

FG 3 *“...I personally feel that a wellbeing mobile, sort of clinic, would be absolutely superb, especially for place like Eastbourne, Bexhill...because most of the big cities, they’ve got those things in the big cities, but the towns, they lack those sort of facilities.”*

FG 2 *“Could it be both? Could there be one where people could come to you, and somewhere like this [Age Concern] where the pensioners come twice a week where you could perhaps come twice a week and hold a clinic you know for people to come to?”*

Participants also discussed that there would be benefits to having the centre located at the University of Brighton’s Eastbourne Campus, as although the campus is not located within the centre of town, had to offer. It would be beneficial if the location of the centre was to remain within the grounds of the university, so that facilities could be accessed fairly easily.

FG 3 *“You have tremendous facilities now with your swimming pool and the sports hall and the gym and you already have a running activity or a club as does the Sovereign Hall, so that is a base for some activities.”*

FG 4 *“You have facilities there that you could offer older people, various interests and so on.”*

Although many reported that the area would prove difficult to get to because it was not in the centre of town, they could see that having the centre located in the university grounds would open up a lot more facilities to older people.

FG 4 *“Going back to your place at the Meads, it’s not very accessible by public transport.”*

Participants stated that locating the centre within the grounds of the university would give older people the opportunity to access facilities such as the universities sports centre. It would also enable elderly people to access the wealth of knowledge and expertise that university staff could provide as well as engaging with some of the university’s learning opportunities. Participants also noted that locating the centre within the grounds of the university would also provide a way to meet new people.

FG 3 *“...also if you went there you’d meet a bigger selection of people I think, rather than the same old people.”*

Although there was a consensus that the centre be located within the university grounds, not all felt that this would be an appropriate location for the centre. One male commented on the location of the centre being in the Meads stating:

FG 2 *“It’s not going to be our centre. It’s being put in a place by the university.”*

It was believed by some participants that the location of the centre could potentially limit the learning experiences of students. It would limit their interaction and what students could learn by interacting with older people out in the community.

FG 2 *“I’m very cynical about it, for its own purposes. It wants somewhere where its students can gain more experience and knowledge of the community and therefore that is what it will get.”*

2.3 Access to facilities and activities

Many participants noted the loneliness and isolation of older people within the community. Participants believed that the centre could ease the isolation and loneliness of older people by making the centre more accessible.

FG 3 *“I think the biggest thing with older people is the loneliness.”*

It was viewed that the best way to do this was to ensure that the centre was flexible in the days and times that it would be open.

FG 3 *“It should be open 365 days a year. More so on high days and holidays because that is the loneliest time for an awful lot of people.”*

FG 2 *“Saturdays and Sundays I’ve always thought it was sad because most people can find something to occupy them Monday to Friday, but Saturday and Sunday.”*

3. Activities and facilities

Participants recognised that for a wellbeing, health and occupation centre to be successful, it would have to offer a multiplicity of activities and facilities to meet the needs of a diverse group of people with a range of interests and abilities.

It was felt by all participants that the provisions and the presentation of the centre would have to be different to local facilities already offered to older people. Many reported and confirmed that it would be of little benefit for the university to replicate services that are already provided within the community.

FG 2 *“...no point to create another centre which offers the same things. It has to be something different and in the context of obviously the university and what is happening in the university.”*

Participants stressed the importance of ensuring that the university was able to provide facilities that would engage with local people to stimulate intellectual and creative minds. It was viewed that the best way to achieve this was to open up facilities for older people to use. Making the university more accessible to an older generation, which would create opportunities for older people to participate and integrate themselves into a different environment, could provide an intellectual and social challenge. Many agreed there should be more opportunities for older people to engage in an environment which would give them access to interesting and stimulating activities.

FG 3 *“...to learn would keep their brain active, Something like that would keep them stimulated, keep the brain stimulated to learn things.”*

3.1 Educational facilities

All focus groups highlighted the potential for older people to access the vast educational facilities on offer at the university. When participants were asked what they felt they would gain from involvement with the University of Brighton, many saw the centre being able to offer studying and training opportunities. The consensus of the focus groups stated that the opportunity to be a part of a learning environment would appeal to many of the older people within the community.

Participants discussed further that they would benefit from participating in educational courses. Participants expressed that older people are a diverse group with wide ranging interests and abilities. Therefore they would like any proposed development to offer all the same opportunities, to access the variety of different courses in the university that students have. Although many thought it would be of benefit for a centre to offer this opportunity, it would also be valuable to offer other types of learning opportunities for those who may not be interested in studying at degree level. To engage with a variety of interests the centre could offer short courses, workshops, seminars and lectures on a variety of subjects and interests.

FG 1 *“I did an Open University degree quite late in life and a teaching qualification, but it’s just something of intellectual interest really, which would be, which to me would be in the framework of further education or university teaching, but not necessarily at a high, like a degree level.”*

FG 1 *“Yes, a shorter course really.”*

3.2 Student experiences

Participants highlighted that the university’s most valuable strength was its educational facilities and that the centre should concentrate on working to these strengths and bringing them into the community.

FG 3 *“...they are students, they are learning, they are doing practical’s, they are supervised. That is the way the university runs.”*

Participants from all the focus groups believed all older people could benefit from a more active lifestyle and appreciating the importance of remaining healthy in later life. The focus group interviews established that if older people engaged with the facilities offered by the university, this could potentially contribute to older people maintaining an independent lifestyle well into later years. This could be supported and upheld if the centre offered a series of lifestyle programmes, activities, lectures and consultations that would encourage and keep people mobile and physically and mentally healthy for longer.

FG 3 *“I am sure that would solve the problem for the university if they had an in house practical activity going on, actually benefiting the community.”*

3.3 Working within the community

Participants noted the importance of the educational facilities, and it was reported that there could be benefits in engaging with university staff and students to actively seek out advice on keeping fit and healthy. Participants’

commented on the university providing a fitness programme, which would help with the prevention of falls, a cause of fatality among older people.

FG 2 *“Elderly people fall. They are walking through the emergency unit at the Eastbourne District General Hospital almost all the time and they’re clogging that place up. Now, if the university actually sees people, assessing their balance, advising them as to what they could do to improve their balance, then you might see a reduction in the number of people falling. I don’t know anywhere else in Eastbourne where this problem is being addressed.”*

Most participants agreed with this initiative, stating that the university’s expertise in physiotherapy and occupational health could contribute towards maintaining better levels of fitness among older people. Further discussion on this subject brought up participants’ issues regarding who should be providing service. Many believed that information and advice should be provided by the appropriate health authorities.

FG 2 *“the development of these sorts of facilities and so on should be, apart from education, should be coming from other sources, other agencies.”*

However, after initial concerns participants could see the centre being an extension to existing services. Many believed that if the university has the expertise and experience to improve quality of life it should use all its facilities, knowledge and skills to contribute to promoting preventative methods to avoid accidents and falls among the elderly.

FG 3 *“...if they just prevent accidents, people falling, that would be a tremendous plus for Eastbourne A&E.”*

4. Advice and information facilities

Focus groups noted a trend in the kind of lifestyle advice older people would welcome. There was a consensus that many would want to receive advice on ways to sustain a nutritious and healthy diet. Participants highlighted the problems of getting older, especially when living alone in that their diet can suffer. Some can lose interest in cooking for themselves, and having advice or classes on cooking for one could possibly renew interest in maintaining a healthier diet.

FG 1 *“so there could actually be some cooking sessions for people”*

Participants reported a range of activities that they would like to see which would interest a diverse group.

FG 3 *“Dancing as an activity, arts and crafts, creative projects like writing and that sort of thing, dietary advice and support groups for pain.”*

FG4 *“Water aerobics and all sorts of things...walking machines to get their blood pressure down and that sort of things.”*

Many reported that the centre should also be a place to go to and seek out advice, not only on physical and mental wellness, but to offer opportunities to gain advice on other issues and subjects. Some noted that there needed to be a place where people could go to find out about other services within the local area, to ask for advice about accessing services.

FG 4 *“I think people need to know about them. I don't think too much of it is widely publicised.”*

Some focus groups picked up on some different themes, reporting that they would like to see advice on issues surrounding moving home and on legal matters.

FG 4 *“...a lot of elderly people don't like the idea of moving and it must be very difficult for them to part with some of their things and if they're on their own, it would be nice for someone to help them. You know or be with them to talk about it or to go through things with them.”*

Participants saw the centre as a way of disseminating advice and information to the wider community.

FG 4 *“The group could distribute information.”*

Although the consensus of the focus groups was to support activities which could maintain wellbeing there were concerns about the cost of this. All focus group participants highlighted the issue of pensions, and how they have a bearing on the way they live. Some participants stated that some or most leisure and sporting facilities provided by councils or privately run leisure centres were often unaffordable; therefore many older people could not afford the expense of joining in with exercise programmes.

FG 4 *“I must admit, a pension isn't an awful lot and if you haven't got anything behind you it's very difficult. It is hard going, and that affects their quality of life.”*

FG 4 *“Of course it does, the heating, they wouldn’t turn their heating on and their food, they’d cut down on it, cut down on everything, lighting, clothing, all of it really. Unfortunately there are still quite a lot of people about like that.”*

Older people would welcome the opportunity to attend a variety of facilities and classes, such as yoga, exercise and dance classes, or educational courses. It would be the cost of these activities which would discourage them from taking part, because they could not all afford the luxury of attending.

FG 1 *“...I haven’t exercised for over twenty years and I can’t afford to join one of the health centres...”*

Many of the older people who took part in the study believed that any activities provided by the university would have to be costed appropriately for older people in order to maximise and encourage participation. Some reported activities would have to be either free or cost no more than two or three pounds to attend.

5. Intergenerational activities

5.1 Image of ageing

The focus groups raised a number of issues relating to the term ‘older people’. Many participants felt that older people were often stereotyped by people of a younger age. Participants’ theme boards depicted many images which expressed their views on their perception of the image of ageing.

FG 1 *“My scribbled beetle is getting rid of the image of older people. I’ve got a picture of a rather nasty looking beetle and my ghost party too, and if the university staff could appreciate that we still want to learn, still want to do things, maybe still want to teach, and there are a lot elements that maybe altering your image of us.”*

FG 1 *“I always get helped off the buses and things because I have grey hair...”*

5.2 Older people’s contributions and participation in activities

When participants started to explore the scope of the learning facilities that the university could offer them, participants started to see the benefits of their involvement in the centre on a different level. Each focus group expressed and commented on the situation that when older people within society reach

retirement age their contribution within society 'ceased to exist' or "matter". All participants felt that as older members of society their contribution and capabilities should not end when they retire. Many agreed that they are still valued members of the community, could still make a difference and could contribute to the community in a different way than they would have done before their retirement.

FG 4 *"we're all able and thinking aren't we."*

FG3 *"Older people feel that they are being neglected. They're not being listened to, they can't get things done."*

Many participants would welcome the opportunity to take up a role as a mentor to younger people. All said that older people have something to offer younger people, and they could use the skills and knowledge that they have learnt through their careers and through their personal interest to educate younger people. It would be a good opportunity to engage with younger people e.g. students to add to their learning experiences.

FG 1 *"I think you'd get a different vision of older people. Some of you may have stereotypes that are inappropriate and by meeting older people on an education level you would realise that most stereotypes are not as you expect."*

5.3 Stereotypes

The topic of younger people and the stereotypes was often discussed in the focus groups. Participants from four of the focus groups believed that younger people had an influence on how vulnerable older people felt when they were outside of their own homes. Some participants commented on how they sometimes feared younger people.

FG 1 *"...hoodies going about, people getting mugged, all youngsters doing this, no discipline."*

The university would be able to provide an ideal environment for a 'knowledge exchange' between those at either ends of the age spectrum. All participants recognised that there was a potential for both age groups to learn from each other. It would allow younger people to learn about past generational experiences first hand outside of their own experiences. Many participants wanted the chance to keep up to date, and interacting with students would mean that they would learn about current and up to date issues. All participants believed that being able to create an environment where a knowledge exchange could take place would be an opportunity to work on secondary issues, such as beginning to break down the stereotypes or often 'fears' that older people have about teenagers and young adults.

FG 2 *“...there is this enormous gulf between the psyche if you like, putting it that way, of the young and the old, an enormous gulf and you know if there is any possibility of education on both sides so that attitudes can change, because I think that attitudes between the two are very very bad and so there’s something which might come within your remit and I think that’s a very very worthwhile project.”*

This was a general concern for many participants. Yet there were contrasting views and experiences reported by some participants. In the fifth focus group, all participants remarked on how their experiences with teenagers had been positive.

FG 5 *“...a young man at the bus stop, he asked me the time and then a bus came and I had a £20 note and just my bus fare and I misplaced where I put it and I said oh I can’t get on I don’t know what I’ve done with my bus fare. He said it’s alright, come on, I’ve paid for you and I thought that was marvellous.”*

This group went on to discuss further the behaviour of older people towards younger people. One female participant stated that it was often found in her experience that older people acted negatively towards someone who was younger.

FG 5 *“I’ve seen some of our age group being rude to the youngsters and that’s offensive and that attitude has got to stop. But I’ve not had it reverse-way”*

6. Safety within the community

It was reported by participants that safety could be a big issue when attending activities at the proposed centre. Some participants from the focus group held in Hastings commented on the importance of ensuring that any activities or courses were run during the day time.

FG1 *“...to me the main thing would be daytime courses. I don’t go out once it’s dark.”*

FG 1 *“Daytime, everything’s got to happen in the daytime.”*

However, there were some participants stating that if activities were only restricted to the day time, it could possibly inhibit older people from mixing with students and younger people from the community. Many agreed that it would be important to ensure the centre offered a variety of activities throughout the day and evening time. Participants reported that if services were structured this way it would enable older people to take the opportunity of working more closely with younger people and build a knowledge exchange with a different age group. Creating this opportunity would enable people to tackle issues and concerns which are faced by both older and younger groups.

FG 1 *“...rather stops our communication with the younger people because they’ll be studying or they’ll be working or something.”*

Many participants generally believed it would be unsafe for older people to be out at night. There was a consensus among the groups that the university should ensure, when developing a centre, that it remained flexible in its timing of activities.

Participants noted other safety issues which can be a concern for older people. Many participants reported that they had a fear of getting hurt or experience some form of crime against themselves or their property.

FG1 *“She will not answer the door to anybody. She’s had people banging on her door, rattling the windows.”*

Some participants stated that the centre might be a place for them to go and discuss issues such as these which can be a negative experience for older people.

FG 1 *“...perhaps that also might be something that could be alleviated with you getting together and trying to solve some of these problems.”*

Focus groups reported that the centre could also provide opportunities for older people to meet with key authorities to discuss issues of crime and safety in the local area. Some noted that presentations or seminars on keeping safe would also be a way for older people to maintain a quality of life, which is not inhibited by fear or vulnerability.

7. Research activity

Participants reported that the wellbeing centre could be used as an avenue to work with university staff to develop research projects which could look into issues that concern older people and the local community.

FG 2 *“We can use your expertise in research and development and all that sort of thing which we certainly haven’t got at the moment.”*

Many believed that the expertise of research staff could be made available through the centre so that up to date information on recent research could be made available.

FG 2 *“...research projects running from the university you’d have up-to-date information.”*

The focus groups picked up on some issues which were of importance to the participants. Some commented on using the centre to carry out research into the services that the local area has to offer.

FG 3 *“Perhaps they would be able to pick up for research projects, the deficiencies of other agencies within Eastbourne.”*

It was also viewed that it would be an opportunity to look into issues which prevent older people from getting out of their homes.

FG 3 *“to look into these sort of things that are stopping older people from actually coming out, from coming here joining things, you know and in fact improving their lifestyle.”*

It was also recognised that this could be an opportunity for students to gain research experience, and to gain a better understanding of some of the issues that surround older people.

FG 2 *“the students could gain of course would be probably a willing involvement in more research projects.”*

Discussion

The study has given the WHOOP research group the opportunity to explore what the term wellbeing, health and occupation centre means to older people within the community. The project has provided a way for academics, researchers and voluntary organisations to listen and take note of what older people’s perceptions are of a wellbeing centre as well as hearing older people’s concerns about issues which can affect their everyday life.

Focus group discussions reiterated the enjoyment older people experience when remaining active, challenged and independent. There were many references regarding the positive experiences that they had when attending existing centres, designed to cater for the needs of older people. The WHOOP project aim was to avoid replicating existing services provided by

such organisations as Age Concern, WRVS and Help the Aged. The project was designed to listen to older people to find out ways in which the university could work with them and voluntary organisations to add to their experiences in a positive way.

This fundamental concern was echoed throughout the research undertaken during June – October 2005. Participants vocalised on many occasions that the University of Brighton could be in a unique position to add to provision within the community. It was viewed that replicating services which were already established within the community would not necessarily prove to make the wellbeing centre successful. The unique nature of the university establishment lent itself to creating a different vision of an older people's wellbeing centre.

The research indicated a strong consensus among many of the focus groups, which recognised the potential for older people to access the vast educational facilities on offer within the university. In particular participants recognised the proposed development as an opportunity for older people to further their own education and to develop new skills. It was reported that older people would welcome the opportunity to do degree courses, but also would like the opportunity to study at a different level. Offering older people opportunities to study at different levels and engage with varied topics was seen to be an important aspect. The activities at the centre would need to remain flexible in order to cater for a diverse group of people with wide ranging interests, experiences and skills. Participants reported that by offering a range of seminars, lectures, workshops, short courses and degrees the university would effectively meet the needs of a diverse group. It would also enable older people to effectively interact with the university's educational facilities on different levels, which would create flexible opportunities for older people, to further their personal interests and knowledge or provide the opportunity to retrain at a later stage in their lives.

The need for further learning opportunities were echoed throughout the study, with many participants highlighting the importance for older people to have the opportunity to continue education. However, there were many participants who vocalised the importance of older people being able to take part in this learning environment by interacting with staff and students on a different level. The majority of participants expressed some strong and valid issues regarding their participation in the centre. It was considered that older people's roles within society changes when they retire. Many stressed that when a person leaves paid employment there is little opportunity for retired people to contribute in the same way that they did before retirement. There was a consensus across the groups that participation should not end with working life. The retired and the very elderly have a wealth of experience, knowledge and skills which they have built up through their personal interests and career experiences. Opportunities to share these experiences with their own peers and younger people would allow them to contribute and to add to other people's experiences in a positive proactive way, as they could perhaps make a difference or further knowledge for other age groups.

It was considered to be an important aspect to any future development of the project that older people should have every opportunity to interact and engage with young children, teenagers and students. Participants recognised that there were potential opportunities for younger age groups and the older people to learn from each other. Many commented that there should be opportunities for older people to share their relevant knowledge, skills and experiences with students. There are examples in the UK where universities and communities are working to promote intergenerational activities as an effective tool in promoting sustainable community development and in reducing social exclusion. The key purpose behind intergenerational work is that it aims to bring generations together in purposeful, mutually beneficial activities which promote greater understanding and respect and help to build more cohesive communities (CCIP: 2006, Howse: 2003). However, this knowledge exchange was recognised to apply to age groups at either ends of the age spectrum. There were aspirations that there should be many intergenerational projects set up using the educational facilities as an opportunity for different age groups to learn from each other. Older people wanted to learn about what is important to younger people, what their concerns and issues are, and it would be an opportunity for older people to share what issues were important to them. It was believed that creating opportunities such as these within the centre would enable different age groups to interact with each other in a neutral environment. This was viewed as a potential opportunity to tackle the stereotypes each age group have of each other. It would be an opportunity to change people's perceptions and the stigma that both age groups face on a daily basis. The creation of such a programme for older and younger people to learn from each other could be an opportunity to tackle the images of ageing. It could allow older people to promote ageing in a positive and informative way by concentrating on the ability and skills of an individual and not the age of a person. (National Service Framework: 2005, Department of Work and Pensions: 2003).

Older people have typically been viewed as frail and vulnerable (Joseph Rowntree Foundation: 2004). Participants wanted to see a change in this view with opportunities such as being able to talk about and promote ageing in a positive way. This should also be reflected in the proposed centre's image. It was commonly portrayed throughout the study that the image of day centres for older people was typically 'inactive, dull and 'boring', which often did not reflect the true nature of the day centre facilities. Participants wanted the wellbeing centre's image to move away from this typical stereotype. It was reported that if a centre were to be developed it would have to promote a friendly, sunny and welcoming atmosphere, which made a conscious move away from the image of 'high back chairs' on the 'outskirts of the room'. A fresher, comfortable and active image was preferred over the traditional look for a day centre. This type of image might appeal to a much wider cross section of older people from the community.

The centre's image was highlighted as only offering one way of appealing to a diverse group. Many reported that in addition to running educational facilities, there could be the potential for staff and students to offer advice and information on a number of issues that relate to the older population. It was

reported that many would like the opportunity to seek advice regarding ways to maintain a healthy lifestyle. Loss of independence in later life has been a consequence for many older people largely due to a decline in health and mobility. The wellbeing centre was seen by many participants to be a way to advise and inform older people on ways to improve and prolong independence and promote active and healthy lifestyles. There is a vast knowledge base within the university which could be developed to achieve goals such as above. Participants saw the potential in staff using their experiences and expertise to improve some of the issues which older people face in later years.

- Developing health advice programmes on maintaining a balanced lifestyle,
- Information on exercise and fitness to suit all abilities, and instruction on improving balance and mobility in order to avoid falls within the home.
- Information on where to find aid equipment and advice on what they do, to enable older people to make informed decisions about what is best for them.
- To receive information and advice about financial matters or in understanding legal documentation.

Participants did not want only to receive specific advice about ways of preventing poor health and wellbeing. It was strongly felt there should be an opportunity to attend seminars, workshops and lectures where people could go and listen and talk to staff members about health related issues. Providing opportunities for people to ask questions promotes the independence and choice that many policy researchers promote (Joseph Rowntree Foundation: 2004 and 1999, Bowling 2003).

This group is more likely to be on a low income and less likely to have access to a private car than other sections of the population. The group are also more likely to suffer from one or more disabilities and hence have some form of restricted mobility, while still wishing to maintain a good quality of life. Older women in particular are likely to be dependent on public transport for their travel needs. For those with some form of restricted mobility, mainstream public transport can be difficult to use (Department of the Environment, Transport and the Regions (1998). This notion is reflected in many of the participant's statements about the transport services they use within the local area. Many find it difficult to reach local amenities and health and social care services as a result of poor services. Many noted that to operate a wellbeing centre would involve ensuring that people who used it would have satisfactory access to the centre through transport. Location proved to be an important aspect to developing a centre and it was argued that the centre to be located within the parameters of the town centre. However, many reported that this would remove the centre from the educational environment facilities, staff and students of the university. Removing it from this environment would be detracting from the uniqueness and appeal of the centre.

Although it was felt important to ensure that the university offered an accessible facility, discussions did highlight the potential of using other venues. Many saw advantages in developing facilities which could be integrated into existing services. Running advice information clinics and exercise and fitness programmes at existing day club facilities would enable the wellbeing centre to reach a larger group of people which may require the expertise and experience of staff members.

It was identified that older people's participation within the centre could also be as valuable as staff offering their experiences. It was recognised that older people could challenge stereotypes and promote a positive approach to ageing by working with students and younger people. However, participants highlighted that their interests reached further than this. Older people could contribute to local and national research agendas by informing staff and students of issues that are of concern to older people and the community. They could also influence and inform academic research more. Many would like further opportunities to take part in research, not only as participants but as researchers. Taking part in planning and formulating ideas and carrying out research would allow older people to input their own ideas into research activities, which might influence a change in current practice or strategies. It was felt important to ensure that if a centre was to be developed, the development should be shared to include older people running aspects of the facilities, to ensure that they can continually inform good practice. This would also be an opportunity to allow older people to feed their own ideas into the running of the centre.

Summary

The key points to have emanated from the research have provided an insight into older people's perceptions of how the University of Brighton community of academic staff and the local older people's community can work together to share expertise, and contribute to the overall health and wellbeing of older people.

Firstly it was noted that a physical centre should be in a central location, which was easily accessible by public transport. Providing a friendly, welcoming and versatile environment would enable many older people to come and benefit from many of the facilities that the university could offer.

It was reported that the term 'wellbeing' had different interpretations. The centre should aspire to create an environment which promotes ageing in a positive way, to challenge preconceived negative attitudes that exist in society. Allowing the older people's community to interface more with the university would provide a possible avenue to explore and to address these negative attitudes. Working with students and staff would be an opportunity for older people to contribute to their learning experiences in a positive way. It would be an opportunity to provide a knowledge exchange between older people and younger people, which would encourage both groups to learn from one another. Using facilities would enable for such interactions to occur.

Developing health programmes using university staff expertise would be a way of advising older people in ways of maintaining health, mental development, physical fitness, and prevention of mobility and balance problems. Exploring opportunities with older people, local community agencies and the university to develop and deliver advisory programmes would be an effective way to reduce admissions of older people into hospitals and help to prevent a decline in health problems in later life.

Lastly, participants felt that university and older people collaboration on such projects as this was one way to influence the proposed developments in a way that would reflect their needs and interests. Building relationships with the university was seen as a positive step to reinforcing positive ageing attitude among older people. The project was viewed as a way to enable older people to continue their personal development through interaction with their own peers, students and staff. The proposed partnership with the university would be a way to empower older people to make decisions about their own wellbeing and to enjoy greater life satisfaction in their later years.

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University of Brighton

We are looking for people aged 50 years and over to take part in a research project

If you enjoy sharing your views and listening to other peoples opinions within a small group setting, and if you would like the opportunity to discuss day centre facilities available within the community to older people.

The Wellbeing, Health & Occupation in Older People research project may interest you.



For further details please contact
Lisa Hodgson on 01273 643457 or alternatively email
l.hodgson@brighton.ac.uk



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If you enjoy sharing your views and listening to other peoples opinions within a small group setting, and if you would like the opportunity to discuss day centre facilities available within the community to older people.

The Wellbeing, Health & Occupation in Older People research project may interest you.

**For further details about our next discussion group
please contact:
Lisa Hodgson on 01273 643457**



Information Sheet for Participants

To Determine Whether there is a need for the Development of a Well-being, Health & Occupation Centre for Older People

Purpose of the study

The purpose of this study is to enable the Well-being, Health & Occupation for Older People Research Group (WHOOP) based at the University of Brighton to take the first steps necessary in determining whether there is a perceived need for the establishment of a well-being, health & occupation centre. If there is such a perceived need the second purpose of the study is to identify what form the centre should take, what the centre might offer and what expertise from within and outside the university would be required to run the centre.

Taking part in the study will give you as a participant the opportunity to discuss with other participants and University of Brighton staff what benefits can arise from the development of such a centre and whether there is a need for such a centre. Participation in the focus group discussion will enable you to influence how the centre might take shape. Expressing your views is your opportunity to voice the views of people in the local community and saying what you want and what you would like to see developed for older people has the potential to contribute the needs of the older people's community in your locality.

The project will include a variety of participants of 50 years of age and above from a range of backgrounds, cultures, interests and abilities. You will not be able to participate if you are currently undergoing intensive nursing care in a residential home or in an inpatient NHS setting.

Requirements of participants

Participants will be asked to take part in one focus group session. The focus group sessions will last between one to two hours. Focus groups will be organised in a variety of locations within the Eastbourne and Hastings area using venues both in the university and community settings. You will be offered a location which will be convenient to you. Participants travelling to attend a focus group session by car, bus or rail will have their travelling costs reimbursed. If you require any assistance getting to the venue where focus groups are being held please get in contact with the WHOOP project Research Officer, Lisa Hodgson, on the number overleaf.

Light refreshments will be provided at each focus group session.

Focus group sessions

A focus group session is a method which is used to collect information, which essentially involves engaging a small number of people in an informal group discussion. The informal discussion will be based on exploring a series of questions created around determining the need for the development of a well-being, health and occupation centre for older people. The interview will be preceded by a group activity designed to enable the group to explore questions relevant to the study.

Confidentiality

All focus group sessions will be tape recorded for the sake of accuracy. The interview material will be treated as confidential and retained in a safe and locked place which only can be accessed by the researchers. Your identity will remain confidential and any written material used in the study will be anonymised.

Participation in focus groups

Participation is voluntary and if you do not feel comfortable at any point during the focus group interview and you wish to stop your participation in the focus group interview, you may do so at any point without needing to give an explanation. If you wish to withdraw from the study altogether please contact me using the telephone number or email address below.

Researchers

The project will be led and supervised by Professor Ann Moore, Director of the Clinical Research Centre for Health Profession and Chair of the Well-being, Health and Occupation for Older People (Whoop) research group.

The focus group session will be facilitated by two members of the Whoop group, below is a list of members who may be facilitating your focus group session.

Dr Beatrice Sofaer

Dr Raija Kuisma

Dr Liz Bryant

Lisa Hodgson - Research Officer (Older People)

If you would like to take part in this project please fill out the attached form enclosed and return it in the stamped addressed envelope provided.

We look forward to seeing you at one of our focus groups session.

Lisa Hodgson
Research Officer
University of Brighton
(01273) 643457
l.hodgson@brighton.ac.uk


Focus group Venues

Five focus groups were held in four different locations within the local vicinity.

1. Hasting Community Learning Centre
Rothermere House
49/51 Cambridge Road
Hastings
East Sussex
TN34 1DT
2. Age Concern, William and Patricia Venton Centre
3. Age Concern, William and Patricia Venton Centre
Junction Road,
Eastbourne.
BN21 3QY
4. WRVS, Hyde Road day centre
24 Hyde Road
Eastbourne
East Sussex
5. University of Brighton
Aldro Building
49 Darley Road
Eastbourne
East Sussex
BN20 7UR

Appendix Four

University of Brighton



University of Brighton

Clinical Research Centre for Health Professions

Faculties and Courses

- Arts and Architecture**
Interior Design, Fashion Photography
- Education and Sport**
Teacher Training, Sport Exercise, Languages and Dance
- Health**
Occupational Therapy, Physiotherapy, Podiatry, Social Work and Nursing
- Management and Information Science**
Marketing, Business administration, Mathematics and Finance, Internet Business Computing
- Science and Engineering**
Environmental studies, Geography, Geology, Biology, Pharmacy, Mechanical and Manufacturing Engineering



University of Brighton

Clinical Research Centre for Health Professions

University Research Centres

- Clinical Research Centre for Health Professions
- Centre for Research and Innovation Management (CENTRIM)
- Information Technology Research Institute
- Health and Social Policy Research Centre
- Pharmaceutical & Biomolecular Sciences Research Centre

University of Brighton

Clinical Research Centre for Health Professions

WHOOP

Wellbeing, Health & Occupation in Older People

Research Group

University of Brighton

Clinical Research Centre for Health Professions

Who is involved in the WHOOP research group

- Allied Health Professions
- Sport & Exercise Scientists
- Pharmacists, Social workers and Nurses
- Representatives from local Forums and Voluntary Organisations

University of Brighton

Clinical Research Centre for Health Professions

Research Interests


- Older People and Meaningful Occupation
- Leisure Pursuits
- Chronic Pain
- Wellbeing and Health Occupation
- Fitness/Balance
- Social Care for Older People
- Age Discrimination




University of Brighton

Clinical Research Centre for Health Professions

- Attitudes Towards Aging in Undergraduate Students
- PhD Person Centred Assessment with Older People
- Chronic Pain in Elderly People with Alzheimer's Disease
- Older People and Gardening as a Leisure Pursuit
- One handed Wheelchair Project




University of Brighton

Clinical Research Centre for Health Professions

WHOOP Research Project:


To determine if there is a need for the development of a wellbeing, health and occupation centre for older people

University of Brighton

Clinical Research Centre for Health Professions

Aims of the Project

- To identify if there is a need for a wellbeing centre
- Peoples perceived image of a wellbeing, health & occupation centre for older people
- To explore the benefits of a wellbeing centre
- To feedback findings

 University of Brighton


Clinical Research Centre
for Health Professions

WHAT IS TODAY ABOUT

Exploring and Discussing

Your ideas
Your opinions
Your Thoughts



 University of Brighton

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for Health Professions



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Clinical Research Centre for Health Professions
WHOOP Research Group Project:

**To determine whether there is a need for the development of
Wellbeing, Health & Occupation Centre for Older People.**

**University of Brighton
Aldro Building
Focus Group 5**

Monday 3rd October 10.00am -12.00pm

**Facilitated by
Ann Moore and Lisa Hodgson**

Attendees

10.00am – 10.15am	Refreshments
10.15am – 10.25am	Introduction (Ann Moore)
10.25am – 10.30am	Introduction to group activity (Lisa Hodgson)
10.30am – 10.55am	Group activity
10.55am – 11.00am	Group activity finishes, move into group discussion
11.00am – 12.00pm	Group Discussion (Ann Moore & Lisa Hodgson)
12.00pm	Close of Focus Group Session & Refreshments



UNIVERSITY OF BRIGHTON

To determine whether there is a need for the Development of a Well-being, Health & Occupation Centre for Older People

Dear Participant,

Please read through this consent form carefully and ensure that you understand the following protocols regarding the study you are being asked to participate in. Please ensure that you complete the consent form and return it to one of the facilitators prior to the start of the focus group session.

I agree to take part in an informal focus group interview and I understand that I will be asked to participate in a group activity and discussion.

I understand that any views or opinions that I express during the focus groups interviews will be treated in the strictest confidence and will not be kept in any data files. Only the researchers will have access to your confidential answers, and will ensure that your views remain confidential and anonymity is maintained throughout the study.

Participation in this study is entirely voluntary and you are free to withdraw from the project at any time which you deem necessary.

I have read the attached information sheet and I understand what is required from me when taking part in this study.

I agree to take part in this study which is to determine the need for the Development of a Well-being, Health & Occupation Centre for Older People in Eastbourne.

Name (Please Print).....

Signed.....

Date.....



UNIVERSITY OF BRIGHTON

WHOOP Research Project:

**To Determine Whether there is a need for the Development of a
Well-being, Health & Occupation Centre for Older People**

Contact details

In order for us to contact you further, please can you fill out your contact details.

Name.....Title.....

Address.....

.....

.....Post Code.....

Tel (Home).....Mobile.....

Email.....

WHOOP Feedback Conference
Thursday 9th February 2006 - Delegates List

Steering Members

1. John Appleyard (*Hastings & St Leonards Seniors* ')
2. Liz Bryant
3. Marylynn Fyvie- Gauld
4. Kirsty Henshall (*WRVS*)
5. Lisa Hodgson
6. Raija Kuisma
7. Janet McInnes
8. Ann Moore
9. Polly Rodriguez (*Cupp*)
10. Brian Wyld (*Help the Aged*)

Participants

11. Ronald Milton
12. Pam Dickson
13. Sheila Gasson
14. Janet Dineen
15. Amy Dyer
16. Marjorie Wotton
17. Margaret May Wooler
18. Ian Brown
19. Mavis Mower
20. Derek Lawrence Barrow
21. John Jackson
22. Michael Foux
23. Gwyn Lewis
24. Clarita Barber
25. Ann Condon
26. Colin Akers
27. Anne Barden
28. Rod Passmore
29. Margaret McHugh
30. Olive Birchmore
31. Eileen Tarrant
32. Vic Lavender
33. Eugenie Hobbs
34. Mr Davis
35. Mrs Neuss
36. Pat Webb

39. Mark Bhatti
40. Ann Bodington
41. Dorothy Engman (*Age Concern*)
42. Helen Fiddler
43. Anne Mandy
44. Simon Innes
45. Gail Louw
46. Linda Lovelock
47. Angela Macadam
48. Diane Parr (*Age Concern*)
49. Beatrice Sofaer
50. Tracey Szekely
51. Naji Tabet
52. Nicky Todd
53. Marion Trew
54. Peter Watt
55. Jon Wright
56. Jeremy Price
57. Jonathan Webster
58. Gaynor Sadlo
59. Jane Morris
60. David Wolff (*Cupp*)
61. Age Concern (*Eastbourne*)

Research Leads (RL)

62. Val Hall
63. Peter Squires
64. Paul Spooner
65. Raymond Lee
66. Stuart Laing

WHOOP Members/ Academic Staff

37. Sue Balloch
38. Frances Bassett

Conference Feedback: Discussion Questions

WHOOP Feedback Conference
Thursday 9th February 2006

- Given the results presented today should we proceed with this development? How should we proceed with it?
- Which ideas should we be developing and what initial steps should we be considering when taking the project forward?
- Is there any other perceived avenues on how older people and the University of Brighton could best unite for mutual benefit?

Conference Feedback Summary

- Physical Centre in a central location near good transport links.
- To develop a mobile unit (University of Brighton Bus) which could offer an information point (wide ranging information and advice service- information point) Internet Access (online banking)
 - Manned by university staff
 - To use this facilities to concentrate on reaching the ‘hard to reach group’ (older people in rural locations or are house bound due to health reasons)
- Activities and facilities provided by the university should compliment existing services.
- Future development should involve local voluntary, commercial, health and social care services. This network of collaborators should work on improving communication, to identify gaps in services and facilities. To identify important issues that affect older people. (A partnership approach)
- Future developments should continue to involve older people in planning.
- To identify from an early stage the skills and knowledge which would strengthen any future development.
- Advertising the proposed development and the project findings on local radio and in local papers could gain further interest in the project from outside sources, and possibly increase participation from the older people’s community in activities.
- To educate adults who fall into the 45-65 age band about activities and facilities to encourage participation in later years and to improve health and wellbeing.
- To ensure any approach carried forward presents ageing positively. To ensure any advertising is promoting ageing and the image of a centre reflects this approach.
- To develop activities on the weekends or during particular seasonal holidays to help combat loneliness among older people.
- To encourage student interaction with older people. To create opportunities for students to go into the community to interface with older people on a number of different levels.
- To create a buddy system, students are partnered up with an older person. Schemes such as these could possibly be an opportunity to challenge some of the issues of vulnerability and in-securities that older people may feel

regarding their community and their own environment. Projects such as these could ensure that older people feel informed and secure in their own homes. Creating the buddy system to get people walking and moving confidently on their own could encourage older people to join activities and feel safe when they step out of their homes. Thus promoting independence among older people.

- Funding – the university could possibly develop links with health services, to encourage dialogue for future funding and collaboration of further research projects. (University of Brighton would need to identify and attract funding sources locally, nationally and regionally and not to rely upon one source of funding.)
- To continue to give older people the opportunity to get involved in research. To identify areas for research.
- Develop open days at the university to allow older people, university staff and community organisation to contribute to promoting facilities and services within the local area. To inform older people of the opportunities within their local community. It would inform people about the university and what it does and can offer them.
- To create a database of all the information, facilities and services that are available to older people within the community. Create an information point to access information and knowledge about the local community.
- Future development of the project would need to identify and be clear on the function of the wellbeing centre and what it can offer to older people. University of Brighton would need to define early on what activities or function the university could contribute to the older people's community.