

Primary research into community contributions in later life

Local report for Castle Ward, Scarborough

October 2018



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About the Centre for Ageing Better

The Centre for Ageing Better is a charity, funded by an endowment from the Big Lottery Fund, working to create a society where everyone enjoys a good later life. We want more people to be in fulfilling work, in good health, living in safe, accessible homes and connected communities. By focusing on those approaching later life and at risk of missing out, we will create lasting change in society. We are bold and innovative in our approach to improving later lives. We work in partnership with a diverse range of organisations. As a part of the What Works network, we are grounded in evidence.

Acknowledgements

This report was authored by Tim Bidey.

1. Executive summary

Background

Traverse was commissioned by the Centre for Ageing Better (AB) to undertake research into **community contributions** in later life (people aged over 50). Through this work, they wanted to understand how older people currently contribute to and are supported by their communities; what the barriers and enablers are for older people contributing, and how older people can be supported to contribute.

Research was undertaken in five communities: Hartcliffe and Ashley, both in Bristol; Castle Ward in the seaside town of Scarborough; the rural town of Settle; and the Beeston and Holbeck area of Leeds. In each area, older people were interviewed by trained peer researchers from within those communities, with 79 depth one-to-one interviews held in total.

What contributions do people make in their communities?

Our research paints a rich picture of community contributions across all our research sites and types of respondents. Of our 79 interviewees, all but ten spoke about ways in which they give or receive support in the community in some way. Some were highly involved in local groups and projects and self-identified as volunteers, but many did not participate in this way and did not think of themselves as volunteering in their community, instead talking about what could be described as acts of neighbourliness. These ranged from low levels of responsibility – such as putting a neighbour's bins out or taking in a parcel – through to much deeper relationships of trust that saw people looking after someone else's children or helping them to wash their hair. In between was a large cluster of activities including looking in on neighbours to see how they are/paying a social call, doing shopping, helping around the house, and cooking and sharing food. Looking after pets, giving lifts and looking after children also came up multiple times in the interviews.

Motivating and enabling community contributions

In exploring the motivators behind and the enablers and barriers to community contributions, many common themes were found that recurred across the research locations. These often played out differently in different communities, however, impacted by factors relating to local place and people's backgrounds.

People spoke about wanting to **'be a good neighbour'** and 'giving back'. Some talked about their **faith** as a specific motivator. **Reciprocity** was another important theme across the areas. At the 'shallow end' of community contributions this could just be about common courtesy with neighbours returning a favour. At the 'deeper end' of contributions where **familiarity and trust** were more important in laying the foundations, reciprocity and willingness to help out was more often rooted in long-standing contact, friendship, and sometimes shared experiences (e.g. of migration, illness or bereavement).

Sometimes taking part in contributory activities was as much about interviewees' own wellbeing as that of others, motivated by a desire to stay **active and engaged**, including in **response to a life change** such as retirement, bereavement, worsening health or moving to a new area.

Contributions were enabled by **places and spaces** – which provided opportunities for people to meet, build connections and friendships, which in turn led to community contributions. These could be places of worship, for instance, or community venues and social groups where people met.

Sometimes the **lack of something** could be a motivator or enabler. Lack of public transport could mean that neighbours depend more on each other to get around, for instance, and lack of formal, funded organisations or community venues could lead to local (often older) people stepping in to fill the gap through volunteering. Even lack of family close by could act as an enabler, freeing up people's spare time and encouraging them to get more involved in their community (especially if new to an area).

Barriers

Whilst our interviews shed light on a myriad of social interactions and bonds that underpin neighbourly behaviour, they also highlight many barriers and challenges to community contributions. These included physical and structural factors, which disabled or deterred – in particular **poor health or infirmity**, which prevented people from helping others as much as they had in the past or would like to in the present. People also talked about distance and lack of transport, which prevented people getting to other places (including to see friends), about lack of spaces to host and facilitate interactions or activities, and lack of money to take part in activities. For some interviewees from our South Asian communities in Leeds, lack of English language was another practical barrier.

Other barriers were more closely related to **how people felt**. Interviews talked about needing confidence to both offer and ask for help – and uncertainty about how those approaches would be received (e.g. as interfering, unwelcome or burdensome). Whilst shared backgrounds and long-standing connections enabled contributions, differences and lack of familiarity and trust often erected barriers – between people from different ethnic and faith communities, between younger and older people, and between newcomers and long-standing residents.

Lessons

Across the five communities, older people's community contributions are many and varied and it is clear that even those who take little or no part in formal volunteering are often contributing in their communities and benefitting from the interactions this generates.

Familiarity, relationships and trust are important in setting the scene for rich and high-value community contributions. Linked to this, our research points towards the importance of connections that build social capital and create permission to give and receive help. Indeed, mutual help and reciprocity underpins many of the community contributions seen in the research areas.

One of the most interesting themes throughout the research is the interplay between people and place – between the feelings, experiences and preferences of individuals and how these relate to the local world around them. To enable community contributions, we need to strengthen individuals and strengthen neighbourhoods.

For some, informal connections and contributions can represent the first rung on a ladder of participation, opening doors to involvement and leadership of local groups and projects. But even where contributions remain in that informal space it can be hugely valuable for individual and impactful for the way that whole communities are able to support each other and withstand change.

2. Introduction

Traverse was commissioned by the Centre for Ageing Better to undertake research into **community contributions** in later life (people over 50)¹. The research explored how people support one another in their communities, including those they know well (such as neighbours or friends), or less well. While there is a significant body of evidence around formal volunteering, less is known about informal volunteering (how people support each other), about participation by certain groups, and what works for who and where. Therefore, the research aimed to find out more about what motivates, prevents and supports people to take part, particularly those least likely to do so.

Aims of the research

To understand:

- How older people currently contribute to and are supported by their communities
- More about the barriers and enablers for older people contributing
- How older people can be supported to contribute

To identify:

- Routes to action – thinking about how recommendations will be taken forward after the research is complete.

The research was conducted in five locations in England. This report is based on research conducted in Castle wardWard in Scarborough. Reports have also been produced using data from two sites in Bristol, as well as Leeds and Settle.

1. At the time of commissioning, Traverse was known as OPM Group.

3. Key findings

Giving and receiving support from neighbours was a key feature in many interviewees' day-to-day lives. While this largely consisted of simple, everyday tasks, there were also examples of people providing their neighbours with extra support during times of ill health or after a bereavement. Other community contributions included supporting members of the wider community and attending both social and community-focused groups and events.

Having regular contact with other people, either through being neighbours on the same street or through repeated attendance at groups, facilitated the development of trusted relationships. There was some suggestion that this, in turn, enabled people to engage in more personal forms of community contributions such as completing personal paperwork.

The topography of Castle ward is both an enabler and a barrier in terms of community contributions. Close knit communities share similar public spaces such as the seafront and headland, facilitating regular contact between residents. However, steep streets and limited transport options into the centre of the ward may make it more difficult for people with mobility problems to access community activities and venues.

Poor health can also be an enabler and a barrier to making community contributions. While declining health may limit an individual's ability to help others in their neighbourhood, there were also several examples of where people had rallied around individuals during bouts of ill health.

There is **a perception of difference** between several communities in Castle Ward, including divisions between younger and older residents, as well as between recent retirees to the area and longer-term residents. However, many issues are shared by all residents, such as anti-social behaviour and the effects of tourism.

4. Methodology

Overall approach

To understand whether, how and in what circumstances people later in life contribute to their local communities – and the barriers and enablers they face - it was important that the research was **location-specific and sensitive to local contexts**.

To achieve this, Traverse worked with local stakeholders in each location to recruit and train **community researchers**, themselves members of the target populations, to conduct fieldwork. The idea was that they would be more effective at seeking out and gaining trust from research participants than someone external to the community. A wider range of **local stakeholders** were also engaged at various points throughout the process, drawing on their help to guide the research and develop routes to action out of the findings, as follows:

1. **Choosing the five research sites** was based on local factors including health, socio-economic factors, ethnicity, and whether the setting is rural or urban. **Scarborough** was chosen as a coastal, urban site with high levels of deprivation.
2. **Scoping interviews** were held to better understand local contexts and identify a local voluntary organisation that could support the research. This included interviews and discussions with Community First Yorkshire and The Street, who helped identify Falsgrave Community Resource Centre.
3. **A Co-design workshop** was hosted by Falsgrave Community Resource Centre to inform the research and identify key locations within Scarborough to conduct it.
4. **Community Researcher training** included how to locate participants and qualitative research techniques.
5. **A co-analysis workshop** was held to discuss key findings with community researchers and stakeholders.
6. **Routes to action workshop** to ensure that findings were actionable and that the research would have a lasting effect within the local community.

About the community researchers

Community researchers were recruited through the following local charities and community groups:

- Age UK Scarborough and District;

- Coast & Vale Community Action (CaVCA);
- Community First Yorkshire;
- Scarborough Council's Safer and Sustainable Communities Manager;
- The Inclusion Zone;
- The Rainbow Centre; and
- Yorkshire Coast Homes.

Organisations directly approached volunteers that might be interested, or distributed flyers outlining the role to individuals over 50 years old and active in the local community. In addition, Traverse worked alongside the first eligible applicant to identify other potential community researchers.

Three community researchers (all female and White British) were recruited and trained. One researcher undertook six interviews, while the other two undertook five interviews each. All three researchers were well connected in the local community, had lived there for between 10 and 50 years, and were involved with a variety of voluntary and community organisations in the local area.

As part of the interviews, researchers asked participants to complete a 'diary' showing their activities on each day during a typical week. This was a useful tool for prompting participants to reflect on their weekly activities as a basis for identifying what community contributions they made or benefited from and generating discussion around this.

Reflections on the methodology

Working with community researchers brought significant advantages to the research. They had access to research participants who would have been hard to reach via traditional research recruitment methods. Their familiarity with local places, groups and people helped them to pick up on themes during interviews. Their embeddedness within their communities meant we could draw on their own insights to help contextualise and explain the interview findings and ensure that we interpreted interview data correctly in our analysis.

However, the community researchers were conducting research for the first time, following a short training session from Traverse. To help ensure the robustness and quality of the data that they captured, researchers were asked to record their interviews (where participants agreed to it), and had regular discussion with them through telephone calls, workshops and interviews, to discuss findings and give further support.



5. Locating the research

Like the other geographical sites in the community contributions study, the neighbourhood in which the research took place was selected to ensure a focus on people aged 50 and over from C2DE socio-economic groups (who existing evidence suggests are less likely to contribute formally).

Based on these overarching criteria, scoping interviews and an analysis of local population and Index of Multiple Deprivation data, three neighbourhoods were short-listed for consideration as possible research sites. These were:

- Castle ward;
- Falsgrave Park & Edgehill ward; and
- Ramshill ward.

5.1 Selection of Castle Ward

Initial discussion with stakeholders identified that Castle Ward was of particular interest for the following reasons:

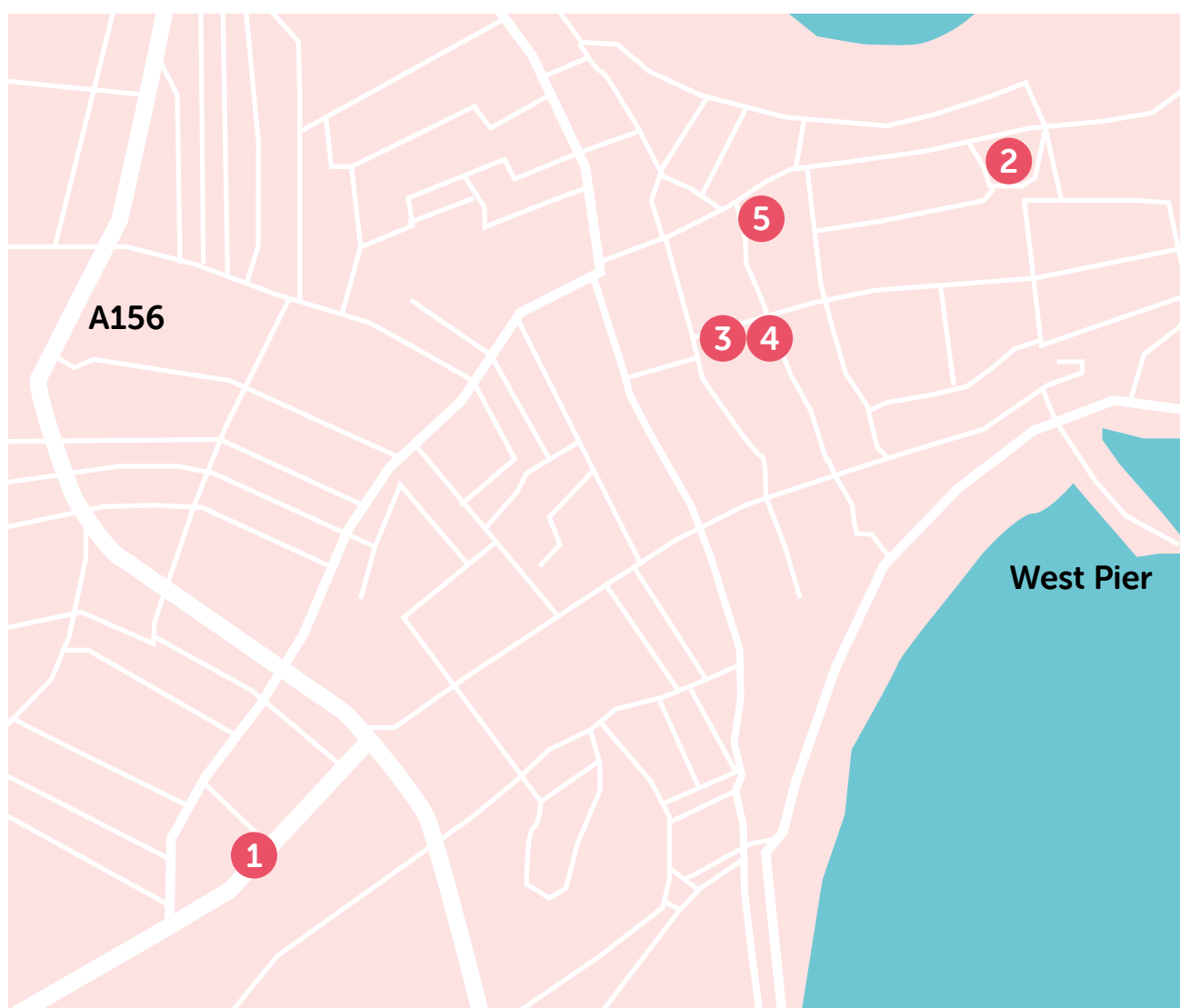
- Limited local knowledge about the level and nature of community contributions in the local area
- A perceived lack of engagement from members of the local community with new activities and initiatives in the local area
- The geography of the ward – spanning both the town centre and communities along the seafront – was felt to encapsulate the essence of Scarborough as a whole.

5.2 Description of local area

Castle Ward is one of the most deprived areas of Scarborough, with part of the ward in the top 1% most deprived areas nationally.² Stakeholders noted that the area has a high level of social housing and, whilst residents were close to the facilities of the town centre, most residents would have limited disposable income to engage in local activities. The area also lacks green spaces, though it is located close to the seashore.

2. Scarborough 006B (E01027806) includes the areas around North Street, St. Thomas Street, Queen Street, King Street and along the northern part of Foreshore Road.

Figure 1 Castle ward area map



1. Westborough Methodist Church (also hosts Scarborough and District Older People's Forum)
2. St Mary's Church
3. Scarborough Anglers Social Club (also hosts the British Merchant Navy Association)
4. The Base (now closed)
5. The Rainbow Centre (also hosts Tenants and Residents' Association)

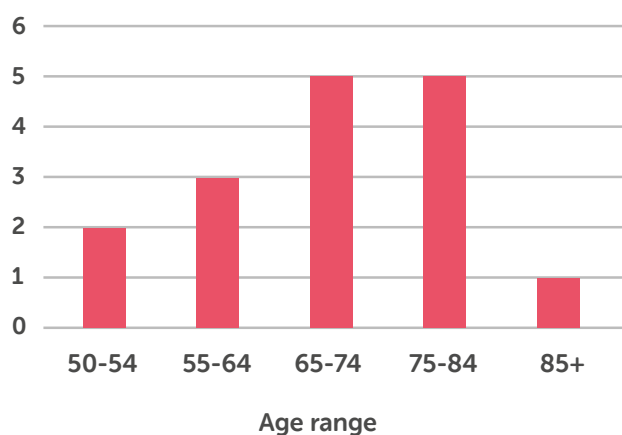
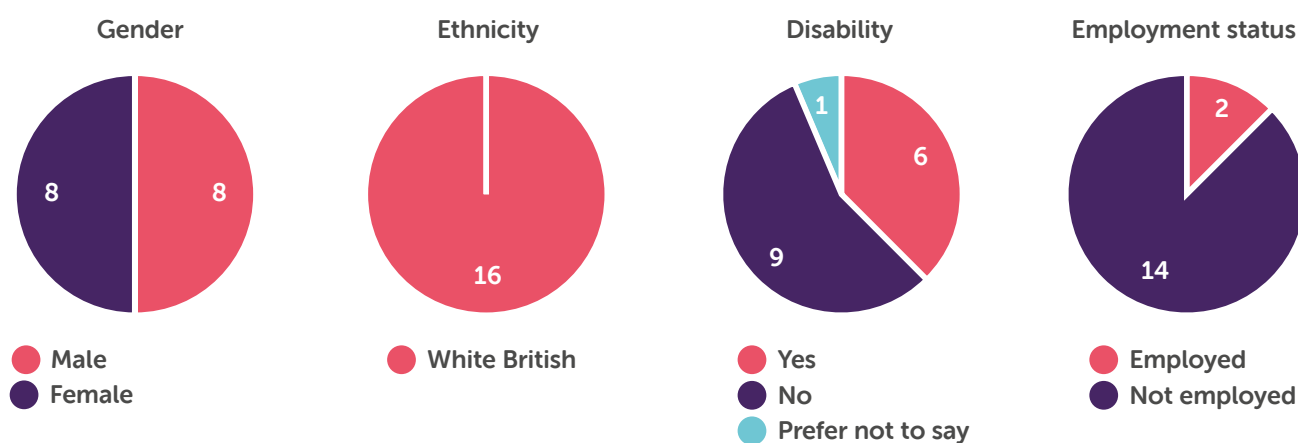
Significantly, stakeholders also spoke of a historical lack of engagement with community activities and initiatives in the local area, characterised by the closure of The Base – a local community-led group – in 2017. One CR who had been involved with The Base explained that staff had struggled to reach people in the local community due to a lack of resource to undertake engagement activities such as door-knocking.

Stakeholders noted several other characteristics of the area, including the area being a mix of people who have always lived in Scarborough and those who have more recently moved into the local area, as well as higher levels of crime such as domestic violence, alcohol and drug abuse.

6. Community contributions in Castle Ward

6.1 About the research participants

The achieved sample for the research in Castle Ward is presented below:



Sixteen participants were engaged by the community researchers in Castle Ward. Researchers took notes and a sub-sample of four audio recordings were transcribed to quality check and inform the detailed case studies presented below.

The qualitative data collected by the community researchers was explored by considering the responses overall and by considering responses by variables which through the course of the

study emerged as likely points of difference, namely: gender, age, health and ethnicity.

However, it should be noted that the sample for the research is very small, and the nature of the data collected is qualitative – therefore generalisation to the wider population in Castle Ward or Scarborough is not possible.

6.2 Findings: patterns of activity, motivations, barriers and enablers to contributions

6.2.1 Context

All the research participants in Castle Ward felt very - or fairly - strongly that they belonged to the local community. Some remarked that this strong sense of community was based on shared experiences and regular social contact due to the layout of the area:

“There’s a feeling of community which you won’t always get in Scarborough, other places people don’t see their neighbours. I’ve been living in a terrace in a cul-de-sac which gives us a feeling of community. We meet in this small area. The area is unique - it’s a bit like a village... I’ve never really lived anywhere where I’ve known so many people by name in the street.”

Male, 50-54

Two community researchers also noted that certain elements of the local topography facilitated daily social contact, especially in and around the local market and the seafront and headland area where people tend to walk. In addition, one CR felt that residents also shared local issues such as the seasonal influx of visitors into the area and associated problems such as litter and limited parking spaces.

6.2.2 Patterns of activity

Giving and receiving support from neighbours was a key feature in many interviewees’ day-to-day lives. On the whole, this consisted of assistance with simple tasks such as taking delivery of parcels, sharing shopping, running errands and looking after pets.

“[I help] a lady in my block of flats [with her shopping] who I know would not be able to get out in snow.”

Female, 55-64

Interviewees also reported visiting (or being visited) by neighbours to help reduce social isolation. In particular, neighbours provided extra levels of support such as at times of poor health or following a family event such as bereavement. For several interviewees, this relationship was often based on the person offering support having been through a similar situation in the past, **“One of my neighbours lost her husband last April, suddenly, in**

our street. I've helped a little bit, just talking, because it's the shared experience. It's knowing somebody who might know how to deal with things."

Male, 50-54

Another pattern of activity amongst interviewees was **supporting members of the wider community**. For most, participating in local organisations and schemes in the area enabled them to do this. This included the Tenant and Residents' Association, Scarborough Older People's Forum, church meetings and pastoral care groups, Neighbourhood Watch schemes, litter picking groups and Scarborough in Bloom. Around half of interviewees also said that they volunteered for a local community group or charity.

Some interviewees referenced other actions that they'd taken to help the community, such as picking up broken glass, reporting potholes and burst water pipes, or supporting the local businesses at the market.

Attendance at **social groups and events** was also a feature of most interviewees' lives. They met and sustained regular contact with others through attending Westborough Methodist Church and St. Mary's church, and participating in University of the Third Age groups, political party meetings, and common interest clubs specific to the seafront area such as The Angler's Club and the local British Merchant Navy Association, as well as recreational clubs. In some instances, these had helped develop strong community bonds.

For example, one described their local church as a 'small family'. One CR commented that she was surprised about the dynamism and positivity surrounding the church, "**For those people, they were really stepping up to the mark to make a difference through the church**".

Case Study: Malcolm

Malcolm is in his late seventies/early eighties, of white British background and has lived in the local area for 78 years. For the last twelve years, Malcom has gone down to the local Angler's club on a Monday afternoon:

"It is a friendly place and the beer is cheap. They also open at 12pm and close at 3pm so I don't stay out too late".

He feels that this form of regular interaction with people at the club does him and others a lot of good:

"After reading about subjects in the paper you can have a good chin wag about it and put the world to rights... it keeps your mind active. You're not stagnating and stuck in the corner - I don't like staying at home watching television unless there's a good war documentary on."

In times of need, Malcom has also been able to draw on his fellow club members for support:

"My friend there had the same operation as I did five years ago, and he's been very supportive of me during my illness. I've also been a friendly ear and listened to other people's problems and concerns... it's nice to help someone the way they would like to be helped. It doesn't cost you anything. Giving people short periods of time to listen to their problems is helpful."

He has since encouraged a lot of his friends to join the club but, at the same time, has found it difficult to reach out to others in the local community:

"There are a lot of people, especially the older ones, who don't want your help, they get quite angry if you try. You need to be diplomatic, it's not so easy to come across diplomatic."

6.2.3 Motivations

Participants were motivated by benefits to themselves, to others, or both. Most cited several motivations, including:

- Wanting **something to do** to help pass the time and avoid boredom, especially after retirement. There was also a strong sense that it was good to get out of the house to either meet new people or socialise with family or old friends. Getting out, experiencing a 'change of scenery', and meeting people was seen by some to help aid psychological wellbeing:

“After reading about subjects in the paper you can have a good chinwag about it and put the world to rights, as it were, and it does you a lot of good. It keeps your mind active. You’re not stagnating and stuck in the corner”

Male, 75-84

- Some interviewees used their community contributions to help them **keep fit and healthy**. “[Bell ringing] is really good exercise for you. I don’t like the gyms, [they’re] not much fun, but I get enough of a work out ringing the bells”.

Female, 65-74

- Others saw their contributions as an opportunity to **pursue interests and challenge oneself**, such as trying new activities or visiting new places in the local area. “[I saw the writing class] as a challenge, because I’ve never done it before – exploring the other side of the brain.”

Male, 65-74

- There was also a general feeling amongst interviewees that the concept of the ‘community’ is built on the **responsibility to help others** when needed: “We all help each other. That is community - people looking out for each other”

Female, 65-74.

This included an innate instinct towards helping others, whether they were personal connections or not: “If you can do something, you do. You don’t ask yourself, ‘shall I help?’, you just do something!”

Male, 65-74

Case study: Sharon

Sharon is in her late sixties/early seventies, of white British background and has lived in the Old Town of Scarborough for 16 years. Sharon doesn’t have any family in the local area, and for a while her main activities were seeing friends and walking her dog:

Twelve years after she retired, Sharon went to a local garden party where she was invited to join a tour of the local bell ringing tower.

“I expressed an interest to see the tower, and I was hooked... I believe the great British traditions like bell ringing, and Morris dancing and all these things should be passed on, and I saw a way that I could be involved in that. Once I actually did it I just loved it so much I carried on. Been doing it for four years.”

For her, ringing the tower bells is also a fun form of exercise. She also feels this activity helps support the local church (though she’s not religious herself), hospital and care homes – as well as playing a role at weddings and funerals.

6.2.4 Enablers

Interviewees identified several factors that helped create the right conditions or context within which people could offer and receive support within their community. These concerned fostering links with neighbours and joining groups with others who had shared interests or beliefs.

Enablers included:

Links with neighbours

- **Having and maintaining regular contact with neighbours** on the same street, such as dropping by to check if they are okay and having a quick chat. Several interviewees acknowledged that this relationship requires a level of trust that can come from knowing each other for a long time, knowing members of each other's families, or having a shared culture and experiences. For example, "One neighbour needs me to read letters and do forms... Some people in the neighbourhood don't speak to him, make fun of him, but he learnt to trust me even though he calls me by the wrong name."
Female, 55-64
- Interviewees were more likely to request and offer help to **neighbours that they perceived as friendly**. Positive characteristics in this regard include being polite and respectful. There was also some suggestion that older people "don't trust the young people" and are thus more likely to accept help from their friends and peers.
- Using **social media** to support community contributions. For example, using Facebook to chat to neighbours who aren't seen often, post requests for help and advertise social gatherings. However, some interviewees reported not having access to IT or not being IT literate.
- Some interviewees referenced the **reciprocal nature** of their interactions with neighbours. For example, keeping an eye on each other's homes while on holiday. One stakeholder at the midpoint workshop also spoke of her own experience of this: "Our neighbours help us, and we help them – we don't see it as volunteering because it is mutual. You need to feel there is some give and take. The reciprocal nature is key. I helped an older person and we became friends – now I really value my time with her." One interviewee who had helped a neighbour also hoped that, by helping someone in the present, there might be someone there for her in the future: "I just think that, hopefully, the day that I need help there will be somebody to help me."
Female 65-74

Joining groups

Case Study: James

James is in his early 50s, of white British background and has lived in the Old Town of Castle ward for 17 years. He and his neighbours help each other with everyday actions:

“When’s someone’s away you’re checking their house, it’s like neighbourhood watch really.” Making sure the mail is pushed through or the binbag is back... It’s a mutual thing, it works both ways, we keep an eye out for each other.”

To help with this, James and his neighbours have set-up a group on Facebook where people on their street can advertise social meetings, request or offer help with everyday tasks and report anything suspicious in the local area:

We’ve got 48 houses and 22 people in the Facebook group... some of our street is transient, so people come and go, but [we try to tell] anyone’s who’s lived there more than a year or who has moved in recently.”

- Many interviewees said that their involvement in a local group had helped them **meet new people and build social connections**. “We all know each other, but new people do sometimes join, or you get somebody else’s friend, it creates a bit of a network, stretches out as far as one person comes in from beyond York.”
Male, 50-54
- Several interviewees also identified that their involvement had enabled them to **encourage their friends to join**. “I have encouraged quite a few people (friends, colleagues and old school friends) to join”
Male, 75-84
- There was some suggestion that groups based on **shared experiences and beliefs**, such as the church or British Merchant Navy Association, engendered a close sense of community and associated behaviours amongst members. For example, actively looking out for and helping members: “Church groups help each other - if somebody’s missing, they are noticed.”
Female, 65-74

Life transitions

- One interviewee mentioned that, despite being active in the community through local politics, he had got to know his neighbours much better after his wife passed away: “I started to talk to people I’d always nodded at, and to get to know them by names.”
Male, 50-54.

Case Study: James

James has also been active in the community for a long time. He used to be involved with local politics and regularly volunteered at a local community centre for several years that has since closed. He doesn't feel old enough to join activities for older people just yet but does go to the cinema and theatre with his daughter or neighbours and also attends some local community meetings.

After his wife died, James got to know his immediate neighbours much better. His neighbour also introduced him to the local theatre group:

"I think someone was having a back-garden party and I met this lady [who was part of the group]. I probably wouldn't have had that conversation if I hadn't lived where I lived, because I wouldn't have got to know about it."

James would like to do even more activities in the local area such as getting involved with a walking group. However, he struggles to find the time due to work and other commitments:

"Something else always comes along, bit of work, or I've worked and I'm tired, or I've got considerations with having a daughter, putting her first."

6.2.5 Barriers

There were several reasons that people felt unable to, or wary of, giving or accepting help from others – broadly falling into categories around personal factors, health and contextual factors.

Personal factors

Interviewees talked about a wide range of personal factors that they felt inhibited community contributions amongst themselves and others.

- **Pride** – a reluctance to admit to themselves and others that they need support, due to not wanting to be a burden on others and fear of stigma from the community.

"I wouldn't ask for help from my own neighbours except for practical things- wouldn't want to impose, put me on a guilt trip, I'd rather do without... Pride would stop me asking for help, it's admitting to feeling old, not as capable as you once were. But if someone asked me, I wouldn't think twice"

Female, 55-64

One CR felt that this was a normal attitude for people in later life in Castle Ward: **“People don’t want others to know their business... people like to keep themselves quite private... they don’t want to admit defeat and don’t want to be seen as moaners.”**

- **Fear of intruding** – feeling apprehensive about interfering in other people’s lives, leading to individuals only helping others when asked: **“I feel [like I] can’t knock on doors [as it is] intruding.”**

Female, 75-84

- **Lack of confidence** – some people are shy or nervous about trying new activities or getting to know new people: **“It took a lot of courage to walk into the hall”**
Female, 65-74. It could be a challenge to break the ice with new people.

- **Limited time** to support others due to work patterns and/or providing support to their own family members. **“The first few years here I don’t think I took much interest [in the local community] to be honest, I was too busy.”**

Male, 50-54

Case Study: Sharon

Sharon and her neighbours help each other with every day, small tasks, such as taking in parcels, taking their bins out, or just checking in on neighbours.

However, Sharon feels that though the community helps individuals in these everyday ways, as well as people who appear to be in trouble, people sometimes don’t help each other more in Scarborough because they fear intruding in others’ lives:

“I think it’s the case that people don’t want to intrude, but also don’t want to invite intrusion, you have to be quite careful... people respect your privacy, unless they can see that you actually need assistance, then they would be there for you. I think that [people] tend here to leave you alone unless you want them to interact with you in some way, then they’re happy to, but they’re not overly pushy like they would be in a village.”

Health

- **Poor health** meant that some interviewees were unable to take part in activities of interest to them, for example because of limited mobility or poor eyesight. This also limited the ability of interviewees to help others as they would like or in the ways that they were used to: **“I don’t feel as capable as I used to be.”**

Male, 75-84

- Several interviewees highlighted how **poor health can also be a trigger for those in need of support**. For example, one person experiencing mental health problems explained that she received “umpteenth messages and missed calls” when she was in bed for two days. Another interviewee explained how a friend had helped him through a period of poor health: **“My friend had the same operation as I did 5 years ago, and he’s been very supportive to me during my illness.”**

Male, 75-84

Difference acting as a barrier

- There was a suggestion that some divisions exist between **long-term residents and recent retirees** attracted to the area. One recent arrival commented that, **“People in Scarborough are known to be very insular. They can be very cliquey! Retirees from outside attracted by the location have common ground with us.”**

Male, 65-74

Opinion on this barrier was split between community researchers. One CR felt that there was a potential class barrier between wealthier retirees moving into the local area, as well as limited social contact due to most retirees living within the Westgate area, and having different hobbies and interests. However, another CR explained that even residents who had moved into Castle Ward a long time ago were still perceived as ‘outsiders’ by ‘Scarborians’ who had grown up there and didn’t feel that this affected community contributions between them.

- There also some suggestion of **generational differences** and a perception that older people don’t trust younger people in the local area. However, one interviewee that had engaged with young people in activities reported positive outcomes: **“When you get to meet [young people] at meeting we all had a lot in common.”**

Male, 50-54

Contextual factors

- There was some suggestion that there is a lack of recognisable, **community spaces accessible to all** members of the Castle Ward community. Community activities (such as exercise groups and social clubs) are spread out across different venues, which some individuals may find hard to or not want to access. For example, one CR highlighted that the steep streets and limited transport options leading to the centre of the ward posed problems for people with mobility issues on the seafront. Several stakeholders at the workshops also felt that some people do not want to be associated with activities taking place within a religious centre, while at the same time being unable to afford transportation costs to attend activities outside of the ward.
- Some interviewees also had personal safety concerns due to incidents of **anti-social behaviour and crime** in the local area. For example, several interviewees were wary

of approaching individuals under the influence of alcohol and drugs or being out late at night. One female interviewee commented that such worries about personal safety also affected who she would feel comfortable offering support to: **“If I saw someone who was heavily under the influence of alcohol or drugs... [if they were] female I would be more likely to help.”**

Female, 55-64

- There was also a suggestion that **residential churn** had weakened social ties within the area. For example, short-term tenancies within social housing limiting how well people knew each other: **“With transient communities, people coming in for short periods, there’s not really a way for people to meet in the area... you need to talk and get to know people [to help each other].”**

Male, 50-54

7. Conclusions

7.1 Conclusions

Castle Ward is an area rich in community contributions between individuals. Giving and receiving support from neighbours was a key feature in many interviewees' day-to-day lives. And, while this largely consisted of simple, everyday tasks, there were also examples of people providing their neighbours with extra levels of support during times of ill health or after a bereavement. There were also many examples of people supporting others through local community groups and other indirect actions such as looking after the environment.

These community contributions were often underpinned by close relationships between individuals within the ward, facilitated by regular social contact through local groups and shared social spaces such as the market, seafront and headland, as well as shared issues in terms of anti-social behaviour and the effects of tourism on the community.




That said, interviewees, community researchers and local stakeholders all reflected on the challenges that people face in relation to offering help, receiving help and engaging with activities in the local area. Interviewees spoke of a wide range of personal factors that inhibit community contributions between individuals, as well as perceived differences that limited groups such as older and younger people from helping each other more.

7.2 Proposed routes-to-action

Traverse facilitated a **routes-to-action** workshop in May 2018 to ensure that the research findings were actionable and that the research would have a lasting effect within the local community. Participants included a wide range of local stakeholders with an interest in Castle Ward, including those from the council, local voluntary organisations, and individuals from the community. Using the research findings as a basis, two routes to action were proposed. It is hoped that those involved in the discussions may take these actions forward.

The #sayhello campaign




The first route to action is a public campaign that aims to reduce loneliness and social isolation through encouraging local residents to 'say hello' to their neighbour, someone they regularly pass in the street but never talk to, or someone they've never met before who may look lonely.

Short-term 	<ul style="list-style-type: none"> - Establish a working group to develop the #sayhello or #sayhelloscarborough campaign, including YMCA, Stronger Communities, NYCC's Living Well Team and the Centre for Ageing Better. - Identify a potential campaign week and recruit partners.
Mid-term 	<ul style="list-style-type: none"> - Run the first #sayhello or #sayhelloscarborough campaign. - Register local businesses such as coffee shops, public building, and pubs as 'I support Say Hello' venues. Staff in these venues would encourage customers to strike up a conversation with someone else.
Long-term 	<ul style="list-style-type: none"> - Capture and publicise success stories that emerge from the campaign.

This action is currently being taken forward by a group of local voluntary organisations and council teams.

Hyperlocal information ambassadors

The second route to action proposes that the voluntary and community sector works alongside local healthcare professionals to help them identify potentially isolated individuals and direct them towards activities and services within walking distance from where they live. Several stakeholders flagged that further development of this idea would need to examine how it differed from more formal social prescribing models, as well as its long-term sustainability.

Short-term 	<ul style="list-style-type: none"> - Scoping conversations with healthcare professional (e.g. Pharmacists, Doctors, Dentists) in the local community to gauge their interest and the feasibility of them acting as Ambassadors.
Mid-term 	<ul style="list-style-type: none"> - Sign-up and induct a cohort of healthcare practitioners on the scheme - Generate 'hyper-local' lists of groups and services that Ambassadors' can direct individuals towards.
Long-term 	<ul style="list-style-type: none"> - Provide ad hoc support to ambassadors (e.g. updating lists of groups and services on an intermittent basis to ensure relevance of advice). - Liaise with local authority services to include hyper-local information sheets within council noticeboards.



Appendix 1:

Detailed methodology

To understand if, how and in what circumstances people later in life currently contribute to their local communities and the various barriers and enablers they face, it was important that the research was **location-specific** and sensitive to local contexts. To achieve this, Traverse worked in collaboration with local stakeholders to recruit **community researchers**, who were members of the target populations, to conduct fieldwork, as they would be more effective at seeking out and gaining trust from research participants than someone external to the community.

The method used to locate and train community researchers, and ensure the quality of the research outputs, are listed below:

1. Choosing the research sites	<p>Locations for the research were chosen to give a diverse perspective on what local factors impact community contributions, including health, socio-economic factors, ethnicity, and whether the setting is rural or urban.</p> <p>Scarborough was chosen as an urban site located in a rural region for the research, with a high level of deprivation.</p>
2. Scoping interviews	<p>Once this site was chosen, scoping interviews were set up to better understand local contexts and build a relationship with local voluntary organisations to support the research in Scarborough. This included Community First Yorkshire and the Scarborough and District Stronger Communities Manager.</p>
3. Stakeholder workshop: Co-design	<p>The research in Scarborough was coordinated through the Falsgrave Community Resource Centre, who were also able to provide a location for meetings.</p> <p>Alongside the Scarborough and District Stronger Communities Manager, the Falsgrave Community Resource Centre were also able to identify key stakeholders from local voluntary organisations and the local council for an initial stakeholder workshop. The workshop was held in December 2017 (facilitated by Traverse), and helped to:</p> <ul style="list-style-type: none"> - identify key locations to conduct research; - suggest potential community researchers; - discuss expected findings and possible ways that the research will be mobilised.

4. Community Researcher training	Traverse offered training to three community researchers , covering qualitative research techniques, how to locate suitable participants, how to conduct interviews ethically including seeking consent, using a voice recorder and taking notes.
5. Midpoint review	Traverse facilitated a midpoint review with the community researchers and key stakeholders to ensure that the right people were being targeted for the research to discuss initial research findings.
6. Reflective interviews	The Traverse site lead invited all researchers to reflect on their experiences of the research.
7. Stakeholder workshop: Co-analysis	Traverse facilitated a co-analysis workshop to discuss overall key findings with community researchers and a wider group of stakeholders. These helped to ensure that the emerging findings from interview transcripts matches the expectations of community researchers and stakeholders.
8. Stakeholder workshop: Routes to action workshop	Traverse facilitated a routes-to-action workshop to ensure that all findings were actionable and that the research would have a lasting effect within the local community.

In Scarborough, the call for expression of interest in the CR role was promoted via the following local charities and community groups:

- Age UK Scarborough and District;
- Coast & Vale Community Action (CaVCA);
- Community First Yorkshire;
- Scarborough Council's Safer and Sustainable Communities Manager;
- The Inclusion Zone;
- The Rainbow Centre; and
- Yorkshire Coast Homes.

In practice, lead contacts at each organisation either approached their volunteers, or distributed a flyer outlining the role. Traverse worked alongside the first expression of interest to identify other potential community researchers.

The recruitment of community researchers took eight weeks, during which three female community researchers were recruited. No applications from males were received. All community researchers were well connected in the local community, had lived there for between 10 and 50 years, and were involved with a variety of local voluntary/community organisations.

	Gender and age	Ethnic background	Interviews completed
Community Researcher 1	Female, 50s	White British	6
Community Researcher 2	Female, 60s	White British	5
Community Researcher 3	Female, 60s	White British	5
Total			16

Community researchers were provided with training either face-to-face or one-to-one over the phone. Follow up conversations were held with each individually to: check on progress, address issues and challenges, and latterly to get a sense of the researchers' own reflections from their research. Information gathered during these calls was collected in a learning log which has helped to inform our analysis.

Information was also collected during all stakeholder workshops and has informed our analysis.

As part of the interviews, researchers asked participants to complete a 'diary' showing their activities on each day during a typical week; this was a useful tool for prompting participants to reflect on their weekly activities as a basis for identifying what community contributions they made or benefited from and generating discussion around this.

Reflections on the methodology

Working with community researchers brought significant advantages to the research. They had access to research participants who would have been hard to reach via traditional research recruitment methods. Their familiarity with local places, groups and people helped them to pick up on themes during interviews. Their embeddedness within their communities meant we could draw on their own insights to help contextualise and explain the interview findings and ensure that we interpreted interview data correctly in our analysis. However, the community researchers were conducting research for the first time, following a short training session from Traverse. To help ensure the robustness and quality of the data that they captured, we asked researchers to record their interviews (where participants agreed to it), and had regular discussion with them through telephone calls, workshops and interviews, to discuss findings and give further support.

It should be noted that one CR also felt that they had struggled to access people in need of assistance or local services, in part due to local services not wanting to recommend potential participants due to data protection issues. Consequently, she felt that the people she had spoken to were likely to be more independent and engaged with community contributions than others in the area.

Appendix 2: Community researcher reflections

- The community researchers attended the midpoint and co-analysis workshops and reflected on the findings and process. Their comments on the research process were as follows:
- Ahead of interviews, some interviewees wanted to be sure the questions wouldn't relate to their personal finances or wanted reassurance that the information they provided wasn't going to be used by the government
- Some interviewees initially struggled to understand and talk about community contributions and didn't perceive helping their neighbour on a day-to-day basis as anything out of the ordinary. However, community researchers found that interviewees became more confident in describing the ways that they helped those around them after completing the 'diary' that showed their activities during a typical week
- Using the interview guide was a learning curve, and the researchers found that the questions did not always flow in the most useful way as they went through the interview. This suggests that training for community researchers could include more focus on how to use the guide flexibly, and tailor it as the interview proceeds to collect key data while still allowing a natural flow of dialogue
- Several of the researchers commented that the research had given them an opportunity to speak with local people in the local area that they hadn't spoken to previously.

This report is available at www.ageing-better.org.uk | For more info email info@ageing-better.org.uk



The Centre for Ageing Better received £50 million from the Big Lottery Fund in January 2015 in the form of an endowment to enable it to identify what works in the ageing sector by bridging the gap between research, evidence and practice.