

# GROWING OLDER, BEING HEARD: MATURE CITIZENS, CONSULTATION AND PARTICIPATION

## DRAFT FINDINGS REPORT

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For further information or to comment on this report please contact:

Kate Davies: [cate.davies@hotmail.co.uk](mailto:cate.davies@hotmail.co.uk): 01273 516207

Elizabeth Harrison: [e.a.harrison@sussex.ac.uk](mailto:e.a.harrison@sussex.ac.uk) 01273 877350

Marian Barnes: [marian.barnes@brighton.ac.uk](mailto:marian.barnes@brighton.ac.uk) 01273 643960



**MERIDIAN MATURE CITIZENS FORUM**

**US** University  
of Sussex



**University of Brighton**

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The research team is:

### **Project supervisors**

Kate Davies, Glebe Cottage, Piddinghoe, Newhaven, BN9 9AS. Tel 01273 516207  
Meridian and Coast and Downs Mature Citizen's Forum, [cate.davies@hotmail.co.uk](mailto:cate.davies@hotmail.co.uk)

Dr Elizabeth Harrison, Senior Lecturer in Anthropology.  
University of Sussex, Falmer, Brighton, BN1 9SJ  
Tel 01273 877350, email: [e.a.harrison@sussex.ac.uk](mailto:e.a.harrison@sussex.ac.uk)

Professor Marian Barnes, Professor of Social Policy, School of Applied Social Science,  
University of Brighton, Mayfield House, Falmer, Brighton, BN1 9PH  
Tel 01273 643960, email: [Marian.Barnes@brighton.ac.uk](mailto:Marian.Barnes@brighton.ac.uk)

### **Project researchers**

Elizabeth Harrison, University of Sussex  
Eve Mundy, University of Sussex  
Chloe Wincott McGrath, University of Sussex  
Marian Barnes, University of Brighton  
Kate Davies, Meridian Mature Citizen's Forum  
Margaret Whiting, Meridian Mature Citizen's Forum  
Eileen Wood, Meridian Mature Citizen's Forum  
Gill Hart, Meridian Mature Citizen's Forum

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# SUMMARY

## THE PROJECT

The Meridian Mature Citizen's Forum is carrying out research to explore the lives, priorities and experiences of consultation of older people in the 'Meridian' area (Newhaven, Peacehaven, Telscombe Cliffs and East Saltdean). The work is being carried out in partnership with the Universities of Sussex and Brighton.

This document outlines the findings from the first phase of the project, in which 61 older people in the Meridian area were interviewed by 'teams' comprising a student from the University of Sussex and a Forum member. A second phase will involve consultation with key policy makers and promotion of the findings.

## GROWING OLD

It is not always chronological age that determines how people feel about themselves and how they want to be engaged. Most Forum members interviewed do not see themselves as old. The 'young old-uns', distinguish themselves from 'other' older people who may be seen as in need of pity, or in some sense to blame – because they have effectively 'given up'.

The relative youth of Forum members (chronological or psychological) is reflected in their activities – a wide range of sports, from belly dancing to rambling and badminton, and in high levels of social activity, particularly travel. This group is also distinguished by being in fairly good health, something that is usually attributed to diet and exercise.

But the comments about 'other' older people also highlight the way in which old age is viewed negatively. The negative aspects of ageing people spoke of were associated with ill health, reduced horizons, limited mobility and bereavement. Descriptions of failing health illustrate how this can come to dominate people's lives, particularly when this involves pain and failing hearing or sight.

A strong theme emerging from the research was the importance of intergenerational relationships within families. Most report strong and positive relationships, but for many these are also at a distance. People stay in touch with phone and email, but this does not mean that they have day-to-day support. For those who are married, changing care needs of one partner can result in tensions. However, there is strong positive support between many married couples.

## GETTING ABOUT

About half of those we spoke to have cars. For these people, their cars are extremely important for their independence and several speak of the prospect of having to give them up as something daunting, to be dreaded. Some spoke of the help they provide to others in getting about.

Public transport users are fairly equally balanced between those who are content with services, and those that are not. The free bus pass is applauded by many for the additional freedom it gives. There are several comments about under-use of taxi-rider and the community bus, most indicating ignorance/a lack of information

For those who can no longer drive, do not have cars, or have problems using public transport, support to volunteer driver schemes may be an important solution.

## **HEALTH AND SOCIAL CARE SERVICES**

People speak highly of their GP services in general, but complain about lack of continuity of care in large group practices. There are a great many negative comments about problems in accessing hospitals because of cost or availability of transport, or because of poorly timed appointments.

For those who need home care, or have needed it in their role as carer, there are mixed experiences. Again, continuity of care can be a problem. Also, several indicate uncertainty or ignorance about what may be available. Specific charities get positive mention, but there is a general sense of a lack of information and uncertainty about how to go about accessing care.

Very few people we spoke to use day care centres. Attitudes to these vary from them being the focus of an individual's social life, to pejorative statements about other users within them.

## **FINANCIAL SECURITY AND HOUSING**

We did not set out to discuss economic and financial questions with our respondents. However, when talking about housing, particularly thoughts about the future, these issues did arise. Seven of our respondents referred to financial insecurity. Most of these are women with inadequate pensions. Among those who do not stress insecurity, there is nonetheless a theme of frugality and the need to be careful.

The majority (45) of our respondents own their own homes. For most of these, the future is seen with a degree of trepidation and reluctance to countenance anything that seems like sheltered accommodation.

Among those who are currently in accommodation that is designed specifically for older people, there are significant differences in experience. In a development of privately owned flats, the layout is conducive to high levels of social contact between residents. In a different, older, scheme, owned by a Housing Association, contact among residents and a sense of community appears to be more limited. Design and layout may also be a factor in this.

## BEING HEARD

One of the key themes we explored concerns what older people think about their experiences of being heard up to now. This is not a positive picture. The vast majority of responses indicate cynicism or a belief that having a say has very little effect because decisions have effectively already been made. There are differences of emphasis and strength of feeling, and differences in terms of whether people stress their own sense of insignificance (*who am I anyway?*), the duplicity of officials, or the general difficulty of achieving change. But the overall message that *it's all a foregone conclusion* is a powerful one.

It is also important to consider what issues concern older people and are likely to prompt their involvement. The Meridian research indicates that such issues are not (primarily) the very immediate experiences of poor services or treatment that motivate many users of health and social care services to get involved, nor are they (primarily) indicative of a strong sense of injustice related to the experience of growing older. Rather they relate to dissatisfactions with the ways in which changes are taking place in particular areas and with the absence of any real possibility of influencing this. The majority of issues that promote action/opposition are location-specific (such as housing developments in Peacehaven/Telscombe and the incinerator in Newhaven). Whilst, in both places, concerns associated with healthcare are important, older people have broadly based interests and concerns about the environment they live in, the relationships between generations, and the way in which social, organisational and environmental changes impact on their lives.

## PLACE AND COMMUNITY

It is therefore very important to listen to the way in which people talk about the places in which they live. Newhaven residents speak eloquently about the negative changes that have happened to the town, frequently using the metaphor of death to describe the loss of shops, the loss of industry and so on. However, they are also extremely loyal and attached to Newhaven. Behind this is a strong sense of community and history. The Hillcrest Centre is seen as an important manifestation of this sense of community. For Peacehaven and Telscombe on the other hand, the lack of community is the focus of many comments. Peacehaven is described as a 'Cinderella town', with nothing to do, Telscombe as a 'nothing place'.

In contrast to many areas, in neither Newhaven, nor along the coast towards Saltdean, did crime, or fear of it, emerge as a particularly significant concern. Only one person spoke of security in their own home as being a problem.

The issue of inter-generational relationships is important for many people. What emerged as a concern was that there are limited opportunities for contact between generations, leading to an absence of understanding. Some older people see younger people as in some ways problematic (incomprehensible, rude, wanting too much), but an equal number made positive comments about young people.

## THE PROJECT

Meridian Mature Citizens' Forum is one of six that have been established with the help of East Sussex County Council as part of its Older People's Involvement Strategy (ESCC 2007). The establishment of senior forums nationwide is part of a more general prioritisation of improved participation of citizens in policy and decision-making and partnership with diverse civil society organisations. The Meridian Forum covers the towns of Peacehaven, Newhaven and Telscombe Cliffs and East Saltdean as well as some of the rural parishes up the Ouse Valley. It aims to:

1. promote the interests and welfare of older people in the Meridian area;
2. provide a platform for matters of concern for older people;
3. act as an umbrella organisation in making representation to public and other bodies.

A research project is currently being undertaken by the Meridian Forum with the Universities of Sussex and Brighton. It is supported by the Brighton and Sussex Community Knowledge Exchange (BSCKE) and runs from July 2007-March 2008. During the summer of 2007, mature citizens in the Meridian area were interviewed by 'teams' of a student from the University of Sussex and a Forum member. These interviews discussed people's priorities with regard to health, transport and housing. They also reflected more generally on mature citizens' views about growing old, and on their experiences of consultation. The interviews provide a rich picture - one which the Meridian Forum will be able to use as it plans for the future.

A second phase is now exploring the implications of our findings. This has two objectives: first, to inform discussions among relevant service providers; second, to examine the processes of consultation for older people across East Sussex. How meaningful are they and how do they work?

The project is important for the Meridian area itself and for the Forum, but its lessons may have more general impact. East Sussex has a higher population of older people than the national average – at 27% it is about double the national figure and this creates a good opportunity to explore different means by which older people might have their say. It also highlights the importance of being able to create an environment in which it is possible to live a good old age.

### Research participants

All members of the Meridian Forum were invited to take part in the phase one interviews and 45 out of 180 people volunteered. In addition, a further 16 non-Forum members living in retirement housing were interviewed. Of the total of 61 people:

- 43 are women and 18 are men
- 30 live alone and 31 with a spouse/partner.
- 38 live in Newhaven, 19 in Peacehaven/Telscombe or Saltdean, and 4 elsewhere (Piddinghoe, Iford, Seaford)

- Seventeen interviewees are 80+; 27 in their 70s, 15 aged 60-69 and 2 in their 50s.
- Most are in fair to good health, although 8 have poor health.

## GROWING OLD

### Chronological age and being old

It is not always chronological age that determines how people feel about themselves and how they want to be engaged. The relative youth (chronological or psychological) of many of our respondents is reflected in their high levels of social activity, particularly travel. This group is also distinguished by being in fairly good health, something that is usually attributed to diet and exercise. Most Forum members we spoke to do not see themselves as old:

*I don't feel like an old ager but it creeps up at you and you think crikey, I'm 65 now and I think god, time is passing so flipping quickly. Too quickly (18-1)*

*But you try to get anybody to go, Age Co , oh no not likely, I am not going to be seen to going into a place like that, because they think it is a place for older people (10-21)*

*Quite honestly my dear I don't feel no older now than I did when I was 50, quite honestly (48-14)*

*R. Just don't grow old. I shall never be old  
I. Can you elaborate on that a little bit?*

*R. Just don't do it, if the spirit's young that's it. I shall still play the guitar tonight...(29-11)*

*[at Kempton House] I served the lunches; I didn't have the lunch myself. And here you can tell, I freely admit, I'm an unconscious snob, and I didn't think I was old enough to go and sit down with these older people, they were all probably my age my I didn't think I was as old as them. (37-9)*

*I don't want to end up in one of those electric scooter things that old people go about on (18-5)*

*Oh please don't go there, I don't want to think about that yet. I'm a young chick yet, aren't I? (11-10)*

However, the stress on youth and on the importance of active ageing can be oppressive for those for whom old age is accompanied by health problems and other physical signs of the ageing process:

*I don't think, I mean I'm looking forward to getting grey hair because I don't think I look particularly old really, and so, you know, I don't look the age to be decrepit anyway, you know, and I am. And I think if I got grey hair people might appreciate that I'm old, and not expect me to do more than I can do, and people can't understand why I wouldn't go swimming ...(19-5)*

As the comments about the role of the Forum above also indicate, the 'young old-uns', distinguish themselves from 'other' older people. Some of these are seen as in need of pity, 'frail', 'isolated' or 'vulnerable'. Respondents who are Forum members speak about the need to find ways of helping these people. But there also several comments from those who see them as in some sense to blame, because they have effectively 'given up'. They see the entry into this frailer and more vulnerable state as partly a matter of choice:

*So you know I think it's what you are; if you want to curl up and go under then that's entirely up to you isn't it (48-14)*

*Trouble is people get into a rut and it takes a bloody great bomb to shift them out of it, you know (55-6)*

*I suppose because I see people who seem to degenerate so fast in old age, and they sit at home and moan about being old, and the friend I speak of is only 70 which...you know my father's 86 and I don't look at him as old because he's active and out and about. And this chap gets out and about but he's, he adopts the 'we old codgers'. You're not an old codger, you're not 70 yet! You should get up and get going, you know. But I think I dread being like that (59-4)*

*No, I'm a young olden. Well you see people in these places are a lot younger than me, but to see them they're older than me because they make themselves old (52-3)*

'Other' older people are also criticised by some for being petty and for having a limited viewpoint. One person told us that when older people get together in groups they tend to be very parochial in their discussion of what matters to them.

*When you get a group of people together – this is true not only of old people but particularly when they are older people – they are only concerned with their immediate problem, and they talk about 'my father' or 'my mother' or 'me, when I did this' (37-11)*

*Well I think it was looking at people and thinking God, I'm going to be like that in the near future. And when I say I don't want to be, I know it's kind of going to happen, but at the same time I don't want to be in a situation where I'm sitting in a circle, all talking about your aches and pains and your ailments (41-6)*

## **Activities**

Only four of the people we spoke to are still in formal employment; most describe themselves as 'retired'. However, about two thirds are active in some form of voluntary or community work that takes them outside of the home. Of these, several devote many hours a week to their volunteering and work in the community. There is a great deal of variation in this, from prison visiting to neighbourhood watch, to work with young people. Many people do voluntary work with other older people. As one 86 year-old told us:

*I'm out this afternoon with Mothers Union, we're going to Seaford to a nursing home, paying an afternoon visit to the ladies and gentlemen in the nursing home, sort of give them some outside contact (57-3)*

Beyond this voluntary work, the majority of the people we spoke with continue to have an active social life. The forms this takes are also highly varied, but certain themes dominate. Churches form an important focus for sixteen of our respondents – as a place for their social interaction in their own right, as the mechanism for volunteering, as well as for more spiritual reasons. Others undertake physical activities such as sport, dance, rambling and swimming. Still others spend their time in educational and cultural activities; going to the theatre, on organised trips, artwork. For many, gardening is an important recreation – and a means of staying fit.

Seven respondents are members of U3A. One said she would like to be but it is too expensive. One respondent said she found their meetings very disappointing on an intellectual level. At least two joined so that they could go on trips, for example to Glyndebourne. Two respondents have previously had professional careers in education. Two talk about having gone on computer courses. One describes initial fear followed by a sense of achievement after mastering spreadsheets.

*I went over to Learn Direct up at Peacehaven, and I'd moved on and I wanted to do Excel, and get my certificate, which I did do, and the next lady came along bless her and she was about 80, and I was sitting there tapping away feeling all cock-sure of myself, and she come along and just started with a mouse, and she was exactly how I was – petrified of that mouse and how to get it to there, and it was really interesting to see, hey, that was me (11-18).*

However, the other is less positive, saying that she went on a computer course over on the island, but still doesn't know anything (17-7)

Although many of our respondents are active, fewer are 'activists' in the sense of being involved in political or oppositional pursuits. Two people have been involved in formal politics as councillors and one is a former Mayor. One said that he was 'union man' in the past, but that he hasn't been politically active since moving to Peacehaven. In general, the experience of being on committees, or of taking part in formal consultation and participation is limited to a few respondents. These people tend to combine high levels of engagement (usually being active in more than one context), with articulate and forthright views on the changing nature of society.

As people get physically infirm, then day centres may play a bigger role in their social lives, but there is some ambivalence about these. Some people indicate a reluctance to attend because they make them feel older:

*No, there's a Friday Club and there's a Monday Club, I think they call it, which the elderly people go to. No, I went to the Friday Club 3 or 4 times and I came out feeling about 20 years older than I am now. No, it's not for me. I don't like playing Bingo and I don't want to play card games, I'm really not...it's not my thing. I'm not saying there's anything wrong with it for the people that like it, it's just not for me (41-5).*

On the other hand, for some, getting out, for example to Kempton house for lunch and bingo, is an important and valuable part of their weekly routine.

## Growing old – positives and negatives

The comments about 'other' older people also highlight the way in which old age is generally viewed negatively and anticipated with dread. Among our respondents, there are a few 'pragmatics' who say you have to be realistic and make plans for the future: *I don't want to move, but I shall have to when I've got all dodderly* (40-4). Some also make fairly fatalistic statements: *the holidays have finished* (43-22). A very few speak positively about growing old.

*Yeah but my view is yes we'll go to the ground floor, we will carry on doing our gardening, we will carry on living in the flat and cleaning the flat, we've got grandchildren and children and we've got great grandchildren coming along and I can't see my future changing all that much. I shall probably get more decrepit and I'll probably get this, that and the other. 'Oh me mother's getting old you can tell, look at her', you know this sort of thing* (32-25)

*I often feel that, as you get older, you don't want as much, out of life, you know? Yes, we do like to do things - we can't always do it because we haven't got the finances and, like now, I can't do it because I haven't got the mobility to do it but otherwise I would say that I am happy and contented. There's nothing - if somebody said to me what would you really like - the only thing I would really like is a view of the sea and that's it.* (32 – 1)

But the pragmatists and the positive comments are in a minority. The overwhelming message that comes across is that ageing is to be dreaded. The negative aspects of ageing people spoke of were associated with reduced horizons, limited mobility, bereavement and ill health.

There are several general comments about the problems of adapting to old age, including having to get rid of treasured possessions because of moving to smaller accommodation:

*And so...what do you do with them? And it's sort of, things that survived the war, that were my mothers as well, it sort, I can't chuck them out now. I have sort of contemplated the fact that perhaps if I set fire to the house, Possible...[inaudible]... resolving the problem. But it really is, which is why really, yeah, a one bed, one room, kitchen, bathroom, sink probably would be best for me. Why don't I just wilt away and die..... It is smaller and smaller and smaller and it is a bit sort of like Alice in Wonderland really. But it is tough knowing what to do with things. Because so much does have an emotional tie.* (13-18)

There are numerous individual examples of increasingly reduced horizons, particularly associated with mobility, but also with sight and hearing considerations. As one person points out, service providers need to recognise that what may appear unimportant to them may in fact be very important for an older person: *...the more limited your life becomes the larger issues become*(14-3). Examples of this include being unable to go shopping to choose ones own biscuits, not being able to see the upstairs of the house until the stair lift was put in and not doing the garden any more. There are several examples of things that are no longer done because of reduced mobility. These include going out to local groups, shopping further afield, attending U3A, and going to the cinema. For several, these kinds of limitations are also what they dread about impending old age.

## Ageing bodies and minds

Older age is most strongly seen as a negative thing when this is linked to poor health – and poor health helps people to feel older. Much of the sympathy for ‘other’ older people relates to their health problems and fear of these when people are themselves still in good health.

*Most people have quite a few years of deteriorating health. I mean that's my experience of the old ladies and things that I know in the church, because of course the old men aren't even there (19-8)*

Descriptions of failing health illustrate how this can come to dominate people's lives, particularly when this involves pain and failing hearing or sight. Many comments refer to the pain of arthritis, to back pain and to osteoporosis. Four people talk about mental health problems, for themselves and for those they care for and, for some, dementia and other mental health problems cause the greatest fears about old age. The following quotations illustrate a small proportion of people's struggles with their failing health.

*I think I've had minor, minor, mini, mini strokes since then, I think I have. That's why I say I have holes in my head, you know? I have blanks, actual blanks, and I sit and I try like anything, and eventually hours later or even days later I'll suddenly remember (49-6)*

*I'm suffering from fibromyalgia, which is inflammation of the connective tissues to my knees, joints and everything and I'm in a lot of pain with them some of the time, especially at night when I'm in bed and I've been on a course of pain killers which did help in the beginning but now my body has got used to them and they're not working (18-4)*

*But as I'm getting older now, all my left side is very, very weak and very, very painful, and I'm beginning to think – like all people, or older people – you know, it gets more difficult. Because I've had these 2 spine operations it's painful, really painful (11-7)*

*I feel health problems are a real ageing thing for me. But then that's not the view of people who are fit, is it? Older people who are fit. Because I read these things, Saga are always sending me things and they're saying things like 'people say you're old at 50 or old at 60' and things like that, and 'you know that's not true, it's a whole new lease of life and you've got these holidays you can go on' and I can't, even if I had the money I couldn't....So when I read these things... you often hear that said, don't you, that 60 is just the beginning of a whole new life. Because I've got these health problems I feel quite the opposite. 19-5)*

*And I've always said to my children if ever I get like your grandma please give me a box of Smarties with some tablets in because I don't want to live like that. It's too, too traumatic on the family - not on the person who's Alzheimers because they don't realise but, the family, it's terrible to watch (31-10)*

If old age per se is not to be anticipated with dread and denied, then we need to be ensuring that these consequences of ageing are compensated and their negative impact reduced. We cannot expect everyone to remain active throughout their old age,

but we do need to think about how it is possible to enable positive experiences within reduced horizons. Ensuring positive social contacts across the generations could help.

## Relationships

We talked with people about their relationships – both with family and with friends and neighbours. We also touched on the difficult subject of being alone and loneliness. Not all who are alone are lonely – but most are. Those who are ‘happy with my own company’ are relatively few. These are some of the most poignant comments in the interviews.

*If you sent out a questionnaire with those questions on you would probably get 'broke and lonely!' (13-17)*

*I don't see anyone else much because I'm inclined to shut myself away because I'm so deaf (26-5)*

Loneliness is connected both to bereavement and to physical limitations (such as deafness and mobility problems) or having a role as carer. Several people talk about a curtailed social life following bereavement and the increasing fear that it might be themselves next.

There is a suggestion from some women that men may suffer from this more when widowed because they have not developed such a wide range of social contacts when working:

*I had an old neighbour, his wife died, and he just went, you know, he didn't look after himself, he didn't eat, and he literally sort of just died because he didn't know what to do. I don't know, I mean that's quite a few years ago now, but I think a lot of men are like that, I don't think they've got friends like women have. They might have one mate that they go, if they go drinking they're alright. But if they're not drinkers and socializers then I think they are quite lonely (56-10).*

For many of our respondents, the practical and emotional support offered by family, friends and neighbours is invaluable. Comments here focus on the benefits of age groups mixing and of families having fun with each other. There are a relatively few reports of ‘abandonment’ as a result of weaker family bonds and a great many about the positives of relations with children and grandchildren. However, much of this can be contact at a distance – staying in touch with family who are far away, so there may be problems in assuming that family can also be responsible for day to day needs as people get older. People use phone and email to stay in touch and that this is often with friends and family who live far away. There is a fairly equal balance of loving and hating email and a widespread use of the phone.

Not surprisingly, the importance of friends and neighbours and their role in giving support, is closely associated with other comments about community and place which are discussed below. The character of individuals is also important – some people describing themselves as very sociable – and the opposite.

Several of the interviews show how couples find their relationships changing as one partner needs greater care. Most accept this without complaint. However, the

adjustments for those who care for people who are become less physically capable can be very difficult, especially in cases of extreme dependency:

*Do you get any respite?*

*No, I can't do that because he's absolutely bonded to me and he would seriously collapse if I wasn't there (26-6).*

Caring can also in turn be linked to increasing isolation:

*I found in my own instance you see, that you are so involved looking after that person you haven't got time to do anything and you can't go out anyway. I used to think sometimes, whatever is gonna happen when xxx goes, because I've lost touch with everything now, because of being housebound with him and that sort of thing. And people don't come. (10-14)*

Equally, in couples where age differences are significant, there can be tensions, especially if partner one is still formally working and the other not:

*I am the fly in the ointment, he's very active (33, pt.15)*

## **Reflections on changing society**

Many of our respondents speak eloquently about the ways in which they see society changing. Most of these comments are negative; concerning declining moral standards, a lack of society, lack of discipline, family fragmentation, problems in parenting and the relationship of this to technology.

Relationships with younger people are an important recurring theme. Comments on these reflect both attitudes to younger people and broader comments about understanding and contact between younger and older. In the former, there is a fairly equal division between those for whom younger people are seen as problematic and those for whom young people and interaction with them are important and positive. Positive comments about younger people focus on delight in their company, the importance of listening to children and on the helpfulness of younger people. Among the more negative views, comments highlight changes in attitudes and behaviour from when respondents were younger. They talk about a lack of respect, young people being rude and wanting too much. There is also a sense among some of distance and incomprehension, particularly regarding computers and technology, which are seen as being for younger people.

*But a lot of the teenagers in town don't seem to have a purpose in life, so they isolate themselves, and they indicate this by walking around with hoods on when the sun's out, you know (29-9)*

When it comes to intergenerational understanding, there is a fairly strong sense that there is too much separation of generations:

*.in actual fact old people and young people do get on really, teenagers aren't actually averse to silly old fathers, and get on really well with them, and all we get now is total segregation and any old person who approaches a young person is called a paedophile or something like that, which is heartbreaking really (47 -7).*

*Well I think, mum and dad used to say you know they don't want to live in our time as kids. Now as regards me and the boys and the grandchildren I don't want to live in their time, it's not the same world (55-8)*

Several respondents compare this to elsewhere (continental Europe, Nigeria, 'Africa'), where, they claim, there is both greater integration between generations and greater respect by the young for the old.

The argument is made by several that parents of young children do not have enough time for them and may use the television and computers as babysitters. Children are said to have an increasingly difficult time because their parents are too busy. This is seen as the cause of poor behaviour among children.

*Yes, an awful lot of that is lacking; parents do not have the time. And we now have that wonderful box in front of us, which again in the 50s we were always very lucky we had a telly, the majority of my friends didn't have a television, and of course today everybody has a computer. So it is very easy to sit a child in front of a telly or a computer and let them get on (20-8)*

*I think they have a rough time these days really. They don't have a, I mean, I had a mother who was at home for me all the time. Myself and my sister we always had a home to come to, a mother who was always there for us. It makes a difference, so many children, they don't have that do they so much today, parents have their own interests and work and things like that, trying to juggle everything, I think it's a very hard time for children (26-19)*

*Yes, definitely, there was more support, because families stayed together. We've got the fragmentation of families now, young people move away, they don't live in the same place. Anyway, if there's no housing there for them, they've got to move, haven't they? No jobs, because we suffer from a lack of jobs here, allegedly...I mean we've got quite a bit of light industry but apparently it is difficult to get work here, so young people move away leaving their aged parents behind, and there isn't the support (46-7)*

Two people mention what they see as ageism – that they are badly treated because they are coming to the end of their life, or seen as an inconvenience.

*R. I just feel we're at the bottom of the pack because you're old*

*I: Who's we? Do you mean older people?*

*R: Yes, of course, I'm sorry. Yes, and you're an inconvenience rather because you've come to the end of your life and you'd better hurry up and push them through the door. It's a wonder they don't have a room, you know, you're 65 In/Out. The only people that would be pleased are the undertakers, that's the trade to be in, isn't it? I do feel we're bottom of the pack (17-26)*

## GETTING ABOUT

We talked with people about how they get out and about, what this means to them, and the effects of growing old on their ability to travel. About half of our respondents have cars and, for many, they are very important for independence. Those that are using them see the prospect of giving them up as something daunting that will result in the narrowing of their horizons.

*Oh it would be murder if we didn't have a car, that's what I was worried about when they said I was diabetic (48-5)*

*I think my concern mainly is mobility, I think. I don't know but I just feel that life changes so much, in terms of not having corner shops and things, I think the group of people who will suffer the most are people who give up their cars, you know. If we gave up the car, you know, we used to do it all by bike, but when you get a bit older it's not so easy, and I think the whole of the structure of modern life is really...makes older people very vulnerable indeed, in terms of shopping and things like that (47-3)*

For one person, her car provides refuge as a place in which to take pain relief pills when out shopping. For others, use of their car is becoming increasingly reduced, either for cost reasons, or because of problems with traffic/parking

People also talk about the community transport options on offer. There are several comments about under-use. Some also say that they do not have enough information. A question is raised by one man about resistance because of a concern that it will put taxi drivers out of work.

There is a fairly equal balance between negative and positive comments about other public transport. The negative comments about buses and trains generally reflect on frequency and suitability of routes, but also on things like buses jolting when setting off/stopping. The majority of complaints about routes concern rural routes – especially to Lewes and to and from Piddinghoe. The trains are thought to be good by those who access them, although there is one complaint about the station in Newhaven (no parking, nowhere to wait, poor access). Urban routes are generally seen to be quite good. The positive comments about buses/trains generally reflect what they offer in terms of getting out and about.

*I think we're really well served, I do say Newhaven...I go to Brighton and Eastbourne all the time by bus, there's one every 10 minutes in the summer and 20 minutes in winter. And I went to Hastings by train on Thursday and it was wonderful, it went all along the sea. I bought myself a pensioners railcard now, and I find public transport...I know it sounds silly, but every journey now is an adventure (61-4)*

The free bus pass is particularly popular:

*Best thing I think we ever had was the free travel it really makes a difference to me, I can go out and about now go shopping, do my photography and I don't have to worry about the money (26-2)*

*... the free bus pass from our point of view is a Godsend because I know of 2 or 3 people who for an afternoon out just go along the coast road to Eastbourne, have a cup of tea, get on the bus and come back again (55-21).*

However, at least one person is critical of free bus passes, arguing that this subsidy takes resources away from older people who are not able to use public transport. Some suggest that disabled people who are no longer able to use public transport should get a special allowance.

Overall, many people describe the effects of limited mobility, which are closely related to physical health. These are in turn associated with problems in using mobility aids – getting walkers on buses, for example, and sometimes of reluctance to use them.

*I have large scooter, but my, I, since I, in the last couple of year I have developed osteoporosis as well and I have a spine...several...multiple fractures, so I can't go very far on it. At the moment I am trying to find out about a small one that would allow me to go by taxi most of the way, say to the Meridian even, and then for them to get out the little portable scooter and then I can tinker around on that. But you still need somebody to get you from A to B to get to see C, from C to be B to A (13-5)*

A few people talk about more limited horizons, missing going out into the countryside, loss of activities, not really seeing the area one lives in:

*I haven't really seen Peacehaven at all (13-1)*

*Yes, it's not being alone, as such, it's not getting out that would really bother me ...Independence and mobility are the 2 things which worry me most, and don't just worry me but it's something that I see as being important to old people, all the other old people that I know and come across. Independence and mobility seems to be their main problems. (29-10)*

*I do miss seeing the world, you know, however small it is (13-20)*

What is significant here is that, once mobility becomes restricted, especially when people no longer feel able to use public transport, the effects on their horizons are personally very difficult. Support to volunteer driver schemes, providing flexible help for those who can no longer drive or who do not have cars, may be an important solution.

## HEALTH AND SOCIAL CARE SERVICES

As people get older and health problems increase in significance, the quality and timeliness of health care services obviously becomes very important. These are obviously closely linked to wider support services, both at home and in people's roles as carers. All of these were discussed in considerable detail.

### Healthcare

There is a big difference between comments about community based healthcare (GPs etc) and hospitals. Comments about the services provided by GPs are overwhelmingly positive (at least 18), particularly from the Newhaven respondents. There were only five negative comments about GPs. People seem particularly happy when they feel they are treated as individuals and with respect:

*They're lovely people down there, I think they're wonderful down there, really brilliant, you couldn't get better. Very, very helpful they are. (11-6)*

*She is very nice, you feel that she really is interested, because when you go in and talk to her she doesn't mess about anywhere, she turns her chair to look at you and she is really nice, she is really a nice person, and you feel you can talk to her and tell her anything, you know (62-4)*

Where comments are negative, they focus on the fact in group practices, there is a lack of continuity in which doctor one sees. People want a relationship with the same GP and this is not possible. There is also a sense that doctors don't always have enough time.

*It's a bit of a lottery as to who you get. If you're in a group practice sometimes the one you normally see isn't available so you get another one. We're in a group practice, well it's the Meridian Surgery and they seem to vary each month, I think there's about half a dozen there (44-7)*

When it comes to hospital care, comments are less positive. Criticisms tend to be about specific failures – waiting for treatments, conflict with a consultant and so on. People also note gaps in service provision in particular areas that affect them personally: for example, Alzheimer's support, physiotherapy, chiropody, dentistry, eye care. There are some positive comments about short waiting times for operations.

Negative comments about healthcare tend to reflect views that 'the system' is the problem, rather than, for example, medical staff. The system is too big and unwieldy, bureaucratic and so on. Some people perceive they are being 'pushed from pillar to post'

*No, it's not the medical staff, it's the system. That's the problem, it is the system, and the people who should be logging in, sorting out. The doctors are fine (20-15)*

*I think this is what we were saying at the Royal Sussex, it's become too big, that's why the system is going so (wrong?) because of the size of it. I think in a lot of areas things are becoming too big and too un-wieldy (20-19)*

While comments about standards of care are generally positive, there is a very strong message that people find access and transport to hospital very difficult. This is an important recurring theme, especially regarding timing of appointments and the links to public transport (or lack of it).

*Principally because our age, we are becoming a little bit more fragile, we're not so mobile and we really need facilities i.e. health centres closer to hand, not miles away like they're trying to do. I mean I have had to pay visits to Queen Victoria Hospital at East Grinstead for 8.30 in the morning (4-14)*

*One of the biggest troubles with the hospital – there's nothing, we like Eastbourne hospital, the staff are excellent – the only thing is, is getting there. From here if you haven't got a car you have to get 2 buses and it takes an hour and a half to get there. Now there is a system whereby you can ask for public, you know, transport. But we belong to the surgery in Seaford, and they're volunteer drivers, right, and they only work from 10 til 3. If it's going to come back after 3 they don't want to know (5-3)*

There are also some specific comments about the shift of Peacehaven doctors to Downlands – making this much more inaccessible.

*– if you live up here and you're not able to walk or the weather's bad, you have to get a bus from the Meridian, and then you've got to walk to the coast road, catch a bus along to Downlands, to walk back up so you can get to the doctor's. Now if you are not well....(23-7)*

Also, for one person, there is a lack of information in NHS about what 'alternative' practitioners do.

*Yeah, I mean I wanted to go, what you call them, not a chiropractor, the other one who pulls you about, osteopath, because of my knees, my legs, I thought perhaps that might help and my husband used to have one that was in the Brighton Road but he's gone now and I found the nearest one was in Peacehaven. Anyway I went there and it didn't turn out at all as I expected it to. I forget what you call it but I had to lay down and he put these coloured things on there and he held my leg up and he started talking to my body, asking it to heal itself and that and all things like that, you know, and then he said my body was deficient in a certain mineral and then he said I was allergic to wheat and to go on a wheat free diet, which I did do, and I found it really difficult, for a fortnight and I paid him over £50 odd pounds for that and none of it seemed to work so I didn't bother to go back and I told Dr xxxx about it and he laughed and I said you know, I didn't know who to go to. So he said well, if you go into Lewes, in Fisher Street, I forget where it is, to do with the health department, there is a whole list of people that you can choose to go to. I didn't know that and they ought to have a list of these people in the surgery (18-7/8)*

## Day care centres

Day centres can be an important source of social support for people who have limited social contact. There are a few comments on specific day care centres, including the Hillrise centre, Age Concern and Summerhayes. The Crossover Christian Charity in Newhaven is spoken highly of by those that use it.

*...and Crossover, of course, is the Christian charity on the church and I often drop in there, and they're elderly people. But I, what I have done, because I live on my own, is go to the free Christmas lunch for the last 2 years which is at Elim Church, which is mostly elderly people, so I do get on with the elderly people and I know them all. But that is run by Crossover which is excellent for people on their own, we get an excellent Christmas lunch and a film (61-2)*

However, as the majority of those we interviewed still retain their own family and social contacts and many are still active in various ways, the use of day centres is linked to the general distancing from 'other' older people. Consequently, some people speak disparagingly of them:

*Don't think I'm stuck up or anything, but as drop-outs go down there and that, not my sort of cup of tea, none of us go down there, no, no, just don't like it. I mean if...sometimes they have a tea, like, or an open day or something, then I go down and sort of represent the people here, which I think one of us should because they put leaflets in all our doors, but you can't find any of these'll budge and go. They won't go down (52-2)*

## Support at home

When it comes to home care, a distinction can be made between those for whom this is not yet an issue (including those who are explicit in saying that this should be for those whose needs are greater than their own), and those who are in increasing need. Among these, some pay for cleaning/gardening help and a very few – only five - receive home care provided by the local authority. Among these, continuity of care can be an issue:

*R: So I meant that I am sitting down here in the morning from sort of 8 o'clock to sometimes 10 'clock waiting for somebody to come and just sort of. I can't relax, and you don't know who is coming, and what they are like, and you have to sit out in the kitchen anyway, and, it's there, there, there, there. You even have to have labels on the doors, which I did. So, it, that's on paper another thing as anybody who is sort of experienced in the field of life knows it is one thing on paper and it is another in practice.*

*I: Have you ever tried to explain this?*

*R: Many, many times. There is another meeting here on next Monday, between somebody from the company and a social worker. This will be about the fourth, but you have to be careful because otherwise they can take it out on you. And even the carers have said that you have to be careful because you notice the more some people ask for the same carers the more they will get different ones in. Yes, and that's a carer saying that he has experienced that (13-13)*

The same person describes the limitations of the support that she gets from social services:

*I get one hour, it is supposed to be an hour and a half to take me to the Co-op to shop, but you have to be assessed. And, I have been waiting eight weeks to be assessed, and it doesn't look as if it is going to happen anyway. Because somebody dashed in and says lets do your shopping ...inaudible... She does your shopping for you. She doesn't. I have no idea of what is in the, the shops these days. I haven't a clue! It would be nice to be taken shopping (13-9)*

One person says she cannot afford home help, so washes herself.

*R: When I first came home from having my knee done and also I'm diabetic you're supposed to get your feet washed everyday which I can't manage because I can't bend down and also, they used to wash my back but they're only here for half an hour, that's it, that's all they did. One of my daughters said 'its too much Mum', they charged £6.80p. a week, just for that half an hour.*

*I: And you had to pay that?*

*R: Oh yes, so I stopped it. I just have to wash myself properly everyday. You know up and down every morning (38-5)*

There are several other comments that indicate uncertainty/ignorance about what is or may be available from the local authority, including among those who are not yet in need of help. In general social services are portrayed as trying hard, but that there are not enough of them: *You can't blame the social people, there is just not enough of them (10-15)*. However, one person found people from the local authority to be 'stropky' and not particularly helpful (57)

Some of the people we spoke with have needed support in their role as carers, for parents and/or spouses. The Crossover Charity, which helps carers of Alzheimer's sufferers, is referred to in very positive terms. Other than this, most comments reflect struggle and difficulty in gaining access to assistance. There is a variety of perspectives on who is or should be responsible for the costs of care support, with some telling of how they paid significant amounts to support others and a few reporting managing to access carers' allowances. One woman talks about how she spent about £25,000 on her husband's care needs before he died, but doesn't begrudge it (*we were very devoted (57-1)*)

In general, when it comes to advice/information there are some very positive comments about the Alzheimer's society. The voluntary sector is thus identified as important as a source of help and support, but the diversity of service providers, within both the statutory and voluntary sectors, together with an uncertainty about entitlements to help, can cause confusion and anxiety. There are various examples of people being uncertain about how they would get support, and of the need to be proactive in finding out what is available:

*I've done a lot of research about various organisations that support carers, what sort of support there is for carers. I think I'd have to do it through Social Services to start with, 'cos I think I'd have to get the funding for it. I know that you can have the money now if you want to organise your own support I think you can and I'm not sure whether I'd do that or not or whether I think that would be too difficult. I think I'd have to wait and see a little more when the time comes. I do, I research these things on the*

*internet and I always pick up leaflets and things like that when I can. I keep my eyes open as I've only been able to get benefits in the past because I've happened to see information about them in leaflets or in the paper (26-14)*

## **FINANCIAL SECURITY AND HOUSING**

*You always want more, don't you? I think I can say for everybody here, we have enough to eat, enough heat and what have you, but we live quite frugally I suppose. If I go shopping I always go and have a coffee and a cake, I don't sort of think I can't afford that, or lunch or something. (7-9)*

We did not set out to discuss economic and financial questions with our respondents. However, when talking about housing, particularly thoughts about the future, these issues did arise. Few people were willing to talk about them in detail, but seven of our respondents referred to financial insecurity. Most of these are women, particularly those with inadequate pensions. Among those who do not stress insecurity, there is nonetheless a theme of frugality and the need to be careful. Only one of our respondents reports being relatively comfortably off, having been left a trust fund.

By far the majority of those we spoke with (45) own the houses in which they live. Only nine people rent, of which five are in Guinness Court in South Heighton, three in other Housing Association and one rents privately. There is also one couple in a shared ownership scheme with the council.

One interesting finding is the marked difference in responses to the two forms of housing which are specifically designed for older people: Guinness Court (HA) and Essex Mews (retirement flats, owner occupiers). These both have certain characteristics in common, such as alarm systems and a degree of external management of communal spaces, but people's experience of their housing situation in the two places is very different. Although there are positive comments about Guinness Court (*'Oh it's beautiful. I wouldn't go back to London if you gave me Buckingham Palace. And threw in Prince Charles and the silver as well 57:1)... So this is an absolute palace (26-13)*), there are far more negative ones, reflecting a lack of things to do and social isolation.

*Well, its, we don't now see many people. Only if we go, we are doing our laundry and we will chat in there and say hello. There was a lady named Pam, she died this year, and she, we had a Bingo Club, but that's all finished. No one wants to do that. And then there was a coffee morning, and no one wants to do that. So there is nothing there. (8-5)*

For some, there are also practical concerns, such as not knowing how the alarm system works, or finding the doors too heavy and difficult to open. For one person, a long wait to have a shower installed means that she has to wash standing up – she can no longer get in and out of the bath;

*R: And since I've had my knee done I've been waiting for a shower because I can't get in, I can get in the bath but I can't get out, it's so difficult. One of my daughters comes some time to give me, I have to be lifted out, I haven't got the strength to get out. I've put down for a shower 'cos there's only a bath, you can have a look in a minute.*

*Which is a year now for a shower, take the bath away and just have a walk-in shower. Anyway, that's been going on and on and apparently the whole of the estate is going to be uplifted a bit because these are about 30 years old now. I don't say everybody but some of the people are going to have bathrooms, you can have a new bath or a shower or whatever but that drags on and on. Also, we're supposed to have new kitchens.*

*I: How long?*

*R: I don't know, I shall probably be passed my sell by date by then (38-4/5)*

In Essex Mews, the comments are overwhelmingly positive; there is some mention of management problems in the past, but much more about community spirit and a strong residents' association.

*Well, we haven't looked back since, you know, it's been lovely here. And it's a combined, as you can see, it's all laid out with a patch of garden, we do all the garden ourselves – most of them – and everybody helps to do the gardens and this sort of thing. It's a happy....we all get together and have parties and all this sort of thing, so it's very good, you know (48-1)*

The explanation for the difference may lie in various factors. First, the particular history and role of individuals in bringing people together (this has recently been effective in Essex Mews and less so in Guinness Court). Second, some of the residents of Guinness Court are decidedly more frail and in need of assistance than those in Essex Mews. Design considerations may also be significant. Essex Mews is designed around central courtyards and is right in the middle of town. Guinness Court is more conventionally based around corridors, so that those at the end are more likely to feel isolated. It is also in South Heighton, with problems in public transport links to the town centre.

When it comes to the future, those who are already in older people's accommodation generally assume that is where they will stay. For those who are in their own homes, the responses are mixed. There are those who anticipate the future with trepidation but see themselves as having to move at some point, however reluctantly. Others say they don't want to think about it and four say they will not be able to move for financial reasons. For some, sheltered housing is seen as a very negative option. One interprets it as going into a rest home with atrocious food. For others, sheltered housing or 'older people's villages' are simply a 'step too far'.

*R: I shouldn't like that. I like to be able to go out the front and get my scooter out and go out Mount Pleasant if I want to, not that I do much nowadays, I'm too tired, but I've just got a friend gone into a rest home, she said the food is atrocious*

*I: Oh no, not a rest home. Where you just look after yourself*

*R: No, I wouldn't want to do that. No. Not if I can help it xxxx, I shall stop here and struggle for as long as I can. (28-3)*

*Well I sort of feel I think I would adapt but it's much harder as you get older, to make friends, to have the same sort of...because I think friendships take quite a time, don't they, to set up. (60-13)*

*that's why a bought a bungalow, because I hope, as I say, I really hope that I can stay here, you know, until they carry me out. I'd hate to go into an old people's home, I'd hate that (19-8)*

One couple with a large house are looking into ways of sharing it with other generations. Nobody mentioned the possibility of going to live with offspring or other younger generation and one explicitly dismissed this as 'not an option':

*I: Where do you think you'd go if you did move out?*

*R: Haven't got a clue. I certainly wouldn't go and live with the children. Certainly not (laughs). I know my daughter would say oh mum you've gotta come, you know, we'll get a bigger house and all the rest of it but I'll fight that every inch of the way. Um, no I don't think that's a good idea (50-22)*

## BEING HEARD

### 'It's all a foregone conclusion'

One of the key themes we explored concerns how older people feel about being 'consulted'. These responses tell us a great deal about both the Forum members themselves and about their sense of their own capacity to make a difference. Our respondents from the Forum all volunteered to take part in the research. It is not perhaps surprising therefore that many of them are very socially active and also do significant amounts of voluntary work in other contexts. Few fall into the category of 'frail and isolated'.

Despite this, the vast majority of responses indicate a belief that having a say has very little effect because decisions have effectively already been made. The overall message that 'it's all a foregone conclusion' is a powerful one. For some people the inability to achieve change is rooted in a sense of their own insignificance (*who am I anyway?*). There are also several who feel that consultation is simply not for them (*I'm not a suffragette!*). But most show a weary cynicism based on past experience.

*We go to all the consultations and things, obviously, and put our views forward there, because to be fair, ...they do have consultations but you never feel you're going to be heard because it's always fait accompli, you know you're just there for filling a process (47-11)*

*Well, like everything else, with the government. The decisions are made before even it goes out, isn't it? Foregone conclusion everything over there. But it doesn't stop you fighting, does it? You get your oar in and say, look, get us counted down here. We're not the dumping ground of Sussex are we? (11-10).*

*R: I've attended council planning committee meetings*

*I: Ok, do you think your voice is heard in those meetings?*

*R: Well they listen, they acknowledge what I say but whether they listen or not is another issue isn't it? (2-11)*

*You see it's rather like if you want a house designed you really, any architect worth their salt will not do it without finding out what you want and design it around what you want. Local authorities, and the government's just as bad, should say now, what do the people want, how can we design around that rather than say, we know best, we'll give you a say but we're not going to take a blind bit of notice. That's a bit cynical but that's the message that's come across (12-9)*

*It doesn't matter what we say they're going to do what they want to do (30-10)*

This cynicism about the possibility of making a difference combines with a number of practical issues to influence the extent to which people engage with consultation. For those with caring responsibilities, meetings can be difficult to attend, particularly if held in the evening. They may also be demanding and tiring occasions for those with impaired hearing or difficulty in concentrating.

*I am not very good at these meetings. I can't write it down quick enough to get everything down, and I can't remember what's been said even a few minutes back, so I just get lost and hope it will draw to a close before too long, to be quite honest...so I can't really cope with any sense of concentration really (35-11)*

About half of our respondents indicate a familiarity or confidence with computers and other new technology and many are avid letter writers and prepared to engage with their MP or local government. However, for many, consultation processes involve too much reading and paperwork. There are also comments about consultations being set up by younger people because it is part of their job, but without any real sense that they understand the issues they are consulting about:

*...the thing was that once paid officials come in and - dare I say it, they are usually young, they're not much older than you – and they tend really not to know thoroughly what older people are thinking and doing and wanting; and without being aware of it, if they set up a consultation – which is one of the 'in' words isn't it? You have to consult everybody – when they set up a consultation they come along to tell us what we want to consult (37-11)*

These responses are quite typical of responses to consultation exercises elsewhere. In general consultation is viewed as a very inadequate way of enabling people to have real influence over policy and decision making.

## **The role of the Forum**

In spite of this negativity, people are prepared to get involved. They told us about why they joined the Forum and what they saw it achieving in the future. There is quite a range of responses here. They can be broadly divided into those people who see the Forum as something essentially for other older people; and those who emphasise the collective action potential of the Forum and see themselves as part of this. Among the first group are people who stress the practical role of the Forum. They point out its potential as a means of getting access to information, especially for people who live on their own or can't get out and about. This led to suggestions about the production of leaflets, for example about doctors' surgeries or transport options. Included in this group are those who distance themselves from other Forum members, partly because they do not see themselves as old, or say that they do not face the same challenges as other (especially poorer) older people.

*Well I think it's for people who can't think for themselves, really, isn't it? And who can't organize their life, can't....They say oh, I haven't got any transport, how can I possibly get to Lewes? They don't go into it to find out what they could do to...(40-12)*

*Well to let people know what there is available. I mean there must be lots of people sitting at home that need things but don't know how to go about (18-15)*

*It's getting the information out to people, especially people on their own, who are, shall we say, semi-house-bound, you know (5-4)*

In contrast, for some, the Forum is for those with a 'social conscience' and potentially both an important means for collective action and a channel for opposition:

*I was very heartened to find that other counties have got the same organisation, because if you get us all together, as one man said, you know, we could all descend on the houses of parliament to reshape them (10-20)*

*I have a name for being bolshy – I don't think I've always been bolshy but I am now because when you get older you feel you've got to make your voice heard, you've got to do something or you'll be forgotten, that's part of being old. (37-10)*

Related to this is an emphasis on the importance of enabling the voices of older people to be heard.

*I: Why do you think it's important to be listened to?*

*R: So you know you've been heard. You're valued as a human being, to be heard you're valued as a human being, and I think to be given the privilege of listening to somebody is a privilege and that you can actually value people as individuals when you give them the time and you listen to their needs. I think it's a huge thing that we all need to learn more about, because again in the old days because there wasn't the noise, there wasn't pressures, people did tend – I know in my own family – to listen to each other, you know (20-17)*

*I: And do you think it's just younger people that can benefit from being listened to?*

*R: Oh no, I think it's all of us, every last one of us, because we all need our confidence boosts, and we all need our self-esteem to be up and our self-image to be good.*

These positive statements about the potential for collective action are, however, in the minority. More people indicate a rather limited and distant engagement with the Forum, including those who say they didn't realise they were members, or who had joined because of encouragement from a friend or a spouse and see the Forum as something 'you' (rather than 'we') are doing.

*Of course we are members of this Mature Citizens Forum, and from my point of view it's more that I support the principle of these things and I'm willing to put my name to supporting the principle and to pay them money to run the thing, but I don't really want to take part at the grass roots level (35-12)*

## **What matters to people?**

It is also important to consider what issues concern older people and are likely to prompt their involvement. Such issues are not (primarily) the very immediate experiences of poor services or treatment that motivate many users of health and social care services to get involved, nor are they (primarily) indicative of a strong sense of injustice related to the experience of growing older. Rather they relate to dissatisfactions with the ways in which changes are taking place in the area and with

the absence of any real possibility of influencing this. The majority of issues that promote action or opposition are location specific (such as housing developments in Peacehaven/Telscombe and the incinerator in Newhaven). Whilst in both places, concerns associated with healthcare are important, older people have broadly based interests and concerns about the environment they live in, the relationships between generations, and the way in which social, organisational and environmental changes impact on their lives.

## PLACE and COMMUNITY

It is therefore important to listen to the ways in which people talk about the places in which they live. Many of the people we spoke to are long term residents of Newhaven, Peacehaven, Telscombe and Piddinghoe and speak eloquently about the changes that have taken place. Almost without exception, the changes they talk about are negative. They are about places going downhill, losing their character and, in the case of Newhaven 'dying'. The use of metaphors of death to describe Newhaven is extremely common, and most, though not all, people attribute this to the building of the ring road. There are many quotes which describe a previously bustling town centre, with lots of shops. This is contrasted to the present lack of shops or things to do. Some people blame this more on the pricing policies of Sainsbury's than anything else. The 'death' of the town is also partly attributed to the loss of industry over recent years.

*And Newhaven came in right on the end of the philosophy of ripping the hearts out of towns and rebuilding, because we can build it better than it was, and just as that was being accepted that maybe that was not the right philosophy, they ripped the heart out of Newhaven. And then put a ring road around it. I mean it's been destroyed, totally destroyed. It was a lovely fishing village, it's been destroyed (46-6)*

*I remember Newhaven being bustling and busy, a wonderful place to live. And then some silly ass decided to put the ring road round it and that killed the town. I remember the days when the high street was 2-way traffic, buses up and down, people, kids, prams, cars, very busy, nobody worried too much and they were careful and that was it, there were no restrictions. And I remember the trains coming across the bridge and turning round at the big platform at the bottom of the high street, and today they wouldn't allow it. But it was wonderful, it was a marvellous time. We had about 9 churches, I remember we had 6 butchers, umpteen grocers, a lot of newsagent shops – my dad use to use the baccy shop on the corner of Bridge Street and the high street. And it was just a wonderful town to live in. And there was the choral society and the dramatics society – wonderful (45-1)*

*...but I think Newhaven would have been, now, the lovely town it used to be if it wasn't for the ring-road, that's what's killed it, definitely.... it used to be, well it used to be full of shops, both sides of the High Street and down into Bridge Street, it was just one hubbub all the way through, but of course with the ring-road nobody comes into town any more, because we're like a little island, and all the traffic just goes round and round and never calls into Newhaven itself – the parking for one thing – and of course the shops have not got the trade because of that, and so it's gone downhill rapidly, and to me it's a crying shame because knowing how it used to be years ago, and what it's like now, there's no comparison. We had quite...well, every shop, and more than there*

*is now, they were all open, nothing was closed; all the little side roads had shops and everything, you know. Nearly every road had a shop of some description...(56-2)*

*I find it's changed tremendously. It was a lovely bustling, busy little town. I used to come here regularly, every couple of months, to see my parents who still lived here, while I lived in Rye, and it was always busy, it was lovely. And then they put the ring road round and the place died. But nothing like it was, it has just sort of died..... It cut out the centre of the town. When there were shops here and they went from the bottom of the town to the top, there was traffic, yes, there was traffic going up and down, people shopped here. The moment they put the ring road round nobody bothered to come down, there's no where really to park anyway; there's this one parking place here, and there's Somerfields car park, but that's it. People don't come here, the shops gradually closed, and it's as dead as a dodo now (41-1).*

To a lesser extent in Newhaven, there are concerns about the possible effects of the new property developments, particularly the flats near the marina. Some people express anxiety about the effects of relatively wealthy incomers on the social make-up of the town. More immediately, the flats are seen as problematic because of their effect on the views of those living behind them. People are very preoccupied with the incinerator and there are fears that this will lead to Newhaven being a much less healthy place to live.

For East Saltdean, Telscombe and Peacehaven, the change that worries people the most seems to be related to the building of a great many flats and houses with insufficient facilities and amenities to support them. For here too, loss of community seems to be an issue. In general for this area, there are a few positive comments, but these are far outweighed by the negative. These seem to focus primarily on the absence of community and things to do. Peacehaven is described as a 'Cinderella town', a 'forgotten place', a bungalow town – all old people. Telscombe is a 'nothing place... it doesn't exist'. There is a striking unanimity of negative comment about the Co-op in the Meridian Centre, which is the area's only supermarket. It is 'horrible', 'disgusting', a 'disgrace' the food is not fresh and their freezers are always breaking down.

In spite of the negative comments about Newhaven being a 'miserable place' and 'horrible', with insufficient shops and a lack of pride, too much graffiti and so on, there are far more who say they love the town. Behind this is a strong sense of community and history in Newhaven.

*But I like Newhaven a lot, one of the things I like about it is the nice size, it's a real place with real issues, and because we're involved with social issues it's not really appropriate to be living in some comfy cream-tea village somewhere. It's a real place and we really like it (46-2)*

*I love Newhaven to pieces, nowhere like it, and I think we've got everything here: we've got the Downs, we've got the fishing industry still, it's a working town, so you've got a mixture of people, a lot of artists, couldn't wish for better really, and I'm totally involved in the community (46-1)*

The affection for Newhaven is thus rooted partly in geography – love of the downs, the sea, and so on – but even more so in interpersonal relationships and sense of community. There are many positive comments about the sense of community in the

town and this is most concretely manifested in what people have to say about the Hillcrest Centre and the role it plays as a community focus. However, this is contrasted by a couple of people to the effects of regeneration and government initiatives which, paradoxically, they suggest undermine the inclusive nature of the Hillcrest Centre. These include initiatives funded by EU money. They argue that the initiatives serve to divide the community because they focus on particular interest groups, such as children. Hence, a new nursery on Denton Island is a threat to the Hillcrest Nursery, as are new office developments, which may siphon off community organisations which use the Hillcrest.

Several people comment on 'class' issues with regard to Newhaven. It is identified by them as a working class town (and this may be associated with its status as a 'dumping ground'). However, there are also comments about the relationship between continuity of residence and social/political activity:

*I'm not talking about money class, I'm talking about thinking class in the more intellectual sense, but the more intellectual people who were born in Newhaven tend to have moved out, and the people who didn't do so much thinking stayed here, and people who did more thinking moved into Newhaven, like me (9-11).*

For a few people, historical divides between the East and West sides of the town are also linked to class factors; the East side being the location of most factories etc and now being the part of town which is more run down, the west side being 'snobby' and now the place that has received a lot of property development money.

In contrast to many areas, in neither Newhaven, nor along the coast towards Saltdean, did crime, or fear of it, emerge as a particularly significant concern. Only one person spoke of security in their own home as being a problem. The general view that a fear of crime is a priority for older people runs the risk of ignoring other factors that are more significant in some places.

*...There's a myth about crime and how bad crime is. I know if there is one mugging it happens to somebody, you know, and that's terrible for everybody within that family and that area, but everybody seems to think there's a lot of it going on, and actually there's not that much (20-2).*

## CONCLUSIONS

The interviews with older people in the Meridian area cover a number of themes. Not all of them have direct policy relevance but, taken together, they provide important insights.

- If old age *per se* is not to be anticipated with dread and denied, then we need to be ensuring that the consequences of ageing are compensated and their negative impact reduced. We cannot expect everyone to remain active throughout their old age, but we do need to think about how it is possible to enable positive experiences within reduced horizons. Ensuring positive social contacts across the generations could help. There is often a tendency to focus on intergenerational relationships in terms of problems, compounding this sense of separation. It is possible that focusing policy-oriented work around age-specific categories may further contribute to this.
- As people get less able to drive or to use public transport, a range of flexible transport options is important. Volunteer driver schemes may be one important aspect of this.
- Services for health and social care become more important for people as they get older. Information, accessibility and continuity are important if people are to get the best out of services designed to provide care and support when they become frail or ill. The anxieties and concern people express about the level and quality of services available may well contribute to the fear of growing old and needing help. Difficulties in getting to hospital constitute a real problem for many people.
- Living options that offer opportunities for social contact whilst retaining a sense of having your own home are valued. The fact that people have positive relationships with family does not imply that they envisage living with them as they get older – and for many this would be impossible.
- Older people need to be convinced that opportunities to have their say lead to real influence. This needs to be taken seriously by those engaged in consultation exercises – not least in terms of what feedback is provided on action taken as a result. But it also affects the way in which older people might be involved in future. If older people feel that the terms of their involvement have been defined solely by reference to the interests of public officials they will remain cynical and unlikely to engage.
- It is also important that their concerns are not restricted to ‘older people’s issues’. They want to have an impact on broadly based decisions that affect the environment in which they live. Their experiences reflect the particular places in which they live. It is not always helpful to generalise. Older people do not always live in fear of crime. There is also a danger that over-emphasising this where it is not a problem will generate the fear that policy makers hope to avoid.