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Cardiff and Vale  
University Health Board

# 'RE-IMAGINING AGEING INTO THE FUTURE'



## FOREWORD

Reflecting on this year's report in the current situation where Covid-19 has affected so many, and changed the way that people are living and working, it is clear that we will all need to adapt to a new environment for some time to come. Older people in particular have been affected by the 'stay at home' policies that have been necessary to protect them, and these policies may have had an impact on their physical and mental wellbeing. We need to be aware of the effect of these changes, and consider how we can best provide support for our community members as they age.

Societies around the world are ageing faster than ever before, and in Cardiff and the Vale of Glamorgan this is reflected in our local population. In 20 years time we will have more people in our local community who are over the age of 65 than we have ever had. This is something to be celebrated and valued as older people make such a strong contribution to society in so many ways, including the economy, volunteering and caring for others. We can all play a part in creating positive and healthy futures, with and for the older members of our community, and my aim with this year's report is to draw attention to the ways in which we and society in general can re-imagine healthy older age.

Last year's annual report of the Director of Public Health 'Moving Forwards: Move More, More Often' focused on how people can be active in their daily lives and addressed some of the barriers to activity. We have made good progress but there is still more to do, and you can read a summary of the progress in the appendix.

My report for this year focuses upon three key themes that we know also influence people's ability to experience healthy ageing and have a good quality of life: feeling a sense of meaning and purpose in life; having good social connections; and living in places that enable them to remain safe, active and independent. There is a great deal of evidence which tells us that if people experience these three things, they are more likely to have happy, healthier lives into older age.

For many people, getting older is a very positive experience, and they have much to look forward to. Many people feel a sense of community, enjoy where they live and have good connections to family and friends. Despite the fact that many older people in Cardiff and the Vale of Glamorgan are in good health and are happy with their lives, there are some inequalities that need to be addressed, as there are people who are not ageing in good health, and are experiencing very different levels of wealth, happiness and security in later life.

It is important that we frame our conversations around ageing in a positive way. Sometimes people have negative attitudes and assumptions around older people, believing them to be a burden on society, dependant or frail. We need to ensure these attitudes are not allowed to limit the capacity of older people to be a positive part of our communities and provide the substantial contributions that they can make.

This report will highlight some personal stories of older people in our local community who have spoken about their experiences around each of the three themes. Their thoughts and views are underpinned by the latest evidence around each theme: having purpose in life, social connections, and healthy places to live. The online report is supported by a summary booklet with the key messages and a call to action. Importantly, the call to action outlines what we can do as individuals and as organisations which can help the population of Cardiff and the Vale of Glamorgan to experience healthy ageing into the future. We want to ensure that we have enabled people to have good health and wellbeing as they approach older age so that they are able to continue making valuable contributions to society.

I hope you find the report useful to help shape your thinking over the next year and beyond.



**Fiona Kinghorn**  
Executive Director  
of Public Health

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CHAPTER 1 OLDER PEOPLE IN CARDIFF  
AND THE VALE OF GLAMORGAN

Introduction

This chapter provides some facts and key data figures about the people who live in Cardiff and the Vale of Glamorgan. It also outlines some key information about the health and well-being of older people, and why it is so important to make sure people can stay healthy as they age, and for as long as possible.

Population estimates from the Office for National Statistics<sup>1</sup> for mid-2019 indicate that in Wales, 21% of the population is aged 65 and over, higher than for the UK overall (18%). In Cardiff and the Vale of Glamorgan around 16% of the population is aged 65 and over<sup>2</sup>.

The population estimates indicate that there are just over 500,000 people living in Cardiff and the Vale of Glamorgan<sup>2</sup> (366,903 in Cardiff and 133,987 in the Vale of Glamorgan in 2019). There are 80,539 people aged 65 and over (52,192 in Cardiff and 28,347 in the Vale of Glamorgan). Cardiff as a city is expected to grow by just over 20% over the next 20 years, or an additional 70,000 people overall, meaning it is one of the fastest growing cities in the UK<sup>3</sup>.

Population projections

In Wales, as in the rest of the UK, over the last ten years the population aged 65 and over has had the highest growth of all broad age groups<sup>2</sup> at a rate of 1.6% increase (England 1.7%, Scotland 1.8%, Northern Ireland 2.1%). This means that in Wales, and in Cardiff and the Vale of Glamorgan, the age profile of the population has been changing. This trend is set to continue, with projections showing increases over the next 20 years,

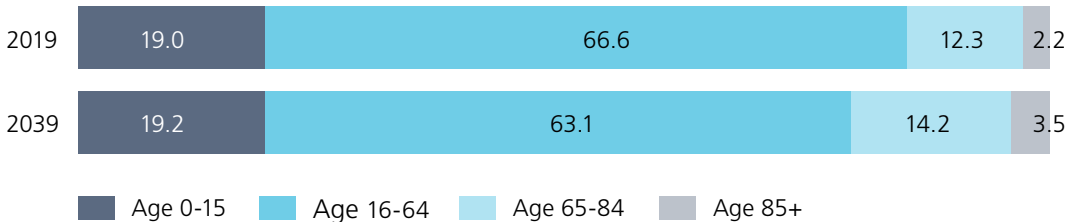
whilst the number of people aged under 65 years is growing at a slower rate.

The charts below illustrate how this trend is reflected in the Cardiff and Vale of Glamorgan population. The 2019 population is compared to the predictions for 2039 according to three age groups for Cardiff and the Vale of Glamorgan separately, and for Cardiff and the Vale of Glamorgan University Health Board area as a whole.

Figure 1: Cardiff population projections, all age groups, 2019 to 2039

Projections indicate that in Cardiff, the 0-15 age group will increase slightly, the 16-64 age group decrease, whilst both the 65-84 and 85+ age groups increase.

Projected population, percentage, all persons, Cardiff, 2019 and 2039  
Produced by Public Health Wales Observatory, using 2014-based population projections

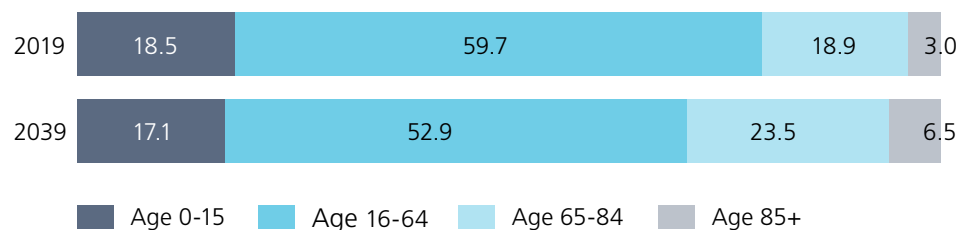


### Figure 2: Vale of Glamorgan population projections, all age groups, 2019 to 2039

In the Vale of Glamorgan, the changes in population age structure are predicted to be even greater than in Cardiff, with decreases in the 0-15 and 16-64 age groups, and large increases in the 65-84 and 85+ age groups.

#### Projected population, percentage, all persons, Vale of Glamorgan 2019 and 2039

Produced by Public Health Wales Observatory, using 2014-based population projections

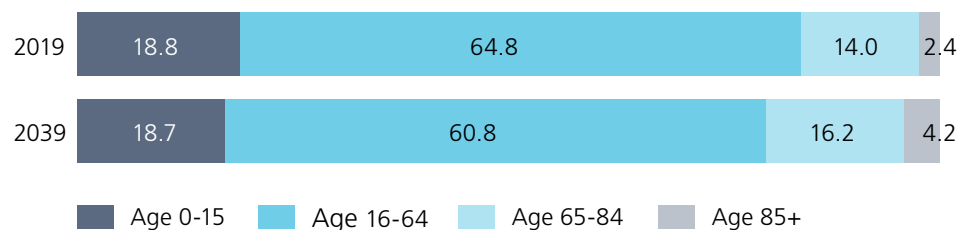


### Figure 3: Cardiff and the Vale of Glamorgan population projections, all age groups, 2019 to 2039

In Cardiff and the Vale of Glamorgan as a whole, the number of people in the 65 to 84 age group and the 85+ age group are both predicted to increase, whilst other age groups decrease.

#### Projected population, percentage, all persons, Cardiff & Vale UHB, 2019 and 2039

Produced by Public Health Wales Observatory, using 2014-based population projections

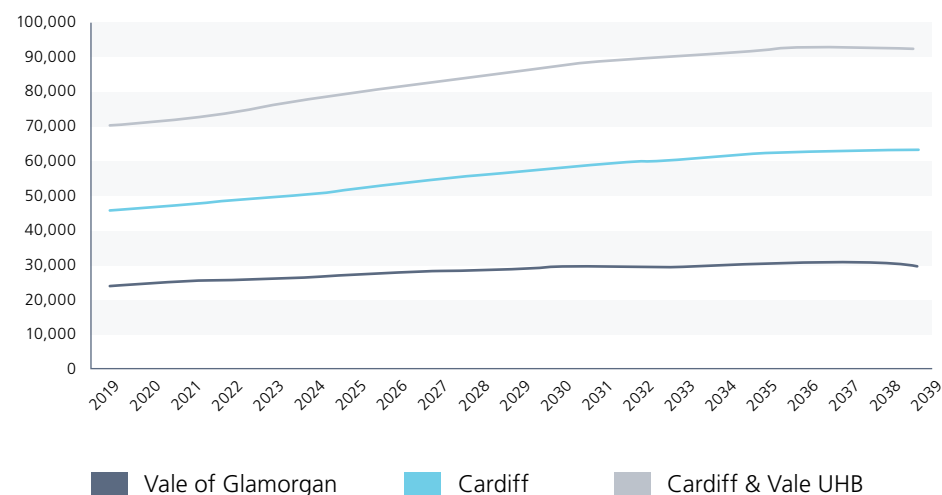


### Figure 4: projected population increase for persons aged 65 to 84 in Cardiff and the Vale of Glamorgan, 2019 to 2039

The graph below depicts the actual numbers of people in the 65 to 84 age group which is predicted to increase from around 70,000 people in 2019 to 93,000 people in 2039.

#### Projected population, counts, all persons, aged 65 to 84, Cardiff & Vale UHB, 2019 and 2039

Produced by Public Health Wales Observatory, using 2014 population projections (WG)

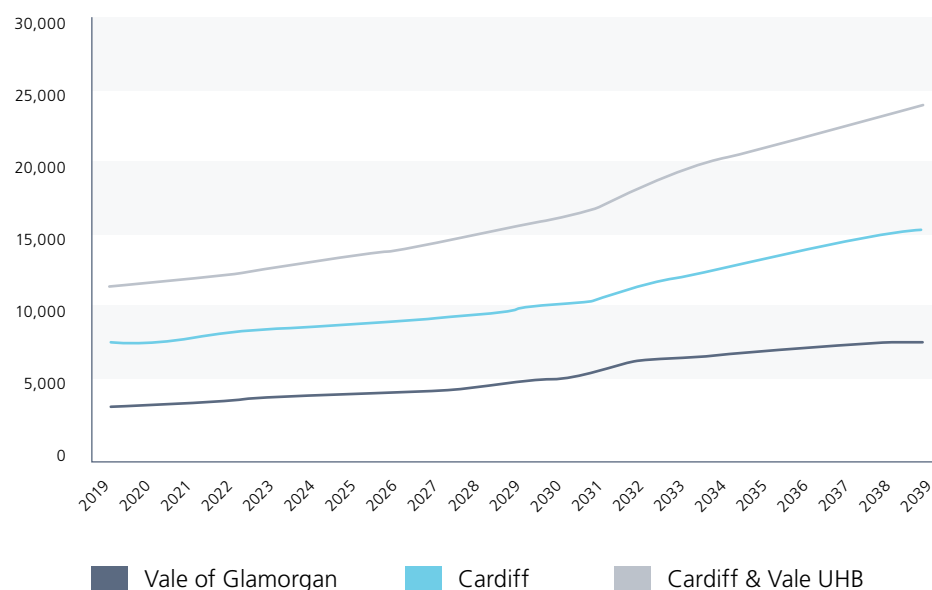


### Figure 5: projected population increase for persons aged 85+ in Cardiff and the Vale of Glamorgan, 2019 to 2039

The number of people who are aged 85 and over is expected to rise even more noticeably, with numbers expected to double in the next 20 years. This will mean a rise from approximately 12,000 people in 2019 to 24,000 people in 2039.

#### Projected population, counts, all persons, aged 85+, Cardiff & Vale UHB, 2019 and 2039

Produced by Public Health Wales Observatory, using 2014 population projections (WG)



## Demographic differences across Cardiff and the Vale of Glamorgan

There are some differences across the Cardiff and the Vale of Glamorgan area in terms of where older people live, which can impact upon the provision of services, and the location of appropriate and adequate housing options. There are also differences in the levels of disadvantage across the area, meaning that people are often dealing with health inequalities, and differences in their ability to access the services they may need.

Using the latest small area population estimates available for mid-2018, the map in figure 6 illustrates the proportion of people in the 65-84 and 85+ age groups compared with the whole population, residing in each of the nine primary care clusters<sup>4</sup>. The cluster with the largest proportion of people in the 65-84 age group is Western Vale (23%) and the cluster with the lowest proportion is Cardiff South East (5.5%). Eastern Vale has the largest proportion of people over 85 years (3.4% of the population), and Cardiff South East has the lowest (0.9%).

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Figure 6: Population breakdown for 65-84 and 85+ age groups by primary care cluster in Cardiff and the Vale of Glamorgan

Source: Office for National Statistics (25 October 2019 dataset).  
Census output area population estimates- Wales

Population % aged 65-84 years  
Population % aged over 85 years

Whilst the percentage proportion of people in each age group in the clusters provides an illustration of the age structure of the population, the absolute numbers in the age groups are also important to note. The table in Figure 7 below provides the population numbers and percentages in the 65-84 and 85+ age groups by cluster<sup>4</sup>. As noted above, it is predicted that these numbers will rise substantially over the next 20 years.

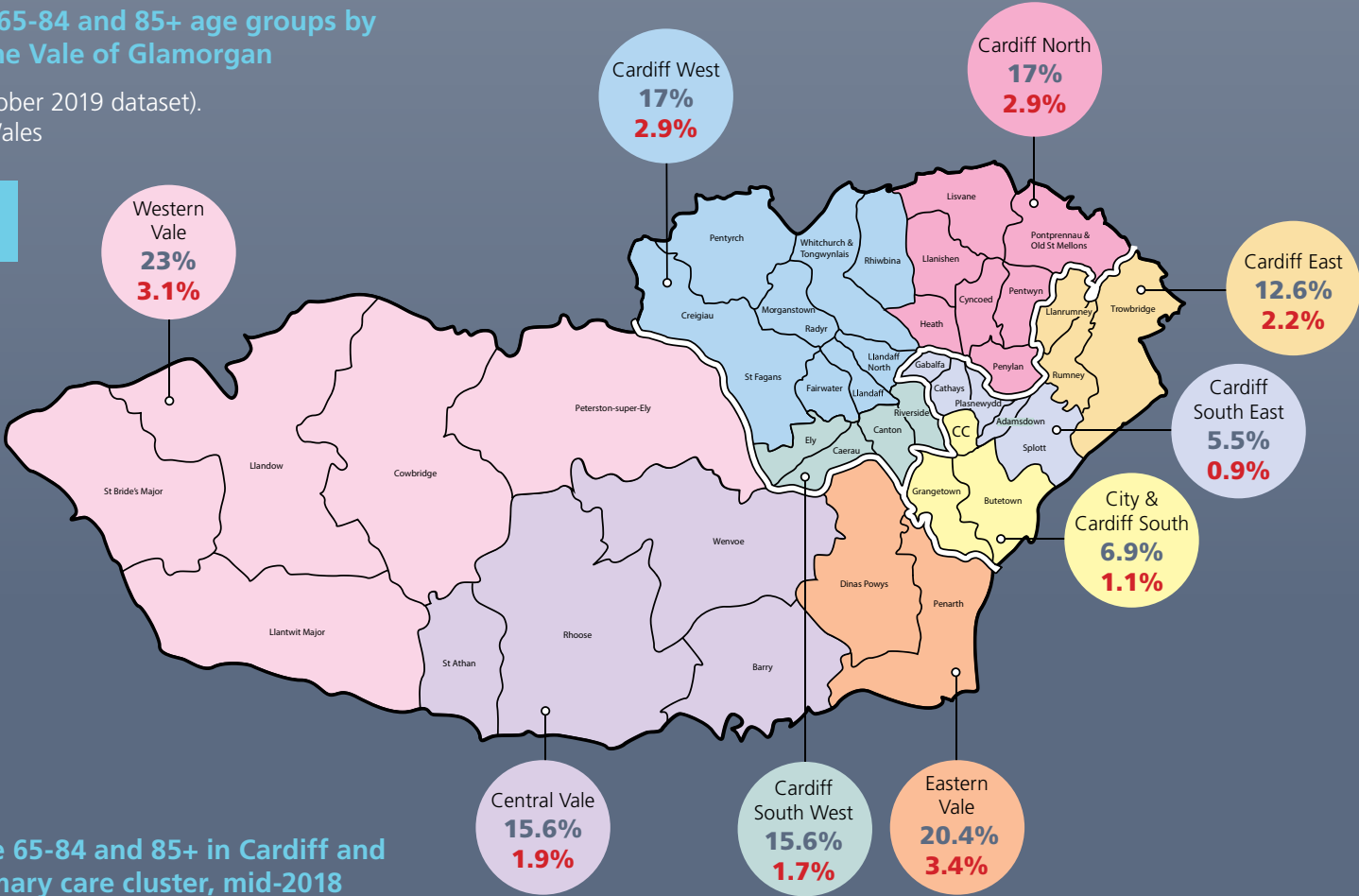


Figure 7: Population of residents age 65-84 and 85+ in Cardiff and Vale of Glamorgan estimates by primary care cluster, mid-2018

	Cardiff North	Cardiff West	Cardiff South West	City & Cardiff South	Cardiff East	Cardiff South East	Western Vale	Central Vale	Eastern Vale
No. of people age 65-84	16,003	10,620	6,312	2,475	4,728	4,150	5,773	10,792	7,702
% of total population	17%	17%	15.6	6.9%	12.6%	5.5%	23%	15.6%	20.4%
No. of people age 85+	2,859	1,632	945	399	817	648	788	1,340	1,296
% of total population	2.9%	2.9%	1.7%	1.1%	2.2%	0.9%	3.1%	1.9%	3.4%
Total population (all ages)	96,923	62,850	56,016	35,639	37,352	75,468	25,293	69,025	37,847



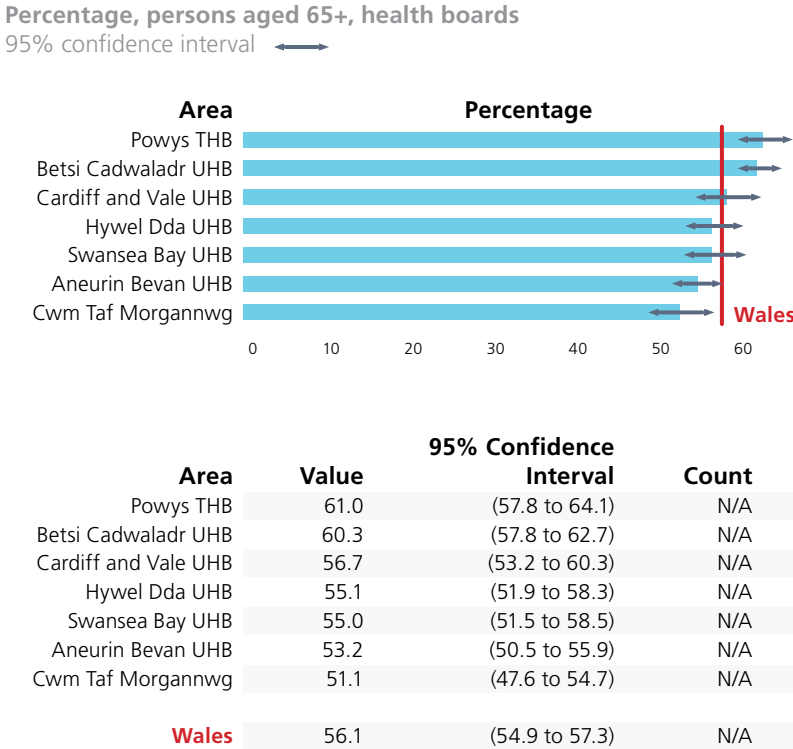
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HEALTH AND WELLBEING OF OLDER PEOPLE IN

CARDIFF AND THE VALE OF GLAMORGAN

Just over half (56.7%) of people aged 65 and over rate their health as good or very good in Cardiff and the Vale of Glamorgan. Figure 8 illustrates how this compares with other Health Boards in Wales<sup>5</sup>.

Figure 8: Older people in good health, 2017/18 – 2018/19

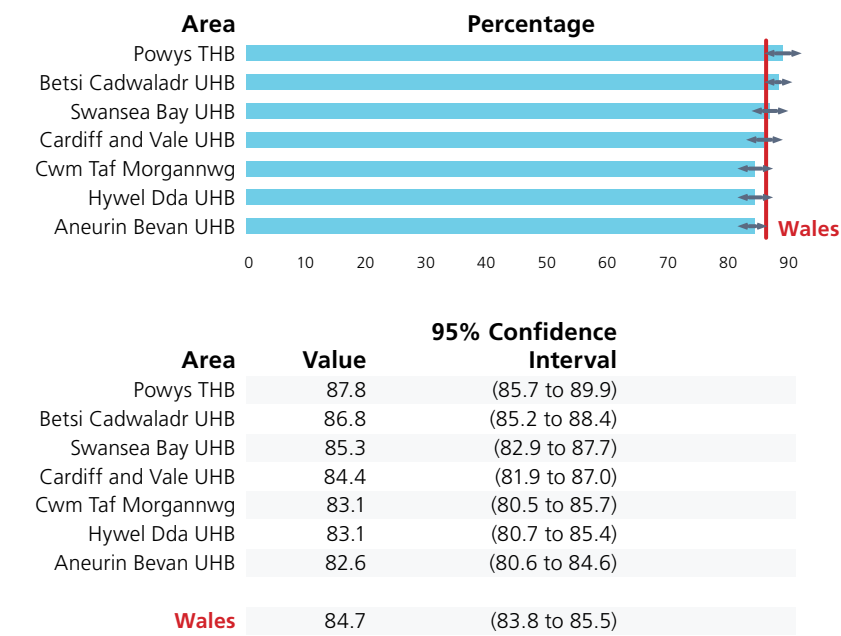


Produced by Public Health Wales Observatory, using NSW (WG)

Eighty four percent of people aged 65 and over rate their satisfaction with life as 7 out of 10 or higher in Cardiff and the Vale of Glamorgan. Figure 9 illustrates how this compares with other Health Boards across Wales<sup>5</sup>.

Figure 9: Life satisfaction among older people, 2017/18 – 2018/19

Respondents who rate their satisfaction with their life as 7 out of 10 or higher, percentage, persons aged 65+, health boards  
95% confidence interval



Produced by Public Health Wales Observatory, using NSW (WG)

This chapter has provided an illustration of the population of older people in Cardiff and the Vale of Glamorgan. There are rising numbers within both the 65-84 and 85+ age groups and differences across primary care clusters in where people in these age groups live. The data in this chapter provides the demographic information for this report, and the following chapters will build upon this, with a focus upon the issue of healthy ageing and what can be done to ensure that people in Cardiff and the Vale of Glamorgan can age well into the future.

## CHAPTER 2 WHAT IS HEALTHY AGEING?

Healthy ageing  
is not just about  
the absence of  
disease and ill  
health

Before we start to outline each of the themes in this report, it is important to understand what we mean by healthy ageing, and why we should be focusing our attention on it.

We are referring to older people in this report as those aged 65 and over, although we acknowledge that people can be categorised as ‘older’ from the age of 50. There is also a particular need to focus on people aged 85 and over when considering the future needs of the population as this group is rapidly growing and is most likely to require health and social care services, reflecting the higher needs than other age groups. This growth will have a major impact on the amount of public spending required for health and social services and will require consideration in planning of these services in years ahead<sup>6</sup>.

Healthy ageing is not just about the absence of disease and ill health, it is about being able to have positive, independent lives and being able to do the things we want to do for as long as possible.

We need to recognise that although it is common for people to start to develop conditions and illness in older age, many people age in good health. As the previous chapter highlighted, 56.7% of people aged 65 and over in Cardiff and

the Vale of Glamorgan say that they are in good health<sup>7</sup>. However, if people do develop health conditions as they age, it can start to make daily activities more difficult, such as washing and dressing. If people have a long term health condition such as arthritis, dementia or breathing problems it can make daily life even more difficult.

Lifestyle plays a key role in how well we age. Doing exercise, whether we smoke or drink alcohol, our weight and what we eat can all make a big difference to health in later life. Many older people are not active enough to benefit their health and well-being, including reducing their risk of falling which can have substantial impacts both physically and mentally. In Wales, 38% of people age 65 and over are meeting the recommended levels of physical activity (150 minutes every week); and 47% say they were active for less than 30 minutes in the previous week<sup>8</sup>. Fifty eight percent of people aged 65+ are overweight or obese, and 75% of people eat less than the recommended number of fruit and vegetables every day<sup>8</sup>.

There is a great deal of evidence about how making positive lifestyle choices can influence health and enhance healthy ageing. A study with over 3,000 men over a 20 year period found that moderate levels of physical

activity (cycling, very frequent weekend recreational activity plus regular walking, or sporting activity once a week) can lower the health risks for individuals<sup>9</sup>. Three physical activity levels were studied: low/decreasing over time; light/stable and moderate/increasing over time. Compared with the low/decreasing group, people who were in the light/stable and moderate/increasing groups experienced lower risks of heart disease and mortality.

The Older People’s Commissioner for Wales<sup>10</sup>, in their strategy for making Wales the best place in the world to grow older, states that ageing well – ‘adding life to years, not just years to life’ – is important for each of us, and for our country as a whole. Whilst the fact that people are living longer is certainly a significant achievement, which enables older people to continue to make great contributions to society, there are some significant inequalities which can be seen through increasing levels of poverty amongst older people and the difference in life expectancy and healthy life expectancy (living without illness or disease) between the wealthiest and the poorest areas. Public Health Wales data indicates that in 2017 there was a gap of 8.6 years of life expectancy at birth for males and 6.6 years for females between the most and least disadvantaged areas in Cardiff and the Vale of Glamorgan<sup>11</sup>.

Reducing inequalities needs action around resources and service provision, but also around a joined-up place based approach which recognises the wider determinants of health such as housing, employment and education<sup>12</sup>. People need to be able to access services and activities that will enable them to live healthier lifestyles, and ensure they have the support to remain healthy, such as being able to access immunisations and screening.

Giving recognition to the important role that lifestyles, screening and immunisations play in healthy ageing is key, but there are also wider areas that play a part in health and wellbeing into later life. This report focuses upon three of these key areas which we know matter to older people and which can support them to experience good health and wellbeing in later life:

- having purpose
- having social connections
- having active and healthy places to live.

Figure 10 illustrates the three key areas and highlights the connections between them all. The overarching outcome for the future that all three of these key areas contribute towards is that we all live in a society in which everyone enjoys life with good health and wellbeing.



**Figure 10: Three key areas for healthy ageing in the future**



This chapter has provided an overview of what healthy ageing means and the elements which contribute to individuals being able to have good health and wellbeing. The following chapters will describe in detail the three key areas, provide the evidence base for each, and set out a call to action for organisations and communities.

This film shares the stories of some of the members of the local community and organisations who work with them.

## CHAPTER 3 PURPOSE IN LIFE

For many people,  
later life presents  
an opportunity  
to take on new  
challenges

Throughout our lives, having purpose and enjoyment in what we do brings great benefits to our well-being.

It drives us to achieve goals, giving us a sense of meaning and direction<sup>13</sup>. It is also known to contribute to good health as evidence has shown a strong link between being purposeful and living longer<sup>13</sup>. Having a purpose in life might help us to deal better with negative or stressful times by helping us to learn from these experiences constructively and to refocus on wider goals<sup>14,15</sup>. Purpose in life has also been linked to overall quality of life<sup>16</sup>.

Purpose and meaning can be found in many aspects of our lives. For people of a working age, our job is likely to be a major influence as we know that working is linked to our wider identity and social roles<sup>17</sup> and is associated with better life satisfaction<sup>18</sup>. For older people, work can also provide an opportunity to make social connections and boost self-esteem<sup>19</sup>.

For many people, later life presents an opportunity to take on new challenges, learn new things, have new experiences and be more active than ever before. It can be an opportunity to embrace having more time available. Current generations

of older people live longer than those previously<sup>20</sup>. Adults in this generation have rich life experiences, having seen changes throughout their lives including enormous technological advances such as the advent of mobile phones and the internet, and have much to offer and contribute. Staying in work, volunteering or joining a community group can make sure people stay physically and mentally active for longer<sup>21</sup>.



This chapter will explore what can help people to maintain and enhance purpose into later life and will include a focus on working and retirement. It will also consider how people can maintain their health and well-being in order to have the best opportunities to do things that will give them that purpose.

### Working in later life

Employers value older employees as a great asset and many are able to accommodate a diverse workforce through their employment policies which support people to work for longer if they wish to<sup>22</sup>.

Characteristics and skills that employers value in older people include<sup>23,24</sup>

- Loyalty, commitment and conscientiousness
- Experience and knowledge
- Good networks and relationships built up
- Better time management skills
- Better people skills
- Able to remain calm under pressure or when faced with challenges
- Mentoring and sharing of skills and knowledge within workforce
- Contribution to service improvement as workforce reflects population of service users

Being in work is, in general, good for both mental and physical health and wellbeing. Good quality work, which offers people a sense of control over how they work and good relationships with managers and colleagues, helps give people a sense of purpose. Working later in life also provides an opportunity to build up pensions and have increased income once retired<sup>25</sup>.



Policies around working later in life have changed over the last 15 years due to the population living longer and the growth in the number of years people spend in retirement. The age at which people can access their state pension has risen and will continue to rise<sup>26</sup>. There has also been a recognition of age discrimination in the law and since 2006, organisations can no longer set a default retirement age and dismiss employees once they reach a set date. Many people will likely work into later life through choice, but others may need to work longer than they would wish to in order to be able to have a comfortable retirement. It is estimated that 136,000 people aged 60 and over (just over 16% of the older population) are currently employed in Wales, making up around 10% of the workforce and within five years, 1 in 3 people of working age in Wales will be over 50 years old<sup>27,28</sup>.

Working later in life will only be possible for many if their health is good enough. In Cardiff and the Vale of Glamorgan, healthy life expectancy (how long people can expect to live in good health) for men is 61.9 years (61.4 for Wales), while for females it is 62 years (62 for Wales) compared with 63.4 years for males and 61.9 years for females in England<sup>29</sup>. Males and females in Cardiff and the

Vale of Glamorgan are living on average 16.8 years and 21 years – or around a fifth of their life – in poor health<sup>29</sup>.

Long-term health effects in older populations from COVID-19 is an area for consideration for the future. These effects may prevent people from working later in life as planned or prevent a purposeful and enjoyable retirement. A new study into these long-term effects, led by the National Institute for Health Research, launched in July 2020 will track a cohort of around 10,000 of those infected for a year or longer to gather more data on this<sup>30</sup>. Healthy life expectancy is lower for those from more disadvantaged areas leading to inequalities not only in health but also in access to employment and income. One in three people aged 60-74 in Wales have incomes of less than £200 a week, or £10,400 a year with more women than men experiencing poverty<sup>27</sup>.

In November 2019 1,665 people aged over 50 in Cardiff and 460 in the Vale of Glamorgan were claiming out of work benefits<sup>31</sup>. In the UK the proportion of men leaving the labour market for health reasons was highest in construction and transportation and storage, both of which are physically demanding job areas<sup>32</sup>.



# WHAT CAN EMPLOYERS DO TO ENCOURAGE FUTURE RECRUITMENT AND RETENTION OF OLDER WORKERS?

This section will outline ways in which employers could support people to continue to work or take up new or alternative employment opportunities in later life.

## Flexible Working

One way to support employees, which could be of particular value to older workers, is flexible working<sup>33</sup>. This includes a range of elements such as a reduction in hours, flexible start/finish times, job sharing, compressed hours (working full time hours over fewer days), and work base. For example, working from home or a different location could allow employees to achieve a good work life balance.

Employees who have been employed for 26 weeks or more have the right to request flexible working<sup>34</sup>. Flexible working policies could be used by employers to help older employees find ways to make work suit their needs better.

Employers have reported limited experience in offering flexible working to older employees and it is less likely to be available to those in lower paid roles, particularly those that are physically demanding<sup>24</sup>. The COVID-19 pandemic and subsequent 'Stay at Home' guidance led to many people spending an increased amount of time working from home. For some, benefits have included reduced commuting time, better work/life balance and a less stressful work environment. However, a Health Impact Assessment for Wales also found that there could be negative effects including: feelings of isolation; stress caused by having to use new technologies to carry out their work; the potential for people not to have a break from stressful situations at home; and for those who were lower paid, issues around increased fuel costs of working from home<sup>35</sup>.

Due to the high levels of older people leaving physically demanding work due to health reasons, organisations should consider how flexible working or assistive technology where available could be

used to better support their employees. Examples of assistive technology include ergonomic chairs, lighter hand tools, lifting equipment and magnifying lenses for close up work, all of which take some of the physical strain out of work<sup>33</sup>.

When discussing employer support for their workforce within the focus groups conducted for this report, one group member commented that his employer had supported him to work his role as a job share in the last few years before he retired. He felt that this had greatly helped him to be prepared when he did then retire, as he had 'eased down' into retirement.

One way to support employees, which could be of particular value to older workers, is flexible working<sup>33</sup>

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# Employer support for health and wellbeing

It is predicted that by 2030, 40% of the working age population in the UK will have a long-term condition such as coronary heart disease or diabetes. With more people working into later life, health will play an ever larger role in determining their ability to stay in work<sup>32</sup>. Employers can help support their employees to adopt healthier lifestyles, which can help to prevent many long-term health conditions. Schemes around active travel, healthy eating, help to stop smoking and access to support for wellbeing can all help. For employers who want to take a more structured approach, Healthy Working Wales can provide expert advice.

Employers can also support their workforce by making adjustments to working hours or conditions, or supporting people to return to work after a period of ill health, such as the example below outlines. Fit notes, which inform employers of the tasks an individual is able to undertake, have the potential to be used to much greater effect to support employees to return to work successfully and stay in work.

# Department for Work and Pensions and Public Health Wales

In 2018, individuals in Wales over the age of 50 made more than 75,000 claims for Employment and Support Allowance: **almost half of all claims**. Evidence suggests that opportunities may currently be lost to support individuals to return to the workplace where adjustments to their working conditions would make this possible. Public Health Wales, working with the Department for Work and Pensions, is carrying out a project to engage with GPs, employers and other stakeholders to establish what obstacles and opportunities exist to use the 'fit notes' issued to those who are off work due to illness more effectively and so support healthier working lives across the population. This work is due to be completed in 2020 and will report in the first instance to the Effective Employee Health Management Partnership.

# Training

Larger organisations are more likely to provide training opportunities than smaller or medium sized employers but older people are often employed in the latter leading to less opportunities overall<sup>25</sup>. Furthermore those in the lowest 3 occupational groups or working within the public sector report less incidence of training in their role across all age groups<sup>36</sup>. There is therefore a lack of equity across employment and demographic groups in accessing training which could lead to less enjoyment and engagement in the workplace and opportunities to progress or diversify. Training can be provided in less formal ways for example through mentoring or by taking on differing projects or roles within an organisation. These could have the benefit of sharing knowledge across age groups within a setting and better overall knowledge of the organisation.



*“Retirement planning sessions starting as early as the beginning of service, even if that is in someone’s 20s, but having regular update sessions throughout a career, given that circumstances can always change.”*

*“Explain more clearly about the pension and what it will mean in future years to people in their 40s - to prepare ahead of time.”*

# Employer support with planning for the future

Many organisations do not have a process in place to discuss planning for future work, health needs and retirement with their employees, and some feel that such conversations could be insensitive or potentially discriminatory<sup>37</sup>.

Financial planning for future retirement is important, and one which employers can help people to do. There are clear inequalities in the experiences of employees depending on their socio-economic group. Older people with lower household incomes are less likely to have had engagement with financial planning for the future and have less financial resources<sup>33</sup>. They are also more likely to experience health problems and have a shorter healthy life expectancy but have more caring responsibilities and less independence within their work roles.

People who have control over the timing of and can plan for their retirement, and voluntarily retire, have a higher sense of well-being and get more pleasure from free time in retirement. On the contrary, people who involuntarily retire, especially

if due to health reasons, experience a lower sense of wellbeing<sup>38</sup>. In short, helping people stay well into retirement can help keep them healthy and well in their communities for longer.

Cardiff and Vale University Health Board employees who completed a survey during the preparation of this report felt strongly that conversations around retirement should be happening much sooner in their working life.

“Retirement planning sessions starting as early as the beginning of service, even if that is in someone’s 20s, but having regular update sessions throughout a career, given that circumstances can always change.”

“Explain more clearly about the pension and what it will mean in future years to people in their 40s - to prepare ahead of time.”

Conversations could be part of regular supervision or yearly appraisals and have standardised content for all age groups around training, development and work/ life balance, which would allow the employee opportunities to raise issues as they arise.

# Summary

This section has shown the importance of employers and employees proactively discussing and planning for an older workforce both through policy and procedures but also in individual circumstances. For employers looking for guidance to make their workplaces more age friendly, Welsh Government has published a guide<sup>39</sup> with links to useful resources. Key actions include:

1. Checking marketing and recruitment procedures are suitable for all
2. Ensure skills development is for all ages
3. Offer flexible working or opportunities to use skills within other roles





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## A Healthy Retirement

Retirement from working life marks a key transition for many people and for most is a positive experience but, as with employment, experiences vary greatly within different groups. Upon retirement, a drop in income may particularly affect those from lower socio-economic backgrounds and ethnic minorities. People from a black and minority ethnic group are twice as likely to be poor in later life when compared to white people<sup>40</sup>. This is linked to experiences of inequality over time with increased experiences of lower earnings, higher levels of self-employment and breaks in employment which impact on pension savings in some groups<sup>41</sup>. Women are also more likely to experience a pension deficit caused by lower overall earnings combined with caring responsibilities. Where these issues come together, for example the experience of being an older woman from black or minority ethnic background, these issues can be compounded.

A survey of Cardiff and Vale UHB staff found that 38% of respondents said that they were looking forward to a more relaxing pace of life and time to enjoy more leisure activities. However, the drop in income was of concern to many people. Fifty-one percent of respondents noted they would need to be mindful of their money and nearly 10% felt they would worry about the loss of earnings.

The importance of being both financially prepared and having a sense of control over our retirement has previously been noted, but the transition into retirement also impacts on social connections and feelings of purpose. Sometimes what people expect to miss on retirement can differ from what they actually miss, as shown in the results of a large study<sup>42</sup> with over 6,000 adults in the UK in 2016 (figure 11 below). Many people reported that they missed colleagues, and the satisfaction and sense of purpose that work gave them more than they thought they would.

Respondents to the Cardiff and Vale UHB staff survey also identified factors besides the loss of earnings which they think they could experience in retirement:

*“Miss my friends and work-day structure”*

*“Loss of identity”*

*“Loss of status”*

*“Worried about spending too much time alone”*

Figure 11: Retirement expectations

Top five aspects of work people expect to miss when they retire		Top five aspects of work people actually miss once they retire	
The money	65%	Friends and colleagues at work	67%
Friends and colleagues at work	36%	Satisfaction/fulfilment from the work itself	49%
Having a daily routine	33%	Having a sense of importance or role to play	45%
Satisfaction/fulfilment from the work itself	23%	The money	43%
Having a sense of importance or role to play	21%	Giving myself new challenges/ experiences	21%

Source: Aviva. Voice of new retirement report. 2016

## UNDERTAKING PURPOSEFUL ACTIVITY IN RETIREMENT

*"I like to keep busy, I think that's my motivation. I like to be active and busy, and I like to get out and about and engage with people"*

When it comes to retirement many people do not have clear ideas of how they want to spend their time with many just reporting goals around 'living comfortably'<sup>41</sup>. This lack of expectations and planning is likely to lead to lower levels of purpose on retirement.

Participants from focus groups held for this report said that they found purpose from many different areas in their life in their retirement including from their faith, caring responsibilities, volunteering and helping plan community events. They valued using their experience in life to help others and defined purpose as 'something to get up for' and 'something to use your brain for'.



People could be helped to find activities by organisations providing retirement planning support with a holistic approach. Currently, much of the information, advice and support around retirement is aimed at financial or practical matters and neglects the emotional and social impact<sup>41</sup>.

Research into the provision of the retirement planning courses outlined in the section above, found that after attendance, 90% of participants had a conversation with their partner, 40% started a new leisure activity and around two-thirds had started to do more physical activity<sup>43</sup>. Retirement planning courses should include support for people to consider what kinds of activities or volunteering opportunities they could get involved with upon retirement.

### Keeping Healthy in Later Life

People with higher levels of purpose are more proactive in taking care of their health, they have better impulse control, and engage in healthier activities<sup>44</sup>. Research on the transition into retirement has found that those who had difficulties moving into retirement were more likely to have poor lifestyle behaviours and have a decline in both mental and physical health<sup>41</sup>.

### Supporting Health Literacy

Health literacy is about people having enough knowledge, understanding, skills and confidence to use health information, to be active partners in their care, and to navigate health and social care systems<sup>45</sup>.

Health literacy is an important factor in self-care and the management of health as it gives us the skills to find information and make informed choices about healthy lifestyle behaviours, and to be able to seek support and to care for others. Lower health literacy levels are linked to an individual's increased likelihood to have a poorer diet, smoke and take less physical exercise. Those with lower health literacy are also likely to struggle to access appropriate health services and less likely to take part in screening and vaccination programmes<sup>46</sup>.

The groups within the population most likely to have lower health literacy include<sup>47</sup>:

- older people
- lower socioeconomic groups
- ethnic minorities and migrants
- disabled people
- people with a long term health condition

Whilst it can be difficult to spot if someone has lower health literacy, it can be addressed in a few simple ways. NHS Scotland has recently produced guidance for health professionals which includes: using pictures and simple language avoiding jargon on written instructions, breaking up information into manageable 'chunks', tailoring information to people's

needs, offering help with form filling and use of 'teach-back' techniques. These involve asking a person to use their own words to explain back to the health professional information that they have been given, for example how to take their medication. This can then identify any gaps in understanding<sup>45</sup>.

## Supporting Digital literacy

A further layer to health literacy is the shift towards more information being available only on the internet with many paper-based sources of information reduced due to cost and sustainability issues. This shift has been accelerated within healthcare recently due to the COVID-19 pandemic. Many services within Cardiff and the Vale of Glamorgan are now offering online consultations. In the Health Board these include services such as rheumatology, podiatry, mental health and physiotherapy.

Digital literacy can be defined as those capabilities that fit someone for living, learning, working, participating and thriving in a digital society<sup>48</sup>. In Wales, in 2018-19, 49% of people aged 75 or over were internet users, an increase from 22% in 2012-13. As tech-savvy population groups age, use of the internet and technology will also further increase. Chapter 4 will explore in more detail how using technology can help people to connect with others and the services and support they may need.

## Summary

Purpose is an important driver of health and wellbeing which can be found in many aspects of our lives including work, volunteering (this will be covered in the next chapter) and retirement activities. The picture of working and retirement is changing. Employers recognise the benefits of an age diverse work force but will need to engage further with the older age group to be able to retain and best use the skills and knowledge of these employees and provide a supportive and flexible environment.

For those approaching retirement, it is clear that there is great importance attached to having a level of control over this process and to consider finances, health and building activities into retirement. Early planning is key for the health and wellbeing of people planning retirement, and employers can offer many ways of helping people to move through these phases.

Looking after our health to support us working longer and to enjoy a healthy retirement should be supported both by our employer and through self-care. Health and digital literacy are vital skills to help people stay healthy and manage health conditions and some groups in the population will need additional support to ensure their needs are met. People should be able to access information in a way that they can understand and be able to learn skills around improving literacy.



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# CALL TO ACTION

## Public

Plan early for retirement ensuring you consider existing or new activities that are purposeful and meaningful to you. Find out if your employer offers a retirement planning course and start planning, ensuring you understand your pension and have planned for your financial needs for retiring

## Cardiff and Vale of Glamorgan Public Services Boards

Advocate for the development and implementation of age-friendly policies across public services

## Cardiff and Vale University Health Board

Improve support for health literacy and consider accessibility of information when designing or providing services, providing information and advice, or when prescribing medication

## Workplaces and employers

Develop an age-friendly framework for the organisation, which incorporates the adoption of Ageing Better’s guide to become an age-friendly employer, or uses the Welsh Government toolkit

- Be flexible about flexible working
- Hire age positively
- Ensure everyone has the health support they need
- Encourage career development at all ages
- Create an age-positive culture

For employers of physically demanding job roles, consider how jobs can be adapted or assistive technology used to support people in their employment when needed

Support employees to ensure transition to retirement is well planned. Provide

holistic information on financial planning, healthy lifestyles, volunteering opportunities, learning opportunities and activities

Offer retirement courses for employees to be able to receive specialist advice and information, at various stages in their employment, not just when they are close to retirement age

Seek support from Business Wales on training and skills development for your workforce



## CHAPTER 4

### CONNECTIONS IN LIFE

Previous chapters have focused on how individuals are able to create and maintain purpose and meaning in later life; through working, retirement, taking part in activities and in keeping healthy. Being connected to others is also important in being able to have a happy later life<sup>49</sup>. Positive social connections with family, friends, community and colleagues help us to feel that we belong, give purpose to our lives and increase our sense of wellbeing.

As well as providing a sense of belonging and security there is growing evidence that positive social connections contribute to good physical health. Participating in shared activities not only supports physical health and a feeling of connection, it can also enhance brain health by helping to maintain our 'thinking skills' as we age, and slowing down cognitive decline<sup>50</sup>. Being socially active may also reduce the risk of developing dementia. Conversely, evidence highlights that loneliness and lacking social connections is as bad for health as smoking 15 cigarettes a day<sup>51</sup>. Loneliness and social isolation can have as negative an impact as chronic long term conditions such as diabetes and hypertension<sup>52</sup>.

This chapter will outline the importance of social connections and highlight the issues of loneliness and social isolation which can sometimes impact on older people in our communities. We will suggest ways in which individuals, communities and organisations can enable people to stay connected, make new connections, reduce the risks of becoming lonely and enhance wellbeing.

The Covid-19 pandemic has changed our daily lives and routines. The measures put in place to control the spread of the virus have prevented many people from seeing family, friends and members of their community. Community groups, clubs and activities that supported social connections have been cancelled. Spending more time at home has meant that the usual way that people connect face to face with others has not been possible for several months.

People over the age of 70 are more likely to be hospitalised if they acquire Covid-19 and therefore have been advised to stay at home as much as possible. Although this guidance was put in place to protect the health of older people it is likely that this period

has had an impact on people's mental health and wellbeing. Social distancing and not having face to face contact have been found to have a significant negative short term impact in relation to isolation, loneliness and disconnection from social support for older people<sup>53</sup>.

To overcome the impact of staying at home many people may have adapted the way they connect with other people using technology, social media and meeting up virtually. Many organisations have also adapted the way that they communicate with people, using telephone and online services.





Source: Campaign to End Loneliness  
<https://campaigntoendloneliness.org/guidance/>

## Social connections

People differ in the way that they seek out company of others, but humans have a fundamental need to interact with others. People who have meaningful relationships are happier, have fewer health problems, and live longer than those who do not<sup>54</sup>.

In Cardiff and the Vale of Glamorgan many people have active social lives and connections that they have developed during a lifetime and will continue to feel happy and fulfilled into old age connecting with family, friends and the local community. Indeed, 65.5% of people aged 65 and over in Cardiff and the Vale of Glamorgan report that they feel a sense of community<sup>55</sup>. Only Powys Teaching Health Board area has a higher percentage of people reporting feeling this level of a sense of community.

Social connections are enhanced by a wide range of community assets that include good transport links, green spaces, leisure amenities, community groups, clubs, libraries, community hubs, learning and volunteering opportunities and more. Where people live, and how they are able get around, plays an important role in how well they can make and keep social connections. Chapter 4 on ‘place’ will explore how the physical

environment can enhance the ability of people to connect with others. Helping people to make and maintain social connections can be complex. The Campaign to End Loneliness has produced a Loneliness Framework (left), which sets out the range of interventions that need to be in place to tackle the issue of loneliness and a lack of social connections.

## Loneliness and social isolation

The terms loneliness and social isolation are often used interchangeably but they are not the same thing. People can be isolated yet not feel lonely, and people can be surrounded by others but still feel lonely. In the newly published strategy to tackle these issues, Welsh Government defines these terms<sup>56</sup>, where the first is subjective and the second is objective.

Loneliness is a subjective, unwelcome feeling of lack or loss of social relationships. It happens when there is a difference between the social relationships we have and those we want.

Social isolation is when an individual has an objective lack of social relationships (in terms of quality and/or quantity) at individual, group, community and societal levels.

Loneliness is not an inevitable part of getting older: 88.5% of people aged 65 and over in Cardiff and the Vale of Glamorgan do not feel lonely<sup>55</sup>. However, for the 11.5% who do report feeling lonely, which is currently around 7,800 people, this is an issue which can impact upon their wellbeing. Although people can experience loneliness at any time during their life, older people are particularly vulnerable as their social connections change with age and circumstances such as retirement, caring responsibilities and bereavement<sup>57</sup>.

Social isolation is about the number of social contacts that people have, and not always about the quality of these contacts. People may choose to have a small number of social contacts, and often people are able to develop more contacts should they wish to. Isolation can lead to loneliness if people are unable to connect to others, just

as loneliness can also lead to social isolation.

As people move into later life there can be a number of triggers which could lead to loneliness and social isolation, including bereavement, retirement, giving up driving, taking on a caring role or experiencing ill health<sup>56</sup>.

There are some recognised variables which can be used to identify people who may be at risk of becoming lonely or isolated<sup>58</sup>:

- Having a head of household over 65 years old
- A household with one occupant
- Not owning a car
- Speaking to neighbours less than once a month or never
- People saying they are not satisfied with their social life
- Having a low annual income

## Inequalities and social isolation

Most older people living in Cardiff and the Vale of Glamorgan feel connected to their communities, families and friends. However, there are often differences in experiences depending on where people live, their financial circumstances and ethnic backgrounds which can result in unequal levels of health,

wealth and happiness and security in later life<sup>59</sup>. People living in the most disadvantaged areas experience greater levels of poverty, and the link between social isolation and poverty appears to be stronger among older people than working age adults<sup>60</sup>. Poverty can mean that some older people may be unable to afford the cost of transport to visit friends or family or attend a social activity<sup>56,61</sup>. Older people need to be supported to access activities in areas of disadvantage, and to be able to access advice in order to maximise their income.



*Older people are particularly vulnerable to experiencing loneliness as their social connections and circumstances change with age*

# Supporting older people to make connections

There are many approaches to supporting older people to make and maintain social connections, and reduce the risk of loneliness and social isolation.

# Recognise older people as assets

Assets are resources, skills, or knowledge which enhance the ability of individuals, families and communities to sustain their health and wellbeing<sup>62</sup>. Asset based approaches value, nurture and use this potential to enhance local community connections, build resilience and improve wellbeing at individual and community levels<sup>63</sup>.

Chapter 1 outlined the extent to which our older population will grow by 2039. This increase in numbers brings a large number of community-based assets we can draw on to improve health and wellbeing. All age groups can benefit from the skills, experience and knowledge of older members of the community.



Film by Lucy Thomas, Creative Media Level 3 student, Cardiff and Vale College

Social capital is defined as the functioning of social groups, a shared sense of identity in a community, values and trust developed through social relationships. Having strong social capital can support individuals' resilience to and recovery from illness<sup>63</sup>, and the quality of longer term social relationships can protect health and wellbeing<sup>62</sup>. Older people can support the development of strong social capital through volunteering, caring, education and employment.

Many of the people that we have spoken with in developing this report have had the opportunity

to develop new social connections and build social capital following their retirement through taking part in a wide range of hobbies and activities such as volunteering, clubs and sport. They benefit individually from connecting with people, but they are also important assets, supporting other people and their local community. In the film above, we meet Maggie, who has set up exercise classes for older people as what she describes as her 'second career', enabling her to build social capital for herself and for others in the community. People who come to her classes make new connections, as well as benefit from the exercises.



# Recognise the risks of loneliness and social isolation

Although loneliness is a subjective and personal experience, there are factors that can lead people to be more likely to feel lonely. It is important that we enable individuals, their families, friends and the professionals that work with older people to recognise some of the triggers that can lead to changes in social connections outlined earlier in this chapter. If people are more aware of the factors listed here it could help them to make plans and engage with services that can support them as their circumstances change<sup>64</sup>.

Source: AgeUK, Evidence Review:  
Loneliness in later life (2015)



**Retirement** - though many of us look forward to retiring from work the reality can be very different. People often miss the routine of going to work, social contact with work colleagues and the sense of purpose that work can bring.



**Bereavement** - the loss of a partner, family members or friends is a key trigger for loneliness often leaving people living alone.



**A lack of close family connections** - many people live far away from loved ones. Modern life sees more families geographically scattered across the UK and even overseas due to work or family changes.



**A lack of regular contact with friends** - as we age our friendship circles will change. Companions can move away and friends can become limited by poor health making socialising more difficult.



**Becoming a carer for partners or family members** - caring for others is an important part of life that can be very rewarding but also brings challenges. Being a carer may mean that you don't have the time or energy to see friends or family.



**Poor physical health** - as we age health may deteriorate and our mobility may be affected. This can limit how we socialise and make it difficult to maintain our connections.



**Lack of transport** - being able to travel to social activities and meet with friends and family is key to maintaining connections. Losing the ability to drive can impact on independence and limit social lives. Access to regular public transport is key to enable older people to travel. This can be problematic in rural areas where connections are less frequent.



**Financial difficulties** - can be stressful, and also limit how often people can get out and socialise.

MAKE EVERY  
CONTACT COUNT

‘Making Every Contact Count’ (MECC) is an approach that encourages people to build on their daily interactions with people to improve their health and identify issues which may be affecting their health and wellbeing.

Having short interactions provides an opportunity to ask individuals about lifestyle topics such as physical activity or smoking, provide information and signpost or refer to local services as needed.

If individuals, professionals and organisations are aware of the triggers for loneliness they can make every contact count, having conversations with older people to identify triggers and signpost to services that can help build social connections.

Welsh Government will be exploring the potential for a specific ‘Making Every Contact Count’ training module on loneliness for public and third sector organisations. This would enable staff to develop their skills and consider loneliness when promoting healthy lifestyles and signpost people to services that can support them<sup>56</sup>.

## Identify areas where people may be lonely or isolated

In addition to taking a MECC approach and having conversations with people to identify triggers for loneliness or isolation, some of the variables listed earlier can be mapped for Cardiff and the Vale of Glamorgan. If the geographical areas where people at greatest risk live are identified, this would enable targeting of interventions to improve social connectedness.

## Develop social prescribing approaches

Social prescribing, sometimes called community referral, links people to community services that can offer support emotionally, socially or practically. There are different models of social prescribing most of which involve a ‘link worker’ or ‘navigator’ who will help people to access local sources of support or activities. These local activities can include volunteering, befriending, gardening, creative activities and walking groups and can provide an opportunity for people to socialise and make new social connections<sup>65</sup>. The approach has been recognised as having a number of positive outcomes that include reducing isolation alongside improved self esteem and resilience<sup>66</sup>.

Age UK recommend that health care professionals can support initiatives to address loneliness including social prescribing<sup>67</sup>. Health professionals can play a key role in identifying people who may be lonely or isolated. It is estimated that three out of four General Practitioners (GPs) across the UK see between one and five people every day who have come to them because they are lonely<sup>68</sup>.

The Royal College of GPs (RCGP) has launched a community action plan to help GPs tackle loneliness. The plan includes providing training for health care professionals to help them identify patients at risk of becoming lonely and building links with voluntary sector organisations that can help. The RCGP would like to see a dedicated ‘social prescriber’ in every GP surgery who can work with patients to match them with community activities that will help them to build social connections<sup>68</sup>.

Social prescribing is available at some GP practices in Cardiff and the Vale of Glamorgan delivered by the ‘Wellbeing 4U’ team. The team can offer one to one support and signposting and often work with patients who have been referred because they are lonely would like to get involved with their community.

*Wellbeing4U  
offers GPs an  
opportunity to  
support people  
with non-  
medical needs,  
such as social  
support*



It is not only GPs who can identify people who are lonely. From hairdressers to post office staff, and many staff in local authorities and community organisations, many colleagues will come across older people who need support to build their social connections. Social prescribing, or community signposting, can be undertaken by all of these people, as well as volunteers and local community members and it can be done simply and easily.

Welsh Government is committed to support the further development of social prescribing in Wales. The recent strategy for tackling loneliness has a number of actions around social prescribing that include: continuing to work in partnership to develop the evidence base for social prescribing; developing an outcomes framework for social prescribing and launching an online resource portal to support social prescribing activities in Wales.

## Use technology to connect

Confidence in using, and having access to, digital technology has the following benefits<sup>69</sup>:

- Improved self-care for minor ailments
- Reduced loneliness and isolation
- Improved self-management of long term conditions
- Improved take-up of digital health tools and services
- Time saved through accessing services digitally
- Cost saved through accessing services digitally

Despite the benefits, there are barriers to using the internet for some older people. Security risks, lack of knowledge, support and skills, access and disability have all been cited as reasons that older people may not use the internet<sup>70</sup>. Older people we spoke to highlighted that some people may see using technology such as the internet or social media as detrimental to social connections. They fear that as more people communicate online rather than face to face, they risk becoming disconnected from people and the real world around them. It is important to recognise the barriers people face and support them to become digitally included<sup>71</sup>.

There are several ways in which organisations can support people who want to access the internet. For example, administrative staff in GP practices could be trained to support customers to register and manage their appointments online<sup>71</sup>. Organisations can also sign up to a *Digital Inclusion Charter* from Welsh Government which outlines six principles to support their staff, volunteers and users. [www.digitalcommunities.gov.wales/digital-inclusion-charter/](http://www.digitalcommunities.gov.wales/digital-inclusion-charter/)

Welsh Government is currently offering support to organisations through *Digital Communities Wales - Digital Confidence, Health and Well-being*. The project aims to increase people's confidence in using digital technology to help them improve their health and reduce loneliness and isolation. The project includes the training of Digital Volunteers, who can link to organisations to provide support people to learn and gain confidence in using technology [www.digitalcommunities.gov.wales/](http://www.digitalcommunities.gov.wales/)

The 'Digital Companions' project helps organisations working with older people to identify and support someone in their clients support network to become their companion and support them to get on line.

*'I enjoyed being  
a 'digital hero'  
because it was  
really rewarding  
to know that  
we are changing  
someone's life for  
the better, not  
just by showing  
them how to be  
online but also  
just by chatting  
to them, visiting  
them and taking  
time to find out  
about their lives'*

Year 6 pupil, St  
Mary's Catholic  
Primary School

In addition, the all-Wales 'Digital Heroes' project brings together the older generation with children and young people to share their digital knowledge and skills. Children and young people are trained to help others use the internet safely. Pupils from St Mary's Catholic Primary School in Cardiff have trained to become 'Digital Heroes' and have been supporting older patients at St Davids Hospital to access the internet when they are in hospital.

There are many local opportunities to help people get online including support at libraries and Council hubs in Cardiff and the Vale of Glamorgan, and on line support and resources for those who want to increase their confidence ([www.dewis.wales](http://www.dewis.wales)). These should be advertised and promoted to older people using appropriate communication such as local newsletters, and providing information at local activities such as lunch clubs and exercise groups.

Focus group participants spoken to in developing this report were keen to talk about their use of the internet, social media, Skype and Facetime. These enable them to stay in touch with family and friends who live far away, make new friends by belonging to online groups and forums and finding out about local activities.



*"I think the more groups you  
join, the better it is. I haven't  
got enough time to join them  
all, that's the trouble!"*

During the Covid-19 pandemic many people have adapted the way they connect with others and have used technology and social media to communicate with and meet people virtually. This has helped to overcome the impact of staying at home more and missing out on the usual ways of connecting. For some older people, the range of digital connections has made it easier to access information, but many others have needed to rely on other people to provide them with the information<sup>73</sup>.

Although technology cannot replace meeting people face to face, it can provide an opportunity to maintain social connections. 'The Campaign to End

Loneliness' suggests that families, friends and neighbours stay in touch by calling each other regularly by phone, creating WhatsApp groups and using Facebook and Twitter to stay connected<sup>74</sup>.

### Use community facilities as assets to enhance social connections

Although technology can be a very useful tool for connecting people, many of us enjoy the experience of meeting face to face. During the current pandemic many face to face activities have been paused, but some could potentially resume, in a physically distanced way as we move into the next phase of living with Covid-19. Community groups, clubs and activities can support people to reconnect, maintain existing relationships





and make new connections. A review of loneliness initiatives has identified the most effective loneliness interventions as being group based, targeted at specific groups, focused on a shared interest and set up to involve older people in the running of the group.<sup>75,76</sup>

A participant in one of the focus groups gave her thoughts about face to face connections:

*It's (social connections) like a spectrum... at one end there is a 'Hello' and a smile and at the other end there are meaningful relationships.*

Focus group participant (January 2020)

In Cardiff and the Vale of Glamorgan there are a wide variety of services and community activities at all levels on this spectrum. At one end there are 'happy to chat' benches in Cardiff and the Vale of Glamorgan to encourage people to talk to one another face to face. The idea came from the observations of a Cardiff woman who noticed an older gentleman sitting alone in a park. Many people passed him by but nobody said 'Hello' resulting in the idea of tying a sign to the bench saying 'Happy to chat bench. Sit here if you don't mind someone stopping to say hello'.

Providing benches as resting points is essential for enabling older people to walk easily in their community. If benches are being provided as part of a development or regeneration project, having some designated as 'happy to chat' benches could help to address isolation.

At the other end of the spectrum there are activities that can help people to connect face to face and in groups ranging from coffee mornings, luncheon clubs, knit and natter groups to physical activity opportunities such as walking football.

*"I never get lonely, I've always been busy"*

These activities often take place in community buildings such as village halls that are a substantial asset to communities, allowing people to attend groups and activities in their locality without having to travel far. Places of worship also help to maintain connections and run social activities and groups. In Cardiff the Council run 'Hubs' bring together library services, council services and often community cafes under one roof, and the Independent Living Service supports older people to access services and make new connections.



*"I run my local community hall on a daily basis, I communicate with the various groups who use it, helping with the bookings and if they've got any issues they contact me"*

Several organisations working to support older people across Cardiff and the Vale of Glamorgan provide support such as befriending schemes and community support to signpost people to appropriate services. These projects aim to reduce loneliness and link people with community activities as well as provide practical support.

## Some examples of community groups and activities available in Cardiff and the Vale of Glamorgan

- The 'Men's Sheds' movement is for men who may have free time due to retirement, bereavement or because they are new to an area. They aim to benefit men's health and wellbeing in an environment where they can pursue practical activities such as woodworking, metalworking, repairing and restoring.



*"Men's Sheds is a community based project which keeps people socially active, mentally and physically active, doing projects for their own community"*

- 'Goldies Cymru' host singing and activity sessions for older people in community venues across the area encouraging people who are socially isolated to meet others sharing 'singing and smiles'.
- There are many luncheon clubs running in community venues and churches where older people can meet new people, build a social network and enjoy a meal for a small cost.

## Provide information to older people in an accessible way

Although there are activities and services available, many older people will not know they exist. It can be a challenge to reach people who are isolated with information about support services.

The Dewis Cymru website [www.dewis.wales](http://www.dewis.wales) is an online directory where people can find information about organisations and services that can help support their health and wellbeing. It enables the public and organisations to search for community groups and activities that will can help build community connections.

Although directories and websites are important tools, speaking to older people for this report highlighted the need to also use more traditional methods of communication. People felt that targeted delivery of flyers and leaflets can be effective as well as posters in shop windows, GP surgeries, community notice boards and adverts in local press. Word of mouth was also mentioned as being an important way to promote community groups and activities.

## Provide volunteering opportunities

Volunteering can be a positive experience at any age and gives people the opportunity to learn new skills, contribute to their local community, gain confidence, have fun and meet new people. Older people have many skills and talents to share which can benefit fellow volunteers, organisations and communities. Volunteering in later life can increase the quantity and quality of social connections, enhance a sense of purpose and self-esteem and improve life satisfaction, happiness and wellbeing<sup>77</sup>.

The National Survey for Wales indicated that in Cardiff, 32% of adults aged between 65 and 74 years volunteer<sup>78</sup>. However, there are barriers that prevent people volunteering that include poor health, caring responsibilities, and financial challenges. People from black and minority ethnic communities also face barriers to volunteering<sup>79</sup>. Older people living in rural areas may also have limited volunteering opportunities. For some people there also be emotional barriers that stop them from volunteering such as a lack of confidence.

*"When people finish work, I think it's filling that time, what can I do? We all want to feel as if we're still part of a community and that people care about us"*

Elaine, aged 78, volunteers for Age Connects as a 'Befriender'. Before she retired she was a social worker for older people and had a lot of skills and experience to offer Age Connects and the older people they support in the community. Elaine describes volunteering as

*"giving structure to your time. When you retire it is not always as pleasant as you imagined as you can feel a bit lost. When you first finish work you can drift".*

*"... it's a positive feeling when you see your client making progress. They look forward to seeing you as they often don't see anyone else during the week. You feel that you have done something positive and are giving something back. It helps them to reconnect".* Elaine, Age Connects volunteer.

Organisations or groups who recruit volunteers should have an age-friendly approach and allow people to be flexible in the time they give, to feel supported, socialise with other volunteers, feel valued and the work they do should have meaning and purpose, making good use of their skills<sup>81</sup>.



Volunteering can also be a way to earn 'time credits'. The Time Credits scheme is run by 'Tempo' a charity that started in Wales and now operates across the UK. Time credit schemes encourage people to volunteer in projects from community gardens to befriending schemes. By volunteering one hour of time people can earn one time credit. Time credits can be 'spent' on activities and services such as cinema tickets, swimming or attending

sporting events that can benefit health and wellbeing and be an opportunity for further social connection.

Earning time credits through volunteering can be a great opportunity for people to build social connections and meet people in their community, and help to reduce loneliness. Opportunities to earn credits are available across Cardiff and the Vale of Glamorgan and are open to all ages ([www.timecredits.com](http://www.timecredits.com)). The Vale of Glamorgan Council has established a successful time credits scheme for housing tenants which is expanding to include non council tenants.



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## Develop intergenerational projects

Intergenerational projects bring older and younger people together. They aim to build relationships, respect and understanding between different age groups, challenge attitudes and can involve sharing skills, memories and ideas between different generations<sup>81</sup>. The majority of intergenerational projects aim to support older people to improve their health and wellbeing, reduce loneliness and isolation, improve access to services and provide an opportunity to engage in other activities<sup>82</sup>. Benefits also include an increased sense of community belonging and improved community connections.

The ‘Time after Time’ project in Cardiff involved Goldies Cymru working in partnership with Thornhill Primary School to enjoy time together and sing with the pupils. Following the success of this project, Goldies have launched a new intergenerational project called ‘Back 2 School’ to encourage primary schools to invite older people from their local community into a school setting to share memories of their school days and sing together. Schools can access a free project pack and resources to set up a project that can benefit pupils and older

people in the community and build social connections.

Another example of an intergenerational project taking place in a school setting is the Cardiff and Vale University Health Board “Staying Steady Schools’ project”. The initiative brings together primary school children and older adults along with university students, to provide intergenerational learning around falls awareness. The aim is to increase knowledge about falls risks whilst creating an opportunity for social interaction and learning<sup>83</sup>.

The Older People’s Commissioner for Wales wants to support communities to establish intergenerational groups that bring younger and older people together. In partnership with the Children’s Commissioner for Wales, a set of resources have been launched to help communities set up and run intergenerational projects and enabling both the older and younger generations to benefit and build new community connections<sup>84</sup>.

## Summary

Positive social connections give purpose to our lives, increase our sense of wellbeing and contribute to good

physical health. In Cardiff and the Vale of Glamorgan many of us have active social lives and connections and will continue to feel happy and fulfilled into old age. However, there are sometimes triggers in life that can lead to changes in social connections and potentially lead to loneliness and isolation. Recognising and responding to these triggers is important for both individuals and organisations who support older people.

There is not a ‘one size fits all’ approach to supporting people to increase and enhance their social connections and tackling loneliness is complex and a long term challenge. However, there are a wide range of approaches that can help, and the increased use of technology due to Covid-19 should be used, and continue to be used, as a key mechanism for engaging with older people in addition to the face to face activity.

There are many opportunities for professionals, communities and individuals to identify older people who may be lonely and support them to access one of the many services and projects in Cardiff and Vale that can enable connection with others, improve wellbeing and help them to enjoy and celebrate later life.



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# CALL TO ACTION

## Older People

If you find it difficult to use technology and access the internet, find out how you can get support to get connected by visiting your local library or Council hub

Join a group, volunteer or try a new activity, as these are great ways of meeting people and making social connections. Your local library or hub can help you find activities

## Public

Be aware of the potential triggers for loneliness. If you are in contact with older people, ‘make every contact count’ and ask them if they would like to know more about how to make social connections and help them to find out what is available in their local community

## Welsh Government

Develop a national campaign to raise awareness about loneliness to compliment ‘Connected Communities. A strategy for tackling loneliness and social isolation and building stronger social connections.’

## Regional Partnership Board

Map the risk factors for loneliness and isolation and identify geographical areas to target

interventions across Cardiff and the Vale of Glamorgan

## Cardiff and Vale of Glamorgan Public Services Boards

Support those with low levels of digital literacy through involvement with the Digital Communities project targeting those most in need of support

Sign the Digital Inclusion Charter and implement its six principles

Implement the principles of ‘Age Friendly Communities’

## Cardiff and Vale University Health Board

Promote the Royal College of General Practitioners ‘Tackling Loneliness. A community action plan for Wales’ amongst primary care colleagues and partners to raise awareness of loneliness and advise how lonely patients can be identified and supported

Ask patients about social connections during their appointments in primary or secondary care and signpost them to social prescribers or community organisations when needed

## Workplaces and employers

Encourage all staff to ‘make every contact count’ and ask older clients and service users if they would like support to make social connections, and to be aware of triggers for loneliness

Raise awareness of the opportunities and resources available in local communities to tackle loneliness and isolation. Promote [www.dewis.wales](http://www.dewis.wales) using accessible and appropriate communication tools for older people

Support the provision of ‘Time Credits’ schemes to encourage older people to take up volunteering opportunities

Use intergenerational activities to bring older and younger people together to learn from one another, tackle loneliness and improve community connections

Promote volunteering opportunities for older people in the local community using methods such as fliers, posters and the local press alongside digital promotion

## CHAPTER 5 PLACES FOR LIFE

The previous chapter focused on the importance of staying connected with others as we age. The physical environment and where we live plays an important part in how well we are able to do that, such as where local services including GP surgeries, dentists and pharmacies are located, what amenities are in our local area such as parks and shops, and what public transport is available to get to places. With the recovery from Covid-19 being at the forefront of current attention, where we live is going to play an increasingly important role in helping us to live healthier lives. With restricted movement from our homes, our home and the local environment become even more important to our wellbeing. The physical environment is important in supporting people to have good physical and mental wellbeing and deal with the impact of social isolation.

Mobility, or our ability to get around, and transport are important in helping people to remain healthy, active and connected in later life. Being able to get to shops, services and see friends and family enables us to have a good quality of life in a practical sense, but it also supports our emotional needs as we can connect to others<sup>85</sup>. Mobility and having social support are key to healthy ageing, and to improve these, there is a need to consider how we can create age-supportive environments<sup>86</sup>.



Film by Letitia Aherne, Creative Media Level 3 student, Cardiff and Vale College

In later life we may start to face some challenges in how we get around our local area, and mobility needs can change. Flexible transport options are needed, such as public or community transport, or being able to walk or cycle, but these can sometimes be limited. There are many factors which influence how easily people are able to live independently within their community, and in particular for people with reduced mobility. These factors can include environmental obstacles such as poorly maintained pavements, a lack of pedestrian crossings, or poor signage<sup>87</sup>.

Across Europe there is a growing movement to create more age-friendly environments<sup>88</sup> and this chapter will highlight some of the approaches that can support this movement and help people to experience good health and well-being as they move into later life.

In the film above, we meet Ron, who talks about what he enjoys about living his local area and how important the local facilities are to his wellbeing.

## Age-friendly spaces: an international concept, locally applied

The World Health Organisation (WHO) Global Network for Age-friendly Cities and Communities is about cities and communities worldwide who are striving to better meet the needs of their older residents<sup>89</sup>. Creating age friendly environments requires action from across the spectrum of sectors, from local government to the third sector, and from housing to care providers. Cardiff Public Services Board has already committed to work towards gaining age-friendly status. It could provide impetus and a mechanism for adding value to our urban and rural environments, as accessible and supportive in order to meet older people's needs now and in the future so it would be useful to also explore this opportunity in the Vale of Glamorgan.

When planning and designing outdoor spaces and buildings, there are ways to ensure that the environment is age-friendly and supportive for people as they move into later life. The WHO toolkit for policy makers and planners provides guidance on developing, implementing and evaluating age-friendly policies and interventions<sup>88</sup>.



The age-friendly outdoor spaces and buildings checklist from the World Health Organisation includes the following:

- Clean spaces with enforcement around noise levels and odours
- Well maintained green spaces with adequate toilet facilities
- Pedestrian friendly walkways in open spaces, free from obstructions with smooth surfaces
- Outdoor seating available, particularly in parks, transport stops, and public spaces. Spaced at regular intervals, and safe to access
- Pavements are well maintained, smooth, level, non-slip and wide enough to accommodate wheelchairs, with low curbs. Pedestrians have priority of use
- Sufficient pedestrian crossings over roads which allow enough time to cross where lights are included
- Separate cycle paths for cyclists
- Street lighting
- Services are close to where older people live and easily accessed (on ground floor), clustered together
- Adequate public toilets that are clean, well maintained and accessible, well signed and in convenient locations
- Buildings are accessible and have the following features:
  - o Lifts
  - o Ramps
  - o Adequate signage
  - o Railings on stairs
  - o Stairs that are not too high or steep
  - o Non-slip flooring
  - o Rest areas with comfortable chairs
  - o Sufficient numbers of public toilets

Source: World Health Organisation (2007) Global Age-friendly Cities: A Guide.  
[https://www.who.int/ageing/publications/Global\\_age\\_friendly\\_cities\\_Guide\\_English.pdf](https://www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf)

**We spoke to a number of older people in the preparation of this report, and they gave their views on what they feel makes their community a good place to live:**

- Community meeting spaces where activities could be held and people don't have to travel too far to see other people
- Gardens and communal green spaces
- Easy to walk to places
- Reliable and accessible public transport
- Better pavements
- More benches
- Traffic calming to slow down traffic
- More public toilets
- New housing estates – need good transport links, maintained community open spaces
- More bins
- Restrict the number of cars at each property

**Accessible transport**

Many older people use public transport to get to places, but equally many do not because of reasons such as it not being convenient, expensive, difficult to access, or because they are struggling with ill health<sup>90</sup>. At the current time, many older people are reluctant to use public transport due to concern over Covid-19, and have reduced use along with many other people in the population<sup>91</sup>. Older people we spoke to talked about some difficulties with using public transport.

*"I am in my late 60s and dread the thought of losing my partner as I don't drive. In outlying areas buses stop after 5pm and you often don't know when public transport services are cancelled or delayed"*

*focus group participant (January 2020)*

If people are to be able to remain connected to others, accessible transport links are vital, and services and facilities need to be positioned as close to people's homes as possible<sup>92</sup>. How we get around also influences our health as we age, with an increasing body of evidence suggesting that walking, cycling and the use of public transport all contribute to better health outcomes. Many people still drive in older age and find this to be an essential means of maintaining social contact, particularly in rural areas<sup>85</sup>.

Older people told us that transport was a big concern. There was a feeling that public transport needed to be improved, and provided adequately in new developments, particularly in the rural parts of the Vale of Glamorgan to ensure that people are able to stay connected to others and to services and activities in the area.

*"As far as future developments are concerned, the Council must ensure that they are adequately provided with transport links (buses). Also community halls and space for shops. Need good infrastructure to bring the community together"*

*Focus group participant (January 2020)*

**Pedestrian crossings**

There are guidelines used around the world for setting the speed at which people should be able to safely use pedestrian crossings, which say that people should be able to walk across at 1.2 metres per second<sup>95</sup>. Local authorities use this guide to reduce the risk of pedestrians being hit by cyclists or motorists. However, studies in the UK have found that many older people cannot walk fast enough to use a pedestrian crossing because their walking speed is below 1.2 metres per second<sup>95,96</sup>. The studies recommend that a crossing speed of 0.8 metres per second should be the standard timing to allow for the slower walking speeds of older people.



## Age-friendly environments

A poorly designed environment and unpredictable public transport services can reduce older people's ability and willingness to access activities and remain independent<sup>87</sup>. Sometimes the design of public spaces can impact on people's ability and desire to walk to places, such as a lack of amenities (benches and public toilets), the condition of pavements, and the design of pavements and footpaths, and a lack of appropriate signage or maps<sup>85</sup>.

*"As we age, we need to keep walking as much as possible and do more to stay healthy. Walking in my area (an urban area in Cardiff) is more pleasant than it was due to the better air quality with some factories closed now, but there are barriers to walking around such as the poor quality of pavements and the fact that people park on pavements, and bikes travel fast along them"*

*Focus group participant (January 2020)*

When people feel safe in their communities and find it easier to get around, it encourages them to have a more active lifestyle<sup>97</sup>. Barriers that the focus group highlighted included the shared use of pavements and footpaths by pedestrians and cyclists. Some people said they were reluctant to use them as cyclists often travel very fast along them and do not use a bell to warn people. Pavements are also often used by cyclists when they are not designated for cycling.

If a new shared use route is being proposed, it is important to consider who may be using that route, and if this includes older people it may be necessary to make some modifications to meet their particular needs<sup>98</sup>.

The availability of seating areas is seen by many older people, including those who took part in the focus groups, as an essential feature of an urban environment. It can be difficult for some older people to walk around their local area without having somewhere to rest along the way.

Although there is a desire to reduce car use generally, when urban realm improvements or pedestrian schemes are being planned, it is important to consider the need to provide disabled parking and drop off spaces for those who need them.

## Walkable neighbourhoods

Being physically active is an important part of healthy ageing as it enables people to retain mobility and can postpone physical decline and lower the risk of ill health such as heart disease and also lower the risk of falls<sup>93</sup>.

Having safe and pleasant local places to get to on foot, along with recreational facilities, open spaces, shops and public transport leads to older people having higher levels of physical activity<sup>94</sup>. A 'walkable neighbourhood' means that people can travel on foot from their home to the places that they want to go. As people age they may become less mobile and able to walk less distance but this change is not always well accommodated for by the design of the environment<sup>87</sup>.



## 15 minute city

This concept is an urban planning strategy aimed to improve the quality of life for people living in a city or a neighbourhood. It is about making services, amenities, green spaces and homes all within a 15 minute walk of each other. [www.youtube.com/watch?v=McGyONofhi4&t=33s](https://www.youtube.com/watch?v=McGyONofhi4&t=33s)

## Planning for people

Creating an environment where people and ease of movement by walking are given priority will benefit the whole of society, but particularly older people for whom walking may be their chosen mode of getting around. We know that if there is less traffic on the streets, more people will interact, move around in the environment, stop and talk to each other, and have much more community interaction, as well as experience lower levels of air pollution, all of which is beneficial for health and well-being<sup>99,100</sup>. Providing easy access to community growing spaces and allotments enables people to benefit from growing their own food, physical activity and social interaction.

## Designing a dementia-friendly environment

There are approximately 5,000 people currently diagnosed with dementia living in Cardiff and the Vale of Glamorgan and a large number living without a formal diagnosis<sup>101</sup>. There are a number of initiatives which are underway that will ensure we have a future inclusive society for everyone, including those people living with dementia. One of these initiatives is the 'Dementia Friendly Communities' work which includes training people to better understand dementia and how to support people. There are now over 25,000 'dementia friends' in Cardiff and the Vale of Glamorgan who have undertaken this training.

Urban design can be highly beneficial for people with dementia, as well as wider society, to ensure that the local environment is as easy to navigate as possible. Some specific elements of urban design recommended by the Royal Town Planning Institute for people with dementia are<sup>102</sup>:

- Familiar environment – making the function of a building or a space clear and obvious, and any changes to this are small scale and incremental;
- Legible environment – having a hierarchy of street types, which are short and fairly narrow. Clear signage at decision points, for example at crossings or junctions;
- Distinctive environment – using features in a variety of styles and materials to make them unique. Use a variety of practical features like trees and street furniture;



- Accessible environment – there should be facilities such as shops and services within a 5 to 10 minute walk of housing. Entrances should be clear and obvious and conform to disability access regulations;
- Comfortable environment – open spaces well defined with adequate seating, toilets, shelter and lighting. Minimise noise through planting and fencing. Minimise street clutter to keep pathways as clear as possible and to not distract attention;
- Safe environment – footpaths are wide, flat and non-slip, development is oriented to avoid dark shadows or bright glare.

Source: RTPI Practice Advice (Jan 2017) Dementia and Town Planning

Housing

The quality of housing is one of the key things that can impact our health and wellbeing<sup>103</sup>. The infographic below highlights some health and well-being impacts of poor housing.



Source: Public Health Wales, BRE Trust and Welsh Government, 2020

Three key factors in homes have the highest health-related impact for older people according to a House of Commons report: if a home poses a risk of falls due to trip and slip hazards; if a home is cold; and the location of the home as it can lead to isolation if people are far away from social contacts<sup>104</sup>.

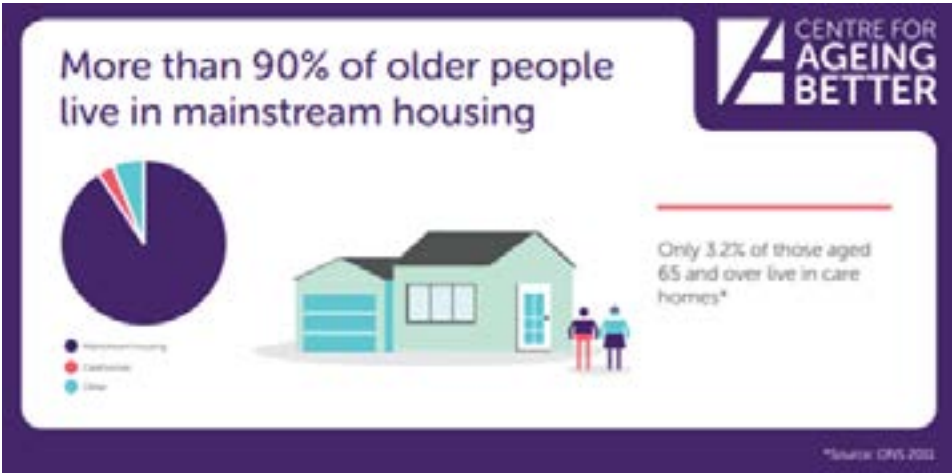
A third of people over 65 and half of those over 85 fall each year<sup>105</sup>. Around half of all of the attendances at the emergency unit in UHW for people aged 65 and over who have fallen are those people who have had a fall in their own home. This is often due to steps or stairs, slipping on the floor or in the bath, or trip hazards like rugs or trailing wires. Falls can have major impacts on the health and wellbeing of older people, both physically and mentally as it can affect confidence when people are worried about going out as they feel they may fall<sup>105</sup>.

The impact of living in a cold home can be serious, with links to chronic diseases such as lung conditions and heart disease. The location of the home is important, as if people are isolated where they live and cannot

get to see friends or family, or get to services, it can lead to loneliness and isolation. As outlined in chapter 4, loneliness can be detrimental to health and wellbeing. Ensuring that older people’s housing is within easy reach of transport, services and amenities is very important to maintain good health and well-being<sup>104</sup>.

The vast majority of older people in Cardiff and the Vale of Glamorgan live in their own home, which reflects the UK position shown in figure 12 below. Most people who live in their own homes intend to stay there<sup>106</sup>.

Figure 12: Percentage of older people living in mainstream housing in the UK



Wales has the oldest housing stock in the UK, and the highest treatment costs in relation to poor housing<sup>103</sup>. It is very important that investment is made in existing housing stock, as there are significant health benefits that can be achieved, and also significant cost savings. For example, in a study by Care and Repair Cymru, home adaptations generated £7.50 of health and social care savings for every £1 spent<sup>103</sup>. This was through enabling quicker hospital discharge, prevention of accidents in the home and preventing people going into hospital.

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## Access to information on housing

One of the key issues identified in the House of Commons Committee review into housing for older people<sup>104</sup> was that there is a need for more advice and guidance for older people to help them make the right decisions about how and where they live in later life. Whether people wish to make improvements to their own home or move to a new home, there can be a lack of appropriate and accessible information available<sup>106</sup>.

People often need specialist advice about housing finance due to having to consider things like pensions and paying for care at the same time. There is information available to try and understand all of this, but lots of it is online, and although this will suit many older people, there are others who do use the internet or would prefer a face to face conversation<sup>106</sup>. This is also a problem for people who may not be able to read as well, or those who do not speak English as their first language.

## Housing stock

Cardiff and Vale of Glamorgan local authorities, and registered social landlords (RSLs), all recognise the issue of having an ageing population and

the challenges this will bring in terms of housing. Cardiff Council has published its Older Persons Housing Strategy 2019-2023<sup>107</sup> and the Vale of Glamorgan Council will shortly be publishing its strategy too. These strategies have been developed following a comprehensive assessment of older people's housing and accommodation needs for the future which was undertaken in 2018 for Cardiff and Vale Regional Partnership Board (RPB)<sup>108</sup>. Due to the predicted significant growth in numbers of older people the assessment concluded that the need for housing of various types would significantly increase by 2035, and action was needed to address this. The RPB has developed an action plan based on the assessment.

The assessment undertaken for the RPB included focus groups with older people to hear their thoughts about housing need. One of the key messages from the focus groups was that older people wanted 'lifetime homes' to be a priority, so that people didn't feel they needed to move, and that services could be accessed easily.

Planning Policy Wales 10 guidance requires authorities to set specific targets for older persons' housing and to work with developers to achieve this<sup>109</sup>, and plan for a mix of market and affordable housing types. Across Cardiff and the

Vale of Glamorgan the local authorities in partnership with RSLs, are making provision for building new homes to accommodate future needs, with a range of housing types and tenures. There is also a need to work with the private house developers in order to build homes where people can remain living throughout their lives.

New homes should meet basic design standards so that people with mobility issues can access them and move around easily<sup>90</sup>. The housing needs assessment for Cardiff and the Vale of Glamorgan recommended that new housing developments should include well designed homes which will appeal specifically to older people who do not wish to move to housing which is designed solely for older people<sup>108</sup>. This could include being part of an inter-generational housing scheme and have features of a 'care ready' home (being able to be adapted to needs).

## Design of homes and spaces

Creating intergenerational spaces can support people to be able to remain living in their communities and help create social connections<sup>87</sup>. There are also ways of designing homes that can help achieve intergenerational spaces and homes that suit different needs throughout a lifetime including:



*“Don’t just look  
at a house as a  
building, think  
about the people  
inside” Focus  
group participant*

*(January 2020)*

diverse spaces for playing, cooking and socialising; wider doorways to provide greater accessibility for example for wheelchairs, mobility scooters or pushchairs; use of appropriate sound insulation; and stair designs that could accommodate a stair-lift<sup>110</sup>. There was a feeling by some focus group participants we spoke to in developing this report that newly built housing developments might be designed to meet the needs of younger generations, but they should be built thinking about who might live there in the years ahead.

All new homes have to conform to certain design standards. A future proofing approach could include planning policies requiring house builders to have a percentage of new homes built using design principles which will particularly support older people’s requirements, enabling them to remain living in their homes for longer. Our two local authorities and social housing providers are already building homes to certain standards, using design criteria such as the Lifetime Homes<sup>111</sup> or HAPPI (Housing our Ageing Population Panel for Innovation) standards.

The HAPPI (Housing our Ageing Population Panel for Innovation) principles are based on good design principles but have particular relevance to older people’s needs. The 10 HAPPI design criteria<sup>108</sup> are:

- Space and flexibility
- Daylight in the home and in shared spaces
- Balconies and outdoor space
- Adaptability and ‘care ready’ design
- Positive use of circulation space
- Shared facilities and ‘hubs’
- Plants, trees, and the natural environment
- Energy efficiency and sustainable design
- Storage for belongings and bicycles
- External shared surfaces and ‘home zones’

## Engaging older people about design and developments

Welsh Government technical advice notes provide detailed planning advice, and local authorities need to take them into account when they are preparing development plans. Note 12: Design<sup>112</sup>, states that “in every area of development earlier and greater attention should be given to the needs of all sectors of society, including older people”. The principle of giving attention to all sectors of society is to apply to the design of public spaces, transport and the location, design and layout of public facilities as well as the design of buildings. The needs of older people should be given particular attention and they should be included in designing new developments.

Engagement of older people in designing new developments or services can provide many benefits to individuals, groups and organisations. This includes learning that can ensure developments and services are fit for purpose; improved relationships in the community; and older people learning new skills, increasing confidence and improving their health and well-being. Many older people want to have a say in the things that affect them<sup>113</sup>.

Manchester has been recognised as a leading age-friendly authority, having been a member of the WHO Age-friendly Communities since 2010. Being 'age-friendly' in Manchester means that older people have the right to influence decisions that affect their lives, and to be able to contribute to their neighbourhood and their city<sup>14</sup>. People are very much part of decision making in the city and have the opportunity to be involved in a wide range of activities including:-

- Being Age-Friendly Champions, advocating for improvements for older people, for example getting bus shelters put up at bus stops in one area of Manchester
- Holding coffee mornings to discuss plans for how homes and neighbourhoods can be designed to be age-friendly
- Being part of the Age-Friendly Manchester Older People's Board, which influences the planning and development of services
- Taking part in consultation activities around plans for new developments

Over the next 20 years, Cardiff and the Vale of Glamorgan will experience a period of significant growth. The Local Development Plans which were adopted in 2016 in Cardiff and 2017 in the Vale of Glamorgan include the provision of around 50,000 new houses across the region, as well as infrastructure such as roads and rail routes, and community facilities. This level of development creates strong opportunities to design healthy ageing into the plans, to create places that support people to be able to have a healthy older age. Older people should be engaged in the development of local development plans, and the plans should incorporate age-friendly and homes for life approaches. At a local level, older people should be consulted around plans for new developments.

### Summary

In the chapter we have outlined the importance of 'place' in healthy ageing, and how where we live impacts upon our health and wellbeing. Having a warm, safe home that is located in an age-friendly environment and close to services, can support older people to remain connected to others, access support when they need it, and retain their mobility.

As Cardiff and the Vale of Glamorgan are in a period of substantial growth, it is an opportunity to involve older people in the design and development of new homes, infrastructure and communities that will ensure their needs are being met. It is also important that we also consider the needs of those people in existing homes where improvements and investments are needed to achieve health improvements.

In designing homes for the future, we are not only planning for older people's needs, but for future generations, as homes can be adaptable. Good design principles can ensure that the health and wellbeing needs of older people is a key consideration when development is undertaken.



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## Public

Take part in community consultation processes when new development is planned for your local area and the Local Development Plans are being drafted

## Welsh Government

Develop more detailed guidance around the design of age-friendly spaces and communities addressing the needs of older people in urban planning and design

Develop stronger and clearer planning policies and guidance which will facilitate the provision of a wider range of homes for older people, and promote the use of quality design standards such as Lifetime Homes or HAPPI (Housing our Ageing Population Panel for Innovation) to ensure housing for life is available across tenures

Enable older people to be able to access advice and information to guide them in moving home, whether purchasing or renting, including specialised financial

advice and help to declutter and pack up their homes, and also get advice about maintaining their homes if they are not moving

## Cardiff and Vale of Glamorgan local authorities

Undertake community engagement with older people as part of the local development plan review process and local developments

Include specific policy in local development plans to address the needs of older people, to include urban design standards such as the Age-friendly World Health Organisation checklist and housing requirements for older people including intergenerational developments

Apply urban design standards and accessibility criteria when redesigning existing infrastructure, for example increasing timing on light controlled pedestrian crossings to 0.8m/sec to make it safer to cross at slower speed

Create partnership opportunities to further advance planning and design opportunities for older people through progressing a World Health Organisation Age Friendly approach in both Cardiff and the Vale of Glamorgan

## Cardiff and Vale University Health Board

Incorporate urban design principles for older people when designing new buildings or redeveloping existing buildings, both in community and acute sites

# APPENDIX: PROGRESS REPORT: DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2018

The 2018 Director of Public Health report ‘Moving Forwards: Move More, More Often’ made a number of recommendations for the public and key partner organisations.

Who	Key Messages
Public	<ul style="list-style-type: none"><li>• Sit less, move more and more often</li><li>• Build brisk walking and/or cycling into daily journeys</li><li>• Be active with others. For example, group exercise classes at gyms or leisure centres, sports teams, running groups, walks or bike rides with friends and family</li><li>• Visit and make use of the green and blue spaces for being active and for active play</li><li>• Encourage children to limit screen time in favour of outdoor active play</li></ul>
Welsh Government	<ul style="list-style-type: none"><li>• Develop and implement cross department and sector strategies and policies that prioritise walking, cycling and play, promotes being active and designs infrastructure that supports the population to be more active</li></ul>
Cardiff and the Vale of Glamorgan Public Services Boards	<ul style="list-style-type: none"><li>• Take action to make walking and cycling accessible to all</li><li>• Implement and monitor the commitments agreed within the Staff Healthy Travel Charter</li><li>• Advocate for the protection and maintenance of green and blue spaces and for infrastructure that supports the population to be active</li></ul>
Cardiff and Vale of Glamorgan Councils	<ul style="list-style-type: none"><li>• Design inclusive activity-friendly neighbourhoods that prioritises walking and cycling and meets children’s needs for play</li><li>• Embed supportive infrastructure that increases physical activity opportunities, across land use and transport policies and plans</li><li>• Protect and promote green spaces which connect communities and provide outdoor spaces for people to be active</li><li>• Implement the commitments agreed within the Staff Healthy Travel Charter</li><li>• Provide community wide and one to one physical activity interventions across organisations and within local communities</li><li>• Participate in and support annual campaigns such as walking month (May) or bike to work day (15th August)</li></ul>

Cardiff and Vale University Health Board	<ul style="list-style-type: none"><li>• Support Clinical Boards to<ul style="list-style-type: none"><li>◦ promote walking and cycling as prevention and treatment options for a number of chronic conditions</li><li>◦ promote group opportunities for being active to reduce social isolation</li></ul></li><li>• Ensure the design of healthcare buildings prioritise physical activity and infrastructure is in place to support active travel</li><li>• Implement the commitments agreed within the Staff Healthy Travel Charter</li><li>• Use green spaces effectively</li><li>• Connect health board facilities and services across Cardiff and Vale to active travel routes</li><li>• Invest in stairwells to ensure they are attractive environments</li><li>• Participate in and support annual campaigns such as walking month (May) or bike to work day (15th August)</li></ul>
Cardiff and Vale Public Health Team	<ul style="list-style-type: none"><li>• Prioritise physical activity within the public health work plan and within relevant action plans</li><li>• Work with partners to develop, implement and monitor actions that increase inclusive physical activity and active travel opportunities</li><li>• Further consolidate and strengthen links with health board and local authority planning and transport departments to influence plans and policies to support physical activity and active travel</li><li>• Promote and support partners to engage in annual campaigns such as walking month (May) or bike to work day (15th August)</li></ul>
Schools	<ul style="list-style-type: none"><li>• Influence and support the active travel behaviour of pupils and staff</li><li>• Protect time for children and young people to be active throughout the school day</li></ul>
Workplaces and Employers	<ul style="list-style-type: none"><li>• Implement the commitments agreed within the Staff Healthy Travel Charter</li><li>• Influence the design of healthcare buildings to ensure physical activity is prioritised and ensure the infrastructure is in place to support active travel</li><li>• Invest in stairwells to ensure they are attractive environments</li><li>• Participate in and support annual campaigns such as walking month (May) or bike to work day (15th August)</li></ul>

These actions focussed on addressing some of the barriers people of all ages can face to becoming more active and recommended ways that can help us weave being active into our day-to-day lives. We have made some excellent progress against the recommendations but still have a lot more to do.

## WHAT WE DID / OUTCOMES

### Messages to the public

- Making Every Contact Count training has been delivered to health care professionals and staff from a wide range of organisations. The training equips attendees with information about the benefits of physical activity, the guidelines, and physical activity opportunities available in the community. The participants are trained to be able to have behaviour change conversations with their patients/clients, passing on key messages.
- Throughout the Covid-19 pandemic, Cardiff and Vale Public Health Team have developed and shared specific social media messaging about the importance of being active for health and wellbeing and building resilience. We have also signposted people to the many online opportunities available. A website has been launched by Cardiff and Vale UHB to support those impacted by Covid-19, and promote the importance of being active to aid recovery.

### Cardiff and the Vale of Glamorgan Public Services Boards (PSBs)

- The PSBs and the Regional Partnership Board have together created a Move More Eat Well plan, and have pledged to deliver actions that will help to create an environment which makes moving more and eating well the easy choice. There are many elements of the plan which will create change and help increase walking and cycling across Cardiff and the Vale, including:
  - o Develop and implement Healthy Travel Charters across public, private and third sectors
  - o Implement and expand public cycle hire schemes, including electric bikes
  - o Further develop and maintain cycling and walking infrastructure and cycling parking
  - o Develop an integrated public transport system
  - o Current and future developments design in accessible blue and green space and formal places for outdoor play and recreation
- Many of the PSB partners have signed the Public Sector Healthy Travel Charter, and implemented many of the commitments within it.

### Cardiff and Vale of Glamorgan Councils-led work

- Improvements have been made to the infrastructure for walking and cycling, and this has facilitated physical activity. Improvements include: new cycleways in Cardiff; active travel routes in the Vale of Glamorgan; development and expansion of street play schemes; and enhancement of the Nextbikes cycle hire scheme

including more bikes, a planned introduction of e-bikes, and expansion of the scheme into the Vale of Glamorgan. Working closely with health colleagues, Cardiff Council also supported and enabled Wales' first GP referral scheme to Parkrun to be set up in Trelai Park.

### Cardiff and Vale University Health Board (UHB)

- The UHB developed a Cardiff and Vale Physical Activity Health Pathway to provide clinicians (usually general practice teams, but available to other specialists and health professionals). The Pathway provides accurate and local information for the clinician to discuss the benefits and local opportunities for physical activity with patients. They can then offer the patient a Cardiff or Vale Physical Activity Prescription with the details for the local activities which they have discussed.
- Some of the activities on the Physical Activity Prescription scheme have been developed during the last year, with the opportunity for some GPs to prescribe a free Nextbike membership to their patients. The development of the Trelai Parkrun has encouraged nine GP practices in the Cardiff West cluster to sign up as 'Parkrun practices', and refer patients to the local Parkrun.
- The UHB has also provided the opportunity for NHS staff in Cardiff and the Vale of Glamorgan to access free vouchers for using Nextbikes for commuting during the Covid-19 pandemic.
- The University Hospital of Wales' B Block stairwells have been transformed, with healthy living messages appearing throughout. It has made the stairwell more attractive and appealing, and resulted in an increased number of people using the stairs.
- The UHB have developed a Covid-19 rehabilitation model for patients. The model starts while patients are in hospital, and continues once they are home, with the aim of enabling people to live independently and continue their recovery. The model covers a broad range of rehabilitation and is focused around an individual's needs, but physical activity is a key part of the rehabilitation process.
- The Clinical Diagnostics and Therapeutics Clinical Board worked with the Public Health Team to develop a workplace initiative called 'Work Health, My Health' to illustrate to staff the small steps they can take to make a big difference to their health. In collaboration with staff, many resources have been developed, shared and used by staff, including 'Moves of the week', walking month trackers, and walking routes.



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