



ambition
for
ageing

Ambition for Ageing

Programme Evaluation Report 2020

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AfA Partners and Local Delivery Leads

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GMCVO

Thank you to all the staff and volunteers on the programme, for their hard work and commitment to collecting data for this evaluation

Ambition for Ageing is a Greater Manchester wide cross-sector partnership, led by GMCVO and funded by the National Lottery Community Fund, aimed at creating more age friendly places by connecting communities and people through the creation of relationships, development of existing assets and putting older people at the heart of designing the places they live.

Ambition for Ageing is part of Ageing Better, a programme set up by The National Lottery Community Fund, the largest funder of community activity in the UK. Ageing Better aims to develop creative ways for people aged over 50 to be actively involved in their local communities, helping to combat social isolation and loneliness. It is one of five major programmes set up by The National Lottery Community Fund to test and learn from new approaches to designing services which aim to make people's lives healthier and happier

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Glossary / List of new terms

AfA	Ambition for Ageing
Age-friendly	People of all ages being able to contribute actively in decisions taken in the place they live
GM	Greater Manchester
GMCA	Greater Manchester Combined Authority
GMCVO	Greater Manchester Centre for Voluntary Organisation
LA	Local Authority
LDLs	Local Delivery Leads
MICRA	Manchester Institute for Collaborative Research on Ageing
N/n=	Sample size
Older People	Persons aged 50 or above
ONS	Office for National Statistics

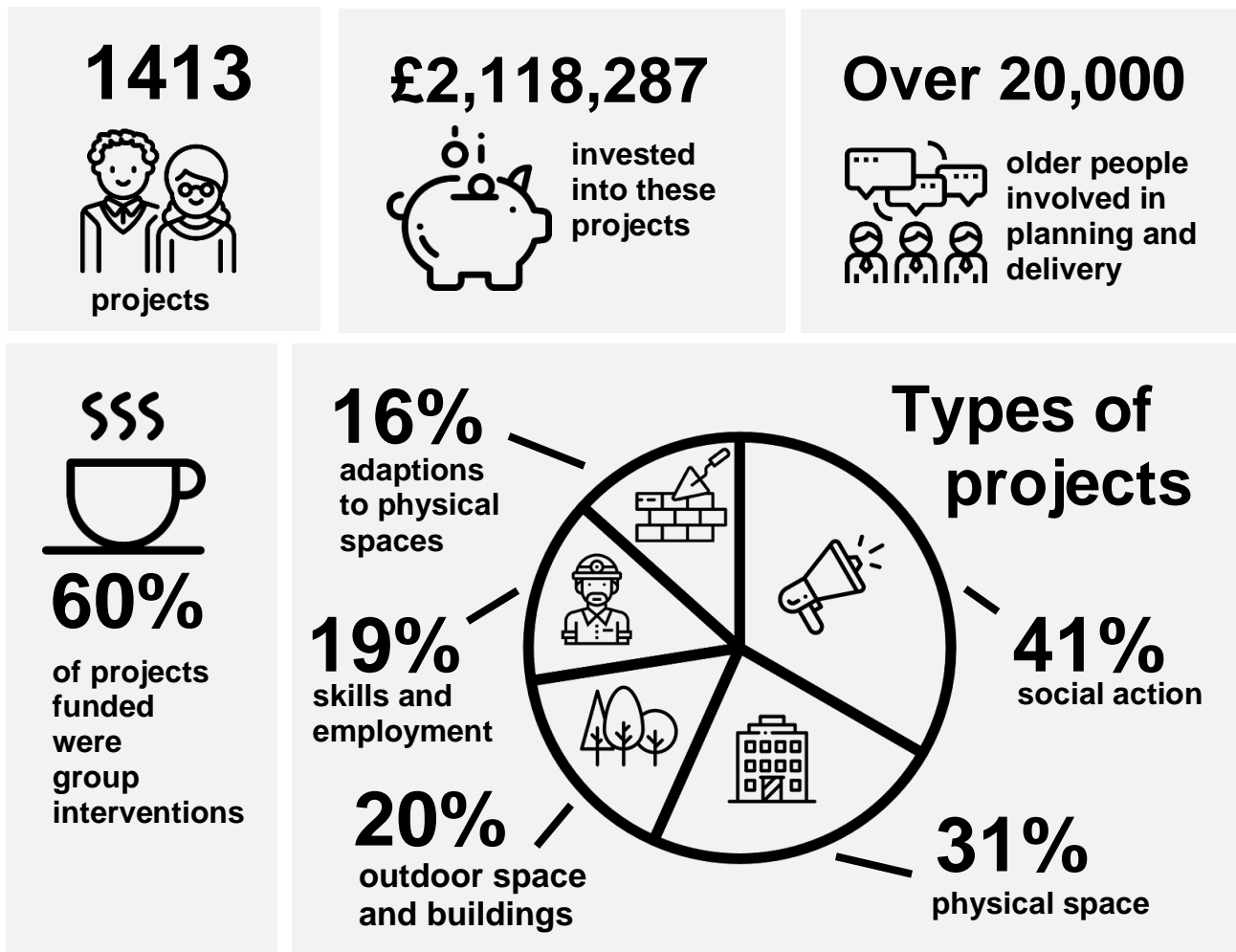
Executive Summary

Overview

This report provides an evaluation of the Ambition for Ageing programme following the conclusion of the 5-year programme. The £10.2 million programme, part of the wider £78 million Ageing Better programme funded through the National Lottery Community Fund, was hosted by GMCVO and took place across 25 wards in 8 local authorities in Greater Manchester.

Information contained within the report relates to activity to January 2020, with data drawn from questionnaires completed by the programme's participants, volunteers, event attendees, and support staff employed by the programme.

The following Executive Summary presents key findings from the programme, whilst sections 3 through 5 contain highlights specific to their topic area.



Wards in which the programme is delivered are more age-friendly

Delivering on age-friendliness was one of the key aspects the Ambition for Ageing programme sought to address and improve upon; investment in this priority followed suit throughout the programme. Projects were designed and delivered with older people, ensuring their voices were heard and projects were tailored according to need in a non-prescriptive manner.

Building age-friendly infrastructure or further developing pre-existing structures allowed neighbourhoods to realise greater age-friendliness.

Positioning older people at the fulcrum of activity, with projects participant and volunteer-led, provided opportunities and forums for older people to give back to their communities. Data from the programme suggests a net improvement in the age-friendly perceptions, whilst qualitative data on projects with intergenerational focuses highlighted the extent to which bridging capital between population cohorts impacts on age-friendliness.

Data captured does, however, suggest that the principal driving force and impetus behind change within neighbourhoods is entrusted in and expected more so of the wider community, rather than through individuals themselves having the agency to affect change. This highlights the need for social cohesion and the ability of the collective to influence and enact change.

Age-friendliness within neighbourhoods can be viewed through many different guises. Provision of age-friendly physical infrastructure is one method to improve age-friendliness and is a visible and lasting legacy, however social aspects of neighbourhoods play a pivotal role in older people's perceptions which are not as readily maintained or tangible. Ensuring that older people's voices are heard and acted on within communities is important.

Older people living in AfA wards have increased and improved social connections

For the benefits of the Ambition for Ageing programme to be realised beyond its existence, the programme needed to build capacity for social connections and realise these opportunities to improve relations between older people and between generations. The programme used pre-existing community assets in many cases as the starting block to draw upon and introduced these varying community assets to one another, thereby widening the "people like me" perceptions and increasing social cohesion.

Through its co-production approach, significant numbers of older people contributed to projects and forged new connections within their community and between community groups. With the support of programme staff, the upskilling of project participants and volunteers paves the way for these activities to continue from a structural and governance perspective, whilst financial aspects have been addressed through funding applications to support these groups and activities beyond the lifespan of the Ambition for Ageing programme; a large number of volunteers were involved in funding decisions and investment panels, who had increased their awareness of this aspect in project planning and delivery.

Reducing the risks of social isolation was one of the aims of the Ambition for Ageing programme and two-thirds of participants did not see an increase in the number of risk factors reported linked to social isolation. In this sense, as a preventative measure, the programme achieved success, albeit those engaged with the programme reported high levels of interaction with others prior to their participation and this is reflected in the data. Engaging those already severely isolated or hardest to reach is an area for development beyond this programme, with further research required as to the best method to achieve this. Missing qualitative data and anecdotes from programme staff support the need for further research, with those most vulnerable or marginalised least likely to engage with the programme or its evaluative processes.

Section 1: Introduction

1.1 Programme and Report Overview

Ambition for Ageing (AfA) is a £10.2 million Greater Manchester wide cross-sector partnership aimed at creating more age friendly places and empowering people to live fulfilling lives as they age. AfA is part of Ageing Better, a programme set up by The National Lottery Community Fund, the largest funder of community activity in the UK. Ageing Better aims to develop creative ways for older people to be actively involved in their local communities, helping to combat social isolation and loneliness.

Led by GMCVO and launched in 2015, AfA is a 5-year programme delivered by a cross-sector partnership, with contractors leading on the work in 25 neighbourhoods across 8 local authorities in Greater Manchester, in addition to a number of targeted programmes across the city-region.

Ambition for Ageing's belief is that a series of small changes within our communities will bring large scale success in a practical and sustainable sense that will ultimately help to reduce social isolation.

The programme's vision is to connect communities and people through the creation of relationships. Putting older people at the heart of designing the places they live, AfA facilitates the development of existing assets within communities, allowing older people to direct investments. Using this asset-based approach, all projects funded through the programme must involve older people in the design and/or delivery, and older people must be involved in the deciding which projects receive funding. AfA uses the term 'older people' to refer to people aged 50 and above, recognising that, due to inequalities, individuals experience age-related challenges at very different points in their lives.

This report seeks to provide an evaluation of the AfA programme as a whole. Data contained within this report was compiled between 2016 and 2020. Details of the methodology used and data collection are contained in the subsequent section. Further reports will be issued evaluating inequalities associated with the AfA programme, as well as a suite of reports assessing the Scaled Programmes influenced by earlier phase findings of the AfA programme. Resources relating to the AfA programme can be found on the [AfA website](#).

1.2 Programme Design

The programme was underpinned by three core underlying assumptions which contributed to its design. These assumptions were:

- Transitions in later life can break social connections. Having the ability and means to maintain or develop new relationships where barriers to such connections exist is vital to prevent social isolation.
- The programme seeks to prevent isolation of older people, in particular those at risk of becoming socially isolated, rather than reducing the isolation of those most isolated.
- There is a general decline in high street provision and a retrenchment of public spending.

The programme has followed a ‘test and learn’ approach. This means a range of bespoke project delivery models have been trialed, with good practice shared amongst stakeholders to then be replicated throughout the programme. The varied approaches to projects within the programme have generated insights and learning to enable people to age well within their communities.

1.3 Context throughout programme duration

The following aspects are some of the key changes witnessed between 2015 and 2020 which may have exerted influence on the programme and the perceptions of those responding to questionnaires during this time.

Austerity

In the aftermath of the global financial crisis, public spending was reined in significantly with impacts felt across a range of national and local services. Central government funding to local authorities across this period was reduced by 33%, with council revenues to fund local services falling by 24% on a per capita basis¹. Faced by reduced funding and the continuation of statutory responsibilities, available funding for non-essential services were severely limited. With this in mind, there has been increased scope, opportunity and responsibility placed on the community and voluntary sector (VCSE) to provide a range of services and support to the public.

Brexit

The Brexit referendum was undertaken relatively early in the life course of the AfA programme – 23rd June 2016 – and has dominated political discussions ever since. David Cameron stood down as Prime Minister in the immediate aftermath of the vote, prompting a leadership election within the Conservative party and further changes in policy from central government. The Brexit process since then has been, and continues to be, uncertain in its form and the impacts it will have on society.

The drawn out process can be seen to have impacted on the outlooks of individuals, with the Hansard Society reporting the following from their 2019 Audit of Political Engagement²:

- Only 25% of the public have confidence in MPs handling of Brexit
- The number who ‘strongly disagree’ that political involvement can change the way the UK is run (18%) has hit a 15-year high
- 32% say they do not want to be involved ‘at all’ in local decision-making, a rise of 10 percentage points in a year
- 56% of people think Britain is in decline

National elections

Three elections to Westminster were held between 2015 and 2019, two of which took place during the course of the AfA programme. An election was held in May 2015, shortly before the launch of AfA, which elected a Conservative government holding a majority of 12 seats.

¹ Harris, Hodge, Phillips (2019), The Institute for Fiscal Studies, English local government funding: trends and challenges in 2019 and beyond. Available online: <https://www.ifs.org.uk/uploads/English-local-government-funding-trends-and-challenges-in-2019-and-beyond-IFS-Report-166.pdf>

² Hansard Society (2019) Audit of Political Engagement 16. Available online: <https://assets.ctfassets.net/rdwvqctnt75b/7iQEHtrklbLcrUkduGmo9b/cb429a657e97cad61e61853c05c8c4d1/Hansard-Society-Audit-of-Political-Engagement-16-2019-report.pdf>

Following the election of Theresa May as Conservative leader in July 2016, Britain had further changes in its front bench government and associated policies. A general election was called in May 2017, the outcome of which was a Conservative minority government supported by a confidence and supply agreement with the Democratic Unionist Party. A further change in the Conservative party leadership took place in July 2019, at which stage Boris Johnson was elected leader of the party and thereby Prime Minister. Elected on a promise to deliver Brexit, Johnson called a further general election held in December 2019. Framed as a Brexit election, the outcome was significant for the country, with the Conservative Party claiming a large majority able to deliver on its manifesto.

Greater Manchester mayoralty

In 2017, as part of its devolution deal, Greater Manchester elected its first directly-elected mayor; the Labour candidate, Andy Burnham, who was elected on 4th May 2017. A number of local initiatives have been commissioned in the years since, including the Mayor's Age-Friendly Challenge, delivered by Ambition for Ageing.

Greater Manchester Ageing Hub

As one of the ten central themes within the Greater Manchester Strategy, ageing has been positioned as a focus for development across the city region. Greater Manchester was recognised as the first age-friendly region in the UK by the World Health Organization (WHO) on 16th March 2018. The GM Ageing Hub was established in 2017 to deliver and coordinate programmes focused on ageing across the 10 GM localities.

GM Age-friendly Strategy

The strategy³ was first launched in 2017 and features 3 strategic priorities and 12 headline statements in its current form. Several cross-cutting themes have emerged from this document, shaping the way programmes are designed with specific attention paid to older people.

³ GMCA (2018) Greater Manchester Age-friendly Strategy. Available online: https://www.greatermanchester-ca.gov.uk/media/1166/gm_ageing_strategy.pdf

Section 2: Methodology and Data Collection

2.1 Evaluation Approach and Outcomes

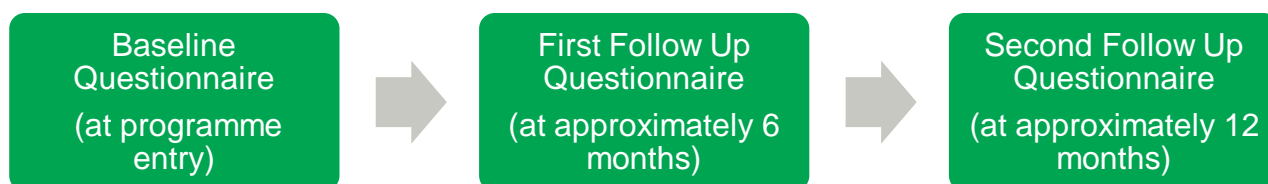
Evaluation contained in this report has been conducted by the Greater Manchester Combined Authority (GMCA) in coordination with GMCVO. The principle of proportionality⁴ has been applied when conducting this evaluation and as such analysis contained within this report will be written at a programme level. It would take a disproportionate amount of time to conduct analysis of each individual project funded through LDL channels due to the small nature of each project.

A number of core programme evaluation outcomes against which progress is measured will be used as a theme throughout this report (see figure below). Strategic evaluation outcomes⁵ do not fall within the remit of this report and will be evaluated in other publications.

Ambition for Ageing Programme Evaluation Outcomes	
Outcome	Indicators
Wards in which the programme is delivered are more age-friendly	The majority of older people in GM engaged by the programme will identify their neighbourhood as age friendly.
	The infrastructure conducive to an age-friendly neighbourhood has increased.
	The majority of older people in GM engaged by the programme will show an improvement in self-perception of how socially connected they are.
Older people living in AfA wards have increased and improved social connections	In areas supported by the project, more older people will undertake activities of interest.
	In areas supported by the project, the capacity of communities will increase, providing a greater range of choices for older people.

2.2 Data Collection and Limitations

Contractors, such as the Local Delivery Leads (LDLs), were required to collect key data from people engaging with the Ambition for Ageing programme through participant and volunteer questionnaires. They submitted this data to a central database managed by GMCVO and GMCA each quarter (April, July, October and January). These questionnaires were designed to capture responses to standardized questions at up to 3 points in time, shown in the diagram below.



⁴ In evaluation, proportionality refers to the principle that the amount of evaluation activity should be relevant and not exceed what is justified in relation to the size of the programme being delivered. In this case, as projects are very small, only a very small amount of evaluation activity should take place for each individual project. However, the overall programme is large, so this allows for a large amount of overall activity.

⁵ See Appendix A for further details.

The responses allow us to monitor changes over time for those involved in the programme. Due to a large number of projects being run across 25 wards and relatively few core administrative staff, data collection proved difficult to implement in practice. Appendix B contains a timeline in which questionnaires were typically collected.

Due to issues with incomplete questionnaires, the variability in questionnaire completions, and for consistency with previous interim reporting, only the most recent follow-up responses available have been used for analysis in this report where longitudinal change is measured. Use of this approach allows for the maximum number of responses to be used where questionnaires have been missed at their designated intervals and will also use the most recently reported feedback from project and programme participants. It should, however, be acknowledged that this approach will not enable the analysis of changes between time periods where questionnaires have been completed at all three designated intervals. Subtleties in the impact of the AfA programme between intervals has not been assessed, should there be differences identified between the baseline to 6 month interval and the 6 to 12 month interval.

Further information beyond participant and volunteer feedback was collected. These include the following data sources:

- Project information: Data collected include capital investment in the project; number of older people involved in the project; project theme; and intervention type
- Events: Data collected include event type; ward; and number of attendees
- Event feedback: Separate from other event data collected. Data collected from individuals and includes: reason for attending; neighbourhood age-friendliness perception; and local influence perception
- Event demographic feedback: Separate from other event data collected. Data collected from individuals and includes age; gender; ethnicity; and religion
- Case studies: Collected by local project staff
- Other: Networking and learning meetings, and semi-formal interviews with project staff

The data contained within this report contain a number of limitations which should be considered when interpreting its contents. The report is intended to provide an indication of the extent to which the programme's outcomes have been met based on the evidence made available at the time of writing. Due to the design of the evaluation, data collected is not necessarily representative of all stakeholders in the programme, nor all of the activities funded through the programme. Additional evidence produced by the programme should be considered in conjunction with this report when drawing interpretations in order to more fully comprehend the programme's impacts and limitations.

An additional consideration is the lack of a counterfactual when assessing changes realised throughout the lifespan of the programme. We are unable to distinguish the 'what would have happened anyway' scenario against the impacts of the programme. Identifying the net benefits resulting from the programme – the difference of additionality minus deadweight – is not possible and the AfA programme cannot be seen as the sole influence in any changes witnessed across this time period. It is, however, assumed that the AfA programme is likely to have contributed toward these changes, with further supporting evidence available from qualitative measures recorded throughout the programme's lifespan.

Section 3: Project Activities and Reach

Section 3: Key highlights

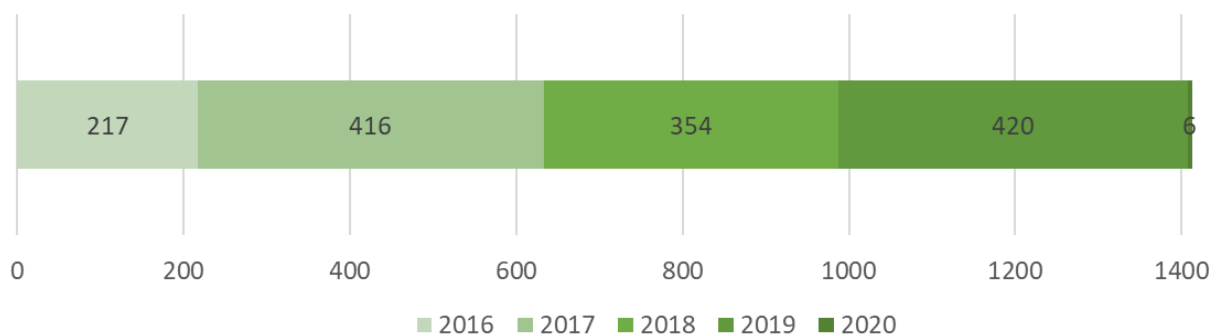
- Over **1,400 projects** were funded as part of the AfA programme
- **458 events** took place, reaching an estimated 15,000 people
- **Community cohesion** and **strong networks** were project enablers
- Delivery support from programme staff built **capacity and skills** in project participant groups and its impact should not be understated
- **Social action, physical activity, and spaces** were prominent themes within projects
- **Group interventions** were most common, accounting for approximately three-fifths of interventions. Consideration should be given to their ability to reduce social isolation against issues around inclusivity and reaching those more at risk of social isolation
- **Two-thirds** of project participants and project volunteers were **women**
- **Two-thirds** of project participants reported either **an improvement or no change in their risk of social isolation** between baseline and 12-month questionnaires
- Anecdotal evidence reports those with protected characteristics or from **minority ethnic groups are less likely to engage** with evaluation questionnaires or to report “*Prefer not to say*” in their answers

3.1 Investments: What’s been funded?

The programme used a microfunding model for its investments, whereby small pots of funding were provided in communities, typically up to £2000, promoting a co-production approach. A small number of projects received funding in excess of £2000 reflecting their wider reach, such as the so-called Scaled Programmes which started later in the programme’s life course. Project applications were submitted to LDLs for assessment, after which funding could be granted and projects could start to begin formally. How decisions were made locally depended on the area, with a variety of approaches taken between local authorities⁶. The smaller number of project starts toward the start of the programme may reflect the time taken to establish project aims, objectives, and those delivering on the plans.

In total, 1,413 projects were funded across the course of the AfA programme. The spread of projects between calendar years is shown in the chart below. Funding was made available for a range of different project types, which differed across a range of dimensions including the project theme and maturity of the project; themes will be explored later in this section.

Project starts by calendar year

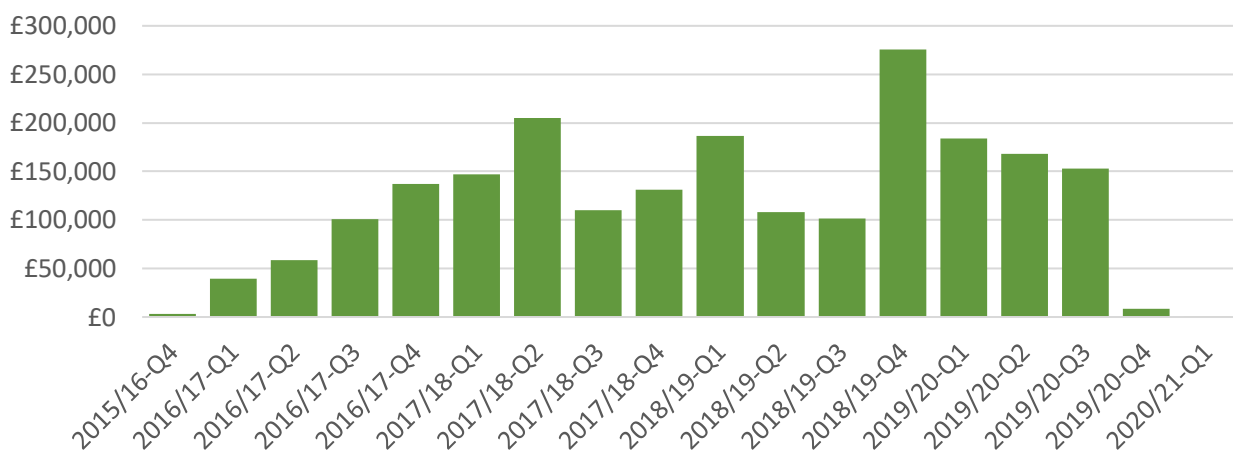


⁶ North, Thorley, Yarker (2020) Ambition for Ageing, Changing a Place: Microfunding, co-production and community development. Available online: <https://www.ambitionforageing.org.uk/sites/default/files/Microfunding%20Full%20Report%20FINAL.pdf>

Over 1,000 of the projects were new projects started as a result of the programme, whereas 180 projects were recorded as existing projects and a further 115 were continuation projects. A number of projects were subsequently selected to form part of a suite of 'Scaled Programmes', which sought to expand the reach of activities and interventions taking place. Average funding on a per project basis was greatest for scaled programmes, reflecting their wider reach, whereas existing and continuation projects had the lowest average funding.

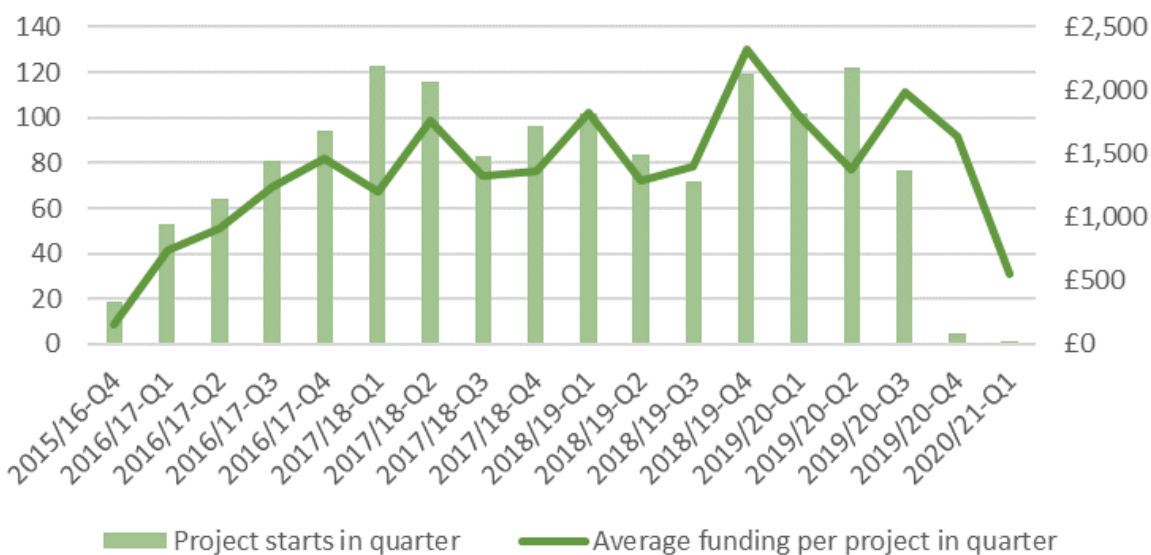
Funding for programmes was planned to be greater in the middle years, with smaller funding pots at the beginning and approaching the close of the programme. Given programmes had been intended to run for approximately one year and participant feedback received at 3 separate intervals on that basis, it is perhaps unsurprising to see a surge in funding a year before the programme concluding, i.e. greatest funding within a quarter was in Q4 2018/19. In total, £2,118,287 of direct funding was released.

Project funding by quarter



The number of microfunded project starts within each quarter and average funding for those projects largely follow a similar trajectory, i.e. where more projects were started within a quarter, average funding typically went up, as demonstrated in the chart below.

Number of project starts per quarter and Average funding per project in quarter



AfA was designed to follow a microfunding model, whereby small investments are given to individuals or groups without the need for an extensive procurement process, as with larger projects. Only three investments of over £20,000 were made throughout the 5-year programme, with average funding per project of £1,671 where a cost was recorded.

A number of key components to the success of microfunded projects have been identified⁷. Areas with pre-existing strong social networks and neighbourhood cohesion could foster more quickly the necessary resources and conditions to successfully deliver microfunded projects. Areas where such strengths were already present were able to draw in volunteers to support projects more readily and had better routes to engaging the local community.

Further to the financial support and investments made as part of the AfA programme, investment in staff resource via LDLs to each of the projects proved to be a determinant in their successful delivery. Whereas financial investments allow for resources to be purchased to deliver projects, investment in the wraparound support for each of the projects is vital to their success. As such, consideration should be given to the less readily tangible benefits from management. During the startup process of the AfA programme, local delivery leads were invited to identify both the project investments they would be making as part of the programme, as well as the delivery costs related to staffing to support projects. Whereas at the beginning of the programme it was assumed costs would follow a ratio of 60:40 in favour of project investments, this shifted through the course of the programme as a greater appreciation of the costs and value in delivery support was realised. Guidance, mediation and oversight of projects were provided as part of the support offer from LDL staff in each of the local authorities which provided stronger foundations from which projects could flourish through volunteer and participant activity. Without such support, levels of volunteer and participant interaction may have been reduced and the asset-based co-production of the programme would not have been realised to the same extent.

3.2 Investment Themes and Intervention Types

Investment themes

Investment themes were assigned to each project once funding had been released. Categorisation of projects by theme provides a means to assess how interventions were delivered and aids in identifying why this method was chosen. By their very nature, however, projects delivered against cross-cutting themes and impacted on people, places, and organisations in a variety of ways and means; consideration should be given to this in interpretation of the results.

The table below details projects and their associated themes as a percentage of projects where a theme has been recorded (n=1,285) and, due to projects being able to adopt more than one theme at a time, as a percentage of total themes listed (n=2,586).

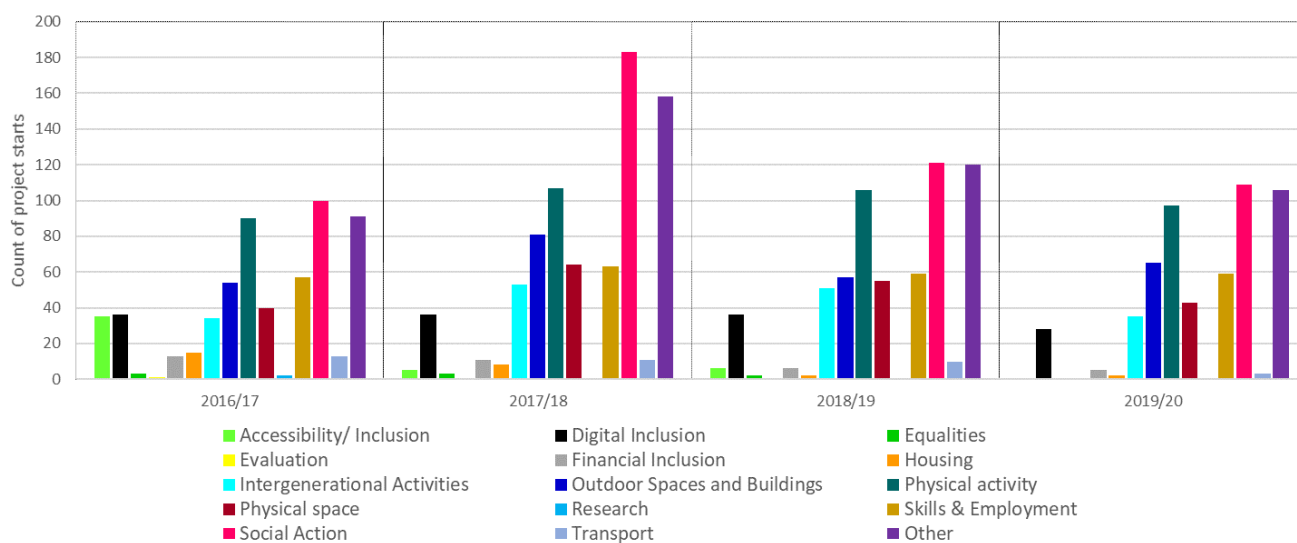
⁷ North, Thorley, Yarker (2020) Ambition for Ageing, Changing a Place: Microfunding, co-production and community development. Available online: <https://www.ambitionforageing.org.uk/sites/default/files/Microfunding%20Full%20Report%20FINAL.pdf>

Themes	Count	% of projects recording theme	As a % of all themes recorded
Social Action	527	41.0%	20.4%
Other	475	37.0%	18.4%
Physical activity	403	31.4%	15.6%
Outdoor Spaces and Buildings	262	20.4%	10.1%
Skills & Employment	241	18.8%	9.3%
Physical space	205	16.0%	7.9%
Intergenerational Activities	176	13.7%	6.8%
Digital Inclusion	138	10.7%	5.3%
Accessibility / Inclusion	46	3.6%	1.8%
Transport	38	3.0%	1.5%
Financial Inclusion	36	2.8%	1.4%
Housing	28	2.2%	1.1%
Equalities	8	0.6%	0.3%
Research	2	0.2%	0.1%
Evaluation	1	0.1%	0.0%

A high proportion of projects were given “Other” themes, for which additional information was detailed on recording. Many of these focused on culture and crafts, health and wellbeing, information dissemination, or improving social opportunities and access for older people.

Analysis of the themes over the course of the programme demonstrates the changing nature of interests. Whilst social action, physical activity, skills and employment, and physical and outdoor spaces reported consistently high numbers of projects throughout with some variation between years, others reported greater shifts between years. Accessibility / inclusion themed projects fell away dramatically from 35 in 2016/17 to 5 in 2017/18 and to 0 from 2019/20, whilst interest in projects themed on financial inclusion and housing similarly diminished as the programme progressed, albeit from smaller bases. These changes may be due to the resources required to run such projects, with financial inclusion and housing among the highest proportion of one-to-one interventions and their likelihood to carry higher financial costs than other activities, thereby reducing their reach.

Project starts by financial year and theme



Intervention types

Projects can be viewed through a number of different prisms, as not only does the theme of the project have an influence on its impact, but also the type of intervention used to deliver it. MICRA posits that projects can take four primary forms, briefly: one-to-one interventions; group interventions; service provision interventions; and wider community development / neighbourhood interventions⁸.

Approximately three-fifths of interventions were group interventions⁹. Research into the relative benefits and drawbacks of group interventions recognises that, whilst being able to reduce the number of risk factors linked to social isolation, group interventions are disproportionately attended by women and raises questions on interventions focused on gender, ethnicity, or sexual orientation.

Realising sustainability in interventions is better achieved through wider community development or neighbourhood interventions; approximately one quarter of interventions adopted this approach. Whilst evidence of its effects on reducing social isolation is limited, research literature points to the potential for this type of intervention to have a great deal of impact which can be maintained. Interventions seeking to adopt this approach are recommended to draw on the following principles to achieve success:

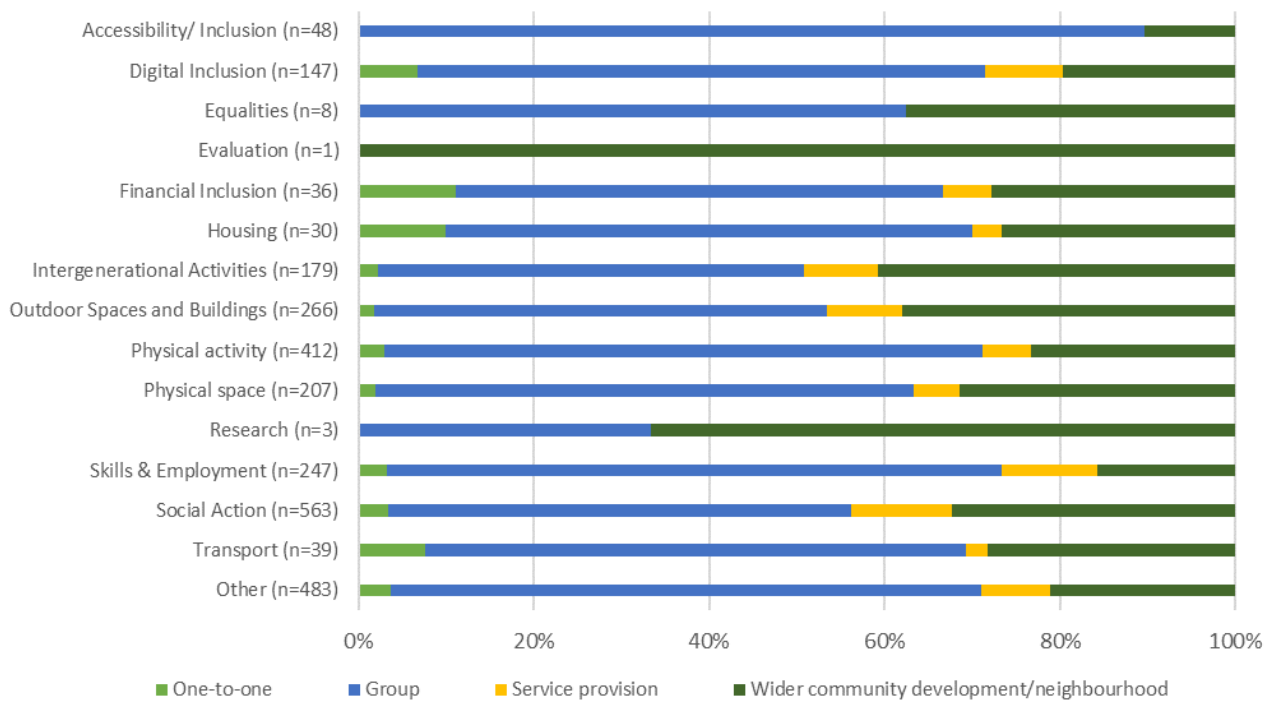
- Use pre-existing community assets and build community capacity;
- Recruit participants from within their own living environments;
- Activities should acknowledge and respect the interests, needs, experiences and culture of older people in the community; and
- Activities should use a co-production approach, involving older people from project conception through to delivery.

The proportion of projects adopting each of the intervention types as detailed above have remained broadly the same throughout the course of the programme. The chart below identifies the percentage of interventions split out by their theme¹⁰; viewing the data in this way allows for an assessment of the most popular intervention types for future works falling under each theme and, aligned with further information on each project's success, will help to shape the intervention method according to theme. When assessing the proportions of intervention types within each theme, attention should be paid to the count of themes recorded in the data so as not to overstate intervention type frequency where small numbers are present, e.g. the evaluation theme; counts of project intervention type are included in the chart labeling.

⁸ Buffel, Rémilliard-Boillard and Phillipson (2015) Social Isolation Among Older People in Urban Areas. Accessible online: <http://hummedia.manchester.ac.uk/institutes/micra/Handbooks/Buffer%20Tine%20-%20A5%20Brochure%20-%20Social%20Isolation.pdf>

⁹ Due to some projects being assigned multiple intervention types, it is not possible to provide an exact figure

¹⁰ Due to some projects having multiple intervention types recorded, e.g. Group intervention and Wider community development/neighbourhood intervention, totals do not match those listed earlier in the section



In terms of wider community development and neighbourhood interventions, intergenerational activities, outdoor spaces and buildings, and social action report the greatest proportion of their interventions within this category. These themes are perhaps more naturally inclusive by their nature whereas financial inclusion-themed projects may contain more sensitive information and require a greater number of one-to-one interventions, or digital inclusion which could require a more time intensive and resource limited intervention.

3.3 Reach and Engagement: Who's been involved?

Participation in the programme was possible through an array of different avenues, with lower time-intensive opportunities such as attendance at events through to active participation or volunteering in the microfunded projects. Data contained within this report relates to those who completed an evaluative questionnaire as part of their participation in the programme, rather than assessing the full reach of the programme as not all participants completed evaluative questionnaires.

Events

By January 2020, an estimated 15,000 people had been in attendance across the 458 events hosted by the programme as a whole. These ranged from small meetings involving only 2 people through to larger scale celebrations with an estimated 2,000 people in attendance. Of those events with a known category, meetings (111 events) and launch events (59 events) were the most frequent. A total of 2,958 event demographic questionnaires were completed, drawn from 214 events, through which evaluation questionnaire completion per event ranged from 1 return to 71 returns. Anecdotal evidence from front-line staff suggests that men, those from minority ethnicities, and those with lower levels of formal education were particularly less likely to engage with the questionnaires; as such, the demographics of event evaluations should be interpreted with caution.

Of those completing questionnaires, data revealed the following:

- 72% of attendees were women; 25% were men
- Median average age was 69 years (range 11 to 100)
- Median time lived in the ward was 29 years

- Of those stating a religious belief or having no religion, 68% were Christian
- Of those stating an education level, 28% were degree/postgraduate degree holders
- Of those with an employment status recorded, 69% were retired
- 25% identified as being a carer (27% where 'Prefer not to say' excluded)
- 41% had a self-defined long term health condition (excludes 'Prefer not to say')

Project participants

Data drawn from project participants is richer in its nature, due to the recording of data across each project's life course. Individuals were requested to complete questionnaires at baseline, 6-month, and 12-month intervals to track changes in perception across time. 2,422 people participated in projects run across the programme, some of whom participated in more than one project. The following data, unless tracked longitudinally, relates to unique participants completing baseline questionnaires.

The AfA programme held a focus on reducing the risks of social isolation. A number of characteristics are common within social isolation, which are in short:

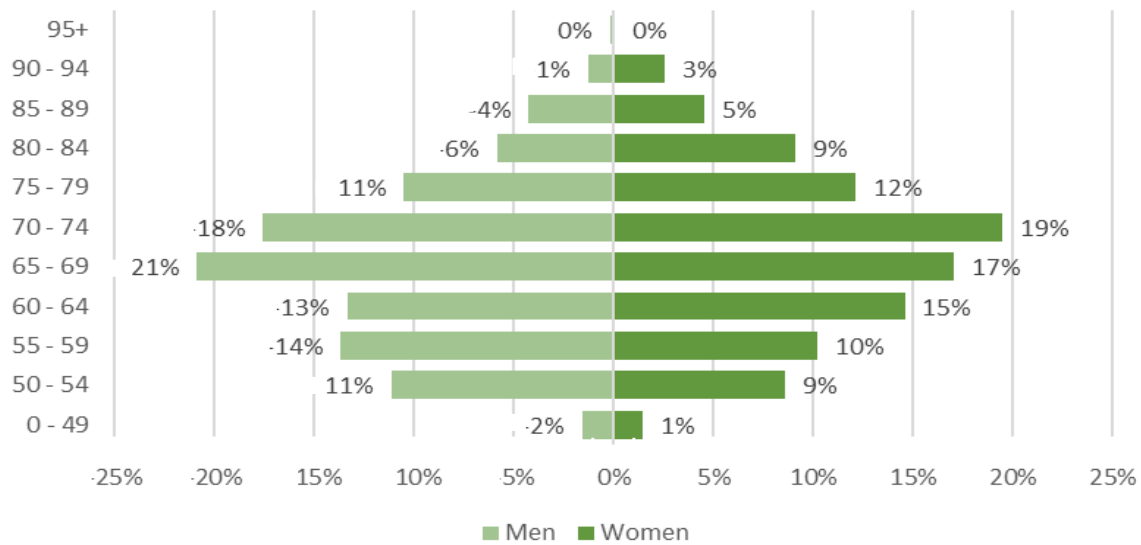
- Being older;
- Being male;
- Being widowed or separated from a partner;
- Living alone;
- Having a minority protected characteristic (e.g. ethnicity, religion, sexual orientation, gender);
- Under- or unemployment in mid-life;
- Having poor health;
- Caring for others

A degree of caution must be given when interpreting figures, as anecdotal evidence from LDLs indicates that those with characteristics of more marginalised peoples are more likely to not answer questions or elect to "Prefer not to say", thereby likely underreporting the true figures for those at risk of social isolation.

67% of participants responding were women, 32% men and a further 0.2% self-defining gender. Participation through the programme has been largely skewed toward women, although this has been common across all of the Ageing Better programmes nationally, for which 69% of participants were women¹¹.

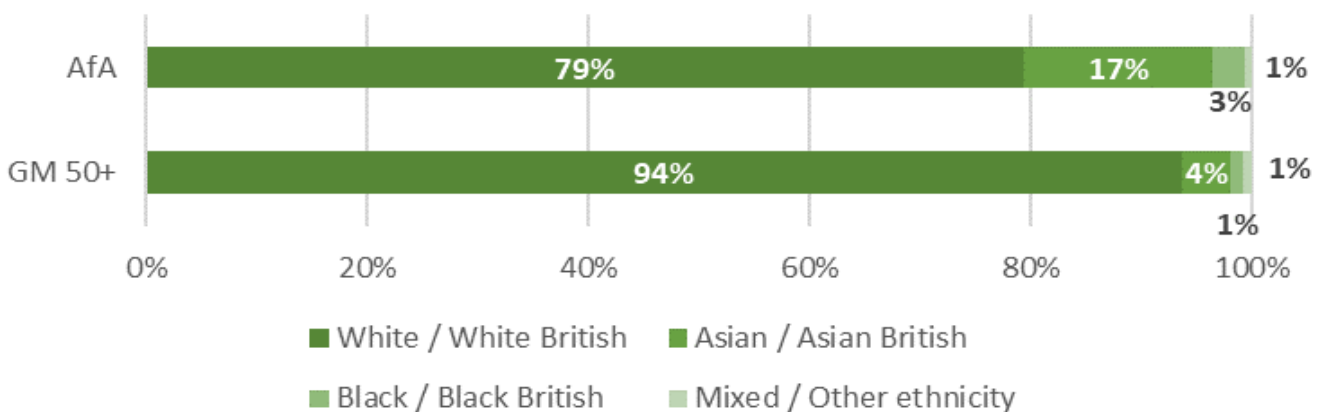
¹¹ The National Lottery Community Fund (2018) Ageing Better. Accessible online: <https://www.tnlcommunityfund.org.uk/media/documents/ageing-better/ageing-better-national-evaluation-short-learning-report-july-2018.pdf?mtime=20181219102825>

Percentage of participants by age band and gender



Although the programme was designed to run for the over 50 population cohort, 30 participants in the projects were aged between 21 and 49. The median average age of participants was 68 years old, with a range from 21 to 99. The chart above shows the percentage of participants by age band for both males and females separately, which reveals that men taking part in the programme feature relatively more frequently in lower age bands than women¹².

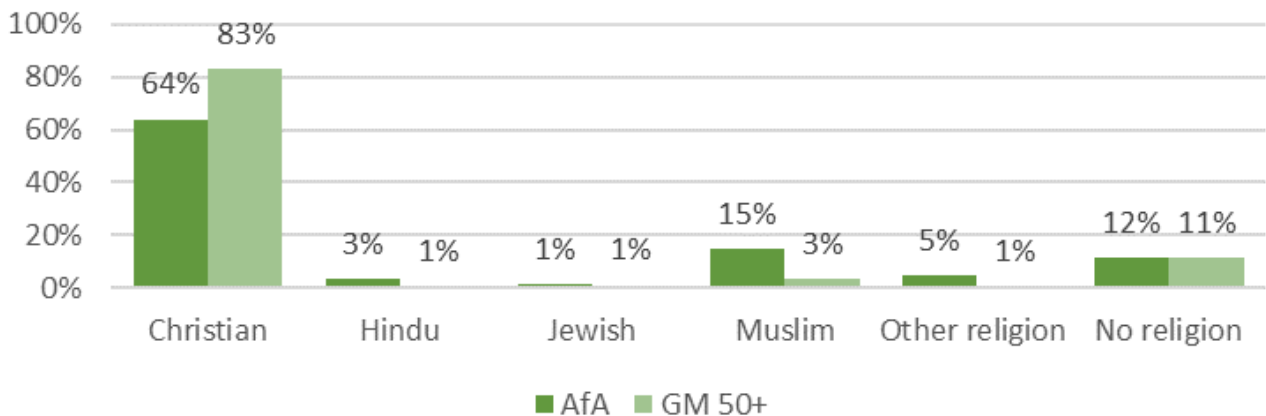
Throughout the 5-year programme, the ethnic profile of participants has deviated away from Greater Manchester averages, as taken at the most recent census. The chart below details the over 50 population of Greater Manchester as in 2011 against the most recently completed baseline questionnaires for Ambition for Ageing. Given the programme increased its focus on equalities, it is unsurprising that the proportion of White / White British participants is less than that of the GM makeup. As identified by Buffel, Rémillard-Boillard, and Phillipson in a preliminary literature review for the AfA programme, BAME communities are at greater risk of social isolation and were therefore recommended as a particular focus of the programme¹³.



¹² Excludes self-defining gender due to small numbers

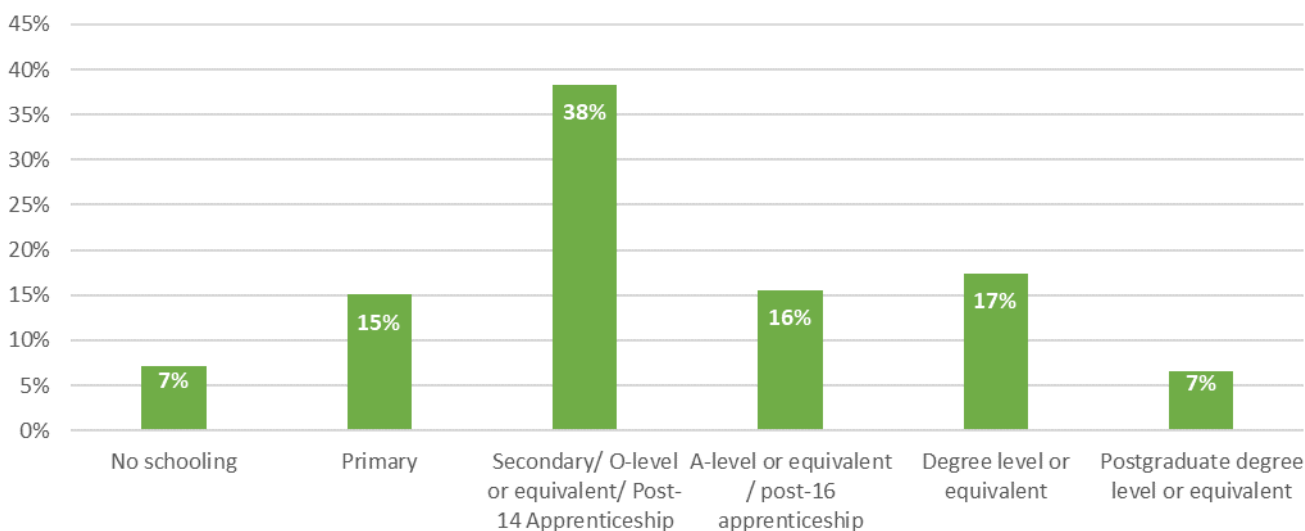
¹³ Buffel, Rémillard-Boillard and Phillipson (2015) Social Isolation Among Older People in Urban Areas. Accessible online: <http://hummedia.manchester.ac.uk/institutes/micra/Handbooks/Buffel%20Tine%20-%20A5%20Brochure%20-%20Social%20Isolation.pdf>

A further reflection of focus on equalities can be gauged through the religious beliefs of participants within projects and the programme. The most distinct differences between the AfA cohort and the GM population are between Christian beliefs, where AfA under-represents the wider GM population, and Muslim beliefs, where the opposite is true. It is worth noting the scope of the AfA programme and its focus within wards, which themselves may not be reflective of the wider GM population. Similarly, given the transience of populations and the timing of UK census data (most recently at 2011), the fidelity of these values is open to question and should be interpreted with caution.

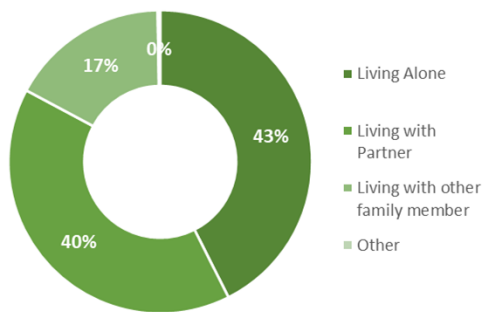
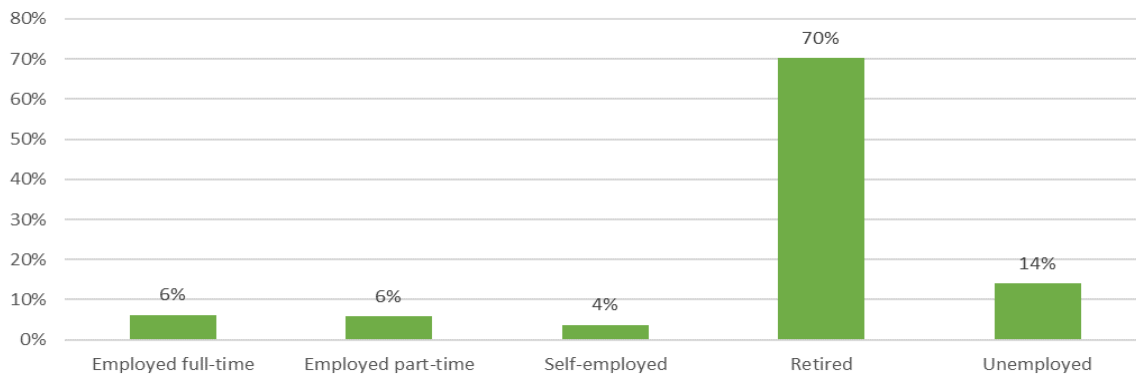


Education levels were recorded at baseline, however, a significant number of respondents (21%) selected “*Prefer not to say*”. There are a number of potential reasons for this, such as a fear of stigma attached to those with no or lower level qualifications, or those who had obtained qualifications overseas may not view the level as directly transferable and therefore could not say confidently how these translated.

Of those providing a defined answer, nearly two-fifths of respondents were educated to secondary / O-level / post-14 apprenticeship level, whilst a quarter had obtained a degree or postgraduate degree level qualification.

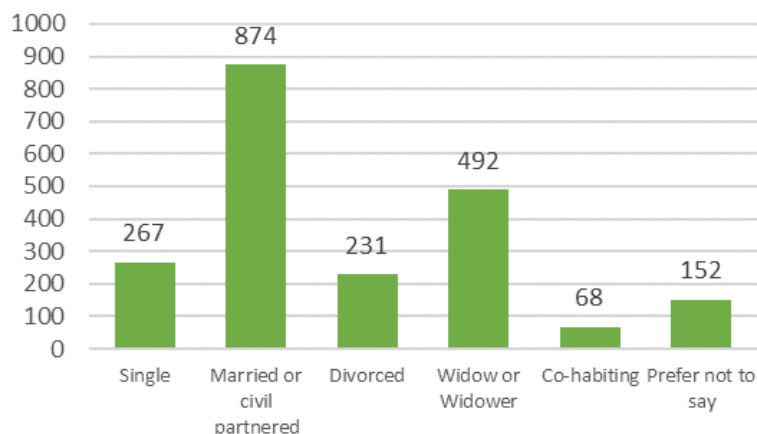


Reflective of the median age of project participants and levels of economic inactivity across Greater Manchester, which has a 28% economic inactivity rate for over 50s, retired people account for 70% of those engaged in projects (excluding those answering “*Prefer not to say*”). Of those with both age and employment status recorded, 199 of 224 persons (89%) answering “*Unemployed*” were aged below 65, whilst 12% (171 of 1376) of those answering “*Retired*” were aged below 65.

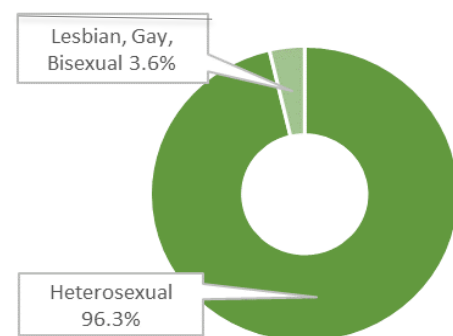


At the most recent census, 27% of over 50s in Greater Manchester were recorded as living in single person households. Ambition for Ageing programme participants, however, reported living alone in 43% of baseline questionnaires. This may be reflective of the older age cohort compared with the census figures, however, it does suggest that the programme was able to reach those at greater risk of social isolation.

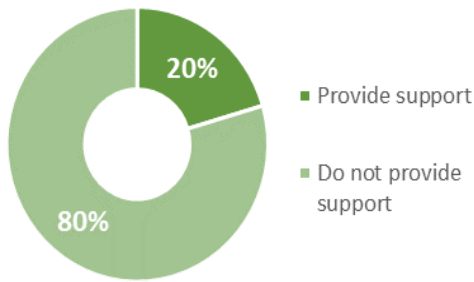
Further factors which affect social isolation are marital status, with those single, divorced and widowed at increased risk of social isolation. The chart to the right shows the count of people at baseline within each category. Excluding “Prefer not to say”, 45% of participants were married or civil partnered, with 25% widowed, 14% single, 12% divorced and 4% co-habiting.



It is estimated that 5-7% of people in the UK identify as being lesbian, gay or bisexual, with higher figures recorded in cities¹⁴. Baseline questionnaires identified 3.6% of participants identified as lesbian, gay or bisexual, discounting a high proportion of “Prefer not to say” answers; data should be interpreted with caution in this respect.



¹⁴ LGBT Foundation (2017) The State of the City for Manchester’s Black and Ethnic Minority Lesbian, Gay and Bisexual People. Accessible online: <https://s3-eu-west-1.amazonaws.com/lgbt-website-media/Files/29b90fbf-8150-460f-8cf7-056da6fb67f5/State%2520of%2520the%2520City%2520BME.pdf>

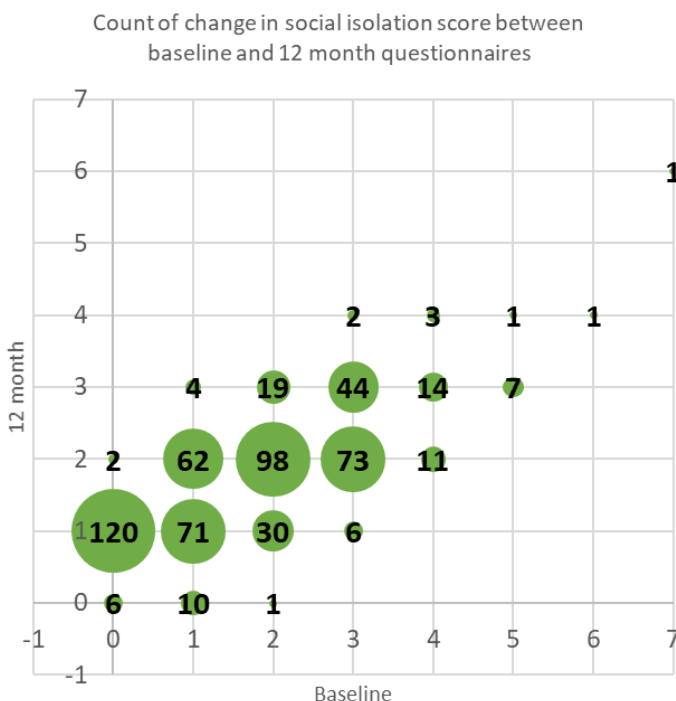


18% of people aged 50+ in Greater Manchester were recorded as providing unpaid care as at the most recent census. Figures from AfA reflect this to a large extent, with a fifth of people providing unpaid care. Evidence from the Working Potential programmes, one of the scaled programmes within Ambition for Ageing which sought to support carers into employment, revealed that many of those providing care do not necessarily recognise themselves as a carer in a formalised sense and this could therefore be under-reported depending on the interpretation of those completing the questionnaires.

Excluding those selecting “*Prefer not to say*”, 52% of participants self-identified as having a long-term illness, whilst 48% had no long-term health condition. At the most recent census, 15% of GM’s over 50 population had bad or very bad health, whilst 29% reported being in fair health. Although a direct comparison between the two is not readily applicable, this could indicate that the AfA programme reached a greater proportion of those in poor health.

With longitudinal analysis between baseline and 12-month questionnaires (n=586), we are able to identify changes in social isolation risk factors. Taking the above factors (excluding age) on a binary basis, i.e. risk factor present or not present, 26% of participants saw a positive change, i.e. reduction in risk factors, 38% saw no change, and 36% recorded greater risk of social isolation. It should also be noted that for some of these factors changes between questionnaires is not possible, e.g. the protected characteristics listed above, whilst those recording a greater number of risks may have been due to the participant being more comfortable reporting such information at the follow-up stage, rather than the risk being unidentified, which can be viewed as a positive change.

The chart below shows the changes from baseline (horizontal axis) to 12-month (vertical axis). The size of bubbles reflects the number of people reporting these risk factors, i.e. 73 people reported a baseline score of 3 social isolation risk factors and 12-month score of 2 social isolation risk factors, thereby showing an improvement.



64.3% of participants to complete both baseline and 12-month questionnaires reported either an improvement in social isolation risk factors (26.5%) or their risk factors remaining the same (37.9%). Without a control sample to compare it is difficult to say with confidence the extent to which the programme influenced this, however, to report nearly two-thirds of participants to be at no greater risk of social isolation may be viewed as a relative success.

Throughout the programme, the average number of risk factors at baseline has remained at 2.1 (where at least 1 risk factor was reported), indicating that some risk of social isolation was present with participants. The mode at both

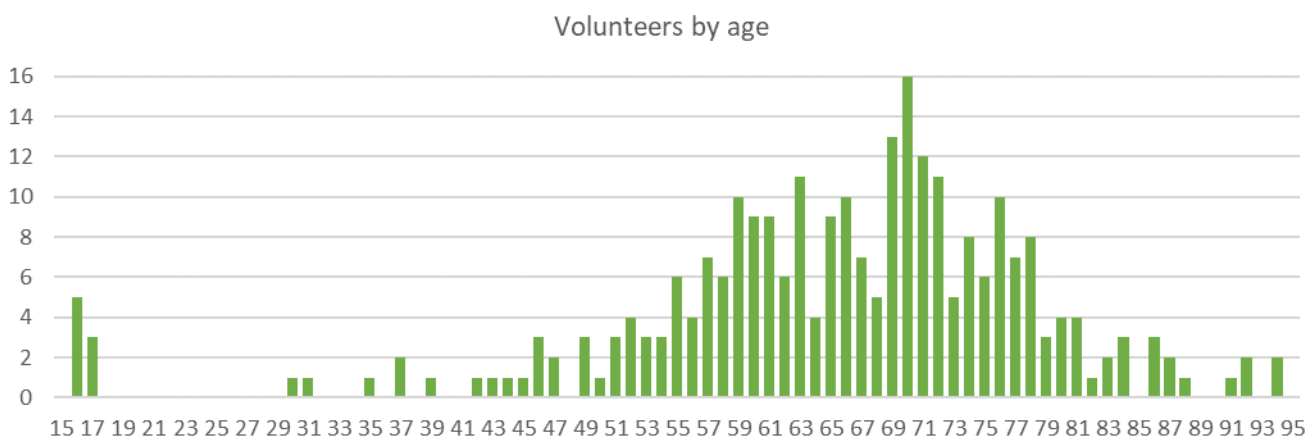
baseline and 12-months remained 2 risk factors, i.e. the most commonly reported number of risk factors was 2.

Volunteers

Alongside participants on the programme, a number of volunteers also took part in projects to aid in delivery. Volunteers completed evaluation questionnaires similar to participants, allowing for comparison between the two groups. 397 volunteers completed baseline questionnaires, from which longitudinal data can be traced to identify changes at the 6-month mark (n=177) and 12-month mark (n=195); not all volunteers completed questionnaires at each of the subsequent intervals.

When reviewing the findings below, it is worth considering the distinctions between formal and informal volunteering, and the degree to which people wish to be viewed as ‘volunteers’. Research has shown frequently, as highlighted by Ageing Better¹⁵, that providing assistance on an ad-hoc basis is often not viewed as volunteering, but seen as a duty of care or community contribution. Formal volunteering, meanwhile, requiring regular commitment can prove a barrier for some who do not wish to hold such responsibilities. As such, findings detailed below should not be interpreted as reflective of volunteering more widely.

Volunteers had a similar age profile to project participants, reporting a median age of 67. However, as indicated by the age range of volunteers, from 16 through to 94, there was a degree of intergenerational activity taking place; 10% of volunteers were below the age of 50.



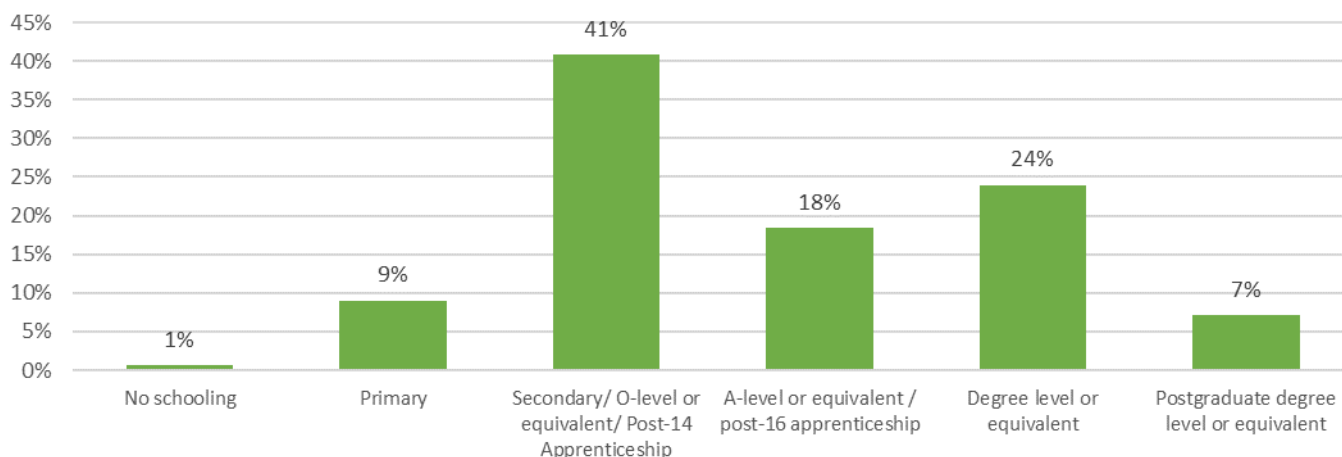
In terms of ethnic makeup, volunteering diverged from the participant profile somewhat, with a larger proportion of White or White British people. Of those choosing to report their ethnicity, 88% were White or White British, more closely resembling the most recent census figures of GM’s over 50 population. 10% of volunteers were Asian or Asian British, with 1.5% Black or Black British and 0.3% mixed race.

Gender profiles of volunteers were an almost exact match with the participant gender profiles, with 66% of volunteers women and 34% men (excluding those who selected “Prefer not to say”). No volunteers had a self-defined gender.

Religious background for volunteers was similar to that of participants in terms of order of magnitude, other than the proportion of those reporting “No religion” to be greater “Muslim” for

¹⁵ Centre for Ageing Better (2018) Age-friendly and inclusive volunteering: Review of community contributions in later life. Accessible online: <https://www.ageing-better.org.uk/sites/default/files/2018-11/Age-friendly-and-inclusive-volunteering-review-2018.pdf>

volunteers. Whereas 64% of participants at baseline reported to hold Christian beliefs, 71% of volunteers did so, whilst 14% of volunteers held no religion and 8% of volunteers were Muslim. Analysis of the Community Life Survey by the National Council for Voluntary Organisations (NCVO) reveals that those from higher socioeconomic backgrounds are more likely to volunteer than those from lower socioeconomic backgrounds, with greater differences witnessed in formal volunteering than informal volunteering¹⁶. Although not directly related to socioeconomic status, taking education levels as a proxy for socioeconomic status indicates AfA has mimicked the national trend. A greater proportion of volunteers hold a degree of postgraduate degree (31% aggregated) compared with project participants (24% aggregated), as evidenced in the chart below.



The employment status of volunteers again largely reflected that of project participants. Two-thirds (67%) of volunteers were retired, 14% were unemployed, with 7.2% in full-time employment and 10.6% in part-time employment.

As with the participant questionnaire, volunteers were asked a suite of questions which were analysed together to calculate changes in social isolation risk factors. Only 118 volunteers completed these questions in their baseline questionnaire and a follow-up questionnaire (12-month taking precedence over 6-month where both complete); the following analysis should be considered in line with this relatively small cohort.

90.7% (n=107) of volunteers reported the same number of social isolation risks at both baseline and follow-up, whilst 7.6% (n=9) reported a greater number of risks and 1.7% (n=2) reported a reduction in risks. Reduction in risk came from one volunteer securing employment and the other volunteer retiring; employment risk relates to unemployment. Increases in risk related to either the presence of a long-term health condition (n=8) or change in relationship status to be either single, divorced or widowed (n=3).

¹⁶ National Council for Voluntary Organisations, taken from Community Life Survey (2017/18). Accessible online: <https://data.ncvo.org.uk/volunteering/demographics/>

Section 4: Age-friendliness

Section 4: Key highlights

- The number of participants reporting **improvements in the age-friendliness of their neighbourhood was double** that of those who thought it had decreased
- Neighbourhood **age-friendliness perceptions typically increased** with the period of time living in participants wards or neighbourhoods
- **Intergenerational activity** was promoted as a key component of age-friendliness
- Perceptions of the ability to **influence decisions taken locally** were greater when affected by a collective working together, whereas individuals completing questionnaires reported having less comparative agency
- Removal of **physical access barriers** featured in a number of projects and improved participation rates

4.1 Perceptions of age-friendliness

What constitutes age-friendliness differs between people and organisations. Earlier reports from the AfA programme¹⁷ explored the views of those across Greater Manchester, drawing on responses in participant and volunteer feedback questionnaires, as well as feedback forms completed at AfA events. The two most prominent themes within these responses related to the need for social cohesion and the existence of positive social connections; built infrastructure remains important as an enabler to age-friendly neighbourhoods, however, interactions between individuals were viewed as having a stronger influence of age-friendly perceptions.

As set out in its 2017 Ageing Strategy, Greater Manchester Combined Authority sought to become the first World Health Organisation recognised age-friendly city region in the UK; this target was achieved by March 2018. Aspects which define an age-friendly neighbourhood according to participant definitions are outlined in the figure below:



¹⁷ Thorley (2018) Building Age-Friendly Neighbourhoods in Greater Manchester: evidence from the Ambition for Ageing programme. Accessible online: <https://www.ambitionforageing.org.uk/sites/default/files/Building%20Age-friendly%20neighbourhoods%20in%20GM%20FINAL.pdf>

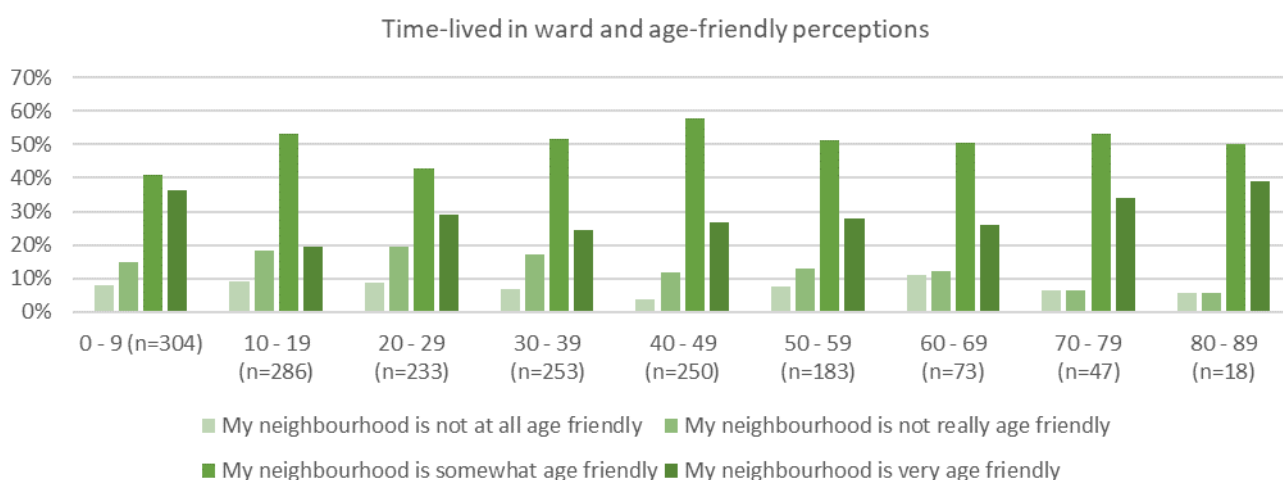
Within the responses to AfA questionnaires, participants were asked to select the extent to which they believed their neighbourhood was age-friendly, with options of: not at all age-friendly; not really age-friendly; somewhat age-friendly; or very age-friendly. Of those completing a baseline questionnaire and an additional questionnaire (the most recent of 6 or 12 month questionnaires), 28% reported an improvement in their perception of neighbourhood age-friendliness and 14% indicated a diminished sense of neighbourhood age-friendliness.

57% had the same perception between questionnaires¹⁸. The matrix to the right (n=486) shows the percentage of respondents completing more than one questionnaire by their change in neighbourhood perception, with 1 indicating the neighbourhood to be “not at all age-friendly” and 4 “very age-friendly”. Red cells indicate a diminished sense of neighbourhood age-friendliness, yellow indicates no change, and green indicates an improvement.

		Baseline			
		1	2	3	4
Most recent	1	1%	1%	2%	0%
	2	1%	6%	4%	1%
	3	2%	7%	32%	6%
	4	1%	2%	15%	18%

87 participants (18%) reported their neighbourhood to be very age-friendly at both baseline and their most recent questionnaire return, whereas a total of 36 people reporting their neighbourhood to be very-age friendly at baseline reported a reduction in their perceived views; 28 responses recorded their neighbourhood as somewhat age-friendly at most recent follow-up, 7 recorded “not really” and 1 person recorded a shift to “not at all age-friendly”. With this in mind, it is worth considering that 31% of the participants responding with no change to their neighbourhood’s age-friendly perception could not have increased between questionnaire responses.

With narrative responses from participants highlighting the transient nature of their neighbourhoods and the changing environment participants have witnessed, the theme of age-friendliness can be assessed through the guise of the time participants have spent living in their wards and the impact this has on their views. The chart below shows age-friendly perceptions by the length of time lived in their ward by 10 year age bands¹⁹ as at baseline responses. For those living in wards longer than 30 years, at least half of responses reported the neighbourhood to be somewhat age-friendly.



¹⁸ Those who reported “Prefer not say” are not included in these calculations.

¹⁹ Time spent in ward over 90 years excluded as only two responses were submitted.

Taken on a binary scale, combining “not at all age-friendly” with “not really age-friendly” and “somewhat age-friendly” with “very age-friendly”, the lowest age-friendly perceptions were recorded for those between 10-19 years (73% positive) and 20-29 years (72% positive). The strongest positive responses recorded were from those in the 70-79 years (87%) and 80-89 years (89%) categories, although these should be interpreted with caution due to the smaller sample sizes.

One of those in the 20-29 year category reporting their neighbourhood to be not at all age-friendly described their view of what makes an age-friendly neighbourhood to be:

"A neighbourhood which feels safe, where we can do more together with neighbours and friends like we used to in old days. No community feel left."

AfA participant, Bolton

Community cohesion is reliant in part on weak social connections²⁰ (such as regular interactions with acquaintances), driven by residents being active and visible within their community. These interactions could take place on the street, in public or semi-public spaces, such as cafes, or on public transport, where older people value mobility factors in equal measure to the social interaction opportunities presented²¹. Research from the Netherlands (see Lager et al, 2015)²² noted that younger adults tend to leave local areas for work on a daily basis, resulting in fewer people visible during working hours and a heightened sense of isolation for older residents. This theme was picked up in narrative responses from participants, who highlighted:

"Community spirit! Nowadays people's lives are so busy with work and young family commitments that they feel as if they can't be bothered taking on any more roles or responsibilities so the gap just gets wider."

AfA participant, Wigan

A number of respondents highlight the theme of intergenerational activity within their age-friendly definitions. Ties between generations, part of the concept of bridging capital, helps to build communities and further this sense of cohesion within localities. AfA took a proactive approach to developing and funding projects which involved an element of intergenerational working and activity.

Case Study

In Bolton, an event run by Moorgate School and the Friends of Moorgate School brought together older people and students and teachers to build on what was already a community bridging relationship. The event involved convening the various parties to share a meal and enjoy performances, strengthening ties and increasing understanding between generations. Those attending commented it was uplifting to be invited to the school for an event other than at Christmas and highlighted their optimism around how ageing-related stigma could be reduced as a result of the event. Borne out of this was the idea for an intergenerational gardening project involving students and older people, furthering the sense of community and age-friendly perceptions.

²⁰ Yarker (2019) Social Infrastructure: How shared spaces make communities work. Accessible online: <https://www.ambitionforageing.org.uk/sites/default/files/Social%20Infrastructure%20Report.pdf>

²¹ Musselthwaite (2018) Age Friendly Transport for Greater Manchester. Accessible online: <https://www.ambitionforageing.org.uk/sites/default/files/Age%20Friendly%20Transport%20System%20For%20Greater%20Manchester.pdf>

²² Lager, D., Van Hoven, B., and Huigen, P.P. (2015) 'Understanding older adults' social capital in place: Obstacles to and opportunities for social contacts in the neighbourhood' *Geoforum* 59 87-97.

Case Study

In Tameside, AfA funded a housing association and a school to generate a letter exchange between children and older people living in two sheltered housing schemes. Writing letters seemed a good option as some older people were unable or unwilling to leave their homes to attend activities. Workers at the housing association spoke to a local school about being involved in the project. They were happy to get involved, particularly because it was possible to integrate the project into their English lessons. Pupils wrote to older people first, then older people were recruited based on what the pupils had written. After the older people had written back, the two parties met for an afternoon tea. This event was even covered by the local newspaper!

4.2 Opportunities for civic participation

Civic participation captured within questionnaire responses was based on two fields: views of “I can influence decisions affecting my local area”; and “People can change things in my local area”. A scoring system was given to combine these two fields, from which civic participation attitudes can be gauged. The table below displays options as presented to participants, who populated each row in a tick-box exercise.

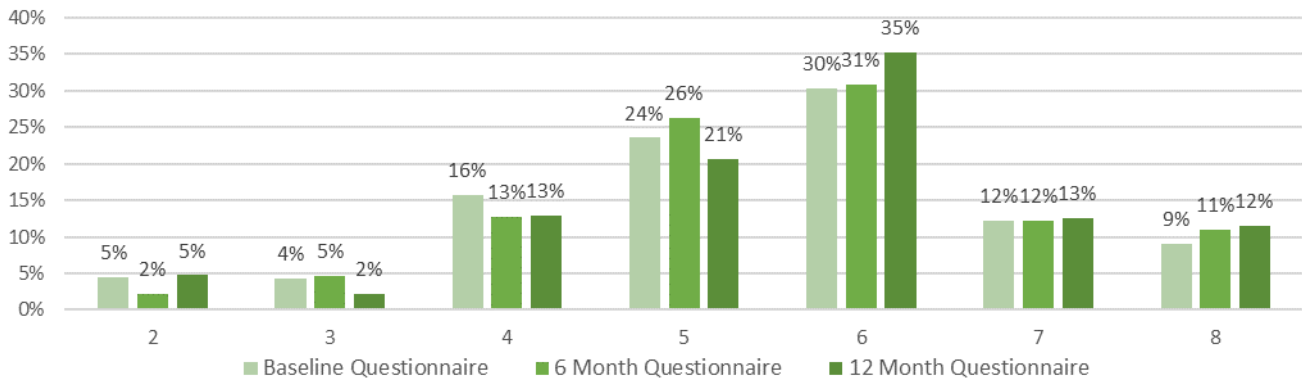
Do you agree or disagree that...	Definitely disagree	Tend to disagree	Tend to agree	Definitely agree
I can influence decisions affecting my local area				
People can change things in my local area if they work together				

Scores were calculated when individuals respond to both questions (i.e. do not tick ‘prefer not to say’ to one or both questions). The minimum score, where individuals answer “Definitely Disagree” to both statements, is 2. The maximum score, where individuals answer “Definitely Agree” to both statements, is 8.

Average scores at baseline were 5.4. There was, however, a difference between the fields contributing toward this figure, with a higher proportion of “Tend to agree” (53%) and “Definitely agree” (29%) answers linked to people can change thing in my local area if they work together, rather than where the individual participant can have an impact (“I can influence decision affecting my local area”: “Tend to agree” = 38%, “Definitely agree” = 11%). It is worth noting that the same questions were asked of those who had attended events as part of the AfA programme, with similar results reported; the perception that people in the wider sense could influence change was more prevalent (47% “Tend to agree” and 37% “Definitely agree”), whilst individuals found themselves with less agency to influence change (44% “Tend to agree” and 15% “Definitely agree”).

Tracing AfA participant responses between each of the three responding opportunities, there is a visible trend where respondents become increasingly more optimistic around influence of their local area either directly or through collective actions (see chart below).

Civic Participation score: Change through programme



Analysis of change of scores between time periods around influencing contextual factors, such as the timing of local or national elections or changes in the prime minister, revealed no obvious influence on civic participation.

Engagement with the programme may have influenced the perceptions of those participating, particularly when considered alongside the large number of projects focused on either group interventions or wider community development/neighbourhood interventions.

Further work within the AfA programme has granted opportunity for the voices of older people to be heard and have an impact upon their local area. An example of this is the Older People’s Network (OPN), coordinated by Manchester Community Central (MACC) and supported in its development through Ambition for Ageing, which meets regularly with its membership of over 100 members to discuss matters of concern to older people and aims to exert influence on policy to the benefit of older residents within GM.

4.3 Age-friendly infrastructure

Whilst a number of the projects funded through AfA were focused on building community capital and strengthening communities to reduce the likelihood of social isolation, pre-existing barriers meant a number of older people couldn’t engage with such projects, heightening their risks of social isolation. Removal of such barriers opens a wealth of opportunity for older people to engage with AfA projects.

Physical infrastructure barriers reported through funding applications range from the existence of uneven paving, the absence of toilet facilities at project sites, or issues present due to faulty or missing electrical equipment. Removal of sources of trepidation and anxiety encourages those at risk of social isolation to become involved in community activities.

The following activities provide an insight into how infrastructure can present issues and the investments which can assist in overcoming such issues:

- **Bury:** An allotment project applied for funding to construct a compostable toilet on site. Those using the allotment had reported not spending as long as they had wished to do so at the site due to the lack of toilet, which led to some anxiety around attendance.
- **Bolton:** A project requiring storage facilities for its resources to be used in luncheon clubs and sewing and craft clubs. Prior to the investment, resources had to be stored remotely from the venue which then needed to be moved upstairs within the venue during the time allocated to the project. Once investment had been secured, the groups were able to purchase storage facilities, removing the need for transportation to and

from the venue, and also up or down the stairwell. Any pressures felt from needing to transport such equipment were lessened.

- **Tameside:** A project to provide level paving on an allotment which was already in receipt of AfA funding for a number of other initiatives on the site. As equalities are an important aspect of the programme, supported by the Equalities Board²³, providing access to the site was a key driver to participation. On receipt of the funding, the group commissioned work to provide safe paving across the site.
- **Manchester:** A project to provide seating along a densely-populated and frequently travelled route for older people, adjacent to a bus stop and church. Provision of seating at this location would encourage the strengthening of bonding capital at the church as well as increasing the reach of older people through the use of public transportation.

Projects have become more creative with their use of pre-existing space as a resource to engage further with older people and reduce their risks of social isolation. Responding to the closure of the local library, a project based in Bolton sought to use the local school as a means to hosting a library designed for older people, providing the opportunity to not only read books, but to enjoy refreshments and socialise. The project was supported by Bolton Library Group to draw on their resource and expertise in providing such services. Klinenberg promotes the use of libraries as a key asset within a community due to their open door policy, where financial wealth or time restrictions do not play a role in limiting access²⁴. Removing these barriers and embracing pre-existing spatial resource promotes equalities and seeks to embed activities in a sustainable environment which should ensure the longevity of the project once sunk costs in establishment have been made.

A further theme which ran through a number of the projects was to increase digital inclusion of older people. Whilst this was predominantly associated with upskilling older people relating to new technology, examples of digital infrastructure to enable further participation in the programme also received investment. In Rochdale, funding was granted to develop a website bringing together ward-associated news and information relevant to its cohort. Participants in the ward's AfA projects were not clustered in a single geographic area, creating difficulties meeting as a collective and in disseminating information about upcoming activities. The website, developed in coordination with the steering group of the ward, hosted a newsletter and details of upcoming events in the area.

²³ Equalities Board <https://lgbt.foundation/ambition-for-ageing>

²⁴ Klinenberg, E. (2018) Palaces for the People: How to build a more equal and united society

Section 5: Social Connections

Section 5: Key highlights

- **98.6%** of those who attended events would recommend them to others
- Pre-existing **strong social connections with family and friends** were maintained
- **Wider neighbourhood connections** reported net improvements
- The proportion of older people who are **digitally engaged increased** across the programme
- **Attitudes toward volunteering** remained largely unchanged
- Volunteers reported **increases in their perceptions of neighbourhood age-friendliness** through neighbourhood perception scores; score of 21+ out of 30 improved from 70% at baseline to 80% at follow-up
- **Social capital and the upskilling of volunteers** represent the biggest enablers to projects being sustainable in the long run following the withdrawal of AfA programme support

5.1 Engagement in activities

As evidenced earlier in this report, the programme managed to reach over 15,000 people through its events, whilst 2,422 participants are known to have taken part in projects (as measured by evaluation questionnaire completion) and a further 397 were involved as volunteers.

Estimations from project leads reported an aggregate of over 20,000 older people involved in microfunded projects; estimations given may be over-estimations when comparing with the figures listed directly above, however, both reflect the substantial outreach and impact on a large number of older people. The chart below identifies the number of project starts in each quarter and the number of older people involved in projects. On average, projects involved 15 older people, with a range in averages across quarters from 9 (Q4 2019/20 as the programme was in its winding down phase) to 24 (Q4 2015/16 as the programme was just beginning).



Whilst the absolute number of projects and older people involved in the programme reduced significantly toward the end of the 5-years, in line with planning, relative numbers of older people involved remained largely stable across the programme's life course.

A key approach to the programme was co-production with older people. Involving older people across all project processes - design, governance, and delivery - would ensure the needs of older people were addressed appropriately and that the tailoring of projects should be fulfilled

to the greatest extent possible. The range of activities offered through the various projects taking place in the programme was lauded by those taking part and is reflected through feedback at events where 98.6% of people would recommend future events to friends and family.

5.2 Self-perceptions of social connection

To gauge social connection to a high degree of richness, a variety of measures were included within evaluation questionnaires. Broadly, these considered connections: with family and friends; with the wider neighbourhood; and in a more formal sense through volunteering. As noted earlier, framing of the term volunteer may deter respondents from acknowledging their contributions due to its formality and the commitments deemed to come alongside this.

Answers to the following section were converted from text-based multi-option forms into a numeric form for the purposes of analysis. Full details of the conversion can be found in the appendices.

Further exploration of the themes listed below and those contained in this report and the programme more widely will be conducted and detailed in a separate report focused on equalities issues and the Ambition for Ageing programme.

Family and friends

Participants were asked about the frequency of meeting with friends and family at baseline, 6 month and 12 month intervals. In considering the results of the following, it is important to note the richness of contacts has not been recorded and, whilst meeting family and friends more frequently implies a greater deal of social connection, attention should be paid to the quality of these contacts, for example, the amount of time spent in the company of others.

Indicator	Baseline (where follow-up present)	Most recent	Decrease	Stayed the same	Improved
Scored between 1 and 6, where 1 = Less than once a year/never to 6 = 3+ times/week					
How often do you meet your friends?	5.23	5.25	16.4%	63.9%	19.8%
How often do you speak on the phone with friends?	5.27	5.28	19.3%	62.3%	18.4%
How often do you text friends?	4.85	4.66	18.0%	67.7%	14.4%
Scored between 1 and 5, where 1 = Strongly disagree to 5 = Strongly agree					
The friendships mean a lot to me	3.88	3.97	19.6%	55.6%	24.7%

The summary table above indicates only relatively small degrees of change in participants' perceptions between baseline and their most recently reported scores. As AfA sought to reduce the risks of social isolation, it is pleasing to see that for all four indicators listed above, over 80% of those responding either stayed the same or saw an increase or improvement in their social connectivity between friends and family.

For the top three indicators listed in the table above, it is worth noting that the most frequent response to baseline questionnaires reported participants already meeting, speaking to, or texting friends and family three or more times a week and therefore their position could not

improve as measured by the scales. This implies that many of the participants were achieving high levels of social interaction with those close to them, perhaps indicating that those at the greatest risk of social isolation were not reached by the programme, whilst those already socially active continued to be socially active.

Wider neighbourhood interactions

Having a number of weak social connections, as discussed earlier, through regular interactions with acquaintances such as neighbours can have a positive impact in reducing the risks of social isolation.

Indicator	Baseline (where follow-up present)	Most recent average	Decrease	Stayed the same	Improved
Scored between 1 and 5, where 1 = Never to 5 = On most days					
How often do you talk to your neighbours?	4.19	4.21	17.6%	63.8%	18.5%
Scored between 1 and 5, where 1 = Strongly disagree to 5 = Strongly agree					
I feel like I belong to this neighbourhood	3.75	3.86	17.4%	56.0%	26.6%
I could go to someone in my neighbourhood	3.59	3.64	24.8%	49.4%	25.8%
I borrow things and exchange favours with my neighbours	3.14	3.18	26.6%	45.2%	28.2%
I would be willing to work together with others	3.79	3.82	21.3%	56.7%	22.1%
I regularly stop and talk with people in my neighbourhood	3.80	3.82	21.6%	54.4%	24.0%

Changes between the baseline and the most recently reported scores all reported positive changes in their average scores, whilst greater proportions witnessed improvements in their perceptions than those whose perceptions decreased, although these positive differences are small with one exception (*“I feel like I belong in this neighbourhood”*). Further exploration into the strengths of building and maintaining weaker social connections linked to social isolation risk factors is recommended to fully understand the reasons behind these results.

It is noteworthy that for five of the six indicators listed above, the mode scores reported were one from the most positive answer possible, i.e. respondents *“Agreed”*; the exception to this was the frequency of speaking to neighbours, whose mode score was 5, i.e. they speak to their neighbours *“On most days”*.

Similarly with median scores, five of the six indicators reported one from the most positive answer possible, i.e. respondents *“Agreed”* or spoke with neighbours *“Once or twice a week”*. The exception in this instance was the willingness to borrow and exchange favours with neighbours, for which the median score reported was 3, i.e. *“Neither agree nor disagree”*. It is also interesting to note that for all of the above bar speaking to neighbours, the mean average was lower than the median average. This indicates that those responding below the median average were doing so with a greater distance from the median average than those above, i.e. their sense of social connection was notably worse than the median person.

Volunteering

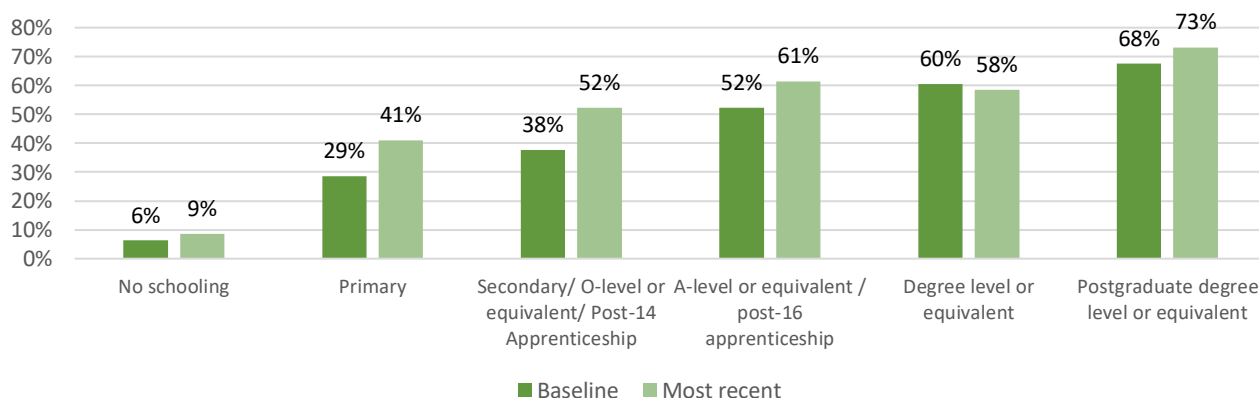
Participants were asked across the various stages of their engagement with the programme about their volunteering status. The table below details averages taken across all baseline questionnaires and for those where a more recent follow-up was completed.

Indicator	Baseline (where follow-up present)	Most recent average	Decrease	Stayed the same	Improved
Scored between 0 and 1, where 0 = No to 1 = Yes					
Do you currently volunteer?	0.49	0.49	8.7%	81.6%	9.7%
Do you want to volunteer?	0.13	0.13	4.7%	90.6%	4.7%

There was an increase in the number of respondents who were volunteering at the most recent recording; 72 additional people started to volunteer during the course of their participation who weren't volunteering at baseline, whereas 65 who were volunteering at baseline were no longer doing so at their most recent questionnaire submission. 298 people who were already volunteering at baseline continued to do so; 311 people were neither volunteering at baseline or at their most recent follow-up.

The chart below shows the proportion of those currently volunteering split by education status at both baseline questionnaire (n=1,919) and (for those completing an additional questionnaire) the most recent response (n=704), i.e. at baseline, 60% of those with a degree or equivalent were volunteering and 40% of those with a degree or equivalent were not volunteering. Those with higher level qualifications were more likely to be volunteering, with increases at every education level drawn from baseline questionnaires, and likewise at the most recent report with the exception of a drop between A-level or equivalent (61%) and degree level of equivalent (58%).

Proportion of those currently volunteering by education status at baseline and most recent response



For those wishing to volunteer, averages remained the same between baseline and the most recent follow up scores, with 12 respondents changing their wishes to volunteer from “Yes” to “No” or vice versa. A large portion of respondents did not wish to volunteer either at their baseline response or follow up response. Ambiguity in the question may have led some respondents who are already volunteering to interpret this as “Do you wish to volunteer more?” or “Do you wish to volunteer in an additional organisation?”, which may have skewed answers toward “No”.

5.3 Digital inclusion

With the proliferation of online services since the advent of the World Wide Web as organisations - whether public, private, or third sector - seek to capitalise on the gains and improvements to be made, the need for greater digital literacy across the population as a whole has increased. Data from the ONS reveals that 91% of non-internet users are aged 55 or above; 55% of non-internet users are aged 75 plus²⁵. AfA sought to address this need through a number of its projects, providing education and equipment to achieve this goal. 138 projects reported being in part focused on digital inclusion, of which 65% were group interventions and 20% were wider community development / neighbourhood interventions.

Opening up the digital world allows for a wide range of possibilities and opportunities, through social aspects (video-calling, social media, becoming part of an online community group), administration (online accounts and tracking of council tax, registering for benefits, job applications and Job Centre Plus activity, online banking) or retail (online shopping) to name but a few. Many of these have been highlighted during the current Covid-19 crisis and the need to isolate and reduce social contact with guidance specifically requesting older people and vulnerable people remain indoors unless absolutely necessary.

At baseline, 31% of all respondents reported not using any of the following: computers; smartphones; or tablets²⁶. Of those to complete both a baseline and follow-up questionnaire (n=821), at baseline 30% or just under a third of respondents (n=248) were not using technology. At the time of completing a follow-up questionnaire, 18 of those responding “No” at baseline had started to use computers, 22 had started to use a smartphone, and 12 had started to use a tablet²⁷, reducing those not using technology whatsoever to 24% of participants.

Not only have projects had an impact on digital inclusion and provided valuable skills to those attending, but other wider impacts have been realised. A participant at a project in Hyde Newton, titled “*Tea and Tech*”, stated:

“Coming here is one of the best things I have done, I have improved my confidence in using my tablet and I feel I can do anything! Also, it has helped (my partner) to get more involved and more sociable, we can do this together and we have made some good people.”

This project drew in a number of older people to gain skills taught by volunteers including two volunteers under the age of 21, highlighting the benefits of intergenerational influence on the project whilst reducing risks to loneliness and social isolation for those participants.

Alchemy Arts ran one of the Scaled Programmes of the project which focused on building connections between older people and their ability to contact their loved ones through digital means. The programme specifically targeted South Asian Pakistani communities in central and north Manchester helping to deliver digital skills training in multiple languages with the aim of reducing social isolation. Training sessions ranged from being able to access wifi networks, use of messaging platforms such as WhatsApp, through to social media sessions on platforms including Instagram.

²⁵ ONS (2020) Exploring the UK's digital divide. Accessible online:

<https://www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/articles/exploringtheuksdigitaldivide/2019-03-04#how-does-digital-exclusion-vary-with-age>

²⁶ Excludes “Prefer not to say” responses

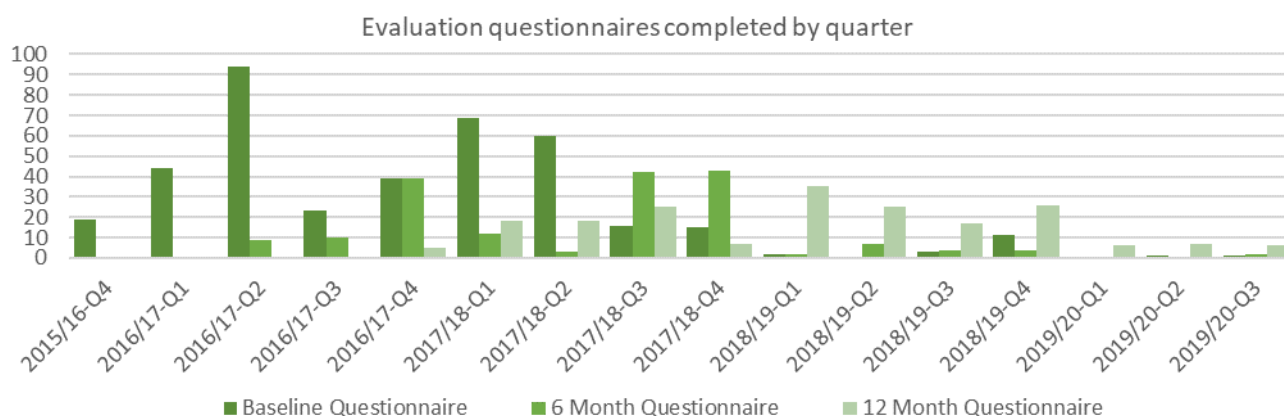
²⁷ Note these are not mutually exclusive. Respondents could have started to use both a computer and smartphone by their follow-up questionnaire

The format of the sessions factored in time for participants to interact with one another and develop friendships and create a sense of community within the groups. When one member of the group was taken ill and admitted to hospital, the group contacted their friend through WhatsApp via voice and text messaging to provide support and friendship in a time of need. Similar peer support enabled groups to share various resources to assist one another, including medical advice and access to government benefits for which they were eligible.

The programme helped to reduce loneliness and social isolation of its participants and altered the mindsets of those who had previously been skeptical of the benefits technology can have for older people. The programme is able to realise legacy benefits through its role in creating these social groups which are able to maintain contact through both face-to-face and digital interactions.

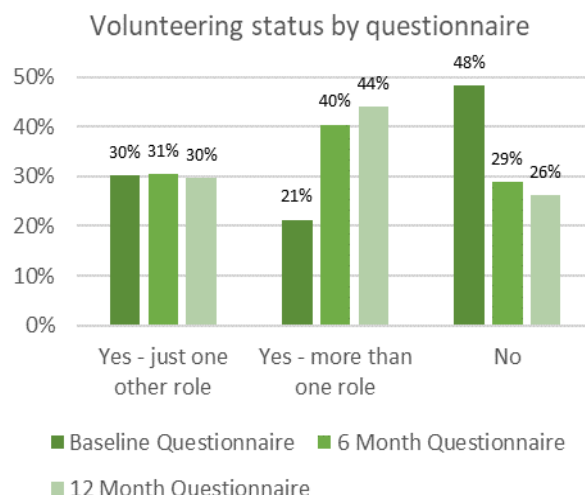
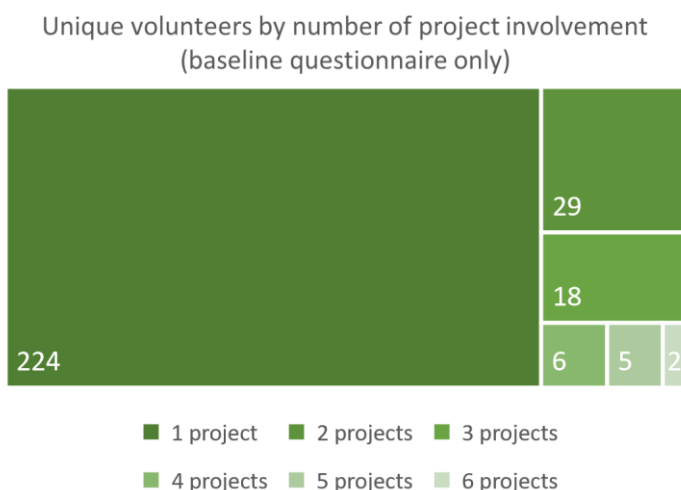
5.4 Volunteering

The numbers of volunteers taking part followed a similar pattern to that of funding and participants, increasing toward the mid-point of the 5-year cycle before tailing off; there was a notable drop in baseline questionnaires and rise in 12-month questionnaires toward the end of the programme.



Volunteers were able to take part in more than one project, with some taking part in as many as 6 separate projects across the course of the 5-year programme. The chart below (left) shows unique volunteers by the volume of projects in which they volunteered at baseline. As indicated in the recent AfA report on microfunding²⁸, volunteering was typically seen to fall on a small cohort of people within communities committed to improving their immediate locality and the lives of those around them. The chart below (right) shows the changes in the additional uptake of volunteering opportunities between questionnaires, i.e. respondents selecting “No” continued with their original volunteering post, but did not take up any additional roles; there is a notable drop in the numbers of those selecting “No”, whilst numbers of those taking up more than one additional role is substantial. The relatively small base of volunteers involved in the AfA programme, particularly when considered relative to the number of AfA project participants, should be considered when assessing the impacts on community capacity as a result of this additional volunteering commitment.

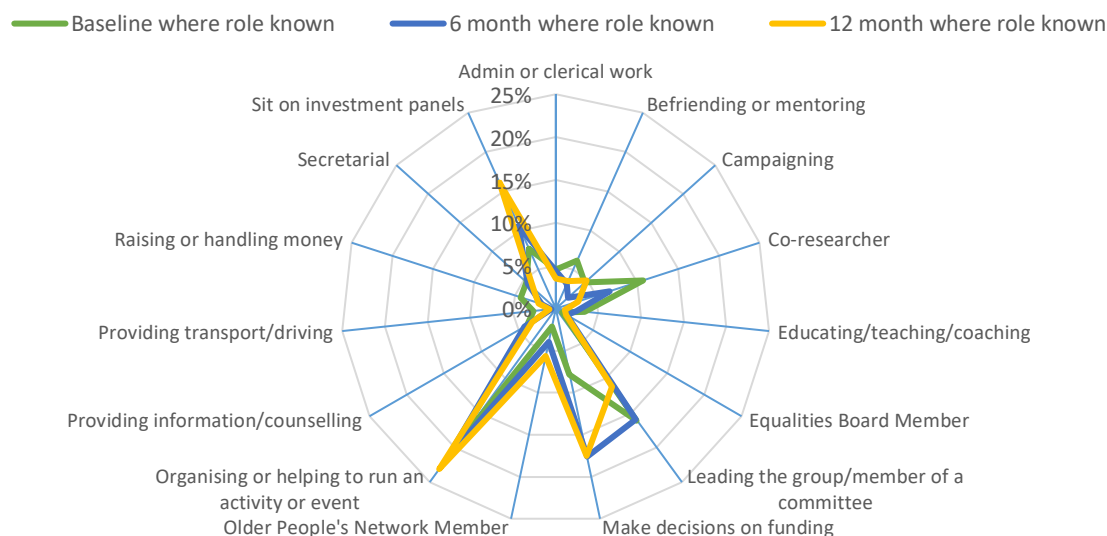
²⁸ North, Thorley, Yarker (2020) Ambition for Ageing, Changing a Place: Microfunding, co-production and community development. Available online: <https://www.ambitionforageing.org.uk/sites/default/files/Microfunding%20Full%20Report%20FINAL.pdf>



When assessing the number of volunteers on a project intervention type basis, it is interesting to note that whilst three-fifths of interventions were group interventions and approximately a quarter were wider community development / neighbourhood interventions, there is a divergence from this split in terms of volunteers associated with projects. Nearly three-fifths of volunteers at each of the questionnaire stages were involved in wider community development / neighbourhood interventions, whilst just under two-fifths of volunteers were linked to group interventions. One-to-one and service provision interventions drew relatively fewer volunteers to their projects. The divergence from interventions by project type perhaps reflects the will of interested parties to have an impact on their local community and investment in improving community cohesion.

The programme would not have been able to realise its successes without the work of LDLs and the work of volunteers. Volunteers typically performed several different tasks as part of their contribution. These tasks included secretarial work, governance and oversight, provision of transport, and delivery of events and activities. The chart below shows the number of recorded tasks performed by volunteers at baseline, 6-month, and 12-month time periods (as a percentage of all known tasks). As numbers of volunteers decreased between questionnaire completions, proportions within the roles performed adjusted; fewer members were leading groups or members of committees or were co-researchers at the 12-month stage, whereas greater numbers were organising activities or events, making decisions on funding, or sitting on investment panels. This perhaps reflects the project process and maturity, with project startup requiring greater oversight whereas the latter parts of projects producing outputs and deliverables as seen in activities and events.

Volunteering role aspects by questionnaire



Scores for neighbourhood friendliness perception among volunteers rose in line with their continued activity in projects. Assessed within this aggregated measure were aspects such as willingness to work together with others and the sense of neighbourhood belonging. The table below identifies the percentage of respondents whose aggregated neighbourhood friendliness perception scores fell within bandings. It is pleasing to see that 80% of respondents scored at 21 and above at the 12-month questionnaire, up from 70% at baseline.

Neighbourhood friendliness perception score	Baseline Questionnaire	6 Month Questionnaire	12 Month Questionnaire
6 - 10	3%	0%	1%
11 - 15	5%	1%	3%
16 - 20	23%	19%	16%
21 - 25	42%	47%	44%
26 - 30	28%	33%	36%

5.5 Increased capacity of communities

Ambition for Ageing invested heavily across the course of the 5-year programme, both directly in projects to support their running and in the support provided to the programme through its LDLs and support staff based elsewhere within the programme team. To achieve a lasting success, the programme will need to have affected communities and enabled those involved with the programme to realise self-sufficiency and provide a means for them to take forward their work beyond the 5-year time period.

In order to be sustainable beyond the withdrawal of support, structures and physical resource (through participants and volunteers) need to be in place and embedded to a degree of maturity that allows for adaptations to new circumstances to evolve. The establishment of committees and other such governance structures with the required skillsets which could be convened to direct the progression of projects is a key enabler in the longevity of success. Complementing the above is the need for financial resource as a project driver. Building financial sustainability was identified as a key issue to address following the end of the AfA programme funding, with signposting to funding sources being given or contributions from those attending activities and events being made to create a self-funding model.

The conceptualisation of project and programme success was discussed previously in the AfA microfunding report²⁹, in which the conflation of sustainability and legacy was brought into question. A number of neighbourhoods sought to achieve the title of “Age-friendly neighbourhood” as part of the Mayor’s Age-Friendly Challenge³⁰, denoting a lasting legacy associated with participation in the AfA programme. Sustainability, meanwhile, is more associated with having a platform or foundation from which to continue and develop further project aspects. Investments in facilities, such as the installation of new boilers, re-fitting of kitchens, or providing accessible routes around buildings or allotments, improve the sustainability of projects. Facilities alone, however, are not enough to ensure that a project can continue to deliver; resources such as volunteers are vital to the longevity and sustainability.

On the closure of the programme, resource to support volunteers will be removed in the form of LDLs and wider support staff who provide expertise. Where projects are linked with local organisations lending support to the VCSE sector, as has been seen in Tameside, chances of sustaining such projects are increased. However, in the absence of such support, concerns from LDLs have been raised over the capacity of volunteers to continue to perform their duties to sustain delivery of projects. Given the significant costs borne by the AfA programme in employing support staff – often outweighing investments in each of the eight GM localities – the capacity, skills and resilience of volunteers become the driving forces behind success. An example of where the limited capacity of project volunteers negatively impacted on the programme can be found in Oldham:

“The group lead had a fall and injured her shoulder and no longer felt able to run the group. Nobody else was willing to take on the role as group lead so the group disbanded. This demonstrates the fragility of some community groups which heavily rely on one key individual who fulfills the 'community connector' or 'community organiser' function. Group members would rather the group disbands than take on a 'responsible position'.”

LDL, Oldham

Similar concerns were echoed by the same LDL with respect to the Altogether for Halloween project run in Oldham. This time, with a larger volunteer base to work with and engagement from other organisations in the local area, there was greater expectation placed on volunteers:

“The enthusiasm of the volunteer group was essential in making this initiative a success, particularly the chair of the new committee (who had worked on previously funded Ambition for Ageing projects at Cafe Alt) who was a real asset and is well-known and well-liked in the community. One person who is committed and enthusiastic can really make a huge difference and rally people to contribute to their local community... The agencies involved were very keen to support the volunteers, however, this sometimes came across as pressurising them to take on more and more responsibility. We reassured the volunteers, particularly the chair, that she didn't need to take on anything that she didn't want to and that the group could take things at their own pace. Professionals need to be careful and work with the community, going with their pace, not setting a pace which reflects their own lack of resources / capacity / outcomes / outputs - at some stages this was faster than we would have anticipated

²⁹ North, Thorley, Yarker (2020) Ambition for Ageing, Changing a Place: Microfunding, co-production and community development. Available online:

<https://www.ambitionforageing.org.uk/sites/default/files/Microfunding%20Full%20Report%20FINAL.pdf>

³⁰ Mayor’s Age-Friendly Challenge <https://www.greatermanchester-ca.gov.uk/what-we-do/ageing/mayors-age-friendly-challenge/>

when working with this group - in other cases with other groups this could mean working at a much slower pace. Where an intense level of support is required this can, however, draw resources away from other areas.”

LDL, Oldham

Drawing in the support of established organisations and building on pre-existing social capital is a gateway through which sustainability of projects can be and has been achieved. LDLs acted as key assets in developing such networks and connections, bringing together parties to benefit wider communities; the continued functioning of these networks is now dependent on those parties involved convening absent of the presence of LDLs. A key determinant within this will be the work of those at the fulcrum collaborating effectively. Where changes in personnel occur in any of the organisations, sufficient handover processes to ensure knowledge exchange and investment in building new relationships will be pivotal in continuation of success.

The legacy and sustainability of the AfA programme may only truly be felt by those in the communities in which it has worked over months and years to come. These may take various forms, through the continued work and presence of project groups, improved relations between organisations and friendships created as a result of participation, or in altering sentiments and perceptions of older people, be it within this wide-spanning age cohort or of those in other age cohorts. Undoubtedly, assessing the impact as it stands, AfA has generated a huge amount of positivity within communities and has benefitted large numbers of individuals as outlined throughout this report.

Section 6: Conclusions and Recommendations

Conclusions

Ambition for Ageing has been in itself an ambitious programme, spanning across 8 localities in Greater Manchester and reaching over 15,000 event attendees and engaging more than 2,400 participants and nearly 400 volunteers across its various projects. Contents of this report pay testament to the contributions made and impact achieved by all those involved in the programme across its 5-year lifespan.

With an overarching goal of reducing social isolation in older people, the programme sought to empower older people in the ageing process across the city region, influencing actions taken and sentiments held by a range of parties, from local and national government, third sector organisations, private enterprises, and in community groups and individuals.

The programme employed a test-and-learn approach, continually assessing its successes, sharing best practice between localities and project delivery personnel, and adjusting and adapting delivery where improvements were possible. Legacy benefits of the programme will be achieved where lessons taken from this test-and-learn approach are applied in similar future project and programme initiatives. A wealth of research has been carried out resulting in a number of publications published to disseminate key learnings.

Co-production with older people was employed throughout the programme, seeking to incorporate views and considerations of older people in all project processes from inception and design through to delivery; there were over 21,000 instances of older people contributing to projects.

Inequalities were placed as one of the central themes and criteria within projects, with this identified as an important aspect to assess throughout the course of the programme. Improvements in the participation rates of BAME communities were notable as the programme progressed. Further publication specifically assessing inequalities is forthcoming and will be published in the months following this end of delivery report.

In addition to this end of delivery report and its predecessors, due attention and interest should be paid to qualitative research carried out as part of the evaluation of the programme. Additional nuance and contextual information has been provided through a variety of means, with feedback in the form of case studies providing overviews of projects and interviews with local delivery leads, whilst separate evaluative work on relevant topics, such as microfunding and social infrastructure, has been completed and listed on the Ambition for Ageing [website](#).

Key recommendations

1. Flexibility in funding enabled by microfunding models should be further promoted and encouraged to commissioners and in community development circles. Removing barriers to small funding pots allows for less mature or formal organisations and project groups to develop their work without encountering more stringent funding application processes and the associated stigma and deterrent.
2. Correctly value and invest in outreach workers and support staff. Project successes were dependent on having the support, guidance and mentoring provided by Local Delivery Leads within the AfA programme. Support provides experience to draw on in terms of establishing project groups, securing funding, and delivering on project objectives, whilst further benefits can be realised in knitting together the fabric of local communities by introducing like-minded groups to one another and encouraging individuals who are at risk of social isolation to become involved in projects. Staff should be adequately trained to deliver on these tasks and be aware of the complexities involved in delivering such projects with regards relationships, governance, adaptations dependent on the group concerned, and the sustainability and longevity of projects.
3. Co-production involving those impacted by projects from their very inception provide interventions which are meaningful and appropriate for their target cohort whilst utilising the determination present in those involved, their skills and local contextual understanding. Future programmes and projects should seek to mobilise these aspects and unlock their potential.
4. Recognise the importance of both bonding and bridging capital. Cohesion within communities and different demographics and generations can be realised through projects which promote bridging capital and have greater potential and reach to those more at risk of social isolation. Bonding capital similarly can seize upon its advantage in recruiting “*People like me*” to become involved in projects and their community. Planning for projects should account for these concepts and capitalize on the opportunities present.
5. Intergenerational work *within* the over 50s age group should be better recognised and addressed, rather than viewing this age grouping as a ‘catch all’ term and presenting it as homogenous. Creating environments where multiple generations feel comfortable, welcomed and able to contribute will help to drive sustainability and build community cohesion through bridging capital.
6. Physical space and accessibility requirements as themes for projects should not be dismissed due to the small size of project investments; AfA produced revealed preferences for themes around both indoor and outdoor spaces as well as accessibility despite small financial commitments being made. Alterations to space can be an enabler and instigator to further development work and projects; providing the necessary foundations which allows for social isolation to be addressed should be given due consideration and resource. Further assessment relating to Covid-19 and its impact on space should be undertaken as circumstances change and manifest themselves.
7. Further research is required to address those who are already experiencing greater levels of social isolation. The AfA programme successfully engaged with large numbers of older people, however, risk factors presenting were not at the height of the scale. Those already most socially isolated were less likely to engage with the programme and means of overcoming this should be considered and addressed in future work.

This report reflects on the 5-year Ambition for Ageing programme which concluded prior to the Covid-19 crisis (ongoing at the time of writing). The implications of Covid-19 and the longer term fallout from the crisis have yet to manifest, however, immediate response from governments imposing lockdown have brought to light the vulnerabilities across all age groups in society, but older people in particular.

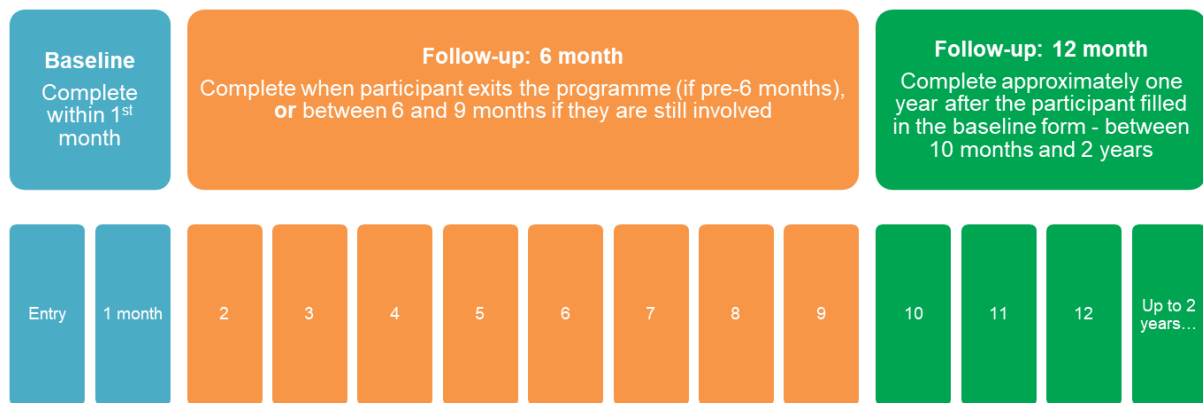
Recommendations given above retain their prescience despite disruptions caused by Covid-19. Given changing situations as a result of the pandemic with regards policies adopted by governments, greater caution from individuals being applied to social engagements, and the risks of new habits forming which heighten social isolation risks, future programmes and projects will need to account for these circumstances and adapt accordingly.

Appendices

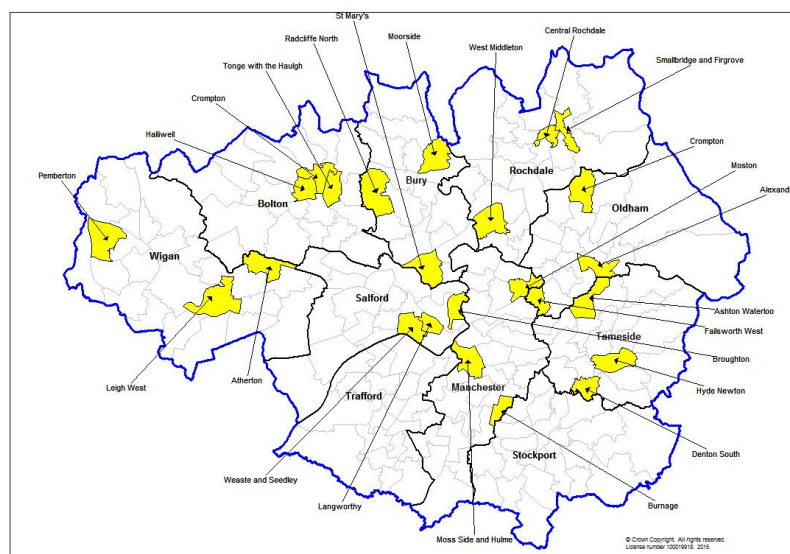
Appendix A – Strategic Evaluation Outcomes

Ambition for Ageing Strategic Evaluation Outcomes	
Outcome	Indicators
AfA has influenced delivery of programmes affecting older people in a positive way.	Projects have sustained activity beyond the life of the project.
	Projects have received investment to grow in scale following inception.
	Programmes external to AfA have been influenced by AfA
AfA has influenced strategy in GM relating to older people, social isolation and age-friendly neighbourhoods.	A strong older people’s network will be sustained beyond the length of the project.
	The GM Economic Strategy in 2020 will make direct reference to the role of older people in economic prosperity.

Appendix B – Questionnaire data collection timeline – practical implementation



Appendix C – Map of Ambition for Ageing Wards



Appendix D – Reach and Engagement

AfA numbers are calculated from baseline figures, including all questionnaires up to 10th January 2020. GM 50+ figures calculated from ONS population estimates.

Ethnicity – matching categories used in census and AfA questionnaire.

Religion – matching categories used in the census and AfA questionnaire. Due to low numbers in AfA sample, Sikh and Buddhist participants have been re-coded into the ‘other religion’ category.

Appendix E – Social connection scoring method

Social connection scoring method		
Question	Answer given	Score
How often do you meet up with friends? / How often do you speak on the phone with friends? / How often do you text friends?	Less than once a year or never	1
	Once or twice a year	2
	Every few months	3
	Once or twice a month	4
	Once or twice a week	5
	Three or more times a week	6
	Prefer not to say	-
How often do you talk to your neighbours?	Never	1
	Less than once a month	2
	Once or twice a month	3
	Once or twice a week	4
	On most days	5
	Prefer not to say	-
I feel like I belong to this neighbourhood / I could go to someone in my neighbourhood / The friendships mean a lot to me / I borrow things and exchange favours with my neighbours / I would be willing to work together with others / I regularly stop and talk with people in my neighbourhood	Strongly disagree	1
	Disagree	2
	Neither agree nor disagree	3
	Agree	4
	Strongly agree	5
	Prefer Not to Say	-
Do you currently volunteer? / Do you want to volunteer?	No	0
	Yes	1

