Social isolation and older men – meeting the need?
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Introduction
Northern Ireland’s population is ageing. It is estimated that between 2013 and 2033, the number of people aged 65 years or over will grow by 63%, compared to 8.7% for the whole population. The rise in life expectancy impacts on the male:female distribution of the population. In 1983, men accounted for 39.5% of people aged 65 years or over, whilst this figure was 44.1% in 2013 (OFMDFM, 2014). Thus, older men are more visible within demographic statistics.

The growing interest in the needs of older people over the last decade is reflected in a range of policies and strategies, such as:
- Ageing in an Inclusive Society (OFMDFM, 2005)
- Lifetime Opportunities Strategy (OFMDFM, 2006)
- Transforming your care: A Review of Health and Social Care (DHSSPS, 2011)

Most recently, in February 2014, the Office of the First Minister and Deputy First Minister (OFMDFM) published a consultation document on the draft Active Ageing Strategy, 2014-2020 (OFMDFM, 2014a). The overall vision of that strategy is for Northern Ireland to become an age friendly region in which people, as they get older, are valued and supported to live actively to their fullest potential; with their rights and dignity protected. The needs of older men are also relevant to the Gender Equality Strategy 2006-2016 (OFMDFM, 2006a), and its proposed replacement.
Loneliness and social isolation
Loneliness and social isolation have been identified as key issues for older people: they can be a major cause of unhappiness and can contribute towards depression and other mental health problems, as well as having an impact on physical health (SCIE, 2012). Whilst the terms ‘loneliness’ and ‘social isolation’ are often used interchangeably, they do not mean the same thing. Burholt (2011) describes loneliness as a subjective measure of unwelcome feelings or perceptions that are associated with a lack of contact with other people. Social isolation is a more objective concept, comprising a continuum ranging from absence of contact with other people (social isolation) to high levels of social contact or participation. Older people are particularly vulnerable to both loneliness and social isolation as a result of the loss of friends and family, mobility or income (SCIE, 2012).

Men’s health and wellbeing
Men’s health is a growing concern internationally. Dillon and Butler (2011) highlighted that strong causal links exist between unemployment, recession and deteriorating economic circumstances; and the health and wellbeing of men. As a result, social isolation, loneliness and depression are increasingly identified as major issues for men throughout the life course. In particular, men often have less involvement in support and friendship networks than women do (Dalgard et al., 2006). During the last decade, many groups and networks have been set up in Belfast to address the needs of older men. These work at a variety of levels, within and across sectors. However, there is no co-ordinated city-wide approach that would maximise benefits for isolated older men, address gaps, share good practice and develop a strategy to sustain this work.

Research methods and findings
In 2014, with funding from the Public Health Agency, The Men’s Working Group¹ commissioned researchers from the School of Sociology, Social Policy and Social Work at Queen’s University Belfast to undertake a review of services for older men (aged 50+) within Belfast. The project had two aims:

- To review the extent and impact of current community, voluntary, statutory or private sector services which are aimed at combating social isolation among men in the Belfast area. The target group was men aged 50 years or over who have retired, or been unable to work through ill-health, and have become isolated. Thus, the project does not include men aged 50-64 years in full-time employment.
- To identify how these services are meeting current levels of need, and ways in which they may be developed to meet future requirements.

There were four stages of the project, and a group of older men provided advice on the interview questions and the report.

¹ The Men’s Working Group was established by Age Partnership Belfast to support city-wide development of programmes to engage older men and combat social isolation. This working group brings together Volunteer Now, Men’s Health Forum in Ireland, East Belfast Community Development Agency, Engage with Age, North Belfast Senior Citizens Forum, and Rejuvenate Men’s Sheds Project (North Belfast Partnership Board).
Literature review
A literature review of existing research outlines different interventions used to address social isolation. Group work schemes appeared to be effective, whilst one-to-one interventions were least effective. However, more structural issues, such as transport and poverty were also significant factors associated with the social isolation of older men.

Mapping exercise
An audit of service provision in Belfast was undertaken to establish the extent, nature and accessibility of services provided by community, voluntary, statutory and private providers in Belfast which target men aged 50 years or over with a specific focus on men who are tending to/are socially isolated. The audit indicated that there is a disproportionate number of services for and with men and women (125), in comparison with 20 services which actively target men. Two key themes were funding and sustainability. In particular, the ending of significant funding programmes (for example, the Big Lottery Reaching Out: Connecting Older People Programme) means that many services will be severely curtailed. Other issues include capacity (both in terms of members and volunteers), gaps, potential, and diversity.

Interviews with men
Ten interviews were carried out with older men aged 50 years or over who participated in a range of services. These provided ‘expert’ knowledge about how these services can affect men’s lives in different ways. The pathways to, and reasons for, accessing these services varied. Nevertheless, the benefits of doing so are similar, including social contacts, friendship and an enduring sense of purpose in a post-work context. Related to these are the improvements to mental and physical health. The essential message is that feelings of usefulness are crucial in successful ageing for men.

Potential barriers to participation include masculinity and ‘pride’, especially in ‘seeking help’. In relation to recruitment to services, word-of-mouth is central, although this will exclude the most socially-isolated individuals. For some of the men, the legacy of the conflict in Northern Ireland remained central in their life, and services can provide both a place of tension and a place of potential reconciliation.

Interviews with stakeholders
Interviews with six stakeholders provided information on the strategic context within which appropriate services are funded or provided within Belfast. No funder or provider identified a strategic focus on services for men in general, or older men in particular, although funders will finance these services if particular need is identified. The underrepresentation of men’s groups was highlighted, both among the applicants to, and the grantees of, funding programmes. The lack of experience and capacity in relation to funding applications and governance was acknowledged as a problem. This has implications for the sustainability of services. Lack of knowledge of services remains an issue across sectors, and inhibits collaboration between service providers, and service uptake by users.
Key issues and concerns
The information collected throughout the project highlighted five key issues and concerns.

Sustainability
The issue of sustainability appeared throughout all stages of the project. Ongoing pressures on the voluntary and community sector to obtain funding, and the difficulties within the current economic climate, are exacerbated by the winding down of large funders and/or funding programmes, and the change in funding priorities.

Models of procurement
The change to a procurement module by some funding organisations has governance and financial implications for voluntary and community organisations. Socially-isolated older men with complex needs are one group that could suffer in such a model.

Knowledge of services
There is a need for an up-to-date directory of available services which can be accessed by professional staff and community members. This was seen as particularly important to facilitate ‘reablement’, which is a core service that responds to a range of health and social care needs.

Impact of services
The interviews with older men stressed that accessing these services played a pivotal role in their mental and physical well-being. Men referred to their lives as being ‘transformed’; many highlighted a significant positive impact on their health; whilst others suggested that membership of these clubs sustained them in behaviours which helped to control their addictions. A similar positive picture emerged from the mapping exercise.

Extent of services
Many different types of services were identified, including day care provision, support groups, and befriending schemes. Some were offered on generic terms, whilst other services were offered for specific groups of users, such as those with dementia. In many parts of the city, churches were seen to be keeping many activities going. The interviews with older men suggested that these services provided a comprehensive and diverse range of activities which clearly met the self-reported needs of men in attendance. However, there are gaps and duplication in these services.

Suggestions
Based on these findings, twelve steps and activities were suggested, which may help enhance the provision of services for socially-isolated older men in Belfast. Not all of these are relevant to every organisation or service, and indeed, many may already be involved in these.

1. Increase the capacity of voluntary and community organisations in relation to funding and governance issues.
2. Take part in government consultations, for example, Active Ageing.
3. Join relevant networks, such as Age Sector Platform, or Men’s Health Forum in Ireland.
4. Develop a clear and up-to-date directory of services.
5. Involve and train health and social care professionals, including GPs, social workers, and Community Mental Health practitioners.
6. Think about how to engage with men: useful resources include Fowler (2012) and Johal, Supanov and Norman (2012).
7. Consider inter-generational work.
8. Recognise the legacy of the conflict.
9. Acknowledge diversity, such as age, socio-economic group, ethnicity, religious background, sexual orientation, mobility, and so on.
10. Think about the range and type of activities that are offered.
11. Consider if men-only services are the most appropriate.
12. Evaluate what works.

Next steps
Following the publication of the research report in September 2014, The Men’s Working Group appointed a consultant in October 2014 to undertake a number of workshops and discussion groups to identify the next steps. These focused on developing an action plan that would engage men aged 50 years or over living across Belfast that are tending to social isolation, signpost them to existing services and support men to start their own groups with toolkit training and funding. Statutory, community and voluntary services would also be encouraged to increase their capacity to identify and support older men and work more closely together.

Key recommendations from the action plan include:
- Appoint a Project Officer to develop capacity and sustainability of services for older men in Belfast.
- Produce a directory of older men’s groups in Belfast and resources to support their development. This directory would be updated annually.
- Develop linkages with a range of partners that could attract and engage with older men, such as those involved in
  - sporting associations (soccer, Gaelic football, rugby, hurling etc)
  - local conservation/history/restoration projects
  - council and community gardening/allotment projects
  - volunteer-involving organisations/projects, for example, handyperson, gardening, maintenance
- Organise and deliver engagement events with men aged 50 years or over in Belfast, often linked to the organisations listed above.
- Identify and support men aged 50 years or over who want to start their own groups.
- Deliver capacity-building workshops with men to set up groups, for example, fundraising options, venues, committee skills training.
- Identify a funder and administer a ‘Seed Capital’ fund offering small grants to start older men’s groups across Belfast.
- Establish a Belfast Men’s 50+ Forum focused on developing links, sharing good practice, and joint lobbying around men’s health.
- Develop and oversee a pilot volunteer ‘Buddy’ training programme, which would train older men to ‘buddy’; and encourage other older men who are isolated/have more complex needs to join a group or activity.
- Organise regular workshops to highlight good practice and capacity among older men’s groups with key stakeholders in the community, voluntary and statutory sector.
- Develop and deliver training for front line staff on how to recognise and signpost older men tending to social isolation.
Conclusion
With an ageing population, acute loneliness and social isolation are major challenges facing our society, and these can impact significantly on wellbeing and quality of life, with demonstrable negative health effects. At a macro level, such health issues add pressure on health and social care services and the cost of services. At an individual level, by intervening in respect to social isolation, older men’s quality of life can be improved. However, there is no single ‘quick fix’, and thus, there needs to be a sustained, flexible and creative multi-sectoral approach, with input from older men themselves.

The full research report is available online at http://www.volunteernow.co.uk/fs/doc/publications/men-aged-50-final-report.pdf

References


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