CENTRE FOR
AGEING
BETTER

Primary research into community contributions in later life

Local report for Settle

October 2018

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1. Executive summary

Background

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

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

What contributions do people make in their communities?

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

Motivating and enabling community contributions

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

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

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

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

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

Barriers

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

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

Lessons

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

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

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

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

2. Introduction

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

Aims of the research

To understand:

- How older people currently contribute to and are supported by their communities

- More about the barriers and enablers for older people contributing

- How older people can be supported to contribute

To identify:

- Routes to action – thinking about how the findings can be taken forward in the local areas after the research is complete.

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

3. Key findings

The lack of state-funded social infrastructure in the area has meant that people **rely on local voluntary organisations** to fill this gap. Many participants volunteer in these organisations and experience a sense of pride.

Based on diary entries, it seemed that younger old people (50-64) who have **caring responsibilities to either children or grandchildren**, are less active within the community and more focussed on family. They also reported fewer regular, weekly activities.

The various **Christian faith organisations** in Settle work closely together, and to the surprise of the community researchers, over half of participants were heavily involved with a place of worship. This indicates that stakeholders within the various churches could be a crucial enabler for increasing community contributions in the area.

Those in **periods of transition**, possibly due to ill-health or a bereavement may not be able to contribute in the same way as they have been, and for some this led to a drop in confidence and the ceasing of contributing entirely. For example, the lack of transport means that increasing mobility issues make it harder to get into town. In this case, opportunities to contribute should be flexible depending on changing needs of individuals, for example allowing people to contribute from closer to home or in a way that is less physically strenuous.

4. Methodology

Overall approach

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

Local stakeholders in each location recruited and trained **community researchers** to conduct fieldwork. These researchers themselves were members of the target populations and would be more effective at seeking out and gaining trust from research participants than someone external to the community. A wider range of **local stakeholders** were engaged with at various points of the process, drawing on their help to guide the research and develop routes to action out of the findings, as follows:

1. **Choosing the five research sites** was based on local factors including health, socio-economic factors, ethnicity, and whether the setting is rural or urban. **Settle** was chosen as a rural site with a large older population, some of whom have health and mobility issues.

2. **Scoping interviews** were held to better understand local contexts and build a relationship with local voluntary organisations, Age UK North Craven, Settle Business and Community Hub, and Stronger Communities.

3. A **co-design workshop** was hosted by Age UK North Craven to inform the research and identify key locations within Settle to conduct it and local issues that may emerge.

4. A **co-analysis workshop** was held to discuss key findings with community researchers and stakeholders.

5. **Co analysis workshop** was held to discuss key findings with community researchers and stakeholders.

6. A **routes to action workshop** aimed to ensure that findings were actionable and that the research would have a lasting effect within the local community.

About the community researchers

Four community researchers were recruited for Settle, where two worked as a pair, as one, who was newer to the area, felt she wanted to be paired with someone who had been living in Settle for longer and therefore knew the community better and the other in the

pair found quick handwriting difficult following a stroke. Researchers located participants through those that they know from the community and others at the local swimming pool shop, post office, and through a contact at the community hub. They completed 16 interviews altogether.

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

Reflections on the methodology

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

5. Locating the research

5.1 Selection of Settle

Settle was selected for its character as a small rural town, and to allow us to explore potential differences in how community contributions can take place in rural and urban areas. Along with other parts of North Craven, it is an area classified as 'rural' and ranks among the **worst 20% for geographical barriers** to service access in England. An additional focus in Settle was the way in which poor health impacts levels of contribution, particularly when this is compounded by limited local transport.

On the basis of these criteria, and after a facilitated discussion with key stakeholders in Settle, two potential target sites for the research were identified:

- Mill Close – An area identified with potentially higher needs

- Upper Settle – An area north of the main settlement where those with mobility issues may struggle to get into town and thus be at greater risk of isolation.

In practice, interviewees were drawn from across Settle. Our community researchers felt that they could have found more people experiencing isolation and hardship in some areas around Settle such as Clapham, Ingleton and Bentham, but given the research period, they were unable to reach and engage people in these areas. The map below shows some key locations in the research:

Figure 1: Settle Map
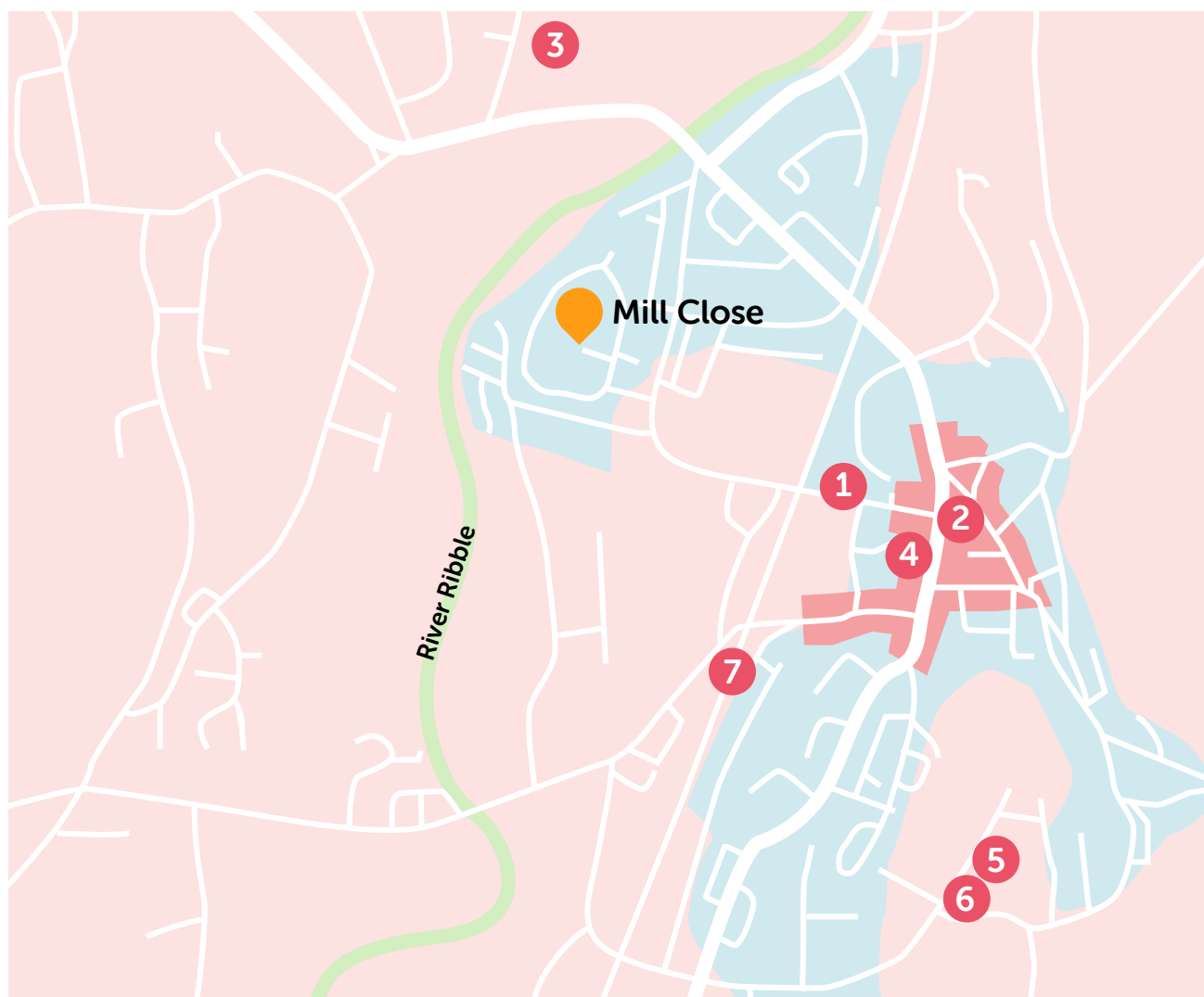
1. Settle Victoria Hall
2. Age UK North Craven Shop
3. Settle Area Swimming Pool
4. Settle Community Library and Business Hub
5. Settle Library
6. Limestone View Community Centre
7. Settle train station

5.2 Description of local area

Local stakeholders helped us to build up a picture of Settle and the potential impacts of its characteristics on community contributions. They spoke about the perceived difference between people who have always lived in Settle ('old Settle') and newcomers (sometimes referred to as 'offcumdens'). **Newcomers could find themselves feeling on the fringes of longstanding social groups** and friendships, which could form a barrier to the rich pattern of community contributions – as givers or receivers – compared with what locals
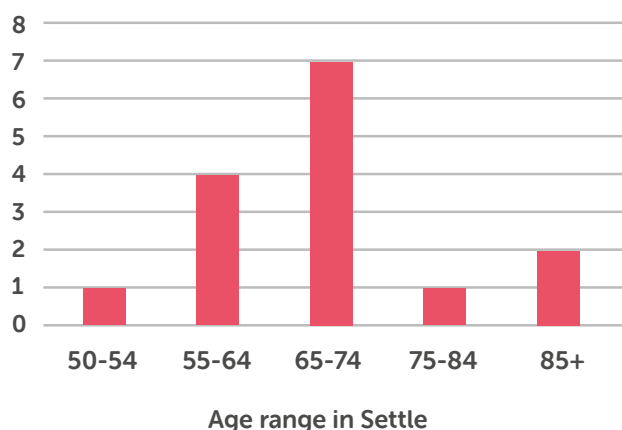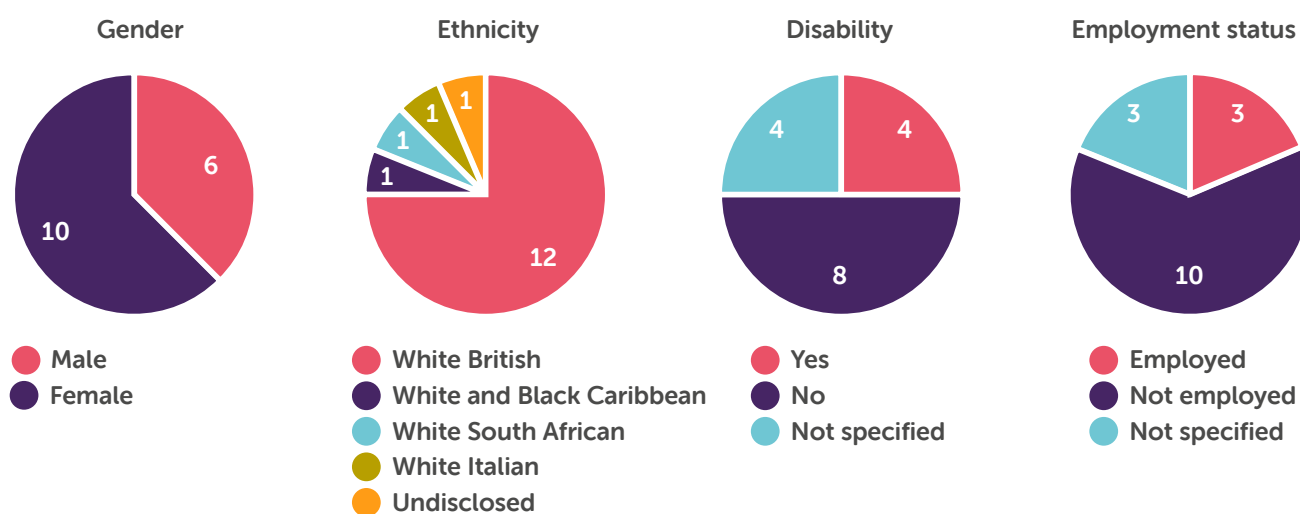
might experience. They could also be at risk of isolation in terms of day-to-day interactions and support, as friends and family are not close by. On the other hand, newcomers were more likely to have higher incomes in retirement, greater self-confidence and skills more readily applicable to 'formal' volunteering and could thus be more prominent in the town's visible volunteer activity. This, it was said, could mean that natives of Settle could feel overshadowed by active newcomers – or at least feel that there is less need for them to get involved. One stakeholder who worked at the local swimming pool mentioned that they had many volunteers yet were struggling to get 'old Settle' locals to join the board of trustees. As a result, the board was made up of those newer to Settle, leading some to be resistant to the changes the board wanted to make.

Stakeholders described the area as generally very friendly, with a large older demographic and a culture of self-sufficiency and mutual support in dealing with the challenges of living on a low income in a rural area. At the more personal, neighbourly level, this could mean giving lifts to neighbours, whilst at the more formal volunteering level, this involved helping to staff local facilities such as the library, the Community and Business Hub, the Settle-Carlisle Railway, the swimming pool and the Victoria Hall event space. Stakeholders thus saw a **historic lack of state infrastructure** to bring the community together to focus on contributory activity.

6. Community contributions in Settle

6.1 About the research participants

The achieved sample for the research in Settle is presented below:

Gender

- Male — 6
- Female — 10

Ethnicity

- White British — 12
- White and Black Caribbean — 1
- White South African — 1
- White Italian — 1
- Undisclosed — 1

Disability

- Yes — 4
- No — 8
- Not specified — 4

Employment status

- Employed — 3
- Not employed — 10
- Not specified — 3

Age range in Settle

Age range	Count
50-54	1
55-64	4
65-74	7
75-84	1
85+	2

Number of years living in Settle

Years	Count
0-9	4
10-19	6
20-29	1
40-49	3
50+	2

All interviewees were recruited by the community researchers, sometimes with help from local organisations to ensure that they were recruiting a range of participants from various parts of the community.

It was noted by the researchers that discussing poor health was a challenge within interviews. While some disclosed that they had a disability, others mentioned their poor health throughout the interviews but would not consider themselves disabled.

Community researchers took notes and recorded all interviews. A sub-sample of four audio recordings were transcribed to quality check and inform the detailed case studies presented below.

We have explored the rich qualitative data collected by the community researchers we worked with, by considering the responses overall and by considering responses by variables which through the course of the study emerged as likely points of difference, namely: age, gender, health, length of residency in the area and whether they have family nearby. It should be noted that the sample for the research is very small, and the data qualitative in nature. Therefore, we cannot make generalisations to the wider 50+ population in Settle or other similar rural communities.

6.2 Key findings by theme

6.2.1 Context

Most research participants in Settle felt that they strongly belonged to the local community, and the level at which they felt this was linked to the length of time they had lived in the area. Those who had lived in Settle for under 5 years said that they felt fairly strongly that they belonged to the community, whereas others who had lived there for longer felt very strongly. None interviewed reported feeling no or little connection with the community. Throughout the research period, participants and community researchers alike frequently commented on the **strong sense of community in Settle**.

"The area where we live is a very helpful area - people are known to one another - this leads to being more helpful."
Female, 55-64

Settle has a thriving community life with many opportunities for people to volunteer, particularly related to the community-run venues and organisations discussed above. Additionally, the swimming pool shop and the Age UK North Craven shop were identified as hubs for socialising. It was evident early on that the reach of our research could be extended through working with members of University of the Third Age, the timebank and the Community and Business Hub. We ensured that representatives from as many of these organisations as possible attended our stakeholder workshops.

Stakeholders and community researchers felt that some residents in the community could be put off by formal volunteering roles. They felt that these members of the community were more open to informal, ad hoc acts of neighbourliness.

6.2.2 Patterns of activity

Most people interviewed engaged in small acts of neighbourliness (giving lifts, helping with shopping, going around for a cup of tea). Nearly all **regularly help their neighbours** and

many had themselves relied on help from members of the community. This help (given and received) has taken the form of practical and emotional support: cooking, helping with shopping, giving lifts, helping in times of hardship, gardening, looking after pets, giving lifts and informal socialising were all mentioned.

Many participants volunteer formally for **local charities** and although local stakeholders felt that this might vary depending on length in time in Settle, this is spread evenly across the age groups of participants and their length of time living in Settle. These community-run activities were seen as important in supporting people's mental and physical wellbeing. For example, some interviewees talked about the swimming pool as a valuable social space for those with health and mobility issues (some had been prescribed hydrotherapy treatment). Others talked about the importance of charity shops (Age UK North Craven and the swimming pool shop) as meeting places for older people in the area.

6.2.3 Motivations

Amongst those making community contributions in Settle, the desire to help others was clear. Specific reasons for getting involved included:

- **Having done it throughout their lives** - It is something that they had learnt and made a part of their lives, rather than something that they started doing only on retiring or on reaching old age.

- **Being part of a faith group** - Connected to this, many participants talked about spending a lot of time at their place of worship growing up, as well as their Christian faith where they have learnt an attitude of 'love God and love thy neighbour'. Places of worship remained a key part of many participants' weekly routines and a setting for community contributions in later life.

- **Importance for wellbeing** - Some felt that helping others was important to their own wellbeing.

  "I think if I talk to someone with a problem it helps me as much as them."
  Male 65-74

- **Provide structure and routine** - Others were motivated to take part in activities (socialising or volunteering) as they provide a structure to their time.

  "A benefit of doing these activities, is it's repetitive every week. A social exercise talking to people."
  Male 65-74

Neighbours were often friends, and many said that there was little that they would not do for their neighbours if they were asked. Contributing to the community was seen in the context of **reciprocal, friendly exchange**, with people feeling that they could seek help from their neighbours if they needed it.

- **Strong community 'spirit'** - Settle is a small, friendly town where people of all ages know and support once another and are happy to help neighbours:

"If I ever make a pot of soup I will take some to my neighbours; sadly, one of my neighbours has cancer so I help him quite a bit. I'll take in parcels and things like that. Last year three babies were born and I gave them a present. It's a mixed community with both young and old folk and I'm fond of the of community."
Female 85+

"This small town enables acquaintances to meet frequently in the street and suggest different strategies for helping or seeking help."
Female 55-64

One community researcher was concerned that she had not been able to find the most 'needy' people and that her interviews made Settle sound like 'utopia', which she was worried did not reflect the reality.

"My interviews probably make Settle seem like it is all hunky dory. I am not sure that it is, but it probably is more than many other places."

6.2.4 Enablers

Places of worship

Community researchers were surprised to find that there was a high level of church involvement amongst the participants interviewed. More than half of participants mentioned their relationship with their place of worship (Roman Catholic, Church of England, Methodist or Quaker), saying that it made them feel part of the community and provided a pathway into volunteering or contributing more informally. Some saw church congregations as important meeting places that also introduced them to opportunities to help others, for example by identifying more lonely or vulnerable people who needed support. Many also spoke of times of need, when they relied on the church – and the people they knew through their church – to provide support.

Attending church appeared as a focal point to people's weeks, providing a sense of stability and continuity in the lives of individuals and the community. For some, it is the only activity that they regularly commit to.

"I have been a member of the Church for most of my life...I was brought up with this lifestyle."
Male 65-74

"It helps me feel more involved in the community. It stimulated me to get more involved."
Female 85+

Community-led organisations and venues

A lot of community contributions are a response to the rurality and sparsity of services in the area. Several key community venues in Settle are volunteer-run to fill in gaps for missing state-run services including the library, Victoria Hall and the swimming pool. In addition to this, several participants referred to the closure of the local hospital (Castleberg Hospital) which has meant that participants have to rely on others for lifts to hospital further afield, or have others rely on them. People feel that in a small community with limited public services, volunteering and community contributions have been particularly necessary and encouraged by circumstances.

"Geographical and public transport we have not got - so we have to depend on others."
Female 75-84

The pool is an important community resource, especially for those with mobility issues. It is a place for meeting and socialising as well as for exercise:

"I was in an accident and I have to do it. There has been the unintended - or unexpected - benefit that is has connected me more to the community, I am perhaps more connected now than I was before I had the accident."
Male 65-74

Finding a valuable way to contribute

Finding ways to contribute by using existing skills and personal interests was important to some participants, in order to find a means of contributing that was fulfilling for them. Some participants mentioned that they were looking for opportunities to utilise previous professional experience in a voluntary capacity, or through knowledge sharing to benefit others. For example, one who was an English teacher now contributes to library talks using her specialist knowledge.

"Seeing how I can use various skills and experiences I picked up during my 'working life' to the benefit of others."
Male 65-74

Having said this, for those who have tried to contribute their personal skills and interests and felt rejected, this can be a barrier to contributing in future, as discussed in the following section.

Mary is over 85 and has mobility issues due to arthritis. She has lived in Settle for over 50 years and used to be much more active, but with age has had to reduce this as she feels quite tired. She continues to do what she can, such as calling on friends when they are ill:

"I have a friend in nursing home, and I have elderly relatives overseas in nursing homes. I ring up my elderly relative regularly."

She is very helpful to her neighbours - making soup, caring for ill neighbours, taking in parcels. She likes the mix of young and older people in Settle. She and her husband used to do voluntary work with young people but feels that she is now too old for that work. One of her key activities is going to the swimming pool, where she socialises with others, and she also volunteers by giving talks at the library, where she feels able to use her professional skills gained in her former job.

6.2.5 Barriers

Life transitions

There were several instances of people who had been active in the community, but following a life transition, such as an accident, or with increasingly poor health, have had to stop this activity. This could be because of accessibility challenges – some, for example, talked about struggling to get up the hill into Settle – or because their health problems hinder them from taking part in the activity itself (e.g. memory loss). These volunteering opportunities tended not to be replaced by something else, and so the skills and willingness of those individuals to take part and contribute are often lost. Feeling that they could no longer contribute can have a significant impact on emotional wellbeing.

"I used to go to a social group in the past, but now I can't get up the hill.'
Female 75-84

Some participants said that whilst they could no longer contribute in the same way they used to, they still wanted to contribute in another way. For example, several mentioned that due to mobility issues they no longer frequently visit friends and neighbours, but now chat over the phone instead and 'check in' with friends and neighbours in this way.

"I can't do much because of lack of mobility. I have a friend in a nursing home who I ring up regularly, and stay In touch with old friends by phone."
Female 85+

Younger old: family commitments

From the weekly diaries, it seems that younger participants (50-64) were less likely than participants in older age groups to have an established weekly routine of activities which includes volunteering or regular community contributions. Most interviewees in this age group had caring responsibilities either to a parent, child or grandchild, and when describing their week, regularly keep time free in case they need to care for their relative at the last minute. Even without family responsibilities, or on days without such responsibilities, it seems that this age group make fewer weekly plans and left space for more spontaneity.

"Maybe I would work in charity shop if I had no kids.'
Female 50-54

"I prefer to spend time with my family."
Female 55-64

A few participants were motivated by making their children and grandchildren's lives easier and some commented that there were not many activities for young people.

'There used to be regular dances in Settle on Fridays, but there is nowhere for young people to go. There are cafes for older people.'
Female 55-64

Edith is in her late 50s/early 60s and has lived in Settle for 53 years. She spends any spare time she can with her family, including looking after her grandchildren so that their mother can work.

'Any time I spend is normally with family...looking after grandchildren. I offer to do this, so his mother could go to work and get some extra money.'

She feels sorry for young people in the area and feels that they should be more activities for them in Settle.

She does not like to do too many activities, as she prefers not to be around lots of people and is not as confident as she seems. She has helped neighbours in the past, by looking after pets, taking out bins and chatting when she sees them and says that she is the type of person that will help if someone asks for it. She does not feel that she has received much support from her neighbours, as she relies mostly on her daughter for help. Despite this, she feels that Settle is a very helpful place. Her weekly activities revolve around her family and include shopping, coffee with her daughter and looking after her grandson. On the weekend she spends most of the time in her house on her own.

Lack of confidence

Lack of confidence emerged as a key barrier to participating in activities. For example, not enjoying being in large groups of people and preferring to help on a one-to-one basis. Some did not want to 'intrude' on their neighbours but would help if asked.

"I prefer not to be round lots of people. I come over as confident but underneath, I'm less confident."
Female 55-64

For some who did not mention lack of confidence as a barrier in their interviews, community researchers sometimes observed a lack of confidence in their body language and the way that they answered questions.

Additionally, when asking participants what they thought the key barriers for others to contributing to the community were, they used words such as 'shyness' 'lack of confidence' and 'afraid to ask' – so were aware that confidence can be a barrier, even if it does not affect them personally.

Social boundaries

Several participants mentioned social boundaries as a key barrier to informally or formally contributing to the community. These took several forms, including gender, age, housing tenure and length of time in Settle.

One woman had a male neighbour who had said he felt lonely and was in need of companionship, but she felt it was not appropriate for her to provide this support on her own.

A few had perceived intergenerational barriers, where they felt that young people did not treat them equally; for example, some had tried to engage with young people and had felt rejected. There were others, however, who did not see age as a barrier and liked the mix of ages in the community.

"A lot of younger people [here] don't tolerate older people."
Female 50-54.

One participant perceived some miscommunications between those who consider themselves 'Old Settle' and newer members of the community. For example, 'Old Settle' members of the community who want to differentiate themselves as such, may be perceived as unaccommodating or rude.

"I upset people sometimes because say 'I'm old Settle' - that offends new Settle people."
Female 75-84

One participant felt that neighbours who rent formed a barrier to neighbourly interactions, perhaps as they were often younger, more transient and less invested in the community.

Elizabeth is in her late 70s/early 80s. She went to school in the area, then moved away for 25 years and feels that it is important for people to know that she is originally local to the area and wishes to differentiate herself from those who are 'new Settle'. She does not mix regularly with her neighbours as they are renters, and she believes that "renting people don't mix."

She used to attend a social group and volunteer locally but doesn't any longer due to poor health – she can no longer get up the hill easily. Her life now revolves around church. She is also involved in the library, and as she knows a lot of people in the local area, will stop and chat to them in shops. She likes to help her neighbours, and when new people arrive she greets them, but she feels that some have been rude to her.

Recently she met some children doing a project on local history and offered their school a talk about what life was like in Settle 60 years ago. "But the school did not take me up on it. I was disappointed. I thought I had something to offer." She feels that people in the community have become more inward facing, and that they need to listen more.

Being rebuffed

There were a few circumstances where interviewees wanted to contribute through offering their unique skills and experience to others but had been rebuffed. This affected their confidence and deterred them from seeking out ways to contribute in the future. For example, one woman offered to speak at a school about what life was like in Settle in the past, as part of a school project, but was turned down. Another offered to teach courses in a specialised design technique which had no take up; and a third attempted to arrange a street party which was unsuccessful. All these participants faced mobility issues which limited their ability to contribute and were seeking their own relevant ways to so do.

On a smaller scale, some participants felt that neighbours were rude when they had tried to engage with them, and this had stopped them from offering help in future.

"Attitudes have stopped me from helping my neighbours. There are people who don't know me who have been rude."
Female 75-84

One felt that the relationship with her neighbours was one-sided – where she regularly invites her neighbour into her home, but this is not reciprocated.

"My neighbour doesn't invite me in, but comes to my house for a glass of wine and goes to my daughter's house'
Female 65-74

Peter is in his late 60s/early 70s. Following an accident his life has changed dramatically. He does however feel that it has brought him closer to the community.

He likes to take opportunities to contribute, and likes to use his specific skills/ knowledge: **"I'm personally more receptive to people coming to me; so if there was a space where I could show off (or talk about) [my skill] - like a community centre - I'd be very interested."**

He had suggested starting a local group for a particular hobby but there was little interest, which was disappointing. He has a friendly relationship with his neighbour with whom he chats and drinks tea. He organises an annual seasonal neighbourhood party and knocks on neighbours' doors to try to get them involved but has encountered a range of barriers.

"Some never wanted to come; some have mobility problems so can't come; others' husbands have died and since then they don't come."

Poor public transport

The lack of public transport in Settle was seen as a key barrier for older people in Settle taking part in community activities, volunteering or helping others. When asked whether there is anything the government, council or charities could do to support people locally, many responded identified public transport as requiring improvement, and this also came up at stakeholder meetings.

The limited public transport in the area mean that people struggle to get around, particularly when they suffer from any mobility issues. In some cases, this has meant that people have had to stop contributing in the same way, as frequently, or altogether, as they can no longer walk as much and do not have an alternative mode of transport.

"[I used to] in the past, but now I can't get up the hill."
Female 65-74

"Public transport difficulties stop me."
Female 55-64

Having said this, some members of the community help each other by giving lifts, for example to the hospital.

7. Conclusions

7.1 Conclusions

In line with initial stakeholder discussions, interviews confirmed that Settle is a friendly town where people recognise one another and support each other. The closeness of the community and the pride of place that participants felt could be linked to the lack of social infrastructure in the area, which has led to local voluntary organisation filling the gaps. Many participants volunteer at these local organisations, and all benefit from the services that they offer, such as the local swimming pool, the library and Victoria Hall.

While the lack of transport in Settle has been an issue for those suffering from mobility issues, many participants mentioned times when they have given or received lifts. Having said this, others have also said that they have stopped contributing as much following a loss of health, as the ways that they used to contribute involve going into town.

This, combined with the fact that several participants wanted to contribute in their own informal ways, that are fulfilling and meaningful to them, means that there are opportunities to ensure that those who wish to contribute are enabled to do so in their own personal way. For example, where one participant could no longer physically visit friends, they called to check up on them instead.

The various Christian faith organisations in Settle work closely together, and to the surprise of the community researchers, over half of participants were heavily involved with a place of worship. This indicates that stakeholders within the various churches could be a crucial enabler for increasing community contributions in the area.

7.2 Proposed routes to action

Traverse facilitated a routes to action workshop with the aim of encouraging local stakeholders to engage with the research findings to generate potential actions, addressing some of the barriers or building on the enablers to community contributions. Participants included a wide range of local stakeholders with an interest in community contributions amongst older people in Settle, including those from the council, local voluntary organisations, and individuals from the communities.

Using the research findings as a basis, participants self-organised into groups with a lead person/organisation for each potential route to action, to begin thinking and identify next steps.

Supporting those in transition to make contributions

One potential area for action centred around how to maintain community contributions among those who are in periods of transition, such as those in poor or worsening health, and those in the age bracket 50-64.

Two local organisations/groups were identified as having a role in taking forward action to address these points:

1. **Exclusively Inclusive** is a voluntary organisation in Skipton and North Yorkshire which organise inclusive social opportunities for those who are often excluded, such as those with disabilities, which could be expanded across Settle.

2. **The Craven V-net** Forum organised by Community First Yorkshire has a role to support groups to provide more peer or inclusive volunteering opportunities. These findings will be discussed at the V-net meetings to explore possible steps forward.

Building confidence and capacity

Stakeholders identified a need for more outreach and support to engage people who lack confidence or do not recognise their own skills. A number of potential actions were identified:

- **Community lunches** are an informal opportunity for people to find out about opportunities to contribute. They could be used to signpost people to other activities, with no commitment.

- **Community First Yorkshire** have a volunteering fair which is an opportunity to provide information to people who may be considering volunteering.

- **A stall at the local market** offering information on volunteering could reach and engage with a wider range of people.

- Following these activities, the existing **community and business hub can act as a central place** for information.

Joining up and increasing awareness of volunteer opportunities

It was recognised that local organisations do not always work together as effectively as they could. Better knowledge of what each of them offers would enable more effective signposting, which would mean people who are looking to volunteer have a better chance

of finding an opportunity that suits them. A key action around this was to bring volunteer coordinators from each organisation together at a meeting, to increase awareness of what each does and how best to signpost to each other.

Appendix 1: Detailed methodology

To understand if, how and in what circumstances people later in life currently contribute to their local communities and the various barriers and enablers they face, it was important that the research be location-specific and sensitive to local contexts. To achieve this, Traverse worked in collaboration with local stakeholders in each location to recruit **community researchers**, who were themselves members of the target populations. They were trained to conduct fieldwork on our behalf, as they would be more effective at seeking out and gaining trust from research participants than someone external to the community. The method used to locate, train and ensure the quality of the research outputs in listed below:

1. Choosing the research sites	Locations for the research were chosen to give a diverse perspective on what local factors impact community contributions, including health, socio-economic factors, ethnicity, and whether the setting is urban or rural. **Settle** was chosen as a **rural site** for the research and where physical health and mobility issues impact on community contributions.
2. Scoping interviews	Once this site was chosen, scoping interviews were set up to better understand local contexts and build on existing relationships that Centre for Ageing Better held in Settle, namely with Age UK North Craven.
3. Stakeholder workshop: Co-design	The research in Settle was coordinated through an existing contact at Age UK North Craven, who was also able to provide a location for meetings. They were also able to identify key stakeholders from local voluntary organisations and the local council for an initial **stakeholder workshop** (facilitated by Traverse). This helped to: structure the research, identify key locations within Settle to conduct research, suggest potential community researchers, discuss expected findings and possible ways that the research will be mobilized. Stakeholders raised the challenge that within Settle there was social tension between those who had lived there for a very long time and those who were newer to the area, or had moved there to retire.

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

To help with the recruitment of community researchers, Traverse designed a flyer which was circulated by Age UK North Craven. This included the following criteria for researchers:

- Based within, or well-connected in the Mill Close and/or Upper Settle areas

- Confident talking to residents within Mill Close / Upper Settle and working with Traverse staff

- Male or female and aged over 50

- Proficient in written English.

Four community researchers were recruited for Settle, where two worked as a pair, as one, who was newer to the area (community researcher 2), felt she wanted to be paired with someone as she wanted to be involved but felt she was too new to Settle to know it well enough alone (community researcher 3). Researchers located participants through those that they know from the community and others at the local swimming pool shop, post office, and through a contact at the community hub. The following table identifies the profile of each community researcher who we worked with in Settle:

	Gender and age	Interviews completed
Community Researcher 1	Female, 70s	2
Community Researcher 2 and 3 (worked as a pair)	Female, 60s and Female, 60s	7
Community Researcher 4	Female, 70s	7
Total		16

Information gathered during all stakeholder workshops was collected in a learning log and has informed our analysis.

Reflections on the methodology

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

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

Appendix 2: Community researcher reflections

All four community researchers found the research to be a positive and engaging experience. They really enjoyed the challenge and the opportunity to get involved with something new.

It is important to note that the researchers themselves were part of the demographic of people who this research hopes to impact. With that in mind there are some key finding to consider with regards to our researchers that could apply to community contributions more generally.

Confidence-building

Our contact at Age UK North Craven offered ongoing support to the community researchers, giving them a quiet place to host their interviews and a meeting place where they would come together every week to discuss how things were progressing. This enabled a collaborative and supportive experience for our researchers.

Most of the community researchers felt that they gained confidence through developing their interview skills and found the training and the questionnaire very helpful. At the end of the process they all felt confident to refer to themselves as 'community researchers' and some wish to continue developing this skill.

Buddying-up and making friends

Two of the community researchers worked in a pair, in which one was newer to the area and the other had had a stroke which made writing more difficult. In this partnership one of them would ask questions while the other took notes. Working as a pair allowed for a quicker building of confidence and research skills, as they were able to approach potential participants together and encourage one another. Additionally, having one person asking questions and the other writing notes made for much more detailed interview notes. This is a learning for future community research.

All researchers made new friends with each other. Some also found that the research was an opportunity to get to know other people in the local area, speaking to people they would not otherwise have spoken to.

Additional reflections from the researchers were as follows:

- Interviewing people made some participants consider what activities that they could get involved with.

- Another said that as someone newer to the area, the research has made her more aware and appreciative of her neighbours: **"I have just moved house and the neighbour came by with a bottle of wine. The neighbours have been extremely nice. I am very conscious of that now."**