

# Working with Older Men – Improving Age Concerns’ Services



Report of a Research into Practice Seminar

26 September 2006

Hosted by Age Concern Tameside

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## Introduction

In response to an increasing body of research evidence pointing out that the specific needs of older men are largely ignored in current services for older people, Age Concern England's Research & Development Unit commissioned a review to look at Age Concerns' existing practice and experience in addressing the specific needs of older men, particularly those who are socially isolated. The report 'Working with Older Men – A Review of Age Concern Services' identified several local Age Concerns which are developing practical responses to meeting the needs, interests and preferences of older men, as well as many Age Concerns who are aware that their services and activities aren't attracting many older men, and are considering how best to more effectively address their specific needs and interests.

The report also proposed holding a seminar to look at the issues arising from the Review, and for local Age Concerns to be able to share learning and practice in relation to working with older men. Focussing on 'research into practice', the seminar was also a good opportunity to hear from a recent research study commissioned by Age Concern Surrey, and carried out by Surrey Social and Market Research (SSMR) and the Centre for Research on Ageing and Gender (CRAG) at the University of Surrey, into the 'Social and Emotional Well-Being of Lone Older Men'. Professor Kate Davidson from the Centre for Research on Gender and Ageing (CRAG) gave a very interesting presentation on the findings of the Surrey research, and drew out some of the key recommendations for service providers, particularly for Age Concerns. Findings from the Age Concern England-commissioned Review of Services for Older Men were presented by Simon Northmore, Practice Development and Research Manager with Age Concern England.

The seminar was hosted by Age Concern Tameside, which supports a 'Gentlemen's Club' for older men which was featured in the report. This provided an opportunity for participants to meet some of the members of the 'Gentlemen's Club', and to hear their views about the reasons why it may be difficult to engage older men in services and activities for older people.

The focus on providing appropriate services and activities for older men, and on Age Concerns developing a more 'gendered' approach to their service development and delivery, is particularly timely, in view of the forthcoming introduction of the 'Gender Equality Duty' (April 2007).

Under the provisions of this new public duty, all public service providers will need to demonstrate that they have paid due regard to the differing needs, interests and preferences of men and women in the development and delivery of their services. The seminar provided an opportunity for Age Concerns to explore their own practice and to consider ways in which they could work with and start to influence public bodies to identify and respond to the differing needs of older men and women.

We would like to thank Age Concern Tameside for hosting the seminar, with particular thanks to Denise Bates, Chief Executive of Age Concern Tameside, for chairing the day. Thanks to everyone from Age Concern Tameside and Age Concern England who helped to organise the seminar, and to all colleagues from other Age Concerns who attended and shared their experience and ideas on the day. We hope that this report will be a useful resource to help your organisation to develop your work with and for older men.

## Opening Remarks

**Colin McKinless**, *Executive Director, Social Care & Health, Tameside*

In welcoming participants to Tameside, Colin McKinless noted that the topic of older men is a relatively hidden subject, and welcomed the seminar focussing on working with older men.

In Tameside currently the proportion of the population aged over 65 is 15% of the total population, or 32,000 people, of whom 60% are women and 40% men. The projection for the 25 year period from 2003-2028 is that there will be an 85% increase in the number of people aged over 85. With the continuing emphasis on enabling older people to retain their independence as far as possible, there will be increasing numbers of older people living at home and requiring various support services to enable them to do so.

Although we know that there are increasing numbers of older men in the general population of older people, they are currently under-represented in generic older people's services, such as those provided by Age Concerns. Answering the question 'where are the older men?' is becoming an increasingly urgent priority.

The challenge for older people's service providers is to find ways of reaching out to older men, particularly those who are socially isolated, to identify their specific interests, needs and preferences, and to develop services which are acceptable, appropriate and accessible to a much wider range of older men than are currently reached.

Colin McKinless welcomed the initiative taken by Age Concern to focus attention on this neglected area of service provision, and looked forward to further developments as a result of the seminar and the review of Age Concern services for older men.



## Research Presentations

### Investigation into the Social & Emotional Wellbeing of Lone Older Men

**Dr Kate Davidson**, *Centre for Research on Ageing & Gender (CRAG), University of Surrey*

The objectives of the University of Surrey study were:

- To establish the views of lone older men (60 and over, especially aged 70 and over) regarding their current social and emotional support networks and activities, especially those who do not use traditional services;
- To establish views and preferences on new services/activities/networks likely to improve the quality of life of lone older men;
- To use the outcome of the research to guide service providers and those who work with and for older people.

The aims of this presentation are:

- To highlight key findings from this extensive research project and put forward some recommendations;
- To enable participants to comment on any issues they would like to see highlighted/further detail provided in the final report;
- Note – detailed evidence for the assertions presented today is provided in the report of this research study.

### Research methods

Combination of qualitative and quantitative methods:

- 20 in-depth interviews with 'lone' men aged 60+ (esp. 70+);
- 3 focus group discussions;
- 1 mini group + interviews with men from ethnic minorities;
- 100 semi-structured interviews with lone older men;



- Interviews with representatives from statutory, independent and voluntary agencies (total of 38 interviews);
- Visits to sheltered housing, residential homes and day care centres;
- Recording of diaries by a sample of older men.

Some general points which have emerged from the research findings are:

- the need for flexibility in service delivery that respects individual differences;
- it is important to balance the views of professionals with those of older men themselves, for example, on issues such as relationships with women;
- the recommendations do not address resource allocation; rather, they aim to assist future planning and resource allocation;
- the requirements for support and services are likely to change as a result of social changes, e.g. in traditional gender roles.

Contributors to the overall quality of life for older men, derived from the feedback from older men themselves and from professionals, were found to be the following: independence; transport; social support network and regular social contact; contacts with family; female companionship; good health, or well managed bad health; mobility and strength; life skills, including domestic skills; control over their own life (especially after the loss of a partner when older men may feel that their life is out of control); feeling that they have a purpose; access to services and consistent provision; warm home; financial comfort; availability of activities appropriate to men; access to information and feeling safe.

Satisfying **interests and activities** can do much to promote the quality of life for older men. However, many older men may have few interests or hobbies, if their lives have been predominantly focussed on work. Many activities may be inaccessible, either financially or geographically, for older men. Older men may be unable to pursue more active activities, and may get frustrated with their inability to do handiwork, DIY or gardening.

In terms of **social relationships** the main difficulty faced by lone older men is loneliness, as they often have more limited social relationships than women. The closest family relationships for lone older men were found to be with daughters; they generally had little contact with old friends, and for the oldest men, very few friends remain. Relationships with neighbours are often adequate, and may be friendly, but rarely close. Lone older men have

few opportunities to mix with a range of ages; a number of older men value this opportunity, which is most often provided through clubs. There are very limited numbers of people from ethnic minority communities living in Surrey, with the exception of Woking. Some older men from ethnic minority groups remain distinctly separate, often isolated by limited English. Some, but not all, have greater family support. Gay men in the older age groups may feel particularly excluded.

Some of the issues revealed by the research, in terms of service **provision**, were: the poor take-up of services by older men; widespread ignorance of services available to support them; some fear of making approaches to find out what is available – there were particular fears of intrusion, by service-providers, in relation to financial affairs. Services are often largely reactive, and older men can be unwilling to ask for help, so they may only make contact with service providers in a crisis situation. The initial approach of the service provider is critical, and although the services provided are often satisfactory, the difficulty for lone older men is in accessing the services in the first place, and for service providers, achieving greater take-up by older men.

## Quotes

### From Centre Manager

*'I think really just making sure that these men don't fall by the wayside because we could give them so much. And it's a shame sometimes that they're not aware of us, or that we'd like them to come'.*

### An older man's view of Age Concern

*'I am out in the community. I'm not sitting at home completely isolated., yet Age Concern has not got to me yet in each of these places (I visit regularly) as yet, and that's worrying as one of them is actually run by Age Concern, to inform me as to what help they could be to me. If they wish to be of help to me: I assume they do'.*

### Other views of Age Concern

*'Also I think they seem to fight for elderly people; fight the Government'.*

*'My insurance company wanted to put my insurance up so I applied to Age Concern and I got cheaper insurance'.*

Some views were put forward by service providers as to the preferences of older men – for example, that older men seem more accepting of help from the voluntary sector (which may be perceived as less threatening?); and that older men are generally happier if personal care is provided in a relatively anonymous way. Support from work-related or ex-services organisations is generally regarded as more acceptable, whereas the acceptability of Social Services provided services is more variable. A number of lone older men prefer it if they can view the ‘service provider’ as providing informal support (especially younger old men). Cultural differences may make some service providers more or less acceptable for older men from ethnic minority communities.

### **Views of Social Services**

*‘You’re assessed until you don’t know if you’re coming or going of course. I’ve had more assessments than I’ve had hot dinners’.*

*‘I can’t think off-hand what would make it better. I’m making the best of it myself as I can and I don’t think there’s anything else they can do’.*

Among the lone older men interviewed for the study, there was very limited awareness of the services available through Age Concern. Some of those interviewed saw Age Concern as a ‘charity’, which inhibits uptake of services; Age Concern’s services were also widely viewed as being primarily for ‘very old people’ and especially for very old women. Age Concern was seen by some people as providing very specific services only, such as lunch clubs, insurance and information leaflets. Some people viewed Age Concern as primarily a campaigning, rather than a caring, organisation, although others realised that Age Concern services can provide more general support for the recently widowed.

The low attendance by older men at Day Centres provided for older people is due to their lack of interest in activities which are perceived to be primarily aimed at older women. Older men tend to attend Day Centres mainly for a subsidised lunch. There is a stigma attached to Day Centres, which are perceived as providing a service for ‘much older’ people. Attempts, by some older people’s services, to re-position their activities as ‘community centres’ have had some success with men. The way in which older men are introduced to activities and services for older people is critically important.

The lone older men who were interviewed for the study expressed a range of views about Day Centres:

*'And we come here of course, obviously to save cooking'.*

*'I think once if I could not drive, which might well happen, then I would start using the centre more because I can walk to it'.*

*'I don't like old people, and I don't like being old'.*

*'No, I'd sooner be away from older people because I feel young myself'.*

*'I've tried it and frankly, they're a miserable lot'.*

*'To be honest with you, it's very hard to think you're in that category'.*

Comparing the experiences of older men with those of older women, the research study has produced the following findings:

- men are clearly in a minority in older age;
- men tend not to have the same social networks for support as women do. The quality and quantity of social networks are important;
- men often have less varied life skills;
- men feel that they should not show emotion;
- retirement can lead to a feeling of a loss of status;
- men are less likely to go to things;
- many men find declining physical strength more difficult to cope with than women.

The research study has also revealed some significant differences between lone older men of different ages. Among lone older men aged 80-85 and over, there were many who had done no real cooking or housework throughout their lives; they were perhaps more likely to be accepting of their situation; they tend not to complain – perhaps stemming from their experiences during the 2<sup>nd</sup> World War; they are possibly the loneliest group of older men, largely due to significant mobility problems, and they may also have financial problems.

Among older men in the 60-75 age group, some significant issues were: the difficulties experienced if they have lost a partner soon after retirement; the expectation that they will do more in older age; they are more likely to do voluntary work, and thereby retain a sense of purpose; many have better financial provision, but face a long period of retirement.

Some of the **key needs** of the lone older men interviewed for the study were:

- reducing social isolation, especially in the evenings and at weekends;
- providing practical help, e.g. filling in online forms, making phone calls, home and garden maintenance;
- advice on life skills, especially domestic;
- transport – often a limiting factor on their ability to take up services/support outside the home;
- activities appropriate for more educated men;
- opportunities to mix with varied age groups;
- increasing awareness of the services which are available;
- need to target younger generations with information, including family, friends and the local community;
- GP education – important that GPs don't just assign symptoms to 'old age', but provide advice and support on health issues as a preventative measure;
- Need for service provision to be more proactive;
- Reducing social isolation of lone older men, especially in the evenings and at weekends (then easier to address physical needs);
- Increasing awareness of services that are available;
- Most effective method of informing people about services is one-to-one, face-to-face.

The **concerns** that some of the older men expressed for the future were as follows:

- transport if they have to give up driving;
- how to manage if they have mobility problems, e.g. strokes, hips;
- isolation can only increase as people move more often, including families;

- concerns about security with reduced police presence;
- recognize that they may well need more support in the future, but will not know where to go to find out about this;
- many hope not to live long enough to need additional services.

The following **recommendations** have been put forward by the research study:

- 1) Need to encourage older men to take up the support and services that are already available;
- 2) Need to consider crucial initial points of contact;
- 3) Identify trigger times when support is needed, e.g. bereavement, onset of health problems;
- 4) Need for low level support, possibly social – which can prevent a crisis point being reached;
- 5) Practical support should be provided in a way that maintains independence and control;
- 6) Initial service must be appropriate and good quality.

The following specific **recommendations for Age Concern** have also been identified:

- 1) Need to make older men aware of the full range of services that Age Concern provides – i.e. not restricted to frailest older people and those most in need;
- 2) Promote services such as counselling – low awareness and under-utilisation of these services;
- 3) Further develop Age Concern's role as an information resource;
- 4) Provide more support in developing general life skills – especially from other men;
- 5) Work more fully in partnership with other service providers;
- 6) Consider provision of 'emergency' support.

*Further details about the University of Surrey/Age Concern Surrey research study, and copies of this presentation, can be obtained from Kate Davidson at E: [K.davidson@surrey.ac.uk](mailto:K.davidson@surrey.ac.uk)*



## Working with Older Men: Barriers & Enabling Factors

**Simon Northmore**, *Practice Development and Research Manager, Age Concern England*

The specific needs of older men are largely ignored in current service provision for older people. Most Age Concern services tend to be female-oriented.

Age Concern England commissioned a Review of Age Concern Services for Older Men, which aimed to:

- understand the barriers to older men's participation in current services and activities;
- examine successful examples of activities with and services for 'socially isolated' older men.

The Review was undertaken by an independent consultant, Sandy Ruxton, and supported by a reference group from Age Concern England. The final report was based on a brief literature review; three focus group discussions with older men in Birmingham (AC Weoley Castle), Manchester (AC Tameside) and Gateshead (AC Gateshead) who were members of existing 'men's groups' run under the auspices of local Age Concerns; face-to-face and telephone interviews with staff working in Age Concerns; and interviews with Age Concern England staff and representatives of other organisations working with men.

### Key Issues

Some of the key issues identified from recent research on older men indicates the following trends:

- there are growing numbers of older men as a proportion of the total population of older people; but many older men have quite specific experiences of ageing which are distinct from the 'majority' experience of ageing, or older women's experiences of ageing;
- older men are more likely than older women to be excluded from wider social relationships, especially men who are divorced or never married;
- grandfathers are less likely to see their grandchildren if they are not married and living with their wife;

- older men have lower life expectancy than older women, although there are significant social class differences as well;
- in general, male pensioners have higher incomes than females with the greatest difference between married pensioners. For single, divorced and widowed older men the differences are much smaller;
- older men have more access to cars, mobile phones and the internet than do older women;
- older men are major providers of informal care – with those over 75 providing more intensive care (50 or more hours per week) than women.

As the numbers of older men increase and the partnership status of older men shifts, it suggests that access to services is likely to become more significant, and the need to find appropriate responses more pressing.

## **Why don't older men use services?**

The Review of Age Concern services for older men suggests three levels of barriers to older men's involvement in services for older people; the cultural or social level; the individual or family level and the service level.

### **Cultural and social reasons**

Traditional notions of gender emphasise the importance for men of independence, self-reliance and strength. These attitudes and beliefs exert a strong influence on men's behaviour at all ages but particularly influence older generations.

The importance of men's relationship with employment and the workplace is also central to their identity. For some older men, this raises a dilemma between their views of themselves as 'productive' contributors to society and their present experience, in later life, of being 'unproductive' or 'dependent'. The interviews undertaken for the Review suggested that this resulted in men avoiding certain behaviours which they took to be non-masculine, in particular admitting to problems, seeking assistance or displaying emotions.

In this context, older men's resistance to participating in Age Concern services – perceived as primarily geared at those who need 'support' or for those who are 'dependent' or 'incapable' – becomes readily understandable. Where services are dominated by women, both as staff and clients, the cultural and social barriers are significant.



## Individual and family reasons

Divorced and never married men are more susceptible to social isolation, poor health, risk behaviours (e.g. smoking and drinking) and material disadvantage than married older men.

Many of the older men interviewed for the Review were widowers and several spoke with feeling about the emotional depths to which they had sunk and the obstacles which they had faced following the death of their spouse (or sometimes a friend or other relative). It is likely that the majority of men in such circumstances remain very isolated and hard to reach.

Other personal barriers to participating in service and activities included differences in outlook, interests and capabilities between men aged 60 to 75 and those over 80, with men over 80 tending to withdraw from social contact; problems with health and mobility; lack of transport and the cost of attending groups. Finally, a common perspective among staff was that men were '*not 'natural joiners' of groups*'. However, the evidence suggested that men are prepared to join groups if the activities resonate with older men's identities and appeal to their interests. On the whole, individual level barriers appeared to be less significant than barriers at other levels, though for a minority of men these did hinder involvement with Age Concern services.

## Service reasons

A significant barrier to engaging older men in services is the nature of referral systems and policies. Several staff commented that where men were referred, whether by Social Services, GPs, or PCT staff, they were more likely to attend. However, existing referral systems did not carry out this function effectively. There was widespread lack of awareness of Age Concern services, particularly amongst GPs.

A focus on practical activities, such as digital photography or IT skills, was important for some older men, although most men who attended Age Concern services preferred to 'do their own thing'; chatting with other (male) friends, playing cards, reading newspapers and drinking tea. This represents a challenge to any stereotype that men do not enjoy passing time with each other in relaxed, non-competitive ways. It may be that some older men come to accept the limitations placed upon their physical ability, and become less concerned about conforming to dominant notions of appropriate masculinity.

However, the majority of older men do not attend such activities and many of those interviewed felt that they needed to justify it to themselves and to other men. Some sought refuge in a relatively segregated 'men's group' within a mixed service. Others were involved, at least initially, as volunteers (e.g. walk leaders, drivers) – as active contributors rather than passive recipients.

Finally, some services had quite a different image problem for men, namely that they were seen as synonymous with the 'last stop' on the way to the grave. As Arber and Davidson\* comment –

*'Efforts need to be made to make the clubs specifically aimed at older people more congenial for older men so that they do not feel they are 'yielding up' their individuality, or admitting some sort of 'defeat' by attending'.*

(\*Arber, S., Davidson, K. (2003) 'Older Men: Their Social Worlds and Healthy Lifestyles', University of Surrey, ESRC Growing Older Programme)

## **Messages for service providers**

There are some important messages for service providers, emerging from Age Concerns experience in addressing older men's needs. Some of the key messages are as follows:

- An important starting point is to identify the needs of older men in the local community, including personal backgrounds, histories and identities, as well as significant transitions in their lives, e.g. retirement, bereavement etc. Consulting directly with older men is crucial.
- Good referral systems and better understanding of Age Concern services by other professionals is also vital. Self-referred men were generally more affluent and less isolated. Good publicity and awareness-raising activities can help in getting services better known to a wider range of people.
- Another important factor is the existence of positive management and staff policies and attitudes to engaging with older men. The presence of a male member of staff, perhaps as a first contact point for men who are joining, may help to 'legitimise' participation for some men. But most important is the attitude and approach of staff, whether male or female, and the warmth of the atmosphere they create.

- Activities that are attractive to older men may help strengthen involvement. However, there is a danger in reinforcing stereotypically ‘gendered’ activities. Few men in the focus groups came specifically for educational activities, although activities aimed at improving men’s health can be a successful way of engaging older men. For many older men, straightforward social activities and outings were the most popular activities.
- The image of the service is significant – the posters on the walls, the kind of reading material available, décor of the rooms, the availability of a male toilet, will all encourage or deter men’s attendance.
- Developing a wider range of volunteering opportunities for men may be a way of creating a more male focus in a service.
- Although men-only groups are not attractive to all men, they have their place in a men of options. For some men they provide vital encouragement, support and friendship in a safe environment. Having the space and autonomy to initiate their own activities is crucially important for some older men.

## Conclusion

Overall, it is hard to draw clear conclusions about the activities that ‘work’, and those that don’t. In practice, the success of a particular activity may depend as much on how it is presented to men, how it is run, whether other men also attend, and crucially, on whether it is regarded by men as an appropriate ‘masculine’ activity – rather than the activity itself. However, among men who are isolated and /or vulnerable (e.g. through bereavement), there is a preference for social over skills-based or educational activities. Pub clubs were particularly well-liked and attended, and these enabled men to reconnect with important aspects of their former lifestyle, and avoided the necessity of attending a female-dominated centre.

Ghate et al’s\* research into fatherhood and family centre services identifies three types of centre, the ‘*gender-blind*’ (where men and women are treated the same), the ‘*gender-differentiated*’ (where men and women are treated differently); and the ‘*agnostic*’ (which has no identifiable approach to working with men).

(\*Ghate, D. et al (2000) ‘Fathers and Family Centres: family centres, fathers and working with men’. London: Policy Research Bureau.)

They concluded that, while the first two approaches were more effective, **having a strategy mattered more than what the strategy was**. For Age Concerns, and other providers of services for older people, the most important thing in addressing the specific needs of older men, is to develop a strategic approach to working with older men which is appropriate to their individual circumstances and the needs of their communities.

## Discussion

In discussion following the two presentations, members of the **Gentlemen's Club** which is a self-initiated group of older men who meet regularly at **AC Tameside's** Day Centre spoke about their experiences in trying to encourage other older men who they know to come and join the group. One member has been trying to persuade his neighbour to come along, but so far without success. Members of the group like the informality of being able to come to the Centre every day, at any time, without there being any fixed structure or timetable to the group's activities. Apart from meeting up at the AC Tameside Centre, the older men phone each other up, especially if someone who regularly attends the group doesn't turn up.

*Further information about the 'Gentlemen's Club', supported by AC Tameside, is given in 'Working with Older Men: A Review of Age Concern Services', Sandy Ruxton (Research & Development Unit, ACE, 2006).*



## Workshop Group Discussions

The workshop discussion groups addressed three main questions, in discussing how Age Concerns could further develop and improve their work with, and provision of activities and services for, isolated older men.

- Practical actions that can be taken by local Age Concerns;
- How can Age Concern England help?
- Opportunities for partnership working with other organisations?

### Practical Actions for local Age Concerns

#### Information & Publicity

- Raise the profile of Age Concerns' work with/for older men, and develop publicity around this area of Age Concerns' work locally;
- Develop and produce leaflets designed to appeal to older men directly;
- Develop marketing and campaigning messages which specifically highlight older men's issues/concerns;
- Increase publicity about services and activities currently offered which could appeal to older men – emphasise fun and social activities;
- Develop more effective communications methods & channels for publicising Age Concern's services to older men, e.g. posters, newsletters, notices in supermarkets, pubs and clubs; GPs' & dentists' surgeries/ waiting rooms;
- Raise awareness of GPs & dental receptionists about Age Concerns' services for older men;
- Publicize Age Concerns' mainstream services in educational supplements/ Adult Education course programmes & brochures;
- Inform funders and policy makers of specific needs/issues for older men.

## **Outreach and Facilitating older men's involvement**

- Create opportunities and spaces for older men to get together informally, e.g. AC Tameside – creating a space where older men can meet regularly, even daily, but not necessarily as part of the formal 'service provision';
- Encourage older men to link up with each other to share transport, e.g. sharing taxis/reducing costs;
- Reach out to isolated older men via benefits visits and/or other services;
- Short-term interventions (e.g. post-hospital befriending schemes) may be a 'way in' to reaching isolated older men; possibly easier to access funding for this kind of intervention, as it could save PCT funds;
- Engage with older men, where they are (e.g. local men's clubs etc) to find out what they want;
- Tackle issues of perceptions and image of local Age Concern services – i.e. female-dominated, not for older men etc;
- Use community development methods to reach out, develop networking, identify older men's needs/preferences etc. Age Concern can act as a facilitator to support older men's choices and activities;
- Develop creative outreach methods to find/work with older men, e.g. go to where older men socialise and meet;
- Work within older men's 'comfort zone', e.g. operating an 'open-door' policy to encourage men to come forward;
- Set up appropriate specific services for older men e.g. a lunch club in the pub?;
- Develop active volunteering as a way in to providing practical support and new skills for older men; provide specific training for men as active specialist volunteers;
- Finding appropriate activities which might attract older men, e.g. IT/computer skills training; off-road cycling clubs; male voice choirs etc.

## **Organisational Approaches: Services Monitoring & Strategy**

- Monitoring take-up of services and activities by gender; identifying gaps in take-up by older men;
- Establish a 'baseline' through undertaking a gender audit of services – i.e. to establish numbers/proportions of older men and older women accessing services;
- Be clear about what your local Age Concern wants to do in this area – i.e. have a strategic approach to working with older men.

### **How could Age Concern England help?**

#### **Research & Information**

- Dissemination of the Review of AC Services for Older Men, the Research Briefing and other materials on working with older men to all Age Concerns;
- ACE to disseminate research findings to PCTs, Local Authorities, Social Services and other statutory agencies;
- Develop the 'evidence base' for preventative working with older men, linked to role in maintaining health and well-being; a short 'Briefing' on this topic would be welcomed;
- Continue to work on raising awareness of the need for preventative services, e.g. providing briefings and training for local ACs;
- Provide information about pre-retirement courses for older men (ACE Information Department).

#### **Sharing and disseminating good practice**

- Set up a Discussion Group on ACKNOWLEDGE;
- Share examples of good practice in working with older men through the Ageing Well Network and the Intergenerational Network;
- Sharing successes – developing 'case studies' for dissemination;
- Fund innovative projects, e.g. those working with older men for the first time (ACE Grants Unit).



## **Campaigning**

- Link issues of service provision for socially isolated older men to ACE's campaigning work;
- Campaign nationally – all areas have/should have facilities for older men; services should be available for all, not just 'older' men; develop campaign around the 'gender equality' agenda – focus on socially isolated older men, and link with policy agenda, led by ACE;
- Ensure that opportunities are provided for local Age Concerns to get involved in national campaigns, e.g. with a local dimension/local action etc;
- Develop a national campaign around encouraging older men into volunteering – moving beyond 'traditional' services and including younger men as volunteers.

## **Marketing & Publicity**

- Develop appropriate marketing and promotion materials, e.g. a template poster, with positive images of older men, to which local information can be added.

## **Partnership working**

### **Issues & Challenges**

- Need to overcome some of the difficulties/challenges in securing funding for what are essentially preventative services;
- Need to challenge the generally low priority given to referrals for day care, e.g. by Social Services, PCTs and GPs.

### **Opportunities for partnership working**

- Opportunities to extend contacts with the University of the Third Age, community groups and clubs where older men are involved;
- Opportunities for extending contacts with Housing Associations and housing schemes – possible 'way in' to wider networks of older men;

- Link up with Pre-Retirement Association, to ensure that information about Age Concern services is included;
- Link up with the Pensions Service – could identify bereaved older men, e.g. when accounts closed for deceased spouses;
- Explore potential for partnership working with Leisure Centres, schools or community centres, to provide alternative venues for older men to meet/develop activities etc.



## Summary & Conclusions

The publication of the Review of Age Concern Services for Older Men – ‘Working with Older Men’, and the seminar hosted by AC Tameside were both well received by participants. (Please see Appendix 3 for a summary of evaluation feedback on the seminar; and Appendix 2 for a list of seminar participants).

There was a strong feeling among participants in the seminar that addressing the specific needs of older men has been a somewhat neglected area of Age Concerns’ practice, particularly in terms of outreach and services development. There is a need to develop our own awareness and understanding of older men’s specific needs, interests and preferences, and how these might differ from the majority of Age Concern’s service users, who tend to be older women. There is also a need to develop more clearly ‘gendered’ approaches to outreach particularly with older men who may be particularly socially isolated. Having a clear and explicit strategy for working with older men and older women differently is perhaps more important than what the strategy actually is.

The workshop discussions provide practical suggestions for local Age Concerns who are keen to develop their work for and with older men. There are also recommendations for Age Concern England, particularly focussing on how ACE could support local Age Concerns in developing this area of work, through the provision of appropriate materials and images, briefings and information on current research, and through developing national campaigning messages based on the specific issues and needs of older men.

We hope that this seminar report, together with the report ‘Working with Older Men – A Review of Age Concern Services’, will be useful to Age Concerns in further developing your work for and with older men.



# APPENDICES

## Appendix 1: Seminar Programme

### Working with Older Men – Improving Age Concerns’ services

Research into Practice Seminar – Programme

**Date:** 26 September 2006

**Venue:** AC Tameside, Ashton-under-Lyne (near Manchester)

**Chair:** Denise Bates, *Chief Executive, Age Concern Tameside*

### Morning session

10.30 am Coffee & Registration

11.00 Welcome - *Denise Bates (Chair)*

11.05 Introduction  
*Colin Mckinless, Executive Director Social Care & Health, Tameside MBC*

Age Concern Surrey - Investigation into the Social and Emotional Wellbeing of Lone Older Men  
*Dr Kate Davidson, Centre for Research on Ageing & Gender (CRAG) University of Surrey*

11.50 COFFEE BREAK

12.00 Working with Older Men: Barriers and Enabling Factors  
*Simon Northmore, Practice Development and Research Manager, Age Concern England*

Older men’s perspectives  
*Members of the ‘Gentlemen’s Club’, Tameside*

1.00pm L U N C H

## **Afternoon session**

- 1.45 pm      Workshop Group Discussions
- Working with and for socially isolated older men – developing  
Age Concerns' practice
- *Practical actions/next steps – local Age Concerns*
  - *How can Age Concern England help?*
  - *Partnership working with other organisations?*
- 2.30            Feedback from Discussion Groups
- 2.50            SUMMARY - Agreements & Next Steps
- 3.05            Evaluation
- 3.15            Close & Refreshments

## Appendix 2: Seminar Participants

<b>Name</b>	<b>Role</b>	<b>Organisation</b>
Sally Andrews	<i>Day Care Coordinator</i>	Age Concern Lancashire
Claire Ball	<i>National Development and Policy Officer: BME Elders</i>	Age Concern England
John Bardsley	<i>Administrative Support</i>	Age Concern Tameside
Denise Bates	<i>Chief Executive</i>	Age Concern Tameside
Mark Boyles	<i>Community Link Manager</i>	Age Concern Sheffield
Martin Bradley	<i>Day Care Manager</i>	Age Concern Lancashire
Kate Davidson	<i>Senior Lecturer, Centre for Research on Ageing &amp; Gender</i>	University of Surrey
Lynn Gamble	<i>Information &amp; Advice Assistant</i>	Age Concern Teesside
John Glover	<i>Member</i>	Gentlemen's Club, Age Concern Tameside
Louise Hamshere	<i>Administrative Assistant</i>	Age Concern England
Sharon Hardy	<i>Mental Health Services Coordinator</i>	Age Concern Tameside
Graham Harris	<i>Day Services Coordinator</i>	Age Concern Sheffield
Ken Harrop	<i>Member</i>	Gentlemen's Club, Age Concern Tameside
Lorraine Holt	<i>Hospital Aftercare Coordinator</i>	Age Concern Blackpool & District
Elaine Hosfield	<i>Development Worker</i>	Age Concern Lancashire
Tessa Jankowska	<i>Joint Commissioner</i>	Tameside & Glossop PCT
Paul Johnston	<i>Regional Coordinator</i>	Age Concern England in the North West
Peta Leigh	<i>Healthy Communities Initiative Manager</i>	Age Concern Northwest Cumbria
Colin McKinless	<i>Executive Director Health &amp; Social Care</i>	Tameside Metropolitan Borough Council
Simon Northmore	<i>Practice Dev &amp; Research Manager</i>	Age Concern England



<b>Name</b>	<b>Role</b>	<b>Organisation</b>
Christine O'Leary	<i>Training &amp; Development Coordinator</i>	Age Concern England
Katharine Orellana	<i>Development Officer, Social Care and Support</i>	Age Concern England
Beverly Pickles	<i>Activities Coordinator</i>	Age Concern Tameside
Marie Riley	<i>Equality and Diversity Officer</i>	Age Concern Preston & South Ribble
Carolyn Robertson	<i>Research &amp; Development Manager, ActivAge Unit</i>	Age Concern England
Vicky Shepherd	<i>Services Development Manager</i>	Age Concern Blackburn with Darwen
John Sheridan	<i>Resource &amp; Development Manager</i>	Age Concern Tameside
Elizabeth Simpson	<i>Day Care Coordinator</i>	Age Concern Northumberland
Robert Sleigh	<i>Service Manager for Older People</i>	Derbyshire County Council
George Smart	<i>Member</i>	Gentlemen's Club, Age Concern Tameside
Harold Smith	<i>Chair</i>	Age Concern Tameside
Mary Thomas	<i>Development Worker - ActivAge Unit</i>	Age Concern England
Gill Walker	<i>Deputy Chief Officer</i>	Age Concern Surrey
Ian Williamson	<i>Services Manager</i>	Age Concern Tameside

## Appendix 3: Evaluation summary

A total of 17 evaluation forms were returned by participants. Overall participants rated the arrangements for the workshop highly, most items scoring either 'excellent' or 'good'. The following is a summary of the evaluation feedback:

A total of 11 participants rated the venue for the seminar as 'excellent', with 6 scoring it as 'good'. The food provided on the day was rated as 'excellent' by 14 participants and 'good' by 3 people. It should be noted that, in relation to the catering, the staff at AC Tameside managed to rescue a potentially very awkward situation when the caterer who had been booked to provide lunch pulled out at the last minute. Taking this into account, the fact that lunch, which most participants rated as 'excellent' was provided at very short notice, was all credit to the staff at AC Tameside! Feedback from the participants included the following comments:

*'Compliments on overcoming unexpected catering problems'*

*'Splendid effort with the food'*

The presentations delivered at the workshop, by Dr Kate Davidson and Simon Northmore, were rated as excellent by 10 respondents and good by 7 people. The workshops were rated 'excellent' by 3 people, with 13 participants rating them as 'good'.

The information provided before the workshop was rated as excellent by 3 participants, good by 10 people and 'OK' by 2 people. A particular request was that participants would have welcomed the inclusion of car parks on the map and directions provided. The overall organisation of the seminar was rated as excellent by 9 respondents and 'good' by 8 people.

The following comments were also made by participants in the evaluation feedback:

*'I look forward to the report and follow-up/more action by Age Concern on older men's issues'*

*'Compliments on taking an event out to the regions'*

/....

*'All very good/excellent. A very good day providing much food for further thought and action'*

*'Very interesting, thought-provoking and well-run day. The involvement of the Gentlemen's Club members was an excellent idea, putting the 'Involving Older People' agenda into real action'*

*'A good seminar – well worth coming. Many thanks.'*