

Whoop Feasibility Study

Executive Summary

The purpose of this study was to enable the WHOOP Research Group based in the Clinical Research Centre for Health Professions at the University of Brighton to take the first steps to determine whether there is a perceived need amongst older people for the establishment of a wellbeing, health & occupation centre.

The study allowed research staff from the WHOOP research group to engage with people from the Eastbourne and Hastings locality to determine how the university can best unite with older people's communities to add to their experiences in a positive way, and also determine how the universities community could benefit from older peoples experiences and expertise.

The project has identified a number of issues to consider regarding the development of the proposed centre. Through using such research tools as the theme board technique and a focus group interview, researchers have been able to interface with participants from within the local community. It has allowed opportunities to discuss in depth with older people their views and aspirations for the proposed development. The research methods allowed participants to develop their perceptions through the use of imagery and a small group focus group interview. These methods allowed older people to express clearly and to input their thoughts on how the university could work with older people to add to their experiences within the community in a positive way, which enables them to live an active, healthy lifestyle which enables them to achieve greater wellbeing in later life.

Firstly the study highlighted how participants saw the potential in the way the university could interact with the elderly community. Participants saw an opportunity to use the strengths of the universities staff and student experiences and expertise to feed into their own experiences. Developing a number of programmes, facilities and activities which could use the uniqueness of the universities vast knowledge and skills could be channelled to benefit older people to improve their life satisfaction in later years.

Participants identified that older people would welcome more opportunities to interface with the university and its staff. Focus groups reported that this engagement would allow people to seek advice on a number of issues such as, fitness and exercise, ways to improve health and wellbeing, advice on diet and nutrition.

The location of any potential centre was considered to be an important aspect to any future development. Many reported a physical centre which was located in a central location would be important to the older people

community. Many noted that poor transport links would prevent people from using the wellbeing centre. Therefore any development would have to be located near sufficient links with public transports.

The Wellbeing centre would have to ensure that a balance of activities to meet a range of interests and abilities would have to be on offer to older people in order to meet the needs and aspiration of a diverse group of individuals. To achieve such goals, many reported it was important to ensure that older people have every opportunity of interfacing with the university facilities, thus locating the centre within the grounds of the University of Brighton would be an advantage and older people would be able to benefit from this location.

Intellectual challenges and opportunities to take up courses in a variety of subjects would be a welcomed facility, which could potentially meet a range of interests. Many recognised a need to build up intergenerational relationships and projects. Participants felt that older people had a wealth of knowledge and skills that could be valuable working with younger people. Many reported that working with younger people in an educational and non-educational setting would allow both age groups to challenge stereotypes.

The image of the centre would need to be approached in a different way from most day facilities available within the community. The image would need to reflect an active age approach, promoting an age positive image, which moved away from the stereotypical images of older people that exist within society.

Acknowledgments

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Wellbeing, Health and Occupation Centre for Older People Research Project

To determine whether there is a need for the development of a Wellbeing, Health & Occupation Centre for Older People

Introduction

As a society it has become apparent that largely due to advancements in medical and technology development people's life expectancy has changed and as a nation we are living longer. The notable changing demographics have led to a shift in the perception of what it means to be old. Traditionally the term old used to mean, frail vulnerable, and dependent. However, there are notable changes in this term, largely due to older people themselves. The image is slowly changing to include independent, active, individual choice and healthy ageing (Joseph Rowntree Foundation: 2004)

Central and local governments also recognise and identify with the changing demographics. The development of the National Service Framework for Older People has led to the reinforcement of a person centred care approach to promote health and wellbeing in older age. As a result there is a growing awareness within the health and social care professions of the need to ensure that all older people have the opportunity of experiencing greater life satisfaction and well being in their later years.

The Clinical Research Centre for Health Professions Wellbeing, Health and Occupation for Older People (WHOOP) Research Group recognises the changing demands in the population and that improving quality of life of people is at the heart of all service provisions. However, it has been recognised that some groups within communities, which are isolated and are banded as a hard to reach category, are in this situation largely because of the isolating area in which they may reside. The WHOOP research group believe that improving quality of life and wellbeing is something that can be done in conjunction with older people themselves. Improving life satisfaction can be something as small, but nonetheless is important, as offering artistic, social, educational opportunities, providing support and advice to older people.

In 2005 the WHOOP research group received £5,000 funding from the Community University Partnership Programme (CUPP) to establish how the University of Brighton community of staff and students might best interface with older people to add to and learn from their experiences in a positive way, thus the WHOOP group carried out a short project '*To determine whether there was a perceived need for the development of a Wellbeing, Health and Occupation Centre for Older People*'.

Background Information

A definite trend has been observed when examining the demographic changes that have taken place in the UK's population over the last 50 years of monitoring population demographics. The UK's population is ageing at an accelerated rate. Since 1951 there have been dramatic increases in people aged 60 and over. The 2001 census noted that the proportion of the population aged 60 and over has increased to 21 per cent from 16 per cent compared to census day in 1951. This is complimented to a declining proportion of the population aged under 16. This evident change in the age balance of the population means that for the first time there are more people aged 60 and over than there are children. This change is the result of declines both in fertility rates and in the mortality rate (Health Development Agency 2005, Census 2001). The continual ageing of the UK's population reflects that there is now a longer life expectancy for people aged over 60, which could reflect improvements in the standard of living and health care.

The distribution of the population demonstrates that there are a higher proportion of people over the age of 60 living in rural and coastal areas where isolation and exclusion from services and society are key issues. East and West Sussex have the highest population of those of state pension age and East Sussex has over twice the population of over 75 years olds than the general population in England (Census 2001)

For most people, retirement from full-time employment is a major life changing event and requires a paradigm shift. The central issue in retirement is replacing the time spent in work with other activities. Several studies have reported a positive relationship between the number of performed activities and life satisfaction in retirement (Oakley & Pratt, 1997). The trend towards earlier retirement and increase in life expectancy means that individuals could spend up to a third of their lifetime in retirement.

Living to a ripe old age is something that all individuals wish to aspire to given that we live in good health in that time. However within society the idea of growing old is met with negative ideas about what it is to be old. Often these ideas are misconceptions and stereotypes which are generalised to apply to the greater population of older people. When individuals retire they are soon labelled with the notion and ideas that they are on the decline, vulnerable, dependent on families and the State to take care of them (Phillipson and Smith 2005).

This notion of growing old under a negative cloud is slowly changing with regards how older people see themselves and how the rest of society views this group. Older people and society are beginning to challenge these preconceived ideas of ageing and there have been recent shifts in what it means "to grow old". An increase in the ageing population is not only localised to the UK it is a growing concern globally and there is a growing

momentum among older people as they begin to over turn the traditional stereotypes of ageing.

The Joseph Rowntree Foundation recent research shows that many older people start to enjoy a more balanced lifestyle after retirement Many People continue or start to enjoy healthy, active, and meaningful lives as they grow older (Department of Health 2005). It is also recognised that if there are those who do require health and social care needs, the services which are available should be managed to promote and encourage quality of life, independence and individual choice. The report suggested that statutory and non-statutory organisations should be developing ways in which this approach can be upheld by listening to older people and their concerns about their health and wellbeing (Joseph Rowntree Foundation: 2004).

The idea of listening to older people has become a strong reality within the communities all over the UK. There has been a growing interest in involving older people in strategies and policy making at local government levels. Older People's Forums have been established independent of local councils to raise the political profile of older people, to act as an advocate and to provide a voice for older people. Forum's such as these take on the challenge of important issues faced by older people and the general community to improve the social, health and wellbeing for older people to ensure that all have a right to quality of life.

The promotion of quality of life in older age is attracting increasing policy interest. While for some people old age will be a time of increasing dependency and loss of control, for many it will be a time in there life for person fulfilment. Old age contain many opportunities for positive change and productive functioning (Joseph Rowntree Foundation: 1999, Bowling *et al*: 2003)

Facilities within the community which are commonly referred to as day clubs or day centres endeavour to provide facilities for those who wish to continue living in their own homes but may need support during the day time. They centre on improving and maintaining the quality of life, to promote independence, facilitate friendships, and provide social contact. Services such as these prove to provide a vital facility within the community by delivering a number of activities which are designed to keep older people active and socially included within their communities. They endeavour to provide a place to support and encourage social interaction. Facilities such as WRVS and Age Concern have a wide appeal as they provide safe and secure environments where older people can go to meet and socialise with friends and take part in activities. Day facilities for older people often provide facilities for older people aged over 65, but many may older people may come to use facilities provided by such places as Age Concern and WRVS on a referral basis, following assessment by a social.

The emphasis upon quality of life has lead to a significant change in the way that older people are viewed within the health and social care settings. In recent years there has been the development of the National Service

Framework for Older People which sets out a guideline for improving the quality of health for older people in their later years (National Service Framework: 2001). The recent shift in the way older people's voices are being heard within the community, may suggest that as we are increasingly living in a society where we are living longer, expectations of older people are changing. The traditional stereotypes of older people are being challenged by older people themselves to present an age positive approach, the demand on our health and social care systems requires health professions and social care provision to adapt approaches and attitudes towards older people to include improving the way we live and to encourage and promote strategies so that older people can enjoy a longer sense of wellbeing (National Service Framework: 2001).

Context of the study

The high proportion of older people settled within the local area of Eastbourne offers an ideal opportunity for University of Brighton staff, particularly those professions who are well represented in the university, for example, members of the Allied Health Professions, Sports Scientist, Pharmacists, Medical Practitioners, Social Workers and Nurses. All these professions deal with older people on a regular basis in clinical and rehabilitation environments, but all would embrace the opportunity to engage with older people from the local vicinity. Professionals such as these would welcome the opportunity to work together with older people in a proactive way to promote and improve wellbeing, and good health among older people. The establishment of a wellbeing, health and occupation centre could possibly host opportunities for the university communities to work with members of the older peoples communities to promote health issues which are of concern to older people generally. The establishment of such a centre might also provide an opportunity for older people who are not necessarily accessing health and social care services to engage with university staff experiences and expertise. The student and staff population within the university could also benefit from the experience and expertise of the local older people population.

The evident change in the demographics of the UK's population means there has been an increasing awareness among health and social care professionals, which highlights the need to ensure that older people have the opportunity of experiencing greater life satisfaction and well being in the later years of life. The University of Brighton and members of its academic community may be able to contribute substantially to the health and well-being of older people in the community, due to the range of professional expertise that is available.

Over the last two years a group of academics and researchers from across the university have come together in a research group termed the "Well-being, Health & Occupation for Older People Group, (WHOOP)." A number of projects have emanated from these group discussions, but the group has identified an imperative which is the possible development, as a pilot study, of a Well-being, Health & Occupation Centre for Older People. WHOOP includes

representatives from local charitable trusts, and the voluntary sector for example “Age Concern”, “Help the Aged” and “WRVS” who are also keen to see the development of the proposed centre.

Aims

The first aim of this study was to enable the Wellbeing, Health and Occupation for Older People Research Group (WHOOP) based in the Clinical Research Centre for Health Professions at the University of Brighton, to take the first steps to determine whether there is a perceived need for the establishment of a wellbeing, health & occupation centre. The study could allow research staff from the WHOOP research group to engage with people from the Eastbourne and Hastings locality to determine how the university can best unite with older people’s communities to add to their experiences in a positive way. The study was planning to identify what form the centre should take if there are such a perceived need, the second aim were to identify what the centre might offer and what expertises and recourses from within and outside the university would be required to run the centre.

Objectives of the study were:

- To identify older people willing to contribute to the proposed study.
- To gather data regarding the perceived need/benefit for a WHOOP Centre using eight Focus Groups.
- To use the data generated to determine a) the nature of a WHOOP Centre, b) the type of activities the centre could offer, c) the expertise required to input into the centre, d) determine the best venue and location for a centre.
- To feedback to all participants and a wider older people’s audience the outcomes of the feasibility study.
- To provide a basis for the development of further research questions concerning older people.

Methodology

The methods employed in this project was based on generating qualitative data related to the notion of the development of a well-being, health and occupation centre for older people within the Eastbourne area. The most pragmatic and effective way of achieving the aims and objective set out above was to utilise and facilitate a number of focus group interviews, which has additionally employed the use of the theme board technique (Wilkinson, 2004; Bligh, 1992).

The theme board technique originated from within advertising, marketing and management was a method used to develop concepts and ideas for staff and clients. Subsequently the method has been used in postgraduate medical education in small group discussions and inter-professional learning as a

means of exploring individual and shared perceptions, examining preconceptions and fostering new insights in relation to particular issues. This technique which mainly uses graphic images from a range of non-professional magazines can be carried out by individuals and within a group setting (Bligh, 1992, Parsell et al; 1998).

Focus group interview were employed to enable researchers and participants to come together to discuss and explore participants theme boards and their perspectives of the proposed centre. The use of focus group interviews is exceptionally established within social sciences. Originally the method was used as a market research tool. Focus groups have commonly been used since the 1980's within 'social action research', particularly within health related research (Wilkinson: 2004). Focus groups are largely based on a small group of individuals having an informal discussion based on a series of questions. The researcher acts as the facilitator, posing questions to the group of participants.

The purpose of focus groups allows researches the opportunity to draw upon participants responses, feeling and beliefs any particular topic or issue, which is not necessary feasible in a one-to-one interview, observation or questionnaire surveys. Focus group interview elicit a multiplicity of diverse views and opinions at any given time. Therefore, this method allows researchers to obtain larger amounts of information in a shorter period of time (Wilkinson: 2004). Typically focus groups are recorded and the data transcribed then analysed using conventionally qualitative techniques. Recording focus groups allows researchers to ensure accuracy of participant's comments (Polgar and Thomas: 1995)

Focus groups are an effective tool to use within research and in particularly this study as it can be used at the preliminary or exploratory stages of a study. There are disadvantages to using focus groups, as the findings cannot be generalised to the whole population, mainly because of the small number of participants it is the likelihood that they will not be a representative sample, finding can only be applied to those who participated (Kreuger: 1988)

These two methods allowed the researchers to draw upon a broad wealth of experiences, views, attitudes and opinions (Morgan and Kreuger, 1993). This has allowed the researchers to identify key issues towards the possible development of the need for a WHOOP Centre, and the ways in which the university could add to the positive experiences of older people within the community.

The theme board techniques and the focus group interviews allow participants the flexibility to express there opinions in a safe environment as both tasks allow participants responses to be facilitated between group members other than just the researchers, which may enhance the quality of the data and allows for a more open exchange of ideas (Sim and Snell 1996).

Recruiting volunteers for the study

Participants were recruited through a number of avenues. Firstly, links with local voluntary organisations were explored. Organisations such as WRVS, Age Concern and the St Leonards & Hastings Senior Forum offered their support to recruit participants particularly from the 'hard to reach category' within the Eastbourne and Hastings area. Posters advertising the WHOOP project were displayed and circulated among the organisation members. We also recruited through other avenues such as, recruitment adverts which were placed in the local papers, and posters and leaflets were displayed throughout the local community (See Appendix One). Lastly, a number of older people who have previously participated in a university project has expressed their willingness to be updated on new developments in older people's research at the university. Information about the project was circulated to these individuals via a routine newsletter, which in response attracted a number of participants.

Recruitment was mainly localised to the Eastbourne area and surrounds. The study included participants of 50 years of a "hard to reach" category for example those in residential care homes and those who are less mobile. Due to the strong links with John Appleyard at the St Leonards & Hasting Senior Forum one focus group interview took place in Hastings. It is felt that this locality may enable the researchers to access older people who fall into the "hard to reach" category. The focus groups excluded older people currently receiving medical treatment in hospital or nursing home settings, and those with dementia/Alzheimer's disease.

The methods chosen to recruit volunteers was in order to attract a number of participants which were diverse in culture and backgrounds, which would attract individuals with different interests; experiences; opinions; perspectives and idea of ageing.

Ethical consideration

The Clinical Research Centre for Health Professions; WHOOP research group presented a research proposal, submitted for ethical approval to the University of Brighton Ethics Committee, which was granted in April 2005

Confidentiality was observed throughout this study and every precaution was made to ensure that participant's identity was protected throughout the study. Data containing participant's information was stored in a secure environment, which only the researchers involved in the study could obtain access. Confidentiality within the focus groups were strictly observed, and transcripts and tapes were encoded to ensure anonymity.

How the study was conducted

Participants who were being recruited through voluntary organisations were encouraged to get in contact with the research officer to discuss the project and to raise any questions they may have. Participants were also given an

information sheet which gave further information about the project. (See Appendix Two). If participants were still willing to pursue their interest in the project they were invited to attend a focus group session, which were held in a convenient locality within the community. There were five focus groups held over four different venues:

- Age Concern Eastbourne – 2 Focus Groups
- WRVS Eastbourne – 1 Focus Group
- Hastings Community Learning Centre – 1 Focus Group
- University of Brighton – 1 Focus Group

A total of twenty seven individuals participated in the study between June to October 2005.

Focus groups were always facilitated by two researchers. Professional backgrounds of the facilitators varied and as an outcome, each researcher brought a different perspective to the study. While researcher bias and subjectivity are commonly understood as inevitable and important by most qualitative researchers. Most qualitative researcher will consider personal and professional discovery essential to learning about qualitative research (Cochran-Smith & Lytle: 1999). It allows researchers to become increasingly aware of their biases, blind spots and cognitive limitations. Researchers involved in this study recognised from an early stage that there own biases could influence participants responses. The research team comprised of two researchers with a Physiotherapist background, such a professional background could have meant that researchers could have steered sessions towards dominating discussions which were centred more on health professional related issues, and how the centre could improve health inequalities for older people. Every focus group had the WHOOP research group research officer present at all data collecting sessions. The research officer has a background in social science, which may bring a different perspective to the discussion. This particular researcher may focus on or have a particular interest in the sociological issues that participants may discuss such as, stereotypes, and social inequalities. All focus groups was facilitated by two researchers.

In order to minimise researchers influences over the questions asked and the participants. A steering group was established from the early stages to ensure that any research material produced was objective and enabled all older people to participate at a level which they were comfortable with. Additionally the methods used were discussed in the steering group meeting to ensure that the research tools used did not inhibit participants and minimised researcher's influences. Using the theme board technique and focus groups allowed participants to be in control of their views and opinions and to express them. The two particular methods aided this process. The theme board technique enabled participants the freedom to explore their ideas free from researcher inputs. The focus groups were an opportunity for the group to come together with the researchers to discuss these ideas. The theme boards were used as a tool to guide researchers through participant thoughts surrounding the proposed centre. It effectively allowed participants to interact

with each other to explore their interpretation of a wellbeing, health and occupation centre for older people (Bligh: 1992).

At the beginning of every focus group participants had the opportunity to informally socialise with other participants and staff over refreshments before each sessions started. This provided an opportunity for participants and staff to acquaint themselves with each other. Time was allowed for refreshments and introductions. After a short presentation was given to participants, telling them a little about the university, the WHOOP research group and the research project (See Appendix Three). A copy of the presentation was given to all participants along with a programme laying out the focus group sessions (See Appendix Four). After the presentation was completed participants were given the opportunity to ask the facilitators questions. Before the theme board task was carried out, all participants were asked to read and fill out a consent form (See Appendix Five).

Once formalities of obtaining consent and allowing opportunities for questions was completed, the research officer proceeded to give the participants questions to consider when constructing there theme boards.

1. What do you think older people would gain from involvement with the University of Brighton?
2. What could the University and its staff gain from the involvement of older people in this study?
3. What do you think the university could offer the local older people's community?
4. What images come to mind when you think about an older people's Well-being Health and Occupation for Older People's centre?

The research officer explained the origins of the research method and what the purpose was to using the tool, and what participants would have to do to construct one. Once the activity had been explained, participants were given 25 minutes to construct and complete their theme board.

The materials used to construct participants theme boards were:

- 8 x A1 sheets of plain card/paper
- Magazines (of a non professional nature)
- Glue
- Scissors
- Blue Tac
- Marker Pens

On completion of the short task facilitators took the theme boards and displayed them so that all participants could see the images. Examples of participant's theme boards are displayed below.

Theme Board One



Theme Board Two



After focus group session had explored theme boards and before close of the focus group interview participants were given the opportunity to comment further on any issues that were raised during the focus groups interviews.

Development of categories

Once each focus group interviews had been completed, digital recording of the interviews was transcribed by a member of staff who was independent of the study. Once all interview recording had been transcribed, transcripts were reviewed by members of the research team. Transcripts were examined line by line for reoccurring themes. The data is analysed by employing a constant analysis method, the method gives way to allow the researchers to constantly compare each piece of data with data collected earlier in the data collection period (Glaser and Strauss, 1967). This method of data analysis has originated through a ground theory approach, such an approach allows researchers to ensure reliability of the data collected (Burnard: 1991). Researchers were able to individually develop themes and categories from the transcripts. Once this had been completed by a meeting was held to discuss and to finalise the themes.

Findings

The results presented below are the outcomes of participant's theme boards and focus group discussions. The two methods employed in this study have assisted in developing participant's views and to identify key issues that have stemmed through discussion of the proposed development of a wellbeing, health and occupation centre for older people. Participant's responses have been arranged into seven different themes.

Perceived image of the Wellbeing Centre

The perceived image by most participants was that the centre should be located in a physical location, a building. Many participants' responses identified with the idea that the centre should be a place that people could go and visit and interact with other people.

Many believed if the centre were to offer a virtual service; many older people would not benefit from the services the university could offer. Some participants suggested that offering a virtual centre would mean many older people would continue to feel isolated and not be able to access it. Offering only this type of service could potentially fail to meet the needs of those who may be finding it difficult to access services.

FG 1 *“actual physical thing rather than the virtual thing So that people can meet, rather than a virtual centre.”*

When participants were asked what the centre should look like, many responded that the centre should offer space that is versatile. Somewhere which would allow people to meet, but would benefit from engagement with other users and staff. Many felt that the centre needed to be bright, friendly and fun in order to encourage a welcoming atmosphere.

FG 1 *"I think maybe a social room with sort of chairs and tables."*

FG 1 *"Its got be large, yes it's got to be large and sunny."*

FG 2 *"Yes it's got to be cheerful you know, not like some old people's places, it's got to be young, young not old."*

FG 3 *"You'd have a big room where you did the dancing and the exercises and the rest of it wouldn't you?"*

All focus groups recognised the term wellbeing would have to meet a multitude of diversities and interests. Participants stated due to the diversity of older people the centre would need to find a balance to meet different people's interpretations of what is meant by 'wellbeing'

FG 2 *"Everybody has a different level of wellbeing."*

FG 2 *"We're all different ages as well"*

The centre would need to create a balance between those people that would be using it and the facilities that it would provide in order to try and cater for people's different perception of wellbeing. Many participants noted the loneliness and isolation of older people within the community. Participants believed that the centre could ease the isolation and loneliness of older people by making the centre more accessible.

FG 3 *"I think the biggest thing with older people is the loneliness."*

It was viewed that the best way to do this was to ensure that the centre was flexible in the days and times that it would be open.

FG 3 *"It should be open 365 days a year. More so on high days and holidays because that is the loneliest time for an awful lot of people."*

FG 2 *“Saturdays and Sundays I’ve always thought it was sad because most people can find something to occupy them Monday to Friday, but Saturday and Sunday.”*

Location & Access to proposed centre

Transport issues were often a problem experienced by many older people in the local vicinity, and with a large proportion of elderly people living without access to a vehicle there is a heavy reliance upon local transport links to the town centre. These links are the only form of transport for many people, which provide vital access to local facilities and amenities such as, day centre services run by Age Concern and WRVS, or to shops and health & social care services.

Participants were asked what might attract them to a wellbeing centre. Many reported some fundamental issues regarding the location of the centre. On many occasions participants vocalised their concerns regarding access to the centre if it were located in the Meads. Stating one of the major concerns for older people was the lack of transport; this argument was also supported by many participants agreeing it would be difficult to use services, because there was an added issue of older people not having access to their own vehicle.

FG2 *“There’s a lot of people that haven’t got transport. They can’t drive. They’re unable to drive, maybe they’re epileptic or something and they just cannot drive. How do they get there?”*

It was clear from participant’s responses about the above concern that for many when they considered the location of the centre it would be important to consider the location carefully, and it was imperative to take opportunities available to ensure that there were sufficient transport links to the centre. This was echoed throughout all of the focus groups by all participants.

FG1 *“Well I think most important in there is transport. We must have means of transport to get to the centre, wherever it would be.”*

It was suggested that the lack of transport to the centre could possibly result in many people choosing not use the provisions that the proposed centre could offer older people. Therefore, it was argued by many participants that the location of the centre needed to be in a central location and near adequate transport services in order to maximise and encourage participation. Some participants stated their concern with the cost of transport. Some reported that if transport was cheaper they might use facilities more often, but because they find transport service expensive at the moment they are unable

to attend day facilities, such as those already provided by WRVS and Age Concern, once or twice a week. In many situations they would like to use these facilities more often than they do now.

FG 4 *“I mean I know there’s people...I’ve heard them talking downstairs [in the WRVS centre]. They’ve said they’d come for four days a week if they could afford the transport. I’ve heard them say that.”*

However, some participants felt that those people who fell into the ‘hard to reach category’, those living in isolated rural areas, or are not as financially wealthy, would still experience difficulties accessing the recourses the centre would have to offer.

FG2 *“if your going to set up something like this, it’s probably going have to have a base, maybe at the university and that you would do a visiting service because if you don’t do that you will not get to the people that may be in real need.”*

Some participants reported the best way to engage with the hard to reach group would be to provide an alternative service, which would take the benefits of a physical centre out into the community to older people, which might normally find it difficult to access services on their own. One male participant commented that it would be beneficial to develop a mobile service.

FG 4 *“I don’t think it has to be in a building, no, not necessarily because I think it could go out to the public...more of a mobile.”*

FG 3 *“...I personally feel that a wellbeing mobile, sort of clinic, would be absolutely superb, especially for place like Eastbourne, Bexhill...because most of the big cities, they’ve got those things in the big cities, but the towns, they lack those sort of facilities.”*

FG 2 *“Could it be both? Could there be one where people could come to you, and somewhere like this [Age Concern] where the pensioners come twice a week where you could perhaps come twice a week and hold a clinic you know for people to come to?”*

Participants also discussed that there would be benefits to having the centre located at the University of Brighton Eastbourne Campus; although the campus is not located within the centre of town, participants felt that due to

the kind of facilities that the university had to offer. It would be beneficial if the location of the centre was to remain within the grounds of the university, to access facilities easily.

FG 3 *“You have tremendous facilities now with your swimming pool and the sports hall and the gym and you already have a running activity or a club as does the Sovereign Hall, so that is a base for some activities.”*

FG 4 *“You have facilities there that you could offer older people, various interests and so on.”*

Although, many reported that the area would prove difficult to get to because it was not in the centre of town, they could see that having the centre located in the university grounds would open up a lot more facilities to older people.

FG 4 *“Going back to your place at the meads, it’s not very accessible by public transport.”*

Participants stated, locating the centre within the grounds of the university, would give older people the opportunity to access facilities, such as the universities sports centre. It would also enable elderly people to access the wealth of knowledge and expertise that university staff could provide as well as engaging with some of the universities learning opportunity. Participants also noted locating the centre within the grounds of the university it would also be a way to meet new people.

FG 3 *“...also if you went there you’d meet a bigger selection of people I think, rather than the same old people.”*

However, although there was a general conformity to the centre being located within the university grounds, some felt that this would not be appropriate place for the centre. One male commented on the location of the centre being in the Meads stating.

FG 2 *“It’s not going to be our centre. Its being put in a place by the university.”*

It was believed by some participants the location of the centre could potentially limit the learning experiences of students. It would limit their interaction and what students could learn interacting with older people out in the community.

FG 2 *“I’m very cynical about it, for its own purposes. It wants somewhere where its students*

can gain more experience and knowledge of the community and therefore that is what it will get.”

Activities and facilities

Participants recognised that for a wellbeing, health and occupation centre to be successful, it would have to offer a multiplicity of activities and facilities to meet a diverse group of people, with ranging interests and abilities.

It was felt by all participants that the deliverance and the presentation of the centre would have to be different to local facilities already offered to older people. Many reported and confirmed that it would be of little benefit for the university to replicate services that was already provided within the community.

FG 2 *“...no point to create another centre which offers the same things. It has to be something different and in the context of obviously the university and what is happening in the university.”*

Participants stressed the importance of ensuring that the university was able to provide services that would engage with local people to stimulate intellectual and creative minds. It was viewed the best way to achieve this was to open up facilities for older people to use. Making the university more accessible to an older generation, which would create opportunities for older people to participate and integrate themselves into a different environment, could provide an intellectual and social challenge. Many agreed there should be more opportunities for older people to engage in an environment which would give them access to interesting and stimulating activities.

FG 3 *“...to learn would keep their brain active, Something like that would keep them stimulated, keep the brain stimulated to learn things.”*

All focus groups highlighted the potential for older people to access the vast educational facilities on offer at the university. When participants were asked what they felt they would gain from involvement with the University of Brighton, many saw the centre being able to offer studying and training opportunities. The consensus of the focus groups stated that the opportunity to be apart of a learning environment would appeal too much of the older people within the community.

Participants discussed further that they would like opportunities to take up further educational courses. Although, some reported that to meet the varied interests and abilities that each user would bring older people would like the same opportunities to study degree courses in any subject like the younger students. Although many thought this would benefit the centre to offer this

service it would be valuable to offer other types of learning opportunities for those who may not be interested in studying at that level. To engage with a variety of interests the centre should offer short courses, workshops, seminars and lectures on a variety of subjects and interests.

FG 1 *“I did an Open University degree quite late in life and a teaching qualification, but it’s just something of intellectual interest really, which would be, which to me would be in the framework of further education or university teaching, but not necessarily at a high, like a degree level.”*

FG 1 *“Yes, a shorter course really.”*

Participants highlighted that the universities most valuable strength were its educational facilities and that the centre should concentrate on working to these strengths and bringing them into the community.

FG 3 *“...they are students, they are learning, they are doing practical’s, they are supervised. That is the way the university runs.”*

Participants from all the focus groups believed that all older people could benefit from a more active lifestyle and the importance of remaining healthy in later life. The focus group interviews established if older people engaged with the facilities offered by the university it could potentially contribute to older people maintaining an independent lifestyle well into later life. This could be supported and upheld by the centre offering a series of lifestyle programmes, activities, lectures and consultations that would encourage and keep people mobile, physically and mentally healthy for longer.

FG 3 *“I am sure that would solve the problem for the university if they had an in house practical activity going on, actually benefiting the community.”*

Although participants saw the importance of the educational facilities Most reported that there could be benefits in engaging with university staff and students to actively seek out advice on keeping fit and healthy. One male participant commented on the university providing a fitness programme, which would help with the prevention of falls which is a common fatality among older people.

FG 2 *“Elderly people fall. They are walking through the emergency unit at the Eastbourne District General Hospital almost all the time and they’re clogging that place up. Now, if the university actually sees people, assessing their balance, advising them as to what they could do to*

improve their balance, then you might see a reduction in the number of people falling. I don't know anywhere else in Eastbourne where this problem is being addressed."

Most participants agreed with this initiative, stating that the universities expertise in physiotherapy and occupational health could contribute towards maintaining better levels of fitness among older people. Further discussion on this subject brought up participants issues regarding who should be providing service. Many believed that information and advice should be provided by the appropriate health authorities.

FG 2 *"the development of these sorts of facilities and so on should be, apart from education, should be coming from other sources, other agencies."*

However, after initial concerns participants could see the centre being an extension to existing services. Many believed that if the university have the expertise and experiences to improve quality of life it should use all the facilities, knowledge and skills to contribute to promoting preventative methods to avoid accidents and falls among the elderly.

FG 3 *"...if they just prevent accidents, people falling, that would be a tremendous plus for Eastbourne A&E."*

Advice and Information Services

Focus groups noted a trend in the kind of lifestyle advice older people would welcome. There was unanimity that many would want to receive advice on ways to sustain a nutritious and healthy diet. Participants highlighted the problem of when people get older, and especially if they are living on their own that their diet can suffer. Some can lose interest in cooking for themselves, and having advice or classes on cooking for one could possibly renew interests in maintaining a healthier diet.

FG 1 *"so there could actually be some cooking sessions for people"*

Participants reported a range of activities that they would like to see which would interest a diverse group.

FG 3 *"Dancing as an activity, arts and crafts, creative projects like writing and that sort of thing, dietary advice and support groups for pain."*

FG4 *“Water aerobics and all sorts of things...walking machines to get their blood pressure down and that sort of things.”*

Many reported that the centre should also be a place to go to and seek out advice, not only on physical and mental wellness, but to offer opportunities to gain advice on other issues and subjects. Some noted that there needed to be a place where people could go to find out about other services within the local area, to ask for advice about accessing services.

FG 4 *“I think people need to know about them. I don't think too much of it is widely publicised.”*

Some focus groups picked up on some different themes, reporting that they would like to see advice on issues surrounding moving home and legal advice.

FG 4 *“...a lot of elderly people don't like the idea of moving and it must be very difficult for them to part with some of their things and if they're on their own, it would be nice for someone to help them. You know or be with them to talk about it or to go through things with them.”*

Participants saw the centre as a way of disseminating advice and information to the wider community.

FG 4 *“The group could distribute information.”*

Although, the consensus of the focus groups were to maintain their wellbeing for longer; it was also a concern of the cost of maintaining the wellbeing of their health and lifestyle. All focus group participants highlighted the issues of pensions, and how there is a bearing on the way they live. Some participants stated that some or most leisure and sporting facilities provided by councils or privately run leisure centres; were often unaffordable, therefore, many older people could not afford the expense of joining in with exercise programmes.

FG 4 *“I must admit, a pension isn't an awful lot and if you haven't got anything behind you it's very difficult. It is hard going, and that affects their quality of life.”*

FG 4 *“Of Course it does, the heating, they wouldn't turn their heating on and their food, they'd cut down on it, cut down on everything, lighting, clothing, all of it really. Unfortunately there are still quite a lot of people about like that.”*

Older people would welcome the opportunity to attend a variety of facilities and classes, such as yoga, exercise and dance classes, or educational courses. It would be the cost of these activities, which would discourage them from taking part in these opportunities because they could not all afford the luxury of attending them.

FG 1 *“...I haven’t exercised for over twenty years and I can’t afford to join one of the health centres...”*

Many of the older people who took part in the study believed that any activities provided by the university would have to be costed appropriately for older people in order to maximise and encourage participation. Some reported activities would have to be either free or cost no more than two or three pounds to attend.

Intergenerational activities

Focus groups exhibited a number of issues relating to the term ‘older people’ many participants felt that older people were often stereotyped by people of a younger age.

FG 1 *“My scribbled beetle is getting rid of the image of older people. I’ve got a picture of a rather nasty looking beetle and my ghost party too, and if the university staff could appreciate that we still want to learn, still want to do things, maybe still want to teach, and there are a lot elements that maybe altering your image of us.”*

FG 1 *“I always get helped of the buses and things because I have grey hair...”*

When participants started to explore the scope of the learning facilities that the university could offer them, participants could start to see the benefits of their involvement in the centre on a different level. Each focus group expressed and commented on the notion when older people within society reach retirement age their contribution within society ‘seized to exist’ or matter. All participants reported as an older member of society their contribution capabilities do not end when they retire. Many agreed that they are still valued members of society and could still make a difference and could contribute to the community in a different way to which they would have done before their retirement.

FG 4 *“we’re all able and thinking aren’t we.”*

FG3 *“Older people feel that they are being neglected. They’re not being listened to, they can’t get things done.”*

The conformity of participants within and across the focus groups reported that many would welcome the opportunity to take up a role as a mentor. All said that older people have something to offer younger people, and they could use the skills and knowledge that they have learnt through their careers and through their personal interest to educate younger people. It would be an opportunity to engage with younger people e.g. students to add to their learning experiences.

FG 1 *“I think you’d get a different vision of older people. Some of you may have stereotypes that are inappropriate and by meeting older people on an education level you would realise that most stereotypes are not as you expect.”*

The topic of younger people and the stereotypes was often discussed in the focus groups. Participants from four of the focus groups believed that younger people had an influence on how vulnerable older people felt when they were outside of their own homes. Some participants commented on how they sometimes feared younger people.

FG 1 *“...hoodies going about, people getting mugged, all youngsters doing this, no discipline.”*

The university would be able to provide an ideal environment for a ‘knowledge exchange’ between those at either ends of the age spectrum. All Participants recognised that there were a potential for both age groups to learn from each other. It would allow younger people to learn about past generational experiences first hand outside of their own experiences. Many wanted the chance to keep up to date, and interacting with students would mean that they would learn about current and up to date issues. All participants believed that being able to create an environment where a knowledge exchange could take place would be an opportunity to work on secondary issues, such as beginning to break down the stereotypes or often ‘fears’ that older people have about teenagers and young adults.

FG 2 *“...there is this enormous gulf between the psyche if you like, putting it that way, of the young and the old, an enormous gulf and you know if there is any possibility of education on both sides so that attitudes can change, because I think that attitudes between the two are very very bad and so there’s something which might come within your remit and I think that’s a very very worthwhile project.”*

These were a general concern for many participants, but there were some experiences reported in contrast made by some participants. In the fifth focus group, all participants remarked on how their experience with teenagers had been positive.

FG 5 *“...a young man at the bus stop, he asked me the time and then a bus came and I had a £20 note and just my bus fare and I misplaced where I put it and I said oh I can’t get on I don’t know what I’ve done with my bus fare. He said it’s alright, come on, I’ve paid for you and I thought that was marvellous.”*

This group went on to discuss further the behaviour of older people towards younger people. One female participant stated that it was often found in her experience that older people have acted negatively towards someone who was younger.

FG 5 *“I’ve seen some of our age group being rude to the youngsters and that’s offensive and that attitude has got to stop. But I’ve not had it reverse-way”*

Safety

It was reported by participants that safety would be a big issue when attending activities at the proposed centre. Some participants from the focus group held in Hastings commented on the importance to ensure that when running any activities or courses, it would be best to run them during the day time.

FG1 *“...to me the main thing would be daytime courses. I don’t go out once it’s dark.”*

FG 1 *“Daytime, everything’s got to happen in the daytime.”*

However, there were some participant’s stating that if activities were only restricted to the day time, it could possibly inhibit older people from mixing with students and younger people from the community. Many agreed that it would be important to ensure the centre offered a variety of there services throughout the day and evening time. Participants reported that if services were structured in such as way it would enable older people to take the opportunity of working closer with younger people and to build upon a knowledge exchange with a different age group. Creating this opportunity would enable people to tackle issues and concerns, which are faced by both older and younger groups.

FG 1 *“...rather stops our communication with the younger people because they’ll be studying or they’ll be working or something.”*

Many participants generally believed it would be unsafe for older people to be out at this particular time of day. There was a consensus among the groups to ensure the university, when developing a centre, to remain flexible in its approach when running activities.

Participants noted other safety issues which can be a concern for older people. Many participants reported that they had a fear of getting hurt or experience some form of crime against themselves or their property.

FG1 *“She will not answer the door to anybody. She’s had people banging on her door, rattling the windows.”*

Some participants stated that the centre might be a place for them to go and discuss issues such as these which can be a negative experience for older people.

FG 1 *“...perhaps that also might be something that could be alleviated with you getting together and trying to solve some of these problems.”*

Focus groups reported that the centre could also provide opportunities for older people to meet with key authorities to discuss issues of crime and safety in the local area. Some noted that presentations or seminars on keeping safe would also be a way for older people to maintain a quality of life, which is not inhibited by fear or vulnerability.

Research Activity

Participants reported that the wellbeing centre could be used as an avenue to work with university staff to develop research projects which could look into issues that concern older people and the local community.

FG 2 *“We can use your expertise in research and development and all that sort of thing which we certainly haven’t got at the moment.”*

Many saw the expertise of research staff as an opportunity to use research to provide up to date information.

FG 2 *“...research projects running from the university you’d have up-to-date information and that can’t be a bad for anything.”*

The focus groups picked up on some issues which were of importance to the participants. Some commented on using the centre to carry out research into the services that the local area has to offer.

FG 3 *“Perhaps they would be able to pick up for research projects, the deficiencies of other agencies within Eastbourne.”*

It was also viewed that it would be an opportunity to look into issues which was preventing older people from getting out of their homes.

FG 3 *“to look into these sort of things that are stopping older people from actually coming out, from coming here joining things, you know and in fact improving their lifestyle.”*

It was also recognised that this could be an opportunity for students to gain research experience, and to gain a better understanding of some of the issues that surround older people.

FG 2 *“the students could gain of course would be probably a willing involvement in more research projects.”*

Discussion

The study has given the WHOOP research group the opportunity to explore what the term Wellbeing, Health and Occupation Centre means to older people within the community. The project has provided a way for academics, researchers and voluntary organisation to listen and take note of what older people’s perceptions are of the Wellbeing centre as well as hearing older people’s concern’s which can affect their everyday life.

Focus group discussions reiterated the enjoyment older people experience when remaining active, challenged and independent. There were many references regarding the positive experiences that they received when attending centres, which already exist within the community and are particularly designed to cater for the needs of older people. The WHOOP project aim was to avoid replicating existing services provided by such organisations as Age Concern, WRVS and Help the Aged. The project was designed to listen to older people to find out ways in which the university could work with older people and voluntary organisation to add to older people’s experiences in a positive way, which could provide different facilities and activities within the remit of the university staffs experiences and expertise.

This fundamental concern was echoed throughout the research carried out during June – October 2005. Participants vocalised on many occasions that the University of Brighton could be in a unique position to add to services

within the community. It was viewed that replicating services which were already exceptionally established within the community would not necessary prove to make the Wellbeing centre successful. The uniqueness of the university establishment lent itself to creating a different perspective of an older people's wellbeing centre.

The prospects of the university developing a centre was recognised to be an opportunity to create a different centre which would provide facilities and activities which would add to older peoples experiences in a different way, which may not have already been catered for by existing services. The research produced a strong consensus among many of the focus groups, which recognised the potential for older people to access the vast educational facilities on offer within the university. The particular education resource which could be offered was largely recognised as an opportunity for older people to further their own education and to develop new skills. It was reported that older people would welcome the opportunity to do degree courses, but also would like the opportunity to study at a different level. Offering older people opportunities to study at different levels engage with varied topics was seen to be an important aspect. The activities at the centre would need to remain flexible in order to cater for a diverse group of people with ranging interests, experiences and skills. Participants did report that by offering a range of seminars, lectures, workshops, short courses and degrees; would effectively meet the needs of a diverse group. It would also enable older people to effectively interact with the universities educational facilities on different levels, which would create a flexible opportunities for older people, to further their personal interest and knowledge or the opportunity to retrain at a later stage in their lives.

Further learning opportunities were echoed throughout the study, with many participants highlighting the importance for older people to have the opportunity to continue education. However, there were many participants vocalising the importance of older people being able to take part in this learning environment by interacting with staff and students on a different level. The majority of participants expressed some strong and valid issues regarding their participation in the centre. It was viewed that older people's role within society changes when they retire. Many stressed that when a person becomes an inactive participant within society after retirement there is little opportunity for retired people to contribute in the same way that they did before retirement. There was a consensus across the groups that participation does not end with working life. The retired and the very elderly have a wealth of experience, knowledge and skills which they have built up through there personal interests and career experiences. Opportunities to share these experiences with their own peers and younger people would be an opportunity for them to contribute and to add to other peoples experiences in a positive proactive way where they could make a difference or further the knowledge for all age groups.

Interaction with people at different levels of engagement was an important element to the proposed centre. Many felt that there should be plenty of opportunity available to older people to interact with young children, teenagers

and students. Participants recognised that there were potential opportunities for younger age groups and the older age's groups to learn from each other. Many commented that there should be opportunities for older people to share their relevant knowledge, skills and experiences with students. There are examples in UK where universities and communities are working to promote intergenerational activities as an effective tool in promoting sustainable community development and in reducing social exclusion. The key purpose to intergenerational work is that it aims to bring generations together in purposeful, mutually beneficial activities which promote greater understanding and respect between generations and help to build more cohesive communities (CCIP: 2006, Howse: 2003). However, this knowledge exchange was recognised to apply to both age groups at either ends of the age spectrum. There were aspirations that there should be many intergenerational projects set up using the educational facilities as an opportunity for different age group to learn from each other. Older people wanted to learn about what is important to younger people, what are their concerns and issues, and it would be an opportunity for older people to share what issues were important to them. It was believed that creating opportunities such as these within the centre, would enable different age groups to interact with each other in a neutral environment. This was viewed to potentially be an opportunity to tackle the stereotypes each age group have of each other. It would be an opportunity to change people's perceptions and the stigma that both age groups face on a daily basis. The creation of such a programme for older and younger people to learn from each other, could be an opportunity to tackle the images of ageing by allowing older people to promote ageing in a positive and informative way which concentrates on the ability and skills of an individual and not the age of a person. (National Service Framework : 2005, Department of Work and Pensions: 2003).

The images of older people have typically been viewed as frail and vulnerable (Joseph Rowntree Foundation: 2004). Participants wanted to see a positive change in this view with opportunities such as, being able to talk about and promote ageing in a positive way should also be reflected in the proposed centre's image. It was commonly portrayed throughout the study that the image of day centres for older people was typically 'inactive, dull and 'boring', which often did not reflect the true nature of the day centre facilities. Participants wanted the wellbeing centre's image to move away from this typical stereotype. It was reported that if a centre were to be developed it would have to promote a friendly, sunny and welcoming atmosphere, which made a conscious move away from the image of 'high back chairs' on the 'outskirts of the room'. A fresher, comfortable and active image was preferred over the traditional look for a day centre. Presenting this type of image was generally thought of to possibly contributing to reaching a wider remit of older people from the community. A move away from traditional images could potentially attract more people to use the centre.

The centre's image was highlighted as only offering one way of appealing to a diverse group. Many reported that additional to running educational facilities, there could be the potential for staff and students to offer advice and information on a number of issues that relate to the older population. It was

reported that many would like the opportunity to seek advice regarding ways to maintain a healthy lifestyle. Loss of independence in later life has been a consequence for many older people largely due to a decline in health and mobility. The wellbeing centre was seen by many participants to be a way to advise and inform older people on ways to improve and prolong independence, active and health lifestyle. There is a vast knowledge base within the university which to promote ways to achieve goals such as above. Participants saw the potential in staff using their experiences and expertise to improve some of the issues which older people face in later years. Developing health advice programmes on maintaining a balanced lifestyle, exercise classes to help maintain general fitness, which offers a range of programmes to suite all abilities and instruction as to how to improve balance and mobility in order to avoid falls within the home. Were to find aid equipment and advice on what they do so they could make an informed decision about what is best for them. Participants did not want only to receive specific advice about ways of preventing poor health and wellbeing. It was strongly felt there should be an opportunity to attend seminars, workshops and lectures where people could go and listen and talk to staff members about health related issues. Providing opportunities for people to ask questions promotes the independence and choice that many policy researchers promote (Joseph Rowntree Foundation: 2004 and 1999, Bowling 2003).

This group is more likely to be on low income and less likely to have access to a private car than other sections of the population. They are also more likely to suffer from one or more disabilities and hence have some form of restricted mobility, while still wishing to maintain a good quality of life. Older women in particular are likely to be dependent on public transport for their travel needs. For those with some form of restricted mobility, mainstream public transport can be difficult to use (Department of the Environment, Transport and the Regions (1998). This notion is reflected in many of the participant's statements about the transport services they use within the local area. Many find it difficult to reach local amenities and health and social care services as a result of poor services. Many noted that to operate a wellbeing centre would involve ensuring that people who used it would have satisfactory access to the centre through transport. Location proved to be an important aspect to developing a centre and it was argued for the centre to be hosted within the parameters of the town centre, however many reported that the central location would remove the centre from the educational environment, facilities, staff and students at the university. Removing it from this environment would be detracting from the uniqueness and appeal of the centre.

Although it was highlighted to be important of ensuring that the university offered an accessible facility. Discussions did highlight the potential of using other venues. Many saw advantages in developing facilities which could be integrated into existing services. Running advice information clinics and exercise and fitness programmes at existing day club facilities would enable the wellbeing centre to reach a larger group of people which may require the expertise and experience of staff members. It could be an opportunity for staff and students to run exercise programmes and deliver them to the hard to reach groups within the community.

It was identified that older people's participation within the centre could also be as valuable as staff offering their experiences. It was recognised that older people could challenge stereotypes and promote an age positive approach to ageing by working with students and younger people. However, participant's highlighted that their interest's reach further than this. Older people could contribute to local and national research agenda's; by informing staff and students of issues that are of concern to older people and the community. They could also influence and inform academic fields. Many would like further opportunities to take part in research. However not only as a participant but as researchers. Taking part in planning and formulating ideas and carrying out research would allow older people to input their own ideas into research activities. It would also promote learning in something new and would be a challenging activity, which could potentially influence a change in current practice or strategies. It was felt important to ensure that if a centre was to be developed, the development should be shared to include older people running aspects of the facilities, to ensure that they can continually inform good practice. This would also be an opportunity to allow older people to feed their own ideas into the running of the centre.

Summary

The key points to have emanated from the research have provided an insight in the perceptions of the perceived Wellbeing, Health and Occupation Centre for Older People among older people.

Firstly it was noted that a physical centre would be preferred within a central location, which was in easy access off public transport. Providing a friendly, welcoming and versatile environment would provide a place for many older people to come and benefit from many of the facilities that the university could offer older people within the community.

It was reported that the term wellbeing had a different interpretations and the term means many different things to different individuals. The centre should aspire to creating an environment which highlights ageing and promotes ageing in a positive way to challenge preconceived attitudes that may exist in society. Allowing the older people's community to interface more with the university on a number of levels in a variety of approaches would be a possible avenue to explore to address these attitudes. Working with younger people and students would be an opportunity to contribute to their learning experiences in a positive way. It would be an opportunity to provide a knowledge exchange between older people and younger people which would encourage both groups to learn from one another. Using facilities within the remit of the university could facilitate these activities which would allow for such interactions to occur.

Developing health programmes which could involve staff expertise and give students experience would be a way of advising older people in ways of maintaining health, mental development, physical fitness, and prevention of mobility and balance problems. Development of advisory programmes could be an effective way for a community to reduce admissions into hospitals and help to prevent a decline in health problems in later life.

Lastly, participants felt that university and older people collaboration on such project as this, is one way to influence change which reflects there needs and interests. Uniting with the university was seen as a positive step to reinforcing a positive ageing attitude among older people. The project was viewed to be a way to enable older people to continue there personal development through interaction with their own peers, younger people and staff. The proposed centre or interaction with the university would be a way to empower older people to make decisions about there own wellbeing and to enjoy greater life satisfaction in there later years.

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