



# Ageing well in Suffolk

A summary of local views, experiences and attitudes

Published November 2024

**healthwatch**  
Suffolk

Trusted Insights

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# Acknowledgements

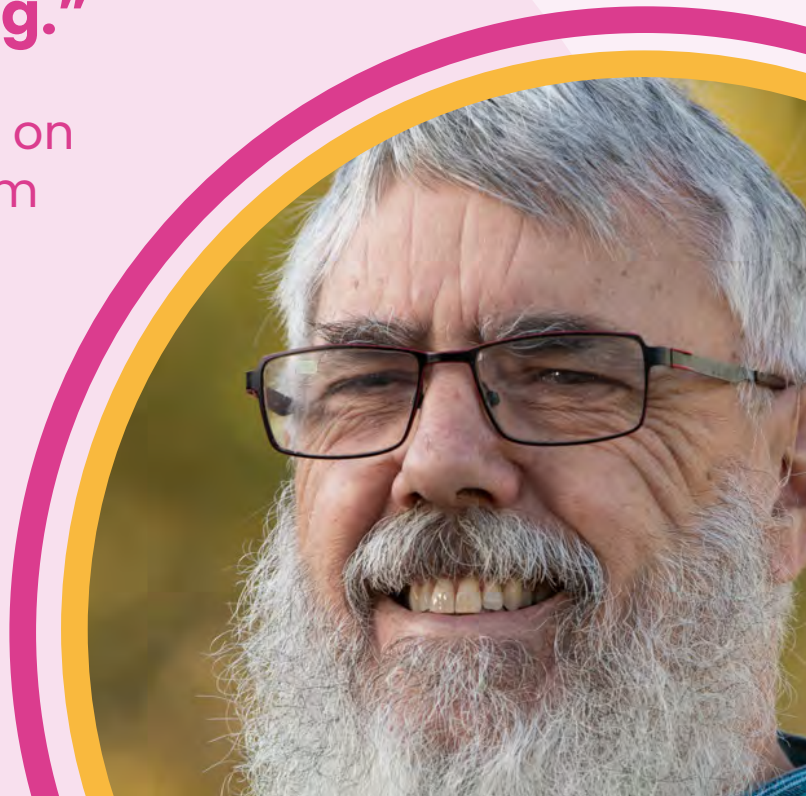
This independent analysis has been compiled by Healthwatch Suffolk CIC. The project was commissioned by Suffolk's Public Health and Communities team to shape and inform the annual public health report for Suffolk.

We would like to express our thanks to everyone who contributed to the Ageing Well in Suffolk Project, especially our partners and community members who shared their experiences of ageing.

**Image credit:** Some photos featured in this document have been sourced from the 'Age Positive Image Library from the Centre for Better Ageing. The photos show a more realistic depiction of ageing – to help challenge stereotypes of older people. You can find it at <https://www.agewithoutlimits.org/image-library>.

**“Keeping busy and  
keeping engaged in the  
world keeps me young.”**

Read Robert's perspective on  
ageing well in Suffolk from  
page 60.



## Explore featured art

### Ipswich Romanian Community workshops

Local artist, Romeo, worked with us to invite people to a free art workshop in Ipswich. The aim was to engage people of all ages in discussions about what it means to age well locally, to capture a diversity of perspectives on ageing, and allow people to creatively illustrate their views.

Artwork from the day can be found throughout this document alongside artist descriptions of their work.

### Explore more from our partners

This was just one approach that helped us to include a diversity of views in this project. See from [page 116](#) to explore how six other local partners helped us to include people in this research.

**Ageing Well**  
Proiect de Healthwatch Suffolk  
**Atelier gratuit de artă în familie - Îmbătrânirea în Suffolk**

- Alăturați-vă unui atelier de artă de familie gratuit, în timp ce Comunitatea Română Ipswich și Healthwatch Suffolk ucrează împreună pentru a explora în mod creativ cum este să îmbătrânești în Suffolk.
- Data: sâmbătă, 12 octombrie 2024
- Locație: Westgate House, 1 Museum Street, Ipswich IP1 1 HQ
- Ora: 13:30

**Ce înseamnă îmbătrânirea pentru tine și cum îmbătrânesc bine oamenii din comunitatea ta?**

- Alăturați-vă nouă în timp ce creăm artă și explorăm cum putem face din Suffolk un loc de viață mai prietenos cu vârsta.
- Acest atelier de artă cu cărbune este condus de artistul român Romeo.
  - Materiale furnizate.
- Copiii cu vârsta peste 5 ani sunt bineveniți să se alătura părinților și să lucreze în echipă.
- Locuri limitate. Înregistrați-vă prin linkul Eventbrite sau codul QR.

healthwatch Suffolk Ipswich Community Trust sub Youth Art Studio





The charcoal portrait drawing depicts an older person that was based upon the artists vision of what their father might have looked like if he'd had the chance to grow older. It's a tribute to a life that could have been, capturing the lines and features that age might have traced upon his face. The overall message is that growing older is a privilege, one that not everyone gets to experience. It is a privilege every day and we should appreciate what we have.

Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.

# 1. Introduction and methodology



## About Healthwatch Suffolk CIC

Healthwatch Suffolk CIC is a social enterprise delivering insight to shape local NHS and social care. We passionately believe that listening and responding to people's lived experiences is vital to create health and care services that work for everyone.

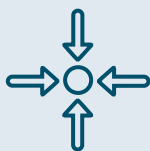
We collect and share lived experience to improve standards of health and social care in Suffolk, regionally and nationally. Our independent role is enshrined in law, supported by trusted data and embedded in local integrated care systems by established relationships with partners.

Our service is founded on long-standing values of transparency, accountability and accessibility. We want everybody to feel equally valued, listened to, seen and heard.



### Our core purpose is to...

Collect and share lived experience to influence better standards of health and social care.



### We live and breathe...

Co-production in everything possible. We are inclusive, transparent, accessible, and accountable. We believe passionately that listening and responding to lived experience is vital to create health and care services that meet people's needs.

For more information about our role, and how we are inclusive, please [visit our website](#).

## Introduction

### In brief

Healthwatch Suffolk (HWS) has been exploring people's views about ageing in Suffolk together with Suffolk's Public Health and Communities team (PH&C).

This report has been created to support the development of the Annual Public Health Report 2024, which aims to understand local opportunities to support all residents in Suffolk to age well, maintain their independence and enjoy a good quality of life as they age.

The project, and this report, have been

structured according to key domains for creating Age-Friendly Communities. These are from the 'Age-Friendly Communities Framework' developed by the World Health Organisation (see below for more detail).

Ultimately, working with local partners across sectors, the PH&C team in Suffolk wants to use the insights gathered to explore ways to make Suffolk a more age-friendly place to live.

For more information about Healthwatch Suffolk, or this report, please contact us on freephone 0800 448 8234 or email [info@healthwatchsuffolk.co.uk](mailto:info@healthwatchsuffolk.co.uk).

## Why is it important to ask people about their experiences?

There are several reasons why it is crucial to understand both the factors in Suffolk that promote healthy ageing, and the challenges that prevent it.

### Population change

Our population is ageing more than ever before, with nearly 40% of people in England now being over the age of 50, and almost one in five aged 65 and over.

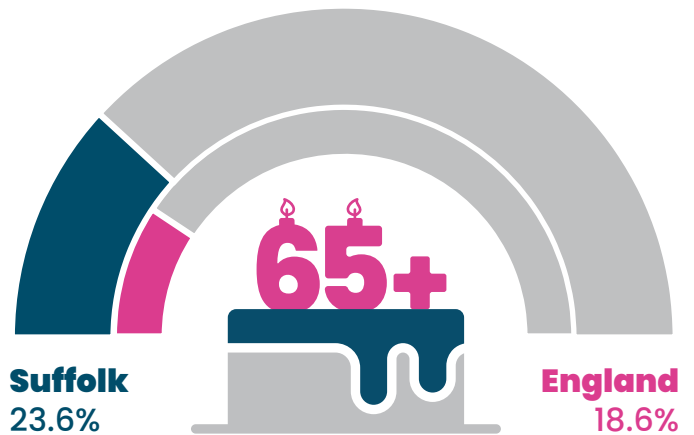
The Suffolk demographic is older than the national average. According to the 2021 census, almost 60% of Suffolk's population were of working age between 16 and 64, whilst 23.6% (179,000) of the Suffolk population were 65 years and over (5.2% percentage points higher than England).

In a period of 20 years between 2002 and 2022, Suffolk's total population increased by 14% but the population aged 65 and older increased by 48%. Therefore, understanding the needs of this changing population is vital to ensuring that people can live a healthy and fulfilled life into their later years, as well as manage the demands on the health and care system.

### People age differently

People age differently, and the effects of ageing are impacted by more than just our biology.

There is no 'typical' older person, and we need to understand the widest possible range of people's experiences and needs to ensure Suffolk is an age-friendly county that actively promotes opportunities for healthy ageing for all.



2021 census data showed **Suffolk** has a higher proportion of residents over the age of 65 than the **national average**.

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### People will work longer

With the State Pension age increasing from May 2026, people will be required to work for longer. Therefore, we must ensure people are supported to live well into their older age and contribute to a thriving local workforce and economy.

To do this, our systems and services must understand the unique challenges that people face to ageing well locally, and the range of activities people already engage in to support health ageing in their community.

### Re-framing older age is important

This project is interested in the things which support people to age well locally.

We are also seeking to explore some of the attitudes (both positive and negative) about ageing that people have in Suffolk. This project is therefore an important part of how we can contribute to shifting narratives and stereotypes regarding ageing in Suffolk.



The project will help systems to understand what people need in order that they can age well in Suffolk, and also to be aware of the barriers and challenges people can face locally. By pinpointing these opportunities and issues, we can work towards creating practical, targeted solutions that improve the quality of life for people as they age.



**Find support  
to age well**

You can find sources of help and information to support healthy ageing in Suffolk by visiting our website.

<https://healthwatchesuffolk.co.uk/signposting/support-with-ageing-well/>

**“Getting out and connecting with others is important to me.”**

Read Joyce’s perspective on ageing well in Suffolk from page 76.



## How people's views were gathered

At the request of the Public Health and Communities team, this project has sought to gather the experiences of people ageing in Suffolk using questions based on a framework developed by the World Health Organisation.

Outlined in the Global Age-Friendly Cities guide, the Age-Friendly Cities framework is inclusive of eight interconnected domains that help identify and address barriers to the wellbeing and participation of older adults. They help communities to consider aspects of people's social and physical environments that, when acted upon, can help to address barriers to ageing well. The domains are visualised in the graphic below.

More information about the framework, and the WHO domains, can be found on

<https://ageing-better.org.uk/age-friendly-communities/eight-domains>.

Several key elements of the framework were developed into a series of prompts that have helped to guide engagement in local communities. They were also featured in tools to encourage people to consider the many factors determining their ability to age well when responding to the project.

## The online feedback form

An online feedback form for people living in Suffolk was launched on August 1st 2024 and hosted on the Healthwatch Suffolk website. It included a series of closed and open-ended questions, allowing both quantitative and qualitative data to be gathered.

The online form aimed to gather as many experiences as possible from people living



## The World Health Organisation Age-Friendly Cities Framework

This research is based upon a framework for age-friendly communities developed by the WHO. It consists of eight areas of the built and social environment that, when acted upon, can help to address barriers to ageing well.

The WHO framework considers that age-friendly communities bring together partners representing these areas to work with each other and older people to make changes.

[Click to learn more](#) about the framework.



A web form was used to gather opinions about ageing well in Suffolk and more than 400 people responded.

In addition, the views of people from a diversity of local communities in the county were included, through the engagement of an array of local partners supporting the project.

in Suffolk. The research hoped to capture the experiences of people aged 55 and over. However, responses were encouraged from people of all ages post-16. In total, 413 people responded to the online feedback form.

The sample of people who responded to the online feedback form were self-selected. Therefore, it was not possible to guarantee a response from any one population group or demographic. However, with the assistance of our partners and a robust approach to communication, we are confident that news of the project was able to reach a diversity of people and communities.

It should be noted that the responses featured in this research are not representative of all people ageing in Suffolk. However, the depth of the qualitative insights gathered is likely to reflect many people's views and experiences of growing older locally.

## Suffolk voice highlights

The online feedback form was used to recruit and select people to participate in further conversations about ageing in Suffolk. The questions in the online form helped to ensure that a diversity of people were selected as 'Suffolk voices' based on their responses to the WHO domains.

You can find thirteen Suffolk voices throughout this document (see section from

page 34). They help us to showcase differing experiences of, and attitudes toward, ageing locally.

## Our inclusive approach & work with local partners

This project aimed to capture the broadest possible perspectives on ageing locally.

A multi-method approach for data capture was used, ensuring people could participate in a way that suited their needs. Furthermore, specific tools were created and used in the project to ensure people could participate, including both easy read and translated survey formats. Live British Sign Language support and interpretation was also available.

## Partner submissions

In addition, a flexible budget was utilised to offer small amounts of funding to local partners that could help Healthwatch Suffolk connect with specific communities in the county. They used various methods to engage people in local conversations about making Suffolk a more age-friendly place to live.

Read the submissions from local partners from page 116.

This approach has helped to bring a depth of understanding regarding how ageing well is viewed differently by people, communities and cultures across our county.

## 2. Engagement summary





*"I see Suffolk as a great place to live...*

*"with access to countryside, the sea, historic places, and generally friendly people. I've been able to study and work here through my life, bring up a family, and continue well in my 80th year."*



## Our reflections on this engagement

The Ageing Well in Suffolk project revealed that many residents thrive as they age, but this has not been the case for every respondent.

Whilst it was clear there were a variety of activities, opportunities and community services available to support people to age well in Suffolk, more could be done to improve awareness of them through signposting and information provision. It was also evident that people sometimes needed guidance and motivation to engage in community activities and services.

People appreciated Suffolk's landscape, including its beaches, countryside, and access to open spaces that supported their physical health and mental wellbeing. There was a strong sense of community spirit in some rural areas and small villages, where people had developed support networks and were willing to take on informal roles supporting neighbours.

Residents were actively engaged in many social groups, activities, and community events, although some expressed a need for more diverse options to suit all interests. Some comments referenced ageing as an opportunity to learn new skills, pursue education, and build friendships. It was also evident that people had experienced personal wellbeing benefits from giving back to their community, for example, through volunteering, which gave them a sense of belonging and supported them in developing social connections.

People acknowledged the importance of maintaining health through good diet and exercise. Many were actively engaged in healthy behaviours and lifestyles. However, others had faced challenges, such as financial struggles or problems with their mobility, that were limiting their ability to stay well.

During our community engagement, we also discovered the challenges people can face as they age. These are featured throughout this document and should be interpreted as opportunities to help Suffolk become more age friendly. Examples include:

- Whilst many people appreciated the benefits of digital advances, some lacked the skills, knowledge, or confidence to use them. This should motivate Suffolk to continue to drive towards a digitally inclusive county that embraces a digital first, not digital only, approach and ensures no one is excluded.
- The importance of transport as a key enabler to people ageing well was evidenced by the number of comments respondents made about it. Having access to suitable transport was seen as essential to maintaining health and wellbeing, as well as

preventing social isolation. While several respondents had already embraced active and environmentally friendly travel solutions and were enjoying the associated benefits to their health and wellbeing, more could be done to support and encourage people to adopt alternative transport options.

- People described how they would value better housing options that help older people live independently for longer in their community. They mentioned that new communities should be designed with the needs of older residents in mind.

While many residents were living well, concerns about future difficulties such as managing co-morbidities, disabilities, and isolation were frequently expressed. Broader societal factors, including climate change, NHS pressures, funding changes, the rising cost of living, and international politics, formed part of people's frame of reference when responding to this project and shaped the sentiment of their responses. This was particularly evident in the section on access to health and community services, where several respondents highlighted that recent changes to these services had raised concerns about the potential for further declines in accessibility in the future.

Overall, encouraging people to reflect positively on ageing has been challenging. Attitudes toward the subject varied widely; some individuals were motivated and optimistic, while others expressed fears about the impact of ageing on their lives. It is essential to reframe perceptions of ageing by challenging stereotypes and highlighting the opportunities it presents. At the same time, we must acknowledge that ageing is an indiscriminate process, not a universally positive experience.

**“I get personal satisfaction from knowing that I am helping to address a need within the village.”**

Community spirit in abundance – Read Helen's perspective on ageing well in Suffolk from page 78.



**“Keeping well and mobile is a big part of ageing well. In this village, we have pilates and a coffee morning at church. There are also clubs to belong to, which helps you to socialise. They are all within walking distance if you can, which helps with fitness. Also, plenty of volunteering roles available.”**

# 3. How are people ageing well?





## Webform responses

We wanted to understand what people were already doing in Suffolk to support themselves to age well. This section of the report summarises the **380** responses we received to this question. It demonstrates the wide variety, and number, of activities people in Suffolk are engaged in to stay active, connected and to age well.

Key themes are shown in the table below alongside the number of references to them.

Theme	Count
<b>Physical Exercise total</b>	<b>168</b>
• Competitive sport	2
• Organised exercise	115
• Informal exercise	83
<b>Social opportunities</b>	<b>138</b>
• Informal social opportunities	62
• Organised social groups	106
<b>Giving back to their community</b>	<b>135</b>
• General volunteering	105
• Running events/groups	38
• Taking on civic posts or duties	25
<b>Exercising the brain</b>	<b>71</b>
• Working full or part time	28
• Learning/education/gaining skills	46
• Brain activity	6
<b>Hobbies including gardening/DIY and creative crafts</b>	<b>65</b>
<b>Art and culture</b>	<b>48</b>
• Supporting Art & culture	12
• Performance (singing, acting, playing live music)	38
<b>Spiritual wellbeing</b>	<b>29</b>
<b>Healthy eating</b>	<b>23</b>
<b>Caring for others</b>	<b>21</b>
<b>Open spaces/wildlife/nature</b>	<b>14</b>
<b>Other</b>	<b>17</b>
<b>Would like to do</b>	<b>7</b>
<b>Nothing/Nothing available</b>	<b>12</b>

## Theme summary & example feedback

Key themes from responses to this question in the webform are described below.

Many people were actively contributing to their communities. The example comments show the sheer variety of ways people in Suffolk are looking after their wellbeing into later years of life. There were far too many to feature in this report, but we hope the examples are a reasonable reflection of the diversity of initiatives helping people age well in local communities.

Many comments include references to multiple themes.

### Physical exercise and keeping active

A total of **168** people said they were engaged in some form of physical exercise to keep themselves active and well as they age. Of these, **115** were accessing organised fitness groups/sessions including gym memberships, sports groups and keep fit classes. **Eighty-three** people undertook informal exercise in the form of walking (particularly dog walking), cycling, running, and **two** people were still involved in competitive sport.

*"We cycle and do not own a car. U.K. is car dependent on the whole with the consequences of under active bodies. Obesity levels are rising with over weight bodies putting stress on joints and the essential muscles not used properly. Heart and lungs need exercise to remain healthy. We do this. Research suggests that frequent exercise such as cycling will improve health and extend life years up to 20 years. We belong to a regular cycling group for leisure rides. We also cycle as a lifestyle doing shopping, appointments and tasks. Cycle trailers are good for cargo... Older people can really gain from cycling, even electric bikes if effort is hard. So can all ages."*

*"I go for walks often especially at Felixstowe as the bus goes directly there. I enjoy reading and going for a coffee and a chat. Creating a sense of community is key and I volunteer when I can and attend lots of charity events."*

*"I actually do a lot of things! My greatest love is the singing group I belong to. It is such fun singing together and offers so much support. You can't feel down and miserable after a session. I also do three different exercise classes a week and benefit not only from the*



**"I take part in assisted cycling with Bikeactive and sailing for the disabled with the Woolverstone project.**

**"Both keep me active and are very well managed."**





***“I regularly attend Tribe All Fitness sessions and a Dance Motion Academy sessions. However, I am concerned that once I stop earning and am reliant on my pension these will be unaffordable.*”**

*“I am aware that Amy from Tribe All Fitness also runs sessions in a care home. My village hall holds a weekly carpet bowls session during the day which is popular with older people.”*



*exercise but the camaraderie from the people on the group. I enjoy walking and being out in the fresh air. I am so lucky to live in an area with amazing scenery and walks.”*

*“I have learnt to play croquet since moving here two and a half years ago, and have just been elected Chair of the Club.”*

*“I have changed my working week to enable me to attend a gentle yoga class in the village hall which runs during term time weeks. There is also a chair yoga class on the same morning for those who are a little less mobile. The small amount of social interaction that I get from going to the yoga class is wonderful as I work from home and don't physically see many people in person. I walk my dogs, do DIY and gardening. I like to cycle round the lanes in the evenings when there is little or no traffic. I play word games on my phone to keep my brain active.”*

*“Last year I joined forces with another COPD sufferer to gather interested clients from an NHS run Pulmonary Rehab courses which were time limited. We got involved with local group ActivLives ([www.activlives.org.uk](http://www.activlives.org.uk)) who agreed to run a weekly Breathefit session for COPD sufferers and people with other chest/heart related problems. These sessions have gone from strength to strength.”*

*“I cycle to get around and this helps with keeping healthy. A gym on wheels equals my bike! Occasionally I help SCC with cycling route surveys to open up safer cycling routes for those wishing to cycle, walk, ride horses or jog. The Quiet Lane scheme was adopted by our village and set up by myself and my husband, both Parish Councillors.”*



*“We also cycle as a lifestyle doing shopping, appointments and tasks. Cycle trailers are good for cargo. My husband is 76 years old and was born premature. He has a heart with defects.*

***“The cardiologist who placed a stent in his coronary artery said that my husband's heart had naturally by-passed due to exercise and had saved his life.”*”**



"I go to Nordic Walking classes in my local park. I go to the meeting of the local History and Archaeological Society. I was a trustee of our local museum but have retired after serving for 15 years or thereabouts. I left the local walkers group committee after breaking my hip, but still help with the shorter walks."

"Owning a dog is great for wellbeing and discipline of getting up and out (restricted recently due to hernia)."

“

*"There are so many offers of support it is comfortable being old in our rural village."*

”

## Social Opportunities

Social opportunities are an important part of ageing well and **138** respondents mentioned that they were involved in activities that got them out of the house and connecting with other people. Most attended organised social groups and gatherings like Meet Up Mondays, Chinwag sessions, or organised coffee mornings (**106**). Others mentioned the importance of informal catch ups with friends and family, to their wellbeing (**62**).

*"I always enjoy attending Musical Memories in Bury St. Edmunds. I always leave the sessions feeling happier. With my wife I also attend various coffee mornings/lunch clubs which are very important social gatherings for me."*

"The University of the 3rd Age group are amazing. Based in Stowmarket and Diss there are many activities on offer for the over 50's. Based on membership, the U3A sets up self-run groups, lectures, annual meetings and meals. Likewise, our village holds a Parish Party for older people based on fundraising. Our active Mendlesham Community Council sets up events for all ages, including a Summer Fayre. The Church of England and the United Reformed Church groups in the village run social events for the community. There are so many offers of support it is comfortable being old in our rural village. We try to encourage a few hours here and there from young people to help out. This works for short term projects such as helping at the monthly pop up cafe run in the village. This cafe attracts many single older people or those feeling lonely and needing a group meet up. The village has made use of grants from the Council and volunteer retired people run a Meet Up Monday cafe and a Friday lunch group."

“

*"I volunteer as part of an organising team for sporting events. This keeps me in touch with my friends and keeps me motivated to exercise during the winter and summer."*

*"I'm also a member of a speakers club, which is inherently friendly and sociable at its fortnightly meetings."*

”

Singing groups and choirs offered several people valued social opportunities and improved physical wellbeing.



*"My greatest love is the singing group I belong to. It is such fun singing together and offers so much support."*

*"You can't feel down and miserable after a session."*

"I belong to a community choir, which is good fun, social and good for me. I play bowls several times, and it's great to go to different greens, be active and have a good chinwag. I swim regularly with a friend, and have a good community of friends and neighbours who meet up and help each other when needed."

*"In order to live as well as I can I have joined several different clubs and groups that co-exist in Hadleigh. A scrabble club that meets monthly, a community group that meets every Monday and a bereavement group that meets monthly, U3A, and several activity groups. I attend concerts held in the local churches and two lunch clubs held every month. The lunch clubs cater for about 60 people sitting down to lunch, a raffle and plenty of talking people different people. All of this helps support the local community in Hadleigh and helps keep me occupied and not lonely."*

*"I am lucky enough to have family in the village who I see daily. I also have friends. If I didn't there are lots of clubs and groups and a village shop (volunteering)."*

*"Had very little time for as was unable to leave my husband on his own. It was too dangerous. We were isolated in our home as no family local either. Now he is in residential care I am on my own. I have been making the effort to try and socialise with others through coffee mornings. Or arranging to meet up with friends. I do play Petanque for Suffolk Coastal area and I play in various leagues and tournaments. I play all year round and have made lots of friends who I meet up with and play Petanque with. It is my sanity. Gives me events to aim for and get out of my home to socialise."*

*"We met up with friends every week in a community pub and have met other people there that have become friends. I think a good friendship network is very important as you get older especially if family are not nearby."*



*"I am a member of a very unofficial [once a week] '5 o'clock group' in the local pub."*



*“We go to Musical Memories in Bury St. Edmunds. I cannot emphasise enough how important that is to us. It sounds so simple just sitting and singing in a group but it helps my husband (who has dementia) and we always feel better after attending a session.”*

*“We also go to various coffee mornings/lunch clubs (at the Gatehouse in Bury St. Edmunds) it all helps to keep us occupied and sociable.”*



*“I am currently a member of the Town Council, which has given me the opportunity to meet a variety of people in the local community and to know what is happening in the Town.”*

*“Attending a monthly community lunch event in neighbouring village enables good social interactions with others, this helps reduce loneliness for people. Attending the monthly community supper event in neighbouring village enables good social interactions with others, this helps reduce loneliness for people and new friendships can develop.”*

## Giving back to the community (volunteering)

Around a third of respondents (**36%** or **135** people) were involved in activities that benefited their wider community. Most mentioned volunteering for various clubs, societies and community groups. However, a smaller number had taken on wider responsibilities for organising or running events and clubs (e.g. as a chair, treasurer, or secretary). Finally, **25** people had embraced civic roles, such as becoming a parish councillor, school governor, or taking on trustee positions.

*“Personally I enjoy living in my community but that is because I have lovely friends and neighbours. I try to keep active but am aware there are others around who need more support. I am a member of Good neighbours, a member of a book group and go to swim at the leisure centre. But mostly I am involved with the long shop museums educational group. Apart from having schools visits, which keep us young (in heart at least) from time to time we put on performances, usually about experiences in the past. In October, we are doing an oral presentation about the munitionettes who worked in the factory during WWI. The performers are all older and most well over 80. It won't be quite up the National standards but it is good for us and the museum, every section is always looking for volunteers. Aging is inevitable but it need not be a disaster. We oldies need to be proactive not just think we rely on others but be part of it. We can't do what we used to but we can have a try at doing our bit.”*

*“Volunteering with local community horticultural group gives me a sense of purpose and socialising with like minded people is good for my general wellbeing.”*

*“I volunteer for RNIB and Guide Dogs, supporting and assisting the blind and partially*

sighted. I am a parish councillor.”

“Volunteer in primary school. They always want help, but you have to approach them and offer (listening to readers is number one). I play golf for social contact and recreational exercise, and volunteer to help at Seckford Golf Club’s dementia days. It’s a friendly community club rather than a selective formal cartel.”

“Alongside many, many volunteers in the community, playing my part where I can. This includes: being a parish councillor, helping out community organisations to staff events and being a founding member of a community energy company which, amongst its aims is working to assist households to reduce their energy bills, increase their energy resilience and improve their carbon footprint. Community events include: 3Rs sessions to enable recycling for those who can’t travel to waste sites, community brunches/lunches to reduce loneliness and helping out in the community shop.”

“Volunteer for Chinwag ran by communities together. Cook at Woolpit lunch club.”

“I am a listening Samaritan and have been for 20 years (in BSE). I am an amateur actor (Irving Stage Company at Theatre Royal, BSE). I paint water colours and attend occasional classes locally.”

“The Suffolk Wildlife Trust had volunteering opportunities in Ipswich and Woodbridge areas. One big problem with volunteering is the hoops you have to go through to do it. I know the people have to be 100% OK to do some of these jobs; but not all jobs, its like going for a proper job with a CV and references etc., when all you are doing is stacking shelves and sorting out items for a charity shop. (Mine was different as I work with Children, even then it was a bit over the top - I have a DBS and Prevent Duty cert. - Safeguarding children level 2 - and safeguarding adults).”



“Volunteering at the Library and running Forget-me-Nots which is a social afternoon for folk with dementia and their family or carers.

**“Both keep my mind and body busy and increases my circle of friends. Although am lucky at the moment to enjoy good health.”**



**“My wife and I (75 and 66 years of age) volunteer front of house at the Theatre Royal Bury St Edmunds, and also at Banham Zoo.**

**“My wife attends the Art Club in Elmswell. I am a member of the Wesley Ukulele Band and we perform for local club and societies, including Stroke, dementia and old peoples homes. We have performed nearly 100 gigs in the three and a half years that we have been in existence and raised nearly £11000 for our various charities. I don't believe that any of our 25 members is under 65. The friendship and fun that we have is infectious.”**



People frequently mentioned that gardening was a hobby that helped people to age well – though references were often briefly described.



*“Am a very enthusiastic gardener, and fortunately in good health, so am able to achieve quite a variety of tasks.”*

## Keeping brains active

**Seventy-one** people said they were involved in activities that helped to keep their brain active, including working (both full and part time), learning new skills, accessing further education, increasing their knowledge through lectures and talks, or playing puzzles that stimulated their cognitive function.

*“Trying hard to keep my brain active and engaged, and keeping up to date with technology as much as we can. One of my hobbies is learning sign language; I am a member of the local women’s Institute, and welcome being involved with people and helping where I can.”*

*“Firstly regular exercise and secondly I am a member of the Haverhill U3A Bridge and Climate Change groups and they have been VERY informative and interesting to me. The Bridge group gave me the courage to join a couple of ordinary Bridge clubs where I and my partner(s) face some VERY good players so challenge what is left of my brain.”*

*“Sit down keep fit and yoga. And lots of puzzles to keep mind active.”*

## Hobbies

Gardening was the hobby most frequently mentioned by respondents. However, several people mentioned enjoying DIY, woodwork, art, pottery, sewing, playing instruments and other creative crafts.

*“Plans for becoming more self sufficient in our garden. Planning to make room for hobbies and crafts. Involvement in community organisation and events.”*

*“I do try to do small craft events where I can sell my homemade jewellery but I can now due to breathing problem need help from friends During COVID I started to make handmade jewellery to pass the time.”*

*“I am member of the local model railway society meeting twice a week with other social events on an ad hoc basis. This group was very supportive when my wife had cancer surgery two years ago. I have hobbies at home including gardening and woodwork. My wife and I spend a lot of time helping with our six young grandchildren (2-7yrs) but are glad to hand them back.”*

*“I go to a sewing group every Tuesday. I try to do a bit of gardening and knitting.”*



*“Keeping at work, whilst I am able to do so, to keep my mind active and to help me keep in touch with what is going on in the world, not from a news point of view, but from a social point of view.*

***“Keeping involved with younger generations keeps you young too, we are not all ready for armchair yet! Wildlife groups and volunteering to help at animal shelters works for me. Talking to people in shops, cafés, especially those sitting alone,”***



*“I am a member of Bury St Edmunds Model Railway Club, which provides friendship and companionship for like-minded people. I believe that getting involved with clubs and societies with like-minded people keeps you young at heart and while we can still take part in these activities, it is good for our health to do so.”*

*“Hobbies are family history, sewing , knitting and reading.”*

*“Bi-annual fêtes to raise funds for local charities, with an emphasis on craft work undertaken throughout the year.”*

*“Setup better home internet. Installing a greenhouse to become more self sufficient.”*

*“We grow all our own vegetables and preserve things for winter.”*

*“Although I am losing mobility, I try to get out several times a week to catch up with family and friends. I enjoy gentle gardening, reading/writing, artistic projects, and doing research. I travel when I can. My cat keeps me sane(ish). I have some great neighbours who are all far older than I am, so collectively we are pretty useless when it comes to doing physical/practical things for each other - but we are definitely there for each other in other ways!”*

*“I organically grow fruit and vegetables in my small garden, I attend the U3A, I do art projects, DIY, watch films and documentaries, learn new skills(learned to fix my DVD player, and to re-point bricks) I play guitar and keyboards, and love a challenge. I think a positive attitude is really important and I live each day the best I can.”*

*“I have an allotment which provides self evident benefits. I play bridge on line as unable to leave my wife who has dementia. I entertain in care homes (with guitar and host sing a longs ). This provides an outing for my wife and she is able to make new friends. It is also a change of scene for me. We attend memory lane meetings which are valuable source of information and support.”*

Social opportunities, hobbies and opportunities to participate in community activities or events were frequently described. They helped people to maintain a sense of belonging, experience the positive benefits of giving back to their community and kept brains active. They also supported physical and emotional wellbeing and provided a place to find warmth, friendship, and shelter.



## Art and culture

**Thirty-eight** people were involved in performance activities including singing in choirs, playing live music, participating in amateur dramatics and public speaking. A further **12** people mentioned supporting art and culture through visits to the theatre, cinema and art galleries.

*"I try to keep up with all the activities I have been involved in over the years - dancing, dog walking, gardening, volunteering, reading, playing piano and performing in local revues and carol services, book group, socialising, involvement with various village groups, not getting overweight. My small village has lots going on, much of which I help organise or participate in. Having a Village Hall, possibly a new pub (underway), and various voluntary groups all helps with maintaining an involvement in society and interaction with friends and neighbours and thus benefits mental and physical health."*

*"I'm a volunteer singer and helper with a group of people with memory loss and their carers with Music In Our Bones. We recently had the opportunity to sing along with other choirs at Snape Maltings. This is twice a month in a community centre in Bury St Edmunds. I also sing in a choir held in Diss that is singing for wellbeing called Discord, this is weekly. I find singing very therapeutic and also helping people that wouldn't get the chance to sing that same opportunity. I have a friend in a nearby village that I spend Sundays with, we have lunch and play scrabble which helps to keep my mind active and gives us both company as she hasn't got a car I go to her. None of this would be possible without my car."*

*"We go to lots of groups we have an art group on a Tuesday a lunch club on a Monday every two weeks we belong to Oddfellows where we do various things. We go to the cinema and also watch shows."*

*"Keeping mentally and physically active (e.g. Sea swimming with friends, walking, concerts, volunteering at RSPB Minsmere and local history group)."*

*"I attend groups at the Ipswich Institute. Swim regularly at Crown Pools. Volunteer at my local Church where needed. Am on the Social Committee here at Westwood Court as Secretary and help to run Social events and coffee mornings."*

*"My hobby is card making, reading, and theatre."*

*"I join in with the creative writing group which encourages expressive story writing. Currently we are forming a group book publication to share with the village."*

“



**"Freckenham village hall gives access to the Arts through professional drama groups such as EasternAngles."**

**"Many of us Benefit from this, because it can be difficult to travel to access live performances."**

”

## Religious and spiritual activities/wellbeing

Amongst the **29** responses within this category, most mentioned that they were active church members and involved in local church activities. **One** person mentioned the importance of their Buddhist faith in helping them age well.

*"I attend Old Felixstowe Parish Church weekly and the vicar set up a Bible Study Group for Carer's in the congregation which really helped four of us get through very difficult times. I attend the monthly coffee mornings in my road, which I facilitated for nearly 30 years. I offer hospitality in my home and garden, to those in my road who live alone. I offer support to new carers I meet and am part of a Carer's support Group recently set up in the Care Home my husband resides in. This initiative was started by the relatives of those being cared for there. I work in the grounds of the Care Home trying to improve the area used by staff and residents. They have no funding for a gardener. My husband tries to help me so it's quality time spent together. Residents water the pots of flowers we have planted. We prune the shrubs and try to keep the pathways clear of debris so that residents can move about safely. I enjoy oil painting and am slowly getting back to doing this again after 5 years of caring for my husband with Dementia and deafness."*

*"I go to church, run, fitness pilates, volunteer as a chaplain in a primary school, read, do various craft."*

*"Attending local church coffee and chat group plus village get together for Harvest and Christmas and Fête."*

*"Play the flute in Woodbridge Orchestra at local concerts and anywhere else we are invited. I am a member of Woodbridge Methodist church and have involvement in Parish church. I still drive locally but cycle for all short distances."*

*"I volunteer on Thursdays at St Philips community hub in Felixstowe. I attend various social activities at Hope Trust. Once a week I go to Ipswich and enjoy meeting up with the Ipswich Institute with friends for an exercise class and a group cafe for a light lunch. I am a church goer and really appreciate being part of my church community as my family live in London and Sussex."*

## Healthy eating

**Twenty-three** people had tried to eat well, including by not overindulging, cooking from scratch, reducing ultra-processed foods within their diet, trying to lose weight, and increasing the number of fruits and vegetables within their diet.

*"I exercise, eat well by cooking from scratch and drink lots of water!"*

*"Going to slimming world to lose weight, this is also a social event for me."*

*"Recently diagnosed with Type 2. Had to change my whole diet. Exercise plays a big part, having a purpose and having friends."*

**“I endeavour to go out every day. This can be using my bus pass to go to see friends or family or shopping or going to another local town for a cup of tea or walk. Last winter I walked into town and went to Ipswich library to read daily newspapers and make use of the warm space and interact with people. I caught a bus to Asda and made use of their OAP soup, roll & tea/ coffee for £1.**

**“This gave me food, an outing, a warm space and enabled me to see people & feel part of society. I volunteer for St Elizabeth hospice, Blue Cross and Communities Together. This provides a ‘structure’ to my week and enables me to meet others and be part of society and my local community. It also ‘spins off’ to other opportunities and meeting others.”**

## Caring for other people

As well as looking after grandchildren and caring for elderly and sick relatives, several people mentioned that they had provided informal care support to neighbours and friends.

*"I have taken on a Co-Chair of governors role and attended an introduction to Nordic pole walking. There have also been opportunities to help clear the local churchyard. However, despite being of retirement age, I still work full-time and care for grandchildren so opportunities to take part in some of the activities etc. around is a bit of a challenge!"*

*"Regularly attend book clubs. Keep active with walks in the park and swimming. Make time for family. Help neighbours who are ill Take full advantage of all the free activities on offer throughout the year."*

*"I rely heavily on the internet for entertainment, shopping and necessities such as prescriptions. I also maintain contact with friends and family through WhatsApp etc."*

*"I live in a block of flats and try and help neighbours out if I can. Unfortunately I am no longer able to do voluntary work."*

## Open Spaces/Wildlife/Nature

Whether it was participating in organised wildlife groups or simply walking in nature, **14** people mentioned that access to open spaces had been important to keep them fit and well as they age.

*"Access to local beaches, rivers and heathland for walking/dog walking. Volunteering in our nearest town and also working to start up a community project locally. Also looking at possible role on the local Council. Regular visitors to entertain, gardening and DIY activities. Socialising with ex work colleagues; regularly meeting up."*

*"Walking for one to three hours regularly with my dogs - open space that is 'dogs on lead only' prevents walking."*

*"Getting out in nature, and walking as much as I can everyday."*

*"I feel very lucky to live in a place with easy access to many facilities . I enjoy walking and appreciate the easy access to many open green spaces."*

*"Volunteer at MHHL - Martlesham Heath Householders Association, helping to maintain the heathland, create Wildflower areas and Bee cafe. Regularly attend a 'Stretch' class to help keep fit and meet with others."*

*"Access to local beaches, rivers and heathland for walking/dog walking."*



## Other

Other activities mentioned included Travel (**10** mentions), connecting with people in online groups and forums (**four** mentions), and pets (**three** mentions).

*"Radio amateur, talk daily with friends around the world. Day trips out."*

*"Staying fit. Exercising daily. Fresh air. Good food. Meeting regularly with friends. Lots of gardening. Entertaining friends. Travelling."*

## Would like to do

**Seven** people mentioned things that they would like to do, but were unable to due to illness, disability, financial reasons, or because the opportunity was not available.

*"I used to belong to a gym, but this is too expensive now."*

*"I would love to attend some art groups - but mixed ages, not just for older people."*

*"I grow plants for charity and to donate to community gardens. That gives me something useful and valued to do but I would rather be helping in schools etc. (ex-teacher). physically not able to and I am also a carer."*

*"Dealing with life's problems, seems to take most of my time... Would love to paint and try various crafts. Like studying when possible (OU). Would also like to do some volunteering, ideally in science research."*

*"Sadly, my main hobby of Old Tyme sequence dancing is no longer possible."*

## Nothing

Finally, **12** people said they were either doing 'nothing' or there was 'nothing available' to help them age well.

*"There is nothing within walking distance that is available to me."*

*"It would be nice to know what other activities are happening in the local area that I can get involved with."*

*"I ran our community group very well for 15 years we helped anyone who needed it with transport outings parties at Xmas Social gatherings etc. But today there is nothing the older people can attend. Such a pity."*

*"I don't do much. I can't afford it."*

*"We have no friends or hobbies."*





# 4. Feedback form responses



## Quantitative responses

This section of the report summarises the quantitative data from the online feedback form where respondents were asked to select the three most important factors to ageing well in Suffolk, and the three biggest barriers preventing them from ageing well in Suffolk.

The answer choices were based on the WHO framework guiding the project, but people could also offer 'other' written responses.

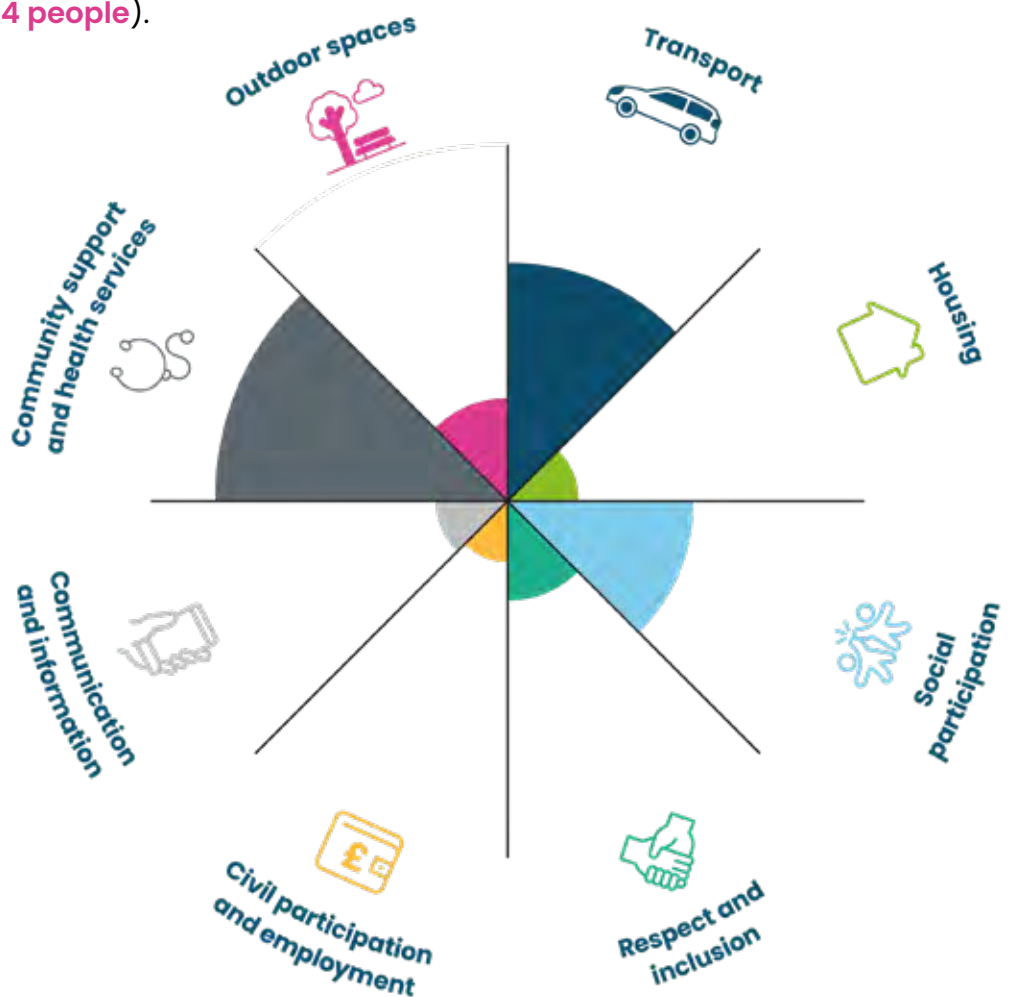
### Most important factors for ageing well in Suffolk

People were asked 'What three things are most important to help you age well in your community?'

The most frequently selected factors for ageing well were 'Access to community and health services' (**82% or 340 people**), 'Transportation' (**67% or 278 people**), and 'Opportunities to be social' (**52% or 214 people**).

The least selected factors were 'Opportunities for employment or volunteering' (**17% or 72 people**), 'Digital information and communication' (**20% or 82 people**), and 'suitable housing' (**20% or 84 people**).

More detail is shown in the graphic below.



**Graph:** What three things are most important to help you age well in your community? Respondent's selections.

## Barriers to ageing well in Suffolk

People were asked 'What three things are likely to prevent you from ageing well in Suffolk?'

The biggest barriers (most selected factors) to ageing well in Suffolk were the same domains identified as the most important to ageing well. Therefore, the biggest barrier reported by **73% (301 people)** was access to community and health services, followed closely by transportation (**72% or 299 people**). These were followed by opportunities for social engagement (**26% or 163 people**). The least selected factors were 'Opportunities for employment and volunteering' (**7% or 30 people**), 'Outdoor spaces' (**17% or 72 people**), and 'Respect and inclusion' (**25% or 101 people**).

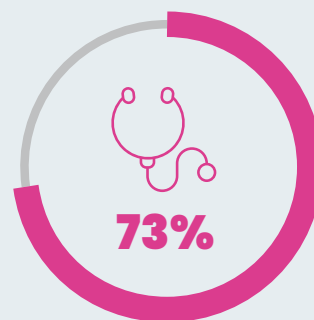
More detail is shown in the table below.

	Count	Percentage
Access to community and health services	301	73%
Transport and getting around	299	72%
Opportunities to be social	163	26%
Digital information and communication	108	26%
Suitable housing	106	26%
Respect and inclusion in communities	102	25%
Outdoor spaces and facilities	72	17%
Opportunities for employment and volunteering	30	7%

**Table:** What three things are likely to prevent you from ageing well in Suffolk? Respondent's selections.

Several respondents identified 'other' factors that were both crucial for ageing well and barriers to achieving it. These factors were consistent across both questions and included:

- Health
- Mobility
- Nutrition
- Exercise
- Finances
- Education
- Social isolation or loneliness
- Ability to keep warm (financial costs/poor housing)



**Most people said access to community and health services was a barrier to ageing well in Suffolk.**

## Additional support needs

The table below provides a breakdown of the most important domains and the biggest barriers to ageing well in Suffolk, split by additional support needs.

The tables show that all respondents indicated that the three most important factors for ageing well in Suffolk were 'Access to community and health services', 'Transportation', and 'Opportunities to be social'. However, respondents with two or more additional support needs also indicated the importance of 'Respect and inclusion' for ageing well.

Similarly, all respondents identified 'Access to community and health services', 'Transportation', and 'Opportunities to be social' as the biggest barriers to ageing well in Suffolk. However, for those with two or more additional needs, 'Suitable housing' was frequently identified as one of the biggest challenges to ageing in Suffolk.

	None	One	Two
Access to community and health services	78%	88%	79%
Transport and getting around	65%	69%	73%
Suitable housing	17%	16%	27%
Opportunities to be social	59%	48%	44%
Outdoor spaces and facilities	32%	33%	18%
Respect and inclusion in communities	26%	23%	44%
Opportunities for employment and volunteering	21%	19%	15%
Digital information and communication	19%	25%	16%

**Table:** What three things are most important to help you age well in your community? Respondent's selections and the number of self-identified additional support needs they selected.

	None	One	Two
Access to community and health services	69%	77%	75%
Transport and getting around	68%	79%	78%
Suitable housing	25%	25%	29%
Opportunities to be social	47%	35%	30%
Outdoor spaces and facilities	18%	20%	16%
Respect and inclusion in communities	25%	23%	27%
Opportunities for employment and volunteering	8%	6%	11%
Digital information and communication	28%	27%	23%

**Table:** What three things are likely to prevent you from ageing well in Suffolk? Respondent's selections and the number of self-identified additional support needs they selected.

## Locality

The tables below show the three most important domains and three biggest barriers to ageing well in Suffolk and the locality of respondents. In all districts, 'Access to community and health services' was considered the most important factor for ageing well, followed by 'Access to transport'. People living in east Suffolk were most likely to indicate this. 'Social opportunities' was the third most important factor across all districts, with people living in west Suffolk slightly more likely to indicate this.

The main barriers identified across districts were 'Access to community and health services' and 'Transportation'. However, people living in west Suffolk were slightly more likely to select 'Access to community and health care' as their biggest barrier, while those in east Suffolk more frequently selected 'Transportation' as their biggest challenge. 'Social opportunities' were seen as the third most significant barrier, particularly for those in east Suffolk and west Suffolk. 'Opportunities for employment' and 'Access to outdoor spaces' were least selected as barriers to ageing well in Suffolk.

	East Suffolk and Waveney	Mid Suffolk / Babergh	West Suffolk
Access to community and health services	81%	85%	82%
Transport and getting around	72%	64%	66%
Suitable housing	22%	19%	20%
Opportunities to be social	50%	50%	58%
Outdoor spaces and facilities	32%	29%	26%
Respect and inclusion in communities	31%	23%	33%
Opportunities for employment and volunteering	20%	17%	15%
Digital information and communication	18%	19%	24%

**Table:** What three things are most important to help you age well in your community? Respondent's selections and their locality.

	East Suffolk and Waveney	Mid Suffolk / Babergh	West Suffolk
Access to community and health services	73%	74%	75%
Transport and getting around	75%	74%	73%
Suitable housing	24%	28%	25%
Opportunities to be social	44%	32%	44%
Outdoor spaces and facilities	18%	21%	13%
Respect and inclusion in communities	25%	24%	24%
Opportunities for employment and volunteering	9%	5%	9%
Digital information and communication	24%	29%	26%

**Table:** What three things are likely to prevent you from ageing well in Suffolk? Respondent's selections and their locality.

**“I am on the wrong side of 75, but really don’t feel it. Whilst I live alone, I really enjoy and need social events. Luckily for me, there are many in my lovely village.”**

## Qualitative responses

The feedback form asked respondents to provide more detail about what is helping people to live well into older age and what gets in the way. This section of the report summarises the key themes that emerged from the 413 responses received. They are described across each of the WHO framework domains that have guided this project shown in the chart above.



### Featured highlights

From the web form responses, a total of 13 people were contacted for further information about their view on ageing well in Suffolk. They are featured throughout this section of the report as 'Suffolk voices' alongside a selection of comments gathered through engagement by Healthwatch Suffolk staff at the One Big Multicultural Festival event in Ipswich.

These featured highlights have been structured into the report according to the WHO framework domains with which they are most closely associated.





## Access to community and health services

Theme	Count
Need community and health services	65
Negative experiences	50
Physical access - Mobility and distance	36
Digital exclusion	28
Lost support or lack of support	20
Positive experiences	15
Service communication	6

### Need community and health services

**Sixty-five** people felt they would require accessible and frequent health care to support healthy ageing. While many did not share their current experiences in services, they acknowledged that ageing can lead to a natural deterioration of one's health and the potential of living with co-morbidities. Thus, highlighting the need for access to community and health services.

*"As people age health conditions often appear. The need to access medical help quickly is important to save lives and gain treatment."*

*"Health services are paramount. Increasingly, access is convoluted and complex. If you have complex issues the system is not joined up or user friendly."*

*"We all need access to health services at all ages, but especially as you are ageing and having to get used to not being as fit or able to do what you used to."*

**Five** people mentioned that preventative care and frequent check-ups are important to maintaining physical and mental wellbeing as people age. Ultimately, they help people remain active and connected in society.

*"Easy access to community and health services is paramount, both to ensure the healthy stay healthy via regular check-ups and advice clinics, and those with health issues can access the necessary expert treatment and advice."*

*"Access to health care: this is crucial- physical and mental impairment highly affects people's wellbeing. Preventative access to healthcare needed."*



A further **three** people emphasised the importance of access to health and community services for family carers. These comments highlighted that looking after elderly relatives or those with long-term health conditions can be difficult. Reliable support could prevent rapid escalation of concerns, exhaustion and crisis at home.

*"I look after my mum with dementia. It is so important to have access to NHS and local services, especially if they have age-related medical conditions, in my mum's case, dementia as well as other medical conditions. When this is not accessible, then simple trivial things turn into crises over time. It has been difficult to get support with care for Mum, resulting in me giving up a lot of my hours at work. Taking on the role of carer has impacted my life significantly in all aspects of my life."*

## Positive experience

**Fifteen** people shared positive experiences of accessing community and health services in their local area. GP surgeries were complimented for having friendly and helpful staff, as well as good availability of regular health checks. Two comments praised specific community initiatives for their dedication and support for those with age-related conditions like dementia.

*"Mum, 95, faired better having diabetes and was checked on a regular basis. She's also had a stay in [West Suffolk] hospital and was treated very well."*

*"Age 70, Diabetes 2.I must praise [my] surgery. They look after me. They allow me regular checks. Everyone is friendly, polite and helpful. It is always a pleasure to visit."*

*"The town is well provided for by GP services and pharmacies. Sadly there are no NHS dental services in the town or the immediate vicinity. This has a profound negative impact on everyone not just those who are more mature."*

Some comments from carers highlighted that people need guiding toward support as the health of loved ones deteriorates. Proactive help can prevent families from reaching crisis point.

**“***"I was my husband's carer for about two years until he had to go into residential care and we were at crisis point. Unless I found out about support by scrolling [the] internet (generally accidentally) I did not know where to turn. Felt very isolated and didn't know who to ask for help.*

*"When husband went into care did not know what to do to deal with finance for care or what I should expect or do to support him. No one contacted us to help us deal with this awful time."*

**”**

Access (or lack of) to health and care support was important to many respondents. Some (63 people) highlighted this by describing negative or positive experiences of service access in their locality.

“Over the last couple of years, I have had various health struggles with COPD and my prostate. Access to GP appointments is still very hard and often being told to wait months and months for scans to see if I have prostate cancer.

“This had a massive impact on my life and my family’s life due to the stress of waiting.”

“We have a good medical centre and can usually see a professional if necessary.”

“Good access to health care is very reassuring.”

“CATS has been very good so far.”

“Voluntary/charitable groups like Memory Lane Cafe, which has weekly meetings and regular outings, Musical Memories hosted by Music In Our Bones, and Headway’s Friday Club. There are so many wonderful people in the community who give their time and energy to enhance the lives of those struggling with ageing and age-related illnesses like dementia.”

“

“I am 86 and still living an independent life. I have long-term illnesses, so access to health services via hospital transport is very important to me. This helps me maintain self-respect and my individuality. I have lived in Suffolk for eight years and from personal experiences the excellence of the health service in this area are well above average.”

## Negative experience

**Fifty** people shared negative experiences of accessing community and health care services. People referenced poor communication, long waiting times, the lack of GP appointments, and poor follow-up care. It was clear that a lack of accessible and timely medical appointments and procedures in some communities had affected people’s mental and physical health.

“Getting a GP appointment is a nightmare, then actually getting seen and taken seriously is even worse. It’s scary to see how many tutorials there are online to ‘get your doctor to listen to you/take you seriously’.”

“I have recently had a serious health issue, and it took me three goes to actually get past the receptionist to get an appointment to see a doctor. On one occasion, I was even told



*that they encouraged people to take responsibility for their own health! Which, in fact, was what I was trying to do."*

*"Access to GP services gets in the way. Access is poor, there are far too many barriers in the way and no continuity of care. My health is suffering as a result."*

*"I find it increasingly difficult to get doctor or dentist appointments and worry that this will get worse."*

**Ten** of these comments were about an experience of local hospitals. Some highlighted concerns about chaotic conditions, poor diagnostic services, overstretched staff, and an apparent lack of respect towards patients.

*"We all hope to remain healthy, but there is no guarantee! Both my wife and I have experienced health issues recently, and while the WSH was wonderful once we were in the system, arriving there was not the best experience! A&E needs to be urgently reviewed, not just wait times but waiting areas. Sadly, this can be your first scary encounter with the NHS. Dignity should still be able to apply!"*

*"The hospital is chaotic with poor communication between departments."*

## Lost support or lack of support

There were **20** people who noted a perceived loss of community services in their local area as a barrier to being able to age well in Suffolk.

*"Services such as dentists, GPs, banks and post offices have just disappeared, affecting the mental health of those in rural areas."*

*"Sadly diminishing health care which has to be supplemented by private (costly) services."*

A few comments mentioned the closure of specific services. This included health services (such as pharmacies) and also support offered by voluntary, community, faith and social enterprise organisations that people felt had provided valuable support, guidance, and social connection.

*"I have dementia, so getting suitable support is hard. Suffolk Family Carers were running coffee mornings in Woolpit, which I enjoyed attending, but they have lost the funding for that."*

*"Age concern closed down in Suffolk, so it is hard to know where to go for help or advice."*

*"The closure of [our local] dispensary has made life more difficult."*

# Our trusted Insights

Our insights A- Z



## Relevant insights: What people tell us about local services

Timely access to NHS and social care has become an increasing challenge for many people in Suffolk, but not for everyone. Levels of positive sentiment within feedback about local services varies considerably across localities with some people able to access care and support easier than others.

A Healthwatch Suffolk briefing about access to primary care in Suffolk (October 2023 – September 2024) explored 1,294 comments about 79 GP practices. Just over half of comments were positive in sentiment. People rated services 3.9 stars overall, compared to a rating of 3.8 stars in 2022 (based on 900 reviews), revealing a clear lack of system recovery regarding patient experience since the height of the COVID-19 pandemic.

Our research in 2022 suggested long waits for hospital care were deeply affecting many aspects of people's lives (including their ability to care for others, mental health, employment, relationships and many other aspects of people's lives important to resilient ageing and communities. Ensuring adequate support for those affected by care backlogs must be a critical focus of any health or care system seeking to support healthy ageing.

In addition, [national polling from Healthwatch England](#) in 2024 and [data from contact with our Information and Signposting service \(2023\)](#) shows how access to dental care in Suffolk remains a considerable challenge for many people. This is something noted in a number of responses submitted to this ageing well project (even if experience of other services has been positive):

*"I feel that I have been supported by our local GP. practice, and I hear that from other people of my generation. The same can not be said of NHS dental care services, the lack of provision is marked."*

You can find more reports about lived experience of local health or social care (A-Z) on <https://healthwatchsuffolk.co.uk/ourresearch/>. That includes insights concerning COPD, end of life care, dementia, Menopause and perimenopause and more.



## Relevant insights: Temporary closures in local pharmacies

In 2024, Healthwatch England submitted a Freedom of Information (FOI) request to Integrated Care Boards (ICBs) asking them about permanent and temporary pharmacy closures. It revealed that 436 pharmacies closed permanently in England between 1 January and 31 December 2023 across 42 ICB areas. During the same period, 13,863 temporary closures were reported across 41 ICBs, resulting in 46,823 hours lost and an average closure length of three hours and 40 minutes.

In Suffolk and north east Essex, seven permanent closures and 184 temporary closures (879 hours) were reported. This compared to eight permanent closures and 778 temporary closures in Norfolk and Waveney.

These closures, and other challenges in the industry (such as medication shortages) are affecting people's experiences of accessing important medication that keeps them well in communities. For example, our local analysis of more than 260 reviews of local services in 2023 revealed how people had faced several issues when trying to get prescription medication, but 30% of the feedback was positive overall.

Issues included difficulties accessing medication, having to travel to multiple services to find medication stock, queues in services and inconsistent access to medication reviews in primary care. More information can be found inside our briefing:

<https://healthwatchesuffolk.co.uk/news/pharmacy-briefing23/>

## Physical access to services

**Thirty-six** respondents highlighted how people could face physical barriers to accessing services through distance, rurality and means of conveyance. Of these, **32** respondents reflected on personal experiences to highlight how healthy ageing could be supported by helping people to physically access services more easily in the future and ensuring localised provision of services.

*"25 miles from nearest three hospitals - concerns re emergency response times. Local care is good, but under pressure."*

*"Failing health would concern me, being unable to drive to most things."*

*"Living in Newmarket, it can be incredibly difficult to access medical appointments taking*

*place outside of town. Hospital visits are particularly difficult and involve travelling to either Bury or Cambridge. Transport links for both hospitals are difficult to navigate and not regular enough to avoid waiting around at either end for long periods of time."*

*"To get a blood test taken, I would need to drive at least 15 miles to Bury or Sudbury, as there is no clinic in Haverhill."*

*"Easy access to community and health services is paramount both to ensure the healthy stay healthy via regular check-ups and advice clinics, and those with health issues can access the necessary expert treatment and advice. A key corollary to the above is that people can travel to appointments, clinics etc reasonable easily, whether under their own steam or, where needed, have transportation provided."*

## Digital exclusion

**Twenty-eight** respondents described how an ongoing shift towards digital health services could create significant challenges for older people and those lacking digital literacy. Respondents commented that the NHS app, online booking systems, and digital check-ups were challenging for them to use and felt addressing this was important to an age-friendly Suffolk.

*"Medical surgeries with easier access online, so many different sites all nightmare to navigate even for computer savvy people."*

*"Not everyone has access to or can use the internet and computers sometimes because of cost and sometimes because they do not have the skills to do this. People lack knowledge of how to cope with the appointments systems..."*

*"I work in the hospital and am aware that the expectation of everyone going digital is really not helpful or inclusive for all patients, especially the elderly. Whilst some have the confidence and the means to have bought digital devices, and love using them, there are many who do not... services should have a duty to provide easily located, non-digital access via a telephone if not face to face."*

*"The ability and equipment needed to receive, take part, contribute, or simply fill in forms, get banking and health information and appointments is assumed. Not all have either a smart phone or the knowledge or inclination to use it. These folk are omitted from taking part by default."*

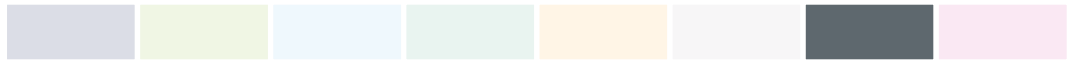
*"...it's almost the only way you can see a doctor."*

**Seven** respondents noted a preference for non-digital methods of communication, including telephone calls or face-to-face appointments.



***"Being digitally literate is now almost as vital as being literate. Doctors expect patients to book appointments, access hospital letters digitally..."***





*“Drs receptionist. Drs do not allow our choice of when to have face to face appointment.”*

*“I have memory problems and find accessing everything online nowadays daunting and impossible. I wish I was able to contact healthcare services by phone or in person. I am not able to remember how to log in to do these things online. I do not wish my letters and records to be online, I would like a hard copy in the post that I can read at my leisure.”*

## Communication by services

Six people highlighted several issues relating to communication with health care services. They included concerns about poor communication between hospital departments and a lack of follow-up medical care.

*“Ipswich Hospital chaotic with poor communication between departments. Hospital routine follow-ups fail to materialise.”*

A couple of respondents also expressed the need for clearer information, guidance, and practical advice beyond just leaflets about the support available.

*“Prime concern around ageing relates to my new role as a carer. I would hope that once dementia was diagnosed, I would be advised of what assistance is available.”*

### Relevant insights: Living with dementia in Suffolk

Comments about communication from services were also a feature within extensive Healthwatch Suffolk research regarding the needs of people living with dementia in the county.

Alongside a detailed report about people’s experiences, a set of key learning was published to shape and inform a co-produced dementia strategy and action plan for Suffolk.

More information about this work, and a summary of key findings and learning can be found on <https://healthwatchsuffolk.co.uk/ourresearch/dementia/>.

The apparent lack of information and support for those living with a dementia diagnosis was clearly highlighted by participants Peter and Teresa in a video published to support the research. Watch it by following this link:

<https://youtu.be/1YkFwfQS50Y>



## What people told us at the One Big Multicultural Festival (Ipswich)

People reported challenges in accessing community and health services in Suffolk. In particular, people wanted more support and recognition for family carers who experience financial and social sacrifices to look after their loved ones.

Concerns were raised about ageism within health services. People told us older people can feel dismissed, ignored, and treated with a lack of compassion by professionals. Some people also told us those who do not speak English as their first language and people with learning disabilities can find it hard to navigate services and find support.

*“There needs to be more support for family carers. There is a lack of acknowledgement of carers and what they do. Family carers often have to give up work which means a loss of income, loss of social life. I miss the adrenaline buzz of going into work every day. Lack of social and community connections and finances may impact my ability to age in the future.”*

*“We should be looking after and caring for our own family members and not relying on others. We should be identifying and recognising older people in our neighbourhood and using our resources, time, and effort to keep them safe.”*

*“Older people aren't listened to when attending the GP. I have been in pain for so long and no one is listening.”*

*“There is a lack of compassion for older people. Older people are forgotten about in hospital and often left without food or water. Whilst I can speak English well, I worry for those who can't.”*

*“I have learning disabilities so struggle to read and write. I have a diagnosis but don't know where to go for further support.”*

# K's views

***“I think my outlook on ageing might be a bit different. For me, this is finally a time when I can do things I have always wanted to do.”***



## Access to services

Moving from a small town in Essex to Ipswich has been quite a shift for me, especially when it comes to healthcare access. Back where I lived in Essex, medical facilities were limited, there was really only one doctor's surgery, and for hospital appointments, I had to travel to Colchester or Chelmsford.

Now, being in a larger town like Ipswich, I notice how much more immediate and accessible appointments are. I spent a lot of time choosing my doctor's surgery based on reviews, and I have found that they are very quick to refer me for follow-ups, even for non-urgent issues like my cataracts and exploratory tests for my kidneys as well. They are also great with regular preventative checks, so I have a diabetes check-up every six months or annually and I have asthma checks regularly. This preventative work is great and a reason why I have had such a positive experience.

I do wonder if part of my positive experience comes down to my being comfortable advocating for myself. So, I may come across a bit differently from other people, as I have a caring responsibility for my mum and now my sibling. Having done a lot of health advocating over the last couple of years, I might be more confident in talking

to medical professionals now. I'm 61, though people often say I look younger, so I might be perceived differently than someone much older. My mum, for example, is nearly 90, and she's much less confident and reserved when interacting with doctors, partly due to hearing issues. I know it's anecdotal, but I feel that might be why I am having a different experience to some older people.

I can definitely say that living in a bigger town compared to a small rural town has made healthcare more accessible. Now, I can easily catch a bus to the hospital, and it's so much more convenient compared to where I lived before, where public transport would take about an hour and a half each way.

## Caring role

Seeing the improvements in my mum's health has been emotional for me. Before she moved to the care home, she had six A&E admissions, often not due to medical issues but simply because she couldn't cope at home. The cost of her being in a care home might be high, but the strain on the NHS when she was repeatedly in the hospital was even higher.

Now in a care home, she is able to access all the outstanding medical appointments which she had previously missed because she couldn't book online or hear the automated



*“The stress of supporting elderly parents has a massive impact on the family’s health, and we are all ageing, so it impacts the next generation down.”*



menus on the phone. In the short time my mum has been in the care home her physical, mental, and emotional health has improved massively to the point it feels like I’m speaking to her from eight to nine years earlier because she was so unwell for so long. Basic things like booking appointments on the phone for people who are becoming more disabled in later life is stressful and prevents them from accessing services.

It’s clear that being able to manage my mum’s care more effectively has not only helped her but also lessened the impact on the rest of the family. My sibling’s mental health suffered a lot while they were living with our mum. They got so stressed by her declining health that they had to be sectioned and admitted to hospital for a while last year, and they are still receiving support for their mental health.

As for me, I had to put my own life on hold; I was doing a course at the University of Suffolk, which I had to pause because I couldn’t balance my studies with the responsibility of advocating for my mum. The stress of it all has even affected my health, I have needed changes to my diabetes medication, which I think is largely due to the stress of managing everything. The stress of supporting elderly parents has a massive impact on the family’s health, and we are all ageing, so it impacts the next generation down.”

## Education

One of the things I wanted to do for a long time was write a book. With both my daughters now grown and independent, I decided to enrol in university to finally pursue this. Although it’s been tough juggling my studies with care-giving, I am now in my second year and find the university environment really positive and supportive, especially for mature students.

I think my outlook on ageing might be a bit different because, for me, this is finally a time when I can do the things I have always wanted to do. During my marriage, there were a lot of things I had to put on hold, and now that my daughters are independent, I don’t want to waste any more time.”

## Attitudes towards ageing

I often notice misconceptions around ageing. As people visibly age, society’s attitudes do change. For people who are much older, the assumption can be that you do not understand and that can be hard for a lot of older people as they feel they aren’t being listened to. I think it happens a lot where there is this bias towards younger people and referring to the younger person in the room instead of speaking directly with the older person. It’s a shame; I think it makes older people feel disempowered.

There is also this assumption that older people have all the time in the world. In reality, just because you are older doesn’t mean you are time-rich or even money-rich. Many of us are still very busy, particularly those with caring responsibilities.

For healthcare professionals, I think it’s important to remember that just because older people might have different ways of understanding and communicating, it doesn’t mean they can’t engage in their own care. It’s more about meeting them where they are and not making assumptions based on age. It’s important for older people to still feel like they are part of their own healthcare decisions.

Lastly, one of the biggest things is economic stability. A lot of people I know locally are struggling financially, which makes it all the more important to have affordable options in towns like budget shops. This is one of my

biggest worries about growing older ensuring I can stay financially secure. It's something I think about a lot, and I know I'm not alone in that."



The charcoal drawing shows a tree similar to the kind the artist drew in her childhood. It captures the essence of life's imperfect journey, where the road is marked by both ups and downs, reflecting the inevitable changes we all face. As we age, we gain perspective, looking back on all the things we once did.

Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.

# Denise's views

*"..it's always our generation who hold things up because of community spirit & strong will to help others despite our own increasing health challenges..."*



## Access to services

My husband has complex health needs and is undergoing ongoing treatment and assessment, but the waiting lists stretch on for months and months. His medication helps manage his condition now, but he often needs urgent medical attention.

We live in a rural area and don't drive, so when he needs to get to A&E, we must find various ways to get to the hospital – by ambulance if one is available, by taxi, or community transport (though that must be booked in advance). My son helps when he's not working and we have good neighbours, but it's about having plans. Once we get to the hospital, we often wait in the ambulance for hours before being seen.

Things should improve because Ipswich Hospital is expanding its A&E from nine bays to 19, so there's hope that they can absorb more people. I've even spent one night sleeping on the floor under a bed when my husband was waiting for a ward. Once, he was placed next to a person who was dying in dreadful pain, with no screen separating her from the other patients. We could hear and see everything that happened. It was very distressing and disrespectful and showed a lack of care for all concerned."

A&E was often mayhem with people in need of care, dealing with drunkenness, anger, pain, and various dependencies and emergencies. I imagine the medical staff are under so much stress, which could cause them to be less caring than they should be, and they may protect themselves by inappropriate chatting. The health services face many demands. There isn't enough infrastructure but there are still lots who care in society. We often hear bad news, but we need to celebrate what we can and try to improve for the future.

## Solution to access

To mend the NHS, I think it comes down to investment and more money being spent. Cardiac and neurology services are among the most in demand, especially for older people. The infrastructure, facilities and staff training require more salaries to keep up. There has been serious under investment for many years and the population is rising rapidly. It's getting to the point where the infrastructure and staff levels are not sufficient to match demand. At the end of the day, we need highly skilled staff. This takes time to cover training and requires investment.

## Digital access

Things have changed a lot, and GP workloads



*"...young people aren't learning life skills as readily or how to contribute. I sometimes chat with young people in the village, and once they gain confidence and skills, they enjoy being involved. "*



need to be monitored so they don't burn out by heavy demands from an increasing population, especially as older people require more medication which has a cost to the surgeries.

The digital age has changed how people communicate, and while younger generations are more comfortable with it, older people are having to adapt to making appointments or getting results via smartphones. There is a real question mark as to how some older people are coping if they can't access the internet for health-related matters. Many need guidance to navigate what feels like an alien system.

I'm part of our surgery's new Patient Participation Group (PPG), and we're discussing how to help people with these new systems. We need to properly consult with people to learn what they are struggling with and give them a voice. It's about communication and consulting with people prior to a crisis rather than when we are in it.

## Transportation

Transport is another issue, and sometimes ambulance calls are not urgent. We used to have the first responder system which meant that people had already received some first aid or help before the ambulance service arrived. It's difficult to recruit to this service though because younger people are unable to fill the need due to family and work commitments. The older retired people who keep the First Responder Service going are often unable to continue for health reasons."

We have a new minibus in the village, which is good, but it's difficult for older people with mobility problems to get on and off, whereas the coach we used to have was much easier.

## Social interaction

It seems like it's always our generation, the over 60s who hold things up because of community spirit and strong will to help others and organise clubs, despite our own increasing health challenges and energy levels.

There is also an issue to support and guide younger people, including adolescents, who will one day be older people but don't seem to be integrating with older folk. We had youth groups and activities and had a lot of support as young people. We ran youth clubs and summer camps and evolved the community spirit. Now, young people aren't learning life skills as readily or how to contribute. I sometimes chat with young people in the village, and once they gain confidence and skills, they enjoy being involved. There is also a need to know about safeguarding and risk so everything becomes hard work before you can set any groups up.

I don't think we're doing enough to promote healthy living. What is important in life is to keep us functioning like healthy diet, exercise, calmness, wellbeing, social contact, financial security, low maintenance homes, transport access, safety both public and domestic. I think vulnerability must be supported and if you don't support your vulnerable ones they will suffer.

I don't think enough people think about getting older, and as soon as you have things removed you become isolated.



## Employment and volunteering

Theme	Count
Personal benefits of volunteering or working	12
Opportunities available	6
Barriers to volunteering & paid employment	5
Encourage people to keep working/volunteer	3

### Personal benefits of volunteering or working

**Twelve** people highlighted the importance of staying active through volunteering and paid employment as people age. They shared how volunteering provides a strong sense of purpose, fosters meaningful social contacts, and enhances mental wellbeing by keeping people connected to their communities. It also prevents social isolation and offers a ways to remain mentally and physically engaged. These positive experiences and benefits inspire many people to continue contributing through work or volunteering for as long as possible.

*"I plan to keep working and volunteering until I can no longer go on."*

*"Volunteering is good for mental health - sense and purpose, meeting, and feeling valued."*

*"I'm 64, in good health and retired. Being able to be an active participant in the community as a volunteer and in the company of and helping others is important to me. As I age, I want to remain part of this community, which works hard to be inclusive and support those who require help."*

*"I like to volunteer and be sociable. I enjoy meeting people and being supportive where I can. I like to keep active and attend regular exercise classes."*



*"For me it's important to either work or volunteer until I am of a age where I can no longer do this."*

*"As long as those opportunities are there it brings the important aspects of being social as well as feeling worthwhile and being able to make a difference".*







## Opportunities for paid & voluntary work

**Six** people emphasised the importance of keeping older adults mentally and physically active through flexible opportunities like volunteering and part-time work. They described how this enhances social interaction and community involvement. Multiple respondents commented on various community volunteer opportunities, including charity shops, clubs, and religious organisations.

*“There are many openings for volunteer jobs, charity shops, pop-up food markets and community hubs. All the churches run clubs, coffee mornings and weekly religious meetings as well as Sundays.”*

**One** respondent argued that larger local businesses and schools should be encouraged to offer more opportunities for older people to volunteer. They suggested it would help to foster intergenerational connections and strengthen community relations.

*“More opportunities to volunteer at local businesses could be encouraged just so that people can still communicate. The older generation is good at bridging age gaps and bringing people together... School volunteering should also be encouraged; a lot of children do not have extended family, and it may be a good influence for teenagers and make the older generation more acceptable and not so likely to be victimised if they are seen as part of society.”*

Another respondent commented about the importance of knowing where to find opportunities to volunteer or work part-time as they get older.

*“It’s important that I can have the flexibility of hours as I get older. I feel having opportunities to be part-time or volunteer when I am closer to retirement age would be great for me and support my mental health. Although, I don’t know how to find this information out and am unsure what opportunities might be available to me.”*

## Encourage others to work or volunteer

**Three** people felt it was important to encourage older people to return to or remain in the workplace after retirement. They felt these environments offer a sense of purpose and the opportunity to contribute meaningfully to communities.

*“We also need employers to encourage older people back into the workplace after retirement. This can be very beneficial, and I still work even though I am in receipt of my workplace pension.”*



*“Since retiring two years ago I have struggled with boredom and loneliness.”*

*“I have considered going back to work part-time but have struggled to find any opportunities that suit older people.”*





*“More opportunity to volunteer at local businesses could be encouraged just so that people can still communicate. The older generation are good at bridging age gaps and bringing people together, they have after all a lifetime of experience to offer and share with others. What large workplace wouldn’t welcome someone cheery to offer a tea round or make lunches and would be beneficial to all. School volunteering should be encouraged, a lot of children do not have extended family and it may be a good influence for teenagers and make the older generation more acceptable and not so likely to be victimised if they are seen as part of society.”*

## Barriers to volunteering and paid employment

**Five** comments highlighted several barriers to continuing employment or volunteering as people age. For instance, barriers to volunteering included limited public transportation options and a lack of funding, which can lead to the closure of groups and services and reduced opportunities. Financial constraints were also mentioned as a significant barrier to volunteering.

*“Volunteering is not an option for me as I need to be able to afford my bills and transportation. I don’t drive, and my pension doesn’t cover any of these.”*

*“Volunteering could be restrictive to older people where transport is difficult. But many of the amenities (i.e. libraries, museums etc.) would not exist if they weren’t supported by old people.”*

**Two** comments also mentioned that it becomes increasingly difficult to find suitable jobs as people age, particularly when managing health conditions.

*“Since retiring (two years ago) I have struggled with boredom and loneliness. I have considered going back to work part-time but have struggled to find any opportunities that suit older people.”*

*“I have had some recent health issues which I have struggled to get help with until recently. I am only 53, I am worried that this will continue as I get older. I am also concerned about getting a job after my contract finishes next year, As I get older, it seems more difficult and now with a long-term health condition it is going to be even harder.”*

## What people told us at the One Big Multicultural Festival (Ipswich)

One person highlighted the need for better pay and benefits for carers to create a workforce that can adequately support our ageing population. Another person shared concerns over the challenges of ageing alone, fearing they might struggle on their own when they can no longer work.

*“I am still able to work, but if the time comes to where I can no longer work, I think I will struggle on my own.”*

*“We need improved benefits for carers such as pay remuneration to ensure there is a workforce to help people as they age.”*



The charcoal drawing features a landscape of stacked houses and high-rises symbolising the dense housing estates and urban development where the artist lives. Among these towering structures, a single bungalow stands apart to highlight the lack of social housing in the region. From the chimney of one house, a trail of smoke represents the privilege of those who do not have to worry about the cost of living or the struggles of keeping warm.

Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.

# Robert's views

**“When you get older you get to do the things you couldn't when you were younger. So why waste your time sitting around.”**



I was born in Essex and raised in Suffolk and moved back to Leiston where I spent my teenage years and met my wife, just over a year ago. For almost 40 years we lived in Lincolnshire, Yorkshire and then Norfolk, but love being back in Suffolk. We feel as though we've come home.

## Career

I've had a varied career, sometimes employed but mostly working for myself. Over the years I've had more than 20 books published, with my first book being published in 2002. My most recent, *Where Are the Fellows Who Cut the Hay*, builds on those by oral historian George Ewart Evans, and I plan to continue writing about people and place and am currently working on a book titled *Down to Earth* which will be published early in 2026.

I'm 69 now, an age when most are content to potter in the garden or watch TV, but as an author, I can continue to work, and be recognised and valued, into old age. For my next book I'm meeting lots of interesting people, from gardeners to farmers, naturalists to naturalists, archaeologists to climate change activists. Keeping busy and keeping engaged in the world keeps me young.

I'm reading a lot too, enjoy long bike rides and have a weekly personal training session at the

gym. I'm lifting more weight now than I could 10 years ago. Age is after all, just a number, not an excuse for inactivity.

I've also started Leiston Book Festival, which focuses on nature writing. We had more than 100 people at the first one and already, people are signing up for the 2025 festival, which will take place on Saturday 20th September. When you get older you can do the things you couldn't do when you were younger. So why waste your time sitting around.

## Education

It has only been in the last few years since taking a creative writing MA at UEA that I have changed the genre of what I write about. I didn't go to university when I was young and so, to go at 64 was amazing. I spent a whole year suffering from imposter syndrome, thinking I shouldn't be here. This time out really provided me with an opportunity to look at how I spent my time.

George Bernard Shaw once said that 'education is wasted on the young'. What he didn't say, so I'll say for him, is that you really are never too young to learn, to develop new skills, and embark on a new career. For my MA group I was in a group of 14 people who came from all over the world and were aged between mid-20s to mid-70s. I think people



*"I'm reading a lot too, enjoy long bike rides and have a weekly personal training session at the gym. I'm lifting more weight now than I could 10 years ago. Age is after all, just a number, not an excuse for inactivity."*



need to be encouraged to do it, whatever age they are. Going back into education at 64, after more than 40 years was a life changing experience.

### Thoughts of ageing

I still drive but I know there will come a day when I don't want to do that anymore. The thing is you get to my age, and you know what is coming having seen parents, uncles and aunts grow old and die. You can keep old age at bay for so long, but eventually, I know I will become less able and then die.

I think it's important to just try new things as well. I started playing piano at 60 and I am now between grade four and five. It's important to make time for that because I will be able to enjoy playing the piano when too old to go to the gym or out on my bike.

I think one of the biggest barriers to ageing is around the NHS and access to health because it is such a clunky system. They still write letters, use faxes and expect you to ring and wait in a queue to get an appointment. I live with depression and have to be quite resourceful at times to navigate the system and get the help I need. I find my GP practice in Leiston more responsive than others I've been with, but you really shouldn't have to game the system to get what you need.

Finally, nobody in my family has reached the age of 90, so I'm expecting to die in the first half of 2045. I might live longer but knowing that I have 20 years left means I can make sure I use that time wisely.



*"I find my GP practice in Leiston more responsive than others I've been with."*

***"..But you really shouldn't have to game the system to get what you need."***



# Tony's views

***"It's hard, but I find it hugely rewarding to give back to these people, even if it puts just one more smile on their face than they have had before."***



## Volunteer & employment & social participation

I'm a golf professional by trade and general manager of Seckford Golf Club near Woodbridge. I've always passionate about helping people.

My mum had dementia for 13 years, and now my dad is in his 90s and no longer really knows anyone. I started volunteering at Ipswich Town Football Club's Golden Days Café for people with dementia, and that's where I met Wendy from Home Instead. We got chatting, and I realised that, with her help and that of Home Instead, we could do something similar at the Golf Club.

I was keen to offer people the opportunity to get outside, be active and use the golfing facilities. Golf courses are wonderful places for people to come to because they're nice

open spaces. Walking on uneven surfaces is great for maintaining mobility. It's good for the person's strength and their control, and it keeps their minds working actively.

Seckford Golf Club (with the support of Wendy and Home Instead) have been offering dementia golf sessions for two years now. We started with one session a month and have extended that to two. We are struggling to cope with the amount of demand there is because once people have tried it, they want to keep coming. We could fill all our time just with dementia sessions. That's why I'm trying to get other clubs to come on board.

We have a fantastic team of over 25 volunteers of all ages, all who have received dementia awareness training. A few of our volunteers come from other golf clubs in the area. We limit the sessions to 12 people with dementia and 12 carers to make sure we can provide 1:1 support.



***"We are struggling to cope with the amount of demand there is because once people have tried it, they want to keep coming. We could fill all our time just with dementia sessions. That's why I'm trying to get other clubs to come on board."***



The volunteers love it, they get bought into it. It is like a big family now.

During our sessions, if people are able, we take them out onto the range. If someone with dementia has played before, they can remember what to do. The enjoyment they get from hitting a golf ball is amazing. Carers have the option to play golf, relax inside with coffee and cake and have some time to themselves while we look after their relative for a couple of hours. It gives them a little bit of time for themselves and a little bit of a smile. Sometimes people just want someone to talk to, and so we just listen.

It is hard, but I find it hugely rewarding to give back to these people, even if it puts just one more smile on their face than they have had before.

Through this work I have made contacts with people across the country. I've become a bit of a font of knowledge about dementia. I have big dreams that the golfing community can unite behind this and that more golf clubs will become healthy ageing centres, giving up their course for just a couple of hours a month to help people with all sorts of disabilities.





## Respect and inclusion

Theme	Count
Ageism, stereotypes, & discrimination	12
Treatment & understanding of older people	10
Inclusion of older people	6

### Ageism, stereotypes, and discrimination

**Twelve** people commented about experiences of ageism and perceived negative stereotypes regarding older people. People considered that negative attitudes toward older people can lead to feelings of being undervalued and disrespected in communities.

*"I notice how hostile people are to older people sometimes and how often there are facilities for children, young parents, and disabled people but none specifically for retired or older people. We are often perceived as a nuisance, slow or appear to be largely invisible."*

*"Lack of respect by people for older people i.e. even just giving people time to cross the road without revving engines is a simple example. Need more media promotions with older people in. Just because older people are older doesn't equate to them being useless."*

*"The current riots across the UK have highlighted issues of racism and prejudice that are distressing for myself and other members of the BAME community."*

*"I feel people often think about getting older in a negative way and view older people negatively. As if we are incapable, stupid, a burden, and draining public resources. These views makes me worry about getting older as I don't want to be seen in that way. I'm very capable and have worked hard my whole life."*

*"All services discriminate on age and disabilities. My wife and I get this all the time."*

There was also a perception that younger people's needs may be prioritised ahead of those who are ageing, especially with regard to healthcare and public spaces.

*"A society that is so skewed to the support of children means that young people's views and needs are often put before those of older people. Today, as an older person, I can now feel invisible - I'm often ignored in supermarkets or shops or seen as a nuisance when changes are brought in, and I ask for help. Some-times I'm belittled."*

*"Older people have poor choices about housing and fewer rights than younger people expect. They are still treated like children and not consulted in aspects that affect their lives."*



**“There seems to be a general lack of respect for ageing people. Maybe a belief we have nothing to offer, without realising the extent to our education and experience.”**



*“Respect and inclusion is something that I worry about due to my mum having Alzheimer’s. Travelling this journey with her is not only stressful for me, despite her being in a care home, as you continue to be a carer and now challenge to promote her dignity... Going around the county, Suffolk is not dementia friendly.”*



## Treatment and understanding of older people

**Ten** people commented about poor treatment and a lack of understanding and respect for older people. People suggested this could lead to people feeling disrespected, undervalued, invisible, and ignored.

*“I notice how hostile people are to older people sometimes and how often there are facilities for children, young parents, disabled people but none specifically for retired or older people. We are often perceived as a nuisance, slow or appear to be largely invisible.”*

*“Respect for older people is not always given, we are pushed aside and treated as being invisible. Also people in supermarket queue are often impatient and make it known.”*

**Three** people criticised the healthcare system for a perceived lack of empathy and failure to address the specific needs of older people. Some described how this was leading to feelings of isolation, frustration, and belittlement by health professionals.

*“It’s scary to see how many tutorials there are online to “get your doctor to listen to you/take you seriously.” You end up doing their job for them by looking up your symptoms, then get laughed out of the building for being “a Google doctor” there’s no winning.”*

*“GPs, nurses and welfare staff, in general, have little knowledge or understanding of older people’s needs – they have no time to talk, no time or desire to build relationships and understanding of the older people they meet and supposedly care for.”*

## Feeling included

**Six** comments mention the importance of involving older people in decision-making and community activities. The ability to participate in decisions that impact people’s lives and communities was seen as important alongside the opportunity to express views and become involved in social events.

*“I am sure all people feel a need to belong – so being respected and heard and valued are critical. This means having opportunities to participate, share views, give others help, advise and support as well as receiving such support.”*

However, **two** comments highlighted barriers to older people’s involvement in community activities, including limited transport and disabilities that can lead to exclusion and feelings of isolation.



*"Being disabled, I am excluded from a lot in the village and transport is minimal. I do not see anyone to talk to except my hubby when not at work."*

**Two** further comments emphasised the importance of intergenerational involvement specifically to encourage respect and inclusion across people of all ages.

*"Being included and welcomed with respect in cross-generational groups is vital for the happiness and wellbeing of all older people so their worlds don't become a 'silo' of older people only."*

### **What people told us at the One Big Multicultural Festival (Ipswich)**

People expressed concerns about respect and inclusion, particularly with regard to access to healthcare. One person shared their frustration at not getting the support they need from their GP. Another person felt there had been a lack of compassion for older people in hospitals after they were left in pain for long periods of time and felt racially profiled when questioned about their need for a wheelchair.

*"I have lived and worked here for over 20 years, and I can't get support from the GP."*

*"There was a lack of compassion for older people at hospitals. Since covid it has become significantly worse. I was left for hours in pain and believe I was racially profiled when asked if I 'actually needed the wheelchair'."*

# Magdalena's views

*“Ageing is a process that awaits all of us.”*

A submission by the Polish Community Hub



## Ageing well in the Polish community

When we opened the Polish Community Hub for our vibrant Polish community, we knew our services would extend beyond the young. Our Polish community in Ipswich includes people of all ages, like Malgorzata's 60-year-old mother. It's a wonderful age but comes with its own needs and challenges; however, she is able to age with dignity through access to healthcare and technology in England.

For the wider Polish community, 'ageing well' means growing older with dignity and maintaining independence through access to healthcare, social engagement, and community support. While technology plays a key role, many older Polish individuals struggle with using digital platforms, so the support of community hubs is crucial. Respect, inclusion, and the ability to participate in both social and community life is essential for ageing well.

## Language barriers

There are several challenges older Polish residents in Ipswich face as they age, including language barriers and unfamiliarity with technology, which can make accessing community and healthcare services difficult. For instance, booking appointments or navigating English language platforms is

often a struggle without support. The Polish Community Hub addresses this by offering free English lessons and assistance with communication.

Language barriers and limited English proficiency fuels social isolation among older Polish individuals because it makes tasks like buying bus tickets, using public transport, and participating in social activities harder. Thus, impacting their ability to travel independently, access services, and socialise with others. The Polish Community Hub aims to foster connections and provide a space for social interaction, counteracting this isolation.

## Respect & inclusion

Ensuring that older Polish individual feel respected and included in both the broader community and the Polish community is essential to their overall wellbeing, particularly given the challenges of ageing in a foreign country.

## Digital technology

The 21st century reliance on digital technology can be a barrier for older members of the Polish community. Many struggle with technology, making it harder to access services or communicate with others. The Polish Community Hub helps bridge this gap



*“Our Polish community in Ipswich includes people of all ages, like Malgorzata’s 60-year-old mother. It’s a wonderful age but comes with its own needs and challenges; however, she is able to age with dignity through access to healthcare and technology in England.”*



by offering support with digital platforms, through this remains a key challenge for those ageing in Suffolk.

Ultimately, while technological progress opens many doors to the modern world, the community hub’s personal touch and ongoing support are vital to ensuring older Polish individuals can age with dignity and connection.

Nothing can replace the warmth of a conversation over a good cup of coffee.



## Digital information and communication

Theme	Count
Expectation for digital literacy	30
Need for alternate non-digital solutions	16
Access to digital support	13
Improving digital infrastructure	6
Fear of safety and security	4

### Expectation for digital literacy

**Thirty** responses considered that digital exclusion could make it harder for people to access important services like healthcare, banking or shopping as they age.

*“The ability and equipment needed to receive, take part, contribute, or simply fill in forms, get banking and health information and appointments is assumed. Not all have either a smartphone or the knowledge or inclination to use it.”*

*“Many older people lack IT confidence or even access to Wi-Fi and laptops, etc., and the skills they’d need to use them. Our world increasingly expects access to IT and knowledge of how it all works.”*

People also described the impact reliance on technology has on their wellbeing and ability to be independent. This included **three** comments about reliance on friends and family to navigate digital systems or technology.

*“Digitisation is making everything more complex and excludes many older people who then rely on family and friends to help making one feel helpless.”*

### Need for alternatives to digital solutions

**Sixteen** respondents felt it was important for services to continue to provide non-digital solutions for those who are not comfortable or able to use digital platforms. This included the importance of ensuring people could access face-to-face appointments, receive physical letters, pay services with cash and maintaining a presence of essential services on high streets.

These are sentiments often noted by Healthwatch Suffolk Engagement and Community Officers when visiting local NHS services. In a recent briefing about local access to GP services, they described how it is common for older people (though not exclusively) to express that they prefer face-to-face engagement with professionals. Many consider face-to-face contact



**“Being digitally literate is now almost as vital as being literate.”**



offers the best possible quality of care and comment that appointments, including reviews, should not be completed over the phone or online. People often do not view a telephone conversation as ‘an appointment’, even if the contact has addressed their concerns.

People felt that critical services have a duty to provide non-digital solutions to ensure that nobody is excluded from accessing support or services.

*“Whilst some have the confidence and the means to have bought digital devices, and love using them, there are many who do not and I believe that services should have a duty to provide easily located, non-digital access via a telephone if not face-to-face.”*

*“I have memory problems and find accessing everything online nowadays daunting and impossible. I wish I was able to contact healthcare services by phone or in person. I am not able to remember how to log in to do these things online. I do not wish my letters and records to be online, I would like a hard copy in the post that I can read at my leisure.”*

**Six** comments reflected on increased digitisation for access to things that have been commonplace in local communities. This included the need for older people to make use of digital services for banking, paying for parking in their local town, and online grocery shopping.

*“If shops cannot remain economically viable in the town centre, I would find it more difficult on a day-to-day basis, as I prefer not to use online grocery options.”*

*“Parking in our nearest town is becoming more difficult with an increasing move to digital technology as opposed to cash or card payments. Trying to make a digital payment with bad phone signal does not work, and some of the apps add their own surcharge for using their service, making parking even more costly.”*

*“Paying for car parks, lack of acceptance of cash by shops is very excluding if you don’t have a mobile phone. I was asked to photograph my meter and send it to them online, I had to ask a neighbour to do it for me, causing all sorts of complications. There was no phone number on the letter, not even to discuss it with them.”*

## Access to digital support

**Thirteen** people needed support with using digital technology and felt access to practical help in local communities could assist people to build digital confidence.

*“I have had to do a lot of official work online and have no help. It is stressful and tiring, and often unproductive. I wish there was an easy helpline locally, and not an online Bot!”*  
*“Groups could be set up in rural areas but often need help to get started and provide support. At group meetings, phones/laptop technology could be explained so that people do not feel isolated from communication.”*



**One** person described a positive experience of technological support in the community.

*“Tech Hub at Hope Trust and facilities at The Library, i.e. Barclay’s Bank and a representative from the Council helped me navigate forms on a smart phone.”*

## Improving digital infrastructure

People recognised the benefits of digital technology in staying connected, maintaining independence, and accessing essential services. However, **six** people mentioned connectivity issues, such as poor broadband and mobile signals, as barriers to fully enjoying these advantages.

*“Internet is poor – no fibre. I loose broadband at least three times a year, my land line has been digitalised. I live alone. It all adds to the fear of not being able to be independent.”*

*“Live in a village and if I didn’t/couldn’t drive my options would be very limited. Reliable quick broadband is a MUST to enable people to do anything – banking, communicating, shopping, etc.”*

## Fear of safety and security

Finally, **four** people mentioned being fearful of being scammed, hacked, or having personal data compromised, which was adding to their reluctance to engage with digital platforms.

*“Scams, hacking – elderly people are petrified of banking online. It’s a generational fact that the elderly prefer a human voice and not a robot, prefer to meet a person face-to-face rather than on a telephone.”*

*“What I fear is being made to use all the up to date digital solutions but not being able to get help if I am hacked, cloned or scammed.”*

## What people told us at the One Big Multicultural Festival (Ipswich)

People shared concerns about digital exclusion of older people. They highlighted the challenges older people can experience in staying up-to-date about local services, activities and social events due to limited digital skills and technology. This was seen as marginalising older people and making it difficult for them to access health care. There was also concern about diminishing use of cash in everyday transactions, which some felt further isolates those uncomfortable with digital payments.

*“Digital exclusion: We need to think about those who don’t operate technology. How do they stay up to date with services that are available.”*

*“Digital technology is marginalising the older community. We can’t access health care easily or find information about events.”*





The charcoal drawing portrays a tree of life, symbolising the ever growing and evolving journey of ageing. The branches spread wide, showing the experiences gathered over the years. In the early years, life seemed simple, almost black and white but now it thrives in shades of grey – where the true essence of life lies. In all it represents that life is never just one thing but a blend of everything we've ever seen, learned and lived through.

Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.



## **Relevant insights: Prescription Ordering Direct (Waveney)**

In 2023/24, the NHS Norfolk and Waveney Integrated Care Board (ICB) revealed plans to close its Prescription Ordering Direct (POD) service.

Our team independently processed more than 10,000 comments from over 2,000 people who responded to an NHS survey about the proposals, including many older residents. In total, 21% (514) of respondents were digitally excluded (e.g., they did not have access to devices, or lacked skills or confidence to use NHS digital services), and felt reliant on the service for access to their medication.

Many of the responses to this NHS engagement are similar to those received as a part of this research, reflecting a sense that many older people either cannot, or do not wish to, embrace digital means of connecting with services. This might be because they lack the resources to pay for devices, experience poor internet connectivity, lack skills to navigate digital devices or services or quite simply do not have any desire to engage in the digital world.

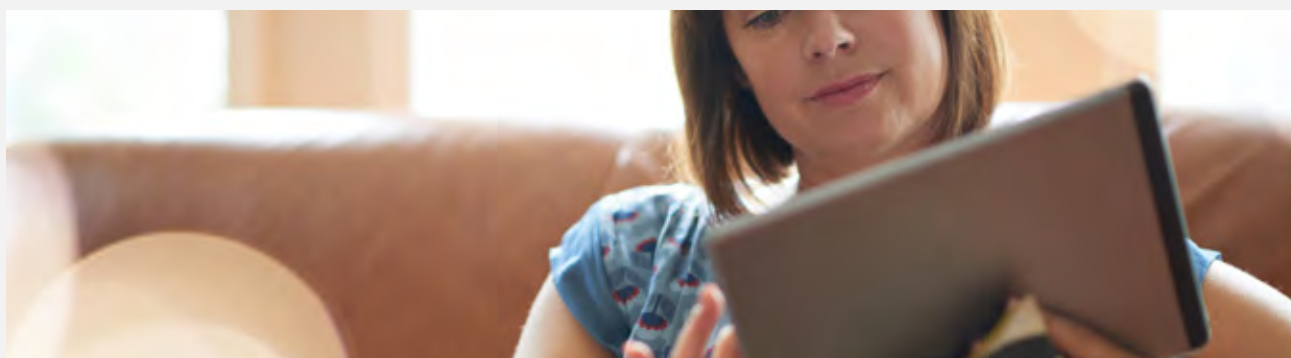
Examples of feedback received included:

*“At my age I struggle with big changes, and I am not into technology. I do not use the internet and don’t want to. I have a mobile phone for emergencies, but I don’t ever use it and leave it switched off mainly. I want to keep my independence, and this is highly important to me. Being able to phone POD means I can order my own medication, without any help from anyone else.”*

*“My mum who is 80 uses it to order her own and my sister (who has Down’s syndrome) medicines. I have tried to teach her how to use the app but she can’t get the hang of it. She has arthritis in her hands and finds using apps difficult. Since we discovered this service, it’s been so helpful as our Dr does not allow prescription requests by phone anymore.”*

This findings prompted the ICB to make supporting vulnerable and digitally excluded patients to manage their repeat medication requests a priority. You can read about its approach, and find our report for the ICB on:

<https://healthwatchesuffolk.co.uk/news/the-norfolk-and-waveney-prescription-ordering-direct-pod-service-has-closed-so-what-happens-now/>



## Guiding principles to prevent exclusion in Suffolk

Evidence suggests that by not having the skills or the means to use online services, people are at risk of poorer health, reduced income and even a lower life expectancy. That includes everything from accessing information about health through services, to seeking advice online or ordering shopping for daily essentials.

That is why, in 2021, we co-produced a set of 'Guiding Principles' for people commissioning or delivering digital health and care. They were developed following extensive research into people's experiences of using digital services, and what is needed to make sure everyone is still able to access care long into the future.

Following the work (in 2022), a Suffolk County Council Policy Development Panel recommended a series of actions to reduce digital poverty and its effects in Suffolk (including the adoption of our principles into Suffolk County Council digital service planning and policy). The principles have also been written widely into the digital strategies of providers and commissioners across the NHS, helping to establish a 'digital first, but not digital only' approach to service delivery in Suffolk.

You can read about our research, and download the 'Guiding Principles' on [www.healthwatchesuffolk.co.uk/digitalhealthandcare/](http://www.healthwatchesuffolk.co.uk/digitalhealthandcare/).



*"Using technology that is inaccessible to older people is an effective way to silence us."*



# Joyce's views

***“Getting out and connecting with others is very important to me.”***



## Outdoor spaces

I moved to Suffolk from Hertfordshire 18 months ago with my son. I'd lived in Watford for nearly 80 years, but we decided it was time for a change.

Living near the M25 and M1, we dealt with a lot of air pollution, so we wanted to move somewhere with cleaner air. We have visited Suffolk in the past for family holidays and knew what a nice county it was. I liked the idea of living near the sea again. When I was a child, my family lived in a seaside town on the south coast, and I have very fond memories of that time.

I also love to travel and see new places. My son has a camper van, and we often travel around the country. I try to make the most of my National Trust membership. Since moving to Suffolk, I've noticed a big difference

in the air quality, and I find the food here much nicer, as so much of food is sprayed with chemicals these days. I also love the fact that there is easy access to the sea.

Some places and councils are so mean and make it difficult for people to get down to the coast and sit by the sea, but not here.

## Social participation

I feel really lucky that we have found such a nice place to live.

The people here are really friendly, and we have settled into the community quickly. I joined the Hollesley Welcome Club, which meets twice a month in the village hall. It's a great way to meet other members of the community over a cup of tea and a game of scrabble or bingo. They also organise coach trips to garden centres, and the theatre too.



*“I know some members of the Welcome Club have difficulty with technology. I've heard there are lessons available to learn those skills, but they are several miles away and it's hard for people to get there.”*



The Meet Up sessions meet every Thursday in the village pub. When I celebrated my 100th birthday recently, they threw a little party for me, which was lovely. I also attend the church when I can. Getting out and connecting with others is very important to me.

## Transportation

Transport is an issue though. It's a long way to a bus stop. I rely on my son to take me to places. When he's not available, I use the local volunteer taxi service, which is fantastic. There are 12 volunteers, and someone is usually able to help.

## Digital technology

Although I have a mobile phone, my son helps me with accessing anything on the internet. I know some members of the Welcome Club have difficulty with technology. I've heard there are lessons available to learn those skills, but they are several miles away and it's hard for people to get there.



*"I feel really fortunate that I have such good friends and neighbours. People who help me out when I need it."*



Joyce and Helen celebrated Joyce's 100th birthday at a local Meet Up event.

You can read Helen's views on ageing well from page 78 overleaf.



# Helen's views

***"I get a great deal of personal satisfaction from knowing that I am helping to address a need within the village."***



## Volunteering & employment

I'm 87 and still pretty active, as I have been throughout my life. I'm just made like that; I can't help it.

Helping people has always made me happy. I'm not one for just sitting around and chatting about nothing much. I want to be doing something worthwhile, so if I think there is a need, then I want to try help and find a solution. Over the years, I've contributed to my local community in various ways, and I get a great deal of personal satisfaction from knowing that I am helping to address a need within the village.

When my family was young and I wasn't able to work, I took up handloom weaving. Later, I learnt to do machine knitting and started to design my own things. At one point, I made 80 pairs of mitts and sold them to raise money to have solar panels installed on the village hall. In 2005, we had a village appraisal to identify

what the local community needed. I said we needed better communication as we only had a little church newsletter that didn't say very much. So, we started 'Village Voices', and I was asked to be the first editor. I did that for 10 years. It started very humble, just 20 pages in black and white, and now it has grown to 40 pages all in colour. I am not on the editorial team now, but I do still contribute to two articles in each edition of the magazine.

I also served on the Parish Council for a few years, although I found it a bit frustrating because things didn't happen fast enough for my liking. However, it was during this time that I heard about Community Action Suffolk's Good Neighbourhood Scheme. I didn't think we needed it as this is a fairly safe community here, but what I did feel we needed was something to help people, so that's how we started Good Neighbours.

At first people didn't take us up on our offer to help, I don't think they really knew what to



*"Helping people has always made me happy.*

*"I'm not one for just sitting around and chatting about nothing much."*





*“I’ve lived in Suffolk for over 60 years and most of that time I’ve lived in Hollesley, and I have no plans to move because I love it here. I have a garden that I am letting re-wild, and I love to be able to sit there with a cup of coffee and enjoy the peace and quiet.*

*“We have got so much going on in the village too, so many things to be involved in, and while I am still able to contribute to my local community, I will do so.”*



ask for or they didn't like to ask. So, we started Meet Up sessions every Thursday at the pub. This allowed us to connect more directly with people, especially those who were on their own, elderly, and lonely.

We learnt that what they needed most was transport, because although we have a demand responsive service here in Hollesley, it doesn't really do what people want it to do. We don't have a public bus service out here either, except one bus that goes into Ipswich at 07.30 in the morning and comes back at 6.00pm, and that's no good for elderly folk who want to go shopping in Woodbridge.

So, the Good Neighbours scheme organised a team of volunteer's drivers to help people get to medical appointments, the train station, or even just go shopping. We now have 12 volunteer drivers, and the system runs efficiently through a WhatsApp group.

### **Development of new social groups**

Currently, I'm working on trying to start a Men's Shed in the area. I noticed that it was mainly ladies coming to the various clubs and events we had in the villages, and I thought we need something specifically for men. There's still a lot to consider, but we've received some great advice from Community Action Suffolk and the Ambassador for Men's Sheds about how to get it going and what grants we can access.

### **Digital challenges**

Digital access is another real issue for some people, and I've been thinking we should offer some lessons. This could be something we incorporate alongside the Men's shed. A lot of people who come to the Meet Up sessions have a mobile but don't really have a clue what to do with it.

Several years ago, I went to some free classes in Woodbridge for retired people. It was enough to get me going on the basics, but I learnt most of my IT skills when I was working on the Village Voices magazine. I am probably more able than most of my contemporaries now, but it is important that once you've learnt these skills to use them regularly.

When I learn something new, and I come to it a week or two later I have to think 'now how do I do that?' As you age you don't take in information in the same way, and it is a case of 'use it or lose it'. This might be where the Men's Shed could help by supporting people to access things online and even to help people learn those IT skills.



## Using outdoor spaces

Theme	Count
Importance of outdoor spaces for mental and physical health	25
Urban planning	16
Pavement and walking conditions	10
Safety, Crime and antisocial behaviour	6

### Importance of outdoor spaces for mental and physical health

**Twenty-five** people highlighted the importance of outdoor spaces like parks, beaches, and communal gardens for physical health, mental wellbeing, and social interaction. Many people described how they had used green spaces for activities such as dog walking or cycling to stay fit, while others have valued these areas for their tranquillity and because they help connect them with nature.

*“We need a safe outdoor space to sit or walk. Good for our physical and mental wellbeing.”*

*“Walking my dog and accessing beaches and green spaces are important to my wellbeing. Keeping well and healthy is important to enjoying my life.”*

*“The natural environment, peace and quiet, space to enjoy the outdoors, community connections all positive.”*

Some people also reflected on the social benefits of outdoor spaces.

*“Open spaces for dog walking – always someone to chat to or you can avoid meeting if you want to!”*



***“Where I live there is a communal garden and this is what keeps me active and what I enjoy doing.***

***“The groups here also mean that I get to chat with other residents, if there wasn't so much going on people would just stay in their own flats.”***





**One** person shared that they were still shielding due to health conditions and only socialised outside to mitigate the risk. This emphasised the importance of outdoor spaces for social interaction, particularly for older and vulnerable people.

*"Like thousands of others, I'm still essentially shielding due to health conditions... I only socialise outside because all COVID mitigations were dropped, but people are still dying from it.."*

## Local community and urban planning

**Sixteen** comments addressed urban planning's role in creating accessible and sustainable communities for people of all ages. Some concerns were highlighted about over-development in local areas, inadequate public transportation, and a lack of local services.

Respondents emphasised the importance of access to essential services like shops, healthcare, and public spaces, particularly for those who can no longer drive. **One** person shared the challenges faced by their elderly parents.

*"I'm answering on behalf of my parents who are not together... (For my mum) being able to walk to the shop and community centre is vital for her as she lives with dementia and cannot now drive. My dad can still drive (just!) but if/when he can't he is more isolated and would have to get the bus which would be difficult with his dog."*

This highlights the need for neighbourhoods to be designed in ways that allow older people to access amenities on foot or by public transport easily. However, several comments indicated that some areas are lacking such facilities.

*"There is no pub or shop in the village. There are no other facilities in the village above a village hall and a church."*

*"I live in a rural village with no bus service, and soon there will be no shop, therefore being mobile and having access to transport or being able to continue to drive into old age is significant to my wellbeing. This will also impact on my socialising and attending health appointments."*

Concerns were also raised about the loss of open spaces due to rapid housing developments and the impact of population increase on already overstretched services.

*"Outdoor space being reduced by frantic house-building. Some concern that huge population increase will overload services."*

*"With the a huge housing project on the north side of town I foresee many problems - There are so very few doctors and dental appointments for the existing residents and a primary school I believe was included in the new housing plans but nothing for older students... With the extra traffic, the noise and pollution will have an impact from the queuing cars and the increased number of vehicles and there are enough accidents already from collisions."*



## Pavements and walking conditions

Ten respondents explored safety with respect to walking conditions in their comments. In particular, the poor condition of pavements was mentioned, including uneven paving stones, overgrown footpaths, and general neglect of public walkways. Respondents emphasised the risk of trips, falls, and accidents, particularly for those with limited mobility.

*"Pavements in a terrible state – my husband fell because of uneven paving stones – the paving was fixed weeks later but only a tiny part – the rest is still unsafe!"*

*"I am also extremely concerned about the state of footpaths which are regularly overgrown so it can be difficult to walk safely."*

A couple of respondents also mentioned a lack of pavements in rural villages, forcing pedestrians to share roads with vehicles.

*"There are no footpaths, and the road is very narrow, so using a wheelchair on the road is dangerous. The footpaths and bridleways are often too difficult to walk and always impossible in a wheelchair thus one is confined to the house/garden if help is not available and no possibility of independence."*

## Safety, crime and antisocial behaviour

Six respondents generally referenced the importance of safety in outdoor spaces, with several describing a sense of discomfort or fear due to perceived anti-social behaviour. This included comments that certain areas no longer foster a sense of safety.

*"Don't feel safe in Ipswich Town Centre. Dirty, empty shops, stared at by men who hang about in groups."*

*"The town centre has been run down... It generally doesn't feel particularly safe."*

*"Increasingly in Ipswich people feel vulnerable because of some of the anti-social behaviour that appears to be happening."*

### What people told us at the One Big Multicultural Festival (Ipswich)

People emphasised the vital need for improved and accessible outdoor spaces that include more ramps and better mobility access in buildings and public areas. It was also suggested that streetlights needed to be kept on throughout the night to enhance safety in the local community. One person commented about the need for safe spaces for people with additional support needs and their carers.

*"We need more ramps and mobility access in buildings and services."*

*"We should be keeping street lights on at night for safety."*

**“Outdoor space is vital for wellbeing,  
often providing opportunities for  
interaction with others.”**

# T's views

***"I have spent my whole life working and it has come down to this. I am a widow with nothing. It's very difficult."***



## Lack of facilities

I live just outside of Bury St Edmunds. We have nothing here. Nothing. No community centre, no shops, no doctors, no dentist, no facilities at all. We have nowhere to go and socialise.

They are building a leisure centre on the estate but it's going to be very expensive. People of my age that rely on their pension to live will certainly not be able to afford to use those facilities unless the company is going to give residents or OAPs discounts.

We used to have a convenience store, and it was a nice walk from my house but that has now been shut for over a year. To get a magazine or toothpaste you must go into town. We need a proper shop where you can get an actual week's shopping and not one of those small shops that costs twice as much.

We don't even have a proper bus service. I must call up this bus company, wait for it to be available and then walk to a meeting point. I might have to wait an hour depending on the time, and it is often expensive. Moving is not an option for me.

## Social life

I get to see my son on a Sunday, but I hardly see anybody. On this estate, there are only a

couple of OAPs and the rest go to work, so I don't see many people. I don't have friends, or company because, for years, I lived abroad; but when my spouse passed away I just couldn't cope being there on my own, so I had to move back.

I have spent my whole life working and it has come down to this - a widow with nothing. It's very difficult. I am on anti-depressants and painkillers from the GP. Being lonely and excluded is the reason behind my depression.

## Making new connections - an update following participation

Participating in this research has helped T to make new connections through signposting by Healthwatch Suffolk. T said:

*"I reached out to the befriending scheme as suggested by the Healthwatch Suffolk team, and they got back in touch with information about a mobile library in Bury St Edmunds town centre, suggesting I should check it out.*

*"I went along and I met a woman who's a bit younger than me, but we've since become friends. I'm glad to have made at least one new friend since we spoke, and we're even meeting up for a coffee tomorrow."*

**“I think Ipswich, where I am based, has excellent outdoor spaces. I realise that does not mean people utilise them, but it is a strength in our town.”**



## Social participation

Theme	Count
Opportunities for social participation	46
Transport, mobility, accessibility	32
Positive impact of social participation	27
Diverse & engaging activities	16
Volunteering & community involvement	15
Accessing information	13
Affordability	6
Intergenerational mixing	5

### Opportunities for social participation

**Forty-six** respondents shared their views on the current opportunities for social participation. Drawing from their own experiences within Suffolk communities, **32** people highlighted the abundance of opportunities for people of all ages and backgrounds to connect and participate in activities and events. They expressed how fortunate they felt to be part of vibrant and welcoming communities with thriving clubs, societies and social groups.

*“Voluntary/charitable groups like Memory Lane Cafe, which has weekly meetings and regular outings, Musical Memories hosted by Music In Our Bones, and Headway’s Friday Club. There are so many wonderful people in the community who give their time and energy to enhance the lives of those struggling with ageing and age-related illnesses like dementia.”*

*“There are many openings for volunteer jobs, charity shops, pop-up food markets and community hubs. All the churches run clubs, coffee mornings and weekly religious meetings as well as Sundays... There is a club for everything e.g., sports, photography, nature walks, gardening etc. We have CAP (Christian Against Poverty) who give free advice on financial or legal matters. I have fantastic neighbours. As I am able to drive I drive less able friends to social activities.”*

*“Being social is important to keep a sense of wellbeing and ability to cope with lifestyles. Meeting up with other people creates a sense of belonging to a group and learning from each other. Support, humour, enjoying company and sharing meals are all part of social happiness. The local groups in our village cover many opportunities such as creative writing, photography, art, bowls, walking, W.I., coffee mornings and pop up cafe events.”*



***“I have noticed that activities and groups for older people tend to be focused on older adults 60+.*”**

*“Within my role, I frequently support adults aged 40–60 years of age. For these individuals there appears to be a lack of community activities and groups that they can attend and I feel this contributes to loneliness and isolation, which has negative impact on overall wellbeing.”*



*“The village hall in Westleton does a fantastic job in arranging social activities as well as other facilities. These include IT sessions, podiatry, physio, yoga, hairdressing.”*

*“In my town there are plenty of groups to join according to whether you want a chat, vitally important, or whether to play Bridge or other activities. Again though, these are all managed by volunteers, so it’s very much ‘help ourselves’ – which in Beccles we do extremely well.”*

Whilst many people felt their communities catered to their social needs fairly well, **fourteen** respondents did not. They experienced a lack of local opportunities for social participation.

*“Facilities not available in villages where residents can meet up socially and poor transport/ bus service connecting villages can leave people feeling isolated, especially if they are unable to drive.”*

*“If you live on your own you need to be able to get out and interact with people. I will be OK whilst I can drive but after that it will be awful. There is no public transport and nothing much going on in my village.”*

*“Our village hall does have some activities, but there is a limited number.”*

*“The village hall had a lot of investment from the national lottery to expand the facilities, but the hall committee state their role is just to maintain the hall, not put on social functions. So there is a gap for me between the in-crowd and the rest of the villagers and between those involved and those outside of the closed circuits.*

*“As I age, and semi-retire, then retire, my social networks (that I have through work) will go away and I would hope to become more involved with others in the village, but at the moment it’s hard to see how this would happen. As social interactions are a key factor in reducing the risk of loneliness and dementia I would like to see organisations from outside of the village infrastructure, helping to put on activities, clubs and events that not only enable social networking but also do something positive e.g. for our environment, for our physical wellbeing etc. It needs a whole system approach to help maintain viable communities and to recognise that if villages are left to help themselves then the communities will over time shrink and fail. We have no bus system, our network*



*infrastructure is poor with limited mobile coverage and low speed broadband, we have to travel to get to shops, doctors, pharmacies, gyms etc. There are a few exercise classes in the village hall but they are all in the daytime, for those of us that are still working full time they are not accessible - if I go to the local gym in the evening, then it is bursting at the seams (often with men only), so we need micro gyms in villages, walking groups, all ability exercise classes, laughing yoga, quizzes, leisure cycling clubs, etc. if we are going to stay fit and stay connected for our mental and physical wellbeing."*



***"There are very little services to access in terms of socialising. My mum [with dementia] suffers from isolation because she cannot access anything unless she is taken by a family member."***



## Accessibility – transport and mobility

It was clear people felt there was a clear link between access to social opportunities in rural communities and being able to drive. Whilst many felt able to travel to such opportunities currently, there was an awareness that the impacts of ageing on health and mobility may mean this is not viable longer term and people therefore worry about the prospect of social isolation. This was highlighted by **32** comments.

*"What gets in the way is a lack of transport services in Norton. There is no transport to any of the clubs that I belong to, all of which are in other villages. If you do not own a car you are captive in the village. This also applies to access to all health services which are again all either in Bury St. Edmunds or in another village."*

*"If you lose mobility, you risk becoming isolated. Being able to socialise with others is a great boost to your mental health and stops you being isolated as not everyone has or can rely on family."*

*"At the moment, we both drive but recognise if we couldn't we would be very limited and for example would be unable to access any activities in the evening outside our village. No theatre, cinema or concerts."*

To tackle isolation, and encourage participation, some stressed the need for organisers of social events to ensure buildings are accessible for those who are living with disability or reduced mobility. Others felt specific physical and mental health needs needed to be accommodated, ensuring that nobody is left behind due to lack of appropriate support.

*"Local clubs and groups are often held in buildings which are not fully accessible to all people so people with mobility difficulties often find themselves excluded. Their social lives are restricted as a result."*

*"Beccles has several groups you can join, providing you don't have sensory loss (i.e. deaf or blind) or suffer from social anxiety, depression or neurodiverse conditions)."*



## Positive impact of social participation

**Twenty-seven** respondents highlighted specific benefits of social participation as people age. This included that social engagement helps to prevent isolation, provides opportunities for both mental and physical needs to be met and ensures people have support for their emotional wellbeing.

*"I am involved with Lavenham Carpet Bowls Club and have been for some years. I can see the real benefits for social interaction for older people, both mentally and physically. It was very evident after COVID, how much our members, and other older people (many who had isolated due to COVID), valued getting back together and leaving their homes. Many Clubs did not survive. Fortunately, we did and have gone from strength to strength. Making people aware of what is available is important too."*

*"As we age, our world becomes smaller. We stop working and experience the loss of friends and family due to illness and old age. Our health, both physical and mental, can let us down, restricting us from doing the things we once took for granted. Being an older person, for some, can be lonely and isolating. Ageing well is about looking for the opportunities around us to keep both our brains and bodies working. Allowing social connection to others and bringing a sense of meaning to our day-to-day existence."*

*"Meeting up with other people creates a sense of belonging to a group and learning from each other. Support, humour, enjoying company and sharing meals are all part of social happiness."*

*"Not having enough proactive opportunities to be social or to access creative interesting new opportunities or to share huge life experience via volunteering makes living life well as we age harder."*

*"A local group 'Time for tea and friendship' has for the past year, since I joined, been a great source of conversation, and in time friendships."*

*"Being social is important to keep a sense of well-being and ability to cope with lifestyles. Meeting up with other people creates a sense of belonging to a group and learning from each other. Support, humour, enjoying company and sharing meals are all part of social happiness. The local groups in our village cover many opportunities such as creative writing, photography, art, bowls, walking, W.I., coffee mornings and pop up cafe events."*



**"Regular interaction with family and friends can alleviate feelings of loneliness and provide emotional support."**



**"Social activities give support and promote a feeling of well-being and opportunities to share concerns."**





There was also a recognition that helping people to realise these benefits can be challenging and there is a need to lead people to opportunities, and reduce anxieties that may arise through social isolation.

*"The aims of [our] group is to improve health, wellbeing and tackle loneliness in the rural communities. The continuing issues though, which get in the way, is resolving how do you get people to motivate themselves to help - motivating themselves by attending sessions and gaining the benefit's of them."*

*"Isolation is the major issue for older people because it affects mental health, leading to depression. When someone loses a partner they are reluctant to go anywhere alone so they stay home and become inactive... An increase in volunteers to accompany someone to join a group post bereavement would be a great stepping stone back to being part of the community."*

*"Social interaction is more important as we grow older, otherwise loneliness can become a problem. Sometimes people seem reluctant to take the first step to join clubs or other organizations, and it can be difficult to persuade them that they would be most welcome at different events."*

## Diverse and engaging activities

A theme among 16 respondents emphasised the need for various engaging activities to support healthy ageing. Many felt that a wider range of opportunities should be available to cater to different lifestyles, interests, and physical and mental needs. Some respondents expressed frustration with limited and stereotypical options for older people, which seem to cater to more traditional ideas of ageing rather than to diverse interests and lifestyles.

*"It's boring as I get older I find they expect you to do old things i.e. bridge clubs, bingo, etc. I am in my sixties, not dead yet, why don't they provide other things to do?"*

*"The lack of diversity is a real barrier to socialising. I used to live on a boat - I had my tribe - I moved up here to help with the care of my grandchildren three years ago. I'm still tribeless. It's harder to make friends when you age and so far it's been impossible for me & I've volunteered at First Light & Black Shuck to try and meet like minded people... Do I want to sit and play board games? Well I don't mind the odd game of scrabble but otherwise thanks but no thanks."*

A couple of people felt there was a lack of transitional opportunities for those approaching retirement, emphasising the importance of considering stimulating and relevant activities during this phase of life.



*"I enjoy the multicultural aspects of Ipswich but find it hard to engage with cultural or social activities."*

*"I often don't know about them in advance."*



*"There does not seem to be many opportunities for people just approaching retirement in early 60's ready for their transition from work to retirement."*

*"I have noticed that activities and groups for older people tend to be focused on older adults, generally 60+. Within my work role, I frequently support adults aged between 40-60 years of age. For these individuals, there appears to be a lack of community activities and groups that they can attend, and I feel this contributes to loneliness and isolation, which has a negative impact on overall wellbeing."*

## Volunteering and community involvement

**Fifteen** respondents shared the importance of opportunities to engage with their community daily. This included the small points of contact people naturally make throughout their day, as well as opportunities for people to work and volunteer as they age. Work and volunteering were described as a way for people to feel valued and involved in their community:

*"It is vital for the ageing population to be able to network by whatever means possible... opportunities to be social and interact with others including work if desired or volunteering. This makes people feel valued and part of their community."*

*"For me it's important to either work or volunteer until I am of an age where I can no longer do this. So long as those opportunities are there it brings the important aspect of being social as well as feeling worthwhile and being able to make a difference."*

Community connections, such as kind neighbours and local staff, also play a role in providing support for those who are lonely or face health challenges like dementia, including practical support to combat loneliness and address digital exclusion.

*"Paying for car park, lack of acceptance of cash by shops is very excluding if you don't have a mobile phone. e.g. \EDF asked me to photograph my meter & send it to them on-line. I had to ask a neighbour to do it for me, causing all sorts of complications. There was no phone number on the letter even to discuss it with them."*

*"My dad can still drive (just!) but if/when he can't he is more isolated and would have to get the bus, which would be difficult with his dog. He has some lovely neighbours too but if he didn't have them and a dog, which keeps him social, I think he would be quite a hermit."*

*"I am 62 and I am fit, active and mentally stable. But I know many people who are not so fortunate. In my opinion the keys to maintaining body and mind are all to do with community, Positive engagement with our friends and neighbours, along with access to health services that are quick to respond are essential. Without these then we end up isolated lonely and ultimately physically and mentally damaged."*

# Being social

## The Happy Circle Club

### *A note from Brian (group member)*



I'm a member of the Oulton Happy Circle which is a club for elderly citizens in the Oulton Broad area and it has been running for around 40 years.

Nearly all our 24 members are in their 80s, including myself at 86. We enjoy coming together every Tuesday afternoon at the Oulton Community Centre.

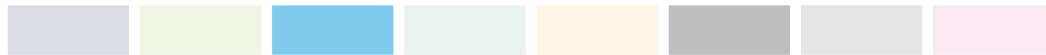
Transport to and from our meetings is provided by friends and a wonderful community transport service at a low cost. Our club offers a warm welcome to members, and this is followed by games of cards, bingo, coffee and biscuits all at a nominal cost.

We used to provide trips to local attractions such as the end of the pier show at Cromer and other local events, but the rising cost of coach hire has made this impossible. We are now concentrating on having lunches, some provided at our meeting place and some very close to it where community transport can and does take and bring members to the event.

We pride ourselves in that our contacts are not only with weekly meetings but at other times where members need help and support.



**“Living in a small village, it is important to feel part of the community rather than the community being ‘other people’ and feeling that there is no way to be involved. It can be a lovely, immersive and a calm environment in the rural countryside but, at the same time, very socially isolating – if you’re not in the right club or on the right committee, or volunteering at the shop, you are pretty much excluded from what’s going on in the village. ”**



## Accessing information

**Thirteen** respondents mentioned difficulties in finding out about available social activities and events. Some rely on word-of-mouth, newsletters, or social media, but others find these resources limited or untimely. This lack of accessible information creates barriers to participation in existing social groups and activities, particularly for those not digitally connected.

To improve awareness, a few respondents suggested practical solutions such as putting up more local flyers, promoting events earlier, and creating a central online platform to share information about local opportunities.

*“The Sixth Sense newsletter helps a lot but most of the activities it highlights have passed by the time it gets delivered. Some activities are shared on Facebook but they are few and far between.”*

*“Keeping active and healthy, making new friends are my priorities but having moved here in retirement finding information about what is available is difficult. Especially as I don’t want to go to typical old people’s clubs.”*

## Affordability

**Six** people identified cost as a barrier to social participation, highlighting the need for more affordable or subsidised activities to ensure inclusivity for all people in communities.

*“Our village hall provides opportunities for socialising and age-related activities but they all cost so it is not for everyone.”*

*“I do feel left out in the community as there are not free senior events in the town centre where I can enjoy meeting people, doing activities, etc.”*

*“Concession tickets have gone at the theatre. They asked for £48.00 for a ticket. That is a prohibitive sum to pay for a two hour show, so I couldn’t go.”*

## Intergenerational Mixing

**Five** respondents emphasised the need for more opportunities for younger and older generations to connect to enhance social inclusion.

*“Respect and inclusion by young people does not happen as there are no youth centres/ youth clubs/hubs where this would occur i.e. a planned event where older people would be invited by younger people to get to know them and feel valued and included encouraging future interactions.”*

*“Being included and welcomed with respect in cross-generational groups is vital for the happiness and wellbeing of all older people so their worlds don’t become a ‘silo’ of older people only.”*

*“Older people need to mix with others particularly with younger generation for both parties benefit.”*

## Other

Some people reflected on the sustainability of social participation opportunities in their communities. A few people shared that previously good opportunities had been shut down due to funding cuts, and others felt worried that reliance on volunteering to sustain these groups would hinder their longevity.

*"A village can be isolating and relies on volunteers to run social activities which is fine when there are enough but as they age younger people do not appear included to take the reins."*

Furthermore, a couple of people discussed how support and encouragement to join social groups is sometimes needed, to help people feel welcomed and part of the community.

*"Older people have often lost the energy to get up and go, join activities. Easy to join classes could get people back on track and do simple things."*

### What people told us at the One Big Multicultural Festival (Ipswich)

People emphasised the importance of social participation when growing older. Multiple people called for more social groups and events across Suffolk to prevent isolation and encourage new experiences. Similarly, people called for more activities to allow interaction between younger and older generations, suggesting initiatives like school visits to care homes and vice versa to foster understanding and connection. One person also noted the challenges of attending social groups due to their full-time job. Additionally, a nine-year-old highlighted the importance of addressing loneliness among older adults, suggesting that visits to their homes could make a difference.

*"Social groups all take part in the day. I still work full time so struggle to attend any groups as none happen in the evenings."*

*"We need to get younger people to engage more with older people. This could be through schools bringing students into care homes or care homes taking residents into school classrooms. This engagement and interaction are vital to keeping younger at heart. It also gives children a better understand of older people and ageing."*

*"More groups are needed to help people overcome social isolation."*

*"We need more events like the Big Multi Cultural event so people can get together and experience new things."*

# Being social

## Hadleigh Movers

### *A note from Karen (Dance artist and lead of Hadleigh Movers classes)*

I'm a professional Dance Artist and lead the Hadleigh Movers classes.

These are fun, social, and engaging classes for anyone who identifies as an older adult or feels the class would benefit their physical and mental wellbeing. Each session provides a wonderful mix of dance, laughter and a cup of tea. They are designed to help boost your fitness, give you a chance to socialise and connect with others, but most importantly, to have fun!

The classes are suitable for all levels of mobility, and no dance experience is needed. There are both seated and standing options throughout.

Below is a summary of comments from our group members to show how these classes are supporting them to age well.

The Hadleigh Movers classes are highly valued for both its physical and mental benefits. Members report relief from discomfort, such as arthritis and a boost in mood, with others noting improvements in posture, balance, and overall body flow.

The classes not only promotes better physical health but also support mental wellbeing through social interactions and allowing people to make new friends.



Many find the combination of dance and exercise to be fulfilling, providing a great sense of achievement. Some members even expressed they wish they had discovered the classes sooner.

*"I have arthritis in my knees and hips, coming to class makes me forget about the discomfort I feel and cheers me up."*

*"My body flows better and gives one a happy vibe. I absolutely love it."*

*"Better posture and balance has improved."*

*"The class not only helps with physical health but mental health too. Meeting new people and chatting too."*

*"The whole concept of the classes give a great sense of achievement from both exercise and dance aspects."*

*"I wish I'd found the classes sooner."*



**“Ageing well is about firstly security (financial, housing, health) and then about social interaction and having a support network, partner, local (friends and neighbours) and getting out to clubs and groups who I know from my own experience can provide incredibly important support when things do go wrong.”**

# Chris's views

***“This is my opportunity to give back, but it also benefits me as it's keeping my brain functioning & helps me to stay healthy.”***



## Community Participation

I'm 72, but I don't feel my age. I feel younger than that. Since retiring seven years ago, I've always had a strong desire to give back to the community because I took so much when I was working. I'm the Parish Chairman for my village and the treasurer for the Moving Well Project in Debenham. This is my opportunity to give back, but it also benefits me because it's keeping my brain functioning and helps me to stay healthy.

I've been involved in the Moving Well Project since it started in 2022. It was originally set up and funded by the local health commissioning group, offering a six-week

course focused on health, wellbeing, and mindfulness. It was later taken over by Communities Together East Anglia, but eventually, they said the group would have to close unless someone else could keep it going. There was a real desire that people wanted it to continue.

It was an opportunity for me to do something for the community over and above what I was already doing, so I agreed to take it on. I wrote a business plan and applied for some funding from the local council, as I couldn't see how we could keep the group running and costs of participation low, without some external help.

The focus of the group remains the same



***“Mobility, above everything else, is key to being able to function in a rural community.”***

*“Mobility is not just about being able to drive a car. It's about being able to walk around your home, to do everyday tasks like peeling a potato. It's a word that is too lightly used and under-described by too many people. I've seen first-hand how, when a person's mobility starts to deteriorate, the loneliness starts to creep in.”*



as when it began – 30 minutes of fitness, 15 minutes of mindfulness, and 45 minutes of social time over refreshments. The social time with refreshments is a really important part of the sessions. A few years ago, Age UK published a report that showed that social isolation was a real issue for people living in this part of Suffolk, so having that chance to chat with others is so important for everyone's wellbeing. It's also what keeps me involved with the group.

We have around 35 members in total, but weekly attendance can vary considerably. Since we're aimed at people over 65, some members have had to drop out because of health issues or bereavements. It is a constant challenge keeping the numbers up.

We advertise the sessions by putting posters around the village, writing articles in the community newsletter, and posting on Debenham Facebook page. The local GP surgery sponsor a free, 12 week wellbeing/fitness course at the Debenham Community Centre. The trainers encourage people to join us after they have completed their free sessions and while that has given us a few new members, it isn't many that come to us that way. We really need some help to boost our membership.

## Transport & Location

I've lived in Suffolk almost all my life, and my wife and I feel very settled and secure here in our community. But the reality is that I know there will come a time when we need to move to somewhere closer to facilities.

Transport is a bug bear in the village. There is no such thing as a bus. There is a community bus, but none of them offer anything like a daily service that would allow us to get to a doctor's appointment, hospital appointment, or anything else we would want to do in our daily lives. Right now, we're still able to walk to Debenham, which takes about an hour each way, and we enjoy the exercise. But as we get older, that may no longer be an option for us.

## Mobility

Mobility, above everything else, is key to being able to function in a rural community.

Mobility is not just about being able to drive a car. It's about being able to walk around your home, to do everyday tasks like peeling a potato. It's a word that is too lightly used and under-described by too many people. I've seen first-hand how, when a person's mobility starts to deteriorate, the loneliness starts to creep in.

That's why it is so important that we try to keep the Moving Well group running because it has a massive impact on people's lives for the positive.



## Suitable housing

Theme	Count
Affordability and availability	35
Retirement homes	28
Location	11
Accessibility and adaptations	10

### Affordability and availability of suitable housing

**Thirty-five** comments emphasised the need for housing that is both accessible and affordable for older people. People frequently referred to bungalows or smaller houses with small outdoor spaces, which they felt offered better comfort and independence than flats. However, a lack of available and affordable housing options has made downsizing or locating suitable housing difficult for some people. Several comments referenced high costs, inadequate social housing, and unsuitable private rentals, which they say means older people remain in homes that do not meet their needs or lead to earlier dependence on care homes and supported living.

*“Then there is a lack of suitable social housing meaning older people are struggling in homes that are unsuitable, too big and need a lot of adaptations. This often leads to them needing residential care placements in care homes much earlier than expected establishments that equally do not meet their needs. Unless older citizens have strong family support, they are often not able to live well into old age.”*



*“Developers rarely build bungalows or homes equipped to meet the needs of older people... People who have always had access to outdoor space may continue to wish to do so as they get older, but in a smaller property. Whilst it is good that there are developments for over 60s, older people may prefer to live in a more mixed community, provided their needs can be met. I would like to move somewhere when I finish work where I will be close to other people and have easy access to activities, while remaining independent as long as I can, but there is nothing nearby suitable other than flats or expensive complexes beyond the means of most people.”*



“A lot of housing is unsuitable for elderly people. Anywhere near to the town centre tends to be older, colder, hard to maintain properties.

“I would like to downsize but do not wish to live on the edge of town with poor transport links.”

*“Suitable housing is important as I feel that there are too many flats, which although have lifts are not as suitable as you age. They are isolating and apart from anything else if your mobility fails and the lift fails you then become isolated, depressed and tend not to look after yourself... In turn you then need more community care. More small one bedroom bungalows with a small outside area assigned to each would help. You need a space to call your own, peace and quiet so not lots of crammed in to small flats.”*

*“What can get in the way is suitable housing - a friend who has not quite reached pensionable age was almost made homeless through a no-fault eviction and it was clear in her search for a new home, the lack of social housing and the difficulties of private rentals.”*  
*“Approaching retirement and living in a rural rented property I am very aware of the lack of social bungalows for rent. I worry should I be left on my own to cope financially.”*

**Three** respondents mentioned issues associated with the cost of living crisis, such as rising utility costs and service charges that impact financial security and quality of life as people age.

*“I have my pension but how can I live a happy life as I age when I have so little money. It comes in and goes straight away. The cost of house utilities’ is horrendous, and without my daughter continuously checking that we aren’t being overcharged or trying to get lower prices, then I would be stuck. On multiple occasions, I have been paying more money than I should be and because I am old and don’t have the knowledge of digital, I am unaware of it. These companies are happy to rip off older people.”*

## Retirement homes and sheltered living

**Eight** comments mentioned retirement villages, flats and care homes. Several respondents expressed concerns about the high costs and affordability of these facilities. Others commented on how retirement communities offer valuable social opportunities and facilities.

*“Currently I live in Sheltered accommodation which is suitable to my current needs. To loose that independence would certainly be detrimental to my ability to age well.”*

*“Personally, I wouldn’t mind living in a retirement village with things like a pool, gym, exercise classes and social activities but I am not are of anything close by or which I could afford. This is a shame as Suffolk has an ageing population with a large percentage of older people.”*

*“Retirement flats and homes tend to be very high council tax and I can never figure this out when generally only one person lives there, so although they provide a great community it*



*comes at a very high cost many cannot afford."*

**Two** respondents also expressed concern about the standards of care people can expect in later life if they need to access residential or nursing care homes.

*"Visiting elderly friends in care homes is scary and depressing as places seem poorly designed and under-resourced to provide all-round quality lifestyles, not just nursing care."*

## Location

**Six** people commented about the importance of the location of housing for older residents in communities. In particular, the proximity to community services, healthcare, and transportation links were seen as essential for maintaining independence and accessing support. Multiple respondents suggested that rural areas and new housing estates lack necessary services, social opportunities, transportation links, and a sense of community. Some felt this could lead to feelings of loneliness and disconnection.

*"New housing estates make you feel isolated with no sense of community."*

*"Getting old can be isolating. Housing is also important. I am over 60 and live in my own and would like to move somewhere when I finish work where I will be close to other people and have easy access to activities while remaining independent as long as I can."*

**One** respondent further emphasised the importance of location when getting older. Despite building their own home (accommodating for their future possible needs) the location of their house (and issues associated with local planning objections) had left them feeling isolated.

*"My husband and I, both retired, live in an isolated rural hamlet accessed by a single track road which occasionally gets blocked by snow. Power cuts and water supply problems are a risk. We had our home designed & built with our old age in mind: no steps, a lift, wide doors, a wet room. There were many local objections to our planning permission, and I feel that still affects opinion today. We have lived here since 2015, but I feel very isolated."*

## Accessibility and adaptations

**Ten** comments highlighted the importance of accessible housing for older people. This included the need for home adaptations and equipment that allow older people to live comfortably and independently in their own homes. However, several comments reflected on the challenges older people can face when seeking to make their home accessible (e.g., installation delays, lack of clear information, expenses or complicated procedures).

*"The most important things for me are health, independence and security. I am a mid-life solo-dwelling disabled woman, and I dread the prospect of not having access to affordable and accessible housing as I get older and my neurodegenerative condition progresses. There are scant options and minimal provision of accessible social housing for disabled folk already, so I cannot imagine what it will be like in 10 years' time – that is scary for those of us already struggling in private rentals, which are unsuitable for our needs and getting more expensive by the year."*

*"If I needed home adjustments, I wouldn't know how to access that information."*

*“Housing is very important especially if you have persons with special needs and you have a family. In my case I had to make adjustments to accommodate my mums needs and my family. This has proved very stressful financially, emotionally.”*

*“I am a carer for my husband, who has Parkinson’s and speedy access to Social care and in particular equipment to make life easier, or in some cases, possible is very slow. I understand there are a lot of people needing assessment, and supply of equipment, but for many, like my husband who needs new aids due to the nature of Parkinson’s, the process can be incredible slow. Everyone is as helpful as they can be, but the needs outstrip the availability to fulfil those needs. How this can be addressed and improved, I do not know.”*

### **What people told us at the One Big Multicultural Festival (Ipswich)**

People highlighted concerns about suitable housing for older people. One person mentioned having difficulties with the stairs in their home and the lack of support from the council to address this issue.

Whilst another person expressed doubts about the improvements in care homes and how they might not provide an age-friendly environment.

*“My biggest issue is the stairs. I struggle to get upstairs to use the toilet. The council will not help me, and I don’t know who is able to support me with this.”*

*“I’ve heard that care homes are supposed to be improving but I’m not convinced. I don’t think it’s the right environment to age friendly.”*



Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.



**“People’s houses can limit their lives once they have difficulty in getting around. There is a shortage of wheelchair accessible housing and again people do not have the funds needed to make adaptations to their homes, to make their lives easier.”**

# S's views

***“People don’t understand how difficult it is... I hope that I will have friends to help but it’s not always convenient. It all adds to the worry and feeling of isolation.”***



## Transportation

Transport is a big concern for me. I live in a small town with about 6,000 people. We have a few shops, but if you can’t walk far, getting around is tough. We have some community activities, but some people can’t find anything they want to go because they prefer something more stimulating than bingo.

While the community transport service is helpful, it’s expensive – around £7 for a return trip to a slightly bigger supermarket. This adds a lot to the cost of shopping, and not everyone can afford it. You are supposed to book the bus two weeks in advance, so you can’t be spontaneous. The service doesn’t accept bus passes and local taxis are limited.

Not everyone has access to a car, and even though I still drive, I worry about what will happen when I can’t anymore. Public

transport is limited and there are no buses in the evening or on Sundays and bank holidays. People who want to go to events such as fêtes, that often happen on these days, can’t access them.

A trip to the hospital can take an entire day on public transport just for a half hour appointment. People don’t understand how difficult it is, and this is what worries people as they get older. I hope that I will have friends around me to help but it’s not always convenient for them. It all adds to the worry and feeling of isolation.

My 90-year-old mum used to rely on the buses but now depends on me for shopping. She used online deliveries, but the driver leaves the groceries at the door, and she can’t manage them on her own anymore. It’s a challenge for many elderly people, especially with more services moving online.



*“My 90-year-old mum used to rely on the buses but now depends on me for shopping. She used online deliveries, but the driver leaves the groceries at the door, and she can’t manage them on her own anymore. It’s a challenge for many elderly people, especially with more services moving online.”*



Not being able to use digital communication and no access to transport increases isolation and affects wellbeing. I have often thought a shuttle bus around the area, running all day and into the evening, would help both locals and tourists. It would connect to train services, making travel easier. Norfolk has something similar, but we don't have anything like it here.

## Housing

My friends and I, all in our 60s, have talked about what happens when we can't drive anymore. Some of us consider moving to bigger towns, but it's not always affordable, and moving means leaving behind friends and support networks. There also isn't enough suitable housing for older people who want to downsize before managing a larger home becomes overwhelming. There are small social housing bungalows locally, but I wouldn't meet the criteria.

It is about getting people to think more creatively about what older people want or need and what will benefit wider society. It feels like there are so many missed opportunities in transport and housing that could make life easier as we age.



## Transport

### Importance of transportation

The importance of transport as a key enabler to people ageing well was evidenced by the number of comments respondents made about it.

Whether it was in relation to being able to access health appointments, attend social, fitness or other community groups, or the location of appropriate housing with access to local amenities (such as shops, banks and post offices), transport and the ability to move about freely was a key consideration for people as they age.

Access to transport was especially important for people living in rural or remote areas, where the availability of alternative transport options was sometimes more limited.

*“Living in a village, access to good transport links is vital – otherwise, there will be a danger of becoming isolated. Social isolation has a huge detrimental effect on mental health.”*

*“Living in an area where there are good bus links into Bury is essential to allow me to get to and from health appointments and attend different events and activities. Luckily, where I live has this in place, and it was something I was looking for when I was moving. It means I can remain independent for longer.”*

*“Transport in rural areas must be available to prevent isolation and give people freedom.”*

For many respondents, transport was not currently an issue impacting their ability to age well, since they had access to a car. However, this did lead to concerns about how their lives would be affected should they no longer be able to drive or afford a car. Many respondents felt the loss of personal transport would significantly impact their ability to age well.

*“If you do not own a car, you are captive in the village.”*  
*“Everything I do to help myself (age well) is only possible because I can drive to the things I’m involved in.”*

*“A car helps people to live well because it helps people access social networks and services and shop in supermarkets with cheaper prices. Those without cars face many problems.”*

Some respondents had already embraced more active and environmentally friendly travel solutions—such as walking, cycling, using public transport, and car sharing—and were enjoying the associated benefits to their health and wellbeing.

*“We live in a rural village and our transport systems in our household rely on a combination of cycling, bus, train, shared car lifts or community taxi services.”*

*“I do a bit of walking as exercise, such as walking to and from the community centre, and it*



***“Unless the bus services are improved, I will have to move or accept isolation.”***



*all helps when I don't drive. I have to walk more.”*

*“We cycle and do not own a car. The U.K. is car dependent on the whole with the consequences of underactive bodies. We cycle as a lifestyle choice, doing shopping, appointments and tasks. Cycle trailers are good for cargo. My husband is 76 years old and has a heart with defects. The cardiologist who placed a stent in his coronary artery said that my husband's heart had naturally bypassed due to exercise and had saved his life. Older people can really gain from cycling, even electric bikes if the effort is hard.”*

*“At our Friendship Café, which is predominantly older people, a lot of people rely on lifts from more able bodied villagers.”*

*“The best single thing I did, after much deliberation, was to sell my car. So I started cycling in 2020 during lockdown, I consistently increased my distance and also my speed over the next few years, and in 2023 I joined a cycling club, and last week I cycled to see the final stage of The Tour of Britain in Felixstowe with my friends from the club.”*



***“As far as transport goes, we have a railway station that connects us to Bury St Edmunds, Stowmarket, Ipswich, and beyond.”***

***“Our local Parish Council has been pro-active in supporting a bus service to Bury St Edmunds twice a week. Other than this, travel can be challenging for older people, as many do not like using the A14 as it can be very busy.”***

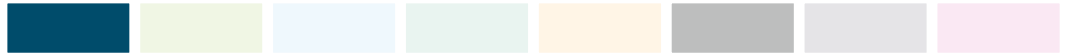


It is important that the county transport infrastructure supports the adoption of active travel solutions. Poor road maintenance, lack of access to safe cycle paths, overgrown pavements and volume or speed of traffic on roads were all mentioned as factors that prevented people from considering more active ways of getting about.

*“Walking around the village on the country lanes with no pavements and speeding vehicles.”*

*“Our roads are in a sorry state so getting about is often difficult. Too much traffic on back lanes and too few traffic calming measures in place.”*

*“Currently I walk and cycle. The latter is becoming increasingly problematic on the roads near home - very dangerous potholes, which are worse after wet weather as they*



*are hidden below puddles. I also notice that some footpaths have become less accessible due to lack of undergrowth clearing and signs have also disappeared.”*

*“The challenge of cycling on our rural roads are overwhelmed by the speed and size of traffic - 40 tonne plus lorries and cyclist do not travel well together.”*

Overall, respondents generally viewed buses as the only feasible alternative to travelling by car. However, the limited availability of bus routes and infrequent timetables left some unconvinced that public transport could adequately meet their needs as they age. A few people said perceived cuts in public spending left them concerned about the future of free bus passes/subsidised travel.

*“Bus transport is decreasing all the time and, except for major conurbations is now practically useless.”*

*“Villages are cut off in the evenings and on Sundays and the frequency of buses is not good generally. Some form of community transport for those without a car would assist.”*

*“Being able to move around to access social activities visits to the GP, swimming pool shops etc are increasingly difficult with public transport either being cut or not turning up.”*

*“Transport is more difficult since bus has stopped coming through village, and not able to walk to nearest bus stop.”*

*“At the moment I am mobile so appreciate my bus pass, but worry this will be taken away.”*

*“Transport where I am is good, but if the service is reduced or I lose my bus pass this would be a real concern as it would change how easily I can remain independent and active. It’s very concerning that we’ve already lost our winter fuel payments and potentially the single person council tax reduction, each reduces the money available to me for living further.”*



*“Many older people have to give up driving and find public transport often difficult to manage due to having to wait, limited routes, anxiety, physical disabilities or dementia making it inaccessible to them.*

*“If incomes are limited the cost of taxis is hugely prohibitive.”*



### **What people told us at the One Big Multicultural Festival (Ipswich)**

People expressed concerns about transportation as they age, highlighting difficulties accessing healthcare services via public transport. While one person mentioned they appreciate the availability of bus passes, they noted that train fares are often too expensive, creating additional barriers to mobility.



The charcoal drawing symbolises a tree with large branches but short roots. The short roots reflect the artists brief time in England and how they are still finding their place in Suffolk - a place they have called home for only the past 10 years. However, the tree stands strong, representing the journey of life and the experiences gained with age. The artist drew themselves in the tree to depict their 'silly side', which they are now trying to embrace..

Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.

# J's views

***“Even volunteering or maintaining a sense of independence by going shopping becomes impossible without reliable transport. If they stop free bus passes, it would be devastating.”***



## Respect and Inclusion

I've noticed a growing lack of respect and understanding between young and older people. It seems like older members of our community aren't valued the way they used to be.

This happens because where young and old people used to mix, like youth clubs, church groups have all disappeared. These groups provide role models, a guiding hand and advice, but now that engagement between young and old just isn't happening. This impacts on older people as they feel less involved in their community.

I think it might help to create opportunities for young and old people to work alongside each other through apprenticeship schemes.

## Transportation

Transport is a real issue, especially in rural areas where there is no public transport because the bus services have been cut back. So, older people who don't drive have to rely on charities and small organisations that operate on year-to-year funding.

Bus companies use big buses and say its no longer viable to run, but why not run a mini-bus services instead? I think the lack of public

transport impacts on lots of elderly people and those who are economically challenged and can't afford to drive or get to job. Cuts to these services penalise older people. If you are older and lonely and rely on a bus service to get to a lunch club or into town, you just don't go.

I live in a fairly rural area myself, and while our bus service has been cut, we still have one that comes through the village every hour. My 92-year-old father though, lives in a more remote area. He's computer literate and helps others with their computer. But if he couldn't help, they'd have to travel 26 miles round trip to Woodbridge library. I'm not even sure if the library provides support to help people use the computer.

I support an older gentleman who is alone, and I showed him how to use the computer to enable him to pick up his emails from America. So, if you don't have a computer getting to libraries is essential for older people to retain contact with their families living away, but they have to be able to get there.

## Domains interconnect

So many things rely on so many other things. We can focus on transport because if older people can't get out and access essential services, it becomes a real problem as they



lose social contacts. Although, we have team meetings so if you're looking after a spouse with severe dementia, you could be offered a telephone or online carer support meeting, but sometimes you need to physically get out of the house for respite.

But if there's no transport, you can't do it. That impacts terribly on people's health. If you are lonely and want to go to the shops and have a coffee and end up talking to somebody you need to be able to do that. Even volunteering or maintaining a sense of independence by going shopping becomes impossible without reliable transport.

If they stop free bus passes, it would be devastating. For many older people, the bus pass is a way to get out and meet people. If they had to pay for that, it might become economically impossible.

# Paul's views

***“Right now, we only drive within a 15-mile radius but losing the car would make life a nightmare. Even getting to the train station requires the car.”***



## Access to healthcare & digital

I am 73 years old, with heart failure, COPD, and a failing hip joint. I underwent open heart surgery 12 years ago which failed so I now have a leaking valve meaning my heart doesn't function like it should. My hip can't be operated on due to my heart problems and the effects of general anaesthetic.

So, one of my worries is it is such a rigmarole getting an appointment with the doctor. We have to ring the surgery which can take a long time. It used to have an internet system, but they stopped it. The last few times we have tried to use the app it was not available.

## Transportation

At the moment we have a car, but it's 21 years old and the odds of us being able to buy another one is minimal. If it fails the MOT, replacing it isn't an option. We used to have a bus service in Hessel, but it's gone now. The nearest bus is two miles away in Thurston, but I can't walk that far due to my health.

I do have a bus pass, and I can get a bus if I book it several weeks in advance, but I was unaware of the taxi vouchers I would be entitled to. We also have a blue badge that we use to go into town, but getting to the GP surgery in Woolpit, four miles away, is difficult.

Without a car we would have to pre-plan everything. At the moment if we need something we just go down the road to get it, but we would have to pre-plan everything. It would affect me mentally as even now I have to have a medical every two years to keep my license. My wife can drive, but her health isn't great either. Right now, we only drive within a 10–15-mile radius but losing the car would make life a nightmare. Even getting to the train station, four miles away requires the car.

## Social participation and digital

During lockdown, we used to do online shopping, but it costs more as we could only choose what was online and can't browse. Being on a tight budget we shop at the cheaper shops and don't do it online now.

We used to go out on a Friday to a club for three to four hours, but we gave that up as neither of our health is up to it and the drive is too much. There are social events in the village hall like tea afternoons which we attend because they are just up the road. As well as shopping and getting to see our grandchildren.





**“Being close to community and health services means you can reach them quickly and often if need be and to do this transport links are key. This also allows you to be independent in looking after your health until you are unable to. Many people as they age still wish to be independent and may no longer wish the responsibility of driving but are happy to use a bus or train or taxi. Free bus pass is everything, I am looking forward to mine :)”**

## **5. More views from local partners**



# Submissions from partners

This section of the report features summaries of the work undertaken by partners we engaged and funded to gather views from specific local groups, communities and demographics. The support of partners has enabled this project to include the widest possible range of views and perspectives on ageing in Suffolk. All reports were compiled by the partners taking part.

Partner and description of activities	Location
 <p><b>Polish Community Hub</b></p> <p>This summary (featured as a highlight earlier in this report) provides an organisational perspective on what ageing well means to the Polish community and highlights key challenges they face. A key takeaway was the significant challenges posed by language barriers and unfamiliarity with technology to accessing healthcare services. The summary also underscores the importance of respect and inclusion, and the need to support social connection and reduce isolation.</p>	<p>Find it on page 68.</p>
 <p><b>Ipswich Romanian Community</b></p> <p>The artwork featured in this report, created in collaboration with the Ipswich Romanian Community and Romanian artist Romeo, offers a creative perspective on what ageing means to people within this community. The artwork and its meanings are presented throughout, with a recurring theme emphasising the importance of family and discussion around life's journey.</p>	<p>Find the art throughout this document</p>
 <p><b>Suffolk Refugee Support</b></p> <p>This report summarises discussions with staff and several service users, highlighting that language is a major challenge to ageing well in Suffolk. Therefore, making information accessible in community languages is crucial for ensuring everyone can access details about health services and local activities.</p>	<p>Find it on page 130.</p>
 <p><b>Suffolk Pride</b></p> <p>This report captures insights from several trans and non-binary groups and events. Key findings emphasise the need for LGBT*Q+ inclusive spaces to support social connection, alongside the social inclusion and respect challenges faced by trans and non-binary people as they age. Further exploration is also needed into the experiences of people of different gender identities.</p>	<p>Find it on page 132.</p>



### **Communities Together East Anglia**

In this report, you will find insights from six community groups and events, underscoring the importance of accessible, affordable healthcare, reliable transportation, warmth, and safety at home. In particular, the biggest barrier identified was access to healthcare, particularly doctors and dental services.

Find it on page 135.



### **P.H.O.E.B.E**

P.H.O.E.B.E (Promotion of Health, Opportunity, Equality, Benevolence and Empowerment) is an Ipswich-based registered charity that offers specialist advice, information, casework, advocacy and support and counselling services to black and ethnic minority women and children.

This report included insights from around 50 women on their experiences of ageing in Suffolk. A key takeaway is the importance of respect and inclusiveness, which helps people adapt to their communities and supports with learning and understanding. The report also discusses challenges posed by language barriers.

Find it on page 137.



### **Thinklusive**

This report presents information from around 27 people across three events, including people with learning and physical disabilities and their support staff. Key points featured were the need to include people with learning disabilities in discussions that are often seen as sensitive or 'off topic'.

This report also discusses challenges posed by technology and how people with learning disabilities are often unrecognised carers.

Find it on page 119.



### **Ipswich Community Media**

This report reflects the voices of over 22 people from 19 nationalities. A primary takeaway is the concern over financial stability and pressures that come from employment challenges and health changes.

Further, this report talks about the difficulties caused by increased reliance on technology.

Find it on page 127.

## Thinklusive

Thinklusive hosted three sessions to explore the questions and broader themes of the 'Ageing well' project.

One session took place at the Brave Art program, hosted by Suffolk Artlink in Bury St Edmunds, where they engaged with around **nine** people. Another session was held at the Stowmarket Community Hub, where they spoke with approximately **12** people. Additionally, they conducted an online session, which included **six** people from a diverse range of backgrounds, including people with learning disabilities, autism, and physical disabilities, as well as professionals working with carers groups and adults with learning disabilities.



All sessions were well attended, and people had lots to say about 'ageing well'.

### What does ageing well mean to you?

In response to the question, many people expressed that ageing well meant maintaining physical fitness and health, with several people mentioning the desire to stay active, healthy, and avoid illness.

*"Having the physical ability to do what I want, whatever that is - so being as fit as possible."*

*"Getting very old. You have aching wrists and bones. It's going to happen to me but not yet. I've lost a lot of weight recently and try to keep healthy. I was 27 stone for 10 years. I feel much better now."*

*"It means to try and keep yourself fit and healthy and try and do what you can to make sure you don't get illnesses like type one diabetes."*

For others, maintaining independence was central to ageing well, especially for people with disabilities. Access to services that support health and wellbeing were seen as crucial to maintaining this independence.

*"I have cerebral palsy, so to me, ageing well is still being able to walk and do everything that I want to do and need to do - ageing well to me is remaining independent."*

*"That is a very big thing for me. Being independent and hopefully pain free."*

**Thinklusive is a champion of inclusion, equality and clarity. It works in co-production to design, create and review information for local people. It supports service transformation by creating new ways of communicating ideas and information.**



*“I have cerebral palsy, so to me, ageing well is still being able to walk and do everything that I want to do and need to do.*

*“Aging well to me is remaining independent.”*



*“Making sure that there are services available to make sure that you’re healthy, can be as independent for as long as possible.”*

The Thinklusive facilitator highlighted that early in the Stowmarket session, **two** people became visibly upset about answering questions about family and elderly parents. Although an isolated incident, it’s important to note that people can find talking about ageing, elderly parents, illness and death difficult. These are topics that are seldom discussed with people with learning disabilities and can make people upset when the topics do come up. This served as a reminder of the importance of engaging people with learning disabilities and that no subject should be ‘off topic’.

## What is most important to age well?

Several members of the group in Bury St Edmunds shared the difficulty in deciding what mattered most: ‘a lot of us can’t decide which is the most important!’. Although access to health and community services and social opportunities were commonly highlighted, discussions largely focused on transport, housing, and respect and inclusion.

### Transportation

Many people talked about relying on parents or support workers to get around. While much of the current support in place was working, if any of these arrangements broke down for any reason, people would immediately be left isolated and in danger of not doing as much, purely from a lack of transport.

*“I get around in the car. My dad comes and picks me up every day and drops me off in the morning.”*

*“I do walk on my own, down to hub and back home. If I want to go out, I go in a carer’s car and I pay petrol costs.”*

Despite this, **one** person mentioned the challenges they face using public transportation, particularly the shift to digital ticket machines and fewer support staff.

*“I’m scared to go on the train as I have to do the ticket on the machine, you’ve got to press a lot of buttons. The person who helps has gone!”*

Additionally, **one** person pointed out how lack of transportation affects mental wellbeing.

*“There are people that I know who no longer go to groups because of lack of transport. Their*



*mental health will probably be suffering. And they're not just mixing with other people."*

### Suitable housing

Most people still lived with their parents, some of whom were elderly. **One** member of staff spoke about the struggles some family carers reported during COVID lockdowns but four years on now they are no longer reporting these same struggles. This could have been the isolated nature of the lockdowns, but the member of staff was concerned that family carers are keeping struggles and issues to themselves.

*"If parents were struggling years ago, then they may still be struggling now, but some people don't want to make a fuss."*

*"It's possibly a generational thing, as parents of younger people we support are much more likely to support their child to move out and to live away from the family home."*

*"I'm really not happy where I'm living at the moment. But I am talking to social services about moving into a better place."*

*"It's about planning early enough. Which rarely happens. We need a plan that ensures there is enough appropriate housing each year. And that people get support at the right time when they need it, otherwise it's emergency care, which obviously costs way more money. It seems that everyone's powerless to do anything about this."*

### Respect and inclusion

Multiple people emphasised the importance of feeling respected and included in their communities to feel safe, whether with or without support.

*"I think people want to have respect and inclusion, don't they? You want to know that there's respect and inclusion there, so people feel safe to go out in the community, whether they're with support workers or not."*

**One** person reflected on their own need to learn respect and inclusion to be included, acknowledging that their behaviour sometimes led to exclusion. However, this could also highlight how people with learning disabilities are sometimes misunderstood, often leading to them becoming more isolated and excluded from activities and groups.

*"Every time I go into the community, I spoil it when I say things that are not respectful... I need to learn respect and inclusion to be included in communities... a lot of the times I get left out of things because I'm not respectful. And then I get told not to go back anymore."*

Later in the discussion, some individuals spoke about the challenges of receiving respect from others regarding their learning and physical disabilities, emphasising how a lack of understanding can have a negative impact on their wellbeing.

*"Some people don't move for me when I'm using my stick. People have no idea at all. Other people don't move out of the way. Some people stare at me (with my stick), I feel like I'm from a different planet."*

*"Sometimes I do, sometimes don't. Some people don't give any respect to others and what*



*“The digital one is huge for people.*

*“EVERYTHING is going online and lots of people here don’t have a phone or tablet.”*



*they are going through with their Asperger’s syndrome. When I let out feelings that are part of Asperger’s Syndrome ‘I turn things around’, my syndrome turns things around, tries to cover the feeling up, take it away. If the system thinks whatever your feeling, they’ll try and take it away.”*

## What are the biggest barriers to ageing well?

### Digital information

A major barrier identified was digital access and communication, with many participants feeling left behind as services and interactions increasingly move online. Limited access to devices, lack of digital skills, and poor connectivity prevent people from accessing essential services and staying socially engaged.

*“My dad has a laptop, but I’m not allowed to use it. It’s something I’m interested in, if someone could teach me.”*

*“We see the age gap in technology. The younger people that come in, they’re so used to using technology. They know how to do it better than what we do. So, it’s not necessarily to do with learning disabilities, it’s to do with learning on how to use new things. People simply never had them when they were younger.”*

*“Have you got an email address? – No I can’t read and write, I not very good at it. Even a receipt in a shop.”*

*“I know people who can’t do online banking, so even day to day money management is a barrier for some people.”*

### Access to health and community services

People discussed the challenges of accessing health and community services, particularly due to limited face to face appointments and lengthy wait times.

*“Access to healthcare. With GP services, you either phone up or you’ve got the app on your phone. You don’t see easily see people face to face anymore, do you?”*

*“People vastly prefer face-to-face. You need to be seen sometimes. A lot of people we work with don’t have access to services using a phone. And it won’t be a surprise, but it takes a long while to actually make appointments.”*

For people with learning disabilities, accessing healthcare can be especially difficult, as they often feel dismissed when seeking advice and appointments can be confusing. Some noted

that getting mental health support or other critical services often requires reaching crisis point.

*“For me, health appointments are confusing.”*

*“Every time I want to see my doctor, they (support workers) ask: what’s wrong with you? They say, you don’t need to go to the doctor. You’re fine.”*

*“I booked to speak to a mental health practitioner/GP, mainly as a first step to move out into my own place. It feels like it has to get to a crisis point, before you get access to services.”*

## What support is needed to help you age well?

### Access to healthcare

Following from the point above, multiple people emphasised the need for doctors to listen, explain clearly, and speak slower to help them with communication challenges. They also highlighted the need for more accessible appointments, and better support to help them understand the information being given during health appointment.

*“The doctor needs to talk and explain things to me. They don’t listen to me.”*

*“Doctors talking a bit slower to me, I need my mum to come to appointments with me – they don’t understand my conditions. It’s a rare condition. I’m frustrated as my needs are quite unique.”*

*“People first go to their doctor, but if they can’t get in there then it causes other problems. People are frustrated, there’s lack of information. If you don’t have anyone to help you oversee those things, then I can see why people stop taking the medication, stop going to things because it just feels too difficult and frustrating. And it’s just too much.”*

### Support network

Many people expressed concerns about their future care and support, especially when family members who currently support them are no longer able to do so. Several people said they rely on parents or other family members to assist them with daily tasks, and the thought of losing that support leaves them feeling uncertain about who will help in the future.

*“My mum and dad support me at home. My mum helps me to get dressed in the mornings and my dad helped me to support me to shave. Then I get shaved and put aftershave on for the girls! They help me with everything really.”*



*“When she (mum) goes, who’s going to look after me?”*

*“I’m worried about that. It’s really important.”*





*“What’s stopping me is... my dad not being willing to help himself. Not wanting to join a stroke association, not wanting to do enough to help with his stroke...*

*“relying on me and my mum to keep helping him all the time.”*



*“I tend to worry what’s going to happen in the future, if R goes before me, I’ve got no one to help me. Who would I go to? I’ve got no social workers no services. I don’t know who I’d go to. My stress goes up when I think about it.”*

*“I used to be under LD team, but no ‘longer on the books’ – but getting back support isn’t easy. The support around me is gone. No where to ask questions. Where do I go for this and that.”*

*“It’s alright if you live with parents, but not when you’re on your own. When your parents pass away, where do you go for the help.”*

*“The nearest person (to look after me) would be my brother, he understands that he’d have to look after me. We’ve had a conversation as a family.”*

Several of the participants were caregivers to elderly parents. They mentioned the need for additional support for both them and their family members to help them age well. For some the constant responsibility of care-giving, without external support was impacting their overall wellbeing.

*“Having someone else to help support my dad, like Suffolk Family Carers or another agency.”*

*“.and to explain to him that he needs to get help when he doesn’t want to keep bothering people and to stop relying on me all the time.”*

*“.for me to have a one-to-one support worker. I need to have transport to go out and about a bit more to keep me fit and well – maybe support to join a gym. I don’t realise that when I’m here constantly helping Dad all the time, it’s making me worse in my mental health.”*

As a result of the above, many needed more accessible support and information about available services and groups that could support them.

*“Making sure that we are connected to organisations and places in our communities outside of our homes.”*

*“I think there’s so much being done, but sometimes it’s been done in isolation. There’s lots of different groups and volunteer groups, public health funded groups now, but it’s still not reaching people, is it?”*

*"I feel like having more information about services more readily available would be very helpful because I do know there are services that can help people."*

*"Understanding things if I do get ill, support to understand things that happen to me."*

The Thinklusive facilitator further asked: how do you feel when you're out with the caring role?

When out of their care-giving role, people express feeling more relaxed, freer, and able to make their own decisions without the stress of managing conflicts or responsibilities.

*"I feel more better and relaxed and haven't got anybody to argue with and make my own decisions."*

*".I just feel a bit more freer. Freedom in the evenings is a bit better. Relax a bit more."*

*"I do my work and occasionally go to events like with Avenues East, but that's about all really. A lot of events I've been to in the past I have given up because my dad's not getting any better."*

The Thinklusive facilitator reflected that there are a lot of people with a learning disability who are unrecognised, informal carers. In many situations, this seems to be working well, but independence can be taken away from people, especially those with a learning disability. With limited resources, services/organisations do not prioritise these kinds of arrangements, and people can have lives that, for years, are dominated by their caring role.

## What activities are people doing to help them age well?

People highlighted the importance of having opportunities to be sociable and creative, to explore new things and discover things they enjoy. Several examples of things people were doing to keep themselves well included attending community-oriented cafés and clubs, indoor bowls, brain games, attending church, travelling, and walking.

People were also attending specialised groups, such as gardening groups to support bereavement and a dementia friendly football team, which help build social connections and support wellbeing.

*"I've also seen recently and been to meet a compassionate gardening group for people who are either recently bereaved or are expecting a bereavement."*

**“It's something that we struggle with. Many people are likely to be 45+ and caring for ageing parents.**

**“It's the people that maybe aren't going to groups and other things already, that then aren't in those places to hear about recommendations of other places they can go.”**



*“Community oriented cafés and clubs – like Cuppa, a café in Felixstowe. An indoor bowls group in Felixstowe. The Saturday morning Prom Run in Felixstowe.”*

However, whilst these activities, groups, and events are appreciated and shown to support people’s mental and physical health, they don’t always meet the needs of everyone, prompting a desire for more options in the evenings to better support those balancing care-giving with personal time.

*“Lots of them involve walking, or very low levels of social activity. ‘Have a cuppa and a walk’ – simple ways to engage people. And I think that’s lovely, but actually the timings are all during the day, which for most people, that’s what they want, but actually it doesn’t cater for all.”*

*“So, Yeah, so it’s maybe finding that model for more for the evenings. Because I do fall into that bracket of 45 plus. And I was thinking, what do I do? What do I do to help myself? Not a lot.”*

## Ipswich Community Media

Ipswich Community Media (ICM) organised an in-person workshop to explore the concept of 'ageing well' with local community members. The event was attended by **22** people of twelve different nationalities, who shared their perspectives. ICM also facilitated a discussion on 'ageing well' in one its English language classes, gathering insights from people of an additional **seven** nationalities. Below is a summary of feedback from both sessions, representing the views of people from **19** national backgrounds.



Nationalities represented included:

- Romanian
- Bangladeshi
- Slovakian
- Italian
- Georgian
- Turkish
- Russian
- Ukrainian
- Bulgarian
- Brazilian
- Polish
- British
- Lithuanian
- Afghan
- Iraqi
- Indian
- Indonesian
- Iranian
- Hong Kong Chinese

### What does ageing well mean to you?

People shared that ageing well involves maintaining good physical and mental health, with accessible health and care services when needed. They emphasised the importance of financial security after retirement to enjoy a good quality of life. Furthermore, ageing well also means maintaining independence for as long as possible, staying socially connected with friends and family both locally and abroad. Lastly, personal security, including protection from online scams or safety from crime.

*"To be able to have good health, to get best medication, to be able to do exercise, and to have friends and family around us."*

*"Older folk sometimes intimidated by younger people."*

Some people reflected on how attitudes to ageing have changed over time, with people retiring at a much later age nowadays and there being a greater expectation that people remain economically, physically and mentally active much longer than before. They

**Ipswich Community Media provides high quality community activities and opportunities in music, media, the creative arts and language learning for people of all ages, cultures, abilities & backgrounds.**

recognised that there were far more opportunities and options available now, to support people as they age, however there were still some significant challenges.

## Barriers to ageing well

### Finance and financial security

Concerns over financial stability were common. A couple of attendees reflected that their current employment options were limited due to their qualifications not being recognised in this country or they needed more support to find appropriate forms of employment, thereby impacting their ability to save for the future.

*"I need more opportunities and guidance to get the chance to have a new type of employment."*

*"It is difficult to start again in a new country. My education/qualifications are not accepted so I am not able to do the work I previously did, with English as a second language."*

*"I'm worried about future – finance and being able to look after my family."*

*"There is a pressure to keep the same level of income as you grow older, however the state pension is not even the equivalent of minimum wage."*

There was also a recognition that changes in health as people age added new financial pressures to already tight budgets.

*"Cost of living is a concern now and, in the future, – cost of glasses is too much – dental treatment – no NHS – very expensive private treatment."*

*"Paying for adaptations/equipment as you get older is expensive."*

*"As your mobility reduces you become more reliant on local shops, but often these smaller shops are often more expensive."*

### Language and technology

People reflected on the increased use of digital technology and the challenges this posed on people, of all ages, where English is not their first language. They highlighted that communication needs and preferences should be recognised and addressed and that people should have a choice in how they are given information, communicated with and access routes into services.

*"Language – using the phone is difficult. Need more access to face to face instead of phone."*

*"Accessing health services when English is not your first language is challenging. Face to face is often preferred. People have difficulties completing online forms, as written English is more difficult, but so is using the phone."*

*"Digital – it's not always about lack of skills but to do with people's communication preferences. People are worried about scams etc."*



*“Variety of communication is important. It is important to have a choice. It is important not to lose the right to have a choice as you grow older.”*

*“Being in a different culture it is difficult to know where to approach and how things work.”*

Some people also discussed the importance of digital technology in helping them to keep in touch with their friends and family in their home country, which was important for their wellbeing. Technology enabled them to remain connected with their culture. However, it was recognised that digital technology can also increase people’s sense of isolation and loneliness.

*“Need to recognise that for people where English is not their first language, they do not use the same sources for information as those who are British for example they won’t go to the BBC news website. They will go to their own country’s media sites. Digital enables people to be able to do this in a way that wasn’t available in the past. It helps to keep the connections with home and their own cultures.”*

*“We use facetime to stay connected to my dad, and while it is good to be able to see him and chat with him, he gets upset because we are all together here and he is on his own back Turkey.”*

*“Sometimes you get caught between two systems. You don’t feel like you fit in either country.”*

### Loneliness and loss of community spirit

Finally, several people felt a loss of community spirit in recent years, resulting in older people feeling lonely and isolated. **One** person reflected, ‘sometimes older people are invisible in society. It feels like everything is focused on families and young people’, while another person noted ‘hyper individualistic culture’ that exists in Britain today, which emphasises personal independence, self-reliance, and individual rights over communal or collective goals.

### What support is needed to age well?

People expressed the importance of ongoing English language support to help them age well. They felt improving language skills would aid them in accessing essential services like health, housing, and care as well as support them to build social connections and help prevent isolation. People felt it was important that language skills are maintained and enhanced as people get older, particularly as memory and recall can diminish with age.

*“The offer of more language lessons given to help us as we get older.”*

*“Being able to speak English better will help me with the future.”*

*“Language – learning becomes slower as we age, ability to remember things, particularly when you are a migrant.”*

## Suffolk Refugee Support

Suffolk Refugee Support has compiled a summary of feedback from service users and staff members gathered in early October 2024. People were asked about their perspective on what ageing well means to them, the main barriers to ageing well in Suffolk, what support they need to age well in Suffolk, and any current activities aimed at helping people age well in Suffolk.



### What does ageing well mean to you?

**Three** Kosovan service users commented that *'family and reliable friend around me'* would make ageing easier for them, as well as being able to visit their home country and parents. For these people, a sense of community and personal relationships was associated with positive health outcomes. As a service user stated: *"Family is needed to look after and take care of us, home care is not good and, in my country, no one will use home care. I want to be a happy grandma and support my grandkids."*

Another service user concurred and stated, *"Best friends always help me"*. Therefore, interpersonal relationships were viewed as necessary for a healthy life.

A service user also commented that having money would mean better care, possible medical care. They stated: *"I need money, I need people around me, it will keep me healthy. I can work, but if I don't have money, I don't have enough power, I need money."*

It is difficult for many service users at Suffolk Refugee Support to look ahead because their personal circumstances are very much in the present. Whilst several service users did share their thoughts and perspectives, these will vary case to case. For example, **two** clients expressed a desire to return to their home country in advance years, yet, if they have grandchildren and strong ties in the UK, will this be feasible?

A staff member at Suffolk Refugee Support, who works closely with the Afghan community, gave the following comment. When asked about ageing well, the staff member stated *"This means when they get older, having better health, going to the gym, eating healthy food, all these things are needed to age well."*

### What are the barriers to ageing well in Suffolk?

In regard to the barriers to ageing well, the staff member stated. *'I think the language barrier is the biggest problem. If they have leaflets and information, if they can't read or understand the language, if its not translated it is a big barrier'*. Thus, having materials and resources in different languages to inform people in the community about ageing well and health related

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**Suffolk Refugee Support is an independent charity whose purpose is to ensure that all asylum seekers and refugees in Suffolk are enabled to live integrated, fulfilled and contributing lives in their new communities.**

issues.

## What is needed to help people age well?

A staff member stated, *'offering sessions about a healthy life, so people can be aware of breast cancer screening or attend exercise class or learn about high blood pressure. Suffolk Refugee Support runs these sessions and that is good. The exercise class is good, and I think we need walking groups, walking in the parks, for parents, buggy walks things like that, this is really good'*.

This comment shows the need for interpersonal relationships, through the community network of 'walking groups' and 'exercise classes', as well as access to exercise and fitness opportunities. Information sessions in community languages was also identified as being helpful, as this staff member commented that they are translating an upcoming information session on cancer for a group of female service users.

## Advice worker experience

An advice worker for the Afghan resettlement program made the following comments. This staff member is an Afghan woman and described herself as having a lot of insight into the service user's lives and challenges.

*"I can actually tell you what I have seen in the past 10-15 years. I saw how ageing affected my mum. Afghan women are way too busy, taking care of the family and other people. They have no time for themselves. They become a different person. They do housework, but no exercise. I believe it's a lot mentally. If mentally you are happy and you don't have things to worry about you are good. There is a relationship between exercise and mental health. It is very important to have a good life. So, when you are ageing it doesn't affect you as much. Previously, I was a health care assistant. Women who are only 70-years-old look 90 or 95! They look so much older. Problems you can face in Afghanistan versus the UK, for the clients the first few months are so difficult.*

*"In the Afghanistan program, people may have had a good life previously. They become more likely to go into depression. There are language barriers, which create barriers to employment affecting their health. I tell them, give it a year or two. The services they can use are planned activities, for fun, for example we (SRS) held a party for the Afghans. The people said it's the best day of their lives since they came here. So, if it can be like that, social, it will help a lot. There is not enough ESOL which presents a barrier, not enough provision and this creates a barrier to other activities."*

In sum, the biggest barrier for ageing, as identified in these comments, is a lack of information about healthcare services in different languages. Secondly, the importance of community, friendships, and activities was highlighted as key to ageing well in Suffolk. Thirdly, increased activities and events would facilitate socialising, have positive outcomes for mental health and strengthen communities. Finally, increased ESOL provision would enhance service users' understanding of and access to healthcare services such as exercise classes and information sessions.

## Suffolk Pride

Suffolk Pride gathered insights from two trans and non-binary support groups and one LGBT\*Q+ event held between late September and early October 2024.

The feedback focused on participants' views on what 'ageing well' means, the challenges they face in achieving it, and the types of support they need to age well in Suffolk. The feedback also explored their involvement in activities that help them to age well and their access to various services and opportunities.



### What does 'ageing well' mean?

For many respondents, ageing well is associated with maintaining good physical and mental health, as evidenced by responses focusing on having few ailments and prioritising health. Other definitions include access to enriching activities, being content, and contributing to the community. While one respondent challenges the concept of 'ageing well' altogether, arguing that ageing itself is a privilege and that living happily into older age is what matters most.

### Barriers to ageing well

Access to healthcare emerged as a significant barrier with respondents mentioning difficulties accessing GPs, finding doctors who understand their needs, and long wait times for specialist referrals.

Furthermore, financial constraints were another major barrier, with the cost of living impacting wellbeing and work pressures limiting time for self-development and care. Respondents also noted that limited access to activities that promote wellbeing and fit around work commitments is also a concern. Additionally, negativity and unkindness from others are also mentioned as a barrier to ageing well.

### Support needed to age well

Respondents expressed a need for more support groups, better access to information on medical subjects such as menopause, and community projects that promote wellbeing. They also desired more consistent support in health and social care, more contactable support services rather than relying on online portals, and more opportunities for social interaction. There is a clear call for NHS funding to improve services and make them more accessible.

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**Suffolk Pride is a community organisation that organises LGBTQ+ events in Suffolk. This includes the large annual pride event in Ipswich and a range of other pride and awareness related activities across the county.**

## Engagement in activities

Several respondents are involved in activities that contribute to their wellbeing, such as volunteering, attending support groups, participating in LGBTQ+ group, engaging in hobbies, attending religious groups and going to the gym.

## Access to services and opportunities

The data reveals mixed experiences regarding access to services and opportunities. While most respondents agree they have opportunities to be social, access to community and health services could be more consistent. Some respondents report good access to transportation, while others disagree. Similarly, there are mixed feelings about access to suitable housing, digital information, and employment/volunteering opportunities.

## Conclusion

The data suggests that while many people in Suffolk are actively engaged in activities that support their wellbeing, there are significant barriers to ageing well. Addressing barriers requires improving access to healthcare, providing more financial and social support, and creating more opportunities for meaningful engagement within the community.

## Connections between gender identity and ageing well in Suffolk

While the sources provide rich information about the barriers and facilitators to ageing well in Suffolk, they offer limited insights into the specific experiences of individuals of different gender identities.

### Direct Connections

- **Limited Data:** The dataset includes only three individuals who identify as Trans\* or Non-Binary. This small sample size makes it impossible to draw statistically significant conclusions about the relationship between gender identity and ageing well within the Suffolk context.
- **Individual Experiences:** The responses from individuals who identify as Trans\* or Non-Binary highlight some potential areas for further exploration. For example:
  - ◇ One respondent mentioned participating in Suffolk Pride and the Ipswich Trans and Non-binary Group as activities that support their wellbeing. This suggests the importance of LGBTQ+- inclusive spaces for social connection and support.
  - ◇ Two respondents in this group report disagreeing with the statement 'I see myself respected and included in society'. This indicates potential challenges related to social inclusion and respect for trans and non-binary individuals as they age.

### Indirect Connections

- **Broader Themes:** Some of the broader themes that emerge from the data, such as access to healthcare, social support, and financial security, could intersect with gender identity in important ways. For instance:
  - ◇ **Healthcare Access:** Trans and non-binary individuals may face unique challenges in

accessing healthcare that is sensitive to their needs.

- ◇ Social Isolation: Discrimination and lack of understanding can contribute to social isolation, which is a known risk factor for poor health outcomes, particularly in later life.
- ◇ Financial Security: Trans and non-binary people experience higher rates of poverty and unemployment, which can exacerbate the financial barriers to ageing well already identified in the data.

### Further Research

To better understand the connection between gender identity and ageing well in Suffolk, further research is needed. This research could include:

- Qualitative studies: In-depth interviews or focus groups with trans and non-binary individuals in Suffolk to explore their experiences, needs, and perspectives on ageing well.
- Quantitative surveys: Surveys with larger and more representative samples of trans and non-binary individuals to quantify the prevalence of specific barriers and facilitators to ageing well.
- Community-based participatory research: Collaborative research projects involving trans and non-binary community members to ensure that research questions and methodologies are relevant and culturally appropriate.

### Conclusion

While the current data provides a valuable foundation, more focused research is necessary to fully understand the experiences of trans and non-binary individuals ageing in Suffolk and to develop targeted interventions that promote their wellbeing.

## Communities Together East Anglia

Communities Together East Anglia engaged with six groups to discuss ageing well in Suffolk, the challenges faced, and the things people were doing to support healthy ageing. Seven people in a group in Stowmarket completed the questionnaire, while the other five groups participated in discussions.



Group sizes varied, with Carlton Colville having **28** participants, Ipswich **12**, Aldeburgh **seven**, Eye **15**, and Halesworth **18** (including several people living with dementia). The conversations from these sessions provided valuable insights into the needs and experiences of these communities.

### What does 'ageing well' mean?

To the participants in all groups, ageing well means staying healthy, pain-free, maintaining mobility, and being happy. They also emphasised the importance of social connection, in particular being able to see friends and family regularly and having trustworthy people around as they grow older. As well as these, participants also highlighted the importance of accessible and affordable health care services, reliable public transport, keeping warm and feeling safe at home. The Eye group specifically mentioned the need to be heard by those in authority or position of influence.

### What are their biggest barriers to ageing well in Suffolk?

The biggest barriers to ageing well in Suffolk included social isolation, loneliness, unreliable public transport, financial constraints, and a lack of awareness around available services and activities, which were concerns shared by all groups.

Participants also faced significant challenges in accessing healthcare, particularly doctors and dental services. Some people expressed feeling unheard by healthcare professionals, while one person described facing age-related stereotypes, such as being stupid and incapable due to their age.

Other barriers discussed by the groups included reduced mobility, poor health, the impact of medication on weight, and age itself.

**Communities Together East Anglia is a Suffolk based charity, committed to reducing loneliness and social isolation. It believes that people need people, and that if we can create a network of contact and support as locally as possible to the individual, then the routes of support improve, reducing loneliness and isolation and improving health and wellbeing.**

## What is needed to support you to age well in Suffolk?

To age well in Suffolk, all groups highlighted the need for reliable transport, accessible healthcare, and strong social connections, including having friends with similar interests and someone to look out for them and their mental wellbeing. There was also a shared desire among the group for more personal interactions, less reliance on technology, and improved healthcare access that doesn't rely solely on apps or the internet.

Practical support for living at home and preventing falls was also seen as crucial by some people to age well in Suffolk. Other people expressed the need for more organisations to offer a variety of activities, while the group in Eye specifically mentioned the importance of better information and communication on services and community groups.

Finally, the ability to keep warm at home without constantly worrying about costs was vital for all groups to age well in Suffolk.

## Are there any current activities helping you to age well?

To help them age well, people across the groups are engaging in a variety of activities and community groups. Popular options included CTEA Chinwags, walking groups, dementia cafés, and exercise classes like Aquafit. Social activities such as bingo, cinema clubs, and meeting friends for a beer also play a role in staying active and connected.

Other specific groups and activities mentioned included Seagull Theatre, Knit and Natter, Red Gables, The U3A, CTEA Boccia & Otago, and the Pear Tree Centre. While both Eye and Halesworth groups valued information from television programmes and the Eye group enjoyed local radio.



## P.H.O.E.B.E

P.H.O.E.B.E used a combined in-person and virtual approach to engage as many women as possible. At their centre, they facilitated discussions through informal focus groups with 18 women, and via WhatsApp, they received responses from an additional 31 women. The key areas of interest were what supported women to age well, the biggest barriers to ageing well, and the activities they were already engaged in supporting them to age well in Suffolk.



### What is needed to support people women to age well in Suffolk?

The most commonly mentioned factors helping women to age well in their community were access to healthcare and community services, mentioned by 47 women, and suitable housing, cited by 39. One woman stated, *“the most important thing in life is health first, everyone needs a health service”*. While others noted, *“suitable housing enables me to be very comfortable and live in a healthier way”* and *“it is important for the elderly to have comfortable homes”*.

Another respondent further emphasised the importance of both suitable housing and access to healthcare services on their overall wellbeing stating, *‘I need to have suitable house to get my beauty sleep and health service which is accessible without those my mental health would be deteriorating’*.

It was further observed by PHOEBE staff members that the need for access to health services was more prevalent amongst older respondents, as they highlighted the increased likelihood of needing medical attention as you age. These women also highlighted the need for outdoor spaces and facilities where they can be social to overcome loneliness and isolation, with one grandmother stating, *‘for me, socialising with other people is very important’*.

Following these, transportation was highlighted by 21 women and respect and inclusion was mentioned by 28. Multiple comments demonstrated the importance of respect and inclusion to support people’s adjustment to their community and support with their learning and understanding. As shown below:

*“It’s good to have many facilities around, helps to explore and know more. It’s great to be in a diverse community help to learn more.”*

*“Elderly people want to be respected and be included in decision making.”*

*“Access to health services, transport, opportunities to be social and respect and inclusion in*

**P.H.O.E.B.E (Promotion of Health, Opportunity, Equality, Benevolence and Empowerment) is an Ipswich-based registered charity that offers specialist advice, information, casework, advocacy and support and counselling services to black and ethnic minority women and children.**

*communities plays a very important role in helping people adjust to the environment and make life easier in their older age."*

## **What are women's biggest barriers to ageing well in Suffolk?**

The primary barriers preventing women from living well were transportation, mentioned by **32** women, and opportunities to be social, mentioned by **29**. These challenges go hand in hand as people need access to transportation to attend activities, community events, or other activities that allow them to be social and build relationships with those within our community.

*"Near access to all social events. Daily communities available to attend for a chat, refreshment and company."*

*"The good things to help in Suffolk communities to age well I will say a get together that helps people to meet and greet. To communicate and have conversations with people, meet new people and make new friends. A lot of people lack people to talk to and can help with our day-to-day activities."*

Moreover, respondents also pointed out language barriers as a significant challenge to ageing well, as many women are migrants and speak English as a second or third language.

## **Are there any current activities helping women to age well?**

Respondents reported a range of activities that promoted their wellbeing and supported them to live well. The most frequently mentioned activity was staying active such as, walking, cycling, gym workouts, and Zumba classes. Socialising was also important for women to feel like they are living well including going to church, attending community events, volunteering, and weekly visits to PHOEBE.

*"I love Zumba at phoebe. Going on walks and socialising with people. Exercising at home and eating healthy."*

*"Walking, cycling, going to the library and church."*

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## 6. Who took part?



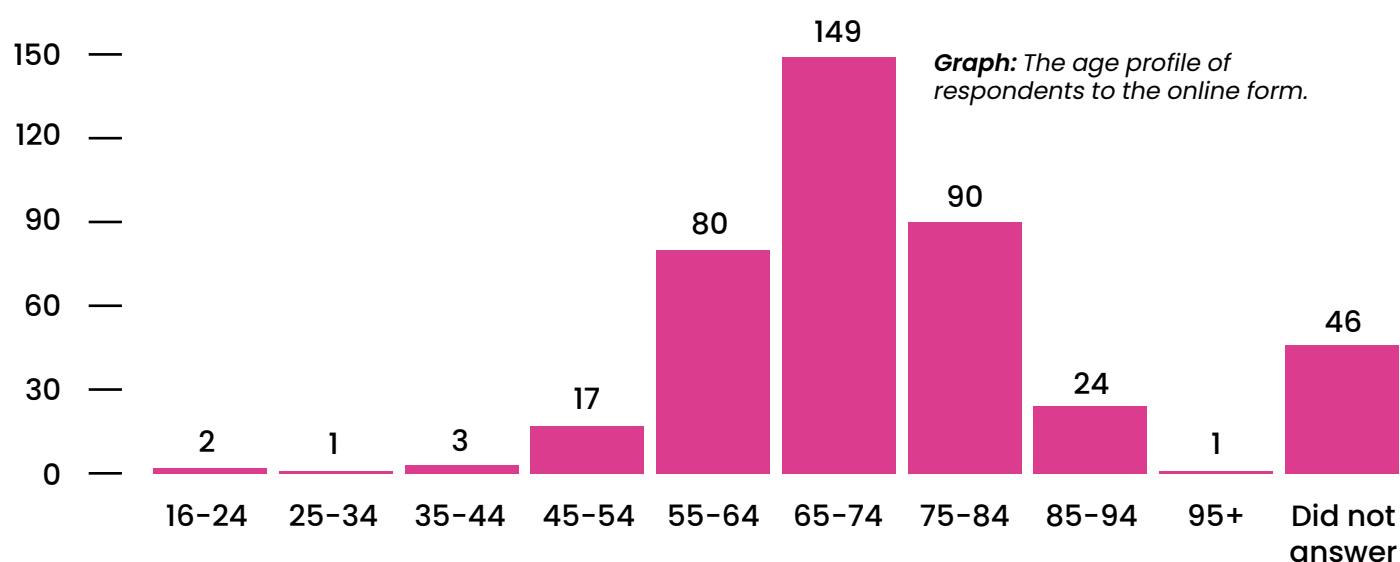
This section of the report summarises the demographic information of the people who responded to our online feedback form, at the multicultural event, and those selected as ‘Suffolk voices’.

## The online feedback form

A total of **413 people** completed the online feedback form between 1<sup>st</sup> August 2024 and 22<sup>nd</sup> September 2024 to share their experiences of ageing in Suffolk. Below is an overview of the demographic information about these respondents.

### Respondents’ age

Whilst the online feedback form was open to all ages, the largest proportion (**149 people**) of respondents were aged between 65 and 74 (**36%**). This was followed by **22% (90 people)** of the sample aged between 75 and 84. Notably, one respondent was 100 years old.



### Respondents’ gender

Most respondents (63% or 260 people) identified as female, while 27% (122 people) identified as male. A further 10% (41 people) preferred not to disclose their gender.

	Count	Percentage
Male	112	27%
Female	260	63%
Prefer not to answer	41	10%

**Table:** The gender of respondents to the online form.

## Respondents' sexuality

The majority of respondents (**61% or 230 people**) described their sexuality as heterosexual or straight. A further **36% (134 people)** preferred not to disclose their sexuality, while **3% (11 people)** described their sexuality in another way.

	Count	Percentage
Heterosexual/Straight	230	61%
Described sexuality another way	11	3%
Preferred not to say	134	36%

**Table:** The gender of respondents to the online form.

## Respondents' ethnicity

Most respondents (**79% or 299**) identified as 'White – English/Welsh/Scottish/Northern Irish/British'. A further **10% (39 people)** described themselves as 'White – Any other White background'. A full breakdown of respondent's ethnic backgrounds is provided below.

**We also received experiences of over 90 people from different ethnic groups through partner engagement (not included within the table below), including Romanian and Bangladeshi. Multiple responses were also received from people with learning or physical disabilities, dementia, refugees, and those from the LGBT\*Q+ community.**

	Count	Percentage
White – English/Welsh/Scottish/Northern Irish/British	299	79%
White - Any other White background	39	10%
Prefer not to say	24	6%
Mixed/ Multiple ethnic groups - Any other Mixed/ Multiple ethnic background	3	1%
Asian/ Asian British - Any other Asian background	3	1%
Asian/ Asian British - Bangladeshi	2	1%
Asian/ Asian British - Indian	2	1%
Mixed/ Multiple ethnic groups - White and Black Caribbean	2	1%
Asian/ Asian British - Chinese	1	0%
White - Irish	1	0%
Romanian	1	0%

**Table:** The ethnicity of respondents to the online form.

## Respondents' additional support needs

The largest group of respondents (**38% or 156 people**) reported that none of the listed conditions applied to them, while **38% (155 people)** indicated they had a long-term condition or illness. Additionally, **17% (72 people)** reported having a physical disability, and **8% (35 people)** reported living with a sensory impairment. A detailed breakdown of additional support needs is shown below.

	Count	Percentage
I have dementia	3	1%
I have a learning disability	4	1%
I have a mental health diagnosis	23	6%
I have a long-term condition or illness	155	38%
I have a physical disability	72	17%
I have a sensory impairment	35	8%
I have autism	5	1%
None of these	156	38%
Preferred not to answer	15	4%

**Table:** The additional support needs of respondents to the online form.

In total, **30% (124 people)** identified having one additional support need, and **18% (73 people)** identified having two or more. While the largest proportion, **38% (155)** stated that none of the listed conditions applied to them.

## Respondents' locality

The largest proportion of respondents were from east Suffolk (**38% or 157 people**). This was closely followed by central Suffolk with **31%** of respondents (**128 people**), and West Suffolk with **21%** of respondents (**85 people**).

A further **43 people (10%)** preferred not to answer this question.

	Count	Percentage
East Suffolk (Suffolk Coastal, Ipswich and Waveney)	157	38%
Mid Suffolk and Babergh	128	31%
West Suffolk (St Edmundsbury and Forest Heath)	85	21%
Preferred not to answer	43	10%

**Table:** The locality of respondents to the online form.

## One Big Multicultural Festival sample

The Healthwatch Suffolk research team attended the One Big Multicultural Festival in Ipswich on Sunday 1st September 2024.

The festival was organised by BSC Multicultural Services to celebrate and reflect on the county's Bangladeshi, Indian, Polish, Chinese, African, Caribbean, and Kurdish communities.

**Thirty** people provided feedback about ageing in Suffolk with regard to the WHO age-friendly community domains. Although demographic information was not collected, responses were received from a diverse group of people.

## Suffolk voices

The Healthwatch Suffolk research team had further conversations with 13 people. Eight people were selected based on their online feedback form responses, two following public engagement events, one person recruited through a call for support to complete the survey, one through outreach to community groups, and one through outreach to diverse community groups.

The diversity of these participants is reflected below:

- Female respondents were **eight** in number, while **five** were male.
- Respondents ranged in age from 55 to 101.
- Seven respondents identified as 'White – English/Welsh/Scottish/Northern Irish/British', one respondent identified as 'Mixed/Multiple ethnic groups', one respondent identified as 'Polish', and four respondents did not disclose their ethnicity.
- Respondents resided in various locations, including Mendlesham, Hesselton, Melton, Bury St Edmunds, Leiston, Ipswich, and Holbrook.



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The charcoal drawing captures a grandparent with their grandchildren. It illustrates the connection between generations, emphasising the value of family and staying close as we grow older.



The charcoal drawing depicts a scene of life's journey where the road of life winds gently throughout a large outdoor space. In the background, a small house sits, symbolising the comfort of home and the memories of childhood. Along the path are benches, allowing people to pause and connect with family or friends. The main focal point in the drawing is the family walking along the path together, symbolising the importance of family. The overall message is clear that being together with family is the best way to age well, never alone, never isolated.

Created at an art workshop with Ipswich Romanian Community. See more work with local partners from page 116.

We will be making this report publicly available by publishing it on the Healthwatch Suffolk website.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

**Image credit:** Photos featured in this report have been sourced from the 'Age Positive Image Library from the Centre for Better Ageing. The photos show a more realistic depiction of ageing – to help challenge stereotypes of older people. You can find it at <https://www.agewithoutlimits.org/image-library>.

**If you require this report in an alternative format, or language, please contact Healthwatch Suffolk on 0800 448 8234 or by email to [info@healthwatchsuffolk.co.uk](mailto:info@healthwatchsuffolk.co.uk)**

## Contact us

### Healthwatch Suffolk

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