A Good Life in Later Years:
EXECUTIVE SUMMARY

A Co-Produced Research Project

'A Good Life in Later Years' - Executive Summary

1.   Introduction

The 'A Good Life Project' evolved as a co-production study looking at quality of life in later years. Funded by the Life Changes Trust, and in partnership with Age Scotland, researchers from the University of Stirling worked hand in hand with community researchers all over Scotland to explore what really matters to people as they grow older.

This project utilised a co-production approach that facilitated research not just *about* people but research that was conducted *with* them. The findings presented in this report have been researched by five community researcher teams, alongside researchers from the University of Stirling. The co-production approach encouraged an equal partnership during the data collection, analysis and dissemination of findings.

The results from the findings in this report are structured into the following themes that were identified during analysis sessions with community researchers.

Key finding arising from the research include:

- Being part of a community is considered vital for a good life in older age, with more than 96 per cent of survey participants indicating such.
- Health and well-being were also reported to be central factors in being able to live a good life in later years, as many reported living with a long-term condition. Walking, swimming and cycling are popular among older people for keeping fit, while crosswords and other puzzles allow people to keep mentally active.
- Those living in rural areas raised concerns that they are on the periphery of public services. In one example, an island community was forced to travel to the mainland after the doctor service was removed.
- Intergenerational aspects of community were found to be particularly important to those surveyed, with 82 per cent indicating that the most effective communities encourage generations to come together.
- Some of those surveyed feared the potential impact of frailty and outliving family and friends, with people generally wanting their social connections to continue as they aged.
- Technology is increasingly important in allowing older people to communicate with family and friends.
- Having enough money to live relatively comfortably and not having to worry about struggling financially in their retirement is important to older people.

The table below highlights the themes covered in the study along with potential policy priorities seen as particularly important in each area:

Supporting Individual Action	Theme	Ensuring adequate foundation
Information and resources available to communities	Communities	Ensuring public spaces for people to meet.
Encourage keeping active	Health and wellbeing	Good health and social care services
Ensuring people are aware of what is available.	Hobbies and pastimes	Ensuring diversity in opportunities available, and spaces are available for activities to take place.
Guidance and advice on moving available. Supporting people who want to move. Ensuring people are aware of what is available to support them staying in own home, for example in terms of adaptation or meeting fuel costs.	Housing	Adequate local housing options. Support for home modifications. Winter fuel allowances.
Ensuring people are aware of their choices.	Independence and choice	Ensuring there is flexibility in services and facilities to allow individuals choice.
Supporting people in managing finances. Help people planning for retirement. Ensuring people know where to turn if difficulties arise.	Money and financial resources	Adequate pensions and benefits for all. Ensuring all generations are comfortable and have enough financial resource. Support that reflects current diversities in financial position, for example in terms of gender.
Supporting people who want to work – targeting ageism. Ensuring people are prepared for retirement.	Work and retirement	Vibrant economies providing adequate employment opportunities
Ensuring people have opportunity and time to meet others, for example, through hobbies or through spaces.	Relationships	Befriender service for those that need it. Services and facilities structured to promote intergenerational meeting opportunities.
Ensuring people are aware of choices to them.	Beliefs, spirituality and religion	Opportunities and spaces that are accessible to all, including people with long-term conditions.

Ensuring people know what is available to them	Services	Good health and social care services Integrated and joined up services.
Supporting people to reject stereotypes and to show others what is possible	Social attitudes	Tackling stigma. Promoting positive images of ageing.
Ensuring that there are opportunities to learn how to use technology for those that want to learn.	Technology and communication	Good internet and telephone access across Scotland, including rural areas. Considering alternatives for those in the transition generation.
Ensuring people know of the options for getting outdoors. Supporting activities taking place locally.	Environment	Provision of tranquil green spaces in cities and urban areas. Ensuring environments are planned with the views of locals in mind. Ensuring adequate street furniture and making environments accessible.
Encouraging people to travel. Ensuring accessible information about travel. Supporting people to travel, for example in terms of assistance where needed.	Transport and travel	Regular services with accessible buses/trains. Continuation of bus pass.
Supporting people to have open conversations with peers across generations.	Preparing for the end of life	Services that support people wanting to make preparations for their end of life. Bereavement services.

The information and points shared within this report have been gathered through three key methods:

Visual images were gathered which represented what was important in a good life in later years, based on the views and experiences of the community researchers or those of people who responded to a short questionnaire. Researchers could ask people that they knew to provide images that represented a good life in later years.

Examples of visual images taken by community researchers:

This image of glue was taken to represent the importance of communities sticking together.
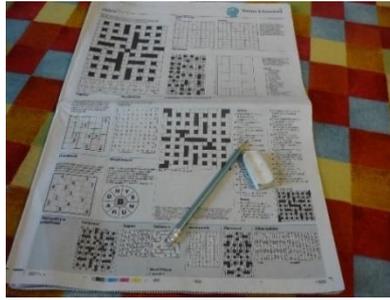
These images represent the importance to the community researchers of remaining mentally and physically active for a good quality of life in later years.

Focus groups were held in twelve locations across Scotland in October and November 2016, from Orkney in the North of Scotland to the Scottish Borders in the South. Community researchers were provided with one-day training on designing and conducting focus groups. This session included dementia awareness training to support people living with dementia to participate in the focus groups. Participants were recruited by community researchers.

A questionnaire was developed by community researchers and university researchers. A shorter and longer questionnaire were produced. These were then circulated around the research team and piloted by community researchers. The shorter version of the questionnaire would take 5-10 minutes to complete, whilst the longer version of the questionnaire would take between 35-45 minutes.

A total of 748 questionnaires were returned. This included 370 online responses and 378 paper responses.

Who took part?

Older people over a wide range of ages participated.

Age	N (valid %)
Under 50	10 (1.4%)
50-59	182 (24.6%)
60-69	227 (30.7%)
70-79	226 (30.6%)
80-89	81 (11.0%)
Over 90	12 (8.3%)

Long-term conditions are common in the people responding to the survey. The most frequent condition was partial hearing loss or deafness. Other conditions included cancer, Parkinson's disease, cardiovascular conditions, and diabetes.

Long-term condition	N (valid %)
Partial hearing loss or deafness	160 (21.4%)
Other long-term condition	116 (15.5%)
Physical disability	111 (14.8%)
Memory problems	55 (7.4%)
Mental health problem	49 (6.6%)
Partial sight loss or blindness	29 (3.9%)
Learning difficulty e.g. Dyslexia	6 (0.8%)
Dementia	6 (0.8%)
Developmental disorder e.g. Autistic Spectrum Disorder	1 (0.1%)
Learning disability e.g. Down's Syndrome	1 (0.1%)

The report considers if there are differences in the responses provided by people who have one or more long-term conditions, and also to see if there are differences for those with either memory problems or dementia and those not reporting having memory problems or dementia.

Just over a quarter of respondents, of those who provided detail of their gender, were male and three quarters were female.

The largest percentage of responses came from people who considered their ethnicity to be Scottish. However, responses came from across a range of ethnic groups. Those recording their ethnic group as other or white other included Canadians, Australians, Europeans, other mixed ethnicity, and one individual who noted their ethnicity as "human".

Caveat to survey analysis

The findings have been drawn from research that has consulted with 860 people over the age of 50 years old. This included people across the age range of older people, with at least 14 people that are over the age of 90.

The views of 78 people living with memory problems or dementia, and 207 who defined themselves as carers are also included as well as the views of people from different ethnic and cultural backgrounds, including people from the Chinese community.

However, whilst the responses came from a diverse sample, it is important to note that there are limitations to that diversity. The distribution of the survey was primarily through Age Scotland and so there is likely to be a higher proportion of responses from members of Age Scotland than if this were a random sample. People responding to this survey are therefore more likely to be connected to different groups and organisations than if the survey had been conducted using a random sample. This may have implications, especially in terms of feelings of social connectedness and in terms of being part of communities. The limitations of the sample should be borne in mind when making sense of the findings.

Summaries of key findings in each theme

1.   The importance of communities

> "Everybody in here looks after the new people coming in, that is what we do to help. We all help anybody new that [is] coming in: you are sympathetic to how they are feeling. If they are not very mobile everybody looks out for them…It allows people to help other people, which is really important – it is not always the Council doing it, but it is about the human touch." (Focus group participant)

Being part of a community is considered vital for a good life. This was something that came through all parts of our research and, as such, community researchers would like to encourage the roll-out of resilient communities to support a good life in later years. Communities should be inclusive and it was clear from our research that intergenerational aspects of community were particularly important. In the survey, 82% strongly agreed or agreed that the most important community to them encourages generations to come together.

Most of the respondents in the survey were either very satisfied or satisfied with the opportunity that they had to be part of a community or communities. However for one focus group participant who was living with dementia, there was a sense of being excluded very directly and this might be associated with social stigma surrounding the condition. The survey indicated that the top three things that would make it easier to join new communities would be if people were welcoming, if there were a choice of activities or groups to join and if the individual felt that they had something to contribute to a new community.

People, themselves are important in terms of making and shaping communities. However, organisations and government can further support the growth of community. This might be in supporting people, who otherwise might find it difficult to engage in community, to come together and to meet each other.

If places are provided where people have the chance to meet, for example in shared spaces, organic communities can develop.

2. Health and well-being

"For me, everything is secondary, everything else hinges on if your healthy or you are fit enough to do things. Without that – your health is a starting point because and that is not only your physical health, but mental health as well. Without that, for example, none of those things from those pictures that we just looked at would get any traction." (Focus group participant).

Whilst, overall, most respondents were in good health, there were some differences observed. As people aged they were less likely to report their physical health as very good and more likely to report their physical health as poor.

The largest majority of people responding to the longer questionnaire agreed that they would keep physically and mentally active, eat healthily, exercise and adopt a positive outlook on life. A smaller number would use complementary therapies, and some people reported taking other measures. These included leading activity and exercise programmes for others, volunteering, spirituality, meditation, weight loss and management, and travel or holidays.

Health and well-being was seen by many as being central to a good quality of life in later years. This included having good physical and social health. Avoiding loneliness was also considered to be important in maintaining good health. Being able to accept and adapt to changing health conditions was seen as being an important element of having a good life in later years. Having access to good health services can also support people to maintain and manage health.

3. Services

"I would say that I cannot fault the NHS at all in the way that they have been there for me from day one. There has been quite a lot of illness in my life, but everything has been dealt with no problem, but I do hear of other people that have to wait ages for hip replacements and knee replacements so not everybody has the same view as I have, but for my situation, I cannot fault it at all. Any time that I have ever needed the National Health they have been there for me." (Focus group participant)

Most respondents indicated that they would know how to go about getting support if their health changed. The GP would be the most frequent place people would go to first for information or advice but, respondents also indicated they would access information and advice from a range of places. This included voluntary organisations, hospitals or hospice, online and family or friends. Having a health system, which is free is something that people appreciate and want to see continue.

Although people are appreciative of free prescriptions, the research also highlighted that some people feel that there is a tendency for GPs to over-prescribe to people who are in their later years.

Although overall there were high levels of satisfaction with the various health services we asked about, there were some variations observed. A higher percentage of carers compared to non-carers are dissatisfied with the quality of dental services and quality of health care services at home. During the focus groups, we identified that there may be differences in terms of the access to and satisfaction with health services in rural areas. Where services have not been satisfactorily received in a timely manner, these can have devastating impacts for the individual.

Satisfaction with access to and quality of social care services was less than that observed for health care services. Carers, in comparison to those not providing care, were more likely to be dissatisfied with the access to and quality of social care provided by voluntary organisations. Within the focus groups it emerged that there was a desire for better signposting to services. Whilst it is acknowledged that the integration of health and social care was beneficial when it worked, in practice this did not always work well and had caused concerns amongst older people. A balance between preventative and responsive approaches to the treatment and management of conditions could also support people to live a good life in later years.

4.   Hobbies, pastimes, and activities

"An activity like this is satisfying, for me, the three main needs: physically active, mentally active and to have friends. An activity like that you are doing all of these and it is brilliant." (Focus group participant)

Hobbies, pastimes and activities are important to quality of life in later years. Of those completing the longer survey 98% suggested that hobbies help to keep people mentally active and 86% indicated that hobbies help to keep people physically active. Hobbies help people to maintain and improve their health, whilst avoiding future health concerns. Age was a determining factor in whether people agreed that hobbies would help to keep physically active. As age category increased, the view that hobbies contribute to physical activities decreased.

Having places where people could access a wide variety of activities, such as sports centres, community centres, evening classes, volunteering opportunities or even activities within sheltered housing complexes or day centres were important in providing an easily accessible site where many different activities could be offered. As communal places where people could take part in activities have closed, this has reduced access to activities and led to a higher likelihood of loneliness.

Despite cuts in funding these types of venues and activities, generally people were either satisfied or very satisfied with the access and quality of leisure facilities (e.g. gyms, libraries, parks and community centres).

Overall, people are generally satisfied with the access that they have to hobbies, social activities and groups. However, these findings are not applicable across all groups. The research has shown that carers, and younger older people are more likely to be dissatisfied with opportunities to undertake hobbies.

5.   Learning and Education

"They had the class at my house and we did not have any experts, but everybody had a bit of expertise about computers or IPad and they helped and I learned through that." (Focus group participant)

Generally people were very satisfied or satisfied with the opportunities that they had to take part in learning and education. Most people agreed that there should be access to learning and education locally and it is clear that the opportunity to learn is supported by an ability for people to use the internet. However, a higher proportion of carers disagreed or strongly disagreed that they were able to access learning locally.

Overall, it appears that carers are limited in comparison to others in the opportunities available to them to take up learning and education. People in younger age groups are also curtailed in their ability to engage in learning and education.

Learning and education are likely to contribute to quality of life in later years, through providing an activity that brings enjoyment and supports the development of new knowledge and skills.

6.   Volunteering

"I think it is very important for the older generation of which I am one. Just to have importance in life, whatever that may be – something of focus in your day besides do it today/do it tomorrow, whatever. To have that sense that you have a purpose and you can focus on that. It gives you a reason to be in this world." (Focus group participant)

A number of participants in this research highlighted the importance of volunteering. Just under half of those responding indicated that volunteering could support them to make the move from paid employment to retirement. A further reason for volunteering, which more people agreed with, was that this provided the opportunity to give something back to their local communities – 88% of respondents considered that volunteering was important as they were giving something back. Rather than being inactive, giving back to families, friends or communities was providing a reason to get out of the house and participate in life.

One caveat to this however, is that there is currently a lot of pressure placed on volunteers. This can result in people withdrawing from volunteering roles. There was a sense that the increasing demands being placed on volunteer and volunteer organisations were becoming untenable.

Volunteering is something that can be important to many individuals. There are a number of benefits that might come from volunteering, including providing a structure and routine and supporting people to move from paid employment to retirement.

7.   Work, paid employment and retirement

"If you are talking about folk 50 and over, these age band things are all going to change because the working life is changing. Maybe you will when you are 68 be more valued than you were ten years ago because you are still in the working age bracket." (Focus group participant)

Being in work can provide people with higher self-esteem and work still played an important part in the lives of many people in this research. Flexible working patterns and making the most of technological advances that support distant working, were ways in which it was considered that older people might remain connected with the world of work.

The survey indicated that most people in work want to be in work. However, the increasing pension age means that some people feel that they are trapped in work when they do not want to be. There were only two respondents with this view but it is a factor that might impact on decisions about whether to work or not.

Yet, it is also worth noting that many of those that are currently not working want to be in paid employment. There is a relationship between being an unpaid carer and whether people are in work. There is a higher percentage of people providing care currently in work than non-carers. A higher percentage of carers also want to be in work compared to non-carers. Further consideration should be given as to how carers might be supported in finding and sustaining work.

Whilst work might be a desired experience for many older people, the experience of work is not always positive. There still remain issues of ageism.

A higher percentage of males than females agreed that they anticipated having enough savings for their retirement. People in younger age categories were less likely to believe that they will have enough savings for their retirement than those in older age categories. A lesser percentage of carers anticipated having enough savings for their retirement than non-carers. Those with long-term conditions were less likely than those not reporting a long-term condition to anticipate having enough savings for retirement.

8.   Money and financial resources

"I think having enough money in old age is important as well because it lifts all your worries. You do not need to be rich, but as long as you have enough for your needs." (Focus group participant)

The importance of money was discussed within the focus groups. People's sense of having enough money to be able to live comfortably, without having to worry about paying bills, the mortgage, or meeting other financial commitments was of key concern.

Most people in the survey were able to afford the quality of life that they wanted to have. However, 11% were dissatisfied and a further 4% were very dissatisfied with their current financial position. Females in particular were more likely to be dissatisfied with the current financial position. Additionally, people in younger age categories, carers and people with long-term conditions are more likely to be dissatisfied with their current financial position.

However, it is not only the individuals own financial satisfaction that is important to creating a good quality of life. Discussions about money were linked to people having enough money to live relatively comfortably, and not having to worry about struggling financially in their retirement. Knowing that children and grandchildren were financially comfortable was also important in ensuring that people have a good life in later years.

9.   Social relations and friendships

"Living alone is not easy. Even if one volunteers (I do), go to friends, theatre (I do) most of your life is lived in an empty house, eating solitary meals, and TV is your main companion, neighbours are working, family are busy, they phone and visit occasionally" (Survey respondent).

Friendships help to ensure that people do not face social isolation and loneliness, albeit that friendships alone do not eliminate loneliness. Around a quarter of respondents felt that they had been lonely at some point in the last week. An active social life was considered important for well-being, with social interaction linked to maintaining confidence. Supporting people across the board, who have difficulty in making new friendships, is important to a good life. Formal services such as befrienders are one way in which this might be addressed. Befriending was discussed as a potential solution to support people who did not have family or friends nearby, which was linked to families being more dispersed and mobile.

The importance of intergenerational relationships was emphasised in the focus group with the Chinese community, particularly the importance for some of living with their children when they became older. The importance of older and younger people interacting together was also emphasised by others, including the focus group with the island community.

Good relationships were considered important for well-being and for ensuring reciprocal support, whether peer support or befriending. Being able to interact with others provided people with a sense of purpose and was important to avoid loneliness, which was expressed as different to 'being alone'. Physical frailty, lack of mobility, sensory impairments and dementia were considered challenges for keeping connected, and in such circumstances efforts could be made to keep people socially and mentally engaged through interaction and befriending.

10.   Technology and communication

> "It brings you closer. People do not write letters now so you have to have Skype. Without that we would not keep in touch with our sons - one is in Australia and one is in the south of England, but you do use it as back up if you do not see them." (Focus group participant)

Within society, technology was considered to be becoming the norm, and some participants felt that everyone was expected to be connected. Within our research, technology questions were mainly asked within the longer questionnaire, which was accessed predominantly online. This means that our findings relating to technology from the survey may well be biased to those that are already users of technology. Findings from the visual analysis and focus groups however, serve to provide a wider range of opinions about the use of technology.

Most of those completing the survey indicated that technology was important to their quality of life and were comfortable in using technology. However, it was observed that people who were older were less likely to agree that they were comfortable using technology.

The future benefits of technology were also noted, including those technologies which could help them to remain independent in the future such as smart homes. The most common benefit of technologies was that they enabled people to easily communicate and stay connected to the wider world. Skype was repeatedly highlighted as a means through which people could keep in touch with family, friends and their local communities.

There was discussion about how this was a "transition generation". Many in this generation were happy to use technologies. However, there was a significant proportion of people who were less likely to engage with technology. There are still some older people who choose not to use technology, and rely on children or younger generations to do this on their behalf. Furthermore, several people also noted that the increasing prevalence of online services meant that those who did not or were unable to use technology may be restricted in their ability to access services.

11.   Social attitudes and values

"Most of us want to feel valued and not in any kind of patronising way, but actually truly valued just for who we are." (Focus group participant)

Social attitudes and values were linked closely with identity, self-esteem and confidence. Feeling valued, and having respect for the person and their life experience, but without condescension, were important. Many people expressed the feeling that they were no longer valued now that they were older, with a sense that Scottish society only values those who are working. Some attributed this attitude to middle-aged people more than younger people.

Across the board, many people agreed that they are treated with dignity by a number of different parties. Whilst the majority either agreed or strongly agreed with each of the following categories, it is worth observing that there were higher numbers disagreeing that they were treated with dignity by:

- Local and national government (18% disagreed and 6% strongly disagreed)
- Social care professionals (14% disagreed and 7% strongly disagreed)
- Businesses (12% disagreed and 5% strongly disagreed)

Knowing that a good quality of life could be maintained right through to the end of life was considered important for some, particularly in relation to maintaining independence. Being able to maintain independence was associated with maintaining relatively good health or having the resources to access adequate care if support was required.

Despite negative discourses and policy rhetoric, people felt it was important that older people are not just seen as a 'burden' and want to be responsible for their own fate. People described resisting the negative attitudes surrounding them, striving to maintain independence and enjoy later life, with age viewed as only a number that defined a diversity of experience.

12.   Environment

"We are lucky because we have got a little bit of gym and a leisure centre, but all the really keen ones go to the campus, the school. So, the little one is fine for older people, but there is no way I would join a gym because I would feel fat, slow etc. with all those young people. I think one great thing is walking football and, in a way, I would like to think that there were more things like that happening." (Focus group participant)

Accessing the environment and outdoor spaces were highlighted as important elements in quality of life in older age. Locality as well as the urban and rural setting can impact positively on friendship, access and walking. However, people living with memory problems or dementia were more likely to feel unsafe overall in their local area.

People living with dementia also discussed the value of getting out, and discussed using technology to support independent wayfinding, especially when signage in town centres is poor, although there was a concern that services supporting this no longer existed.

All but 5% of those responding were satisfied with the local green spaces such as parks and countryside. Having access to local indoor leisure facilities was also considered important to support all levels of fitness and interests, and to be inclusive of older people.

Some people were concerned with the environment in the city where they lived, for instance pollution from idling engines, litter, dog fouling, misuse of disabled bays, parking on pavements, a lack of safe crossing places, and poor street lighting. They felt that complaints were not addressed by either the police or council. These concerns were contextualised within a recent urban redevelopment project. However, the majority of people were very satisfied or satisfied with their local area.

13.   Transport and travel

> "This bus pass is the best thing since sliced bread. I use it a lot. I get to lots of meetings using the bus pass and I do occasionally just go away on a day trip. To me, it keeps the older people active. It probably saves the NHS a fortune." (Focus group participant)

Transport and having the ability to travel featured heavily in people's accounts of what constituted a good life. People had access to a range of transport options, and recognised that the ability to travel, both in their local communities and across Scotland were important to their ability to live a good life. People spoke of a variety of transport options, including car travel, public transport, or walking and cycling.

Although most people are satisfied or very satisfied with the transport options in their local area, there were 21% that were dissatisfied and a further 9% that were very dissatisfied. The most common forms of transport used by participants were people's own cars, and local bus services. Most participants received a free bus pass. The free bus pass was highly valued across almost all focus group participants. Cost of travel is also seen as a barrier in later years and the maintenance of bus passes was seen as essential and that this should be extended to cover other forms of travel such as the train.

The bus pass enabled people to get away from their local areas and travel more widely for leisure. A number of people living in Glasgow told stories of using bus passes to travel across Scotland or go on days out away from their local communities.

While access to free public transport was valued, problems with accessing public transport also emerged. While transport was free, for many, particularly (but not exclusively) those living in rural areas of Scotland, access to public transport was variable, with several respondents not being easily able to travel using the infrequent services that were available to them. Other people living in urban areas noted difficulties getting to main bus routes; while public transport was available, they had difficulties, particularly if personal mobility was a problem, in getting to the main public transport routes. The biggest barrier that is faced by those using or wanting to use public transport is timetabling. This was a barrier for 35% of the respondents.

In many areas, public transport was difficult to access. In such areas community transport services often took their place. Community transport, whether formally provided through, for example, social enterprises, or even just friends giving each other lifts was valued in communities where public transport options were less frequent.

14.   Independence, freedom and choice

"For me, it is choice. I say having choice so I suppose my independence and my health because then I have the choice to be with friends and choice to go out for a walk - the choice to sit and put my feet up and watch television or spend the afternoon on my crochet or music." (Focus group participant)

Underlying many of the themes that are discussed in relation to a good life, is the desire of older people to remain independent and to avoid being a burden on others. People did not want to be a burden on their families, but also did not want to be burdened themselves, either by illness, or by the demands placed upon them by friends or family.

Lack of choice was also associated with declines in the range of facilities available to people.   Older people had different needs which may not be reflected in the facilities or forms of support available to people. Further, people may have so much choice, that they do not know where to start, or how to weigh up different sources of information.

Good health and mobility were the key factors that related to independence. Where mobility and health are a factor, there may be issues of interdependence as well as interdependence in achieving a good life. Most people do not need care or support to help them to do the things that they want to. However, a small number require support all of the time, most of the time and sometimes. Over half of respondents had not heard of self-directed support. Only 3% had used self-directed support and the remainder had heard about this but had not used it.

15.   Housing

"Most of us will probably live in three-bedroom houses or houses that are too big for us and you would like to move, but you want to move to somewhere that you are still going to be able to look after yourself and that there will be lots of people there, and social life, and that sort of thing." (Focus group participant)

Discussion about housing focused upon the affordability of heating and ensuring that homes are accessible both physically and socially to support a good life. There were also concerns about the cost of heating, safety and security as well as the importance and emphasis of living independently for as long as possible. The visual analysis and qualitative questionnaire questions reinforced the concerns about access to community services, security and also mobility.

The majority of people are satisfied (38%) or very satisfied (55%) with their current home or the place where they stay. However, carers are more likely to be dissatisfied with their current home/place where they stay.

Moving to an area that offered appropriate housing but that was outside a person's existing community was also considered to be detrimental to a person's quality of life. People with long-term conditions are less likely to be very satisfied and more likely to be satisfied with their current home than people not reporting having long-term conditions. Care and repair services were valued but such resources were considered to be very limited.

16.   Belief systems, spirituality, faith and religion

"Being content with your life. Over the whole piece I feel that it is important. If you are not content you become miserable, but if you have contentment you are happy with yourself. The world blossoms for you." (Focus group participant)

Spirituality and reflection are aspects that can be important to many people, including those who are getting older.

Whether it is religion, or spirituality, or holding a wider belief system, having something that can help guide and support decisions in life was seen as important to many people as they age. However, it is important to acknowledge that for many others this is not important. Our survey indicated that just under half of respondents felt that this was very important (27%) or important (20%). Equally, however, 27% of people felt that this was not important and 17% felt that it was very unimportant. The remaining 8% were not sure if this was important or not.

There is an association between ethnic identity and whether belief systems, spirituality, faith or religion are important. People stating that they were Scottish were more likely to see this as unimportant than other ethnic categories but less likely to see this as very important.

People considering themselves English, Welsh or Irish were more likely to see this as unimportant compared to those who were British or in the other ethnic identity categories, and more likely than all other ethnic groups to report this as very unimportant.

Having a belief system, spirituality or religion was more important to those with long-term conditions than those without. However, there is also greater dissatisfaction amongst people with long-term conditions in being able to practice these beliefs with others. This indicates that some older people are facing barriers to practice their beliefs and further work to identify barriers and how to overcome these would be beneficial. Ensuring that older people, including those in environments such as care homes or social housing have opportunities to explore and express their spiritual beliefs is therefore important to enabling people to live a good a life.

17.   Preparing for end of life

> "On the face of that, I do not know if that is something that any others of you have experienced that sense of loss of friends, friends – that sense of people around you are dying and how you deal with that, I suppose, is the question that springs from that because it is a difficult experience." (Focus Group Participant)

The end of life is something that can be in the thoughts of people as they get older. People can think both about their own end of life, and also that of loved ones. The loss of loved ones, including partners, can mean that people begin to feel lonely. Just over a quarter of those answering questions about death (54 of 208 responses – 26%) indicated that they felt they would have to consider changing the communities that they belonged to. People who find themselves bereaved may benefit from being further supported to integrate into new communities and efforts must be taken to ensure that people do not experience loneliness after bereavement.

The survey demonstrated that most people were satisfied with their opportunity to discuss their wishes and desires about their own end of life. The same was true for discussions relating to people's satisfaction with the opportunity to discuss their wishes for what would happen if they were no longer able to express these. Despite most people being satisfied with the extent of their discussions, 30% of people would like further opportunity to discuss their wishes for death and 42% would like the opportunity to discuss what their wishes would be if they no longer could express these.

In addition to asking about discussions, the longer survey also asked people what actions they had already taken to prepare for the end of life. The most common arrangements in place were making a will (80%), discussing arrangements with family or friends (64%) and assigning an executor of estates (60%). Far fewer people had made arrangements for situations prior to their death, for example, only 21% of people had created a living will.

UNDERSTANDING AND NURTURING A GOOD LIFE

A Good Life in Later Years

Supporting individuals and communities to nurture their own futures e.g. through provision of information, resources etc.

Supporting diversity and recognising that the garden of a good life will differ amongst the population.

Ensuring provision of infrastructure.

There are many variations of what might represent a good life and it is not possible to privilege any one of these variations as being more or less attractive than others. They are all "award winning gardens" if they provide the individual with the planting combinations that mean the lived experience can be enjoyable and without unnecessary concern. The role of those exploring and supporting a good life in later years is to respect that diversity. It is to acknowledge that what will work for one person may not work for another, and it is to support intervention, services and facilities going forward that cater for those differences.

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