

Key Messages



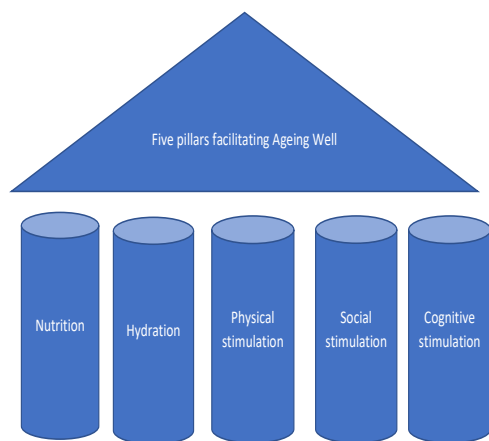
Ageing Well with the Open University: A Knowledge Exchange

March 2022

Claire Stevens welcomed everyone to the event and briefly outlined the strong partnership between the Open University (OU) and Voluntary Health Scotland. She handed over to Dr Jitka Vseteckova who took us through her work on the five pillars of ageing well.

Ageing well overview

Dr Jitka Vseteckova, Faculty of Health & Social Care in the Open University, ran us through the five pillars of ageing well and the aims of the “Ageing Well” lecture series. She highlighted the five pillars were for everyone, not just elderly people.



She explained genetic predispositions do not 100% effect our ageing, and the five pillars were an important factor in determining how we age.

She noted the importance of challenging ourselves cognitively and physically, along with things like good nutrition, hydration and social stimulation.

A follow-up survey was to be circulated among attendees and Jitka shared a number of resources, which were available in her presentation.

What does this mean for your work? Update and the challenges and changes

The floor was then opened to participants to update on how they have been incorporating the five pillars into their work.

- **RNIB:** Laura Jones, NHS Engagement Manager, RNIB Scotland, provided an update on the policy areas RNIB has been focusing on from the five pillars. She said being aware of the five pillars had given them a basis for framing some of their work. She also discussed how COVID had impacted this. She noted the pandemic had impacted people’s ability to engage with physical activity, especially for blind and partially sighted people who sometimes could not take part without a guide. She noted how fundamental physical activity was for people’s mental wellbeing, drawing attention to their Connected Scotland consultation response. Laura noted the role technology had played in enabling connections but recognised there were still digital service barriers. She discussed the implications of losing sight for people’s social interactions, explaining how confusing and lonely it can be. She also highlighted the significant barriers to employment through employer’s attitudes and barriers to engaging in society. She outlined the link between sight loss, depression and poor mental health, and the support available through RNIB.
- **Podcasts:** Jitka Vseteckova highlighted the role podcasts through the OU could play in tackling some of these barriers. She also highlighted all the presentations were being converted through to more accessible formats which were compatible with reading technologies. Laura Jones invited Jitka Vseteckova to take part in their Radio Talk programme.

- **Co-Production:** Following a question on co-production, Jitka Vseteckova said some of the resources were co-produced with volunteers and stakeholders. She highlighted there was an evaluation ongoing on some of these projects and the public talks series were co-produced with people with lived experience.
- **Age Scotland:** Anne McDonald, National Community Development Officer, Age Scotland, explained her role was about supporting older people's groups and a lot of this used to involve going out and meeting people. She said the talks really helped in the transition towards this different way of working following the pandemic. She took us through the changes she made following the series, such as online exercise classes, more water and less snacks. She said by following these changes herself it was much easier to support the older people she was in touch with through her work. She highlighted the different ways they were reaching out to people through newsletters, radio shows and virtual tea breaks. The tea breaks were developed after older people expressed they wanted a more informal way of engaging with people. The first of these was focused on the five pillars. There had also been intergenerational tea breaks and walks for people to take part in. With regards to challenges, there seemed to be a plateau of people getting "online", everyone who wanted to be online was online. Age Scotland also noticed a significant drop in people's mobility through the walks. Anne said it definitely hadn't been an equitable pandemic, more affluent areas still have more access to space and volunteers. There were problems with very few new people coming forward to support groups. A lot of people are not coming out as they don't feel safe with the reduction of rules, COVID felt more prevalent in the Highlands now.
- **Having Fun:** Dave Curry, Volunteer, Diabetes Scotland, noted at the last talk his activity was reduced to walking. He had been accumulating the miles to walk "Route 66", planning the journey, buying maps etc. He also noted his work coaching table tennis and arranging coaching for children in Aberdeenshire. He said many of the coaches in the group were elderly, so also benefited from the sessions. He highlighted the peer support groups through Diabetes Scotland which were held on Zoom, he felt those who attended really enjoyed the sessions. He highlighted the value of Jitka's resources and had personally added his own pillar to "have fun!" He's now walking the "Silk Road". Jitka welcomed the addition of the sixth pillar.
- **Intergenerational Approaches:** Jitka recognised the benefits of the intergenerational approaches. She said they were looking at taking the five pillars to schools. She also wondered about opening up the walks to families and younger people. Anne noted the advantage of involving younger people in these walks, giving the example of her daughter who went walking with an elderly person in their community who had initially been reluctant to engage with support. Anne also noted there was a shift in the environment of community groups, some coming from the resilience groups that formed during the pandemic.
- **Planning:** Anne Docherty felt there was still a bit of a struggle for older people being active every day, she suggested a national campaign on this. She also noted the more people walked, the less likely they were to fall. She discussed their work on 20-minute neighborhoods and supporting older people to live locally. Jitka Vseteckova said along with Age Scotland they were working on a pledge which breaks the five pillars down into even smaller steps.
- **Mental Health:** Jane Monan, GCVS Community Development, highlighted the benefit of the five pillars and welcomed them being broken down into smaller steps. She said she had never dealt with so many mental health and suicidal thoughts in older people over the last two years. She felt there was a need to change the way statutory services were approaching this. She felt health inequalities had never been starker.

In closing, Claire Stevens highlighted this session would inform VHS's policy work, especially with regards to the Health, Social Care & Sport Committee inquiry on health inequalities and the place and wellbeing agenda within Scottish Government. Derek

Goldman added this was gold dust for the OU, taking practical examples from the theory. Claire noted there was still so much mileage in this so it might not be the last meeting!

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