



**ARIENNIR GAN Y LOTERI  
LOTTERY FUNDED**

## **A multi-method evaluation of service provision in England and Wales - focusing on well-being and overall effectiveness**

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Report submitted following a participant focussed evaluation of Goldies'  
service provision in both England and Wales;  
conducted between December 2019 and February 2020

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## About the Author

Paul Marshall (MSc, PGDip, PGCE/FE, BSc) works freelance as an independent social researcher and consultant within the Voluntary, Community and Social Enterprise sector and was commissioned by Golden-Oldies to conduct an evaluation of the impact of service delivery in Wales and England. He carried out a similar evaluation of Goldies Cymru, reporting in 2016. He has substantial experience of conducting research and evaluations within the Voluntary, Charity and Social Enterprise (VCSE) sector, with specialisms in the social isolation and loneliness of older people, co-production, mental health and post-16 education. He is also a musician and a father of three children.



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## Acknowledgements

A huge thank you to all the staff at Goldies who planned and organised the data collection events, making them enjoyable for participants and all who attended. A big thank you also to all who volunteered on both days, running focus groups, supporting participants with completing questionnaires and consent forms, conducting the filmed interviews and providing refreshments. I would also like to thank all the Goldies participants for sharing their views, ideas and experiences.

Best regards,

A handwritten signature in black ink, appearing to read 'P. G. Marshall', written in a cursive style.

## Conclusion

This new study reports that the Golden-Oldies Charity not only reduces the incidence but also the prevalence of loneliness and social isolation. Moreover, it suggests that the positive effects are sustained and endure over time, long after the 'Goldies' session has ended. The report states that Goldies does not just create opportunities for social interaction but also communities to which every member feels that they belong. And when beneficiaries start coming to Goldies, they stay!

*"I was surprised at just how friendly it [Goldies] was and how much I enjoyed it. I didn't really expect to. I didn't think it was for me. I love music but I can't sing but then I was surprised that it didn't matter and how much I enjoyed it."*

*"When you start coming, you want to keep coming."*

Participants reported that the singing, music and social networks that Goldies creates act as a form of reminiscence therapy, particularly with reference to dementia but also to those with different cultural backgrounds. The function of singing communally and the experience of music was highlighted as having a notable impact on both beneficiaries' psychological and physiological well-being, helping people with poor mental health and bereavement, highlighting the therapeutic nature of attending Goldies. For some, the extent of these benefits has been transformational and has fundamentally changed people's lives for the better.

*"I didn't think it would change me, but it has. I feel so great afterwards."*

*"My friend said it was a lifeline when her husband had died. It was her connection with the community."*

*"It has totally changed my life. It brings me joy and peace. I struggled to cope with understanding the loss of my husband and found it hard to find any happiness. Goldies takes me out of depression and has helped me immensely."*



Picture taken at Focus Group Meeting in Cardiff.

[www.golden-oldies.org.uk](http://www.golden-oldies.org.uk)



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## Background and Context

### 1.1 About Goldies

Golden-Oldies, or 'Goldies' as it is commonly known, was established as a charitable trust in 2007 by founder Grenville Jones. Grenville is an established musician and choirmaster based in Bath, in the South West of England. He acknowledged from first-hand experience, how music and singing had a significant positive impact on many members of his choirs. He sought to make communal singing accessible to older people, particularly those experiencing social isolation and/or loneliness, who may not be willing or able to join a professional choir. Goldies offer the opportunity for older people to engage in community singing; singing popular songs from the 1950s onwards, without the need to be of a particular standard or engage in public performances. Goldies refer to themselves as the 'Sing and Smile' Charity.

In 2008 Goldies provided four singing sessions, run by Grenville, in sheltered housing community rooms in the Bath and North East Somerset area. In March 2015, they were running 100 regular singing sessions in England and Wales and now this figure is over 200. Goldies now employs over 60 session leaders on a freelance or voluntary basis and puts on training days for session leaders as well as trustees, members of the management board and Goldies supporters.

Goldies Cymru was launched in 2011, with the support of Wales Lottery and the Moondance Foundation. They have received donations from individuals and businesses, for example Tesco, who wish to support the charity. Goldies Cymru and Goldies UK host 'Big Sing' events and fundraising concerts, which receive attention from the local press and have been attended by local councillors. Welsh and Cornish folk song books as well as Christmas and braille books, have been produced in response to feedback from participants.

Goldies's administration team is based at their office in Midsomer Norton. Most sessions are delivered in Southern England and Wales but to date, Goldies are delivering sessions in all the following areas:

- Bath and North East Somerset
- Bristol
- Cornwall
- Derbyshire
- Devon
- East London
- Essex
- Gloucestershire
- Hampshire
- Mendip
- North Somerset
- Oxfordshire
- South Gloucestershire
- South Somerset
- Staffordshire
- Swindon
- Wales
- Wiltshire
- Yorkshire

Governance of Goldies is via a board of trustees with varied professional skills and experience. Grenville oversees the running of the charity with the support of a personal assistant, four programme area leaders, a project manager, a fundraising and grants support officer, a finance officer and a manager for the Goldies Charity Shop. Sir Cliff Richard OBE is patron of the charity. In addition to the singing sessions, Goldies also organise a range of other activities. 'Big Sing' and summer concert events offer a day for different groups to come together and sing and will typically include support services for older people, local school choirs, dancing and other entertainment. Goldies also engage in fund raising activities, from running marathons to putting on a golf tournament. In March 2016, Goldies opened its first charity shop in Keynsham.

Goldies' intergenerational programme, 'Armistice Cantata', which commemorates the final months of WW1, won Best Educational Project in the 2018 National Lottery Awards. These annual and curriculum-based projects, designed and led by the schools and Goldies' participants/volunteers, encourage communication and cultural influence between the age groups. The 2020 programme, 'Back 2 School' encourages schools to invite older people within the community to take part in memory-evoking projects with the pupils.

These intergenerational projects involve collaboration with over 60 schools in England and Wales and typically involves Goldies participants visiting schools. Schools are offered a range of experiences that can either be one off sessions or a series of events. In addition to Goldies participants singing alongside the children and school staff, suggested activities include: sharing memories through children and Goldies' participants bringing in photographs to stimulate discussion; playing games together; art and craft activities; support with technology; cooking; sewing; outdoor activities and themed events such as a World War 1 session. Schools are also invited to suggest ideas to create bespoke activities. Parents and grandparents of the school children, as well as other members of the community, are often invited to take part.

Goldies have been pro-active in reaching out to diverse communities and with the

support of the Henry Smith Charity, have introduced additional sessions for Afro-Caribbean elders, South Asian older people (singing Bollywood songs) and older Chinese people (singing in Cantonese). Goldies deliver sessions in a variety of locations including: community centres, day centres, cafes, church halls, libraries, sheltered housing community rooms, nursing homes, football clubs and arts centres. They have recently run a taster session in a pub, with the view to offering regular sessions there. Goldies have partnered with other organisations and local authorities, to enable delivery of sessions to a wide range of participants. Although Goldies sessions are generally inclusive and do not have a specified minimum or maximum age limit, they do offer closed groups to residents of nursing homes and participants with learning disabilities.

## **1.2 A Typical Goldies Session**

Sessions are typically scheduled monthly, although weekly sessions are offered in a few locations, on the same day and time at a regular designated venue. Sessions normally run for one hour. The session leader will arrive in advance of participants, to prepare the room and ensure sufficient and adequate seating for participants. The music for the session is normally played from an iPod or phone, connected to a portable amplifier and loudspeaker. For special events, Goldies banners are displayed. Participants are welcomed by the session leader and the atmosphere is informal and friendly, with the session leader and participants engaging in warm conversation. Most sessions make use of two or three song books, which contain popular songs from the 1950s, 60s and 70s. The songs are numbered and contain pictures and trivia about each song. The words for the songs are clearly presented and in sufficiently large print for participants whom may have a visual impairment.

Session leaders will often start sessions by reading out general notices, which may be about Goldies events, or other relevant local activities taking place. They will then usually be the first to select a song, with many session leaders enabling participants to take turns to select songs thereafter. Participants are allowed to participate in ways in which they wish to but are not coerced to sing. Most participants however join in the singing with enthusiasm and songs are interspersed with laughter and

friendly conversation. Session leaders typically deliver the songs with exuberance, which provides a positive atmosphere, that participants respond to. Some songs entail gentle callisthenic movements, which are modelled by session leaders. These movements provide gentle exercise in the form of dance movements, created for older people who may have limited physical mobility. Participants are also given the opportunity to play a variety of percussive instruments, provided by the session leader. Dancing during sessions is becoming increasingly popular, with line dancing and other routines having been developed for some songs.

Participants are often keen to continue singing after the allocated hour, clearly having enjoyed the experience. Refreshments are made available at some sessions and participants often continue socialising if possible.

## Review of Academic Literature

### 2.1 The Issue of Social Isolation and Loneliness of Older People

Social isolation and loneliness have received increased media and academic attention over recent years, signified by the establishment of the Jo Cox Commission on Loneliness, which she set up before her death in 2016. It is well known that the most vulnerable citizens in society often face a combination of adverse factors, culminating in relative disadvantage. These factors include: living alone and/or without children, poor health, no access to transport, not owning your home, low income, no phone and older age (Bolton, 2012). Social isolation is a term which describes the absence of social contact, which can include contact with friends, family, community or access to services. It is therefore considered an objective state and more frequently used in policy contexts than loneliness, presumably due to it being inherently easier to measure and act upon. Loneliness however is a subjective concept, relating to how people feel about their social connections (Wenger et al., 1996). Whilst the two terms are related and used inter-changeably, some people may be socially isolated but not feel lonely and vice-versa. Older people are Goldies's target participant group and reducing social isolation, one of its primary aims. However due to the reported impact of loneliness on aspects of well-being, it is justified to include loneliness measures in this evaluation, in the context of the impact of Goldies on the overall health and well-being of participants.



Whilst loneliness is a phenomenon that affects the whole population, it is often considered to be a social problem, which is associated with older people. In 2012, the Office for National Statistics (ONS) reported that one in three of those aged 80 or above reported feeling lonely. This age group was also more than twice as likely to report feeling lonely, compared to those of working age and those aged 65 – 79 (ONS, 2012). Research conducted by Dykstra et al. (2005) and Victor and Yang (2011) also support the view that this age group experiences higher prevalence rates of loneliness. More recent research by the ONS reflects a changing landscape of loneliness, with 16 – 24 year olds now reporting proportionately higher levels of loneliness than all other age groups, including the over 75s (ONS, 2018b). However, they also identify other characteristics associated with feeling lonely, many of which can be associated with older age, which include: being widowed, being in poor health and having a self-reported disability. Women were reported being lonely more often than men although this could be explained by men being less likely to report undesirable feelings, such as loneliness (Borys and Perlman, 1985; Nicolaisen and Thorsen, 2014). People with caring responsibilities are also identified as being at a higher risk of loneliness (ONS, 2018b).

In 2012, The Campaign to End Loneliness claimed that approximately 900,000 people aged over 65 in the UK, were lonely all or most of the time (Bolton, 2012). Age UK (2018) report that the number of over 50s experiencing loneliness is set to reach two million by 2025/26 compared to 1.4 million in 2016/17; an increase of 49%. Victor (2003) however argues that the extent of loneliness has remained ‘fairly static’ over the last six decades, stating that surveys over this period reflect that 8-10 percent of

older people are always or often lonely. This increased prevalence can therefore be attributed to an ageing population, which is supported by the Office of National Statistics (2018a). They predict that the percentage of the general population who are 65 and over will increase from 18% in 2016 to 26% in 2041, when there will be an estimated 20.4 million people in this age group, with the increase highest amongst those aged 85 and over. Victor (2011) also suggests a changing profile in the older people population over time, with urban communities comprising higher numbers of older people from ethnic minorities, who would have come to the UK in the 1960s. She goes on to state that there are more, older people with significant physical disabilities and poor health, whom in previous years would have died in childhood and an increasing number of older people whom have been married more than once and thus have complex family structures and relationships. The Campaign to End Loneliness also highlight risk factors associated with loneliness, which are likely to increase with age. These include: poor health, sensory loss, loss of mobility, lower income, bereavement, retirement, becoming a carer and giving up driving.

## **2.2 The Impact of Loneliness**

The Department of Health (2012) has reported that loneliness, within the older people population, is considered a major health problem. Holt-Lunstad et al. (2010) conducted a meta-analysis of 148 studies and reported that there was a 50% increased likelihood of survival for individuals with strong social connections, after an average 7½ year follow up. This result was consistent across country of origin,

gender and initial health status. They also reported that not having social connections carries a health risk:

- equivalent to smoking up to 15 cigarettes a day
- equivalent to being an alcoholic
- more harmful than not exercising
- twice as harmful as obesity

The effect of loneliness on the mortality and morbidity of older people is also supported by Luo et al. (2010). In a review of evidence on loneliness and social isolation for the Social Care Institute for Excellence, Windle et al. (2011) highlighted that loneliness has an enduring and significant impact on people's health. They stated that it was linked with higher blood pressure and depression, leading to higher prevalence of mortality, higher incidence of dementia and thus an increased demand on health and social care services. They also reported that alleviating loneliness would have wider positive benefits for communities by reconnecting individuals and providing access to economic and social capital.

Fulton (2014) states that the issue of loneliness is becoming more prominent on social and political agendas, due to the increasing acceptance by service providers, commissioners and politicians of its status as a risk factor for increased health and social care usage. The increasing demand on health and social care services has stimulated an interest in research relating to activities and initiatives which fall within the third sector. In 2010, central government announced it would provide

£1M to help older people who are at most risk of chronic loneliness and social isolation (Department for Work and Pensions, 2015). The focus was using this money for prevention; helping older people to remain active, independent and engaged with society in positive ways, following retirement. The Campaign to End Loneliness assert that taking actions to prevent people becoming chronically lonely is a requirement under the wellbeing principal and prevention duty of the Care Act (2014). The Local Government Information Unit (LGIU), with the support of the Campaign to End Loneliness, claim that the Better Care Fund can be accessed for supporting this (Grant, 2016).

With regards to this evaluation, loneliness is considered as a factor affecting people's ability to engage with Goldies. A study by Goll et al. (2015) identified a number of barriers to social participation, among older adults experiencing loneliness. These included more overt barriers such as illness, disability, loss of friends, loss of community and a perceived lack of social opportunities. The study also reported that individuals' responses to these overt barriers, in terms of coping strategies, might also act as psychological and behavioural barriers to social participation. These included strategies such as minimising the difficulties of loneliness, not seeking social interaction, avoiding social opportunities, relying on the telephone and keeping busy with solitary activities. The study went on to report that social fears, for example being rejected by peers as well as fear of losing a range of preferred identities, also acted as emotional barriers.

## 2.3 The Benefits of Communal Singing

Singing is reported to bring a wide range of benefits for individuals. Takelessons.com suggest that the range of benefits are physical, psychological & emotional as well as social. Physical benefits include: strengthening the immune system, a form of exercise, improving posture and helping with sleep. Psychological and emotional benefits include: lowering stress levels, improving mental alertness and acting as a natural anti-depressant. Social benefits include: widening friendship circles, boosting confidence, broadening communication skills and increasing ability to appreciate other singers.

Professor Stephen Clift and others at the Sidey De Hann Centre at Canterbury Christ Church University, have contributed a valuable body of research to the area of health and well-being benefits of singing for older people. Clift et al. (2008) carried out a large scale (n=1124) study, to investigate the perceived benefits of choral singing for older people in England, Germany and Australia. They used two standardised measures; a questionnaire based on instruments specifically designed to capture people's perceptions of choral singing as well as the World Health Organisation (WHO) standardised measure of quality of life (WHOQOL-BREF). They concluded that a large majority of choristers agreed that singing has a positive impact on personal wellbeing. This is supported by a more recent qualitative study of five older people's choirs in Australia (Joseph and Southcott, 2018). They reported three general themes in relation to older people's engagement with communal singing: social connection, a sense of well-being and social engagement. They argue

that choirs provide opportunities for social cohesion, positive ageing and music learning that provide a sense of personal and group fulfilment, community engagement and resilience. Clift and Hancox (2010) reported, from the same cohort as the Clift et al. (2008) study, that women were significantly more likely to endorse the value of singing for well-being and health compared to men.

Other research into group and choral singing has shown it to have a range of positive effects, such as wellbeing and relaxation, breathing and posture, social benefits, spiritual benefits, emotional benefits, and heart and immune system benefits (Clift and Hancox, 2001; Hillman, 2002). Clift et al. (2010) describe what they term 'generative mechanisms', which are participants' self-reported accounts of *how* singing positively impacts on their health and well-being. These include: choral singing engenders happiness and raised spirits, which counter feelings of sadness and depression; singing involves focussed attention, which blocks pre-occupation with sources of worry; singing involves deep, controlled breathing, which counters anxiety; choral singing offers a sense of social support and friendship, which ameliorate feelings of isolation and loneliness; choral singing involves education and learning, which keeps the mind active and counteracts decline of cognitive functions and choral singing involves a regular commitment to attend rehearsal, which motivates people to avoid being physically inactive. Taking part in group singing activities, was also linked to a reduction in risk factors which resulted in reduced need for health service interventions.

An academic study on Goldies, conducted by Teater and Baldwin in 2014, utilised a mixed-methods design to determine the perceived benefits of attending Goldies sessions. They concluded that most participants reported that attending sessions had a positive impact on their self-development and health as well as helped create a sense of community. Analysis of quantitative data from questionnaires, suggested that attending Goldies had a beneficial impact on their health and well-being. Conclusions drawn from analysis of qualitative data, collected via semi-structured interviews, included that participants' experience of social isolation had improved. They also observed that many older adults who were socially isolated or on a low-income, may not have the means or inclination to join a local, more formal, choir. This could be due to spaces being limited or the requirement for a certain standard of singing competence. This suggests that the inclusive and informal nature of Goldies groups, may be more suited to tackling social isolation than formal choirs.

The research activity conducted in this evaluation, seeks to assess and understand the impact of Goldies on participants' health and well-being in England and Wales. This is in accordance with the Care Act (2014). It follows an evaluation, by the same author, of Goldies Cymru in 2016 and a further evaluation of Goldies Cymru in 2018, by a different author.



## Aims and Objectives

### 3.1 Aim

The aim of this report is to evaluate the effectiveness of Goldies' service delivery in England and Wales, focussing on impact of this provision on participants' health and well-being.

### 3.2 Objectives

The principal objectives of this report are:

1. To ascertain the nature and extent of the impact of attending Goldies sessions on participants' health and well-being.
2. To explore the benefits of attending Goldies sessions for participants.
3. To investigate any potential barriers for participants, with regards to accessing Goldies sessions.
4. To make general recommendations as to possible future developments.

### Disclaimer

It must be noted that due to the social and community based nature of the project, it is difficult to ascertain the full, wide reaching long-term impact on individuals; given the time and budget restraints as well as the ethical considerations of this evaluation. The study design and sampling methodology also pose limitations on generalisability and validity. There are likely to be a number of wider social impacts which cannot be easily ascertained. The most effective analysis can only be achieved if long-term wider outcomes are considered using a range of quantitative and qualitative methods and even then, it is still unlikely that the full extent of the impact can be determined.

## Methods

### 4.1 Design

A multi-methods approach was used, to gather quantitative and qualitative data to evaluate the project. The questionnaire created for the evaluation of Goldies Cymru in 2016 was used, which incorporates standardised measures, to collect quantitative data from Goldies participants (n=136). Qualitative data were collected via a total of 12 focus groups (5 in Wales and 7 in England) with participants from various sessions in both countries. In addition to this, further qualitative data were collected via filmed interviews and written postcards in England and Wales. The Goldies website and conversations with members of the Goldies administration team, session leaders and participants, were also used to source background information and provide additional anecdotal evidence.

### 4.2 Sample

Contributors providing data for this evaluation, were recruited via a purposive sampling methodology. For the purposes of this evaluation, the term ‘contributors’ is used to denote an individual who provided data, to distinguish from the term ‘participant’ which has been used to identify an individual who attends Goldies sessions. Suitable Goldies groups were identified by programme leaders and invited to one of two data collection events; one held in Cardiff and the other in Nailsea, not far from Bristol.

Whilst practical considerations were taken into account when selecting the groups to invite, such as; distance to the venue, potential availability on the day and access to transport; attempts were made to invite groups which would best represent the diversity of the population of Goldies participants. This included attention to factors such as: rural and urban locations; how long the group had been running; ethnicity; groups run by different session leaders and the types of venue where the groups

have their sessions. Groups representing England came from sessions held in and around the Bristol area and groups in Wales, from sessions held in South Wales.

A total of 136 Goldies contributors (n=136) provided data for the evaluation, 54 in Wales (nW=54) and 82 in England (nE= 82). The total population of Goldies participants is thought to be over 3,500. Over 90% of contributors attended one of the data collection events and completed questionnaires at the events, as well as participated in a focus group. Focus groups ranged from approximately 6 to 12 contributors in each group, with most groups comprising participants that attended the same session. Some additional contributors in Wales completed questionnaires who hadn't attended one of the events. A smaller sample of contributors at both events, also chose to be involved in a filmed interview and/or complete a feedback postcard.

### **4.3 Materials**

#### *4.3.1 Questionnaires*

The questionnaires (see appendix I) used for this evaluation had been previously created for the evaluation of Goldies Cymru in 2016. They were constructed including demographic questions and standardised measures of loneliness, health quality of life and social care quality of life. The Campaign to End Loneliness 6 item measurement tool (CTEL, 2015) was used to measure the degree of loneliness. This tool was selected due to its sensitive, positive wording and relevance for use with older people. The tool has been demonstrated to have good reliability when tested against the De Jong Gierveld scale, which is considered by many researchers to be the gold standard, with regards to measurement of loneliness in older age. The ED-5D was used to measure health quality of life, which is a widely used tool (Gusi et al., 2010). This questionnaire has been demonstrated to have good reliability (Cronbach's alpha = 0.73) by Savonia et al. (2006).

An element of the ASCOT-SCT3 was used to measure social care related quality of life (Netten et al., 2012) with regards to engagement with other services. The full tool was not used, due to overlap with the ED-5D and to also not make the overall questionnaire too lengthy for participants. Reliability of the complete scale however, has also been shown to be good by Netten et al. (2010) (Cronbach's alpha = 0.71). Items to record data on participants' age, gender, sexual orientation, disability, ethnic group, length of time attending Goldies and number of Goldies sessions attended, were also included. 10 point rating scales were included to record participants' typical sense of well-being before and after a Goldies session, as well as open questions on what factors could be attributed to any perceived difference in well-being. Open questions on what participants liked and disliked about Goldies, as well as suggestions for improvement were also included.

#### *4.3.2 Focus Group Topic Guide*

A topic guide (See appendix VIII) was constructed to conduct the focus groups with contributors. A semi-structured approach was used with open questions categorised under three main headings: engagement, participation and impact with space for any additional comments at the end. Suggested prompt questions were provided under each main heading to support the facilitator. These were optional and to be used at the facilitator's discretion, to guide the conversation if necessary.

#### *4.3.3. Postcards*

One of Goldies's programme leaders devised a feedback post card (see appendix II), which could either be submitted anonymously or with the contributor's name included. This was to provide an opportunity to capture thoughts and opinions, which may not have lent themselves to expression within the questionnaires or focus groups. It would also provide the opportunity for thought and opinions to be captured, if they became apparent after the event had taken place.

#### *4.3.4 Filmed Interviews*

A suggested interview schedule of three questions (see appendix III) was provided for volunteers offering to conduct and film the interviews. This was given to support the interviewer, as a starting point and/or basis for discussion if necessary. However, the purpose of the interviews was for contributors to express whatever they wished to about Goldies, ‘giving voice’ to them via an alternative medium and providing an opportunity to tell personal stories and express ideas. These ideas may not have been captured elsewhere.

### **4.4 Procedure**

#### *4.4.1 Background*

This evaluation was commissioned in early October 2019, with a brief to focus on health and well-being. It was to follow a similar process to the evaluation of Goldies Cymru in 2016 and include at least 50 contributors from England and at least 50 from Wales. A Project Evaluation Outline (see appendix IV) was created and circulated to Goldies staff and session leaders, to share with participants and generally make all those involved in Goldies aware of the evaluation taking place.

Meetings and communication with the programme leaders for England and Wales, helped devise the most suitable process and means by which to conduct the evaluation and collect data; considering the needs of the contributor group, reflections from the previous evaluation and logistical factors such as the requested timeline for completion. It was agreed that ‘data collection events’ would be organised for England and Wales, making the data collection process less burdensome and hopefully enjoyable experiences for contributors and volunteers. Materials were also developed with the support and input of the programme leaders and other members of the Goldies administration team.

#### *4.4.2 Data Collection Events*

Data was collected via two data collection events, one in Cardiff, Wales on the 4<sup>th</sup> December 2019 and the other in Nailsea, England on the 23<sup>rd</sup> January 2020. The same format and timings were used for both events (See appendix IX). The events included an overview, information about the evaluation, ethical considerations, singing and refreshments. Volunteers to facilitate the focus groups were briefed at each event and given a pack including: (i) the focus group questions/topic guide (see appendix VIII), (ii) a sample focus group consent form (see appendix V), (iii) the focus group brief (see appendix VII) and a laminated copy of the focus group ground rules (see appendix X), to be made visible to all contributors in each group. Focus groups were run concurrently, lasted approximately 45 minutes and were recorded on a digital audio recorder to capture the data.

Questionnaires (see appendix I) were completed at the events and 35 minutes was allocated for completion. Most contributors completed within this time but some required a bit longer.

#### **4.5 Ethical Considerations**

All contributors engaging in the quantitative and qualitative aspects of the evaluation were verbally provided with information about the evaluation process and their rights; to then provide informed written consent prior to taking part in both the focus group activity (See appendix V) and the questionnaires (see appendix I). Copies of a briefing document, providing information about the evaluation and ethical considerations, were made available to contributors wishing to have this information in hard copy form (see appendix VI).

The questionnaires (see appendix I) were selected due to their relevance to the evaluation brief and suitability for use with older people. Assigned carers were given the opportunity to complete questionnaires and give consent for participants who

were not able to do so for themselves. Large print and Welsh language copies of the questionnaire were made available for anyone requiring either of those formats. A set of ground rules for the focus groups (see appendix X) were outlined to contributors and reinforced with printed copies at each group.

It was made clear that participation in any aspect of the evaluation was voluntary and deciding to take part, or not, would not affect participants' relationship with Goldies. Participants had opportunities to ask questions about the evaluation prior to taking part and were told of their right to withdraw at any time. They were also offered the opportunity to contact the lead researcher directly, should they have any difficulties relating to the evaluation after data collection had taken place.

Contributors' identities were kept confidential in the reporting, with no names or other information provided, which could identify contributors. Consent forms were immediately removed from completed questionnaires to maintain anonymity. All data is kept within accordance of the GDPR. Electronic data was

anonymised and kept on a secure password protected computer. Hard copies of completed questionnaires were anonymous and kept in a locked cabinet. Results of the evaluation will be made available to contributors, as well as all Goldies staff and participants with all raw data destroyed at the appropriate time.

#### **4.6 Data Analysis**

Data from completed and returned questionnaires were entered into a Microsoft Excel<sup>®</sup> spreadsheet, with StatPlus<sup>®</sup> and the Data Analysis function in Microsoft Excel<sup>®</sup> used to perform some of the statistical analysis. A range of descriptive and inferential analyses was used, where appropriate, with Microsoft Excel<sup>®</sup> used to provide graphs and charts to represent the data.

Qualitative data from the focus groups and postcards were transcribed and entered into a Microsoft Excel<sup>®</sup> spreadsheet. A form of thematic analysis was used to identify key themes emerging from the data. Categories from the evaluation of Goldies Cymru in 2016 were used as a starting point for analysis; adding further categories as



they emerged and removing categories that were not present in the current data set.

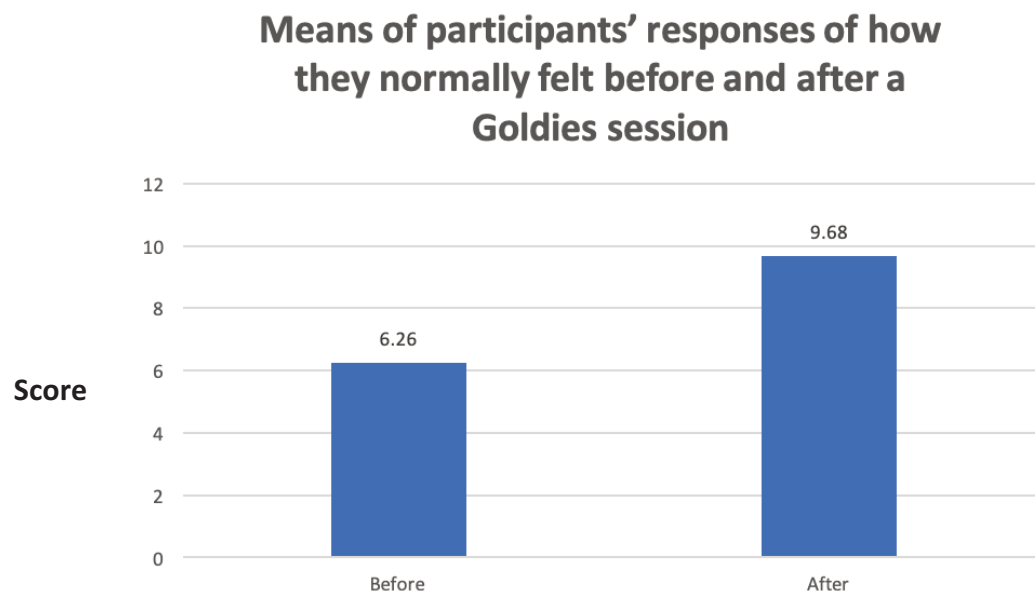
## Results and Findings

### 5.1 Results from Questionnaires

Quantitative data and acquired from the completed questionnaires and descriptive analysis are presented here and where appropriate, data for the Welsh cohort (nW=54) is presented alongside the English cohort (nE=82) in addition to the overall sample (n=136). Note that for each question, the number of responses included for analysis will vary, due to individual questions being omitted by contributors or apparent erroneous outliers.

#### Health & Well-being

Participants were asked to rate how they normally felt before a Goldies session on a scale of 1-10 (1 being low and 10 being high) and how they felt after a Goldies session (n=128). For this analysis, an assumption is made that conditions are satisfied for interval level data analysis.



### Means and Standard Deviations for before and After Scores (Combined)

	Mean	Standard Deviation
Before	6.26	1.93
After	9.68	1.11

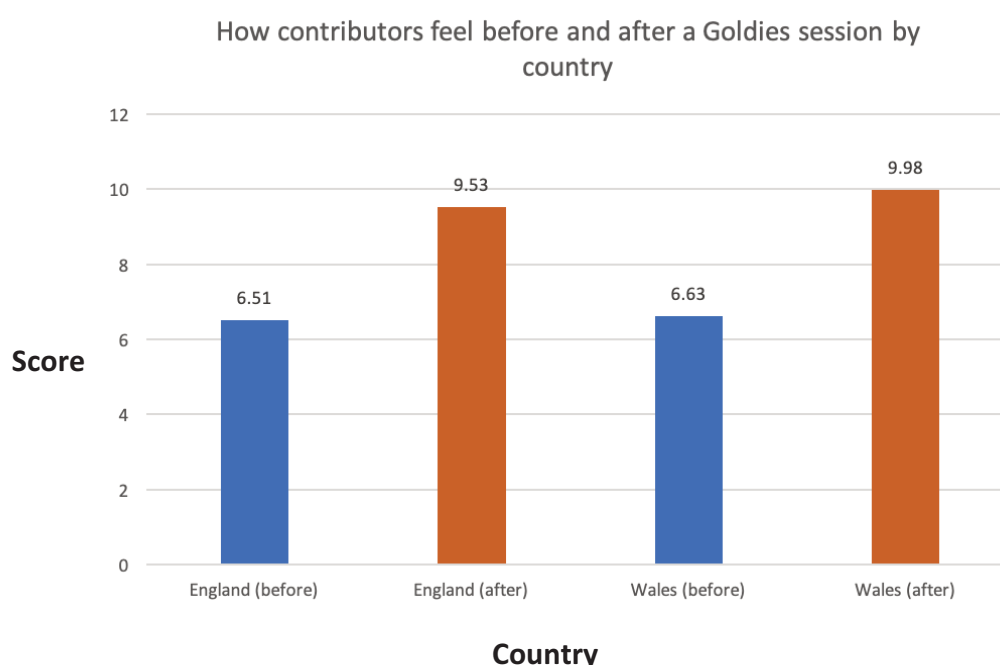
These results are almost identical to those presented in the 2016 evaluation (n=101; mean 'before' score = 6.29; mean 'after' score = 9.41), demonstrating a considerable observed difference between self-reported scores of well-being before and after Goldies sessions and suggesting a degree of reliability in the measure. It is worth noting that this provides a simple self-reported measure of well-being and the validity of the scale itself is not assessed. Due to the maximum possible score of 10, the data does not follow a normal distribution for both data sets, given the number of '10' responses for how participants felt after a Goldies session. However, participants rated the 'after' score as higher than the 'before' score consistently throughout the data set, therefore it is safe to conclude that a great proportion of participants reported that they felt 'as good as they could' after a Goldies session, compared with not feeling so good before.

The before and after scores (n=128) were analysed for statistical significance, using a Z-test (see appendix XI). This was chosen in preference to the Students' T-Test for Paired Samples, due to the sample size being >30 and the variances were known not to be sufficiently equal. The value of  $z = -16.15$ , which is considerably higher than the + or – 2 Standard Deviations from the mean denoting a 95% confidence interval. This indicates a very highly significant result.

*It therefore can be said with a high degree of confidence that the difference in the mean scores, is not due to chance. This means that the highly statistically significant increase in how Goldies participants rated how they felt before attending a Goldies session compared to after, can be attributed to them attending Goldies.*

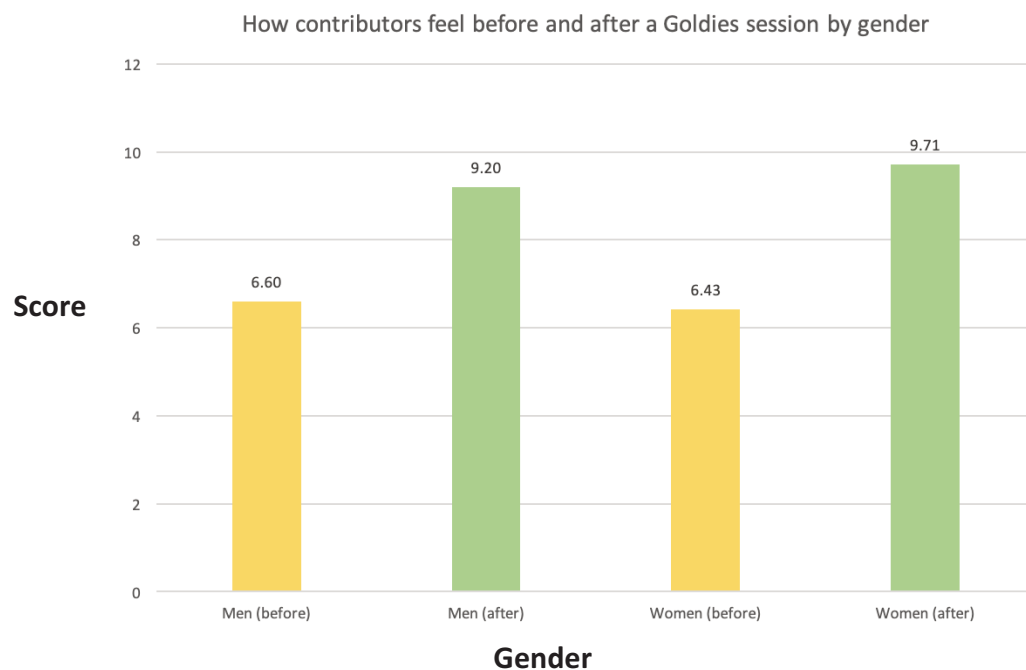
Note that the standard deviation for the 'after' scores is also less than the standard deviation for before scores, which is likely due to the mean being so near the upper limit of the scale, as mentioned previously. This may affect the sensitivity of the test. There is also debate in statistical literature as to whether a parametric test is appropriate for this type of data.

The means of before and after scores were also calculated separately for the samples in England (n=77) and Wales (n=51). The means and difference between before and after scores is similar across both countries, implying that the impact of Goldies sessions on participants' well-being remains consistent across the two countries.



Comparison of before and after score means were also carried out for men (n=15) and women (n=108). Review of the literature would suggest that the impact on well-being for women should be greater than for men. The data shows a slightly larger gap between the genders, with the means of women's self-reported scores of how they felt before a session being a bit lower than men's and their scores of how they feel after being, on average, slightly higher than men's. This gap however, is minimal as men also experienced a notable positive increase in well-being after a Goldies session, compared with before. However, the issue of the small sample size for men,

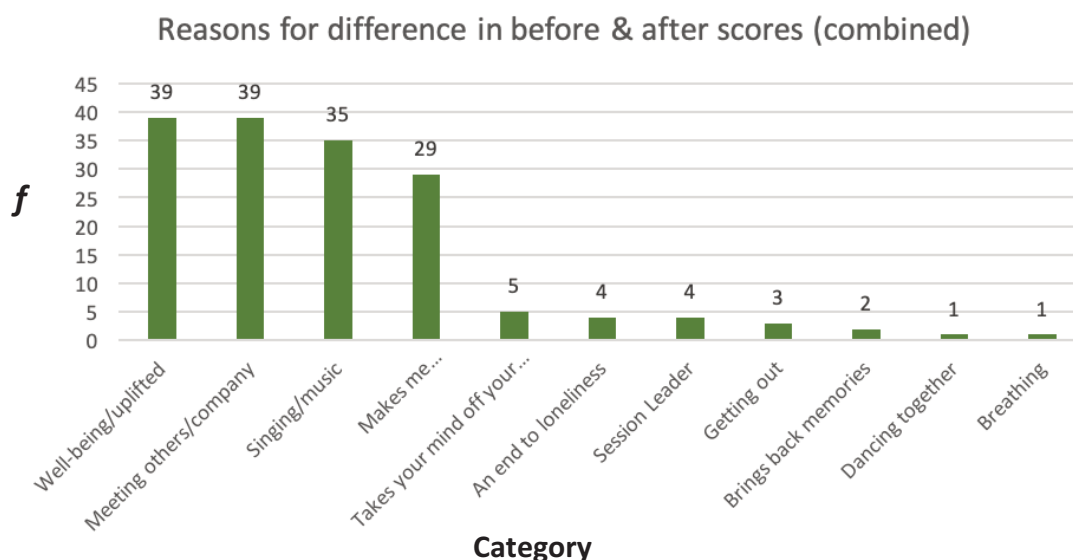
needs to be taken into account, when investigating validity of this result. Also men who decide it is not for them, would most likely stop attending or not attend at all and therefore not be present in the sample.



To investigate the sub factors which may be affecting the difference in participants' before and after well-being scores, contributors were offered the opportunity to include what they perceived were the reasons for why they felt differently, if indeed they did. This was asked in an open format with the opportunity for contributors to offer multiple responses. Responses were categorised from observations of the data and only entries which contained responses to this question, as well as gender, were included in the analysis (n=103). Pre-existing categories from the evaluation of Goldies Cymru in 2016 were used as a starting point, with new emerging categories added and redundant categories omitted.

### Frequency table of reasons for difference in well-being scores (combined)

Reason for difference	Frequency
Well-being/uplifted	39
Meeting others/company	39
Singing/music	35
Makes me happy/laughs/enjoyment	29
Takes your mind off your problems	5
An end to loneliness	4
Session Leader	4
Getting out	3
Brings back memories	2
Dancing together	1
Breathing	1

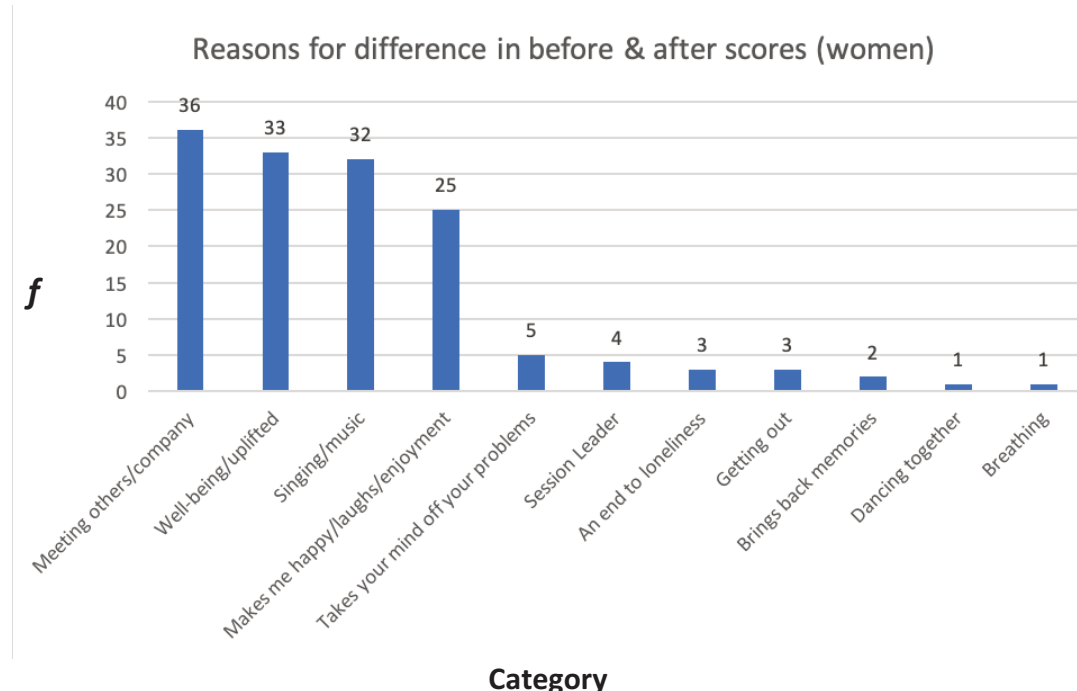


The combined data shows four categories that were most regularly referred to. There were 39 responses which directly indicated an improved state of well-being. This category also included responses of 'feeling uplifted' and 'lifted spirits'. Meeting others/company/companionship was also referred to 39 times, reflecting the importance of the social aspect of Goldies sessions. Singing/music was another important factor ( $f=35$ ). 29 responses referred to the category which included: 'makes me happy', 'laughs', 'enjoyment' and 'fun', which focus more on the changed mood of participants after a Goldies session. We can therefore suggest that the main elements, of Goldies sessions, that contributors perceive to improve how they feel are:

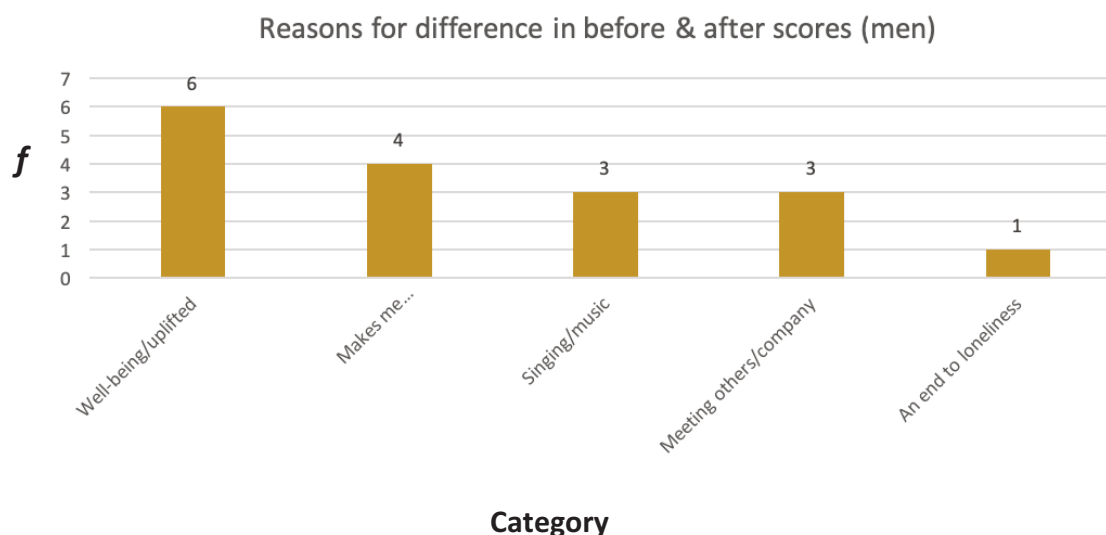
1. an identified improvement in their own sense of well-being
2. the social aspects of meeting people, making friends and companionship
3. the experience of singing and music
4. an improved mood state and enjoyment of the experience

It's important to note that some responses suggested an increase in well-being by a reduction of negative experiences, such as: 'an end to loneliness' and 'it takes my mind off my problems'.

The data was further considered with regards to gender and whilst the same aforementioned categories are reflected in each gender, there is a difference in the relative frequency of these, with women reporting 'meeting others/company' most frequently, whereas for men it was joint third alongside 'singing/music'. This seems to suggest that women value the importance of the social aspects of Goldies sessions more than men, which is supported by the literature. The sample size of men is small however and therefore no concrete conclusions can be determined on this from the data.



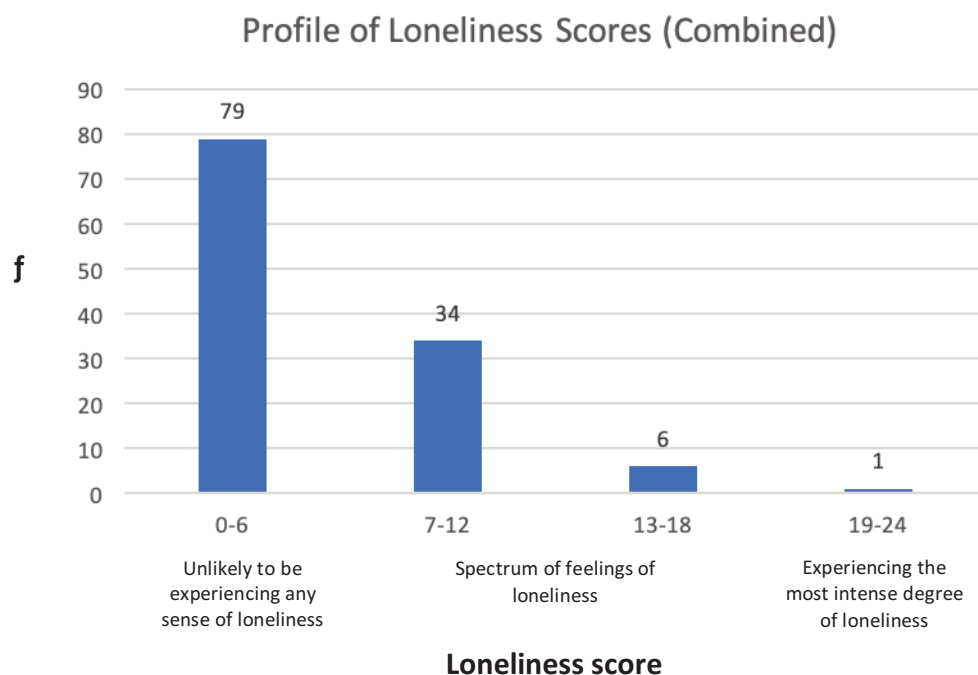




### Experience of Loneliness

An important aspect of well-being, as discussed in the review of academic literature, is not being socially isolated or feeling lonely. Goldies aim to reduce social isolation but it's the associated feelings of loneliness that are often correlated with mental and physical health factors, which impact on overall health and well-being. The Campaign to End Loneliness instrument generates a 'loneliness score' for each contributor in the range 0-24. Those scoring 0 - 6 can be said to be unlikely to be experiencing any sense of loneliness and those scoring 19 – 24 are likely to be experiencing the most intense degree of loneliness. Scores 7 – 18 indicate a spectrum of feelings of loneliness.

The profile of responses (n = 120) to the Campaign to End Loneliness instrument shows that about two thirds of contributors are unlikely to be experiencing any sense of loneliness and most of the remainder likely to be experiencing a mild and/or occasional sense of loneliness. Only one contributor was experiencing the most intense degree of loneliness. This profile shows that contributors are a lot less lonely than would be expected in the general population of older people, being 8-10% of older people experiencing loneliness most, or all, of the time (Bolton, 2012).



Due to methodological limitations in not being able to run a randomised controlled trial, the degree to which levels of loneliness can be directly attributed to attendance at Goldies sessions cannot be fully determined. What can be claimed is that contributors are markedly less lonely than people in the general population of a similar age.

Given the opportunities that Goldies sessions gives for social interaction and how social aspects of Goldies sessions are attributed to increases in well-being, it would be reasonable to claim that attendance at Goldies sessions has a beneficial impact on participants' experience of loneliness. The degree to which this effect can be claimed for all Goldies participants is limited due to the sampling methodology, although the sample size and universality of the effect within the sample would support the hypothesis that Goldies participants are less lonely than older people in general. Goldies' target group are also one of the identified high risk groups for experiencing loneliness. As a result, it can be claimed that they are helping to prevent loneliness and social isolation, by providing ongoing and meaningful activity for those engaged. However, it should be noted that people experiencing social isolation, who are more prone to more intense levels of loneliness, are the hardest to reach. They may also experience an increased range and intensity of barriers in

accessing the sessions and participating in social activity, so will be less likely to be engaged in a project, such as Goldies.

Loneliness was also explored by gender and both women (n=106) and men (n=14) display similar loneliness score profiles.



In the evaluation of Goldies Cymru in 2016, an independent samples t-test was carried out to assess the direct effect of attendance at Goldies sessions on loneliness. The independent variable was the number of sessions that participants had attended, the dependent variable was loneliness score. Participants were split into two groups, those that had attended three or fewer sessions and those that had attended four or more. The t- test revealed a difference in the means in the direction expected but not significant enough to be able to attribute this, with confidence, to the number of Goldies' sessions attended. Interestingly, in the current sample there were only two contributors who had attended three or fewer sessions.

Observation of the data set showed that a great majority of contributors had been attending Goldies for some time, especially compared to the data in 2016. The mean length of time that contributors (n=116) had been attending Goldies was 4 years and 6 months. The mean number of Goldies sessions attended by contributors (n=95) was 87.17. The rationale for collecting data on these two elements, which collectively denote level of 'embeddedness', was because there may be some participants who have been involved with Goldies for a long time but may have missed sessions and that whilst Goldies sessions normally occur monthly, there are a few exceptions where sessions are scheduled more frequently. What these two figures appear to reveal is that when contributors start coming to Goldies, they stay. Given the aforementioned beneficial impact on well-being, it appears that the positive effects are sustained and endure over time.

## **Health & Social Care Quality of Life**

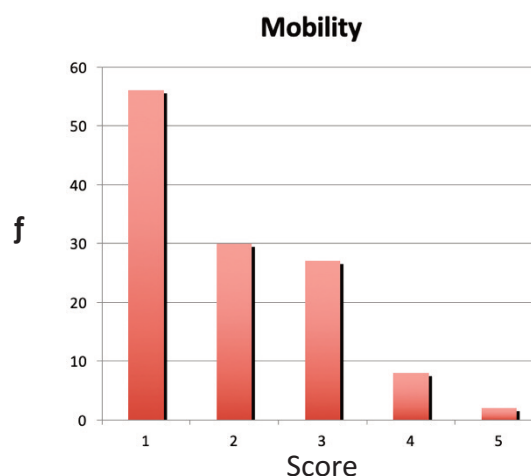
Standardised measures were used to gather data on contributors' health quality of life (EQ-5D) and social care quality of life (part of ASCOT-SCT3). Due to the length of time that contributors had been attending Goldies sessions, this data could not be analysed against a measure of 'embeddedness'. However, profile data for the cohort are presented. Scores from the EQ-5D quality of life index are presented with low

scores for each domain representing no or little difficulty in that particular area and high scores demonstrating severe or extreme difficulty. Overall quality of life is determined by the 5 dimensions of mobility, self-care, ability to perform usual activities, pain/discomfort and anxiety/depression.

### Health Quality of Life Profile

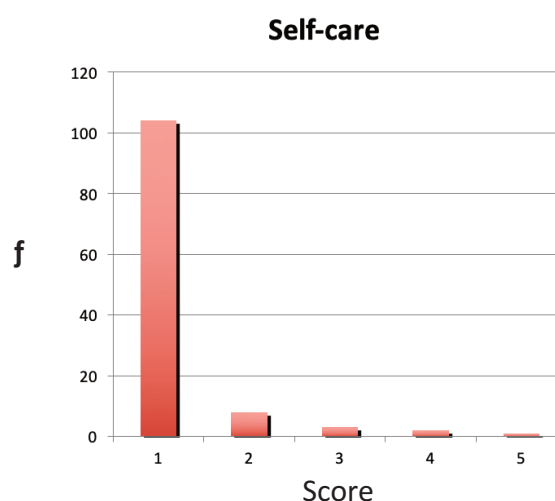
#### Mobility (n=123)

Score	Frequency
1	56
2	30
3	27
4	8
5	2



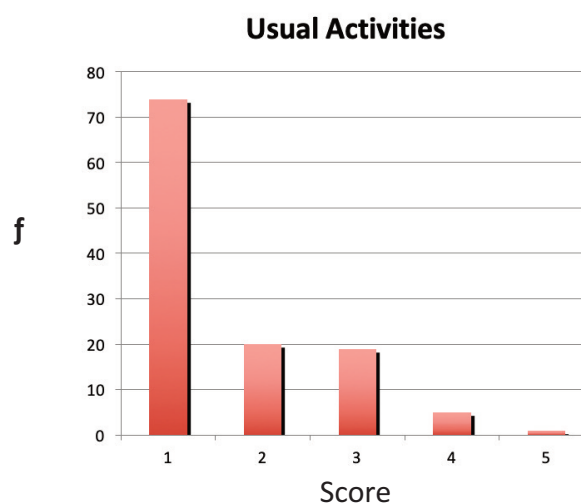
#### Self-care (n=118)

Score	Frequency
1	104
2	8
3	3
4	2
5	1



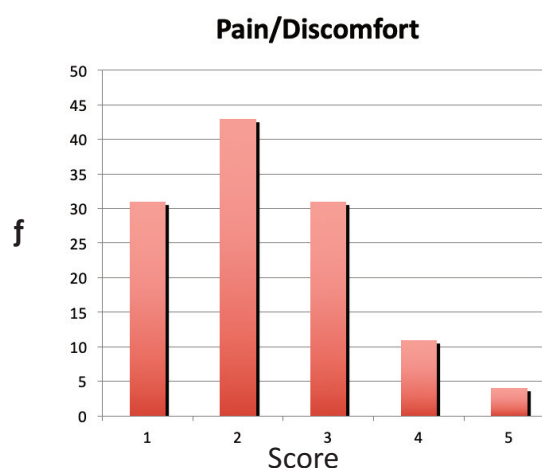
#### Usual Activities (n=119)

Score	Frequency
1	74
2	20
3	19
4	5
5	1



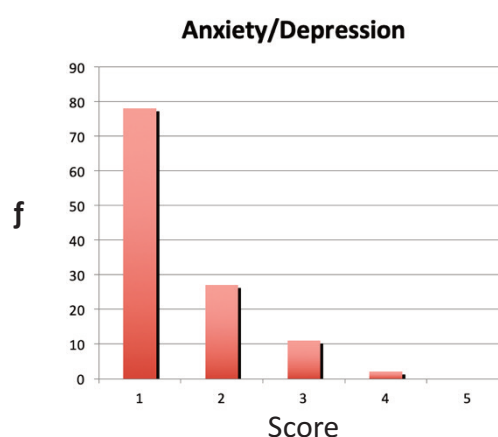
### Pain/Discomfort (n=120)

Score	Frequency
1	31
2	43
3	31
4	11
5	4



### Anxiety/Depression (n=118)

Score	Frequency
1	78
2	27
3	11
4	2
5	0



The distribution of scores for health quality of life dimensions indicate that a substantial proportion of contributors have no or slight problems with self-care, usual activities and anxiety/depression. 30% of contributors (n=123) experience moderate or severe problems with walking about or are unable to walk at all. 38% of contributors (n=120) reported being in moderate, severe or extreme pain or discomfort. The level of problems with mobility is also reflected in the data for physical disability, where 43% of contributors (combined England and Wales: n=122) considered themselves to have a physical disability (44% for England [nE=75]; 40% for Wales [nW=47]). This is likely to impact on people being able to do their usual activities and 21% of contributors reported having at least moderate problems with doing this. Only 2% contributors considered themselves to have a learning disability (n=127). With the absence of baseline data or the possibility to conduct a

randomised controlled trial, we cannot isolate the effect of participation at Goldies sessions on quality of life. However, despite contributors' reported problems with mobility and pain, they are still making the effort to attend Goldies sessions. This, if we assume Rational Choice Theory, supports the claim of the significant benefits of attending Goldies sessions for contributors, because the perceived subjective benefits outweigh the perceived subjective costs. It also means that contributors can access Goldies sessions, implying that the venues where Goldies sessions are run, have suitable access provision for people with physical disabilities.

It is worth noting the absence of people with a learning difficulty, given the prevalence of dementia and cognitive decline in the older people population. It could be that contributors may not associate dementia with being a learning disability or be aware of/wish to acknowledge their own cognitive decline. It is known that Goldies runs bespoke sessions for clients with specific needs and learning disabilities and adapts the way sessions are run to be suitable for these client groups.

11% of contributors identified experiencing moderate or severe anxiety or depression. The Health and Social Care Information Centre (2007) claim that 22% of men and 28% of women over the age of 65 are affected by depression. Accounting for the difference in age thresholds, it would appear that the proportion of contributors experiencing poor mental health is lower than expected, compared to the general population of the same age. This could be because: (i) Goldies has a positive effect on mental health, (ii) Goldies participants do not reflect the general population of that age, (iii) the contributors are not representative of Goldies' participants or (iv) the potential problem of older people not acknowledging or reporting poor mental health, due to generational factors.

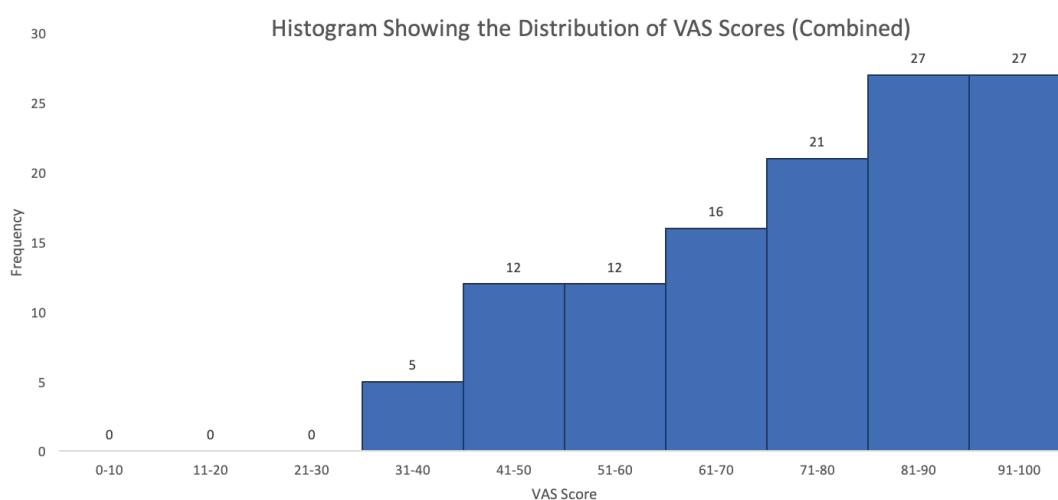
It is probable that all these factors are relevant and it is known that poor mental health can create barriers to participating in social activities. However, given the previously stated impact of Goldies on contributors' well-being, it is very likely that attendance at Goldies sessions has a positive impact on mental health.

## VAS Quality of Life Scores

Contributors were also asked to provide an overall health quality of life score, of how good or bad their health was on that day (n=121). This was done by putting a mark on a Visual Analogue Scale (VAS) as well as writing the percentage in a box. '0' represents the worst health imaginable and '100' the best health imaginable. Observation of the data set showed similar profiles for England and Wales. The range of scores were clustered into ten groups with frequencies calculated for each group.

### Contributors' VAS Scores (n=121)

Range	Frequency
0-10	0
11-20	0
21-30	0
31-40	5
41-50	12
51-60	12
61-70	17
71-80	22
81-90	27
91-100	27



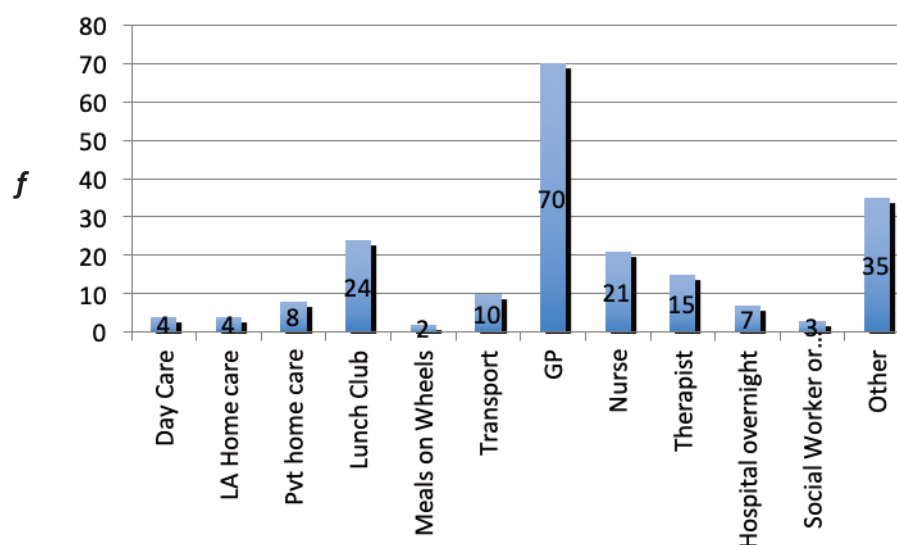


The histogram shows a positive profile of self-reported measures of overall health for this age group. 67% of contributors rate their overall health at 71 or more. Interestingly, this shows an improved health profile, compared to the evaluation of Goldies Cymru in 2016, where 45% of contributors rated their overall health at 71 or more. The ED-5D profiles also show an improved health profile for this cohort of contributors, compared to the cohort in 2016. This is despite contributors in this sample being older than contributors in 2016. Without controlling for other variables, we cannot say to what degree this observation can be attributed to attending Goldies sessions but that doesn't rule out the possibility that Goldies are having a positive impact on overall physical and mental health. Other factors could include societal lifestyle changes or an increase in older people services or health care provision.

### Social Care Quality of Life

An element of the ASCOT-SCT3 social care quality of life index was used to ascertain the extent to which participants were accessing additional services within the three-month period leading up to the data collection events. 94 Contributors responded to this question (n=94) providing 206 data entries.

Contributors' Use of Services in the Last Three Months



The profile of contributors in this evaluation shows a similar profile to the evaluation of Goldies Cymru in 2016. 74% of contributors had visited their GP within the three-month period leading up to the data collection event, reflecting a high proportion of contributors engaging in primary health care provision. This is expected given the previously mentioned reporting on mobility and pain. 26% of contributors had accessed a lunch club in the three-month period. Goldies continues to attach their sessions to pre-existing lunch clubs, which may explain this observation. 37% of contributors engage in other services, which include a range of non-statutory services like line dancing, bingo and other social activities.

### **What Contributors Think of Goldies**

Contributors were asked to give a score from 1 (low) to 10 (high) for how they rated the Goldies' service (n=123). The mean of scores for the combined sample was 9.32 (n=123), with the mean for England being 9.03 (n=71) and Wales 9.72 (n=52). This figure shows that contributors in England and Wales rate Goldies very highly. In Wales however, all contributors rated Goldies at 8 or above whereas in England, 87% of contributors rated Goldies at 8 or above. Whilst the overall rating in both countries remains high, further exploration is required to ascertain the reason for the difference, which may be due to factors relating to a particular session(s), session leader(s) or other specific factors relating to service provision or contributor experience in England.

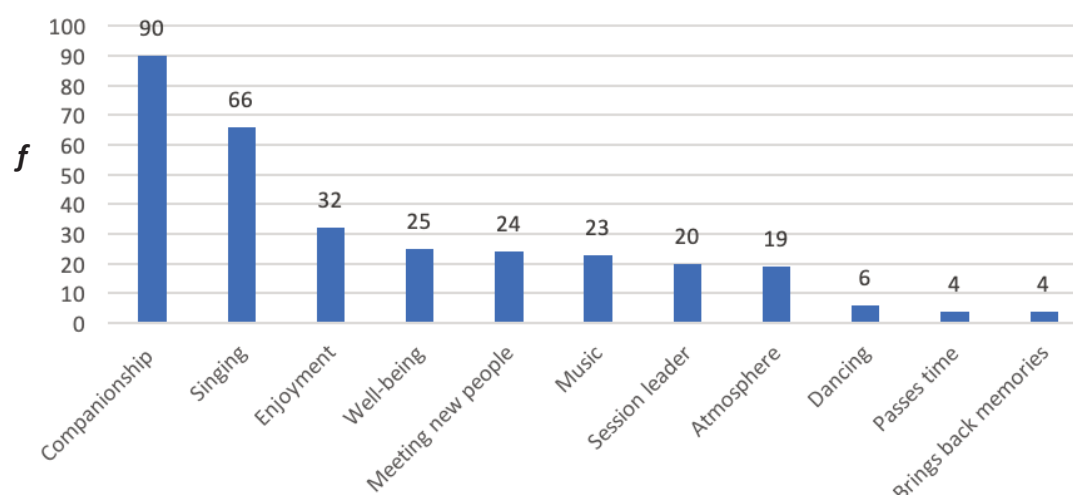
To ascertain the elements of the Goldies experience that participants value the most, contributors were offered the opportunity to state up to three things they liked about Goldies, in an open question format. 127 (n=127) contributors in the combined sample responded to this question, providing 313 responses in total. The responses were then clustered into categories. Observation of the data in the sub samples for England and Wales, showed similar profiles. The combined data are

represented below, with categories included which contained four or more responses overall.

### What participants like about Goldies

	Frequency
Companionship	90
Singing	66
Enjoyment	32
Well-being	25
Meeting new people	24
Music	23
Session Leader	20
Atmosphere	19
Dancing	6
Passes time	4
Brings back memories	4
<b>Total</b>	<b>313</b>

### What Contributors Like About Goldies



The most frequent response was 'companionship', with 71% of contributors from the combined sample stating this. This category also included statements relating to 'friendship', 'a sense of belonging' and 'getting together'. This reflects the value and importance that contributors place on the social aspect of Goldies sessions, the friendships they make and the opportunity that Goldies provides to maintain those friendships. Another category relating to the social aspect of Goldies sessions, 'meeting new people', was also important to contributors, with 19% of contributors stating this. This category was separated from 'companionship' because (i) it had a high number of responses within itself and (ii) the potential for issues relating to looking for new friendships to be different, in some ways, from maintaining existing

friendships, especially if we consider the issue of social isolation and loneliness. Contributors stating that Goldies are providing the opportunity to meet new people and how much they value the companionship, supports the idea that Goldies are successful in reducing social isolation and loneliness.

The singing category was the second most referred to category, which shows the impact that the singing aspects of Goldies sessions has on contributors. Responses alluded to contributors' enjoyment of singing for themselves, as well as the enjoyment of singing in a group. Both aspects have a benefit on well-being, as outlined in the review of academic literature.

The 'enjoyment' category incorporated responses related to contributors' positive mood associated with attending Goldies. It included responses with words and phrases such as: 'fun', 'feel happy' and 'have a laugh'. 25% of contributors included responses relating to this, supporting the claim that Goldies has a positive impact on well-being. To further support this, another category titled 'well-being', included responses with words and phrases such as: 'wakes you up', 'uplifting' and 'lifts spirits' with 19.6% of contributors offering responses relating to this category.

'Music' was also important, with 18% of contributors providing responses in this category. Contributors' value of this highlights the suitability and appropriateness of the song selections. It is known that Goldies asks participants for suggestions when creating new song books and whilst it cannot be guaranteed that every participant will like every song, it does ensure that selections are the most popular.

Review of the popular categories clearly shows the elements of Goldies sessions which are of most significance to contributors. The social aspects, singing & music and positive impact on mood & well-being are valued very highly. The less popular categories also have associations with positive well-being. 'Atmosphere' included comments such as: 'relaxing' and 'friendly' and 'passes time', included comments relating to 'getting out the house'. This shows that for some, attending Goldies provides a vehicle for engaging in a social activity and thus reducing social isolation

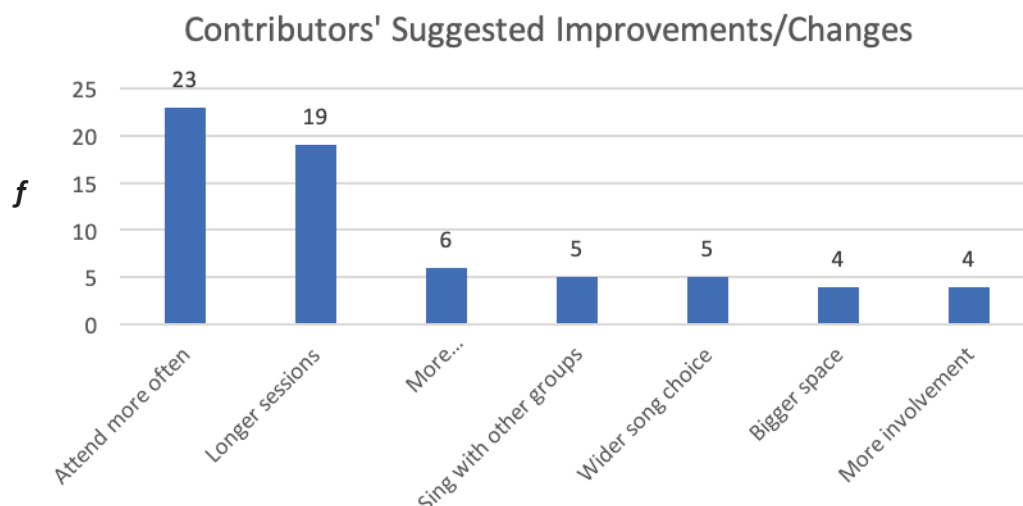
and loneliness. As all three of the significant elements, as well as the less popular categories, have associations with positive benefits for well-being, it is likely that the impact of Goldies sessions on well-being is somewhat significant.

Regarding what contributors dislike about Goldies, the opportunity was given to offer up to three responses in a format similar to the question before. The wording of some responses to this question were considered more suitable for 'suggestions for improvement'. As a result, there were only 27 responses in total to this item, reflecting a high level of overall satisfaction with Goldies sessions and supporting the rating scores described previously. 16 of these responses however described the session time being too short, which is an accolade to Goldies, as contributors want more. 5 responses referred to 'too much talking', reflecting the differing priorities within a particular group or groups. The importance of both the social and singing aspects to contributors have been highlighted and we can assume that the relative importance of each of these, may differ from individual to individual.

Contributors were offered the opportunity to provide open suggestions for how Goldies could improve or change. Interestingly, 43 (52%) contributors provided responses to this question in England from a possible 82 (nE=82) and 20 (37%) contributors provided responses to this question in Wales (nW=54). This could be explained by: the rating for Goldies in Wales being slightly higher than for England as but also by age or cultural factors. Overall, 63 (46%) contributors in the combined sample responded to this question (n=136), providing 80 data entries. Categories containing 4 or more responses were included for analysis.

### **Suggestion to Improve or Change Goldies**

Attend more often	23
Longer sessions	19
More information/publicity	6
Sing with other groups	5
Wider song choice	5
Bigger space	4
More involvement	4
<b>Total</b>	<b>66</b>



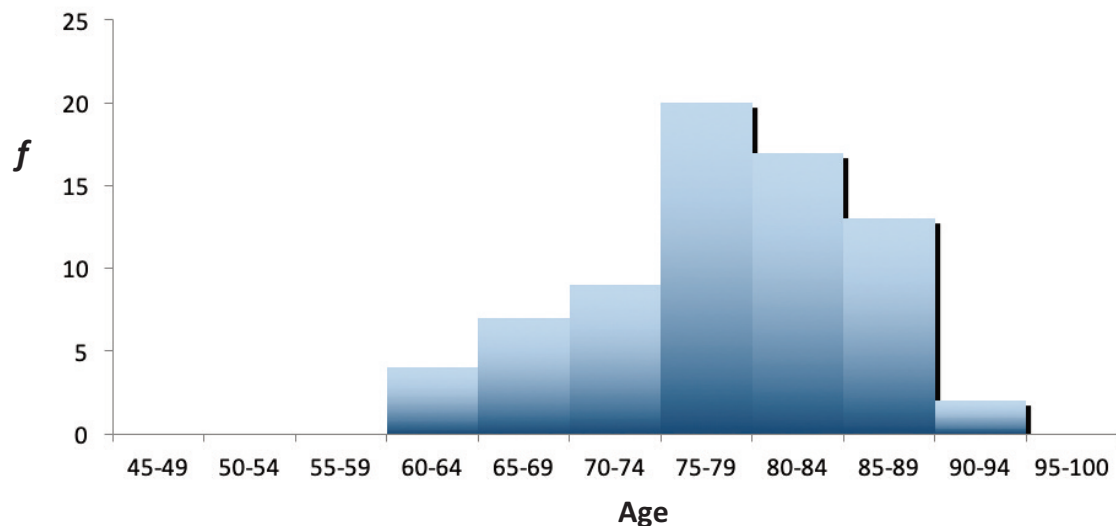
Contributors want more Goldies, whether that be sessions scheduled more frequently or for longer time. These two elements combined made up the majority (53%) of all the responses. Contributors also expressed a desire for more information and publicity on what was happening with other groups and the wider Goldies community. They also expressed a desire to sing more frequently with other groups and to be involved with Goldies in other ways. 5 responses requested a wider song choice. The category 'bigger space' is likely to relate to anecdotal reports of some groups growing in numbers of participants to the point of sessions feeling very 'cramped' at those venues. However, contributors expressed a desire for Goldies to remain inclusive and not turn anyone away, therefore a bigger space was reported to be the most suitable solution.

## Age

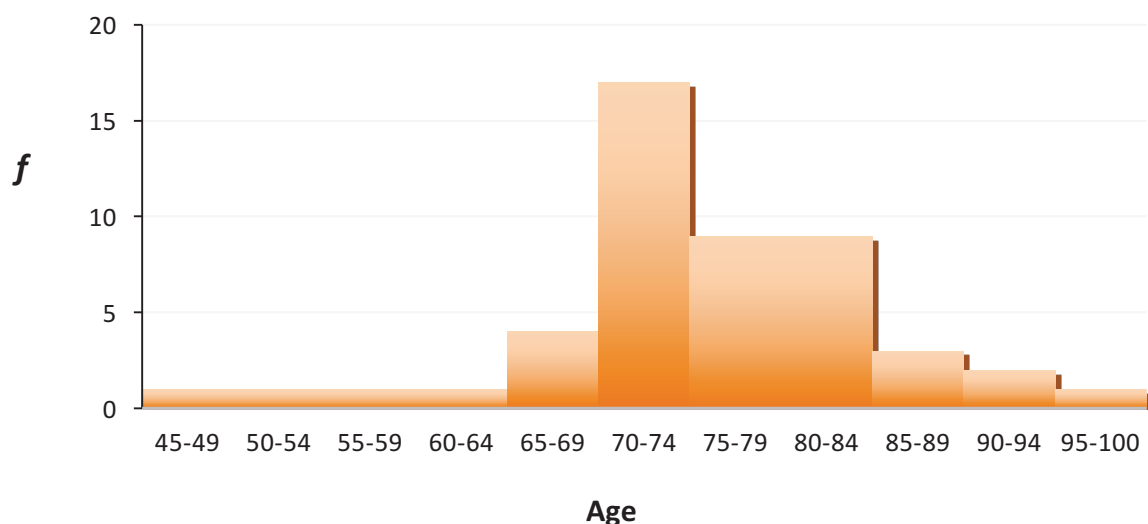
The combined sample of contributors who provided information on age (n=121; nE=72; nW=49) had an average age of 77 years and 6 months. The average age of contributors in the England cohort was 78 years and 7 months and in Wales was 75 years and 11 months. The youngest and oldest contributors in the combined sample were from the Welsh cohort, aged 48 years and 98 years respectively. The negatively skewed distribution of age in the Welsh cohort could be explained by the presence of carers, who attend the Goldies sessions in a caring capacity but also consider themselves as participants and part of the group. However, due to the inclusive

nature of Goldies, they could merely be participants who fall outside the target age group. The average age of contributors in the evaluation of Goldies Cymru in 2016 was 73 years and 6 months. The difference between this figure and the current figure for Wales, appears to support the notion the Goldies participant population is ageing due to people continuing to attend sessions. It should be noted however that this difference could be explained in other ways.

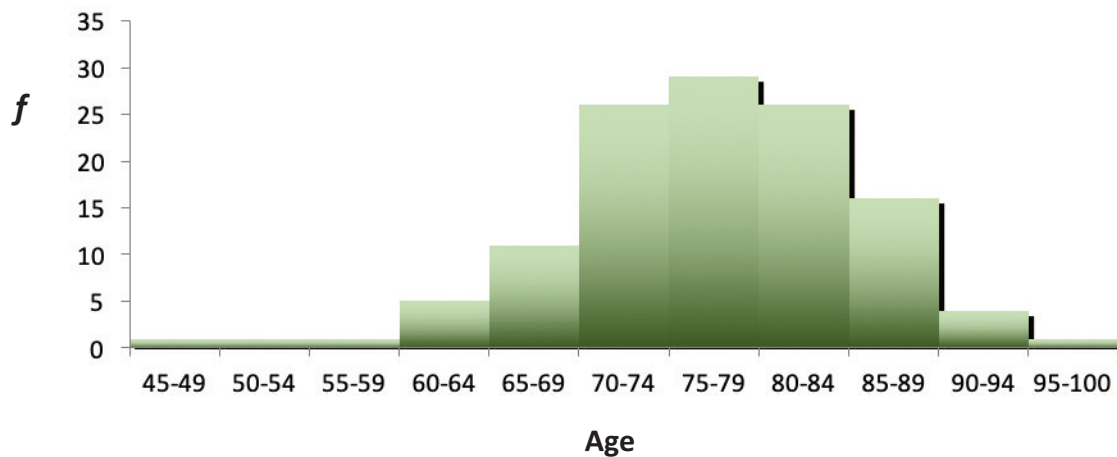
### Distribution of Contributor's Age (England)



### Distribution of Contributors' Age (Wales)

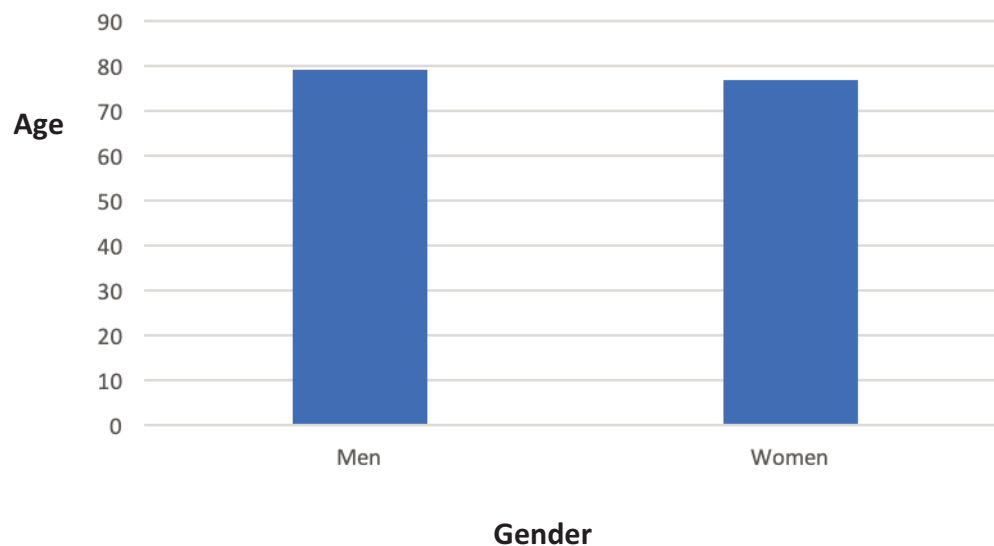


## Distribution of Contributor's Age (Combined)



An interesting observation is when average age for the combined sample is considered by gender. The average age for men ( $n = 105$ ) was 79 years and 3 months and for women ( $n = 15$ ) 76 years and 9 months. This appears to go against the expected trend as nationally, women's life expectancy (81.5 years) is longer than men's (77.2 years) according to the Office of National Statistics (2008).

## Average Age (Combined)



Further investigation considering men's age by sub-sample, shows that the anomalous average age for men relates to the England cohort only, with the average



age for men in Wales within the expected range. Given the small sample size for this group ( $n_E=6$ ;  $n_W=9$ ), there are limitations on what we can infer from this result and there may be another explanative factor, relating to the groups present at the data collection events.

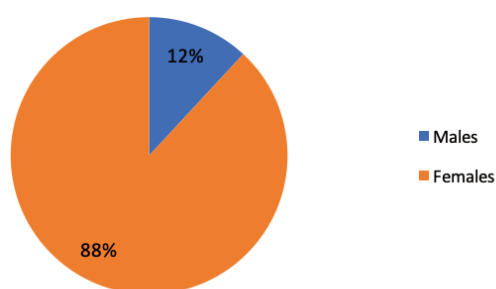
## Gender

Gender ratios were calculated for the combined sample, as well as separately for England and Wales. 126 ( $n=126$ ) contributors provided gender data, 75 ( $n_E=75$ ) in England and 51 ( $n_W=51$ ) in Wales. The gender ratios for the individual countries were identical.

**Gender Ratio (Combined)**

Males	15
Females	111
<b>Total</b>	<b>126</b>

**Gender Ratio (Combined)**



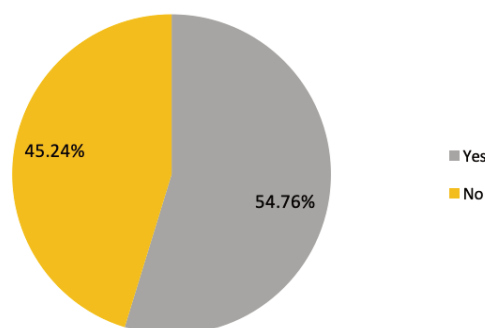
The male to female ratio for the sample, was similar to the ratio presented in the evaluation of Goldies Cymru in 2016 (males=13%; females=87%). Attracting more men to Goldies sessions continues to be a challenge and could be explained by the research carried out by Clift and Hancox (2010). They report that older women not only engage in communal singing activity more than older men but also that older women report stronger benefits for well-being from choral singing, than do older men. The data presented in this report shows only a slight difference in self-reported benefits between women and men but the issue of recruitment of men continues. As mentioned in the 2016 report, there may be cultural or societal gender differences in the value placed on singing and/or the opportunity to socialise. The result however may also be partly explained by the difference in life expectancy

between males and females in the UK, with the Office of National Statistics (2008) reporting women's life expectancy being almost 4 years greater than men's.

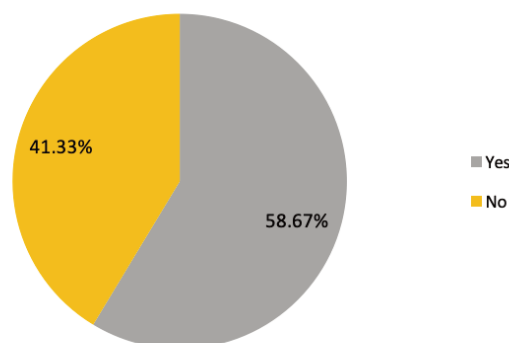
### Living Circumstances

Contributors were asked about their living circumstances and 126 contributors responded to this question (n=126; nE=75; nW=51). The data was separated by country and gender.

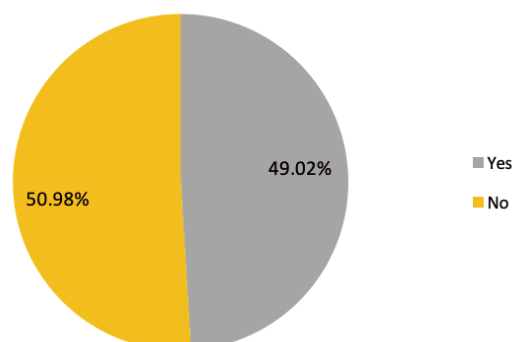
#### Proportion of Contributor's Who Live on their Own (Combined)



#### Proportion of Contributor's Who Live on their Own (England)

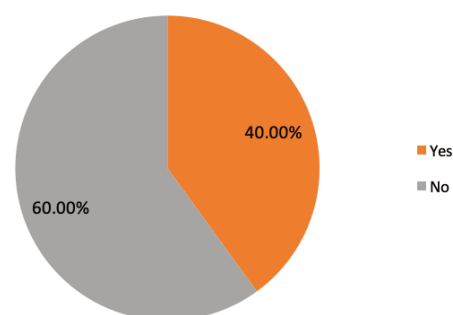


#### Proportion of Contributor's Who Live on their Own (Wales)

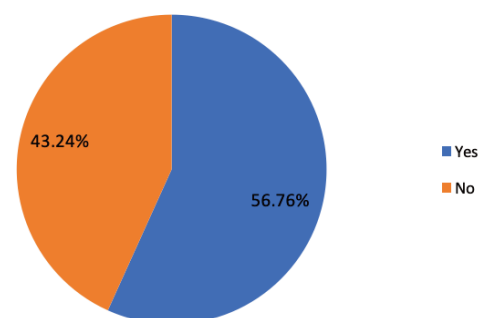


54.76% of contributors in the combined sample live on their own. Of note is the difference between the proportions for England and Wales, almost 10% more contributors in England (58.67%) living on their own, compared to Wales (49.02%). The result is also markedly different to the one reported in the evaluation of Goldies Cymru in 2016, which stated that 67% of contributors lived on their own. The reason for this is unclear and would require further investigation. Living on your own is an identified risk factor for chronic loneliness, so Goldies appears to be successful in reaching and engaging with this high-risk group.

#### Proportion of Men Who Live on their Own (Combined)



#### Proportion of Women Who Live on Their Own (Combined)



Female contributors are more likely to live on their own than men but this difference is not as great as the one reported in the evaluation of Goldies Cymru in 2016. Given the small sample size for men, we cannot draw any firm conclusions as to how significant this effect might be within the population of Goldies' participants. It is known however that in the general population, older women are more likely to live on their own, compared to men. This result could also partly reflect an underlying

gender difference, with females more likely to seek and engage in social activity when living on their own, compared to men. It could also be explained by men, who are not living on their own, are attending with their partners or are more likely to be encouraged to attend by those with whom they are living with. As mentioned earlier the difference in life expectancy between the genders is also likely to account for part of this result.

### **Ethnic Group, Language and Sexual Orientation**

123 (n=123; nE=73; nW=50) contributors answered the ethnic identity question. In England, 61 contributors identified themselves as 'white', 10 as 'black' and 2 as 'mixed/multiple ethnic group'. In Wales, 49% identified as 'white' and 1 as 'other'. There are known to be established Goldies groups in non-white communities in England but this is unknown for Wales. It could be that groups from these areas were not present at the data collection event in Wales or it could highlight an action point for Goldies to engage with more ethnically diverse groups in Wales.

Two contributors in the combined sample (n=128) stated their first language was something other than English. One of these stated Welsh and the other is unknown. Both these were from the Welsh cohort. All contributors (n=123) stated their sexual orientation was heterosexual or preferred not to say. As a result, it is unclear how effective Goldies are at engaging with the LGBT older people community.

## 5.2 Findings from Focus Groups

### Engagement

#### How contributors heard about Goldies

Contributors to the focus groups had heard about Goldies from a variety of sources. Some learned about Goldies through seeing adverts in magazines, brochures, newspapers and local shops; some through flyers they had received through their front doors and others through public venues such as: libraries, churches and community centres. This diversity suggests that it is reasonable and justified for Goldies to continue to use a range of marketing and recruitment approaches. Some contributors found out about Goldies by a chance encounter with a session taking place in a public space and then decided to join the group:

*“My husband went to the library one morning and told me about the noise they were making and said, you'd love it, so next week I went along.”* (Goldies participant, Wales).

Most contributors however, had heard about Goldies through word of mouth; usually from someone who had been or was still attending sessions. Some heard about Goldies from someone who was connected to Goldies in some way, e.g. a session leader. A recurring theme in the data was that in most cases, the person knew the contributor to some degree and thought it would be good for them to attend. In this report, the term ‘bridger’ is used to denote these individuals and their enabling function of bridging the gap to initial participation:

*“My friends told me about Goldies. I have always loved singing but since my accident I haven't been able to get to the choir that I used to be in.”* (Goldies participant, Wales).

*"X told me about it and she said you'd love the music." (Goldies participant, England).*

*"Someone told us who came to Goldies and thought we'd like to come." (Goldies participant, England).*

### Barriers to attending the first session and how these were overcome

The personal connection of bridgers between the contributor and Goldies seemed to play an important role in facilitating first engagement:

*"... Through dancing. We were asked because my [relative] is a leader of a session and she offered a taster session... we were then invited to come monthly." (Goldies participant, England).*

*"My friend told me about Goldies, we have both recently lost our husbands and we decided to go together. It's good to know you are not alone." (Goldies contributor, Wales).*

What is also evident, from responses, is that most contributors did not go to their first session on their own. Most came along with a friend and/or the bridger for support and often mention how that helped ease feelings of apprehension. Apprehension was repeatedly alluded to as a barrier to participating, leading up to attending for the first time:

*"I had a friend who knew I'd lost my husband and thought it would be great for me, so a bit apprehensive I went... I stopped going for a while but got braver and started going again." (Goldies participant, Wales).*

*"I think just coming and giving it a try is a good thing. It is always hard to go anywhere for the first time. I suppose it might be easier with a friend, but I came alone" (Goldies participant, Wales).*

Some contributors described how they had played or could play a bridging role themselves and in one response, made direct reference to the importance of the role:

*"I brought someone along, who lives round the corner from me."* (Goldies participants, England).

*"I told my friend and she now comes."* (Goldies participant, England).

*"I guess the thing we could do is encourage other people to come along and give it a go."* (Goldies participant, England).

Some contributors' responses outlined a personal journey; from having personal difficulties, engaging with Goldies, through to acting as a bridger themselves and the personal positive impact on their well-being:

*"... I love Goldies.....I have been coming from the start. I stand at bus stops and in the local area telling people about it [laugh]. I try and encourage more people to come. I have suffered with my mental health after losing my husband to suicide."* (Goldies participant, Wales).

*"My neighbour's mum lost her husband and it really lifted her spirits. She was very worried about coming because she said, 'if I cry, I am not going to come again.' I said, 'if you cry, don't worry because no-one will take any notice.' She came and she thoroughly enjoyed herself. She brought someone else as well"* (Goldies participant, Wales).

As the sample consisted of Goldies participants, those that contributed data had managed to overcome any barriers and attend their first session. Most had gone with a friend and/or with some reassurance that it would be suitable. Some participants however, managed to come on their own and of their own accord:

*"I saw an advert in a magazine and came along." (Goldies participant, England).*

The worries that contributors expressed included: having to sing on your own, if there were going to be auditions, mobility issues and not knowing what to expect. It is known that people who have been socially isolated for some time, experience barriers to accessing social activities. Contributors had all managed to overcome any barriers they may have been experiencing to be able to attend their first session, with or without support. It would be a valuable exercise to collect data from those who had not managed to attend and were socially isolated and/or lonely. Barriers they experience could be investigated and what may help them attend their first session explored; with the intention of providing them with support akin to those who are more socially connected.

Once contributors had arrived at their first session however, their worries were soon allayed and their apprehension subsided:

*"A bit scary before but then it wasn't scary and it makes you feel good." (Goldies participant, England).*

*"I didn't think it was for me but my friend said it would be, so I thought I ought to at least give it a go. I was surprised at just how friendly it was and how much I enjoyed it. I didn't really expect to. I didn't think it was for me. I love music but I can't sing but then I was surprised that it didn't matter and how much I enjoyed it." (Goldies participant, England).*

*"I joined Goldies when it first started in our area. When I first came, I felt a little daunted walking into a room with about 8 people who I didn't know and it was quite quiet. Then we all started singing the songs and I relaxed quickly, it didn't take us long to get to know each other..." (Goldies participant, Wales).*



The session leaders and other participants were instrumental in making people feel at ease:

*“The session leader was great. She asked me my name and made me feel very comfortable on my first day.”* (Goldies participant, England).

*“My friend said, ‘please come please come’. They said pick a song and we sung it. Our session leader made everybody happy. We were singing and dancing and I’ve been every month since.”* (Goldies participant, England).

### The first session: a priori understanding Vs actual experience and impact on well-being

Contributors repeatedly recalled having their spirits lifted and the enjoyment they experienced after their first session, beyond that which they expected. This demonstrates that Goldies has had an immediate positive impact on contributors’ well-being from the outset:

*“My friend said would I like to try it and I love to be social and meet people but I remember when I came out I felt so uplifted. I used to do singing when I was young, for a choir so I’ve always loved singing. The era of singing takes you back a bit and I really enjoyed it.”* (Goldies participant, England).

*“I remember my first session; I felt so uplifted. I went home and said to my daughter, ‘oh my goodness I feel so good after that session, so uplifted’ and it stayed with me for quite a long time afterwards.”* (Goldies participant, England).

*“It was better than I expected. Everyone was so friendly and it was so informal. All the advertising does say, ‘fun singing.’”* (Goldies participant, Wales).

These convey the immediate positive impact of attending Goldies and the benefit it has for well-being. It is also apparent that this impact endures after the session. The

last quote above, demonstrates how despite advertising describing how enjoyable the sessions are, contributors were still surprised by how positive the experience of attending their first session was for them. Perhaps words cannot fully do Goldies justice? A suggestion might be for Goldies to explore the idea of making more use of films/videos and images in their advertising, to give people a fuller sense of how Goldies is experienced by participants. There are however likely to be some considerations of accessibility of films and videos, given their target population and the issue of them being less likely to access the internet; as voiced by one participant:

*“People our age don’t tend to use a computer – I don’t even have one.... so advertising in various places like libraries, hairdressers, coffee shops and doctors surgeries would be good”* (Goldies participant, Wales).

This issue of the limitations of printed media, is supported by contributors’ responses relating to the question of whether they thought they had enough information about Goldies, prior to attending. Most said that they didn’t but this is likely to reflect how challenging it is to convey what the experience of attending Goldies is really like, by that medium:

*“We didn’t know what would be involved but we came together, so it wasn’t really an issue.”* (Goldies participant, England).

*“We didn’t really have anything and it was difficult when it started but when it grew and became established, it’s become easier to find out about it.”* (Goldies participant, Wales).

The participant above suggests that the information available about Goldies has improved over time. Contributors who felt satisfied with the information they had been given, had often acquired additional knowledge of Goldies through word of mouth. This provided the opportunity for a two-way dialogue, questions to be asked and any potential worries voiced and allayed:

*"X came to us and told us what it would be like, so we knew what it would be like."*  
(Goldies participant, England).

*"Yes, I had information and it was explained to me by other group members. I was worried about my mobility issues but that is not a problem."* (Goldies participant, Wales).

*"I was encouraged to come by X who explained how it worked. It is more than I expected as I have made new friends and can be myself. I think to recruit more people to the sessions, Goldies should advertise more. Perhaps in the church magazine itself as a lot of people read that. It covers a big area."* (Goldies participant, Wales).

### Suggestions for recruitment

Contributors were given the opportunity to make suggestions as to how Goldies could recruit more people to sessions and these included: advertising in doctors' surgeries due to the benefits for mental health, having a campaign on the back of a bus, local news, local papers, supermarket notice boards, post offices, libraries, social services and warden flats. A few contributors voiced that Goldies should advertise more and be targeted but also expressed the effectiveness of word of mouth over printed media:

*"Perhaps an advert in the local paper. Word of mouth is quite good because you can say how uplifting it is and how friendly it is."* (Goldies participant, England).

*"Local advertising but passing the message through word of mouth. If they don't like it, they won't come."* (Goldies participant, Wales).

One contributor stated, *"... what they need to do is get it into Eastenders."* (Goldies participant, England). Whilst this was said in jest and could be considered an

unrealistic option, one can consider how effective this could be in recruiting more people, as it would: (i) provide the opportunity for a personal story of engagement, (ii) enable potential participants to identify with an individual, possibly having similar worries to themselves and having these worries discussed and allayed, (iii) be an effective medium for conveying the actual experience of attending Goldies, (iv) be aimed at Goldies' target population and (v) potentially reach the socially isolated and hardest to reach.

### Is Goldies for everyone?

To explore the scope of potential inclusivity for Goldies, contributors were asked if Goldies 'was for everyone' as well as whether they thought that any groups within the target population were inadvertently excluded. Responses focussed primarily on the inclusivity of Goldies. It should be noted that anyone who had felt excluded would probably be no longer attending. It is therefore inclusiveness that is experienced and observed. Contributors would convey powerful stories about themselves or someone else, who had been experiencing difficulties of some kind and/or barriers to attending and thus had the potential to be excluded. The stories would tell of how these issues had been overcome and of how they had been accepted and included by the group; leading to the individual benefitting from the positive impact of attending Goldies sessions. The data suggests that generally, participants and session leaders make great efforts to make people feel welcome and believe that they belong, as well as allow people to feel comfortable to engage in the ways in which they wish to:

*"There was a lady who came in a wheelchair and one day she came and everyone sang happy birthday to her. She had tears in her eyes and said that this was the best thing she has ever done."* (Goldies participant, Wales).

*"There's a young woman who comes along and it was recommended to her because of a nervous problem she has. She was brought up by her grandparents, so she likes*

*older people. She was very nervous at first but now she line-dances. She was really down and now she feels comfortable with us.” (Goldies participant, Wales).*

*“There's one lady who comes along and doesn't sing. She says she just comes for the company but doesn't sing.” (Goldies participant, Wales).*

*“We also have people coming with carers but everyone talks to them and makes them welcome.” (Goldies participant, Wales).*

Goldies clearly has a beneficial impact on those who attend sessions. The growth of groups over time reflects that recruitment in ongoing and attrition is minimal. The inclusive nature of the groups and diversity within them, demonstrate that those who would potentially have barriers to initially engaging with Goldies, are still managing to attend the first session. Goldies do not just create opportunities for social interaction but also communities to which every member feels that they belong. With this in mind, Goldies could explore the facilitation of participants to consciously play more of a bridging role. Participants could be encouraged to spread the message through word of mouth and actively recruit more people to Goldies, helping to reduce barriers to access. Once people engage it is most likely they will continue to participate; as one contributor puts it:

*“When you start coming, you want to keep coming.” (Goldies participant, England).*

## **Participation**

### Why do people continue to come to Goldies sessions?

Contributors gave a range of responses as to why they attended, largely reinforcing the data presented from the questionnaires. Reasons included: getting out the house, love of singing, not being able to sing but that not mattering, makes you happy, feeling uplifted, friendship, enjoyment, socialising, laughter, the session leader, chance to forget about illness or disease and the music.

Some of the contributors' responses suggested a therapeutic reason for attending Goldies. This factor was not evident in the quantitative data, possibly due to contributors not overtly recognising it themselves. Some had experienced loss or other difficulties and attending Goldies had helped with this in some way:

*"My sister was taken ill and suddenly died. She was a great fan of the Monkeys' songs when she was a teenager and it was very difficult to sing those songs for a while but now, when we sing them, I think of my sister. That's one of the reasons I go."* (Goldies participant, Wales).

*"I come because I hate being at home and incapacitated. My partner is quite controlling and I find it hard to have time on my own as an independent person. Since my accident, I have had to have a stick and I can't get around like I did. As I said, I used to be in a choir but I can't get there any longer. Coming to Goldies means that I get to be myself for an hour, talk to my friends and have a laugh. X took me under her wing and looks after me. We all look out for each other. I love singing all the time."* (Goldies participant, Wales).

*"I have to say I think the session leader is incredible. We love X's sessions. I love meeting up with Y and even though there is a session near me, I like to come to this one to catch up with friends. Losing my husband last year had such an impact on my social life and together, Y and I have become more confident and outgoing since coming and meeting new people."* (Goldies participant, Wales).

*"My personal life has been so difficult and I have struggled to cope at times. I absolutely love singing and know that I have a good voice. I lose myself in the session and feel free to enjoy all the music. I appreciate when I am here, how different everyone is and how different everyone's problems are. We understand each other and care for each other. I wish more people would enjoy the benefits of the group."* (Goldies participant, Wales).

These accounts demonstrate the incidental therapeutic function of Goldies for some contributors, in helping with processing loss, building confidence and rediscovering self. The communities that derive from Goldies provide social support networks for participants, with significant personal benefits for contributors which assist in overcoming personal difficulties.

### Contributors' evaluation of Goldies

When asked what it is they liked about Goldies, responses often reflected what had been mentioned in the questionnaires but there were a few additions. Items included: the music, singing, takes you back to younger days, social events, friendship, meeting new people, socialising, bespoke song selections to suit ethnic minorities, enjoyment, dancing, having something to do, refreshments, games, the opportunity to be silly and childish, laughter, inclusivity, relaxed and friendly atmosphere, happiness, feeling uplifted and the session leader. The bespoke song selections for BME groups reflects Goldies efforts to cater for the needs of individual groups, in accordance with the Equality Act (2010).

When asked about what improvements Goldies could make, contributors consistently wished for sessions to be more frequent, excluding the group whose sessions were weekly. Every fortnight repeatedly arose as the optimal frequency for sessions. Contributors clearly look forward to attending Goldies, for some it is the highlight of their month, so it logically follows that contributors would wish to make the effort to attend more frequently. Contributors also requested that sessions be longer and one and a half hours arose as the optimal time duration:

*"It's good because you can talk to people and find out about other things to go to. If sessions are rushed, there isn't much time to chat but longer sessions would help this."* (Goldies participant, England).

Two reasons were given for this, the main one being that it provided more time to socialise. If sessions were scheduled more regularly, this may negate the need for

sessions to be longer or at least not as-long-as contributors currently suggest. It was also noted that some contributors felt there was too much talking during the sessions. It is understandable that Goldies is trying to provide the opportunity for as many people as possible to attend Goldies and therefore financial considerations may require length of sessions to be compromised in favour of breadth. However, there may be solutions which can be explored with individual groups. Some groups appear to be able to self-organise and arrange meet ups and social events outside and independent of Goldies:

*"It's the people. Some people don't see anyone all weekend and they come out to see people on Monday, it's important. Some people meet up on their own, develop friendships and that's brilliant."* (Goldies participant, Wales).

These groups tend to have an individual, who operates as a community mobiliser and leads this process:

*"X sends cards on everyone's birthday and organises events. She really makes it great and we have a community really."* (Goldies participant, Wales).

*"Every group needs someone like X, to make sure that everyone is involved. The lynch pin."* (Goldies participant, Wales).

*"We always stay for an extra hour after the session to drink tea and chat."* (Goldies participant, England).

*"One group runs itself and the session leader does it once a month....."* (Goldies participant, Wales).

Other groups may have the capacity to achieve this but may require some initial facilitation and suggestion by the session leader to enable this. There may be the opportunity to utilise time before or after the session at the venue or seek out another venue where social aspects of the group can continue, without the



requirement of a session leader. Groups who do not have well-established friendship groups may need a meaningful purpose to meet, which is where offering suggestions such as organising a sub-group to try and recruit more members, may be effective.

Additional suggested improvements offered were: more social events, days out and residential; the recruitment of more men; another song book (although it is understood that a new book has just been made available and this may not be known to these contributors); a wider age range and a more open layout rather than tables. Regarding layout, it is known that some sessions are run without tables. This raises the question of how ongoing feedback is sought from participants, good practice discussed and then shared by the wider Goldies team to be fed back to participants. Having an open layout may not suit all groups but the process of ongoing monitoring is one which would help Goldies ensure it is meeting its clients' needs.

#### Contributors' perceived benefits of attending Goldies sessions

Contributors were asked what the benefits of attending Goldies sessions were for participants. Many of the responses to this question described benefits directly relating to improved well-being, triangulating the quantitative data from the questionnaires. Responses included emotional and physical aspects of well-being. For example:

*"People we talk to after always say it gives them a lift; even for us with uncomplicated lives, it works for us too."* (Goldies participant, England).

*"It's a very uplifting afternoon, especially when you live on your own."* (Goldies participant, England).

*"Everybody goes away with a smile on their face."* (Goldies participant, Wales).

*"It's a feel-good feeling and it takes away loneliness."* (Goldies participant, England).

*"I've always had a bad cough but this has made my breathing better."* (Goldies participant, England).

*"It's good for your mental health. I'm on my own; it gets me out the house and I feel great."* (Goldies participant, England).

What is interesting here is how the responses often follow a thread from the benefit to the impact. There were a range of responses relating to cognitive, psychological and social benefits, which are frequently considered to have an indirect positive effect on well-being. Some contributors made this link themselves:

*"Sometimes you forget your own disabilities and you feel 25 years younger."* (Goldies participant, Wales).

*"For us coming from the Caribbean, it reminds us of the songs we used to sing in Jamaica when we were younger, so it brings us back to where we are now."* Goldies participant, England).

*"It takes your mind off your problems."* (Goldies participant, England).

*"You meet new people and make friends. If it wasn't for Goldies, I wouldn't have met X"* (Goldies participant, England).

*"The music helps you remember. It helps your brain."* (Goldies participant, England).

*"The songs remind you of something important."* (Goldies participant, Wales).

*"If you're feeling a bit low, a trouble shared is a trouble halved."* (Goldies participant, Wales).

*"You can reminisce and socialise, I just think it's great." (Goldies participants, Wales).*

Goldies sessions appear to provide a platform for participants to gain a wide range of benefits, some of these inter-related and complex, some wished for but also others additional to what people would have hoped for or expected. Some contributors highlighted the perceived benefits for others suffering from cognitive or physical disabilities:

*"Some people who have had a stroke and can't talk but when they start singing, they come alive." (Goldies participant, Wales).*

*"I see this lady, who must have dementia, who comes with her daughter and as soon as the music starts, she knows every word. I'm sure she used to come a while ago under her own steam." (Goldies participant, Wales).*

*"There's a girl who comes in a wheelchair and she only makes noises but she's trying to sing and I think she's enjoying it. Her mum is enjoying it too." (Goldies participant, Wales).*

*"For people with dementia, they choose songs and we sing songs which they remember. Even if they are not communicative, they'll sing and they'll remember." (Goldies participant, Wales).*

The sense of community that Goldies helps to facilitate, arose again in contributors' responses to the benefits of attending Goldies. This was not picked up by the questionnaire but contributors clearly valued feeling that they were part of a community, knew people and felt known:

*"We've got a wonderful community and I didn't know anyone when I first moved to the village." (Goldies participant, Wales).*

*"It's the community feel." (Goldies participant, Wales).*

*"I used to go round the town not knowing anyone...now I see Goldies people in Co-Op or in the street and stop for a chat." (Goldies participant, Wales).*

### Barriers and enablers

The issue to emerge as the most significant enabler or barrier to participating at Goldies sessions was transport. This issue was also significant in the evaluation of Goldies Cymru in 2016. Changes to local bus services, parking and deteriorating health with respect to being able to drive, were all factors in determining contributors' potential ability to attend sessions. The location of sessions was also a factor, especially in rural areas where sessions are more geographically spread out and public transport, not as widespread:

*"Its handy for us because we catch the bus now. That's the other thing, transport." (Goldies participant, Wales).*

*"I retired and saw the advert in the Metro and thought, 'I could do that because the bus stops outside'. I hated driving." (Goldies participant, Wales).*

*"I can get a taxi now as I don't want to drive." (Goldies participant, Wales).*

*"They changed the bus routes in Cardiff and now some people cannot attend because they are completely cut off." Goldies participant, Wales).*

*"It's not easy to access other sessions at all. I have one bus a day. There's another lady who has one bus an hour so she either gets there very early or very late." (Goldies participant, England).*

Cost of community transport and the weather were also identified as being factors which affected ability to access transport and thus, in turn, access Goldies sessions:

*“If the weather is bad it makes it difficult to get there on the bus.”* (Goldies participant, Wales).

*“The community bus is too expensive so now, those who can make it there, make it there and those that can’t, come by taxi.”* (Goldies participant, England).

One contributor however said that the low cost of attending Goldies sessions mitigated the cost of transport.... *“if we were providing community transport, more people could attend but the cost of the session is only £2, which wouldn't cover the cost of transport.”* (Goldies participant, England).

Some contributors had managed to circumvent this issue by arranging lifts between themselves, with those who could drive. This is a discussion that could be facilitated by Goldies; to find a process where people were able to offer lifts, without expectation or coercion, to support those who have issues with transport.

*“Transport. Some people can't come if they don't have a lift.”* (Goldies participant, England).

*“We are lucky because we have someone in our village that brings everyone together and takes us.”* (Goldies participant, Wales).

*“Transport is a problem for some. There's not enough time if you're setting up as well. Perhaps we could have a contact list to enable people to share lifts and pick people up.”* (Goldies participant, Wales).

As would be expected, carers were also viewed as important enablers for those that required them. As one contributor put it:

*"I can't get out on my own but my carer brings me regularly to Goldies. We make a whole afternoon of it and go for lunch and then a cup of tea afterwards. It's the best time of the month for me."* (Goldies participant, Wales).

Interestingly, health was only referred to twice in contributors' responses, once relating to mobility and the other to sleep. Given the identified issues with pain and discomfort, these were not discussed within the focus groups, potentially due to the personal and private nature of them. There was also some indication as to the reasons some people had stopped coming. One group in Wales now has up to 70 participants, with restricted space. Some participants outlined how four participants no longer came because it had got too noisy. This is a dilemma for Goldies, as they wish to be inclusive, as do their participants but this can also make sessions uncomfortable for those that do attend.

## **Wider Impact**

When considering the question of if their lives were any different since attending Goldies, a substantial number of responses outlined how important attending Goldies was for them, the significance it had in their lives and how much they looked forward to going. Some contributors rarely left their homes until they started attending and for some it provided respite and a necessary recharge. Responses covered a range of issues, highlighting some of the benefits outlined previously. As one contributor explains:

*"...it's changed because I'm my husband's carer, which is really hard but we come together and have something to talk about when I come back. It's so uplifting. Some days I don't want to go because I wake up and feel sad but then I get ready, get there and love it."* (Goldies participant, England).

For others, it had helped facilitate a much-welcomed friendship group and had affected relationships at home. For example: *"I feel much happier and my relationship has changed completely."* (Goldies participant, England).

*“One of my friends said, ‘you seem to know everybody.’ There are so many of us so you get to know a lot of people.”* (Goldies participant, Wales).

A few contributors framed the change to their lives in terms of the impact of Goldies on their overall mood and how important that was for them:

*“Yes it has. You might go down and have problems but by the time you go home, you feel quite happy.”* (Goldies participant, England).

*“I don't think you can feel miserable when you're there. You never feel miserable when you're there.”* (Goldies participant, England).

*“It has totally changed my life. It brings me joy and peace. I struggled to cope with understanding the loss of my husband and found it hard to find any happiness. Goldies takes me out of depression and has helped me immensely”* (Goldies participant, Wales).

Goldies had become a priority for some contributors, with them putting attending sessions above everything else:

*“Now I try to book any other appointments on other days, so I don't miss Goldies.”* (Goldies participant, England).

*“I make it a priority and put things off if it happens on Tuesday.”* (Goldies participant, England).

Some contributors described how attending Goldies had led on to other things, either through hearing about other clubs from others or providing the confidence and positive framework with which to view social activities:

*"Since coming to Goldies; it has opened other doors for me."* (Goldies participant, England).

*"Finding other places to go e.g. Friday club."* (Goldies participant, England).

*"I sing in a 'good afternoon' choir, which came out of Goldies, I think there are 11 of them now."* (Goldies participant, England).

*"It has definitely made me more confident mixing with people."* (Goldies participant, England).

*"It opens doors to other things, like friendship. We all look after each other."* (Goldies participant, England).

*"I have made friends that I can do other things with, like go to musicals."* (Goldies participant, England).

To ascertain the potential extended benefits to others and the wider community, contributors were asked if they thought whether anyone else benefits from them attending Goldies' sessions. Responses included family, friends and the wider community:

*"We sing in a community centre and when we are singing, staff and children will come in and listen because they love hearing the singing."* (Goldies participant, England).

*"We've got a nursery next to our room and the children always look through to see what the older people are up to."* (Goldies participant, England).

*"We did a session in an old people's home and they really joined in. When I came out of there I thought, they really enjoyed us and wanted us to go back."* (Goldies participant, England).



*"I sing to my husband when I want to annoy him." (Goldies participant, England).*

*"I tell my daughter about it, she loves to sing and I'm always telling her about it and how we have a dance." (Goldies participant, Wales).*

*"Sometimes people who come into the library will join in, even the children that come in, join in." (Goldies participant, Wales).*

One participant referred to the inter-generational project which took place in Wales:

*"We used to go to the school, what happened to that? It was wonderful to see the kids there and maybe some of them who didn't have a granny. We used to take photographs. There was one girl there who said she wanted a Golden Oldie! They would do an impromptu concert for us. They would be all self-conscious but I'd get them to dance with us." (Goldies participant, Wales).*

#### What if Goldies ceased to exist?

Contributors were asked to consider what the impact would be and what might happen, if Goldies sessions were no longer scheduled in their area. Responses reflected considerable loss to this proposition and a determination to maintain the communities and support networks that had been created:

*"It would be very sad." (Goldies participant, England).*

*"A lot of people would miss it. It would be terrible." (Goldies participant, England).*

*"We'd all cry but we would find something similar. I don't know what we'd do." (Goldies participant, Wales).*

*"It wouldn't stop because we'd have a petition and demonstrate. We'd have a huge protest. We'd try and keep it going."* (Goldies participant, Wales).

This reflects the significant importance that contributors place on Goldies in their lives, which is supported by the reported benefits of Goldies to contributors.

#### What more could participants do and what ideas do they have?

Some contributors offered a willingness to do more for Goldies but were not sure what they could do:

*"I'd like to do a bit more and I do what I can."* (Goldies participant, England).

*"I'd like to do more volunteering and I feel that we don't have enough opportunities to volunteer."* (Goldies participant, England).

Given the significance that Goldies has for them and the sense of community that it creates, it is understandable that people would wish to offer their time to support the charity and be involved in other ways. It must be remembered that whilst participants can be considered as recipients of a service, gaining benefits from what is delivered to them, they also contribute to that service in many ways. Contributors expressed being part of the Goldies community and there is clearly a lot of social capital within this group. Some contributors offered ideas as to how they could do more:

*"Some of the others might want to run the session with the session leader."* (Goldies participant, Wales).

*"Possible opportunities to befriend and demonstrate."* (Goldies participant, England).

*"I wonder if there is anything that could be done for the blind, because only a small percentage of people are totally blind. It would have been useful if I had had a tape or something to take away...."* (Goldies participant, Wales).

There were a few responses which noted the gender imbalance in Goldies groups. The absence of significant numbers of men within groups was a key finding from the evaluation of Goldies Cymru in 2016 and the gender ratio remains roughly the same now, as it was then. Contributors seemed keen to recruit more men, suggesting that it would be beneficial for them and for groups:

*"There are a lot of men who are very lonely and there is a real lack of men."* (Goldies participant, England).

*"One wonders whether we looked at what we do and where we meet, whether we could attract more men."* (Goldies participant, England).

*"There are a couple of chaps that come to our group and one is a real character and the other is in a band, so it's good."* (Goldies participant, Wales).

## Conclusion

Contributors demonstrated a genuine joy and appreciation for Goldies; valuing the sessions and the consequential benefits that attending sessions, brought them. The music, singing, comradery and sense of community were all valued highly by contributors, with clear benefits for mental and physical health and well-being.

### 5.3 Findings from Postcards

25 (n=25) postcards (see appendix II) were submitted from the sample of contributors from England and Wales. Contributors were offered the opportunity to respond, in an open format, to the questions: (i) 'what difference do you feel Goldies has made to you?' and (ii) 'why do you enjoy coming to Goldies?' The use of postcards was provided as an additional option/alternative to contributors; to capture thoughts, feelings and views that may not have been easily expressed elsewhere and ones which may have arisen in retrospect of the data collection events.

Responses were clustered into categories which had emerged from the data and the number of responses within each category counted.

Category	Frequency (f)
Well-being	10
Social aspects	7
Suggestions	4
Getting out	3
Opens doors	3
Look forward to it	3
Therapeutic function	2
Loneliness/social isolation	2
Session leader	2
Feel younger/reminder of years gone by	2
Accolades	2
The data collection event	1

The well-being category included the most number of comments ( $f=10$ ). Terms akin to 'being uplifted', 'spirits being raised' and 'happiness' were repeatedly used to denote a positive impact on well-being, attributed to attending Goldies sessions. This triangulates the data from the questionnaires and the focus groups. Social aspects of attending Goldies, including friendship and meeting people, contained seven

responses, again reinforcing the priority given to this reflected in analysis of other data. Of the four responses offering suggestions, three of these were for more social events to be organised by Goldies and for opportunities to meet up with other groups. Events such as the data collection events seem to be highly valued by contributors. The 'opening doors' category included 'making friends' with which to share holidays and arrange social events outside of Goldies, as well as engaging with the wider community.

Goldies being a vehicle for contributors to get out the house was referred to three times, as was responses relating to how much contributors looked forward to attending Goldies.

Two contributors offered personal stories relating to the therapeutic function Goldies had served for them, which would have possibly been difficult to express in the questionnaires or focus groups. One contributor offered:

*"Due to a fit of depression, I find that coming to join in I have been pulled out of myself and I love being here."* (Goldies participant).

Another stated: *"From bereavement I could not have done without Goldies. It has completely altered my life from depression to a relationship. All thanks to X [session leader]."* (Goldies participant).

These two accounts reflect how transformational attending Goldies has been for them. Goldies have provided a support network and uplifting experiences, resulting in significant and enduring positive shifts in mental health and well-being. These in turn, have led to notable changes in quality of life.

Two responses commented on loneliness or social isolation:

*"On a high, especially with all the romantic songs. Loneliness goes away for a while."* (Goldies participant).

*“Help relieve social isolation and a feeling of elation....”* (Goldies participant).

Categories comprising praise for session leaders, references to feeling younger/former times and general accolades for Goldies, contained two responses in each category. One response provided positive feedback on the data collection event itself.

24% of all the responses made direct reference to improvements in well-being. This is in addition to further responses which could be considered to reflect a positive impact on well-being. This most likely reflects the importance that the contributors, who chose to complete a postcard, place on this. However, the fact that postcards were usually completed towards the end of the events, after the questionnaires and focus groups which themselves focussed mainly on well-being, could mean that issues relating to well-being were more present in the minds of contributors than they would normally be. Nevertheless, the data supports the findings from the questionnaires and focus groups.

## 5.4 Findings from Filmed Interviews

Short interviews (n=8; nE=4; nW=4) were conducted with a small sub-sample of contributors who had volunteered to provide additional data in this way. They did this either in pairs or on their own. One video file was corrupted and not viewable.

It was considered valuable to present this data as summaries of each interview. Contributors often gave personal stories and reflections on what Goldies meant for them and presenting the data in this way, enables those stories to remain intact. The intention is to give voice to the contributors in this section, allowing them to speak for themselves as much as possible. False names for contributors and other people referred to, have been included in the summaries, to reinforce the personal nature of the data.

### Interview 1

Theresa described how attending Goldies provided an opportunity for her to have some quality time with her mother, who was reluctant to go on her own. This also provided respite for her father, who was her mother's sole carer. Her mother had problems with mobility and dementia but attending Goldies had a positive effect with regards to these difficulties. She explained:

*"....it gets mum out the house. She's a different person when she's there and the effect on her is incredible. She can't walk without wobbling but she's up and dancing. It's special memories for me. I enjoy it too. She'll go home and she remembers all the names and tells my dad all about it too..."* (Theresa).

She also outlined the positive effect that Goldies had for her in terms of the social connections that had been created and the accepting, informal nature of the sessions:

*"I can't sing but I get in with the best of them now. If I'm out of tune, it doesn't matter. You feel joyous. You don't have to remember the words; it's easy. I have also met some lovely ladies." (Theresa).*

In line with previous findings, Theresa wished for the sessions to be longer or for there to be another one in the month.

## Interview 2

Sally began by focussing on the social benefits for her:

*"I've met new friends and people who live locally. It's a community effect and you meet people around. Everyone is friendly and I see them outdoors." (Sally).*

Sally also had some words for anybody who was considering coming to Goldies for the first time:

*"Come along and have some fun. You don't have to sing. If you feel lonely or depressed, it's a chance to get out the house." (Sally).*

In a similar way to Theresa, Sally also comes with her mum, who has dementia. Attending sessions clearly has a positive effect on her mental health and her mum's dementia. Sally also values the social connections Goldies has given her and her mum:

*"I come with my mum who has got dementia, so it's something we enjoy together. We come out singing and we look forward to coming every month. We see people out and about and they say, 'how are you today?' It helps with my mental health. I have poor mental health and so it really benefits my mother. They are songs she knows and she doesn't need to see the book, she just carries on singing. They are songs I know as a child. Our moods are better when we leave. It's a lovely thing for us to do together. It's not a dementia group and it's not a choir, it's a relaxed sing along*



*and it's lovely. We love it and it's suitable for everybody over the age of 40.... and the lonely.... and people who are depressed.” (Sally).*

### Interview 3

Mary talked about the positive effect Goldies had on her and other participants', particularly those with dementia who were more animated in Goldies than in other activities. She also describes the lift in her mood and the benefit of more social connections:

*“You meet new people, you have a really positive vibe when you come out of the session; everyone loves it. Even if people are down, they come along and they enjoy it. I'd say just how positive it makes you feel. We have an activity every week and Goldies is one of those activities. They just can't wait to get that positive vibe that singing gives you. We have a lot of people with dementia and they might not say anything at other sessions but at Goldies they sing their hearts out.” (Mary).*

Mary continues to demonstrate the value she places on the opportunity to meet people, which extends to beyond the session. She also values the opportunity to be able to do things for others.

*“Meeting people and doing something for somebody else. I absolutely love it. I meet people I would have never met otherwise. I meet people out shopping and it's lovely to be able to do that. What a fabulous team you all are. It's so nice to have that positive attitude. Everyone really enjoys it.” (Mary).*

### Interview 4

Martha and Clara had both lost their husbands and intimated how Goldies had helped cope with this loss. They also described how Goldies had provided a platform for them to self-organise other projects:

*"I lost my husband, it's the best thing I could have ever done. I had just moved to Clevedon. The first thing you need to do is have company rather than draw into yourself."* (Martha).

*"I also lost my husband."* (Clara).

*"A friend and daughter helped us to come. From that group we formed another group, about 75% of us, the 'Chatter Ladies'. We meet once a month on a Friday. No men though."* (Martha).

Clara goes on to describe the surprising outcome of a wider social circle:

*"I'm meeting a lot more people. I've lived in Clevedon all my life but now I have a wide circle of friends. I didn't think it would change me but it has. I feel so great afterwards."* (Clara).

Martha points out the low numbers of men attending Goldies and offers some suggestions for how to recruit more:

*"There's a lack of men. So many men that are lonely, that have perhaps been left. If somehow we could reach out to them and bring them in; I'm sure it would be helpful to them. More-often-than-not, they tend to come with their partners. A three-monthly newsletter, perhaps dropped into men's fellowship meetings could do it. Getting a newsletter would help enormously.... and suggestion boxes."* (Martha).

## Interview 5

Wendy and Joyce talk about bereavement and how valuable Goldies was for helping with loss. They also describe how Goldies uplifts them in body and mind, how they now have more friends and express a desire for Goldies to continue:

*“For me it [Goldies] was recommended by a friend....” (Wendy).*

*“for me it was an advert that came through the door.” (Joyce).*

*“We’ve got so many friends now; it’s lovely. I came to Clevedon in 2002... to me it was important to meet new friends. I lost my partner and it was five years after. I liked to do mixed things and I was looking for something different.” (Wendy).*

*“My friend said it was a lifeline when her husband had died. It was her connection with the community. She goes to two sessions now.” (Joyce).*

*“... lots of laughs, lots of fun. We know each other so well. Friendship and well-being. You feel different and lively after a session. Your body feels different... it makes you happy. Let’s hope we get more funding for more of this.” (Wendy).*

#### Interview 6

Barbara articulates just how much she enjoys not only being a participant at Goldies but also being an active bridger. The opportunity to recruit, help and support others is something she clearly values a great deal:

*“I’ve brought lots of people and the group has become bigger. I like to encourage people to get out the house, even if it means knocking on their doors.... so in one way, me coming has helped other people come. It’s important to encourage yourself to do something and help other people to come. It broadens your horizons. We have a community but now I have another community.” (Barbara).*

Barbara also had something to say about recruitment and words for people who were considering attending:

*“I’d say just come the once, you’ll be hooked. I think the men struggle more because not a lot of men come. We’ve had some men but they’re sadly now deceased. I’d say*

*just come the once, if I know you, I'll come and get you and we'll go together on the bus. A lot of the people who I brought, said it was the best thing they ever did."*  
(Barbara).

Barbara went on to outline what she liked about Goldies and her active role in supporting the community:

*"[I love] the singing. I'm not a good singer but I love to sing. I saw it advertised in the Metro and I thought, 'I could catch the bus just outside.' I can say we are not a choir but I love the singing... and we dance. I also help out with the teas and we always remember when it's someone's birthday. We like make a fuss of people who live on their own, it's really nice."*

To conclude, Barbara had a suggestion regarding the voluntary donation:

*".... It's a bit unclear. You either pay a fee for the session or it's a donation but to say '£2 donation' is confusing. A donation means you put in what you can, it should be one or the other."* (Barbara).

### Interview 7

Margaret and Gloria cover a range of topics; from the significant positive effect Goldies has had on their lives, their well-being, bridging and bereavement through to offering suggestions as to how Goldies could improve:

*"It's changed my life in a big way and has had a big effect on my life. I'm more confident, able to go out on my own, walk about and able to meet lovely people. I had trouble with my skull and my legs but I'm more confident now. I get enjoyment from it, it has lifted my spirits and it's put me back on course. To be able to bring people into it and get them to realise what they are missing has been great. You get to meet friends and not just for the day, it goes forward and forward and you meet in different places."* (Margaret).

*"... for me, after bereavement, I was on the road to a bit of depression. I came the first time... it uplifted my soul. It's mainly the people. If you can get together with people. Everyone is the same. I can't wait to get here, it's ridiculous. I'll go out early because it gets me here quicker. It makes a difference to a lot of people's lives. We have told other people and it's getting bigger, we need bigger rooms. Maybe two sessions a week would be nice. I've always sang for many years. It's like a charabanc, where people used to sing on the bus. So now, we'll go on the bus and we'll sing on the bus all the way back. Wow, what medicine! Uplifting..... everything. A tonic and everyone in that room will say the same thing." (Gloria).*

Margaret went on and expressed just how much Goldies means to her and how much she wished to share this with others:

*"The big events were fabulous. Amazing. Love it. It's almost like 'bring it on!' We can't wait to have this excitement for life again. It does so many things. It's the people that put it on for us, how wonderful. We've been blessed today. They have all made such a nice effort for us. It's OK to be silly, that part of your growth., it's part of your learning. It does make a big difference. That's how it comes across, as a 'saviour'. A lot of people have depression and if that can help somebody, then wow, that's something. I'll sing for people outside my back doors that don't have somebody and I'll sing to them, because it gives me so much." (Margaret).*

Margaret also had some words to share for people who may be considering coming to Goldies and expressed a willingness to act as a bridger:

*"I know people have a lot going on in their heads and can be unnerved about it but I'd say, 'well if you meet someone along the way, like on the bus'... and I do it because I know there's so many lonely people out there. I'd say, 'if you want me to meet up with you and go for a coffee' and start that way. It works for me and loads and loads of people, even in the village. If I knew a person that wanted to start and they lacked confidence, I'd say, 'meet me outside and I'll take you in and before long,*

*you'll be talking to everyone, just like me. You can have a good laugh. It makes a difference to everybody; it has to us."* (Margaret).

Gloria touched on the therapeutic effect of singing after her bereavement and made a suggestion as to how Goldies could improve:

*"Happiness. I always feel happier than when I came in. After you've been left alone.... after I've sang, I just feel great. I go out and talk to people, who don't always want to speak to me. I just don't want it to stop. Two sessions a month instead of one would be good. How good it is that we want more."* (Gloria).

To conclude, Margaret outlined her willingness and capacity to share the joy and benefits she receives from Goldies, with others:

*"I've got a group at the bus stop. Once we've done our shopping, we all sing and they all benefit too. There's not much in life that can make people happy but singing does it. There's one out there who is 86, but she can't wait to get here. It's magical, absolutely magical. It's a real zest for life. It changes everybody. It gets it out and helps you breathe."* (Margaret).

## Conclusion

All the contributors in the interviews expressed genuine joy and appreciation for Goldies. The benefits referred to were varied and plentiful and as with previous data, covered many aspects of well-being, including benefits for mental and physical health. For some, attending sessions and gaining the social networks Goldies provides, had enabled a significant positive transformation to their lives, lifting them out of depression and supporting them to cope with the loss of their partners. Some described how Goldies had led on to other things. Contributors also shared a desire to act as bridgers or had already been performing this function, helping others to access the sessions with knowledge of the barriers they may be experiencing and

wanting others to also experience the benefits they had received. Some contributors were carers as well as participants, enabling close family members to access the sessions, who wouldn't be able to otherwise. This not only provided respite for the main carer but also quality time with their loved one. Some contributors also provided constructive suggestions, for how their sessions could be improved or how the service could be developed.

## Final Conclusions

### 6.1 Who are Goldies' beneficiaries?

Goldies has experienced considerable growth since the evaluation of Goldies Cymru in 2016. They are now delivering over 200 sessions, employ over 60 session leaders and cover a wider geographical area over England and Wales. They continue to actively widen participation by delivering bespoke sessions to marginalised groups, such as: BME groups, dementia groups and people with learning difficulties. These take place in a range of accessible locations, including public spaces such as libraries, community centres, cafes, church halls, football clubs and more recently a pub, through to private spaces such as sheltered accommodation and nursing homes. Goldies are reaching more people and the participant population are more diverse. The latest intergenerational project, 'Back 2 School', is run in collaboration with comprehensive schools, providing shared experiences for not only the Goldies target population of older people but also pupils, their family members and staff at the schools. The sessions promote understanding and acceptance between the generations.

Whilst older people are the target group and thus the primary potential beneficiaries of Goldies sessions, the charity has a culture of inclusiveness, which is not just promoted in marketing literature but actively enabled by the wider Goldies community of admin staff, session leaders and participants. It is a challenge to convey the lived experience of Goldies in any printed form as words do not do it justice. The message however is that everyone is welcome and there is clear evidence to support this claim, as reports by participants indicate the lengths people go to and/or are prepared to go to, to make people feel welcome. Goldies do a great deal to engage a wide diversity of participants who come to sessions after hearing about Goldies from a variety of sources. However, it is known that barriers to participation exist for older people considering coming to Goldies but once they



manage to overcome these and attend for the first time, they continue to attend. Transport is identified as a major factor, affecting people's ability to attend.

The question of how to engage those that are hardest to reach, remains. Participants still tend to be female, with participants aware of this gender imbalance themselves. Their interest in addressing this reflects the positive perception of more men being in groups and the potential benefits to men; if only they would come. Goldies participants themselves, knowing not only the barriers that some people may face but also the significant benefits that attending Goldies can offer, may be a potential solution to seek out the hardest to reach and provide the necessary support to enable people to engage. A substantial number of participants have informally provided this bridging function or would be willing to do so, acting as a conduit to facilitate engagement of potential new participants. Participants wish to have the opportunity to do more for the charity.

A sizeable proportion of participants have issues with mobility and experience pain and discomfort and a high proportion engage with primary health care. Despite this, they still attend and no comments about issues regarding accessibility, were present in the data. The benefits of attending for participants, clearly outweighs the costs; so much so, they clearly desire sessions in their area to be scheduled more frequently and to last longer. Comparisons of age data with the evaluation of Goldies Cymru in 2016, shows that the Goldies participants are getting older; suggesting that people tend to keep coming until they are physically incapable of doing so. The community that Goldies creates, supports people in being able to continue to attend and remain active for as long as possible.

In addition to participants from the target population, there is an extended wider network of beneficiaries to Goldies activity. Participants will often continue singing in public spaces after their session has ended, energised from the experience and promoting a positive view of ageing. Some sessions are held in public spaces, with the infectious energy having a positive effect on all those who are there. Carers, in a supporting role, also report having positive experiences from attending and there is

anecdotal evidence to support a positive benefit for the session leaders too. In addition there are reports of participants sharing their experience of Goldies with partners, family and friends, singing and conveying the joy they experience from attending.

## **6.2 What are the benefits of coming to Goldies?**

Participants rate Goldies very highly and for many, it is the highlight of their month, giving them a reason to leave their homes. Participants love Goldies. Some prioritise attending their scheduled session over everything else; reflecting the considerable value that participants place on attending and not missing a session. The positive impact of Goldies on multiple aspects of participants' well-being is considerable, evident in all the data sets in this evaluation and participants are aware of this. The energy of session leaders is instrumental in facilitating this. The social connections and sense of community that Goldies creates is a highly-valued element. It has an effect beyond the sessions themselves; with participants benefitting from enduring friendships and a sense of belonging; opening doors to other social activity. Social networks also function in a supportive role, helping people with bereavement and poor mental health. For some, the extent of this has been transformational and has fundamentally changed people's lives for the better.

The function of singing communally and experience of the music, without fear of needing to be of an expected standard, was also greatly valued by participants. This also had a notable impact on both their psychological and physiological well-being, reflecting the purported benefits outlined in the review of academic literature. Singing and music also acted as a form of reminiscence therapy, having a marked positive impact on participants suffering from dementia. Participants expressed a significant positive change in mood, which endures over time, from attending Goldies sessions. The callisthenic dance routines developed specifically for older people with limited mobility and other dance routines which seem to be an increasing element of sessions, provide enjoyable physical exercise for participants.

Goldies participants are less lonely than the general older people population from which they are derived. It can be argued that older people who choose to attend Goldies are potentially less lonely and more attuned to seeking social connections than the general older people population. However, Goldies are engaging with groups, who are considered at high risk of loneliness. The qualitative data reflected the extent to which attending Goldies had helped people feel less lonely. The evidence to suggest that Goldies not only reduces the incidence but also the prevalence of loneliness and social isolation, is very convincing.

## Recommendations

It should also be noted that any recommendations are the opinion of the author or participants and should be considered in the 'spirit' of the project and the direction in which it is headed. Items suggested may not necessarily fit with the ethos of Goldies or may not be possible due to limited budgets or other considerations. However, it is hoped that they will be points of discussion to be considered by the board of trustees and the management team.

Recommendation or Issue	Actions/comments
1. Quarterly Newsletter	<ul style="list-style-type: none"> <li>• Participants would value the availability of a quarterly newsletter.</li> <li>• A sub-committee of participant volunteers could be created to be involved in the co-production of the newsletter, providing an opportunity for them to be involved with Goldies, in a different way. Pots of funding are likely to be available to support co-production with citizens, especially when it addresses social isolation and loneliness.</li> <li>• The newsletter could share news of groups and events across England and Wales, giving voice to participants and connecting the wider Goldies community.</li> <li>• It could be used as a marketing tool; including personal stories and individual profiles of participants; the barriers and difficulties they have faced; the journeys they have been on and the benefits of attending sessions.</li> <li>• Male participants could be profiled in the newsletter, as a way of appealing to and recruiting more men to groups.</li> </ul>

	<ul style="list-style-type: none"> <li>• Good practice and innovations in groups could be shared, e.g. the 'Chatter Ladies' and lift sharing.</li> </ul>
2. Recruitment and 'bridging'	<ul style="list-style-type: none"> <li>• Emphasise the importance of 'word of mouth' recruitment and important befriending and support role, some participants may wish to play.</li> <li>• Explore how taster days are run and if participant volunteers would be willing to support these events. Some participants may wish to demonstrate Goldies sessions at other public events; raising awareness, promoting positive views of ageing and supporting the recruitment of new participants.</li> <li>• Ensure marketing material shows a range of ages, genders and diversity of participants, using 'Goldies' rather than 'Golden-Oldies'.</li> <li>• Ensure marketing materials emphasise: the welcoming atmosphere of sessions, potential barriers people may have, case studies of people who overcame these and articulate the benefits that participants gain from attending.</li> <li>• Include what participants say about Goldies from this report, in marketing material.</li> <li>• Explore ideas to promote the actual experience of Goldies in film, either by commissioning a short film to be made and/or a piece on local TV.</li> </ul>
3. Transport	<ul style="list-style-type: none"> <li>• Session leaders could initiate discussions about the possibility of lift sharing within groups. Having a sense of who drives and who is willing to provide lifts to others, could help reduce barriers to participating.</li> </ul>

4. Session structure	<ul style="list-style-type: none"> <li>Consider the possibility of lengthening sessions to an hour and a half. If this is not possible, session leaders could facilitate discussions to provide further socialising before or after the session, at the venue itself or somewhere nearby.</li> <li>Consider the possibility of scheduling sessions every fortnight for those that currently have sessions every four weeks. If this is not possible, explore ways to enable participants to self-organise sessions for themselves, as is being done by some groups.</li> </ul>
5. Social Events	<ul style="list-style-type: none"> <li>If possible, organise more social events, including those which bring participants from different groups together, such as: 'the big sing', movie 'sing along' trips or visits to musicals etc. Sub-groups of participants could be created to co-ordinate this activity.</li> <li>Explore the possibility of organising community fundraising events, to support those participants who wish to volunteer and help more. Community fundraising could also provide additional funds to enable the group sessions to be longer or occur more frequently.</li> </ul>
6. Ongoing monitoring and feedback	<ul style="list-style-type: none"> <li>Provide a structure to allow participants to provide ongoing feedback with a process to feedback to them.</li> </ul>

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## Appendices

### Appendix I - Questionnaires

#### Questionnaires - Participant Consent Form

Please tick boxes

Have you understood the information about the questionnaires? ☐

Have you had an opportunity to ask questions about the questionnaires? ☐

Have you received enough information about the questionnaires? ☐

Do you understand that you are free to withdraw at any time,  
without giving a reason? ☐

Do you agree to complete the questionnaires? ☐

\_\_\_\_\_  
Name of participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Has the participant received any help in completing the questionnaires? If so, please provide details.

\_\_\_\_\_  
Name of person assisting  
in completing the questionnaires.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Role and/or relationship to participant.



## PART I

## General Questionnaire

- 1      2      3      4      5      6      7      8      9      10

- |    |
|----|
| 1. |
| 2. |
| 3. |

- |    |
|----|
| 1. |
| 2. |
| 3. |

-

- 5) On a scale of 1 - 10, how do you normally feel **BEFORE** a Goldies Session?

*(circle one: 1 = low, 10 = high)*

1      2      3      4      5      6      7      8      9      10

- On a scale of 1 - 10, how do you normally feel **AFTER** a Goldies Session?

*(circle one: 1 = low, 10 = high)*

1      2      3      4      5      6      7      8      9      10

- 6) Please say why you think there is a difference, or not, to how you normally feel before and after a Goldies session.

## PART II

Please indicate for each of the statements below, the extent to which they apply to your situation, the way you feel now. Please circle the appropriate answer.

### 1. *I am content with my friendships and relationships*

Strongly agree      agree      neutral      disagree      strongly disagree

Prefer not to answer

### 2. *I am able to meet people with similar hobbies or interests*

Strongly agree      agree      neutral      disagree      strongly disagree

Prefer not to answer

### 3. *I meet socially with family and relatives as often as it suits me*

Strongly agree      agree      neutral      disagree      strongly disagree

Prefer not to answer

### 4. *My relationships are as satisfying as I would want them to be*

Strongly agree      agree      neutral      disagree      strongly disagree

Prefer not to answer

### 5. *I have enough people I feel comfortable asking for help at any time*

Strongly agree      agree      neutral      disagree      strongly disagree

Prefer not to answer

6. *I feel part of a community*

Strongly agree	agree	neutral	disagree	strongly disagree
Prefer not to answer				

**PART III**

Under each heading, please tick the ONE box that best describes your health TODAY.

**MOBILITY**

- |   |                          |
|---|--------------------------|
| I have no problems in walking about       | <input type="checkbox"/> |
| I have slight problems in walking about   | <input type="checkbox"/> |
| I have moderate problems in walking about | <input type="checkbox"/> |
| I have severe problems in walking about   | <input type="checkbox"/> |
| I am unable to walk about                 | <input type="checkbox"/> |

**SELF-CARE**

- |   |                          |
|---|--------------------------|
| I have no problems washing or dressing myself       | <input type="checkbox"/> |
| I have slight problems washing or dressing myself   | <input type="checkbox"/> |
| I have moderate problems washing or dressing myself | <input type="checkbox"/> |
| I have severe problems washing or dressing myself   | <input type="checkbox"/> |
| I am unable to wash or dress myself                 | <input type="checkbox"/> |

**USUAL ACTIVITIES** (*e.g. work, study, housework, family or leisure activities*)

- |  |                          |
|--|--------------------------|
| I have no problems doing my usual activities       | <input type="checkbox"/> |
| I have slight problems doing my usual activities   | <input type="checkbox"/> |
| I have moderate problems doing my usual activities | <input type="checkbox"/> |
| I have severe problems doing my usual activities   | <input type="checkbox"/> |
| I am unable to do my usual activities              | <input type="checkbox"/> |

**PAIN / DISCOMFORT**

- |                                    |                          |
|------------------------------------|--------------------------|
| I have no pain or discomfort       | <input type="checkbox"/> |
| I have slight pain or discomfort   | <input type="checkbox"/> |
| I have moderate pain or discomfort | <input type="checkbox"/> |
| I have severe pain or discomfort   | <input type="checkbox"/> |
| I have extreme pain or discomfort  | <input type="checkbox"/> |

**ANXIETY / DEPRESSION**

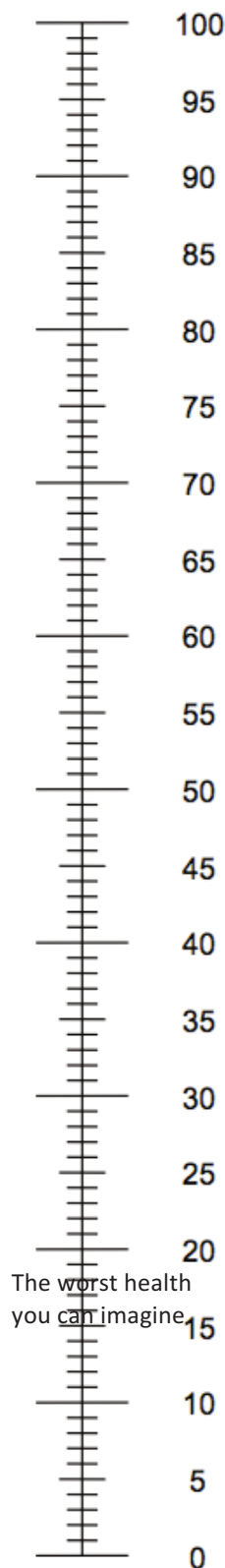
- |                                      |                          |
|--------------------------------------|--------------------------|
| I am not anxious or depressed        | <input type="checkbox"/> |
| I am slightly anxious or depressed   | <input type="checkbox"/> |
| I am moderately anxious or depressed | <input type="checkbox"/> |
| I am severely anxious or depressed   | <input type="checkbox"/> |
| I am extremely anxious or depressed  | <input type="checkbox"/> |

The best health  
you can imagine



- We would like to know how good or bad your health is TODAY.
- This scale is numbered from 0 to 100.
- 100 means the best health you can imagine.  
0 means the worst health you can imagine.
- Mark an X on the scale to indicate how your health is TODAY.
- Now, please write the number you marked on the scale in the box below.

YOUR HEALTH TODAY =



**PART IV**

**Have you used or visited any of the following services in the last three months?**

Please tick (☑) either Yes or No for each statement

	Yes	No
Day care	<input type="checkbox"/>	<input type="checkbox"/>
Local authority arranged home care or home help	<input type="checkbox"/>	<input type="checkbox"/>
Privately arranged home care or home help	<input type="checkbox"/>	<input type="checkbox"/>
Lunch club	<input type="checkbox"/>	<input type="checkbox"/>
Meals on wheels	<input type="checkbox"/>	<input type="checkbox"/>
Dial-a-Ride or other transport service	<input type="checkbox"/>	<input type="checkbox"/>
G.P. (General Practitioner)	<input type="checkbox"/>	<input type="checkbox"/>
District nurse, health visitor or other nurse	<input type="checkbox"/>	<input type="checkbox"/>
Occupational therapist, physiotherapist, speech or other therapist	<input type="checkbox"/>	<input type="checkbox"/>
Stayed overnight in hospital	<input type="checkbox"/>	<input type="checkbox"/>
Social worker or care manager	<input type="checkbox"/>	<input type="checkbox"/>

Any other community groups or activities (please state below)

**PART V****Finally, a little bit about you.****a. How old are you?****b. Are you male or female?**Please tick (☑)  
one box

Male

☐

Female

☐**c. Do you live on your own?**Please tick (☑)  
one box

Yes

☐

No

☐**d. What is your first language?**Please tick (☑)  
one box

Welsh

☐

English

☐

Other (please state below)

☐

**e. Do you consider yourself to have a disability?**

Please tick all (☑) that apply

- Physical disability ☐
- Learning disability and/or difficulty ☐

**f. Which of the following options best describes your sexual orientation?**

Please tick (☑) one box

- Heterosexual or straight ☐
- Gay or Lesbian ☐
- Bisexual ☐
- Other ☐
- Prefer not to say ☐

**g. What month and year did you first start attending Goldies sessions?**

(ask your session leader if you are not sure... mm/yyyy)

**h. How many Goldies sessions have you attended so far, not including today?**

(If you are not 100% sure, please give a best guess)

**i. What is your ethnic group?**

Please tick (☑) one box

<b>A. White</b> (☑)		<b>B. Mixed/multiple ethnic group</b> (☑)	
English/Welsh/Scottish/Northern Irish/British		White and Black Caribbean	
Irish		White and black African	
Gypsy or Irish Traveller		White and Asian	
Any other white background, write below		Any other mixed/multiple ethnic background, write below	

<b>C. Asian/Asian British</b> (☑)		<b>D. Black/African/Caribbean/Black British</b> (☑)	
Indian		African	
Pakistani		Caribbean	
Bangladeshi			
Chinese			
Any other Asian background, write below		Any other Black/African/Caribbean background, write below	
<b>E. Other Ethnic Group</b> (☑)			
Arab			
Any other ethnic group, write below			

***"Very many thanks for your co-operation. Please hand in your completed questionnaire. We will let your group know when the results are available."***


## Appendix II - Postcard



### Tell us...

We are conducting an impact study of our Goldies sessions to see how much of a difference we are making to the lives of our Goldies participants. We hope the difference is significant and feel that those who come to a Goldies session leave with a spring in their step and songs in their hearts. However, we can't go on hope and feeling alone so we have commissioned a researcher to help us put a bit more science behind what we do.

Part of the study is to gather anecdotal evidence and we'd like you to use this postcard as an opportunity to give us your personal feedback.



[www.golden-oldies.org.uk](http://www.golden-oldies.org.uk)  
Tel: 01761 470006



[www.goldiescymru.org.uk](http://www.goldiescymru.org.uk)  
Tel: 07796 714816

---

Please complete your feedback here and hand to your Goldies Session Leader or post directly to our head office. We won't be gathering any personal information on this card other than a 'Mr A' or 'Mrs H' and your age range.

Title: Mr / Mrs / Miss / Dr / Other: ..... (please circle)

First Initial: .....

Age range: under 50 / 50-59 / 60-69 / 70-79 / 80+ (please circle)

What difference do you feel Goldies has made to you? Why do you enjoy coming to the Goldies sessions? Please write your comments below:

Registered Charity No. 1121600  
Post to: Golden-Oldies, Unit 7, Fourth Avenue, Westfield Industrial Estate, Radstock, BA3 4XE

## Appendix III – Filmed Interview Questions



### Goldies Research Event

#### Filmed Interview Questions

1. How has your life changed since you started coming to Goldies?
2. What would you say to someone that hasn't been to a Goldies singing group before (that was thinking about coming)?
3. What do you get out of coming to Goldies?



## Appendix IV – Project Evaluation Outline

### Golden-Oldies – Project Evaluation (2019)

Dear session leaders, participants, volunteers and all others who will potentially be involved in this evaluation project. Included here is some information, to give you an outline of the evaluation project Goldies will be undertaking over the next few months.

#### **What is it?**

I, with your invaluable help, will be undertaking an evaluation/piece of research, with the aim of understanding the impact of Goldies on its participants and others associated with charity. The focus will be on how involvement with Goldies effects people's well-being.

#### **What is involved?**

We wish to collect data from participants by asking them to complete a questionnaire, which should take approximately 20 minutes to complete. We will also invite them to participate in one of the focus groups. The focus groups will probably be made of about 10 participants, with myself, a Goldies member of staff, session leader or volunteer leading the sessions. The focus group will be a semi-structured conversation, allowing participants to talk about their experience of Goldies.

#### **Where will it be happening?**

We were very conscious not to take up valuable singing time, so we are planning a couple of events outside of normal session times, one in England and another in Wales, where the data collection will take place. We are also planning a range of other activities and refreshments at these events, to hopefully make them enjoyable experiences for all. We may even manage a bit of singing too!

All the relevant information will be explained to participants at the event and questions answered. Participants will have the option to not be included in the data collection activity however their involvement will be greatly appreciated by Goldies.



### Who will be taking part?

Unfortunately, it isn't practical to include every participant and associate of Goldies, however it is required that this evaluation includes participants from Wales and England (50+ from each country). Myself, working alongside Sam Hannay and Rachel Parry, will select a few groups from England and Wales to be included. We will need a few volunteers to help us with collecting data from participants.

### Why are we doing it?

You may be aware that Goldies requires funds to run the singing sessions and Goldies has to bid for funding on a regular basis. Funding is never guaranteed and without it, sessions could not be put on for communities. The organisations, which allocate money too charities, often require some form of evidence that their money is being put to good use. This usually requires an independent evaluation and this is the task that I am undertaking for Goldies. What I hope to achieve is a sense of what works and why, what doesn't work, what improvements could be made, what people's experiences are of attending Goldies sessions and what sort of impact Goldies sessions have on people's lives.

### Who am I?

My name is Paul Marshall (MSc, PGDip, PGCE/FE, BSc) and some of you may remember that I carried out a similar evaluation of Goldies Cymru, reporting in 2016. I have substantial experience of conducting research and evaluations within the Voluntary, Charity and Social Enterprise (VCSE) sector, with specialisms in the social isolation and loneliness of older people, co-production, mental health and post-16 education. I also play the bass guitar and am a father of three children.

I hope this gives you sufficient background information but more information will be available as plans develop.

Many thanks,



## Appendix V – Focus Group Consent Form



### Project Evaluation 2019

### Focus Group Participant Consent Form

Please tick boxes

Have you understood the information about the focus group? ☐

Have you had an opportunity to ask questions about the focus group? ☐

Have you received enough information about the focus group? ☐

Do you understand that you are free to withdraw at any time,  
without giving a reason? ☐

Do you agree to participate in the focus group? ☐

Do you agree to allow us to record the focus group? ☐

\_\_\_\_\_  
Name of participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

## Appendix V – Evaluation Briefing Document



# Goldies Programme Evaluation

## Brief information about this evaluation

You are being invited to take part in an evaluation of Goldies. You should have been given an outline of what it is all about but please feel free to read below if there is anything that was unclear.

### Why are we doing the evaluation?

- Goldies would like a true picture of how the sessions are going and the possible impact on people's lives.
- It can lead to improvements.
- It can help to secure the funding required, to keep Goldies sessions going.

### Why have you been chosen?

- A selection of participants attending Goldies sessions in England and Wales (50+ from each country), have been invited to take part.
- We have attempted to invite groups to get the best representation of Goldies participants possible.

### What will happen if you take part?

- If you are willing to take part in the evaluation, all we ask is that you sign the consent forms, complete the questionnaires as fully as you wish and take part in one of the focus groups, where you will get the opportunity to chat about Goldies.
- Completing the questionnaires will take approximately 20 minutes.
- Take your time to understand what is required and complete as fully as you can.

## **Do you have to take part?**

- No, it's entirely up to you and will not affect your involvement in the singing group.
- You can choose to all, some or none of the evaluation but the more you feel able to do, the more it helps the evaluation and Goldies.
- If you do decide to take part in the evaluation, you are still free to stop at any time without needing to give any reason.

## **What will happen to all the information you provide?**

- All personal information collected during the evaluation will be kept strictly confidential and in accordance with the Data Protection Act (2018).
- Information will be stored anonymously and securely.
- No names will be used in the report.

## **Note for carers of participants with learning or physical disabilities**

- Please ensure that you enable the participant to respond and complete as many of the questionnaires as possible and that their opinion is viewed in the focus group, if they wish to express it.
- Please also sign the consent form stating that you have assisted in completing the questionnaire.

## **Contact for further information**

- Please feel free to ask any questions or if you need any further information.
- Also let us know if you have any concerns or comments about the evaluation process.

Alternatively, please contact the lead researcher, details below:

Paul Marshall

Email: [paulgmarshall@hotmail.com](mailto:paulgmarshall@hotmail.com)

Tel: 07970 821827

Please note that while Paul has been commissioned by Goldies to conduct this evaluation, he is working as an independent researcher/evaluator. Thank you.



## **Appendix VII – Focus Group Brief**

### **Golden Oldies – Project Evaluation 2019**

#### **Focus Group Brief**

##### **Information for Focus Group Leaders**

Thank you for agreeing to run a focus group at the Goldies event in either England or Wales. This document should contain all the information you need to be able to run a group effectively and ethically. However, if you should have any questions or concerns, then please do not hesitate to contact me directly on 07970 821827 (leave a message if I cannot answer your call immediately) or by email at [paulgmarshall@hotmail.com](mailto:paulgmarshall@hotmail.com).

##### **Purpose of the focus groups**

The project evaluation involves collecting data from Goldies participants in a number of ways; a questionnaire, focus groups, postcards and ad hoc 'media style' interviews. The questionnaire will generate some numerical data which will enable us to find out things like, how people rate Goldies and what degree of impact it might have had on people's lives. The focus groups allow us to explore particular issues, to hopefully find out why and in what ways Goldies might have affected people. It also allows people to have a voice and express what is important to them, in ways which may not be captured in the questionnaire. For this reason, the focus group schedule of questions are set out in a 'semi-structured' way. This means that whilst the main questions should be covered during the interview, topics can be explored in more depth as they come up. So, part of the 'art' of delivering a focus group is to facilitate an open discussion, allowing things to be explored, encouraging all members to contribute in a non-threatening way, whilst not allowing things to go too off tangent! Hopefully the information below will help you to do this and I hope it is a positive and interesting experience for yourselves too!

## Setting up the focus groups

- **Numbers:** Each group should have about 8-10 Goldies participants, although it may also include other people such as carers, group leaders, volunteers or other staff. We will be organising the groups on the day so you should have a group allocated to you, as well as a space in the venue to carry out the focus group.
- **Seating:** This should be arranged in a circle or as close to a circle as possible. The idea is to try and create a discussion between everybody, which you facilitate. So whilst you might find you are doing a lot of the talking to begin with, hopefully after a while you will find you are occasionally guiding the conversation with a 'nudge' here or there. More pointers on this follow below.
- **Ethics:** It is vitally important that the focus groups are conducted within ethical guidelines, to ensure everyone is aware of what is required of them, their rights and generally feel safe.

**Paul will go through the following during the introduction with the whole group:**

### Focus group schedule

- Thank everyone for potentially participating (they may choose to withdraw at any point, which is totally fine).
- Introduce yourself to the group and tell them a bit about yourself.
- If you do not know everyone's name in the group, ask everyone to fill out and put on a name label. Let everyone know that this is to help the discussion and not to single anyone out.
- We will have done an overview to everyone about the focus groups earlier, so refer to this and ask anyone if they have any questions. Hopefully either myself or someone else will be available as a 'floater' on the day, to attend to any questions in any group that arise, that you may feel you are not able to answer.
- Remind them the discussions are confidential – i.e. that they shouldn't talk about what was talked about in the focus group, outside of the focus group. This is to respect the opinions of others and their right to confidentiality.
- Remind them that the focus groups are anonymous. Whilst we ask people to fill in name labels to help the discussion, no-one's name will

be used in the report. While we might use quotes, the names will be changed so no-one reading the report will know who said what.

- Right to refuse and right to withdraw. Whilst we might encourage everyone to have a voice and be involved in the discussion, no-one should feel any pressure to answer any question they don't wish to and everyone has the right to withdraw from the discussion at any time, if they so wish.
- Tell them that you wish to record the discussion. This is purely so that things don't get held up with you having to take detailed notes and so that nothing important gets missed! Don't forget to start the recorder and check that it is recording before you start asking the questions!
- All data recorded from the focus groups will be kept in accordance to the law regarding GDPR, which means that it will be kept on one single password protected computer and deleted once the report is published and approved by Goldies. All participants also have the right to withdraw any of their particular statements, at any time, which will be taken out of the report. If they wish, participants have the right to see the full report after it is completed and withdraw any of their statements if they wish. If they wish to do this, they should make this known at the end of the session and provide details of the best way to share the report with them.
- Remind everyone that honesty is the best policy. Goldies are very keen to improve the service they offer and the only way they can do this if people give honest and critical feedback about the service. By all means 'sing' their praises (pun intended) where necessary but also mention things that could be improved.
- Finally, check that all this information has been understood by all the participants and if so, circulate the consent form for all to sign. If not, please go over any points that have not been understood. Remember that participants are quite within their rights to not take part, at any time.

## Ground rules

Whilst the consent form is going around the group, go over the essential ground rules. These need to be agreed with the group before the discussion can start and are listed below. It might be helpful to write these up on a flip chart if possible, so you can refer to them during the discussion if need be.

- *Respect others' opinions* – everyone is entitled to their own view, even if this is different to your own. This should be respected and everyone allowed to voice their opinion, without being made to feel uncomfortable.
- *Sensitive topics* – Some might come up during the discussion and people may express very personal experiences e.g. their experience of loneliness. Everyone should have the right to feel that they can do this without prejudice. If anyone feels that the discussion has brought up difficult feelings for them and would like some support with this, they are able to approach you after the session and highlight this. Discuss this with me after the event and we can agree on how to best address this and support the individual.
- *Confidentiality* – remind everyone that what people say is confidential to the group and won't be talked about outside the group except with the primary researcher (i.e. me).
- *Allow others space to talk* – whilst we are very grateful that some may have a lot to say, it is important to allow others to express their opinions too, so we can get as many ideas from the whole group as possible. Sometimes we may politely ask someone to allow others to chip in.
- *Don't put anyone on the spot* – there is no pressure to say anything at all but anything you say, could be very valuable and helpful to the research. Say that you will attempt to not put any pressure on anyone and no-one else should either. Sometimes someone will say something and you may ask for a bit more explanation to try and understand where they are coming from. People can always decline if they wish.
- *We appreciate them* – remind them that all their comments are really important to us and we appreciate anything

The Ground Rules are laminated on each table so you can refer to these if necessary during the discussion.



## Appendix VII – Focus Group Topic Guide



### Focus Group Questions

Here are the main questions to ask the group. They are separated into different topic areas. I have included some space to write some notes but this shouldn't be used to try and capture everything everyone says. You might wish to use this as a prompt for you, to note any points which you think are worth expanding upon later with the group or clarifying with the individual. The questions purposely go from 'easy to answer' to more difficult topics, ending with 'easier' topics again.

#### Engagement

1. How did you hear about Goldies and what made you decide to attend your first session?

#### Prompts:

- Did anyone else assist you in attending or encourage you to come?
- What things did you take into account, when you attended?
- How did you feel, before and after you attended your first session?
- Was there anything that worried you and how was this overcome?

2. Do you think you had enough information about what the sessions would be like before you attended? If not, what would have helped?

Prompts:

- Is Goldies what you expected it to be? Explain?
- Is Goldies for everyone? Why?/why not? Could it be?
- What could Goldies do to recruit more people to sessions?
- Do you think that anyone might not want to come to Goldies? Who and why?

## Participation

### 3. Why do you attend Goldies sessions and what do you think would enable others to attend?

#### Prompts:

- What do you like about Goldies?
- What could Goldies improve on?
- What do you think are the benefits of attending Goldies? How important is it to you? (benefits could include: Physical, Intellectual, Emotional and Social)
- Can you tell me about anything that affects your ability to attend?  
(health, cost, location/transport, individual factors, caring responsibilities, access)
- Do you have any ideas about what would help you, or others, to attend?
- What works or doesn't work? (e.g songs, group size, length of sessions, structure of sessions, location, venue...)

## Impact

### 4. How has your life changed, since attending Goldies?

#### Prompts:

- How is your life different, since attending Goldies?
- Has coming to Goldies led to anything else? Is anyone helping Goldies in other ways or participating in other groups or activities? Have friendships or relationships formed?
- Do you think that anyone else, besides those who turn up to sing, benefit from Goldies and how?
- What do you think would happen if Goldies stopped doing sessions?
- Are there any ways in which you would like to contribute more to sessions or Goldies as a whole?

5. Is there anything else anyone would like to add?

Prompts:

- Is there anything else anyone would like to add, that that they feel they haven't been able to already?

Finish off by thanking everyone again for their time. Be mindful of anything the discussion may have brought up or individuals and follow up with a diplomatic enquiry if necessary.

Appendix IX – Data Collection Event Schedule



**Schedule for the day**

10.30 – 10.50 am	Arrival and sing
10.50 – 11.15 am	Introduction to the Evaluation
11.15 – 12.00 pm	Focus Groups
12.00 – 12.45 pm	Lunch Break and Sing (+filming)
12.45 – 1.20 pm	Questionnaires
1.20 – 1.30 pm	Sing and close



## Appendix X – Focus Group Ground Rules



# Ground Rules for Focus Group

**Respect others' opinions** – everyone is entitled to voice their own views

**Be sensitive to and empathise with what others share** – allow people to express personal experiences without judgement, criticism or prejudice

**Confidentiality** – what is discussed in the group stays in the group

**Allow others space to talk** – it is important to get as many ideas from the whole group as possible

**No pressure** – no-one should be put on the spot but invited to expand on comments if they wish

**Appreciate contributions** – all feedback and comments are valuable to the discussion

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## Appendix XI – Statistical Analysis

z-Test: Two Sample for Means

	<i>Variable 1</i>	<i>Variable 2</i>
Mean	6.5	9.6796875
Known Variance	3.73228	1.2273
Observations	128	128
Hypothesized Mean Difference	0	
z	-16.15351259	
P(Z<=z) one-tail	0	
z Critical one-tail	1.644853627	
P(Z<=z) two-tail	0	
z Critical two-tail	1.959963985	