This evidence review is part of a series produced by Age UK, in order to provide evidence to underpin decision-making for people involved in commissioning, service development, fundraising and influencing.
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Engagement refers to the many different ways in which a ‘community’ is involved in, or participates in, aspects of an organisation’s activities.

This can be at various levels, ranging from being consulted about a plan or community needs, to very high levels of involvement, such as decision-making and agenda-setting.

There are many potential benefits for all concerned when organisations engage with older people:

• Organisations can learn from their service users (or potential users), ensuring that services provided are fit for purpose.

• They can improve relationships with the community.

• They can enhance their reputation and their influence by demonstrating their closeness to their target group.

• Organisations may find ways to reach groups who might not otherwise access their services.

• Client satisfaction can be improved.

• Engagement with service users can also provide staff with a greater sense of purpose and fuller sense of how their work impacts on the community.

• Many older people also want to engage and be a part of their community, and have a say in things that affect them.

• Older people involved can feel an increased sense of purpose, ownership or usefulness.

• Older people may also benefit by learning and developing new skills, increasing their confidence and enjoyment of life, and improving their health and wellbeing.

However, there is a general lack of published research and evaluation evidence on engagement, especially with older people. It is important that more of this is conducted to disseminate findings of what works well for all involved.

Engagement is most likely to be successful when:

• careful consideration and planning is given to overcome potential barriers to engagement for older people and organisations.

• all possible efforts are made to include those not normally included in consultations – those least likely to be heard or to participate.

• the process is genuine and cyclical in nature, meaning that the results of engagement are actually used to influence the organisation’s future actions and direction, while participants are informed about the impact of their contributions.

Key messages
1 Definitions

What is engagement? A scan of articles about the topic quickly reveals that the term means many different things. Another issue is that these three words: engagement, involvement and participation, seem to be used interchangeably in documents discussing a ‘community’ (for example, citizens, service users, as well as a population living in an area) interacting with an organisation.1

A common theme is that engagement is not only about listening, but also about working closely with, and taking action in response to, feedback.2 The thinktank SustainAbility defines engagement as ‘the process of exchanging information, listening to and learning from stakeholders – with the goal of building understanding and trust on issues of mutual interest.’3 One toolkit defines involvement as ‘any process by which ... service users and/or stakeholders can influence decision-making concerning the development, delivery, management, or evaluation of [the] service.’4 These definitions are perhaps too narrow, as they do not seem to include the community being involved more deeply with and participating in the organisation’s activities. There is a range in levels of involvement. Several toolkits refer to these ranges as ‘ladders’ (see, for example, Involve, Engage, Empower,5 or Open Minds6). Most of these ranges of involvement seem to be variations of Arnstein’s ‘Ladder of Participation,’7 in which lower ‘rungs’ are less participation, and higher rungs equate to more participation. Arnstein used this ladder as a way to describe the gradations in which citizens, who she calls the ‘have-nots’, are given more power by the ‘powerholders’. The bottom rungs are not participation at all, but ‘manipulation’ and ‘therapy’, designed for powerholders to ‘educate’ citizens. Next are ‘informing’ and ‘consultation’, in which citizens’ views may be heard, but not necessarily acted upon by the powerholders.

At the fifth rung – ‘placation’ – a few chosen citizens are asked to sit on a board, for example. However, their voice is small and can easily be overridden. Arnstein considered all of these rungs as ‘tokenism’ because the powerholders still retain rights to decision-making. It is not until the next higher rungs – ‘partnership’, ‘delegated power’, and ‘citizen control’, that citizens gain increasing degrees of real power and clout. The organisation no longer can make unilateral decisions.
As an example of how this ladder model has been reworked, the Lambeth Community Engagement Toolkit describes engagement levels as:

- informing: research community needs through interviews, surveys
- consultation: to inform decision-making
- involvement: actively engaging people e.g. in designing services, developing policy
- development: provide information and resources to a community to make its own decisions.

Another commonality among most documents is that genuine engagement is a continuous process rather than a one-off event. Engagement takes a shift in attitudes within the organisation, especially on issues of power in relationships with service users. Ideally, engagement should become embedded in working on projects from start to finish.

Birchall and Simmons theorise that participants can choose to become involved on three levels:

1. As ‘true believers’ who serve actively and often formally.
2. As people who are more of a ‘supporters club’ and participate less deeply, such as through voting or attending annual events.
3. As the ‘concerned mobilised’, who want to be kept informed and occasionally have their views consulted.

**Forms of engagement**

Most community engagement is about influencing decisions, rather than determining decisions and actions. Most commonly, engagement is represented as sending newsletters (which would be at the lower level – informing) and user feedback forms (which would be consulting).

Other informing activities can be advertisements, community meetings, and booths at events. Other consulting forms of engagement include focus groups, user panels, opinion polls, surveys, forums (that ask for feedback rather than decision-making), and suggestion boxes.

However, engagement can also mean participating more actively in decision-making, such as having community members participate as board members, in local forums and events, workshops and action groups, and as committee appointments. Another level of participation is to have community members involved with service delivery, as mentors, as researchers, and as mystery shoppers.

One type of engagement at the upper end of the ladder, and widely discussed in public policy and practice, is co-production. In public service delivery, this refers to having service users actively involved in their services, working with frontline workers using their skills, knowledge, and experiences, rather than as passive recipients. It aims to transform services by having users take control of defining and managing their care, in partnership with professionals.

Examples include Time Banks, Homeshare, Shared Lives, service delivery co-operatives run by service users, and Connected Care.
The media of engagement can take many forms as well: paper-based, through television or radio, via websites and email, over the phone, and in person. However, the key is to use several channels and consider the best media for the engagement desired, and not merely follow trends to have everything on the internet:

Technology should always be considered as a supplement to real-life relationships and face-to-face interactions and not a substitute. Communication technologies can enhance service experience in terms of efficiency and satisfaction, but only if such interactions receive a satisfactory response where required.27

The cyclical nature of engagement was stressed by the final Vocal Point report,28 which aimed to provide a system for gathering and presenting the views of older people on an individual basis via the Help the Aged Policy team to the general public via press releases and campaigns material, and to decision-makers in government. The aim was to close the loop by informing participants of the use to which their contributions were put via regular published reports. For further discussion of the Vocal Point scheme, see section 3 on page 12.

Various activities that others have discussed as ‘engagement’ include the following.

1 Participation
• Citizenship
• Civic/community action, including community groups and community development
• Formal volunteering
• Social inclusion.

2 Collective engagement in decision-making
• Policy and priority setting; involvement in research and community/population needs assessment
• Consultation through questionnaire surveys and focus groups
• Service-user involvement in service design and delivery
• Control over some elements, for instance, choice of activities, outings, menus
• Service review and evaluation
• Lay inspectors, mystery shoppers, older people recruited and trained as co-researchers and interviewers
• Organisational governance: user representatives on boards and committees.

3 Individual engagement, choice and control
• Person-centred planning
• Personal budgets/Direct Payments – control of budget, support for self-management and employment
• Involvement in personal service review and evaluation
• Co-production.
Our definition of engagement for this review

This review will narrow the field to discussing an organisation’s or agency’s engagement as ‘involvement with its citizens, clients, users, or other potential beneficiaries, who may be viewed as a “community”’. (This review will often use the word community as a generality.)

Because there are such variations in definitions, this review will use engagement, involvement, and participation interchangeably, and roughly follow Wilcox’s ladder of participation (based on Arnstein’s) and that of an NHS report on involvement.

- Informing: the most basic level – to provide information to the community.
- Consulting: to get community feedback.
- Partnership: involving community in making decisions and taking action.
- Ownership and control: the community takes charge of the agenda, plans, and action.

It should be noted that partnership is not necessarily ‘better than’ informing. Not all engagement should be at the partnership or ownership level. Sometimes informing or consultation are more appropriate. However, as most reported public engagement activities (e.g. by councils) are consultations, it is well worthwhile for other types of engagement to be considered.

This Evidence Review offers the theory behind engagement based on published research and offers a starting point for any individual community or organisation to read before they design or establish an engagement focus to the work or the interests they have.
2 Policy context

It is neither acceptable nor feasible to make assumptions about older people’s opinions and needs, particularly at a time when the population is ageing and public services need to adapt to older people’s lifestyles. An ageing population means there is a greater need for public and statutory authorities to work with older people in planning future services in order to ensure communities are fit for all ages, or in other words ‘lifetime neighbourhoods’. In order to achieve this, older people need to be engaged and their views and experiences mainstreamed in the design and delivery of facilities and services.

Within local government, there is a well-established tradition of community involvement and engagement. Many councils have decades of experience in finding ways to involve local people, whether it be helping to improve services, running facilities or influencing key decisions, such as budgeting and regeneration plans. Despite this, recent government policy has looked toward encouraging greater engagement at a local level, and local authorities have been expected to develop more strategic approaches to achieve it.

While voting patterns in recent years suggest a general apathy and lack of engagement, older people remain one of the most active voting groups. In the 2005 general election, voting was more common with increasing age: 75 per cent of people aged 65+ voted, as opposed to 37 per cent of those aged 18–24.32 Eighty-seven per cent of people aged 65+ feel they belong strongly to their neighbourhood, compared to 77 per cent of all adults in England.33 However, 30 per cent of people aged 65–74 and 29 per cent of people aged 75+ feel they can affect decisions in their local area, as opposed to 38 per cent of adults in England.34

The last Labour administration identified the case for investment to help champion older people’s voices at a regional level and to strengthen the network of local authority forums, to help ensure the voice of older people was heard, and informed regional and national policy and delivery.

The Administration aimed to work with the networks of older people’s groups and age-sector organisations, to promote effective dialogue about the services and policies which most affect wellbeing in later life.

One result of this strategy was statutory guidance to local authorities; ‘Creating strong, safe and prosperous communities’ (July 2008), which set out a new duty ‘to involve representatives of local persons in the exercise of any of their functions, where they considered that it was appropriate to do so’. It specified three ways of involving.

1 Providing information about the exercise of the particular function.
2 Consulting about the exercise of the particular function.
3 Involving in another way.

This guidance was in line with an increasingly explicit focus on the citizen during the Labour administration and, in particular, its emphasis on community engagement, empowerment and cohesion. It could be viewed as a forerunner to the Big Society that the coalition Government has promoted and the accompanying Localism Bill.
Other statutory duties that emerged during this time included Section 242 of the Consolidated NHS Act 2006, placing a duty on NHS organisations to make arrangements to involve and consult patients and the public in service planning and operation and in the development of proposals for changes. NHS organisations are also required to report on how people’s views have shaped the decisions they make when commissioning services.35

There is also the Equality Act 2010, which will provide a legislative base from which to promote age equality in the provision of public services. Among its key provisions will be an equality duty on all public bodies and those carrying out public functions.

Taken together, these various initiatives indicate that the Government expected local authorities to play a leading role in encouraging community empowerment and backed this up with a number of statutory obligations on them to develop engagement strategies. This expectation is passed on by local authorities and health service commissioners to service providers in the independent and voluntary sector through tender and service specification requirements.

**The Localism Bill and engagement**

Since the election in May 2010, the coalition Government has signalled a shift away from national and regional policy to the idea of decentralisation and localism. The Localism Bill, published in December 2010, sets out the Government’s aims to give greater choice to local people and their locally elected representatives to achieve their own ambitions. This is what Government is calling ‘Big Society’.

The Bill sets out a series of proposals that aim to achieve a substantial and lasting shift in power away from central government and towards local people. These include new freedoms and flexibilities for local government, new rights and powers for communities and individuals, reform of the planning system to make it more democratic and more effective, and reform to ensure that decisions about housing are taken locally.

The Bill will give communities more ways to be involved in local decision-making, including new powers for neighbourhood planning, the opportunity to call local referendums and the chance to bid to run local services. A localist approach should ensure that there are no barriers for people in later life to have a greater say in their neighbourhood and to shape the services they need.

Localism presents the chance to reduce the barriers that people in later life face in having a greater say in their neighbourhood and in shaping the services they rely on, particularly those suffering social exclusion.
**The Localism Bill and the right to supported engagement**

While the Localism Bill provides the framework for devolving power to communities, in order to achieve real empowerment, it doesn't set out any support mechanisms to help people engage. New community rights are not all simple to use. For instance, neighbourhood planning may involve setting up a neighbourhood forum, requiring specialists to advise on the plan and go through a local referendum. Similarly, communities can hold local organisations to account for their performance only if they have the capacity to interpret, often complex, published data.

**Wider policy on volunteering and civic engagement**

The Coalition has set out its aims to build a stronger civil society, stating that the voluntary and community sector is at the heart of its ambitions for the Big Society. It has identified three core components:

1. Empowering communities: giving local councils and neighbourhoods more power to take decisions and shape their area.

2. Opening up public services: the Government’s public service reforms will enable charities, social enterprises, private companies and employee-owned co-operatives to compete to offer people high-quality services.

3. Promoting social action: encouraging and enabling people from all walks of life to play a more active part in society, and promoting more volunteering and philanthropy.¥

We are also seeing moves by Government to increase the amount of time and money we give to good causes, whether by direct appeal to philanthropy in society or by more subtle attempts at behavioural change.¥

Anticipating a move towards greater civic engagement as a result of legislation should not disregard the active contribution to community life that many people in later life are already making. Community groups are almost totally dependent on older people’s contributions, but only a minority participate. Many more older people have something to offer, and something to gain from being more active in the community. Less than a quarter of people aged over 75 participate in formal volunteering at least once a month.¥
3 The case for engagement: why engage?

Benefits for participants
Many older people say they want to engage and be a part of their community, have a say in things that affect them, and make a contribution.39

For example, in a study on older people who had participated as researchers in various projects,40 Gough indicated that older people found working as researchers to be interesting and stimulating. They also valued the experience of meeting other people, sometimes even making new friends.

Older members on the Fife User Panels found that the benefits of being on the Panel included meeting other older people, discussing personal concerns, and feeling empowered by membership.41

In a meta-analysis of studies in which mental health service-users were involved in services as employees, trainees, or researchers, they similarly found benefits to be: greater satisfaction with personal circumstances, less hospitalisation, and more positive attitudes towards other service users.42

Formal feedback from the Vocal Point engagement project43 revealed the following benefits perceived by some older participants:

- ‘Someone who listened’; an outlet for opinions which otherwise would not have been voiced publicly (or, as one respondent put it: ‘It makes a change from shouting at the telly.’)
- A chance to tell people in positions of power what they thought they needed to hear.
- A sense of being useful to others on issues where respondents felt they represented widely held views.44
- An opportunity to talk to someone ‘other than these four walls.45

The opportunity to be involved in research such as the RoAD (Research on Age Discrimination) was commented on by members of the steering committee, which oversaw the collection and dissemination of the evidence of age discrimination presented by this research project.46

Not only did the RoAD project have a panel which described itself as a ‘reality check’ for their colleagues from the Open University and Help the Aged (now called Age UK, after merging with Age Concern in April 2009), but also RoAD project’s contributors were given feedback and the opportunity to contribute further via a regular project newsletter and a project website.

The newsletter and website aimed to encourage older people to act as a ‘panel’, submitting their comments on and experiences of age discrimination. These experiences were then presented anonymously (via ‘vignettes’ or composite case studies) in the final report. Thus, participants were encouraged to feel a sense of usefulness and also ownership of the research and its findings.47
Benefits for organisations

‘Services can sometimes suit the people providing the services more than the intended recipients.’48 This statement, from a council chief executive, demonstrates one of the core reasons that organisations and agencies may wish to engage with a community: to ensure that services meet user needs and are fit for purpose. Organisations can use this to improve relationships with service users, and improve the organisation’s profile.

Internal assessments49 show clearly that the Vocal Point scheme fell short of its target of providing a comprehensive, cyclical engagement system as a result of lack of resources, and insufficient access to, and coverage of, the older population. Results were patchy at best, but some of the information and views gathered could nevertheless be seen to have completed the full ‘cycle of engagement’ because the views of participants were published and promoted in several of its publications (Spotlight 2007 and 2008, One Voice)50 and in publicity for projects such as the successful ‘Just Equal Treatment’ (JET) age discrimination campaign.

Participative research with older people, such as the Older People’s Inquiry into ‘That Bit of Help’, is by definition a form of engagement. The project involved an older people’s steering group from the start, which summed up in 2004 its own central role in the Inquiry: ‘Unless programmes or strategies about older people have the fullest possible involvement of older people in their development, they are very unlikely to stand the test of time.’51

Not only can organisations use engagement to make sure their services fit a community’s needs, they can also find out about and improve customer satisfaction.52 This includes checking what people think about what the organisation is doing, identifying and solving problems, and helping people understand how they work, by involving local people more thoroughly.53 This was proven to be especially successful when senior service managers took part in consulting frail older people on their services. As managers, they were able to get direct feedback, become much more aware of their users’ daily lives and the service impact, plus directly resolve issues and problems.54

One example of benefits to organisations is provided by Taylor,55 who found that involving older people in research:

- ensured that the research is relevant and important to older people
- provided an understanding of older people’s perspectives
- ensured that research had a bigger impact
- challenged ageist assumptions.

Engagement with service users can also provide staff with a greater sense of purpose and fuller sense of how their work impacts on the community.56
**Benefits for the community**

When community members participate in engagement activities, a type of positive feedback loop can occur: through social interactions, individuals build social networks and trust in each other, which can in turn lead to them participating in more community activities, including different types than they originally became involved in, such as civic involvement.\\(^{57}\)

Birchall and Simmons\\(^{58}\) found that the longer people participate, the more they align themselves to a community rather than seeing themselves merely as individuals. They develop ‘shared goals, a sense of community, and shared values’. This can, over time, create community cohesion and social capital.\\(^{57}\)

A good example of a participative project designed and conducted exclusively by older people in a rural community is the Oxfordshire Get the Picture research and report.\\(^{59}\)

Among the aims of this project were to capture in words and pictures the everyday lives of a typical rural English community. This was partly to capture the memories of older people in West Oxfordshire, but also to pass on to the rest of the community their stories, wisdom and experience. Thus, the community had a valuable resource, which might otherwise have been lost and forgotten. Also the participants had a role to play in their community by researching and recording their results, as well as an end result in the form of an illustrated book.

Such engagement can have benefits for minority groups too, for example, the Opening Doors Project\\(^{60}\) of Age UK Camden, Westminster, which offers social events for older members of the Lesbian, Gay, Bisexual and Transgender (LGBT) community. These activities include film shows, lunches, and guided walks, but further activities have included counselling and buddy schemes for those shut in. This in turn gives a feeling of safety and belonging and encourages the members of the groups to be more proactive within the wider community, representing LGBT needs.

Some of the main contributors to the report were then able to pass on their experiences and findings to the British Society of Gerontologists’ annual conference\\(^{61}\) to practitioners and other older researchers, with a view to promoting similar research in other regions.
Communities can benefit from engagement by people having a shared sense of values and commitment.
Planning for engagement

The Department of Health’s ‘Real Accountability’ report stresses the importance of keeping in mind the fact that engagement, such as consultation, means asking for views on an issue before a decision has been made. Parker et al. carry this further by highlighting the importance of involving older people in every step of planning, carrying out, analysing, and disseminating research.

In fact, most of the articles surveyed for this report recommended including older people from the very beginning of the engagement process: they should have a say in setting the agenda and in ways to get other older people to engage with the organisation.

The Newcastle City Council engagement toolkit recommends that an organisation setting up an engagement scheme or activity should identify stakeholders, make a budget, and identify risks. It should also consider participant confidentiality and data protection, and have policies and procedures for involvement in place, e.g. for communication, promotion of engagement activities, ways to encourage involvement, and evaluating or monitoring involvement activities over time.

Reports for the Social Care Institute for Excellence (SCIE) and for the Joseph Rowntree Foundation (JRF), and a study by Tetley point out the need for organisations to realise that there may be conflicting views, opinions, and needs among community members, among staff, and between the community and the organisation. They recommend that a plan will have to be made on how these conflicts will be managed, and Schehrer and Sexton, in another JRF report, point out the importance of an organisation’s culture on community engagement, which, they say, is at the heart of how involvement actually plays out.

Organisations that claim to be open but actually are unwilling to respond to community input will have disorganised engagement practices and policies, and poor communication internally and with the community, which will lead to community disengagement. The Elbourne review stresses the need for engagement to be supported by strong leadership within the organisation.

Engagement activities should have ongoing monitoring and evaluation, in order for an initiative or organisation to demonstrate how it is meeting its objectives, and for future planning of activities. An important task from the outset is to determine what success will ‘look like’ and how it will be measured.
Who will be engaged?

Who is a representative of the community? \(^{77}\)

This is a complex and sometimes contentious issue, particularly where a small group is taken to represent a larger population. There are many older people who are active advocates for the rights of their peers. These are the easiest to reach. While engaging with this group adds weight and depth to an organisation’s understanding, it will not give a full picture of needs if these older people are the only ones involved. It is important to reach out to engage people who are not the ‘usual suspects’. \(^{78}\)

Organisations may choose participants based on a democratic mandate, as statistically representative of a larger group, or as ‘experts’ on the basis of personal life experience.

There are also older people in ‘hard-to-reach’ groups. For example, the Social Care Institute of Excellence (SCIE) identified four types of ‘seldom heard’ service users: homeless people with addictions, people from black and minority ethnic communities, people with communication impairments, and those with dementia. \(^{79}\)

One study examined engagement with these groups. \(^{80}\) An area highlighted was the importance of staff being sensitive to users’ needs and access issues. For example, for a participant with dementia, staff wrote notes about discussions with her, and gave her these notes to take home. Another example was taking things at the user’s pace, not trying to make them fit into a participation slot or schedule, and being flexible around what and how much the user wanted to participate, depending on how they felt.

The study noted that communication difficulties could be isolating, so effectively communicating with people with dementia encouraged them to participate in engagement activities.

Another hard-to-reach group is frail older people who live in their own homes. \(^{81}\) Mobility, sensory, and sometimes cognitive decline mean that they often find it difficult or impossible to travel to attend meetings or focus groups, answer written questionnaires, or participate in telephone interviews, which are all common engagement methods. Patmore \(^{82}\) found that these older people wanted to be interviewed in their own homes for consultations, and preferred that senior managers from organisations conduct the interviews.

Reasons they gave for having senior managers interview them were: the older people could show them the realities they faced every day; this would educate managers who are often insulated from users’ everyday lives; it would show care and concern if managers took the trouble to personally investigate the outcomes of their services; and if senior managers invested their own time, it showed this was not a token consultation.

Other hard-to-reach groups include people:

- with health difficulties, including dementia and mental health issues
- who are living in poverty
- who do not speak English
- who do not have friends or family and are socially isolated
- who do not know how or where to access services. \(^{83}\)

Difficulties increase when people fall into multiple groups, compounding the barriers for their participation.
Facilitating engagement

One useful way of thinking about this issue is the ‘Participation Chain’ model based on research by Birchall and Simmons. The links in this chain are factors that need to be strengthened and connected up effectively for successful promotion of participation. The links are resources, mobilisation, motivation, and dynamics. These are discussed in more detail below.

Resources

Both participants and organisations have resource needs for engagement. The most important to participants have been found to be: confidence to become involved; skills necessary to participate, such as public speaking and analysing information; and time. Skills and confidence can be built up through training, development and advocacy.

For organisations, resource implications to involving older people can include:

- social interaction time
- a familiar and convenient space for meetings
- covering care responsibilities of participants (e.g. spouses)
- transportation to and from meetings
- tools easily learned and used
- training in research methods (mentioned on page 22)
- time to build relationships with people and organisations
- financial rewards for participating.

Mobilisation

This is encouraging people to participate by offering issues that interest them, keeping a balance between social and more task-oriented activities, and ensuring that people get asked directly to participate.

Motivation

People need reasons to participate. These include both individualistic motivations, such as ‘having a say’ and learning, and more community-minded, such as shared goals and values.

Dynamics

These are formed by the interaction between participants and the organisation or agency. One of the biggest frustrations for participants is that their ‘involvement’ does not seem to lead to service improvement or any other responses. Older people want to be involved in projects that make a difference. They also want to be necessary and utilised, not just ‘tokens’.

They want to know what will happen and how the research will be used. Organisations can strengthen this aspect through communicating their own motivations, managing participants’ expectations, and providing feedback so that participants feel ‘listened to’. Participation needs to be meaningful.
Barriers and enablers
Barriers for older people
As mentioned above, important resources needed by older people to participate are confidence, skills and time. The lack of these are obvious barriers. For example, a lack of information about the topic or area for involvement can dissuade participation. However, there are many other potential barriers as well.

Organisation factors can be barriers. For example, processes and structures of an organisation can be confusing and challenging for people outside of it, which can lead to disengagement. Staff can give the impression of a lack of respect for older people. The culture and language used by staff may be different from prospective participants; not just English language or British culture, but jargon and ways of doing things.

There are practical barriers as well. Too much and/or too complicated paperwork for participating; too large a time commitment required; physical challenges such as visual, auditory, mobility and cognitive impairment; transport and other access issues; and timing of a meeting or event (many older people do not like to venture out after dark) are common examples.

A couple of less obvious potential barriers can be age and gender. Many people later in life don’t see themselves as ‘older’, so exclude themselves from activities overtly aimed at ‘older people’.

Older men may be more difficult to engage with by social service organisations than older women. Some specific barriers for older men are: having fewer social relationships and ties to the community; feeling a loss of identity tied to leaving employment; greater reluctance to seek assistance, especially from social service providers; greater difficulty accepting their declining health and mobility; and a feeling that they are ‘yielding up’ or admitting ‘defeat’ by attending groups for older people.

Even people who do participate may discontinue. Seeing a lack of obvious changes, and therefore feeling they have a lack of influence, is one of the main reasons people stop getting involved with organisations. There is also a danger of ‘participation overload’ for people in the target community.

However, there are many ways to address and overcome these barriers. Confidence to participate increases after positive experiences, and through an increase in skills and knowledge. Skills can be taught, and knowledge increased through information and experience. Time is more difficult to address, although giving people time off from care duties is a possibility. Also, Birchall and Simmons found that time becomes less of a problem once people decide to become involved and find it valuable. They then find the time to continue.

Results from many studies suggest that other barriers can be overcome by working closely with potential participants and staff. Hernandez et al. found examples of ways that organisations directly supported service users to participate in engagement activities, such as providing transportation, lunch, and financial support to attend meetings.
Barriers for organisations

Organisations also face barriers for engaging community members. It may seem too difficult, time-consuming and expensive to engage with the community. Community members may not have the skills to fully participate in engagement, and it will then be necessary for the organisation to train community members to participate.\textsuperscript{105}

There may be a lack of skills and/or experience within the organisation in engaging with community members. A lack of internal communication, policies, and prioritisation by the organisational leadership will also keep engagement from being as successful as it could be.\textsuperscript{106}

A study of eight agencies engaging with their service users found that one fundamental need was for organisations to support participation.\textsuperscript{107} One way was through staff training, for example, on how to work and communicate with people with dementia. Another important factor was staff responding to feedback, including criticism. This was another area in which staff training was often needed, and was most effective when organisations also provided clear policies on responding to feedback.\textsuperscript{108}

Effective communication

Virtually every article and report cited by this report has ‘the need to communicate effectively’ as one its core messages. Organisations need to think carefully about how their audience receives information to make information reach their audience, and how to ensure people will pay attention to it.\textsuperscript{109}

Participants need to feel that they have influence – they need feedback on how the organisation has listened to them, and what results and/or actions are being taken.\textsuperscript{110,111,112} Otherwise, the ‘engagement’ is seen as superficial, ‘tokenistic,’ and leaves the participants feeling frustrated and cynical.\textsuperscript{113,114} ‘Being heard’ often means feeling that there has been open, honest, respectful communication, and transparency in decisions and courses of action taken.\textsuperscript{115}

To achieve this, organisations need to manage expectations of participants by clearly outlining how participant involvement will inform decisions, actions, and/or policy, and afterwards give feedback on how and to what degree these objectives have been reached, and what you did with their feedback.\textsuperscript{116,117,118} Also letting them know timelines for what will happen, and when they will find out results have been found to be useful.\textsuperscript{119} ‘Involvement fatigue’ can set in if there are no obvious successes.\textsuperscript{120}

Finally, some noted that communication is key, not only for external audiences but also for staff within the organisation.\textsuperscript{121} Staff need to be aware of activities, policies and outcomes of engagement. Equally important is getting feedback from participants to senior managers, who have a key role – they can implement changes to individual cases, broader activities and policies.\textsuperscript{122} Managers can also install staff development and training programmes on engagement.
5 Summary

We’ve examined the evidence for an organisation or agency engaging with older people: their service users, potential service users and clients; in other words, their ‘community.’ Engagement encompasses many different activities and levels of participation, from fairly surface levels of ‘consultation’ to deeper levels of ‘decision-making’ and ‘ownership.’

Older people can benefit from participation by feeling that they are ‘making a difference’, feeling useful, gaining confidence and skills, and ‘having a say’ on issues that they care about. Benefits for organisations can include getting feedback on service performance and need, improving their relationships with a community, and reaching new people. Communities can benefit from engagement by people having a shared sense of values and commitment.

Engagement is most successful when organisations carefully plan for it, including how to get participation, how to overcome potential barriers for participants and the organisation, and how to feedback to participants as well as decision-makers within the organisation.

Monitoring and evaluation are key to measuring the success of engagement, but very little of this is published. More needs to be done to promote and share best practices, especially among organisations that work for and with older people.
Notes

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