



The background image shows two men standing in a grassy field under a blue sky with clouds. The man on the left has grey hair and a beard, wearing a grey blazer over a white t-shirt and dark trousers. He is holding a blue leash attached to a black dog. The man on the right is wearing sunglasses, a light grey blazer over a white shirt, and dark trousers. He is holding a light blue cap. Both men are smiling and looking towards each other. A semi-transparent blue banner is overlaid across the middle of the image, containing the text 'Tell Me!' and 'Improving information-provision for older Londoners'.

Tell Me!

Improving information-provision for older Londoners

Age UK London would like to thank everyone who assisted us through their participation in this research.

All participation was voluntary and we appreciate the time people have taken to provide us with their views and to participate in the hands-on ‘scavenger hunt’ sessions. We would also like to give particular thanks to the advisory group of older Londoners whose assistance in tool-development, methodology-planning and paper-reviewing was greatly appreciated as well as all the local organisations who helped us distribute the surveys or held information scavenger hunts.

This is an independent report, published by Age UK London and representing the organisations views alone.

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0.0 Executive Summary

Age UK London seeks to raise the voice and address the needs of older Londoners. This paper represents an effort to improve understanding of accessibility of local information by using a mixed-methods study of the positive and negative experiences that older Londoners have experienced.

Availability of information in a form that it is understandable, comprehensive and able to assist with decision-making is often not considered until such a point that it is really needed. This is particularly felt at times of change to personal circumstances and this could be considered particularly pertinent to older people who are more likely to experience changes such as retirement, changes in health and the loss of a partner. At a time where cost-savings are increasing reliance on digital forms of information-provision, this raises some concerns when considered in the context of the large numbers of the population who do not use computers, of whom the vast majority are older people. Local bodies and the NHS are keen to ensure that they do provide better, accessible information and it is the intention of this paper to provide some useful evidence from the experiences of older Londoners to assist them in this aim.

By using a widely-distributed questionnaire as well as a 'hands-on' information-retrieval practical test, this paper has highlighted eight key recommendations for local authorities and other information-providers to review against their own practices to ensure that the needs of older Londoners are met in this regard.

- 1 Involve older people in the design and testing of websites to ensure suitability.
- 2 Ensure that information-providing websites of public bodies have the necessary inclusive design for people with visual impairments and have this tested by people with visual impairments.
- 3 Provide or support easily accessible assistance/training to assist those people who are willing but lack computer-skills.
- 4 Improve outcomes for phone-call information-provision by reviewing caller waiting times, automated-machine effectiveness in sign-posting and caller feedback on successful resolution of queries.
- 5 Support and resource the voluntary and community sector networks so they can ensure that relevant information (including printed) can be disseminated directly to older people.
- 6 Make use of widely-distributed local newspapers and other publications to impart specific information.
- 7 Develop information-provision within the community. Leaflets in libraries or doctor's surgeries were frequently cited in respondent feedback as being useful to those without computer-access.
- 8 Maintain or support some form of face-to-face information-provision for those people who need it. Consider implementing scheduled 'Information Open Days' to enable one-stop, face-to-face support.

1.0 Introduction

1.1 Access to Information and the Digital Shift

As part of Age UK London's ongoing commitments to raising the voice and addressing the needs of older Londoners, this report contains the results of a research project targeted at promoting equality of access to information for older people living in the capital.

Access to information is something that people don't tend to consider until they really need to address an issue. The availability of information tends to either not be considered or to be assumed until the moment that there is a definite need for action. In order to support people to make the right decisions for them, they need the right information on which to base those decisions. This information-provision needs to be available, accessible, independent of bias, accurate and complete in order to support people to make decisions based on all the relevant knowledge.

However, it is not always the case that the transferral of information from knowledge-source to user is so readily and easily achieved. Indeed, previous research conducted by Age UK London highlighted that some older Londoners continued to have difficulties with accessing local information. With an inevitable crossover, dissatisfaction was also reported with 'ability to use the computers and the internet' and these two areas both featured in the lowest three scoring topic areas in the project (Age UK London, 2013; Age UK London, 2014).

It is recognised that local authorities and the NHS are keen to ensure that they do provide better, accessible information for all people and we are aware of the ongoing development of the NHS Information Standard. The intention



of this paper is to focus on older Londoners specifically with an aim of providing useful evidence from their experiences to give useful guidance for action.

The barriers for older people accessing information are well-documented and include, for example, system complexity, barriers to people with specific disabilities (Dunn & Morgan, 1998) reluctance to seek information and bad past experiences (Tinker, McCreddie & Salvage, 1993), but perhaps the most obvious issue is through the increasing reliance on digital technologies. There is clear evidence that older people have a preference for face-to-face communications (Age UK, 2013) and people over the age of 65 continue to be over-represented in statistics related to lower levels of computer access. Whilst the number of older people with greater computer-literacy is increasing year-on-year, at present, daily computer use is far less for the 65+ age-bracket at around 40% (compared to around 80-85% of those in the 10-year age-brackets from 25 to 54) (ONS, 2014). Therefore, there remains a risk that the oldest in our society will be an adversely-affected minority by the shift to digital forms of communication. As a result of lifestyle changes that particularly affect older populations such as the loss of a partner, retirement and declining health (Dunning, 2005), one could argue that these might be the very people who are in the greatest need of being able to access the information they need at the time they need it.

The implementation of the Care Act and the switch to the new flat-rate state pension will probably increase the demand from older people for information on these subjects. The impact of the welfare reform context should also be noted. These are the largest scale changes to the system that have been undertaken in over 50 years and there is clearly going to be a greater need for people who are affected to access information related to these changes. Whilst welfare benefits changes will mainly fall on those below state-pension age, there is evidence to suggest that some people above state-pension age will be affected by these changes and the knock-on effects on their networks (Age UK London & PAiL, 2014). This is of particular concern given the large numbers of older people who are not receiving benefits that they are entitled to (Age UK, 2015) and the potentially detrimental effect on older people's lives if they are not accessing money that they are entitled to.

Whilst there are guides available that have been produced with the aim of improving accessibility of information (e.g. SCIE, 2005) and, whilst there has been literature produced over the years to guide the development of digital technologies that support older people's access (e.g. Milne et al. 2005), the recent findings from Age UK London's research suggests that this remains an area well worthy of investigation.

Ultimately, therefore, the aim of this research project is to raise the voice of older Londoners with regards to their current experiences with accessing local information and of what they feel could be improved to make things easier for them.



1.2 Our Approach

The manner with which the data was to be collected was informed primarily by the following considerations:

- The purpose of the research is to represent the views of ‘older Londoners’ and, as such, it was of primary importance that all reasonable efforts be made to get a suitably representative group involved. By using the term ‘older Londoners’, we define this as being people living in London who are aged over 50. Whilst we recognise the diversity of people within this large age range, this definition includes those above and below State Pension Age and is in line with definitions used in much of the existing literature as well as fitting within Age UK London’s target demographic.
- It was important that the methodology created cover as many different information-related areas as possible. The complete list of topic areas was: Health, Public Transport, Planning, Housing, Parking & Roads, Leisure & Recreation, Lifelong Learning & Education and Social Care & Benefits. The meaningful sub-division of these broad areas into discrete areas was done in discussion with an advisory group of older Londoners and this was deliberately done in order to include information-provision from local authorities as well as through NHS pathways where the importance of accessible information has been equally-well publicised (e.g. Baxter, Glendinning & Clarke, 2008).
- It was important that any data-collection methods be as easy for people to provide feedback as possible. We wanted to encourage all older Londoners to participate and ensure equal opportunity to do so. Again, the advisory group of older Londoners gave essential feedback on this in assisting with development of data-collection tools.
- The time-scales and budget for the research were limited and, as such, the methodology undertaken needed to be practical and realistic within these limits.

The research project approach followed two lines of investigation:

One

A questionnaire that was distributed widely in order to get feedback from older Londoners. This questionnaire was developed in consultation with an advisory group of older Londoners and was distributed through Age UK London networks across all London boroughs. Individuals were also contacted for involvement and the questionnaire was made available both as a hard copy and as an e-copy for download. A link to an online ‘SurveyMonkey’ version of the same questionnaire was also provided for those willing to provide feedback in this way.

The questionnaire asked respondents to indicate their experiences with getting information in areas related to Health, Public Transport, Planning, Housing, Parking & Roads, Leisure & Recreation, Lifelong Learning & Education and Social Care & Benefits with the following possible responses: ‘Information clear and easy to find’, information clear but difficult to find’, information not clear but easy to find’, information not found’ and ‘have not tried to find this information’. A tick-box response question related to the means by which people had attempted to obtain local information was also asked alongside open-ended questions asking for feedback on what difficulties people had faced and what works well.

Two

With a focus on online information-provision, older Londoners satisfying a basic level of computer-literacy were invited to participate in ‘scavenger hunts’ where they would attend an event and be ‘tested’ on how easily they were able to answer a variety of questions related to the topic areas referred to above through by using online means. The process of doing this was timed and the searching techniques, whether successful or not, were mapped. Recruitment for an equivalent phone-based scavenger-hunt was unsuccessful.

All data-collection took place between the months of December, 2014 and March, 2015.

2.0 Results

2.1 Participation

Demographic questions related to age, borough and disability were asked both for the questionnaire and the 'scavenger-hunt' parts of the research. An additional question enquiring whether participants were responding for themselves or on behalf of another person was also asked as part of the questionnaire.

2.1.1 Questionnaire Participation

In total, 143 questionnaires were completed, of which 133 were completed by individuals responding on their own behalf. The remaining 10 were completed either by organisations (7) or on behalf of another person (3). 25 of the 33 London boroughs (including the City of London) were represented but engagement varied by area and 43% of the total response-rate could be accounted for by the three most-represented boroughs. The majority of those participating were aged between 61 and 80 (72%) with an approximately equal number either side of this from 50-60 and 81 and over. 53 of those participating described themselves as having a disability which, at 37%, is comparable with that which would be expected. The majority of these people reported having a physical disability with fewer people reporting having a sensory impairment or learning difficulty.

2.1.2 'Scavenger Hunt' Participation

30 people participated in the 'scavenger hunt' of whom 80% were aged between 61 and 80. 11 reported having some form of disability (37%), the majority of whom reported having a physical disability. On these variables, this represents a very similar participation to those who completed the questionnaire. All participants were required to have at least a basic level of computer-literacy to participate.

2.2 Accessibility by Topic Area

The questionnaire sub-divided information-provision into nine areas and, within each of these areas, two or three specific examples were provided to give a clear idea of what sorts of information were contained under each heading.

With the exceptions of 'planning' and 'social care & benefits', more respondents who had tried to find information in a respective area, did report that they found it 'clear and easy to find' than any other single description. However, in all overall topic areas, there was at least one sub-question where a greater proportion of respondents who had tried to find information in the area, had been unable to find it or had faced difficulties with locating or understanding the content. In 'planning' for example, just 23% of respondents had found building & planning applications 'clear and easy to find' whilst 76% had faced difficulties in locating or understanding content, a third of whom were unable to find the information they were looking for at all.

The areas that older Londoners had most frequently tried to find information were the Freedom Pass, 'opening times of local surgeries', and 'listings of local leisure and recreation facilities'. In all these cases, the majority of respondents had found what they were looking for and found the form of information-provision clear. However, there remained a minority of people (6 – Freedom Pass, 3 – opening times of local surgeries, 5 – listings of local leisure and recreation facilities) who were unable to find the information they were after through any information-seeking route available to them.

With the exception of planning (and it should be noted that there were only two questions within this topic area) there was no discernible relationship within the broader group headings to indicate that a general trend by topic area existed, indicating that the difficulties faced by participants in finding information were related to the specific query rather than the topic area. For example, respondents did not, generally, find questions related to 'Health' any more difficult or easy than those related to 'Public Transport' though, under each heading, there were differences in the ease with which participants were able to access, for example, 'listings of local support services' as opposed to 'listings of local surgeries' and 'the Freedom Pass' as opposed to 'ticket prices'.



A summary of all of these results are viewable in table 1, below:

Of those who tried to find the information:

Area	Have tried to find this information	Information clear and easy to find	Information clear but difficult to find	Information not clear but easy to find	Information not found
Health					
Opening time of local surgeries	85%	81%	13%	3%	3%
Listings of local surgeries	65%	53%	29%	5%	14%
Listings of local support services	62%	36%	30%	8%	27%
Public Transport					
The freedom pass	93%	82%	9%	4%	5%
Ticket prices	54%	41%	22%	14%	22%
Specialist transport options	37%	31%	24%	16%	29%
Planning					
Conservation	40%	27%	37%	12%	25%
Building/planning applications	43%	23%	40%	17%	19%
Housing					
Council tax	70%	74%	10%	12%	4%
Information for tenants	30%	56%	19%	17%	8%
Contacts for home adaptations	34%	35%	23%	15%	28%
Parking and roads					
Blue badges	37%	44%	20%	18%	18%
Parking permits	47%	40%	26%	16%	19%
Road-works	40%	41%	20%	6%	33%
Leisure and recreation					
Local facilities	76%	62%	23%	10%	5%
Parks	66%	66%	20%	6%	9%
Social groups	68%	46%	25%	15%	14%
Lifelong learning and education					
Jobs	29%	41%	21%	18%	21%
Volunteering	55%	55%	17%	13%	15%
Courses and qualifications	45%	52%	14%	16%	18%
Social care and benefits					
Residential care	27%	24%	27%	21%	27%
Home care	36%	21%	30%	14%	35%
Benefits and pensions	59%	46%	22%	12%	21%

Table 1: Percentage of participants who have sought respective information and their reported ease of information-access under each sub-divided area (numbers may not equal 100% due to rounding)



2.3 Accessibility by Circumstances

Collated individual participant results across all categories gave an overall 'score' of 'ease of access to information'. This overall participant score was analysed in relation to disability, borough, age-band and information-seeking medium to see if any difference in ease of access could be attributed to any of these aforementioned factors.

2.3.1 Accessibility by Disability

Non-parametric testing of the data-set by those who described themselves as having and not having a disability was non-significant. However, further analysis of the data, sub-dividing by disability 'type' yielded significant results when the data was split by 'physical disability'. This suggests that those participants within our sample who described themselves as having a physical disability did have significantly more difficulty in accessing information than those participants who did not report having a physical disability. Reviewing the qualitative data where participants had specified a physical disability, these primarily consisted of people with mobility difficulties and those with arthritis. Sample sizes were too small in the 'sensory impairment', 'dementia' and 'learning disability' conditions to draw any clear conclusions.

2.3.2 Accessibility by Borough

Where sample-sizes were large enough to analyse, testing was conducted to see if there was a significant difference by borough. Non-significant results were obtained indicating that, for the participants of this study, ease of access to information did not differ significantly depending on the geographical area in which they live. Possible variations between boroughs might be worth further research if resources permitted.



2.3.3 Accessibility by Age-Band

Disregarding the lowest and highest age bands which only had 4 participants between them, testing for differences between the 10-year age-bands from 51 to 90 was undertaken. Non-significant results were obtained in all cases indicating that, for the participants of this study, ease of access to information did not differ significantly depending on the age-band that participants were in.

2.3.4 Accessibility by Information-Seeking Medium

Where sample sizes were large enough to analyse, testing was conducted to see if there was a significant difference by information-seeking medium. Significant results were obtained for those participants who did and did not tick 'online –email' as a means by which they were able to seek information. Non-significant results were obtained in all other cases. This suggests that, for participants in this study, those participants who sought information online through email correspondence reported significantly better outcomes in terms of being able to access required information.



2.4 Scavenger-Hunt

30 older Londoners attended the online scavenger-hunt events where they were timed to answer a number of questions related to each of the categories highlighted in the questionnaire; namely, Health, Public Transport, Planning, Housing, Parking & Roads, Leisure & Recreation, Lifelong Learning & Education and Social Care & Benefits. For 'Health' all sub-topic areas from the survey were used in the scavenger-hunt whilst, for each of the others, the sub-divided topic area that most questionnaire respondents had attempted to find information for under each broad topic area was selected. An additional question related to general accessibility was also added, asking attendees to adjust the font-size of local public bodies' websites.

On average, across all the questions, where participants were able to find the information they were tasked to find, they were able to do so within 2-5 minutes. Indeed, some participants were able to find answers to all questions in under a minute each time. However, there were large differences between individuals in this regard with some people taking considerably longer across all questions.

In contrast with the questionnaire findings for information-seeking across all platforms however, in this specifically online-orientated part of the research, non-significant results were found between participants who described themselves as having or not having a disability but a significant result was found when the participants were split by age. This means that, for participants in the scavenger hunt, those people who said they had a physical disability did not have significantly more or less difficulty in finding the answers to the questions but people aged 71 and over did have significantly slower times and greater occurrences where they could not find the answer than those aged 70 and under.

Although there were some small overall differences in answer times between each of the questions, the number of participants who were unable to increase the size of the font on their local bodies' website was greater than those unable to access the required information in relation to any of the other questions. Indeed, the greatest difference was between individuals; the fastest individual completed all 11 tasks in less than two minutes and the slowest individual took nearly 30 minutes to answer just four of the questions whilst being unable to answer any of the other seven in the given 20 minutes per. question. This means that, in total, this individual would have spent 2 hours and 50 minutes trying to locate 11 different information sources and would have been unsuccessful in nearly two-thirds of these.

2.5 What Works Well and What Could be Better?

Questionnaire respondents were asked open-ended questions related to ‘good examples’ of information provision and ‘difficulties experienced’ when trying to get information.

2.5.1 Good Examples

The most frequently reported ‘good examples’ were in relation to individual older peoples’ groups and organisations that people had either contacted specifically or were already involved in as an active member with these two categories accounting for over a third of the total number (34%). General online searching through search engines such as Google accounted for the third-highest number of responses but local resources such as libraries (8) and local publications (6) were also recurrent themes within the open-ended responses. Where LA and NHS resources were mentioned, Freedom Pass applications were the most frequently reported example of ‘good practice’. A summary of the findings with selected quotes is viewable in table 2 below:

Classification	Sub-classification	No. of comments	Selected quotes
Individual older people’s forum and groups	-	14	‘Phoned ***** Pensioners Forum and directed straight away to a phone number which helped’
Individual voluntary and community sector organisations	-	11	‘My wife and I have joined ***** Alzheimer’s Society which has also given support’
General online searching	-	9	‘I google everything’
Local library	-	8	-
LA resources	Freedom pass applications	4	‘Applying for freedom pass. Looked online, completed form and took to post office. Pass received within the week’
	Blue Badge	2	-
	Other (non-recurring inspecific)	5	‘I applied for Visitors’ Parking Permits through the Council website and was immediately emailed by staff to clarify procedure and list supporting documentation I needed to present or post in.’
NHS resources	Data opt-out	1	‘Asked in my surgery for correct procedure on opting out of NHS data trawl.’
	Breast-screening	1	-
	Social workers	2	-
	Other (non-recurring/inspecific)	3	‘Our doctor’s surgery website’
Local magazines	-	6	‘Living Magazine delivered to all households in *****’
Town Hall	-	2	-
Citizens Advice Bureau	-	1	-
Other (non-recurring)	-	8	‘Purely by chance I was put through to a surveyor who was a great help once he realised I was severely disabled.’

Table 2: Classified comments in response to the question ‘please give us one good example of where you have been able to get required information:’



2.5.2 Difficulties Experienced

The most frequently reported ‘difficulties were in relation to the obtaining of information through online means or over the phone. Respondents reporting difficulties with getting information online either reported that they didn’t have online access (6), had issues with getting appropriate software to open files (4) or, most commonly, navigating websites that did not enable easy access to the relevant information (12).

By far the most frequently reported difficulty with phone-communications was that of answer-phones and automated response systems that either failed to have a relevant auto-response to address the query or ended up with the caller being put on hold for lengthy periods of time when referred to speak with someone (11). Linked with this was the issue of getting the right person and being passed from department to department (4). Whilst most participants were able to find information that they wanted, the following quote gives an example of how individuals can feel when things go wrong:

‘I find the increasing reliance [on providing information online] by local authorities and other organisations very worrying. Councillors and council officers alike, almost all of whom will have spent a significant part of their working lives in the internet age and thus have/have had access to expert help when things go wrong and a far better understanding of the peculiar language adopted by internet technologists, consistently underestimate the extent to which these technologies are a fearful mystery to the elderly. Reliance on ‘smart’ phones (and proliferation of apps) to impart/make available information completely excludes those of us who only have ‘dumb’ phones or no mobile phones at all. The alternative, contact by telephone, is extremely time-consuming (and therefore probably expensive) and too often results in ill-informed or ignorant responses because the level of training/experience of the respondees is inadequate. When I have tried to use the website, I have more often than not found that I have to resort to the telephone/post’

A summary of the findings with selected quotes is viewable in table 3 on the next page.

Classification	Sub-classification	No. of comments	Selected quotes
Issues with online information-provision	Navigating websites	12	'***** website very very difficult to navigate and parking permit section in particularly really unclear and often does not work.'
	Not having non-digital options	6	'Being asked to go on line when requiring an immediate response.'
	Difficulties with software/ computers	4	'Council officers sending info from their computer records which don't actually read on a system without the appropriate software'
Issues with phone communication	Answer phones	11	'Answer phones asking the caller to press a certain number, for a), or b) or c), but none applying to the question one has, then at the end to be told to hold for the next operator, where no-one takes the phone.'
	Getting the right person	4	'When using the contacting number, the person might mention the call has come to wrong department, then most times get passed around or waiting until the right person can answer my query.'
Specific cases (non-recurring)	-	6	'Had difficulty getting information about how to get help in putting dustbins back in place'
Impairment-related issues	-	3	'I can't read printed information, I don't use a tv as I can't see it.'
Other (non- specific, non-recurring)	-	3	-
LA failure to deal with queries	-	3	'Lots of talks and info distributed but they often don't follow through or return call, pass on messages'
Content available not answering questions	-	2	'Information available does not cover the question. eg. will the new flat rate pension affect housing benefit received'

Table 2: Classified comments in response to the question 'please give a brief explanation of any difficulties you have had when trying to get information.'





3.0 Conclusions and Implications

3.1 Interpretation of Results

3.1.1 Diversity and Ease of Access

Unsurprisingly, results obtained both from the questionnaire and scavenger hunt indicated a large degree of heterogeneity in the sample participating. The questionnaire feedback showed that the majority of older Londoners are able to access required information and that large numbers of people aged over 50 do use the internet in order to access local information. However, there remains a great deal of diversity in computer-literacy amongst the older population with a general trend towards lower computer-literacy in the oldest-old of this cohort. Indeed, albeit with small samples, the scavenger hunt results did give signs of this differentiation with people aged over 70 having significantly more trouble sourcing information online, either being slower to reach required results or not being able to find information. To some degree this could be due to older Londoners being more likely to have some form of impairment requiring online-accessibility controls – indeed the task of raising the font size was the task that most participants were unable to achieve in the scavenger hunt. It should also be noted that a requirement of scavenger-hunt participation was a ‘basic knowledge’ of using the internet. There remain large numbers of people who do not use the internet for various reasons who would not be able to even reach the starting point that our participants were at.

3.1.2 Online Accessibility

Significant results were obtained in the questionnaire feedback to indicate that people who had reached a level of computer-literacy where they could email specific requests online had greater success in obtaining desired information. However, whether or not this is because of the email-pathways themselves being a source of information or whether the competency to use emails is indicative of greater computer-literacy and an increased ability to source information online is not clear.

The most frequently reported ‘good information-provision’ related to local authority and NHS websites was with regards to the Freedom Pass. This is positive but possibly an exception by virtue of the amount of investment that has gone into this particular feature as well as its clear older-person orientation. More general queries such as those regarding parking permits caused the older people in this research greater difficulty in accessing information.

3.1.3 Phone-Contact

Whilst problems navigating websites was the greatest ‘difficulty’ reported by questionnaire-respondents in this study, frustration with phone-answering systems came in close behind. Some participants felt that automated systems were either ineffective in resolving issues directly, that waiting times were excessive or that they were not being put through to speak to the ‘right person’ who would be able to respond to their query. This is particularly concerning given the numbers of older people who do not use computers and for whom mobility issues would leave phoning as the only available option for direct contact with local authorities or the NHS. This might go some way to explaining why older Londoners who described themselves as having a physical disability had significantly more difficulty in getting required information due to less ease of travelling to venues where information could be obtained such as libraries, voluntary organisations or council offices themselves.

3.1.4 Community Resources

Local voluntary and community sector organisations, forums and committee groups were reported as examples of ‘good-provision’ but community resources such as libraries and town-halls were also mentioned by a minority. This finding raises the question of the future sustainability of community information provision, given the likelihood that continued economic austerity will lead to cuts in support to the local voluntary sector, libraries etc.

3.2 Recommendations

Recommendations indicated by the quantitative research as well as specified by participants in open-ended questions can be summarised into eight key points that revolve around the main need to keep a variety of communication pathways open and accessible. Older Londoners are a diverse group and, whilst many currently do use the internet for the majority of their information-seeking, there are always specific queries that will not fall within a broad online description and there are many people who do not use the internet at all.

Whilst the degree to which each of these is pertinent at a local level will depend on the borough, a review of this checklist against current processes would ensure a consistency across London.

One

Involve older people in the design and testing of websites to ensure suitability.

Two

Ensure that information-providing websites of public bodies have the necessary inclusive design for people with visual impairments and have this tested by people with visual impairments.

Three

Provide or support easily accessible assistance/training to assist those people who are willing but lack computer-skills.

Four

Improve outcomes for phone-call information-provision by reviewing caller waiting times, automated-machine effectiveness in sign-posting and caller feedback on successful resolution of queries.

Five

Support and resource the voluntary and community sector networks so they can ensure that relevant information (including printed) can be disseminated directly to older people.

Six

Make use of widely-distributed local newspapers and other publications to impart specific information.

Seven

Develop information-provision within the community. Leaflets in libraries or doctor's surgeries were frequently cited in respondent feedback as being useful to those without computer-access.

Eight

Maintain or support some form of face-to-face information-provision for those people who need it. Consider implementing scheduled 'Information Open Days' to enable one-stop, face-to-face support.

3.3 Limitations and Further Research

Inevitably, when focusing on information-provision, one has to look at other inter-related considerations that were beyond the scope of this project. Most notably, in this case, that is the issue of what older Londoners are able to do with information that they have accessed. Anecdotal evidence from speaking to participants in this study has suggested that some people do experience difficulties with downloading and filling in necessary documents (such as pdfs) and there is still a general reluctance to fill in personal details online which could hamper operational accessibility. Similarly, the close links between 'information' and 'advice' may, in some cases, mean that the information isn't sufficient to assist the information-seeker to make a decision. In other words, whilst the accessibility to information could be good, the ultimate outcomes of assistance could still not be met.

Covering the whole of London also brings with it difficulties with analysis by, for example, geographical area and individual circumstances where sample sizes were too small for meaningful analysis. Research into accessibility of information at a local level or for, for example, people with English as a second language, would give further understanding in this area. Accessibility of information for people with Dementia also appears to merit particular study.

Further investigation into all of these considerations would appear fruitful in further research.



4.0 References

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