

CMF Baseline Profile

Ageing Better in Camden



JANUARY 2022

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Background

The programme

The Ageing Better in Camden (ABC) programme is a six-year programme that aims to address social isolation and loneliness in older people living in Camden. The programme is investing £4.5m from the National Lottery Community Fund, and is intended to produce the following outcomes:

- Older people at risk from or experiencing social isolation will be more involved in their communities and provide stronger support to each other
- Older people will experience less social isolation as a result of participation in programme activities
- Services which address the social isolation of older people (SIOP) in Camden are more relevant and better co-ordinated, with increased numbers of older people engaged in their design and delivery.

ABC is funding and supporting a range of projects for older people in Camden to form a body of evidence that increases awareness and knowledge in relation to SIOP, both locally and more widely. ABC has supported the following projects:

- Abbey Community Centre
- Akash Residents Association
- Bangladeshi CAP
- Community Connectors
- Digital Inclusion
- Gospel Oak Haverstock
- Henna Asian Women's Centre
- Highgate Newtown Community Centre
- Intergenerational, North London Cares and Men's Action
- Kentish Town Community Centre
- Kilburn Community Action (KOVE)
- Kosmos Centre
- LGBT Connect
- Third Age Project
- Outreach
- Regents Park Euston CAP
- See Through Theatre
- We are Ageing Better St Pancras and Somers Town - Origin Housing

■ West Hampstead Women's Centres

The report

This report analyses survey data collected over the course of the ABC programme, before the Covid-19 pandemic. It provides a 'profile' of ABC participants at the point they joined an activity which was part of the programme.

The survey used to capture the data presented in this report is called the Common Measurement Framework (CMF) questionnaire, which is used across all national Ageing Better projects and contains questions to measure **loneliness**, as well as **health, wellbeing and levels of social contact**.

This CMF survey is administered to participants at **two time points**: within three weeks of joining an ABC project and then again six months later. This report focuses on survey responses received **at the first point in time** – within three weeks of joining – in order to provide insight into participants as they join the programme.

The data which have been used to build the 'profile' are detailed in the following chapter ('Summary of the collected data'). An overall profile follows, characterising all ABC programme participants included for comparison.

Summary of the collected data

This chapter outlines the data which have been used to build a baseline profile for the ABC programme. Many are derived from the Common Measurement Framework (CMF) of the Ageing Better National Evaluation, including the six mandatory outcomes measures.

For more information about the CMF outcome measures, please see Ecory's 'Ageing Better Evaluation Common Measurement Framework (CMF): Outcome Measures' report from June 2018.

Unless otherwise stated, the term 'average' refers to the mean.

Demographic information

Gender

Respondents could select from the following options:

- Female
- Male
- Other
- Prefer not to say

Age

Respondents could provide the year of their birth. Ages were grouped into categories in line with the previous Traverse report entitled 'Ageing Better in Camden – CMF analysis of data up to Sept 2019'. These categories are:

- Below 60
- 60-64
- 65-69
- 70-74
- 75-79
- 80-84
- 85 plus

Ethnicity

Respondents could select from the following options:

- Asian/Asian UK – Bangladeshi
- Asian/Asian UK – Chinese
- Asian/Asian UK – Indian

- Asian/Asian UK – Pakistani
- Asian/Asian UK – Any other Asian background
- Black/African/Caribbean/Black UK – African
- Black/African/Caribbean/Black UK – Caribbean
- Black/African/Caribbean/Black UK – Any other Black background
- White – English/Scottish/Welsh/Northern Irish
- White – Gypsy or Irish Traveller
- White – Irish
- White – Other White background
- Other ethnic group – Arab
- Other ethnic group – Any other ethnic group
- Mixed ethnic – Mixed Ethnic Background
- Prefer not to say

Ethnicities were then grouped into categories in line with the previous Traverse report entitled '*Ageing Better in Camden – CMF analysis of data up to Sept 2019*'. These categories are:

- Asian
- Black/African/Caribbean
- Mixed ethnic background
- Other ethnic groups
- White

Religion

Respondents could select from the following options:

- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- No religion
- Other
- Prefer not to say

Sexuality

Respondents could select from the following options:

- Bisexual
- Gay/lesbian

- Heterosexual
- Other
- Prefer not to say

Disability

Respondents could select from the following options:

- No
- Yes
- Prefer not to say

Carer status

Respondents could select from the following options:

- No
- Yes
- Prefer not to say

Living arrangements

Respondents could select from the following options:

- Alone
- In residential accommodation
- Other
- With family
- With spouse, partner
- Prefer not to say

CMF outcomes measures

De Jong Gierveld scale

This scale measures loneliness. The six-scale, three response, shortened version has been adopted.

Respondents were asked to answer 'Yes', 'More or less' or 'No' in relation to each of the following statements:

- I experience a general sense of emptiness
- There are plenty of people I can rely on when I have problems
- There are many people I can trust completely
- There are enough people I feel close to
- I miss having people around
- I often feel rejected

Indicators 1, 5 and 6 relate to emotional loneliness. For these indicators, 'Yes' and 'More or less' are scored 1 whilst 'No' is scored 0.

Indicators 2, 3 and 4 relate to social loneliness. For these indicators, 'Yes' is scored 0 whilst 'No' and 'More or less' are scored 1.

An overall mean average score was calculated on a scale of 0-6. **A higher score indicates a higher level of loneliness.**

UCLA scale

This scale measures loneliness.

Respondents were asked to answer 'Hardly ever or never', 'Some of the time' or 'Often' in relation to each of the following questions:

- How often do you feel you lack companionship?
- How often do you feel left out?
- How often do you feel isolated from others?

A response of 'Hardly ever or never' was scored 1, 'Some of the time' was scored 2 and 'Often' was scored 3. This gave an overall score between 3 and 9 **where a higher score indicates a greater level of loneliness.**

In line with previous Traverse reports, a score of 3, 4 or 5 was categorised as 'Not lonely', a score of 6 or 7 was categorised as 'Moderately lonely' and a score of 8 or 9 was categorised as 'Most lonely'.

Social contact (children, friends and family)

This measures social contact within existing social circles.

Respondents were asked 'Not counting people you live with, how often do you do any of the following with children, family or friends?'

- Meet up in person
- Speak on the phone (including FaceTime and Skype)
- Email or write
- Text message

Respondents could select from the following options:

- Less than once a year or never
- Once or twice a year
- Every few months
- Once or twice a month
- Once or twice a week
- Three times a week or more

These options were allocated a score which increases by 0.2 for each option, ranging from 0 for 'Less than once a year or never' to 1 for 'Three times a week or more'. The lowest of these four scores across the different types of communication

was then discarded, whilst the three highest of these scores were averaged to provide one overall score between 0 and 1. **A higher score indicates greater social contact.**

Social contact (non-family members)

This measures social contact outside of the family.

Respondents were asked 'Thinking about people in your local area, how often do you speak to anyone who isn't a family member? Please include local friends, neighbours, acquaintances, people who come in to help you, people you see if you go out, and so on.'

Respondents could select from the following options:

- Less than once a year
- Once or twice a year
- Every few months
- Once every two months
- Once a month
- A few times a month
- Once or twice a week
- Three or more times a week
- Every day or almost every day

These options were allocated a score ranging from 0 for 'Less than once a year' to 8 for 'Every day or almost every day'. **A higher score indicates greater social contact.**

Social participation

This measures involvement in groups.

Respondents were asked 'Are you a member of any clubs, organisations or societies?'

- Political party, trade union or environmental group
- Tenants' groups, neighbourhood groups, Neighbourhood Watch
- Church or other religious groups
- Charitable organisation
- Education, arts or music groups or evening classes
- Social clubs
- Sports clubs, gyms or exercise classes
- Any other organisations, clubs or societies
- No, I am not a member of any organisations, clubs or societies

Each of the options above apart from 'No, I am not a member of any organisations, clubs or societies' were scored 1 and the cumulative total recorded up to a

maximum score of 8. **A higher score indicates greater participation in different categories of membership.**

Social activities

This measures participation in social activities.

Respondents were asked 'Compared to other people of your age, how often would you say you take part in social activities?'

- Much less than most
- Less than most
- About the same
- More than most
- Much more than most

These options were allocated a score ranging from 0 for 'Much less than most' to 4 for 'Much more than most'. **A higher score indicates greater participation in social activities.**

Wellbeing

This measures wellbeing functioning (as opposed to feelings). The shortened, seven-item version of the longer, full Warwick-Edinburgh Emotional Wellbeing Scale has been adopted.

Respondents were asked to respond to the following statements:

- I've been feeling optimistic about the future
- I've been feeling useful
- I've been feeling relaxed
- I've been dealing with problems well
- I've been thinking clearly
- I've been feeling close to other people
- I've been able to make up my own mind about things

Respondents could select from the following options:

- None of the time
- Rarely
- Some of the time
- Often
- All of the time

These options were allocated a score ranging from 1 for 'None of the time' to 5 for 'All of the time' and the scores were aggregated across all seven statements to provide an overall score between 7 and 35. **A higher score indicates higher wellbeing.**

Scores were grouped as follows: ¹

- Less than 19.5 as 'very low'
- From 19.5 to 23.5 as 'below average'
- 23.5 to 27.5 as 'above average'
- 27.5 and above as 'high'

Where data was missing for a given category we assumed a similar level of issues to that given for the other categories for that individual.

Quality of life (EQ-5D-3L)

This measures quality of life.

Respondents were asked to select one of the statements in relation to each of the categories below:

Mobility

- I have no problems in walking about
- I have some problems in walking about
- I am confined to bed

Self-care

- I have no problems with self-care
- I have some problems washing or dressing myself
- I am unable to wash or dress myself

Usual activities (e.g. work, study, housework, family or leisure activities)

- I have no problems with performing my usual activities
- I have some problems with performing my usual activities
- I am unable to perform my usual activities

Pain/discomfort

- I have no pain or discomfort
- I have moderate pain or discomfort
- I have extreme pain or discomfort

Anxiety/depression

- I am not anxious or depressed
- I am moderately anxious or depressed
- I am extremely anxious or depressed

For each of these categories the options were allocated a score ranging from 1 for the first option to 3 for the last option. These scores are combined and converted using a formula into **a single index value between 0.00 (equivalent to death) and 1.00 (equivalent to perfect health).**

¹ <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto/>

Scores were categorised as follows:

- 1 counts as a 'perfect' health score
- A score between 0.5 and 1 counts as 'very good' health
- A score between 0.5 and 0 counts as 'significant issues' with health
- 0 counts as a 'very poor' health score

Where this score had not already been calculated but information on each of the elements was available, the overall score was calculated using the methodology outlined by Dolan (1997)². This showed an excellent match against the values where were already available in the dataset.

Where data was missing or no response was given for a specific category, it was assumed that the data would be likely to be between a moderate and severe rating.

Health self-reported score (EQ-VAS)

The EQ-VAS asks each respondent to rate their own health on a vertical, visual analogue scale (VAS) **ranging from 100 (best imaginable health state) to 0 (worst imaginable health state)**.

Scores for this variable were collated based on McCaffrey et al (2016)³:

- 85% or above is excellent health
- 70% to 85% is good health
- 70% or below is poor to fair health

Volunteering

This measure shows the type of volunteering being carried out by respondents, who were asked 'In the last twelve months, have you given any unpaid help in any of the ways shown on this card?'

- Raising or handling money / taking part in sponsored events
- Leading a group / member of a committee
- Organising or helping to run an activity or event
- Visiting people
- Befriending or mentoring people
- Giving advice / information / counselling
- Secretarial, admin or clerical work
- Providing transport / driving
- Representing
- Campaigning
- Other practical help (e.g. helping out at school, shopping)

² <https://pubmed.ncbi.nlm.nih.gov/9366889/>

³ <https://hqlo.biomedcentral.com/articles/10.1186/s12955-016-0537-0>

- Any other help
- None of the above

Every item (except 'None of the above') is scored 1, with a maximum cumulative score of 12. **A higher score shows greater participation in a broader range of volunteering activities.**

These scores have been grouped to show the number of participants with scores of:

- 0
- 1
- 2
- 3
- 4 and above

Future volunteering

This measure was included to help examine the potential sustainability of volunteering activity. Respondents were asked 'Do you intend to volunteer in the future?'

- Don't know
- Maybe
- No
- Yes

This measure is not scored but has been included to provide insight.

Co-design

This measure was intended to measure co-design and asked 'Which of the following activities have you been involved in?'

- Sharing ideas to help plan a new activity
- Deciding how an activity will be delivered
- Helping to run an activity for other people
- Gathering information to see if an activity is making a difference for people
- Been consulted about policies and services
- None of the above

Every item (except 'None of the above') is scored 1, with a maximum cumulative score of 5. **A higher score shows greater participation in a broader range of volunteering activities.**

Influence

This shows respondent perception about their influence on local decision making. They were asked 'Do you agree or disagree that you personally can influence decisions affecting your local area?'

- Definitely disagree
- Tend to disagree
- Don't know
- Tend to agree
- Definitely agree

Responses were allocated a score ranging from 1 ('Definitely disagree') to 5 ('Definitely agree'). **A higher score shows a higher perception of influence in the local area.**

ABC participant profile at programme entry

Overview

This chapter outlines a programme 'profile' with baseline data for the project broken down by the questions covered in the CMF and illustrated in tables.

Data was collected for **3,866 participants** in the programme as a whole. Base numbers (n) are given for each of the categories, with those who did not answer the question excluded.

Demographic profile

The table below shows a summary of each of the demographic breakdowns.

	Programme
Gender	n=3,804
Female	66.1%
Male	33.8%
Other	0.1%
Age	n=3,633
Average score	72.66
Below 60	9.3%
60 to 64	13.2%
65 to 69	16.8%
70 to 74	18.2%
75 to 79	16.0%
80 to 84	12.5%
85 plus	14.0%
Ethnicity	n=3,368
Asian	20.3%
Black/African/Caribbean	7.8%
Mixed ethnic background	2.2%
Other ethnic groups	5.8%

White	63.8%
Religion	n=2,699
Buddhist	2.7%
Christian	50.1%
Hindu	2.2%
Jewish	3.0%
Muslim	13.7%
No religion	21.6%
Other	6.4%
Sikh	0.3%
Sexuality	n=2,275
Bisexual	1.9%
Gay/lesbian	13.4%
Heterosexual	84.0%
Other	0.7%
Disability	n=3,013
No	42.5%
Yes	57.5%
Carer status	n=2,379
No	86.9%
Yes	13.1%
Living arrangements	n=2,815
Alone	58.2%
In residential accommodation	3.6%
Other	2.1%
With family	17.8%
With spouse, partner	18.3%

CMF outcome measures

The table below shows a summary of the data submitted for each of the measures. Base numbers are given for each of the measures with those who did not answer the question or those who did not provide enough information to generate a score excluded.

For more detail on each of the measures, please see 'Summary of the collected data' above which explains the scores for each measure.

	Programme
De Jong	n=1,104
Average score	3.23
UCLA	n=1,051
Average score	5.33
Not lonely	52.0%
Moderately lonely	32.5%
Most lonely	15.5%
Social contact (family and friends)	n=1,104
Average score	0.75
Social contact (non-family members)	n=1,090
Less than once a year (0)	1.3%
Once or twice a year (1)	0.3%
Every few months (2)	2.2%
Once every two months (3)	0.6%
Once a month (4)	3.3%
A few times a month (5)	7.2%
Once or twice a week (6)	19.0%
Three or more times a week (7)	25.2%
Every day or almost every day (8)	40.9%
Taking part in social activities	n=1,073
Much less than most (0)	18.7%
Less than most (1)	24.1%
About the same (2)	28.5%
More than most (3)	20.4%
Much more than most (4)	8.2%

	Programme
Wellbeing (SWEMWEB)	n=1,104
Average score	21.74
Very low to low (1)	35.1%
Low to average (2)	34.0%
Average to high (3)	20.7%
High to very high (4)	10.3%
Quality of life (EQ-5D-3L)	n=1,053
Average (median) score	0.69
Very poor (-1)	10.7%
Significant issues (0)	16.4%
Very good (0.5)	58.7%
Excellent (1)	14.2%
Self-reported health score (EQ-VAS)	n=971
Average score	63.44
Poor to fair	49.4%
Good	31.1%
Excellent	17.6%
Perfect	1.9%
Volunteering in the past 12 months	n=1,104
No volunteering	49.5%
Volunteered once	21.6%
Volunteered twice	11.7%
Volunteered three times	8.2%
Volunteered four to eleven times	9.0%
Future volunteering	n=1,080
Don't know	15.1%
Maybe	31.0%
No	25.6%
Yes	28.4%
Co-design	n=3,866
No involvement in co-design (0)	76.3%
Involved in one co-design process (1)	21.0%

Involved in two co-design processes (2)	1.2%
Involved in three co-design processes (3)	0.8%
Involved in four co-design processes (4)	0.3%
Involved in five co-design processes (5)	0.4%
Influence	n=1,080
Definitely disagree	11.4%
Tend to disagree	15.7%
Don't know	32.6%
Tend to agree	27.0%
Definitely agree	13.2%



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