

# **Digital Technologies to support social wellbeing** of community dwelling older adults in receipt of care and their carers

Summary of findings from knowledge mobilisation events  
with recommendations for policy and practice

## **BRIEFING SUMMARY 3**



# Executive Summary

This is the third and final briefing summary from a research project exploring digital technologies in adult social care to support social wellbeing for community dwelling older adults (DiTSoW). The research is led by the University of Hertfordshire, representing the East of England Applied Research Collaboration (ARC). It is one of four research projects developed by the National Priorities Programme of Adult Social Care and Social Work, a partnership of nine Applied Research Collaborations (ARCs) across England, funded by the National Institute of Health and Care Research (NIHR) and led by the Kent, Surrey and Sussex ARC (ARC KSS).

The DiTSoW study aimed to explore digital technologies in the context of Adult Social Care, where there has been accelerated adoption and innovation, particularly during and since the COVID-19 pandemic. Moving forward, Government and local authorities are committed to further digital innovation and implementation, viewing it as vital for ensuring a sustainable future for social care. However, there are challenges, such as: the pace of technology development; a lack of evidence for broader implementation; and ethical concerns surrounding data collection and use of Artificial Intelligence (AI) (reported in Briefing One). Simultaneously, many older adults are embracing digital technologies to support their social wellbeing. For example, using smart phones for social connection and meaningful occupation, and to provide ways to maintain independence, choice and control in daily life. Our study found older adults are more likely to use digital technologies they have bought privately, rather than those offered through adult social care. At the same time there are also many reasons why

older adults are reluctant to engage with technology, such as: lack of understanding and accessible training; fear of technology; technologies not meeting their needs (reported in Briefing Two).

This briefing focuses on findings from two knowledge mobilisation workshops (further details on page 5) that were run to explore three topics, identified by our research as needing further exploration:

- How can we ensure that people who want to be digitally included are given the support to do so? And how do we ensure that those who cannot, or choose not to engage with digital technologies are not excluded from services and communities?
- How do we work together to ensure the right technologies are being commissioned in Adult Social Care and that technologies meet the needs of older adults?
- How can we measure social wellbeing improvements and include this in the evaluation of digital technologies?

A range of stakeholders attended including:

- Older adults;
- Professionals working in Local Authorities;
- Representatives from the voluntary and charity sector who support older adults and/or digital inclusion;
- People who are developing and supporting the implementation of digital technologies for older adults.

This briefing provides recommendations primarily intended to guide professional policy and practice addressing future developments of technology, and to support older adults engaging with technology.

## Key Recommendations

### To support societal inclusion and reduce the digital divide:

*NB: It must be remembered that it is still important to address issues such as digital poverty and exclusion.*

- Start with what the older adult wants to be able to do in life before thinking about the technology to support this.
- Training and awareness for adult social care staff to understand why service users may feel excluded from technology adoption and the barriers faced by different groups of older adults.
- Older adults are not always aware of where to access support to adopt and use technologies. More positive

messaging is needed about what technologies are available and how they can enhance daily living and activities for older adults.

- A focus on accessibility:
  - Technology that people can use with ease regardless of (dis)ability.
  - Technology must be spoken about in a language that people can understand.
- Security and privacy concerns need to be addressed to reduce fears about technology and on-line platforms.
- Equitable non digital routes to access services are essential. These must be protected and made visible.

### To support collaboration and the design of technologies to meet the needs of older adults:

- Make technologies fit with what people are already using to support more successful adoption.
- Reduce the complexity of technology (i.e. fewer functions) and improve interoperability (i.e. technologies working together).
- Develop collaboration between all relevant stakeholders. For example:
  - Role of community organisations is essential within the ecosystem of supporting citizens with technology, (e.g. supporting inclusion, leveraging

- community spaces and champions).
  - Input from a diverse range of older adults will support technologies to be more accessible and better fit the needs of this heterogeneous populations.
  - Local authority professionals, developers and older adults working together will support more efficient commissioning.
- Allocate adequate time, resources and spaces for partnership working with older adults. This is essential for supporting successful collaboration and needs consideration at the outset of design and development.

### To support technology implementation for social wellbeing:

- A clearer focus on measurable outcomes of a technology (such as increased connection with family and friends, increased confidence to go out etc.) at the outset of design would support implementation evaluations.
- Developing routine standardised data collection (related to measures of quality of life and digital inclusion)

across organisations delivering services to older adults would improve the availability of base-line data, assisting implementations and more robust evaluations.

- Further exploration into the role technology can play in developing the evidence base to support social wellbeing – through both the consideration of outcomes in design and inbuilt methods of collecting data.

## Definition of Terms

**Social Wellbeing** is quite a nebulous term; more of a subjective feeling. Despite no universal definition in the academic literature, common facets include: social participation; inclusion; meaningful occupation; and the absence of social isolation and loneliness.



Public involvement is central to the National Priorities Programme of Adult Social Care and Social Work. The programme has a Lived Experience group, comprised of 15 public contributors, and DiTSoW has a Research Advisory Group (RAG) comprised of six older adults, who work with the DiTSoW academic research team. For this study we have consulted both groups and have co-designed the following definition:

**‘Social wellbeing is the ability to live a meaningful life with a sense of belonging and purpose, to feel connected to family, friends and society and not be passed by. The boundaries of this are a personal choice. Social wellbeing sits alongside and is achieved in conjunction with all other types of wellbeing: physical, mental, financial and emotional.’**

**Digital Technologies** are being kept purposely broad during this exploratory stage of the research and is inclusive of commissioned technologies (such as telecare/ remote monitoring, care management, and assistive technology including memory or visual aids or smart doorbells) as well as ‘consumer technology’ such as smart technology/IOT (Internet of things) including mobile phones or voice-controlled devices and apps available on the general market (e.g. WhatsApp).

# Knowledge Mobilisation Events

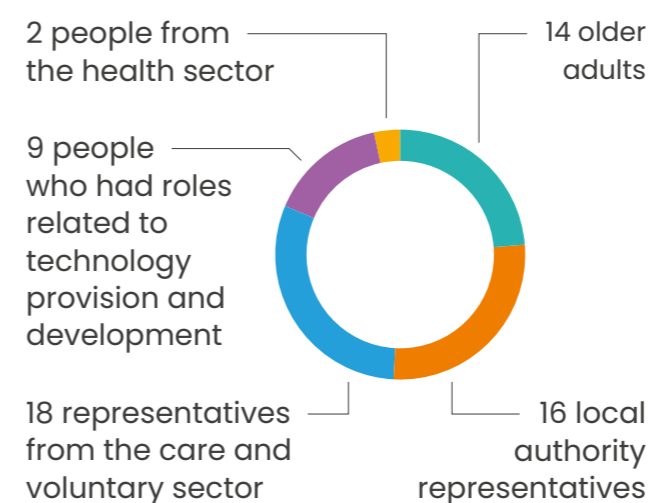
**The DiTSoW team hosted two knowledge mobilisation events (Autumn 2023). Our aim was to disseminate and sense check our research findings with key stakeholders and to start collaboratively developing recommendations related to three areas as set out above in Table 1 (page 2):**

One event was held face-face with 20 delegates from the East of England and the second was held online with 39 delegates in attendance from different regions across England. Delegates were identified and invited through a stakeholder mapping exercise and included: 14 older adults, 16 local authority representatives, 18 representatives from the care and voluntary sector supporting a range of older adults and supporting digital inclusion, 9 people who had roles related to technology provision and development and 2 people from the health sector.

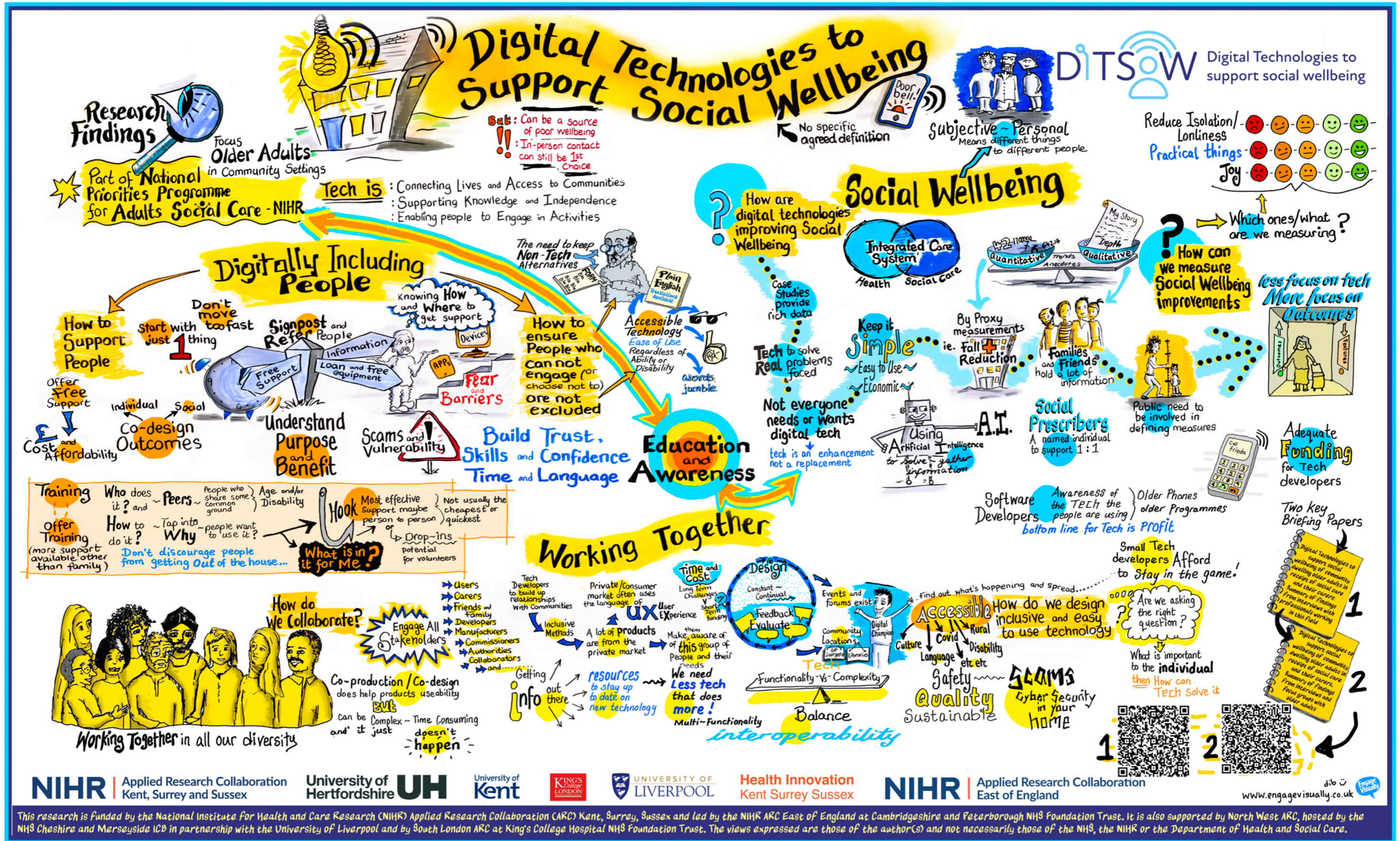
At both events a Graphic Artist documented the discussions (see pages 6–7).

A short presentation of the project’s findings was delivered to the whole group. Delegates were then allocated to mixed stakeholder groups of 6–8 people, for facilitated discussions around the 3 topics in Text Box 1 (see page 2/3). The same topic was discussed simultaneously by each group with time allocated to feedback key points from each discussion to the whole group before continuing to the next topic. Members of the research team including members of the Research Advisory Group (RAG) facilitated discussions and took notes.

The RAG also supported the development and refinement of the questions for the event, created topic guides for all facilitators and supported the organisation of the day, ensuring it was accessible to older adults and other delegates. Several members of the RAG also co-facilitated the discussion groups at the events.



# Graphic representation of the events





**Topic 1:** How can we ensure that people who want to be digitally included are given the support to do so? And how do we ensure that those who cannot, or choose not to engage with digital technologies are not excluded from services and communities?



Participants argued that it is society that needs people to be digitally included to facilitate use of online services. This push to move services to be digitally accessible does not account for older adults who still prefer face-to-face or paper-based access to services and information. Having to navigate digital apps for parking or booking tickets etc. may prevent people venturing out and reduce opportunities for social interaction. An additional concern raised was that reliance on interacting via digital devices in the home will lessen the need to go out and meet people in-person.

Given the rapid digitalisation of services it was agreed that all professionals across health and social care, as well as the broader community, share collective responsibility to support older adults in

developing digital skills while ensuring there is choice and equity of provision. It was suggested that digital inclusion needs to be considered alongside the Equality Act 2010<sup>1</sup>, as delegates felt there was an increasing risk of discrimination towards those who do not have online access to goods and services. The Equality Act considers both physical and digital access to services and prohibits direct or indirect discrimination. This includes addressing people's ability to engage with digital technologies. There was also a desire for devices, apps and platforms to be regulated against quality standards to raise standards and support confidence in technologies.

To supporting inclusion, as highlighted in previous reports (see Briefing One and Two), factors such as cost and affordability, the ability to access the right support in a timely fashion, and building trust and confidence in digital technologies and platforms, were key to successful adoption.

<sup>1</sup> <https://www.legislation.gov.uk/ukpga/2010/15/contents>



Fundamental to support digital inclusion is the 'what is in it for me?' question. Identifying an initial reason for engagement with technology and recognising its value proposition to the individual is crucial. Without these considerations, successful adoption is significantly less likely.

When offering older adults support with technologies, it is important to take adequate time to understand their priorities and to use language which is accessible. The role of the voluntary sector in supporting digital inclusion was praised, although it was acknowledged that this is not possible without adequate

funding. With technology advancing at a rapid pace, it was also noted that training will need to be ongoing, as will support to stay safe online. It was felt that the role of peers and micro-communities was perhaps an under realised and utilised resource in supporting both interest in and adoption of new technologies.

Digital inclusion spans a complete spectrum of individuals – from disinterested to avid users/advocates. Some organisations were finding it helpful to categorise individuals along this spectrum to assist with tailoring initial conversations about technology and in implementing support more generally.

### Three further themes threaded through Topic 1 discussions:

#### Accessibility

Accessibility means having technology that works well for everyone. It's about building inclusive products, breaking down digital barriers, and fostering innovation so that, regardless of abilities or disabilities, everyone who wants to can easily use and enjoy technology.

#### Awareness

From the perspectives of professionals at the events, it was suggested that one of the greatest challenges is both identifying those who are not digitally engaged and understanding the barriers inherent in reaching these people and populations. Another issue identified was ensuring that older adults were aware of the support (for equipment and training) that is available in communities and the benefits they could gain by accessing this.

#### Safety

A major barrier for older adults is grounded in fears of scams and inappropriate use of an individuals' data. It was acknowledged by professionals that these concerns are genuine; we can all be at risk. Better quality and safety assurance and more transparency and guidance from national government regarding AI development, online safety regulation of technologies and online data sharing would be welcomed by all stakeholders.





## Topic 2: How do we work together collaboratively to ensure the right technologies are being commissioned in Adult Social Care and that technologies meet the needs of older adults?

One of the key messages from the events was the need to engage all relevant stakeholders when designing and implementing digital technologies: users, carers, friends and families, commissioners, developers, manufacturers, VCSE collaborators etc. There were positive examples of consultation between different groups, but rarely with all parties (older adults, developers and commissioners). Additionally, insufficient consideration has been given to diversity (such as disability, culture, etc.) which would support more accessible and inclusive technological solutions.

It was appreciated that fully inclusive collaboration requires adequate resourcing of time, finance and people. This is challenging to implement within current pressures on social care services and requires a longer-term vision which does not sit easily with short term funding cycles, nor within health and social care systems whose bureaucracy and governance can present additional barriers. Looking forwards, technology developers and social care commissioners need to build this into the funding and infrastructure of future design and implementation.

Additionally, there are certain groups (such as people living with dementia, or sight loss) who may have different needs in relation to technology and will require different support to participate fully in such collaborations.

The role of community organisations was seen as key. They are likely to have developed trust with local communities, creating links and leverage within many different population groups. They are well positioned to support a continual process of feedback into tech design and commissioning, with dissemination of information back into communities as well as helping residents in their area to navigate the range of technologies on the market. However, this again, is not sustainable without adequate resourcing.

In making technology more accessible, and integrated seamlessly into daily life, older people were keen to see fewer, simpler technologies in preference to more complicated multi-functional technologies. While this may be less economically viable for technology developers in the short term, it would enable inclusion in a way that supports safe and sustainable quality technological solutions that can be used more widely.



## Topic 3: How can we measure social wellbeing improvements and include this in the evaluation of digital technologies?

Participants agreed that social wellbeing was both a personal and subjective construct and will have different, and transient, meanings to people. Across the discussions, social wellbeing centred

around connections and relationships, reduction of loneliness and isolation, practical things to support independent living and general feelings such as happiness, joy and feeling better. Whilst

this mapped cohesively onto the working definition of our research, such subjectivity in meaning presents difficulties with measurement and evaluation.

Technology developers were advised to focus more on the intended outcomes of a particular technology, rather than functions. Too often it seemed to participants, that manufacturers and developers added features on to existing technologies which made them complicated to use, without necessarily adding value.

Particularly since Covid, an increasing number of gadgets, apps and consumer devices are being used by older adults to support their health and wellbeing. Professionals were keen to build a better evidence base for the efficacy of specific technologies to reduce costs and deliver better outcomes for older adults. This would aid commissioning decisions and support a more sustainable infrastructure for developers. Currently, there is limited data collected prior to, or during, evaluations to provide robust evidence of the impact of digital technologies. Quantitative information can (and is) supporting cost analysis showing, for example, a reduction of staff hours. However, much of the evidence about the ability of digital technologies to support social wellbeing remains reliant on case studies. Some organisations were using other wellbeing tools, such as Office for National Statistics (ONS) Quality of Life (QoL) measures<sup>2</sup>, or the Ideal QoL questionnaire<sup>3</sup> for people with dementia, but it was acknowledged that this was 'not a perfect science' and that creativity was often needed to show impact and to justify a business case.

Delegates suggested that if both general digital inclusion measures and an individual social wellbeing gauge could be employed more consistently across organisations delivering services to older adults, there would be better data sets to start building more accurate benchmarking data for

<sup>2</sup> <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuresofnationalwellbeingdashboardqualityoflifeintheuk/latest>

<sup>3</sup> [https://medicine.exeter.ac.uk/v8media/facultysites/hls/healthandcommunitysciences/documents/My\\_Life\\_Questionnaire.pdf](https://medicine.exeter.ac.uk/v8media/facultysites/hls/healthandcommunitysciences/documents/My_Life_Questionnaire.pdf)

comparative evaluations. Additionally, participants suggested AI had a role to play in aggregating evidence across the health and social care sector.

It was suggested social prescribers<sup>4</sup> held a valuable role to support digital inclusion as well as improved wellbeing, as they work directly with people who have poor social wellbeing and link them to community and other resources to improve this. An example was provided of a successful initiative where social prescribers<sup>4</sup> had set up group drop-in IT support sessions at GP surgeries.

It was also acknowledged that there is a resistance to being measured or completing questionnaires and the risk of over-burdening people may impact data collection. Another issue, when mapping and measuring outcomes, is the reliance on people's retrospective memory of how they were feeling at any particular moment in time, and the additional factors that might have influenced this. Suggestions to overcome these issues included the role of proxy measurements (from families or through measuring times going out, absence of falls etc.). It was also suggested that the data collection for evaluative purposes could be built directly into the technology.

Lastly, participants mentioned that there is a need to map the adoption of technology use for social connections over time, highlighting the importance of ongoing research to better understand technology use for older adults, how this may fluctuate, and the balance of benefits versus drawbacks for technologies over the longer term. After a surge of technological adoption and advancement following COVID-19 it is important that we continue to evaluate when digital technologies are working for whom, and in what circumstance.

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<sup>4</sup> Social prescribers (aka community navigators) are link workers within health and social care who work with individuals making connections to activities, groups and non-medical support to improve their health and wellbeing.

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