



North and South London Cares
*Evaluation and Development through the
Centre for Social Action Innovation Fund*

August 2014 – March 2016

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people and places to thrive.



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Introduction

This report presents the findings from research and impact measurement support that has gone with the investment in the North and South London Cares model from the Nesta and Cabinet Office Centre for Social Action Innovation Fund (CSAIF). This report is only one output from that support, which ran from August 2014 to March 2016, and it focusses on what is known about the impact of those charities.

The charities

North London Cares, founded in August 2011, and South London Cares, founded in August 2014, are sister charities and, more importantly, community networks of young professionals and older neighbours hanging out and helping one another in a rapidly changing city.

In 2014 Nesta and the Cabinet Office, through the Centre for Social Action Innovation Fund, supported the charities to develop the model. A key part of that funding was to explore the opportunities for growth of the model that the two charities had been developing. To do this, the funding came with resource to invest in evaluation and impact measurement.

The objectives of this research

The requirements for that support were split into two areas, and this report sets out the findings of that work:

- **An impact evaluation** – demonstrating how the charities meet their core objectives of reducing isolation and loneliness amongst older people (and young professionals alike); improving the wellbeing, skills, resilience and connection of all participants; and bridging social and generational divides.
- **A process manual** – codifying the many and various elements and principles involved in establishing a “Cares” charity.

This research

The research undertaken to support these objectives was initially designed as follows, with the two strands of work (impact and process) considered separately:

Impact evaluation

Review of previous studies – The initial work involved a detailed review of existing data capture processes and systems, alongside an exploration of the evidence that North and South London Cares currently felt they had. This was mainly focussed on a significant evaluation of North London Cares at the end of their first three years of delivery, which also included a number of survey-based tools and findings about the organisation. This



process, combined with a number of the interviews that are described below in the process work, highlighted the current level of evidence that the charities were working to. It was plain that the charities had gone some way towards achieving the first level of Nesta's standards of evidence, in that they had described their work clearly in the first evaluation, but that this process was not yet complete. There was not a fully evidenced rationale for some of the charity's processes, the theory of change that had been developed was already proving unsatisfactory, and this was because the charities (particularly the new South London Cares) were refining their model of delivery as they developed. This important point is developed below.

Survey of new members (and follow up surveys) – The primary quantitative method for this study was a zero, six and twelve month telephone survey of all newly engaged older neighbours, staggered over a three month period. This meant that every new older neighbour who came into contact with either of the charities between October and December 2014 was called and asked a standard set of questions (with some exceptions and challenges as noted below). This was repeated at six month intervals, and undertaken by researchers rather than the staff or volunteers.

This survey used three question areas and was, where possible, based on existing questions previously applied by researchers in other studies. The first area was wellbeing, and the four Office of National Statistics **wellbeing** questions were used.¹ The second area was about **loneliness**, and the Gierveld 6-item scale² was used as it is widely recognised as an effective and short tool, and is one of the key instruments recommended by the Campaign to End Loneliness. The final area of questions was a about **engagement** with North and South London Cares.

The details of those questions, alongside the protocols that were used by the research team can be found in Appendix 1.

The primary challenge for this research, detailed below in the development section, was that the response rate (initially with an aspiration for over 100 adults completing all surveys) was much lower than expected. This was diagnosed as being down to several reasons: the very relaxed relationships established by North and South London Cares made the telephone interviews seem anachronistic and impersonal; the age of the older neighbours meant that there were varied responses to a telephone call, and over the course of the year health states could vary significantly, reducing the likelihood of taking a call and the circumstances and context in which the interviews were conducted, and; the point at which the surveys began was one of significant change for the two charities and it was not possible to gain contact details for that large a number of older neighbours in the three month period.

¹ ONS Wellbeing Methodology

<http://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing#methodology>

² Gierveld Six Item Scale <http://home.planet.nl/~gierv005/ResonAging.pdf>



To respond to these challenges the surveys were still completed, and the results are analysed below, but as the development section of this chapter shows, a new approach was developed based on the learning through the study.

Contact and journey research – To supplement the quantitative study, it was initially envisaged that a purposive sample of 10 older neighbours would be built, and these individuals would be tracked throughout the evaluation. Due to challenges with the survey, this was delayed, and a new approach was developed that reflected the emergent findings of this study. The relationship between the older neighbours and the young professional volunteers was deemed so important, and the impact achieved on both sides of those relationships was seen as equally valid, that a set of matched interviews was undertaken. In both north and south London, two pairs of volunteers and older neighbour were interviewed about their relationship, giving four in-depth interview pairs. These were analysed to illuminate points of value about the Love Your Neighbour relationships and the success of those relationships. The basic topic guide for these interviews can be found in Appendix 2.

Process evaluation

Staff interviews – Initially a small number of interviews were proposed with the CEO and staff, but these were added to, to ensure full team buy-in and engagement, and a number of follow-up interviews were conducted to ensure that a rounded picture of the work and the developing work of the charities was captured. This included several interviews with the CEO, the Programme Coordinators from each charity site, the Love Your Neighbour and Social Club leads, and the Development Coordinator. The full topic guides for these interviews can be found in appendix 2, although these interviews sometimes developed into small focus groups as well. It was clear that the research became much more focussed on developmental evaluation, with rapid feedback given to the teams following these interviews allowing for approaches to be considered and shaped.

Observations and understanding – Initially this was expected to be a small part of the study, but it became a significant focus of work to observe a variety of Social Clubs to understand their breadth of scope, who came, and what occurred in those sessions. These were followed up with discussions with members of staff, and were a key component in understanding the model, who it was for and how it worked. On the Love Your Neighbour side of the charity, this was the focus of the paired interviews (described above), and these were supplemented with an interview with the two Love Your Neighbour staff.

Workshop with the staff team – During the course of the study there were several small group and full team workshops to discuss, validate and challenge findings and work. This became more important given the developments of this study (detailed below), and the growth of the two teams during the life of the research and support. The feedback in these sessions shaped the analysis that can be found throughout this report, particularly in terms of the theory of change and the language used to describe what the charities do.

Development

During the life of the project, there were two major changes to the approach that was initially designed.



The first was an acceptance that much more work needed to be done with the various parts of the staff team of both charities to ensure that processes and approaches to data reflected the realities of delivery. As delivery was evolving in the new South London Cares team, so North London Cares was responding to that new learning. It was not possible to quickly say which processes were making the model work, and fundamentally there needed to be a review of the theory of change that Cares had developed for the work with the CSAIF. This has resulted in a new theory of change for the Cares family, and more time, through interviews and workshops, was spent working with the team on the manual development than had initially been envisaged. This has produced a more relevant and meaningful document for the work of North and South London Cares.

The second was to rethink the whole approach to impact measurement, following low response rates to the external survey that was designed. This has resulted in a new approach to tracking data, and an approach to measuring impact that better fits the culture and style of work that is undertaken by North and South London Cares.

Outputs

Given these changes, the final work is made up of:

1. This report
2. An impact map, theory of change and data framework
3. A manual for the Cares family
4. A justification document for the measurement approach
5. An interim report highlighting process learning in June 2015

This paper is an essential part of the reporting on the work, but it is not the only important output, and there is considerable learning in the manual and other documents.



The projects

This first chapter of this report introduces the main projects which make up a Cares family charity.

Love Your Neighbour

Through the Love Your Neighbour (LYN) programme, North and South London Cares create one-to-one friendships across social and generational divides. The project is a way of getting younger people more actively involved in their community, and offers older people the chance to feel reconnected with London's ever-changing landscape.

The LYN friends spend time together on a regular (normally weekly or fortnightly) or ad hoc basis, sharing companionship, friendship and support. Volunteers sometimes help with practical tasks such as shopping, cooking and gardening, but the main purpose of the match is to share conversation and fun activities like playing cards or sharing a cocktail.

Love Your Neighbour is largely aimed at older people who may have restricted mobility or another reason that they struggle to leave their own home. People are usually matched with younger neighbours who live or work in the same area, and who have experience of interacting with older people through the Social Clubs. Love Your Neighbour matches enable younger people to bring the outside world into an isolated older neighbour's home, and to foster strong relationships that benefit both parties.

Social Clubs

Social Clubs offer a chance for young professionals and older neighbours to hang out together, to laugh, to learn and to build the types of friendships and social networks that really matter. Each Cares family charity runs 4-5 Social Clubs every week, in different locations across their home boroughs.

The group activities are different every time, but they always centre on fun and shared experience. Usually clubs will revolve around cultural and social interactions such as film nights, baking clubs, dance sessions, technology workshops and arts and crafts. The clubs can also include more unusual activities, like 'Back to Work' business visits to give older people an insight into the modern workplace.

Social Clubs are aimed at older people who can still get out of the house, and want to interact with other older neighbours as well as local young people. The staff organise a range of activities to suit all tastes, but at the heart of each Club is companionship, fun, neighbourliness and meaningful relationships. There is always a staff member present to help make introductions and facilitate a chatty, relaxed environment.



Winter Wellbeing

The Winter Wellbeing project is a pro-active outreach effort that helps older neighbours to stay warm, active, healthy and connected during the most isolating time of year. It seeks to meet people's short-term winter needs and to alleviate winter pressures on local health and social services with a series of **interventions**, but also to connect older neighbours to year-round **interactions**, including the Cares family's own core projects.

In north London, Winter Wellbeing is funded directly by local authority Public Health departments; in south London the project is funded indirectly from grants and is therefore smaller than its equivalent north of the river.

Although seasonal and finite in terms of delivery, the Winter Wellbeing project has become a recurring feature of the Cares model. It includes an extensive campaign to reach as many people as possible, including through major door-knocking efforts, by distributing leaflets through local business and community networks and by sending letters and making telephone calls to older neighbours.

The Cares family staff and volunteers distribute free blankets, warm clothes, and small grants of up to £100 for those at risk of fuel poverty and exposure to the cold. They also provide information about accessing Council and NHS services and other community activities for those who may be socially isolated.

Community Fundraising

In addition to the Cares family's core delivery programmes, the charities also involve volunteers in major community fundraising efforts. Although this work is supplementary, and constitutes part of the charities' back office function, it is worth considering as a core component of the model because of its ability to attract, inspire, engage and empower local people – and to raise awareness about the charity and the issues amongst networks of young professionals.

Community fundraising is delivered in the same way as the Cares family's core projects – through a 'networked approach'. Staff invite supporters to take part, and then put their stories and motivation at the heart of future external communications to "humanise" income development, connect it to the issues and the city, and to inspire others to get involved in the future.



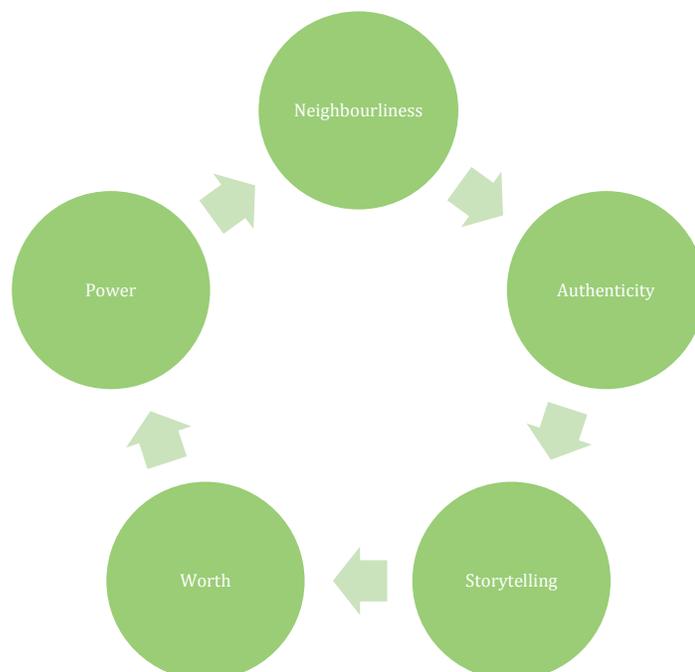
Creating relationships

A core finding from this work has been that relationships are the crucial element of everything that North and South London Cares do. All of the outputs and outcomes of the Cares family come from a culture, and a way of working, that is fundamental to how those relationships are created.

Key elements of the culture

The following five points have been developed in partnership with the team as the building blocks of the work with individuals:

- The Cares approach, at all times, begins with interactions and acts of **neighbourliness**.
- The Cares family believe that this opens up the possibility for **authenticity**.
- When people are authentic they can share meaningful **stories** about themselves.
- In the act of telling stories neighbours have the opportunity to see their **worth** and self-worth.
- The charities believe that in encouraging people to feel this sense of worth, it enables them to take some **power** over their choices, and that this will encourage more neighbourliness and reduce the social deficits that make people feel isolated and lonely.





This culture is a part of all of what the charities do, but it manifests itself most clearly in the two central projects.

Social Clubs

The social clubs have a small set of quality principles which staff look to ensure. If these happen, then there is a sense that it will have been a successful club. This means that assessing people or measuring their experience is not an important part of the clubs. It also means that the detail of the clubs can vary dramatically. There is a strong sense from the team, and then endorsed by a large number of observations of social clubs, that the following issues matter in making a successful club:

- They must bring older and younger neighbours together to share time, laughter and new experiences
- Clubs are based on shared personality, interests and experience, rather than age
- They must provide a fun, familiar, equal, welcome environment - a place for everyone to call home
- They are energetic, creative and challenging - helping everyone stay valued, vibrant and visible
- They offer discursive, inquisitive and trusted environments, which enable a large number of different conversations to take place
- Clubs offer an anchor of new experiences - something to look forward to day-to-day

Love Your Neighbour

In the same way, there are also some key principles to Love Your Neighbour friendships. These friendships are routinely monitored through regular check-ins and reviews which do mine occasional data. But day to day and week to week it is essential that they all:

- Connect older people to the rapidly changing world around them
- Bring laughter and friendship - and the outside world - into the home
- Offer people practical and emotional support simultaneously - and respect the 'whole person' (their background, history and identity)
- Help people to feel the community cares
- Offer pause, reflection and shared storytelling



Language

The virtuous circle that is described above, and the practical delivery of the two activities, only works if the language used throughout is meaningful to people. The way the Cares family talks about the activities and the people they work with is crucial. It helps to express both the values and the model, and to challenge some of the issues and concentrations of power that the model seeks to tackle.

The language of big business, big government or big charities is not, therefore, used. Instead, the staff use communitarian vocabulary which re-stresses community. “Social”, for example, does not mean a service of government; it means people spending time with people.

Language matters in the delivery of the activities, and the staff are constantly considering how to better refine the words that they use. As a result, there are some words and vocabulary that are encouraged, and some which are banned. The below is a list of words that this study has highlighted, but there may well be more to add to this in time.

Cares vocabulary

Neighbours
Activities
Community network
Connections

Banned vocabulary

Residents
Clients
Services
Befriend
Beneficiaries



People and outcomes

The first section of this report has looked at the creation of relationships as a key, unifying feature of the work. That is not to undervalue individual benefits, however, and this section explores those unique benefits for different groups of individuals.

Who does the model work with?

The two charities talk of working with older neighbours and young professionals. These are useful and inclusive terms, but they are not precise or specific.

The projects are open to everyone and volunteers of all ages can get involved. However, the Cares model typically attracts the over-75s and young people aged 21-35, in the early years of their professional careers. There are a number of reasons why this focus has developed:

1. Rates of loneliness are highest amongst the over 75s and so it is important to reach people in this age group.
2. The next-most lonely age group is the under 25s, closely followed by the 25-34 age group – young people at the start of their professional lives, who have yet to settle in a community or to start a family of their own. Recruiting volunteers from this age group reduces their isolation, as well as reducing the isolation of older people.
3. Young professionals have both the time and the motivation to volunteer. With fewer family commitments than older age groups (they rarely have young children or infirm older parents of their own), the Cares family have found that young professionals feel more able to volunteer regularly. Young professionals are particularly attracted to the Cares family model because they miss their own family and/or want to have more interaction with older people whom they wouldn't otherwise have the opportunity to meet. Importantly, the Cares family is also relatable - with flexible volunteering opportunities accessible through digital communications and storytelling.

Whilst the charities do work with some frail older people, they are not a formal part of healthcare or social services. North and South London Cares are voluntary, community-based organisations. They do not do the things that make life liveable, such as such as clothing, feeding or washing people; instead, they are designed to do the things that make life *worth living* – making new connections, sharing new opportunities, and broadening the horizons of both older people and their younger neighbours. By acting as a preventative measure to reduce the number of lonely and isolated older people, the ambition is to help reduce unnecessary burdens on health and social services, but the charities do not and cannot replace those statutory services' role.



What does the model do for them?

This research attempted to deal with some of the practical impact challenges that the Cares family has to navigate, by setting up a one-off pre and post engagement survey for neighbours newly involved, which would be completed by researchers rather than staff or volunteers. As discussed above, there have been some challenges in this process.

The two tables on the following pages show the data that were collected from all surveys, alongside a computed loneliness score for the Gierveld tool³. The first table (Table 1) has a decreasing n as there were fewer people who completed each subsequent survey, and the second (Table 2) has a consistent n, as it tracks only those who completed all surveys.

Ultimately, the data from these surveys is not sufficiently large to test any significant effects for the whole programme, but there are some pieces of evidence which may be of interest beyond the methodological challenges which have been described earlier.

- In the wellbeing questions, there is little change for the scores for wellbeing for those who answered all surveys, except for an increase in anxiety. When looking at all responses, regardless of whether they stayed in contact for 12 months, the happiness score appears to be increasing, suggesting that some of those who were least happy dropped out of the survey. The anxiety change is difficult to explain, but does not fit easily into the theory of change for the service. At this scale (n=25) and from a low base, the percentage is overstating the change, so it can be suggested that there is no evidence for changes to wellbeing from this survey.
- In the loneliness questions there was a decrease in the computed social loneliness score (questions about other people), but an increase in the emotional loneliness (questions about their sense of loneliness). These scores are both from a low base on the Gierveld score (less than 1 out of 3), but they do suggest something which fits into the developing approach to measuring the service: it should measure and attempt to reduce isolation rather than cognitive experiences of loneliness, as these are influenced by a much large range of factors, including an ageing cohort with deteriorating health conditions. This health issue is seen in the next bullet point, and the next chapter of this report tackles the approach to measuring isolation rather than loneliness.
- In the service use questions, answers have been influenced by big changes in individual and, at times, anomalous cases, where individuals have had to start going to the GP every day on account of certain conditions. It highlights that there are large external factors in people's lives which could potentially influence their loneliness and emotional state.

³ Manual of the Loneliness Scale, 1999
http://home.fsw.vu.nl/tg.van.tilburg/manual_loneliness_scale_1999.html



	0 months	6 months	12 months	6 month change	12 month change
<u>Wellbeing</u>					
How satisfied are you with your life nowadays?	6.82	7.66	7.00	12%	3%
To what extent do you feel that the things you do in your life are worthwhile?	6.53	7.66	7.04	17%	8%
How happy did you feel yesterday?	6.79	7.76	8.00	14%	18%
How anxious did you feel yesterday?	3.07	1.81	3.09	-41%	1%
<u>Loneliness</u>					
I experience a general sense of emptiness	2.61	2.21	2.54	-15%	-3%
There are plenty of people I can rely on when I have problems	3.79	4.15	4.13	10%	9%
There are many people I can trust completely	3.93	3.91	4.00	-1%	2%
There are enough people I feel close to	3.98	4.09	4.04	3%	1%
I miss having people around	2.87	2.27	1.96	-21%	-32%
I often feel rejected	1.66	1.63	1.40	-2%	-15%
Emotional loneliness	1.02	0.79	0.76	-23%	-25%
Social loneliness	0.90	0.65	0.56	-28%	-38%
Overall loneliness	1.92	1.40	1.27	-27%	-34%
<u>Service use</u>					
Hospital last 6 months	3.26	2.06	1.54	-37%	-53%
GP last 6 months	2.11	2.66	9.17	26%	334%
Personal Care last 6 months	15%	3%	20%	-80%	38%
n=	62	35	25		

Table 1- Survey data, all responses



	0 months	6 months	12 months	6 month change	12 month change
<u>Wellbeing</u>					
How satisfied are you with your life nowadays?	7.79	7.92	7.00	2%	-10%
To what extent do you feel that the things you do in your life are worthwhile?	7.32	8.05	7.04	10%	-4%
How happy did you feel yesterday?	8.04	7.91	8.00	-2%	0%
How anxious did you feel yesterday?	2.48	1.48	3.09	-40%	25%
<u>Loneliness</u>					
I experience a general sense of emptiness	1.83	1.83	2.54	0%	39%
There are plenty of people I can rely on when I have problems	3.96	4.33	4.13	9%	4%
There are many people I can trust completely	4.4	4.25	4.00	-3%	-9%
There are enough people I feel close to	4.4	4.13	4.04	-6%	-8%
I miss having people around	2.28	2.29	1.96	0%	-14%
I often feel rejected	1.16	1.38	1.40	19%	21%
Emotional loneliness	0.52	0.67	0.76	29%	46%
Social loneliness	0.68	0.54	0.56	-21%	-18%
Overall loneliness	1.2	1.21	1.32	1%	10%
<u>Service use</u>					
Hospital last 6 months	1.17	1.52	1.54	30%	32%
GP last 6 months	1.48	2.20	9.17	49%	519%
Personal Care last 6 months	16%	4%	20%	-75%	25%
n=	25	25	25		

Table 2 - survey data, only responses with three data points



This survey was designed to understand the impact of the Cares model, but due to the uncertainty of the population size and the representative nature of those who have answered the questions, it would be difficult to read too much into the data.

When triangulated with other qualitative data from previous studies, this may be seen as supporting evidence that the model is good at giving people opportunities to reduce their social loneliness or isolation. This would conform to the Cares family's focus on fun and feeling worthwhile, rather than dealing with any medical, psychological or cognitive conditions.

Ultimately this survey has been of interest in helping the charities consider how they should go about collecting data, but it does not help build a clear or meaningful picture of impact. It is a small data set, and it is only about older neighbours who engage with the work of the charities in a very fixed period, without contextual understanding of the level of engagement with the Cares family that they have experienced.



How do the relationships work?

To support the understanding from the survey, qualitative interviews with staff and, most importantly, four pairs of Love Your Neighbour matches were undertaken, and eight different Social Clubs were observed.

The following table highlights the key findings from those interviews about value and impact for different individuals, and also for how they change people’s connection with the community at large. There are some clear overlaps between the different areas, and a quote from the interviews highlight the ways in which value was understood by individuals.

These areas of value for older neighbours, volunteers and their sense of community have shaped how the subsequent measurement systems for the charities have been developed.

Older neighbours	Volunteers	Community
<p>A connection</p> <p><i>To start with I thought she was just like the other carers who pop round. But she doesn't do anything but talk to me. It's nice to have a different kind of connection.</i></p>	<p>A sense of giving back</p> <p><i>I'm usually quite busy. I wanted something I could commit to... I wanted to become friends with a person.</i></p>	<p>Seeing people differently</p> <p><i>It helps me speak to older people and not be really prejudiced against older people. You learn more. I feel like I chat on the bus to older people more.</i></p>
<p>Bringing the world indoors</p> <p><i>Sometimes I just spend all day watching TV. That's my only connection with the world. Well she brings the world indoors for me.</i></p> <p><i>She tells me about what's going on, and has an opinion. Thank god for the telly, but you can't talk back to the telly.</i></p>	<p>A personal connection</p> <p><i>I feel like I have a neighbourly relationship. And that matters.</i></p>	<p>Feeling involved</p> <p><i>We did a pub quiz about north London. I came back the next week and she had written down 20 questions to help – she was really excited and involved in what was going on.</i></p>



<p>Breaking up the day</p> <p><i>I can't get out, and it's nice to have somebody come. Somebody regular who cares and just talks to me.</i></p>	<p>A bigger world</p> <p><i>My life is all these little contained things. When you do something like this, you're making a new friend, but it feels a part of something bigger.</i></p>	<p>A sense of something</p> <p><i>I feel committed to the cause. It's bringing back a sense of community and trying to get everyone together. And make sure people are happy. Bring back that sense of knowing people.</i></p>
<p>A new friend</p> <p><i>I think about her every day. I wonder what she's doing, and that brings me happiness, even when I don't see her all week.</i></p>	<p>Becoming a friend</p> <p><i>It feels special because it's really important and it makes a difference for both me and Margaret.</i></p> <p><i>Eventually she realised that I want to be there. It was about time, and me being really actively interested in her life. She still does the "oh you must go". To start with I took that as a sign that she wanted me to go, but now I know that she was being polite.</i></p>	
<p>Attention</p> <p><i>It's good to have somebody listen to just you.</i></p>	<p>Worth</p> <p><i>It makes me feel more interesting as a person. When people talk about themselves, it gives me something else to be.</i></p>	

What is striking about all of these comments, which are endorsed and repeated across the observations of Social Clubs, is that they are never about anything medical or even directly about loneliness. Comments support the idea that North and South London Cares are doing something different - with a direct personal outcome but also with a wider knock on effect for the community - and should not try to measure their work against something they are not.



Developing a measurement approach

The previous sections of this report have looked at the Cares family's focus on relationships, and the value to the participants of the network. This section takes that on to develop a new theory of change for the organisation, and sets out how to go about measuring impact against theory.

Theory of change

Given the lessons of this research project, a new theory of change has been developed which reflects the combination of value that is gained from North and South London Cares' work, and also the routes to achieving it. That theory of change, which is detailed below, lists five immediate outcomes for volunteers and older neighbours, and a further three longer-term outcomes that benefit society as a whole.

The five outcomes are equivalent for both volunteers and older neighbours, because it has become more and more apparent during this research that the Cares family model is effective in reducing loneliness and social isolation for both groups, and that these outcomes are achieved in a similar way (if not necessarily achieved to a similar degree). Whilst none of the five outcomes are specifically about loneliness, if improvements across all five areas are made then there is an assumption within this theory of change that a person's loneliness will be reduced.

The five outcomes are: reducing isolation, improving wellbeing, increasing the feeling of belonging in the local community, living richer lives, and building bridges across social and generational divides. These get to the heart of what North and South London Cares do. The following describes why these are so important, and recommends five measures to track this in future, building on what has been learnt in this study.

1. The first indicator looks at **reduction in isolation** (note that this is subtly different to a reduction in loneliness). Social isolation is an objective state: either you have good social connections, or you don't. Isolation is largely caused by the absence of social interactions, regardless of the quality or type of interaction in question. The Social Clubs and Love Your Neighbour project are specifically designed to increase the number of social interactions for both older neighbours and volunteers.

Loneliness, on the other hand, is an emotive state – it reflects how people *feel* about their situation, rather than the objective facts per se. For example, as the old adage goes, it is possible to be lonely in a crowded room. It is much more difficult to provide robust evidence that a community-based intervention has successfully reduced an individual's loneliness, because it is possible to increase the quantity of their social interactions (reducing their isolation) whilst not necessarily increasing the quality or type of those interactions in a way that the individual desires. For example, if a bereaved person misses their partner and the



close relationship they had with that person, it is very difficult for any intervention to fill that gap and the Cares family does not claim that its projects would achieve this. However, achieving positive improvements across all five of the charities' outcome areas *will* help to reduce loneliness for both volunteers and older neighbours, at least to some extent.

The work of this study attempted to monitor changes in loneliness accurately, using a robust methodology (the De Jong Gierveld 6-item Loneliness Scale), but this was problematic for a number of reasons as already described.

Whilst measuring loneliness would, theoretically, be a more robust approach to assessing impact, it is also much more difficult to get it right, especially in the context of the Cares family's unique person-centred approach. Isolation itself is a precursor to loneliness, so if there is evidence of reducing social isolation then it is reasonable to assume that loneliness will also reduce, if not necessarily by the equivalent amount.

Measure: "My relationships are satisfying as I would want them to be" (0-4), assessed longitudinally for a sample of individuals using a baseline, or taking an average of a sample of Cares' older neighbours/volunteers and comparing to published statistics.

2. The second indicator is **improved wellbeing**. There are a number of reasons for this indicator. Firstly, it is self-evidently a desirable outcome to increase someone's wellbeing, and it is an important part of the Cares family's model to positively benefit both older people and volunteers. Increased wellbeing is closely related to reduced loneliness, so evidence of successfully increased wellbeing is a good indication that the intervention is having a wider positive effect. On a more practical level, the exact indicator used by the Office for National Statistics can be used to monitor levels of wellbeing in the general population – and this allows for comparison between the wellbeing of older neighbours and volunteers, before and after their involvement with the charities, and the national average for people of their demographic. This will enable evidence to be collected for how effective the projects are at increasing levels of wellbeing in the community. Whilst the ONS uses 5 indicators to monitor wellbeing, it is recommended the charities use one core indicator for the sake of simplicity.

Measure: "Overall, how satisfied are you with your life nowadays?" (scale 0-10), assessed longitudinally for a sample of individuals using a baseline, or taking an average of a sample of Cares' older neighbours/volunteers and comparing to ONS published statistics.

3. The next indicator to monitor is whether the charities have increased both volunteers' and older neighbours' **feeling of belonging** in their local community. This is an important outcome to include because, for very different reasons, both of these social groups are increasingly experiencing a sense of isolation and exclusion from the city and neighbourhoods that they live in. For many older neighbours, the area where they have spent their whole lives is changing rapidly



due to the influence of migration, gentrification and societal and housing changes. They may no longer know many of their neighbours, and may not be able to access local facilities or amenities – and many of these may have closed down due to economic and social changes in the locality. Older neighbours talk about the alienating effect of living in a city that they no longer feel is ‘theirs’, surrounded by people that they don’t currently identify with and feeling unable to access any of the benefits that London’s recent economic, social and infrastructure changes have brought for others.

Meanwhile, volunteers have often moved to London from other areas of the country and the world in order to pursue their careers, and may have few or no connections with people in the neighbourhoods where they live. They, too, often feel a sense of alienation or anonymity in a city which is as large and complex as London, particularly those who have little time outside of work to foster new connections. Many will move frequently between different areas and not have time to put down roots or develop a sense of belonging in any one place. North and South London Cares have an important role in helping these people to develop a sense of community in their neighbourhoods, just as much as for the older neighbours who access the projects. For both older people and younger volunteers, interacting with each other is a way of accessing a sense of community in the rapidly changing city that either they feel they have lost, or which they never felt part of in the first place.

Measure: “I feel I belong to my neighbourhood” (0-4), assessed longitudinally for a sample of individuals using a baseline, or taking an average of a sample of Cares’ older neighbours/volunteers and comparing to ONS published statistics. This was not asked in this study, but is a proposed addition based on the importance of belonging that was underlined during the qualitative work for this study.

4. The fourth indicator to monitor is whether participants feel that they have **richer lives** thanks to their involvement with North or South London Cares. This has been included based on the findings of qualitative interviews conducted. The first evaluation of North London Cares found that the charity give older neighbours ‘something to live for’ and ‘a sense of meaning/purpose in their lives’, something to look forward to on a day-to-day basis. For volunteers, on the other hand, volunteering has enriched their lives by ‘making them a more interesting person’ and ‘making their lives bigger’. Monitoring whether all of the Cares family’s volunteers and older neighbours feel that the charities have enriched their lives is a good method to check whether the projects are meeting their particular needs.

Measure: “I feel my life is richer since I have become involved in Cares” (0-4), taking a post-intervention sample average at regular intervals.

5. The final outcome is **reducing divides between generations and social classes**. These divides are widening due to societal changes in London (and other parts of the UK), including gentrification and rapid population movement. Intergenerational relationships are important for younger volunteers because they



really value being able to interact with older people and learn about their lives. Amongst older people, ‘youngsters’ are often seen as the cause of problems in society and some older people are afraid of them. The projects are designed to bridge this intergenerational divide and enable both older people and volunteers to benefit from their relationship with each other. Given that older neighbours tend to come from less privileged, more rooted London communities, that few attended university, that most had traditional gender roles and ‘blue collar’ jobs and that most have relatively socially conservative views, while North and South London Cares’ volunteers tend to be metropolitan, liberal, upwardly mobile middle-class young professionals, the charities also aim to bridge social divides between different groups that call London home. This outcome is not only important for the individuals who are part of our projects, but also to help combat negative trends in the community and society as a whole.

Measure: “I feel connected to people from different social backgrounds and age groups than me” (0-4), taking a post-intervention sample average at regular intervals.

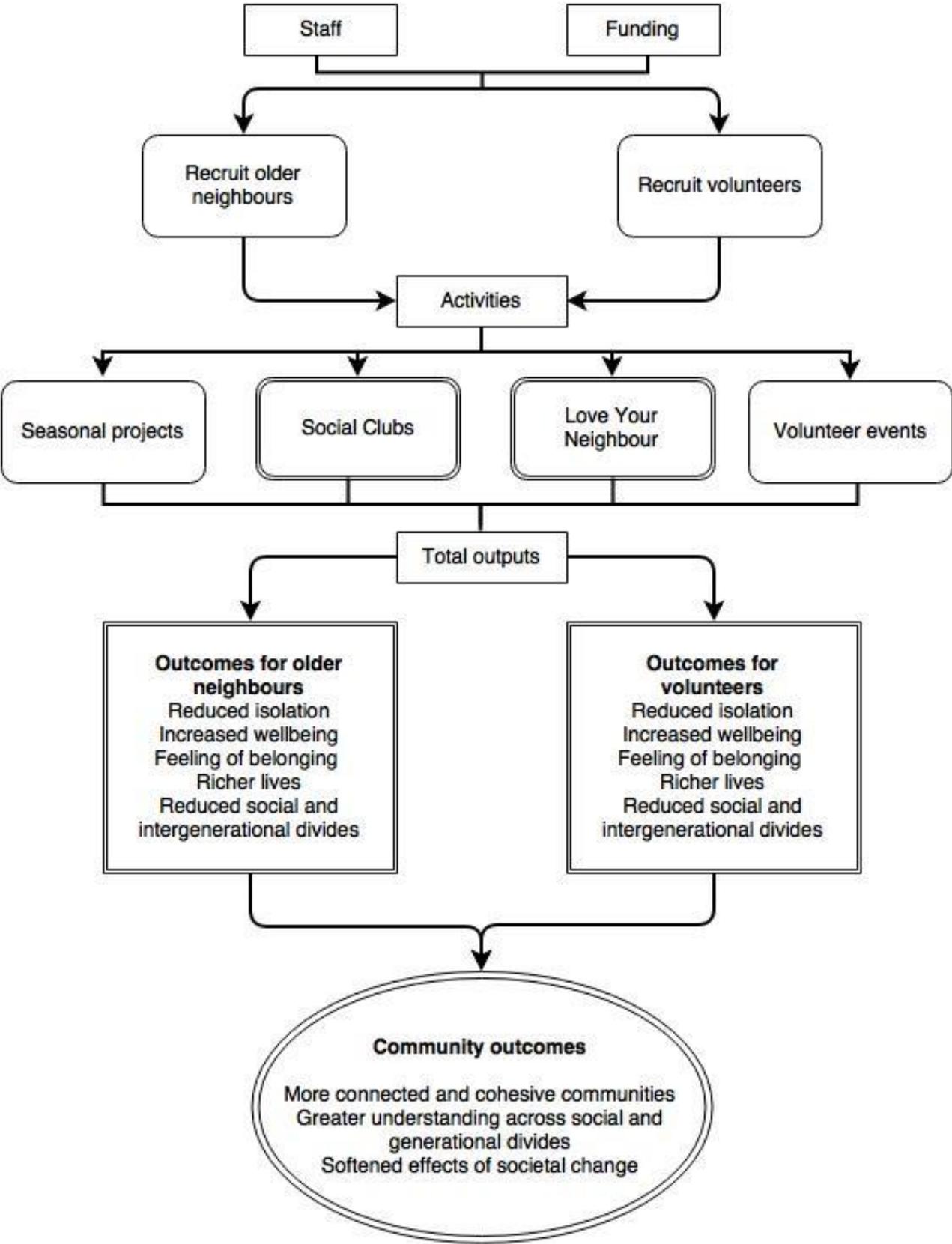
Longer-term outcomes for society

As well as achieving positive outcomes for older people and volunteers as individuals, it is important for the charities to have a positive impact on society more generally. There are three longer-term outcomes for the community in the theory of change:

- **more connected and cohesive communities,**
- **greater trust and understanding across social and generational divides, and**
- **reducing the negative effects of rapid gentrification, migration and societal change.**

At the current time it is not proposed that these outcomes are tracked in a systematic way. However, circumstantial evidence does suggest some positive impact in these areas. In future, it will be important to explore the contribution to changes in these outcomes, and use this information to refine approaches further.

The following diagram is a visual representation of the theory of change, and it highlights these outcomes.





Measuring the theory of change

The Cares family's theory of change requires the charities to monitor different types of indicators: inputs, outputs, and outcomes, as well as demographic information about participants in the networks. A full list of indicators can be found in Appendix 3, which are the indicators for the theory of change.

As a result of the challenges associated with this project, a key focus of this work has been to build a less burdensome evaluation approach, and one that is more likely to succeed in the long run. Rather than longitudinal monitoring of volunteers and older neighbours, it is recommended that the charities conduct snapshot evaluations every year or so to capture data on a number of core indicators and compare these to findings in previous years. This will enable the charities to establish whether outcomes for volunteers and older neighbours are improving or deteriorating, and will give evidence as to whether the approach is working. For three of the five indicators there is potential to compare outcomes with national statistics to see how the people involved in the Cares community networks compare to the national average.

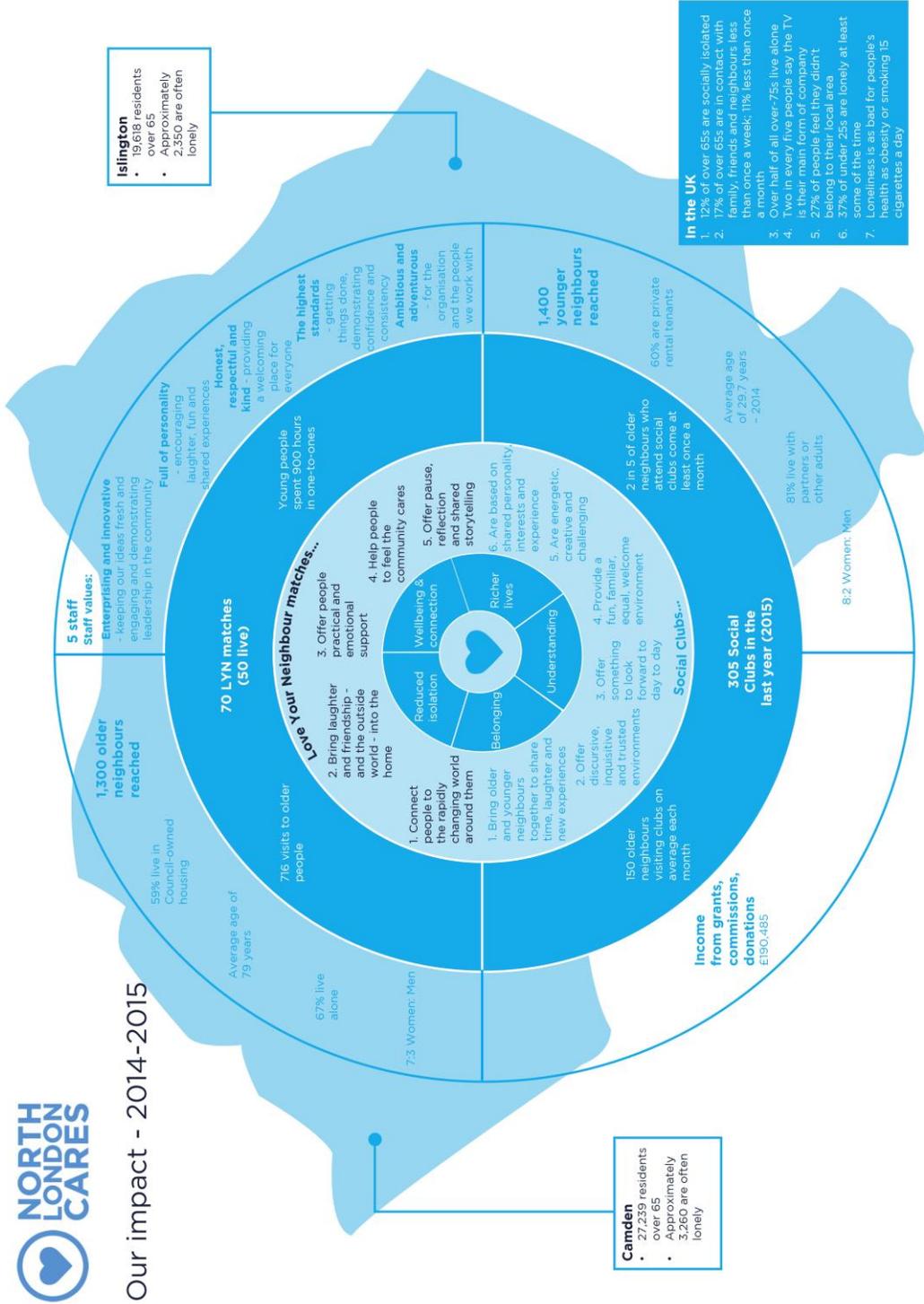
Snapshot evaluations will involve a sample of older neighbours and volunteers, rather than everybody that has engaged with Cares. This means that findings won't perfectly reflect the 'true' population of people involved, but they will be a good estimate. Efforts should be made to survey a cross-section of participants that reflects the general make up of the network. With more resource in future there may be opportunities to conduct larger sample surveys and/or longitudinal studies of particular individuals.

This is effectively the new approach to understanding what the charities do. The methodology is supported by a visual diagram of this work to represent the sense of location and community being such an essential part of what the charities do. These can be seen on the following page for North and South London Cares.

What this approach requires is a regular collection of data, and this is detailed below as a baseline table for the two charities for the period 1st September 2015 – 31st January 2016 (page 23 onwards). If the data used in this table is not for that period, it is highlighted within the table. This data should be developed and built on in future to give annual data sets.

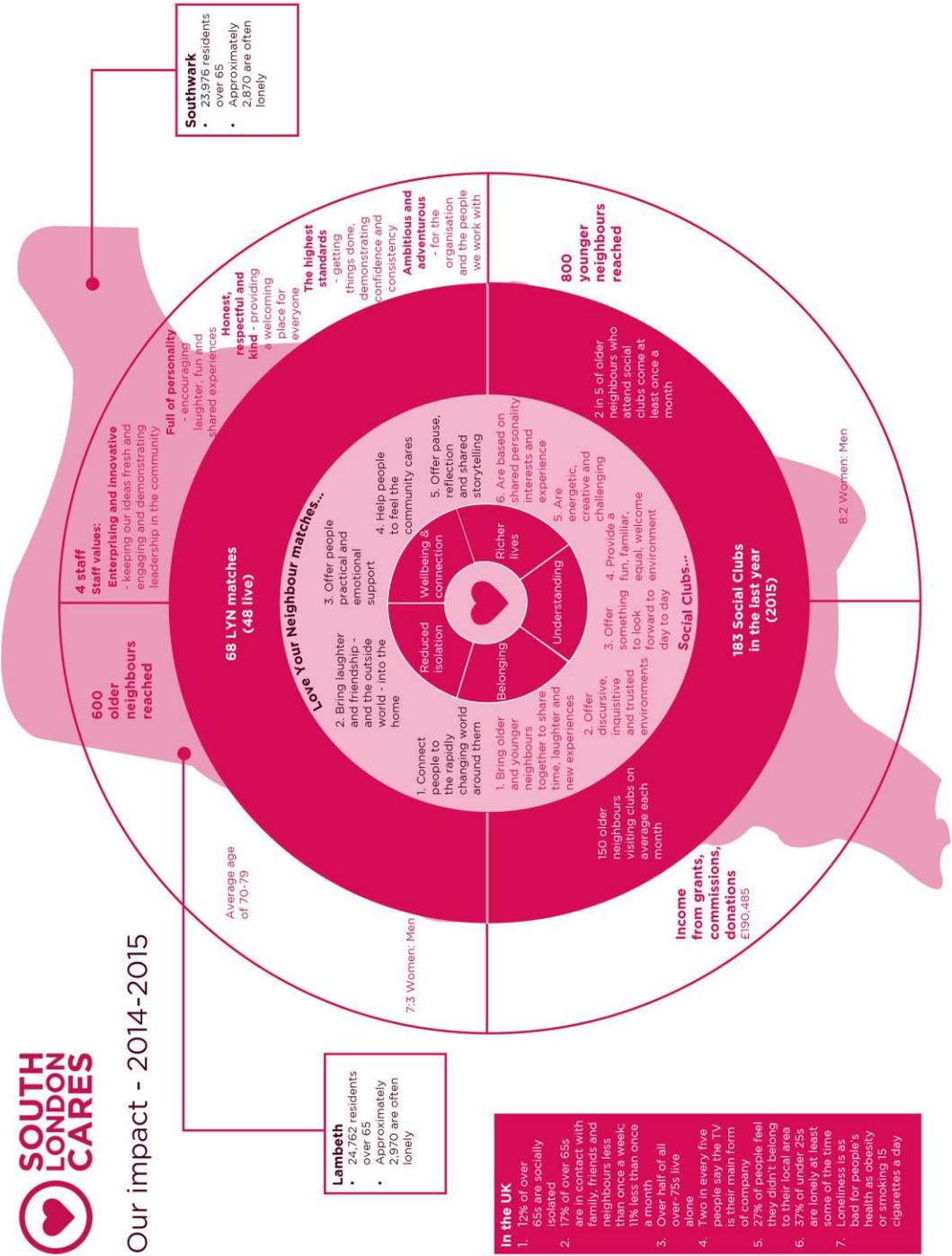


Our impact - 2014-2015





Our impact - 2014-2015



In the UK

1. 12% of over 65s are socially isolated
2. 17% of over 65s are in contact with family, friends and neighbours less than once a week, 11% less than once a month
3. Over half of all over-75s live alone
4. Two in every five people say the TV is their main form of company
5. 27% of people feel they didn't belong to their local area
6. 37% of under 25s are lonely at least some of the time
7. 1 in 5 of people have bad fitness, poor health or obesity or smoking 15 cigarettes a day



Stage	Indicator	2015-16 data (to date)		Data source	Notes
		NLC	SLC		
INPUTS					
<i>Staff</i>	Number of staff	5	4	Internal calculation	2 people part-time across both organisations
	Total staff years of experience at Cares	168 months across both organisations (14 years total)		Internal calculation	Calculated since May 2010
<i>Funding</i>	Total turnover	£190,485	£164,345	Annual accounts	2014-15 financial year
	Funding mix	Grants: 62% Commissions: 15% Donations: 23%	Grants: 85% Commissions: 0% Donations: 15%	Annual accounts	2014-15 financial year
	% change in turnover on previous year	125%	406%	Annual accounts	
	Amount of reserves	£75,616	£44,113	Annual accounts	
DEMOGRAPHICS					
<i>Older neighbours</i>	Average age	79 (mean)	70-79 (modal range)	Snapshot evaluations	SLC small sample size
	Gender (Female: Male)	7:3	3:1	NLC: Oct 2014 SLC: Dec 2015	
	Ethnicity	Not asked	Not asked	N/A	
	Living situation	Alone: 67% With partner: 18% Communally: 15%	Alone: 76% With partner: 10% Communally: 14%	Snapshot evaluations	SLC small sample size
	Accommodation type	Social rented: 66% Private rented: 4% Owner: 21% Other: 9%	Social rented: 38% Private rented: 0% Owner: 52% Other: 10%	NLC: Oct 2014 SLC: Dec 2015	
	Number of years living in borough	Not asked	Not asked	N/A	Place of birth asked in existing evaluations



Volunteers	Average age	31	Not asked	Snapshot evaluation NLC: Oct 2014	
	Gender (Female: Male)	8:2	8:2	Snapshot evaluations NLC: Oct 2014 SLC: Dec 2015	
	Ethnicity	Modal categories: <i>White British:</i> 58% <i>White European/Irish</i> : 17%	Not asked	Snapshot evaluation NLC: Oct 2014	
	Living situation	Alone: 15% With partner: 34% Communally: 51%	Alone: 16% With partner: 0% Communally: 84%	Snapshot evaluations NLC: Oct 2014 SLC: Dec 2015	SLC small sample size
	Accommodation type	Social rented: 8% Private rented: 60% Owner: 16% Other: 6%	Not asked	Snapshot evaluation NLC: Oct 2014	
	Number of years living in borough	Not asked	Not asked	N/A	To be asked in future snapshot evaluations
	Employment status	Employed: 82% Student: 14% Unemployed: 4%	Not asked	Snapshot evaluation NLC: Oct 2014	
	Sector	Private: 53% Public: 18% Non-profit: 19%	Private: 37% Public: 42% Non-profit: 21%	Snapshot evaluations NLC: Oct 2014 SLC: Dec 2015	
	Salary (mean average)	£32k	Not asked	Snapshot evaluation NLC: Oct 2014	



	Volunteering experience	Never: 23% Very occasionally: 31% From time to time: 28% Fairly often: 13% Regularly: 5%	Not asked	Snapshot evaluation NLC: <i>Oct 2014</i>	
OUTPUTS					
<i>Social Clubs</i>	Number of volunteers	145	93	Internal calculation	December 2015 only
	Number of older neighbours	133	141	Internal calculation	December 2015 only
	Number of Social Clubs	109	74	All Actions spreadsheet	
	Average ratio of volunteers: older neighbours	3:7	3:7		
	Number of hours volunteered	1970	941		
	Regularity of volunteer involvement (from total signed up)	At least monthly: 38% Once every 3 months: 8% Once or twice a year: 13% Once/never: 49%	Not asked	Snapshot evaluation NLC: <i>Oct 2014</i>	
	Regularity of older neighbour involvement	At least monthly: 54% Once every 3 months: 11% Once or twice a year: 8% Once/never: 27%	At least monthly: 62% Occasionally: 38%	Snapshot evaluations NLC: <i>Oct 2014</i> SLC: <i>Dec 2015</i>	Questions differ slightly between evaluations
<i>Love Your Neighbour</i>	Number of volunteer-older neighbour matches	64	50	Internal calculation	



	Average length of matches	41 under 6 months 23 over 6 months	28 under 6 months 22 over 6 months	Internal calculation	Don't currently have data for matches prior to October 2015
	Number of LYN interactions	238	196	All Actions spreadsheet	
	Number of hours volunteered	394	288		
<i>Winter Wellbeing</i>	Number of volunteers	14	16	Internal calculation	2015-16 project midpoint
	Number of older neighbours	183	194	WW spreadsheet	
	Number of interactions	575	614		
	Number of hours volunteered	Not counted	Not counted	N/A	Not currently monitored
<i>Volunteer events</i>	Number of events	26	28	Internal calculation	Includes inductions, socials, fundraisers (2015-16)
	Number of attendees	Not counted	Not counted	N/A	To be systematically monitored in future?
<i>Total outputs</i>	Total number of volunteers	Not currently able to calculate this – some crossover between projects	Not currently able to calculate this – some crossover between projects	N/A	This would require comparison across spreadsheets/ a single database
	Total number of older neighbours				
	Total number of hours volunteered	2364 hours = ~100 days	1229 hours = ~50 days	Sum of figures above	



INTERIM OUTCOMES					
<i>Older neighbours</i>	% who experience increased wellbeing	% experiencing slightly or significantly reduced isolation/loneliness: 74%	% feeling less lonely: 81%	Snapshot evaluations NLC: <i>Oct 2014</i> SLC: <i>Dec 2015</i>	Different question wording; SLC small sample size
	% who experience reduced isolation	See above	% feeling less isolated: 76%		
	% who feel they belong in their local community	% experiencing slightly or significantly improved connection with neighbours and community: 51%	% feeling more in touch: 90%		
	% who have richer lives	% given slightly or significantly wider range of experiences: 76%	Not asked	Snapshot evaluations NLC: <i>Oct 2014</i>	Different question wording
	% who experience reduced intergenerational and social divides	% improved view of young people and given fresh contact: 39%	% feeling closer to young people: 86%	Snapshot evaluations NLC: <i>Oct 2014</i> SLC: <i>Dec 2015</i>	Different question wording; SLC small sample size
	<i>Volunteers</i>	% who experience increased wellbeing	Not asked	% experienced improved moods: 53%	Snapshot evaluations SLC: <i>Dec 2015</i>
% who experience reduced isolation		Not asked	Not asked	N/A	



	% who feel they belong in their local community	% feeling more connected to people and community: 98%	% feeling better connected to community: 84%	Snapshot evaluations NLC: <i>Oct 2014</i> SLC: <i>Dec 2015</i>	Different question wording; SLC small sample size
	% who have richer lives	Not asked	Not asked	N/A	
	% who experience reduced intergenerational and social divides	Not asked	% appreciating older people more: 74%	Snapshot evaluations SLC: <i>Dec 2015</i>	Different question wording; SLC small sample size
LONGER-TERM OUTCOMES					
<i>Society as a whole</i>	More connected and cohesive communities	Not asked	Not asked	N/A	These longer-term outcomes are not intended to be monitored consistently for the time being
	Greater trust and understanding across social and generational divides	Not asked	Not asked	N/A	
	Reducing the negative effects of gentrification, migration and societal change	Not asked	Not asked	N/A	



Conclusions

This study has developed a significant amount of learning for the two charities, and much of that is held within the supplementary documents which support this report.

North and South London Cares offer relationship based activities, and an evaluation approach for them must respect and work with it. It also must try to measure the right things, rather than the things which external bodies and commissioners may want.

The development of this report gives the two charities a solid foundation from which to measure consistent information about what they do, who they help and how that work is progressing.

The research and the evidence it unfolds have solidified the charities at a level one standard of evidence, through a meaningful theory of change and set of organising principles for the data. It has also established the process through which data could be collected in future which would build the evidentiary quality of the model to level two standards of evidence. Right now the data does not exist to support this.

There is, however, significant existing literature and qualitative information which suggests that the charity is supporting improvements in happiness, increasing connections and allowing people (both older neighbours and volunteers) to enjoy their lives and feel more connected to the places they live and the people around them.

Recommendations

Based on these conclusions it is recommended that the two charities should focus on cementing their model and ways of working, and collect a good set of data about delivery over the coming years by using the measurement approach proposed in this document.

They should continue to build up the bank of stories and experiences that they have for the people they work with which illustrate and, potentially, challenge the theory of change.

The two charities should consider the most appropriate ways to use snapshot evaluations based on the learning from this study. The processes defined in the measurement appendix are the initial proposal, but it will be essential that the approach is appropriate for the work of the organisations.

These three recommendations should allow the charities to continue to test and consider the key pieces of information that suggest their model is working. These have been established through the new theory of change and measurement approaches, and give the charities the potential to have a robust and meaningful approach to impact reporting – for all their audiences – in future.



Appendix 1: Neighbour survey

Hi, [older neighbour] my name is [researcher], and I got your number from [names of staff] from North London Cares/ South London Cares, who I'm doing some research work with. Do you know the people I'm talking about?

Great, well they've asked me and my colleagues to work with them on understanding whether and how their work benefits people. And so for us to do that we need to speak to and try and understand the people they are working with: people like you.

To allow us to do this we're trying to speak to everybody they are working with and asking them a set of questions. Would you mind if I asked you those questions – the answers will only ever be seen by me, as we will pull them all together with other answers before sharing them. The idea is to understand everybody together that [staff names] work with, not you in particular.

Does that sound ok? Have you got any questions for me at this stage?

I would like to ask you four questions about your feelings on aspects of your life. There are no right or wrong answers. For each of these questions I'd like you to give an answer on a scale of nought to 10, where nought is 'not at all' and 10 is 'completely'.

1. Overall, how satisfied are you with your life nowadays?
2. Overall, to what extent do you feel that the things you do in your life are worthwhile?
3. Overall, how happy did you feel yesterday?
4. Overall, how anxious did you feel yesterday?

For each of these next 6 questions can you answer either: yes a great deal; yes a little; more or less; no a little; or no a great deal? I'm sorry if they seemed a little personal, but they're the best way to understand a group of people together. I hope you don't mind.

1. I experience a general sense of emptiness
2. There are plenty of people I can rely on when I have problems
3. There are many people I can trust completely
4. There are enough people I feel close to
5. I miss having people around
6. I often feel rejected



These following three questions are not on a scale.

1. During the last 6 months, how many times have you been to hospital about your own health?
2. During the last 6 months, how many times have you been to the GP about your own health?
3. During the last 6 months, have you received personal support from [your local] council or social services? If so, what kind of support and how often?

I'm sorry again if they seemed a little personal, but they're the best way to understand a group of people together. I hope you don't mind.

1. *Can I just ask you to tell me your age?*
2. *And your marital status?*

Finally, we would like to call you again in six months, to talk about the issues again. Are you happy for us to do that?

Thank you so much for your time [older neighbour]. We really appreciate it. I hope you have a lovely day.

Survey Protocols

1. All new people joining/ being referred to either NL Cares or SL Cares will be contacted within 1 month of the project start, but once the research is up and running this will reduce to 2 weeks of their first contact with NL/SL Cares.
2. Details will be passed from NL/SL Cares to Renaishi for Renaishi to call the individual.
3. At all times Renaishi will respect the wishes of the individuals we call if they decline to take part.
4. Renaishi will try to call on 3 occasions and speak to NL/SL Cares if we are unable to contact the individual after that point to make a decision about how to contact/ continue.
5. Renaishi will be responsible for all data collected and will conform to our data protection policies. We will not send individual data to NL/SL Cares, only anonymised data sets.
6. Renaishi will flag any social, emotional and psychological concerns to NL/SL Cares if they arise in line with our policy of working with vulnerable adults.



Appendix 2: Topic guides

Paired interviews

Seven loose question areas, allowing for interviewee to drive the conversation

You

Life in the area

Family and friends

(Statutory or community) services used

North London Cares

Relationship with volunteer

Value

Staff interviews

Objectives of the four sessions

We will aim for four sessions, and it will be important to get them all in the diary alongside a timetable for engagement with the wider staff team. It may be important to work with the wider team on the model, for example, rather than just the CEO.

To understand and codify questions around the following four areas:

Scaling and growth

1. The history of the charities and their future potential in single areas
2. The practical structure of funding and management in each existing area and the implications
3. Governance
4. Management structure
5. Realism/ desirability of scaling



The model

1. The elements of delivery
 - a. Social clubs
 - b. Love Your Neighbour
 - c. Seasonal activities
 - d. Connections and coherence
2. Strategic relationships
 - a. Public
 - b. Private
 - c. Voluntary
 - d. Role of the enterprise
3. Volunteer relationships
 - a. Recruitment
 - b. Current methods and challenges
 - c. Demand led?
 - d. Volunteer profile
 - e. Organiser's role?
 - f. Screening and safety
4. Older neighbour relationships
 - a. Strengths and weaknesses of referral routes
 - b. Community champions
 - c. Different types of older neighbour?
 - d. Who doesn't engage?

Systems and administration

1. CRM
 - a. Impact on volunteers
 - b. Impact on processes
2. Systems versus style
3. Staffing
 - a. Roles and capacity

Impact

1. Vision and aims
 - a. What does success look like?
 - b. How will you know?
 - c. How big is enough?
2. What measures matters
 - a. Cares led
 - b. Volunteer led
 - c. Commissioner led

3. Relationships and communities versus more clinical impacts

Questions to consider throughout...

- Have interactions and interventions with volunteers from North/South London Cares improved the connection, resilience, confidence, strength, resources, skills, and lives of the older people they work with?
- Do older neighbours feel less lonely, anxious, depressed, isolated or alone as a result of their interactions and interventions? How do these statistics change over time, as interactions and interventions deepen?
- Has having access to a community network (and specifically for older neighbours with “Love Your Neighbour” volunteers) helped people to achieve practical tasks?
- Have the interactions with North/South London Cares volunteers improved older people’s perception of young people in the area?
- Do older people feel more equipped to deal with the pace of change in the modern world, globalisation, gentrification, migration, technology, etc., as a result of their interaction with volunteers?
- Impact for volunteers was around feeling more connected to the community and feeling more able to appreciate older people.
- What motivated volunteers to get involved to support an older neighbour? How does this differ across professions, age ranges, level of involvement, etc.?





Appendix 3: Theory of change indicators

Inputs

- Number of staff
- Collective number of years of experience that staff have had with Cares
- Total organisational turnover (total income)
- Ratio of income from private grants : commissions : donations expressed in percentage terms
- Percentage change in total organisational turnover compared to the previous year
- Total amount of reserves held by the charity

Demographics

Applicable to both older neighbours and volunteers:

- Average (mean) age
- Gender (Male/Female/Prefer not to say), expressed as percentage ratio
- Ethnicity (Choose options to match published statistics), expressed as percentage ratio
- Living situation (Alone/with a partner/with family or communally), expressed as percentage ratio
- Accommodation type (Social rented/private rented/owner occupied/other), expressed as percentage ratio
- Number of years living in the borough (less than 1, 1-5, 6-10, 11-15, 15-20, 21-25, more than 25), report as percentage ratio

Applicable to volunteers:

- Employment (Employed/student/not working), expressed as percentage
- Sector of employment (if applicable) (Private/Public/Non-profit), expressed as percentage
- Salary (if applicable) (<15000, 15000-19,999, 20000-24999, 25000-29999, 30000-34999, 35000-39999, 40000-44999, 45000+), expressed as modal category
- How often have you volunteered before? (Regularly/Fairly often/Occasionally/Never), expressed as percentage

Outputs

Social Clubs:

- Number of volunteers who have volunteered at least once
- Number of older neighbours who have participated at least once
- Number of Social Clubs held
- Average ratio of volunteers : older neighbours at Social Clubs
- Number of hours volunteered at Social Clubs
- Ratio of volunteer involvement at least monthly : at least every 3 months : once or twice a year : less than once a year : never (expressed as a percentage)
- Ratio of older neighbour participation at least monthly : at least every 3 months : once or twice a year : less than once a year : never (expressed as a percentage)



Love Your Neighbour:

- Total number of ongoing matches
- Average length of match
- Number of LYN interactions
- Number of hours volunteered through LYN

Winter Wellbeing:

- Number of volunteers who have volunteered at least once
- Number of older neighbours who have participated at least once
- Number of interactions
- Number of hours volunteered in total (may be estimated)

Volunteer events:

- Number of events
- Number of attendees

Compiled for all of the projects:

- Total number of (discrete) volunteers (not double-counting those who volunteer for more than one project)
- Total number of (discrete) older neighbours (not double-counting those who participate in more than one project)
- Total number of hours volunteered (adding the number of hours volunteered for each project)

Interim outcomes

Applicable to both older neighbours and volunteers:

- Percentage who experience increased wellbeing: 'Overall, how satisfied are you with your life nowadays?' (scale 0-10), assessed longitudinally for a sample of individuals using a baseline, or taking an average of a sample of Cares older neighbours/volunteers and comparing to ONS published statistics, (or both)
- Percentage who experience reduced isolation: 'My relationships are satisfying as I would want them to be (0-4)', assessed longitudinally for a sample of individuals using a baseline, or taking an average of a sample of Cares older neighbours/volunteers and comparing to published statistics, (or both)
- Percentage who feel they belong in their local community, ascertained using the question 'I feel I belong to my neighbourhood' (0-4), assessed longitudinally for a sample of individuals using a baseline, or taking an average of a sample of Cares older neighbours/volunteers and comparing to ONS published statistics, (or both)
- Percentage who have richer lives thanks to their involvement in Cares: 'I feel my life is richer since I have become involved in Cares' (0-4), taking a post-intervention sample average at regular intervals
- Percentage who experience reduced intergenerational and social divides: 'I feel connected to people from different social backgrounds and age groups than me' (0-4), taking a post-intervention sample average at regular intervals



Longer-term outcomes

The following outcomes do not need to be systematically monitored until Cares grows to a size where this is both feasible and meaningful:

- More connected and cohesive communities
- Greater trust and understanding across social and generational divides
- Reducing the negative effects of gentrification, migration and societal change