Enhancing Lifelong Learning for Seniors (ELLFS)

Improving the social inclusivity of Hartlepool and District University of the Third Age – a qualitative study

End of award report to Averil Osborn Fund

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Summary

Background
The University of the Third Age (U3A) is a cooperative for lifelong learning for people who are retired or not in full time employment. This report details a collaborative qualitative study conducted by Newcastle University and the Hartlepool branch of the U3A exploring reasons why the membership of Hartlepool and District University of the Third Age (H&DU3A) does not reflect the socio-demographic make-up of the local area. This study was formulated following H&DU3A concerns about the social inclusivity of their group as there appears to be a significant lack of participation from people living in social housing and those from non-professional occupations.

Methods
Study design was co-produced by members of H&DU3A and researchers from Newcastle University’s Institute of Health and Society. In total, sixty participants were recruited to this study from existing organisations aimed at retirees in Hartlepool e.g. 50+ fitness groups and residents associations. A combination of interviews (n=7) and focus groups (n=8) were conducted to explore participant engagement in learning since retirement, local opportunities for older adults, and knowledge and experience of H&DU3A. Data collection was facilitated by H&DU3A members, allowing them to gain experience as ‘lay researchers’.

Findings
The demographic profile of included participants largely reflected the socio-economic make-up of the area and included individuals living in areas considered to have high levels of socio-economic deprivation and from non-professional backgrounds. Respondents were passionate about engaging in local opportunities as they recognised the benefit of remaining active in older age. Several barriers were highlighted as potentially restrictive to engagement in lifelong learning, these included: cost, transport, poor health, disability, and caring responsibilities. In relation to H&DU3A three primary barriers were highlighted: lack of knowledge, organisational name and location. It was apparent that lack of knowledge regarding the purpose and remit of the U3A was particularly restrictive. Upon learning more about the U3A many participants appeared interested in becoming involved.

Conclusion
This study has outlined that dispelling the ‘middle-class’ myths associated with the U3A would encourage more people to join and a thriving organisation would emerge. Furthermore, the cooperative self-help philosophy embodied by the U3A resonates with the traditions of learning in industrial communities. It is important to stress that the U3A membership defines the group and thus to be socially inclusive it is vital that the organisation reflects the local community.

Dissemination
Dissemination activities are planned. These include a participatory workshop, tailor-made publications to funders, the U3A, voluntary sector and academics.
Introduction

The University of the Third Age (U3A) is an organisation providing non-formal learning for people who are retired or no longer in full time employment based on a ‘mutual-aid model’-promoting lifelong learning through knowledge sharing (Moody, 2004, p. 31). For an excellent overview of the history and development of the U3A see Formosa (2014). The term lifelong learning refers to ‘learning that goes beyond school and formal education … a learning process that spans the whole of one’s life’ (Brown, Golding and Foley, 2008, p. 1). U3A’s have existed in England since 1981 and continue to increase in popularity year on year. There are over 915 U3A organisations across the UK, with some 320,500 members (University of the Third Age, 2014). The Hartlepool and District branch (H&DU3A) was founded in 2011 by a small group of individuals, following an attempt to do so which failed in 2008. Since then a number of groups have been set up according to membership interests and currently H&DU3A offers nineteen different activities, including: family history, German, computing and walking. Despite this range of activities, there were concerns within the group that H&DU3A was not attracting the level of interest it should, particularly from individuals from lower socio-economic groups. With this in mind, H&DU3A submitted a question based on social inclusion in life-long learning in Hartlepool to the ‘Research Ideas from the Third Age’ (RITA) competition run by VOICENorth, the North East’s Public Engagement fund and U3A North East. Their entry won first prize. Following this, it was deemed important to address this question; particularly in light of the perceived health benefits of lifelong learning and the known demographic make-up of Hartlepool. With support from Dr Suzanne Moffatt, a senior lecturer from Newcastle University, H&DU3A acquired financial support from the Averil Osborn Fund and Newcastle University to run a small scale research project in collaboration with the Institute of Health and Society at Newcastle University. Considering Formosa’s recent suggestion that ‘most U3As neither participate in nor produce research’ (2014, p. 52), the involvement of the U3A in this sense can be seen as innovative. The research team consisted of five members from H&DU3A:

Norman Bell (NB), Judith Bell (JB), Chris McLoughlin (CM), Jessica Scott (JS) and Maureen Smith (MS) and two researchers from Newcastle University: Dr Suzanne Moffatt (SM), and Rebecca Patterson (RP). The primary aim of this research project was to establish why eligible individuals, particularly those from lower socio-economic groups, do not participate in Hartlepool and District U3A and to identify ways that barriers to participation can be overcome. To address this aim, a qualitative approach was adopted consisting

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1 VOICENorth is a Newcastle University initiative aimed at increasing engagement and knowledge exchange in older age.
of a combination of semi-structured interviews (n=7) and focus groups (n=8) with 60 residents of Hartlepool over the age of 50. This report presents the research findings, including an exploration of views of opportunities in Hartlepool, the U3A and barriers to participation.
**Background**

It is widely recognised that lifelong learning is beneficial to the maintenance of good health in older age, and is seen as key to ‘successful ageing’ (Jamieson, 2012; Formosa, 2014). Remaining mentally active in older age is believed to promote wellbeing and help maintain the physical and cognitive health status of individuals (Jenkins, 2011; Formosa, 2014), potentially protecting against age-related cognitive decline (NIACE, 2009, p. 2). Indeed a NIACE report published in 2000 reported that involvement in learning can positively impact health behaviours and increase an individual’s ability to cope with illness (Skinner, 2006). Alongside better health, numerous other benefits are regularly discussed in connection with this practice, such as increased self-confidence, social involvement and ability to cope alongside an improved outlook on life (Dench and Regan, 2000; Boulton-Lewis, 2010). Despite this, there appear to be few UK based health initiatives encouraging retirees to capitalise on the benefits of learning activities – with changes in governmental policy leading to reduction in the availability of lifelong opportunities (Dainton, 2009). It is frequently documented that in comparison to other age groups relatively few retirees attend formal education courses in the UK, with participation in adult learning decreasing with age (‘78% at age 17-19, 42% at age 45-54, 31% at age 55-64, 18% at age 65-74 and 13% at age 75+’ (NIACE, 2009, p. 1). One barrier to participation in formal education appears to be concern regarding the institutionalised nature of formal education, with structured learning (lectures) and regular assessments (Foskey and Avery, 2003). For individuals who do not want this level of commitment, the U3A offers an alternative – non-formal, peer based learning for fun not qualifications. Regardless of this difference, the demographic profile of those engaging in both formal and non-formal learning has remained largely consistent since the introduction of the U3A. Middle class individuals with high levels of educational attainment make up a large proportion of those that attend educational courses and the U3A, whilst those from lower socio-economic groups appear much less likely to participate (Jamieson, Miller and Stafford, 1998; Glendenning, 2001; Formosa, 2007, 2014). Moody (2004, p. 38) notes that this trend occurs irrespective of program cost, stating ‘even when older adult education programs are completely free… the social profile of participants looks the same… that is, the same middle-class and professional retirees attend’. This problem is not confined to UK U3As. Research exists suggesting those in Malta, Spain, Australia and New Zealand all appear largely ‘elitist’ – comprised of members with relatively high levels of educational attainment (Swindell, 1993; Formosa, 2000, 2012; Findsen, 2005; Alfageme, 2007).

Considering that this has been a concern for a significant period of time, there is a distinct lack of British research into why this may be the case. A scoping search of ERIC/ASSIA, British Education Index, Australia Educational Index, IBSS, Web of Knowledge and Scopus databases revealed that the number of British papers located on lifelong learning and the U3A was small, with the majority originating from Australia (Swindell, 1993; Williamson, 1995, 1997, 2000; Hebestreit, 2006 2008) and Malta (Formosa 2000, 2007, 2009, 2012). To the best of our knowledge, no qualitative studies have been undertaken in the UK exploring
participation in the U3A. The relative lack of research conducted on adult participation in lifelong learning activities has been recognised by academics including Moody (2004) and Findsen and Formosa (2011).

This report aims to address this gap in the literature, exploring why individuals, particularly those from lower socio-economic groups, are not participating in H&DU3A activities and potential ways to overcome barriers.
Hartlepool was once a key industrial town with a reputation for shipbuilding due to its position on the coast (see figure 2). Its maritime heritage is a great source of pride for
residents and is still apparent upon visiting the area. Historical local authority boundary changes which merged ‘Old Hartlepool’ (The Headland) and ‘West Hartlepool’ (see figure 3) have resulted in a strong sense of identity and loyalty on the Headland and within local villages, impacting the propensity of residents to travel between different areas. This feature of the population became evident during data collection, reflecting research detailing that attachment to place increases with age (Gilleard, et al. 2007). The total population stands at just over 92,000, of which 16,000 are over the age of 65 (Hartlepool Borough Council, 2012). Due to high levels of deprivation (indicated in figure 4), the health of the residents is poorer than the national average, life expectancy is lower than the average (12.3 years less for men and 8.2 for women in the most deprived areas) and the overall mortality rate is higher than the average for England (PHE, 2013):

![Figure 4: Map and graph displaying the deprivation scores for Hartlepool (PHE, 2013)](image)

There is little ethnic variation, with black and minority communities making up only 2.4% of the population (ONS, 2011 – 97.6% white). This figure has doubled in recent years (from 1.2% in 2008 - Hartlepool Council webpage) indicating that the majority of individuals from these communities have lived in the area for a relatively short period of time and thus are unlikely to be of retirement age.
Methods
Participants were recruited from a number of existing organisations aimed at those within the period of life known as the ‘third age’ - a stage of life, defined by Peter Laslett, when an individual ‘becomes free to satisfy personal ambitions and needs’ following retiring from work and completing the majority of family responsibilities (Williamson, 2000). Examples of these organisations include: residents associations, craft classes and 50+ fitness groups. Targeting individuals in this way facilitated the location of participants who, although eligible for U3A membership, do not participate in its activities, allowing in-depth exploration of why this may be the case. Despite considerable interest from potential participants, time and budget limitations meant that the sample had to be capped at 60 people. However, towards the end of fieldwork considerable recurring and overlapping themes were apparent, indicating that data saturation was met to a considerable extent.

All interviews were conducted on a one-to-one basis by Rebecca Patterson. Focus groups were led by Patterson and facilitated by members of Hartlepool and District U3A (N. Bell [2], J. Bell [5], C. McLoughlin [1], J. Scott [3], and M. Smith [4]). The interviews and focus groups, lasting approximately an hour, were structured around a topic guide produced prior to commencing fieldwork, following a number of in-depth discussions within the project team. The guide comprised several open-ended questions addressing three topics: experiences of learning activities since retirement, knowledge and experience of groups and opportunities for retirees in Hartlepool, and knowledge and experience of the University of the Third Age (appendix 1). This was structured in such a way as to encourage participants to explore the topic of lifelong learning, without directly questioning them on the concept. The decision to approach the topic in this way was made following initial phone conversations with potential participants which highlighted widespread lack of understanding of this term. Ethical permission was obtained from Newcastle University Research Ethics Committee. In line with ethical guidelines, informed consent was obtained from all participants using the consent form detailed in the appendix, following the provision of an information sheet explaining the project in detail (appendix 2). After obtaining both written and verbal permission from participants responses were recorded using a digital device and transcripts were produced using pseudonyms to ensure the data remained confidential. In addition to this, a short demographic questionnaire was presented to participants to collect information used to compare the demographic profile of study participants against that of existing U3A members (appendix 3).

As part of the collaborative process, the analytical process consisted of a number of group discussions involving all team members, during which U3A members were able to contribute their understanding of the data. This allowed the exploration of various interpretations – including both ‘insider’ (U3A –residents of Hartlepool) and ‘outsider’ (Newcastle University staff) perspectives. A thematic approach was used to analyse data – a method for ‘identifying, analysing and reporting patterns’ within qualitative data (Braun and
Clarke, 2006, p. 79). This involves a process of re-reading the transcripts numerous times to note emerging themes, apply tentative codes and categorise sections of the text following the production of a coding scheme. From this a number of themes were identified, including an extensive list of barriers to participation.
Findings
We begin by outlining the participant characteristics and contextualising this by comparing participant’ demographic details with the U3A membership and Hartlepool as a whole.

Table 1 outlines the details of each fieldwork activity (8 focus groups, 7 interviews), including: number of participants, a description of the activity group from which the participant was located, group location and participant characteristics (gender, age and occupation type).

<table>
<thead>
<tr>
<th>Fieldwork Reference</th>
<th>No. present</th>
<th>Description of group from which participants were located</th>
<th>Group Location</th>
<th>Participant characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus group 1 (FG1)</td>
<td>5</td>
<td>60+ Social club Games, bingo, socialising</td>
<td>Outskirts of city centre (N)</td>
<td>All female 67-88 All blue collar</td>
</tr>
<tr>
<td>Focus group 2 (FG2)</td>
<td>11</td>
<td>Health group Talks, support, advice</td>
<td>City Centre</td>
<td>Mainly men (7/11) 66-86 Mainly blue collar</td>
</tr>
<tr>
<td>Focus group 3 (FG3)</td>
<td>6</td>
<td>Interest group Talks, resource provision</td>
<td>Headland (2.5 miles from city centre)</td>
<td>Mainly female (2/3) 64-88 Mainly blue collar</td>
</tr>
<tr>
<td>Focus group 4 (FG4)</td>
<td>5</td>
<td>Social club Talks, socialising</td>
<td>City Centre</td>
<td>All female 72-87 Mixed blue and white collar</td>
</tr>
<tr>
<td>Focus group 5 (FG5)</td>
<td>5</td>
<td>Health group Talks, developing resources to improve health, socialising</td>
<td>City Centre</td>
<td>Mainly female (4/5) 55-80 Mixed blue and white collar</td>
</tr>
<tr>
<td>Focus group 6 (FG6)</td>
<td>6</td>
<td>Ladies sport club Seasonal activity</td>
<td>Central sports facilities</td>
<td>All female 75-82 Mainly white collar</td>
</tr>
<tr>
<td>Focus group 7 (FG7)</td>
<td>7</td>
<td>Ladies activity class Arts and Crafts, taught by a qualified tutor</td>
<td>Outskirts of city centre (NE)</td>
<td>All female 53-80 Mixed blue and white collar</td>
</tr>
<tr>
<td>Focus group 8 (FG8)</td>
<td>6</td>
<td>50+ exercise classes Various physical activities</td>
<td>City Centre</td>
<td>All female 62-77 Mainly white collar</td>
</tr>
<tr>
<td>Interview 1 (INT1)</td>
<td>1</td>
<td>Keep-fit group Exercise classes aimed at ladies over 55</td>
<td>Greatham (4 miles from city centre)</td>
<td>Female 65 Blue collar</td>
</tr>
<tr>
<td>Interview 2 (INT2)</td>
<td>1</td>
<td>Activity Class</td>
<td>Headland (2.5 miles from city centre)</td>
<td>Female</td>
</tr>
<tr>
<td>-------------------</td>
<td>---</td>
<td>----------------</td>
<td>--------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Interview 3 (INT3)</td>
<td>2</td>
<td>Sport club</td>
<td>Central sports facilities</td>
<td>Mixed (couple)</td>
</tr>
<tr>
<td>Interview 4 (INT4)</td>
<td>1</td>
<td>Sport club</td>
<td>Central sports facilities</td>
<td>Male</td>
</tr>
<tr>
<td>Interview 5 (INT5)</td>
<td>1</td>
<td>60+ Social club</td>
<td>Owton Manor</td>
<td>Female</td>
</tr>
<tr>
<td>Interview 6 (INT6)</td>
<td>1</td>
<td>60+ Social club</td>
<td>Owton Manor</td>
<td>Female</td>
</tr>
<tr>
<td>Interview 7 (INT7)</td>
<td>2</td>
<td>Residents association</td>
<td>West park (1.8 miles from city centre)</td>
<td>Mixed (couple)</td>
</tr>
</tbody>
</table>
Table 2 outlines the demographic profile of the study sample, categorising by: gender, age, occupation prior to retirement and length of residence in Hartlepool.

**Table 2: Summary of participant demographics (n=60)**

<table>
<thead>
<tr>
<th>Demographic feature</th>
<th>Category</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Male</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>47</td>
</tr>
<tr>
<td>Age</td>
<td>50-54</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>55-59</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>60-64</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>65-69</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>70-74</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>75-79</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>80-84</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>85+</td>
<td>5</td>
</tr>
<tr>
<td>Occupation prior to retirement</td>
<td>Blue collar</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>White collar</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>n/a (e.g. housewife)</td>
<td>1</td>
</tr>
<tr>
<td>Years resident in Hartlepool</td>
<td>'All my life’ (from childhood)</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Majority of adult life (professional life)</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Relatively recent resident (≤20 yrs.)</td>
<td>8</td>
</tr>
</tbody>
</table>

Participants were aged between 53 and 88 years old, with the majority between the ages of 65 and 84 (n=46). As is typical of most research projects, there were more female participants than male (n=47), although men did make up over a fifth of the sample (n=13). This gender imbalance was primarily due to a greater willingness among women to participate in focus groups, as is indicated by table 1. Although, the demographic questionnaire identified various occupational backgrounds, there appeared to be an almost equal mix of blue and white collar professions among participants. However, occupations among participants did appear to be gendered. Whilst men had primarily worked in blue collar positions involving manual labour, most women had worked in white collar administrative positions. To various degrees, all focus groups were comprised of participants from both blue and white collar professions, except the first focus group which was solely blue collar (see table 1). The majority of participants had lived in Hartlepool for most of their lives (n=52) – 42 stated they had lived in the area their whole life, whilst a much smaller portion of the sample (n=8) indicated that they had moved to Hartlepool relative recently. All had lived in the area for at least 5 years, with the most recent resident having arrived in 2009 (FG7).
Table 3 illustrates the proportion of the study sample within each quintile of deprivation (1 being among the most deprived in the UK, 5 being the least – indicated in figure 4) alongside H&DU3A membership and Hartlepool as a whole (using lower layer super output areas (LSOA) - small geographical areas used by the Office for National Statistics 2007-2010 to categorise sections of the UK with the aim of improving the way statistics are reported (ONS webpage). Percentages have been included in this table for comparison purposes. It must be noted that due to sample size this data should be interpreted with caution.

Table 3: Quintile of deprivation of respondents, H&DU3A and Hartlepool area

<table>
<thead>
<tr>
<th>Quintile of deprivation</th>
<th>No. in each quintile (%)</th>
<th>Study sample (n=60)</th>
<th>H&amp;DU3A members (n=106)</th>
<th>Hartlepool LSOA (2010) (n=63)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Most deprived)</td>
<td></td>
<td>28 (44.4)</td>
<td>14 (13.2)</td>
<td>20 (33.3)</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>10 (15.9)</td>
<td>12 (11.3)</td>
<td>9 (15)</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>11 (17.5)</td>
<td>15 (14.2)</td>
<td>12 (20)</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>4 (6.3)</td>
<td>13 (12.3)</td>
<td>4 (6.7)</td>
</tr>
<tr>
<td>5 (Least deprived)</td>
<td></td>
<td>7 (11.1)</td>
<td>42 (39.6)</td>
<td>11 (18.3)</td>
</tr>
<tr>
<td>n/a</td>
<td></td>
<td>3 (4.8)</td>
<td>10 (9.4)</td>
<td>4 (6.7)</td>
</tr>
</tbody>
</table>

Table 3 shows that despite initial fears about being able to recruit individuals from lower socio-economic groups due to their often isolated nature, a large majority of the sample appeared to live in areas of high deprivation. Comparing the study sample with that of H&DU3A members it is evident that the demographic profile of the sample participants is a mirror image of that of U3A members (e.g. majority of study participants were from the most deprived quintiles 1 and 2 [n=38 60%], whilst the majority of U3A members were from the least deprived quintiles 4 and 5 [n=55 52%]). The desired demographic of participants was achieved as interviewees were predominantly from demographic areas which do not appear to currently engage in U3A’s activities. The study sample also broadly reflects the overall deprivation profile for Hartlepool (LSOA).
Opportunities in Retirement

Overall study participants were relatively active, engaged in at least one activity on a regular basis. Remaining active in older age was general regarded as important as Grace (72), pointed out,

When I retired I said to myself, "I am not going to be one of those women that sit in the house all day watching the television." I go out every day but I’m quite willing to join some more groups. I’ve got a Tuesday free. (FG4)

Health was given as the primary reason for remaining engaged in activities, with most participants acknowledging the benefits of being physically and mentally active in older age. Other sources of motivation included a desire for self-fulfilment, to meet new people and contribute to society. Participants addressed such aspirations by engaging in a variety of activities that included social, voluntary and physical activities, and learning opportunities.

In the section below, we contextualise our findings by outlining the local opportunities mentioned by participants, the number of which far exceeded our expectation.

Social groups

Involvement with social activities such as 60+ or ‘friends of…’ groups was common among women in our study. Men appeared to maintain social relationships independently through activities such as golf, allotments and going to the pub. The ‘gendering’ of social activities arose out of what were regarded as predominantly male and female domains such as the pub and ‘60+’ groups respectively, and the need for more gender neutral spaces was discussed.

Volunteering

Participants discussed continuing or seeking new voluntary activities in retirement. A strong desire to contribute to society was apparent and a high level of self-satisfaction expressed as a result of their contribution:

You don’t get paid, but you come out of it at the end of the day and feel that you’ve accomplished something. (Debbie, 71, INT7)

As long as you contribute, it gives you self-satisfaction. (Andrew, 71, INT7)

Despite the desire to undertake volunteering opportunities, there appeared to be some difficulties in finding out about and ascertaining suitable positions:

[Names of voluntary organisations]. I did actually go there when I was in my 50s and said, “I’m going to be 50 and I’m looking for something to do when I’m going to be 60”. They said, “Oh no, go to the library”. They said to me, “If you find out anything come back and tell us”. There’s nothing, no information! (Emma, 62, FG8)
Physical activities
Largely because we recruited some participants from sports and health groups, the physical activity level amongst participants was above the national average (in England 19% of men and 13% of women aged 55+ do the recommended amount of exercise for their age group [BHF National Centre, 2003]). Most of our participants were engaged in exercise on a regular basis independently (e.g. walking), through use of a gym or by attending activity groups e.g. bowls, rambling and pilates. Remaining physically active was regarded as important. It appeared that some individuals made a clear distinction between physical activities and learning opportunities typically thought to be sedentary. Not surprisingly this was particularly apparent in focus groups conducted with health and sport groups:

I see [from information provided on the U3A] that there is a computer group, but that’s on a Monday so I can’t do that. I can’t give up golf because it’s keeping me fit. I also keep fit in the afternoon, Monday afternoon. (Cliff, 76, FG2)

Learning opportunities: disassociation between formal and non-formal learning
Although many recounted experiences of classes they had embarked upon and praised the benefits of learning in later life, others stated that they had not sought the opportunity to learn, nor did they understand why an individual would want to, using expressions such as ‘I don’t see the point in doing that now’, ‘I am too old to learn’ or ‘I’ve done enough learning’, similar to Pevoto’s (1989) findings.

However, a number of participants described learning in a non-formal setting through attending various interest groups, such as: photography, crafting, history or music. We found a disassociation between certain activities or settings and the term ‘learning’. Participants appeared to associate ‘learning’ with ‘education’ – ‘a systematic, organised approach to learning often entailing structures to help direct the learning that occurs’ (Findsen and Formosa, 2011, p. 117), and not unstructured forms of learning such as the non-formal groups they were engaged with or independent use of the internet and libraries (Moody, 2004). The misconception that learning has to be a formal and highly structured activity highlights one reason that participants gave for not participating in lifelong learning. The following section will present other ‘barriers’ to participation located during data analysis.
Barriers to participation in lifelong learning (non-U3A and U3A activities)

A number of barriers to participating in learning in later life were highlighted by study participants. Darkenwald and Merriam’s (1982) barriers to adult learning categorisation scheme has been used to frame the presentation of the findings as it largely reflects the thematic categories which arose out of the data. This comprises:

- Situational barriers: related to the context of an individual’s life at a certain time e.g. life crisis;
- Institutional barriers: problems established by organisations which exclude particular individuals;
- Informational barriers: poor communication regarding available opportunities;
- Psychosocial barriers: an individual’s beliefs, perceptions and values.

(Findsen and Formosa, 2011, p. 123)

Our analysis indicates that IT as a barrier should be added to Darkenwald and Merriam’s (1982) original schema, reflecting both the rapid increase in new technology in recent years alongside growth in consumerism among third agers (Gillard and Higgs, 2002).

Whilst all barriers to participating in activities in Hartlepool presented here could constitute reasons for not being a member of H&DU3A, participants additionally highlighted a number of specific barriers to joining this organisation. These were primarily institutional and informational in nature and thus will be presented under these headings.

**Situational Barriers**

Caring responsibilities, health problems and transport issues, were the primary situational barriers discussed.

Grandparenting was the most cited caring responsibility impacting free-time (AONTAS, 2008, p. 30). It was acknowledged that there was rarely an alternative due to the expense of child care. Participants frequently expressed feeling restricted by this role:

> I enjoy it, but I want my own life as well. I am torn there. By the same token, if she had asked anybody else to mind her [grandchild], I would have been peeved, to say the least. As I say, I enjoy it. It is just that I was enjoying my retirement as well, doing my own thing. (Judith, 65, INT1)

> Again, sometimes I have to go and pick the [grand] kids up like... It’s damn nuisance at times. (Patrick, 74, INT3)

A number of participants were primary caregivers for ill family members such as partners or parents and others noted this as a role they expected to acquire in the near future. Discussing this highlighted a family orientated frame of mind which appeared to be common
among residents of Hartlepool. The majority of participants stressed the importance of prioritising family needs above their own needs:

   Well obviously if you’ve got a partner whose health isn’t too good then you are going to be restricted from what you can do and can’t do... Your time is important, but it’s more important to the ones at home, obviously. (Glenn, 86, FG2)

   My neighbour never goes anywhere because her husband has got Alzheimer’s and she’s really restricted. (Monica, 64, FG8)

Alternative caring responsibilities discussed by participants included that of close friends, neighbours and pets. While caring responsibilities did to some extent prevent engagement in learning activities, engagement in such activities was regarded as a lifeline offering respite from remaining solely in a caring role. Not all participants perceived caring responsibilities as restrictive. Instead, some identified this role as beneficial to their activity level, allowing them to engage with alternative groups of individuals through care support groups or playgroups.

Health problems were highlighted as a particular barrier. Those in poor physical health often had to overcome limiting conditions and pain levels, but also to arrange appropriate transport and access to the venue. Participants emphasised that this was not as straightforward as it appears, particularly for those who require equipment to sustain movement (e.g. wheelchairs, walking frames and oxygen tanks). Anna, 68, stressed this through the description of how she finds the lack of lifts in certain venues particularly problematic:

   I can’t do steps. If it’s somewhere where you have to climb hundreds of stairs and there’s no lift well I wouldn’t, I couldn’t [attend]. (FG8)

In addition to physical problems, the impact of mental health issues on participation was highlighted, as Elizabeth (66) described:

   I don’t know whether you would call it a mental illness, or anxiety, but I had a nervous breakdown [some years ago], and I do find it intimidating with a lot of people. That would be my one major barrier, that. When I first had it I was a wreck. I can go months and months, but there will come someday I will get up and it will just – it comes down like a veil. (INT5)

George, 84 (INT4), indicated that non-participation as a result of health problems may not always be a personal choice. He discussed being prevented from engaging in particular activities by gym staff due to his perceived poor physical health.

The final focus group highlighted a belief that the majority of opportunities on offer in Hartlepool were of a physical nature and as a result individuals with mobility issues were greatly restricted:
When you look in the paper at the ‘What’s on in Hartlepool’ things, everything is physical. It’s Zumba, its belly dancing, it’s keep fit. If you’re disabled like I am, it’s useless. There’s nothing on the learning side because the college doesn’t run a course, all the night school has stopped, things that weren’t keep fit. Everything is keep fit. It’s all walking groups. It’s hard if you can’t do that. (Anna, 68, FG8)

Transport was also outlined as a common barrier. There was a great deal of discontent expressed regarding poor public transport. On the whole participants felt that the poor bus service after 6pm and the limited weekend availability was extremely restrictive to individuals who no longer owned cars or preferred not to drive:

I mean last year I had to leave my bowls club because I couldn’t get there on the bus, you know. (Glenn, 78, FG2)

This discontent was particularly strong among older participants who stressed that being transported by a vehicle was essential, even if the venue was close, due to mobility issues and safety concerns:

I don’t like walking out now. At one time it was no bother but you feel, if something happens, what do I do? I can’t run, so I’m stuck, and other older people are the same... All right, going in a car to somewhere and back or with a crowd and back. But if they say, “Will you come?” “Well, I haven’t got any transport.” “Well, it’s not that far to walk,” and you think oh, no. It’s all right going one way when there might be people around, but you might be coming back in the dark and it depends on what you’ve got to go through to get there. (George, 84, INT4)

Although some expressed that taxis were a good alternative, this only appeared to be the case if a number of individuals travelled together. On an individual basis the use of a taxi was not regarded as feasible due to the cost of a return trip:

Once I dropped out of picking people up, they didn’t want to pay for the taxis... it is a big chunk out of their pension. (Janet, 55, FG5)

A proportion of participants were reliant on lifts from other group members which they acknowledged was not always feasible or fair and it was not uncommon for group leader to ensure attendance by providing transport to groups.
Institutional Barriers
There was a mixed reaction regarding whether cost posed a barrier to participation. Whilst participants recognised that living on a pension was not easy and cost had to be taken into account before deciding to join a group, the majority stated that, within reason, group membership was worth paying for. However, varying income levels and circumstances imposed constraints on participants and did depend on the activities undertaken. Certain groups (e.g. arts and craft) had the potential to become very expensive and accommodating this cost would not be possible for everyone:

It’s an expensive hobby, really expensive. There are loads of machines and some of them are hundreds of pounds. People think, “Oh, I’ll make a cheap card”. No way, no way. (Helen, 66, INT2)

Many groups received subsidies which if removed, would make covering costs beyond the reach of those with lower incomes.

The level of commitment required by some groups was felt to be highly restrictive. Almost half of participants expressed that the expectation that they should regularly attend put them off attending a group, as it made them feel ‘trapped’. Many suggested that groups should attempt to be more flexible so that members could make their own decisions about when to attend. However, others recognised that without structure and regular attendance, some groups were unlikely to survive. These individuals stressed that they would only become involved if they felt they could ‘commit 100%’ and without this level of commitment, joining was pointless. A few stated that they believed this desire to commit fully was a generational trait not possessed by the recently retired. They stated that younger generations agree to participate ‘subject to a better offer’, meaning they will only participate if they cannot find anything better to do:

I think now older people get committed to things and if they say they’re going, they’ll go. The younger ones they don’t commit the same. (George, 84, INT4)

This attitude was felt to be damaging to existing groups as responsibilities would not be shared, but consistently left to a small number of committed individuals. Often participants stated that at their age they no longer wanted such responsibility and thus would not join a group if they felt they would be depended upon to fulfil a number of duties:

Really I feel as if I want carrying around now instead of carrying other people around... You don’t want that [responsibility] now. If you find that physically you can’t do it then you think, “Why did I get myself involved in this?” (Maggie, 82, FG6)

Others stressed that they were already committed to several things and would not feel comfortable agreeing to more.
Another institutional barrier discussed by participants concerned the introduction of qualifications to groups. In recent years completing a qualification has become a condition of funding for groups run by professional tutors. A common reaction was participants recounting little desire to acquire a qualification – they were ‘learning for fun’. The subsequent focus on undertaking and passing tests meant that they no longer enjoyed the activities and as a result the activity group folded:

I used to go to lace. I loved it. I’d been for years from a relaxation point of view because I didn’t want to do exams and do high nationals and get qualifications and such in lace-making. Then they brought out that each term you have to pass a certain exam – you had to do exams. So I said, “Right then, if we fail it, we fail it.” But they said “Oh you can only fail twice and then you’re out.” … you were going to do all these qualifications to get your lace teaching certificate whereupon the class would finish because nobody would want to go. It was absolutely ludicrous! (Sarah, 75, FG6)

In general, changes to the funding of lifelong learning made what was on offer more expensive and reduced the number of courses on offer. Participants felt that the requirement to take a qualification dramatically reduced the options available to them.

In addition to these general institutional barriers, two barriers specific to participating in H&DU3A were identified. Firstly, the name ‘University of the Third Age’ provoked a mixed reaction among participants. Affirming Midwinter’s suggestion that ‘U3A’ is an ‘ill-advised label which requires elaborate explanation’ (1984, p. 5), many participants found it difficult to discern what the title meant and expressed that from this alone they were unlikely to seek further information about what the group offered:

I won’t say I hadn’t seen it, I probably thought “I wonder what the hell that is”, and gone passed, you know. It doesn’t tell you anything in isolation; doesn’t mean a thing to me. (Andrew, 71, INT7)

I just think people don’t really understand what U3A is …The brand is a bit nondescript really for people who know absolutely nothing about it. (Sharon, 53, FG7)

Mirroring the suggestions made by Swindell (1993) and Formosa (2000, 2014), it was highlighted on several occasions that the title could pose a barrier to widespread participation as people were likely to misinterpret the purpose and intended membership of the group. The majority of participants suggested that they did not relate to the term ‘university’, having left education at a young age:

‘University’ for a start might put people off because if they’ve never been to university they think well that’s got nothing to do with me. I mean we never went to university, so to me the word ‘University’ on something means well it’s probably not for me. I think there’s still a lot of people the same. (Julie, 69, INT3)
Many appeared to associate the term ‘university’ with the younger generation and as a result assumed that the U3A was not aimed at them. For others, the term ‘university’ appeared to formulate a psychosocial barrier to participation. These individuals highlighted a concern that if they did attend, they would not ‘fit in’ with the existing membership, whom they assumed would be “clever” middle class intellectuals.

I would say that this was aimed at more middle-class people and I’d think that’s not for me. (Linda, 56, FG7)

U3A I thought was for really clever people, like university people, the middle class... I thought they’d be too clever. (Monica, 64, FG8)

This is reflective of the work of Formosa which highlight that ‘working-class elders are apprehensive to join an organisation with such a ‘heavy’ class baggage in its title’ (2014, p. 53). Comments such as “I’m not clever enough for that” (Janet, 55, FG5) were common, illustrating not only the perceived intelligence of members but perhaps also a negative self-image among a number of participants.

In a break with most literature, findings suggest that the term ‘third age’ is equally as problematic as ‘university’. Very few participants had heard of the term ‘third age’ and whilst some deciphered the concept throughout the interview and expressed a new understanding of its relevance, others remained adamant that they it was not easy to relate to and thus not suitable for the purposes of the group - believing it to be too “airy fairy” (Julie, 69, INT3) or “hippie-ish” (Philip, 72, FG2). Others highlighted that they felt it was easily confused with the term ‘third world’ (FG2, FG5), a potential problem outlined by Midwinter (1984).

This negative perspective of the title was not shared by all participants, however. A number of participants reflected the views collected by Formosa among Maltese U3A members (2000) – that the title was in fact attractive. The potential to attend a group associated with the term ‘university’ was something these participants found refreshing and exciting, in comparison to other activities routinely available for retirees. That being said, the negative views regarding the title far outweighed the positive.

The second institutional barrier highlighted by participants was the H&DU3A monthly meeting place – at a Methodist Church and Community Centre. Lack of direct public transport close to the venue was cited as a concern, particularly for those with mobility problems, as Elizabeth (66, INT5) pointed out that from the bus stop it would “be a canny walk for an elderly person”. Lack of easily accessible public parking was also cited as a problem. Some participants were put-off attending H&DU3A because they perceived the group to be attached to the church:
I know this is an awful thing to say, but the church, I mean we really just are not church people at all. That’s it basically. I always think you go to some of these things and if there are a lot of church people there they’ll be trying to sort of get you to do [religious] things. (Julie, 69, INT3)
Informational Barriers

Lack of knowledge about existing groups was identified as a primary barrier. Poor communication of opportunities was frequently blamed for lack of participation, as highlighted through the following responses:

> There are supposed to be all these things for the older people, but there’s not... I would like to know where these ‘loads’ are please! (Rachel, 62, INT6)

> I think a lot of its just information, really. I just don’t think information gets out, you know, circulates. (Catherine, 70, FG4)

Despite being aware of numerous ways to find out about groups (community centres, displays/notice boards, internet searches, leaflets/newspapers, local library, medical referral, word of mouth and the volunteer development agency) many participants outlined that the only reason they had not joined groups was lack of knowledge of their existence. On the whole it was felt that groups let themselves down by not advertising in the appropriate places or to the required extent. Nancy, 78 (FG5), stressed that knowledge about existing opportunities is a big problem in Hartlepool, stating that she frequently hears people say “I never knew that was there”. Although some forms of advertisement appeared popular among participants such as a free community magazine delivered to all Hartlepool addresses, participants often expressed dissatisfaction with the fact that up-to-date information on available groups was not easily accessible at all times. Though the local volunteer development agency have a document detailing the majority of 50+ groups, there appeared to be little knowledge of its existence.

This poor communication of existing opportunities was noted as being a major barrier to H&DU3A. Most participants stated that they had ‘never heard’ of the U3A organisation and this was the primary reason they had not contemplated joining. This figure is perhaps particularly surprising in light of how active our participants were within the community. Those that were aware did not always know of the Hartlepool group but had heard of other UK branches through friends and family, and of the sixty participants only fifteen were aware of the H&DU3A. Pauline, 82, highlighted this widespread lack of knowledge through recounting failed attempts to locate her nearest U3A when she moved to Hartlepool several years ago:

> I used to say to people when I came to Hartlepool, “Is there a U3A in the area?” They would look at me and say, “What is a U3A?” They didn’t know what I meant. (FG6)

This lack of knowledge was thought to be the result of poor advertising, a finding which surprised U3A members who believed they had been advertising well within the community. Most participants deemed themselves to be ‘fairly observant’ and thus were sure they would have seen or heard of it if information had been suitably distributed. Julie, 69, stressed:
They don’t advertise. They need to advertise to get people in... If there was something on the television, which, everybody watches the television, don’t they, then, you know, I think it would get to a much wider audience and people would recognise the name. (INT3)
Psychosocial Barriers
The most prominently discussed psychosocial barrier was confidence issues. The confidence level of retired individuals was a contentious topic encouraging debate among participants. Whilst some believed they had never been more confident, the majority acknowledged that individuals tend to feel less confident and more vulnerable as they age:

As you get older you haven’t got quite the confidence that you had, yes. You lose it and going into a room full of strangers for the first time is very intimidating. (Heather, 75, FG2)

This lack of confidence was believed to contribute to non-participation, as it was suggested individuals with little confidence would actively avoid unfamiliar situations. Several participants put this down to a fear of being judged. Jean, 75 (FG2), confirmed this by stating “I’d rather make my mistakes on my own”; whilst Evelyn, 87 (FG4), recounted hearing people express such fear by describing themselves as “not clever enough” to take part. These comments illustrate a negative self-image held by some, similar to that exhibited by participants in Pevoto’s 1989 study of nonparticipation by older adults in organised educational activities.

A number of participants inferred confidence issues by stating that they would not attend a new group alone. Most expressed that having someone to go with would have a positive impact on their participation level:

You need somebody to go with you, to introduce you into it, don’t you? Whatever it is, I think anyway. Just sort of going in cold on your own it’s very, very difficult. (Julie, 69, INT3)

This appeared, in part, to be down to the perceived ‘cliquey’ behaviour of existing groups:

I find when you go, a lot of these groups they’re very self-contained. You’ve got to either be dragged in by somebody, because if you go in on your own [people say] “Oh, who’s that?” But a lot of them, it’s a matter of, “Can I come in?” The group itself doesn’t pull you in. (George, 84, INT4)

This was a great concern of many individuals, with several providing accounts of how a negative experience of such behaviour had put them off trying other groups. Propensity to form distinct and closed groups was noted as being a societal feature of Hartlepool, particularly among the residents of the oldest part of the town known as The Headland (see figure 3):

For such a small town, to have such a divide [between Old Hartlepool and West Hartlepool], is probably quite unique almost. (Andrew, 71, INT7)

Several individuals noted that the villages within Hartlepool were “very insular”, with individuals preferring their own area and tending to remain in “within their little bits” (Rosa,
80, FG5). This was affirmed by Headland residents who readily admitted that they would rather not leave the area, preferring to seek opportunities within walking distance. This reflects the work of McKenna which suggests older people are much more likely to attend groups if they are held in facilities which are familiar and easy accessible (2007).

On a more positive note, social fulfilment was often given as a reason for non-participation primarily by individuals who were part of an active couple. Andrew and Debbie, both 71, were prime examples of this, regularly stating that they were content spending time together and thus did not feel the need to look for anything else:

We enjoy each other’s company; we don’t need a great deal more. We’re quite well satisfied with life. (Andrew, INT7)

Likewise, Patrick, 74, stressed that he and his wife Julie, 69, had a certain lifestyle that they were keen to keep and expressed concern that if they engaged in any additional opportunities this may be disrupted:

We like to go out on certain nights... So we wouldn’t want to go to something that’s going to stop that. (INT3)

It was clear that this group of participants wished to spend their retirement together and thus were reluctant to commit themselves to any further activities which did not cater to their collective interests:

We have our individual sides but for the most part we’re together really. (Andrew, 71, INT7)

We would like to [join a group together], if there was something... I would look at something for both us to do, that we can do, it’s not always possible. (Patrick, 74, INT3)

In line with the findings of Van Solinge and Henkens (2005) this illustrates the great influence that partner behaviour can have on an individual in retirement. The extent to which participation levels were mediated by relationship status was further highlighted by the fact that the most active participants typically noted being motivated to search for new activities following the breakdown of their relationship or death of their partner. This tendency to seek an alternative means of social fulfilment following great change is illustrative of the work of Davis (2001) and McGivney (2006) highlighting that those of an older age often engage in new activities following a significant life event e.g. spousal death or a change in health status.

Several participants appeared content with their activity level due to personal predisposition and such participants had become accustomed to a particular behaviour pattern did not wish incorporate a new activity into their routine.
Others noted that non-participation can be attributed to a predisposed aversion to joining groups. Statements such as “some people are not joiners” (Catherine, 70, FG4), “a lot of people don’t integrate” (Pauline, 82, FG6) and “you can’t make people join if it’s not in their nature” (Nancy, 78, FG5) illustrate this point.

Data analysis outlined a third psychosocial barrier: an aversion exhibited by the recently retired (55-69) to joining age-specific groups. Several older participants (70+) highlighted that younger retirees appeared to lack interest in activities perceived to be synonymous with ‘old’ people e.g. bowls and bingo. Whilst some expressed confusion over why this was the case, a number highlighted a belief that this was because most recently retired individuals do not perceive themselves as ‘old’. A comment made by Emily, 72, illustrates this:

I think the ones who are getting older... reaching 60, over 60, don’t want to join these groups. They don’t feel old, do they? (FG1)

Older participants attributed more individualistic tendencies to the ‘younger old’ who were regarded as having more intact social networks, noting that they were predisposed to attending pubs and clubs to expand their social circle and thus have little need to join formally constituted groups. This highlights the importance of dispelling the myth that older adults are a homogenous group – alike in ‘age, gender, able-bodiedness, socioeconomic status, race and ethnicity’ (Chen et al, 2008, p. 10). As the ‘third age’ refers not to a specific age band but to a stage and quality of life, many different chronological ages comprise this group and thus there is the potential for at least two generations to be defined by this term (Hodkinson, et al., 2007). Therefore it must be recognised that within this group interests, requirements and barriers to participation are likely to vary extensively.
IT Barriers

The final group of barriers emerging the data were those associated with IT use in retirement. When considering this as a barrier to participation it must be recognised that IT use is complex and multi-layered, and retirees frequently express number of concerns surrounding three key areas: computer ownership, computer use and internet use. Research suggests that a large proportion of the retired population refrain from engaging with IT due to cost, characteristics of technology, support issues and low confidence levels (Hamilton, 2011; Woodward, et al., 2012). Figures from late 2013 indicate that older people continue to make up only a small proportion of current computer and internet users across the UK (ONS, 2013). Taking internet use for example, whilst almost 100% of 16-44 year olds have used the internet, 32.2% of 65-74 year olds and 67.3% of those over the age of 75 were classed as non-users:

![Diagram illustrating internet users and non-users by age group (years) (ONS, 2013)](image)

Low levels of confidence regarding new technology were the most commonly expressed reason for lack of IT use among participants. A large number of individuals expressed feeling anxious, stressed and frustrated when using computers and mobile phones:

‘I get really annoyed if there’s something that people find quite easy, and I do it and I can’t do it. I get upset.’ (Helen, 66, INT2)

Several highlighted that due to the unpredictability of IT and the potential for ‘mistakes’, this anxiety did not dissipate to any great extent over time and as a result they felt constantly worried about ‘doing the wrong thing’:  

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I’m not frightened of it [the computer] but I’m always worried about it. I always have the thought ‘if I hit a wrong key I’m going to lose everything and not be able to get it back.’ (George, 84, INT4)

If you feel a bit like you don’t know what you’re doing when you retire, it’s [social networking] a good way to meet other people who are in the same boat. I’m enjoying it; I’d be lost without it… I love emails; I can hardly remember the last time I bought a stamp! … But I’m a bit dubious about it, there are certain things I won’t try (Helen, 66, INT2)

Although this reaction was common to all participants, there did appear to be a ‘digital divide’ (Morris, et al., 2007) between younger and older participants. Young participants (<70) appeared much more willing to engage with IT, with most owning a computer, laptop or tablet (I-Pads were particularly popular). On the whole they appeared to possess at least basic IT knowledge, with many being trained toward the end of their career. Some appeared particularly IT-savvy, praising the freedom that such technology had afforded them through detailing the benefits of engaging with programmes online such as Facebook, Skype and emails.

Older participants, on the other hand, appeared less willing to engage with new technology – particularly the internet:

   I don’t do computers, terrible. I just couldn’t do this ‘mouse’ thing! (Lillian, 77, FG8)

   I don’t use the internet at all. I’ve just had it re-put in by my daughter so I can get to it, but I haven’t used it at all. (George, 84, INT4)

Many conveyed discontent regarding their lack of IT knowledge, feeling it left them ‘out of touch’ with younger family members and, to a point society as a whole. As a result they often acknowledged that they felt they should attempt to understand new technology, but harboured concerns that it was ‘too late’ for them to learn IT skills:

   I should [use the computer more], the whole family uses them. My grandson, he’s got his degree in computing up at Leeds… My two daughters work on accounts and it’s all computerised… I should go and look at it. (George, 84, INT4)

   I wish now that I’d gone on the computer and stuck at computer things. When my grandkids come they’re all on this, that and the other. I have problems even with a mobile phone…I think now, “Oh I can’t be bothered at my age.” (Maggie, 82, FG6)

These findings indicate the importance of differentiating between computer ownership and IT literacy. Although the majority of participants noted using computers regularly, this did not necessarily mean they felt comfortable doing so, with almost all expressing that they wished they were more technologically competent.
Lack of engagement with new technology was believed to prevent group participation in two primary ways. Firstly, participants with low levels of IT knowledge outlined that they would be inclined to avoid groups which may require use of technology – such as photography, reflecting findings of Slone-Seale and Kops (2007). They expressed concern that if they attended such groups they would not be able to keep up with the rest of the group and stressed an aversion to being bombarded with ‘technical terms’:

I don’t want to go in and look thick…I don’t like how people talk, all technical talk about focuses and lens length, you know, because it goes completely over my head. (Philip, 72, FG2)

Secondly, it was believed that those who did not engage with IT on a regular basis could experience accessibility problems as a large proportion of information sharing now occurs online via websites and email subscriptions. Several participants who did not use computers highlighted feeling they were at a disadvantage when it came to obtaining group information due to the widespread assumption that everyone uses the internet. This was illustrated by participant discussions of attempts to seek information within the community e.g. in the library, only to be redirected toward searching the internet. From this it is clear that to some extent the older non-digital population are suffering from ‘digital exclusion’ (Woodward, et al. 2012).

Clearly, the internet can prove to be a valuable resource for information sharing and is often a route to participation, but if used in isolation it can formulate a barrier to participation among the retired population.

That being said, it must be noted that those who recounted searching for opportunities on the internet stressed that the information available about lifelong learning and activities for older people in general was very poor:

I’ve tried looking on the internet, and maybe it’s just me, but I couldn’t find anything. (Rachel, 62, INT6)

There’s nothing, no information on there [the internet] if you are looking for something to do... that’s a big problem for people... there’s nothing on the computer (Emma, 62, FG8)

This highlights that improvement must be made both on- and off-line, to ensure that opportunities are well signposted for those all individuals who may be looking for new activities.
**Views of the U3A: ‘It’s ideal. It fills a large void I’m sure.’**

Participants generally reacted positively to the idea of the U3A (n=55), with some using terms such as ‘fabulous’ (Rachel, 62, INT6) and ‘marvellous’ (Sharon, 53, FG7) to describe it. Many participants felt encouraged to explore the group in further depth and attend meetings after learning the purpose and content of the H&DU3A:

> I will be interested in going … having a look to see what’s what. (Helen, 66, INT2)

> I think it’s worth a try... I'm interested in a few of the groups I must admit. (Catherine, 70, FG4)

> I would definitely come to that [meeting] in November... I'll have to shift my things around to go but I'll go. (Grace, 72, FG4)

On the whole, participants emphasised a belief that the U3A is a ‘good idea’ and could prove extremely beneficial for those who attend:

> Well, for some people I would think it would be good, because there are a lot of lonely people, people that don’t know how to fill their time in... And there are some people that do like to keep on learning. They can’t get enough. (Elizabeth, 66, INT5)

> It’s a brilliant idea if people have the time and the interest to go, it’s ideal. It fills a large void I’m sure... But this is definitely a good thing for people over 55 and so on... if I had the time I would be more involved. (Glenn, 78, FG2)

Although there are evidently barriers to participating in the U3A, several elements of the U3A were highlighted as curbing some barriers to lifelong learning in Hartlepool. Those put-off later-life learning due to high fees and the pressure of obtaining qualifications were attracted to the low-cost self-help approach to learning provided by the U3A. Further, the peer-support element of the U3A was believed to make the group more approachable than other learning opportunities as individuals felt that the informal environment would reduce their anxiety about their intellect being judged. Finally, although the term ‘third age’ was in one sense restrictive to participation, aiming the group at a particular phase of life as opposed to a specific age group (e.g. 60+) evidently made the U3A attractive to some. This was particularly the case among younger retirees who, not seeing themselves as ‘old’, tended to avoid groups where they envisaged the activities to be geared toward the older generation.

Similar to some of the participants within Pevoto’s study (1989), a number of individuals that initially reacted negatively to the idea of learning in later life (stressing they were ‘too old’ or had ‘done enough learning’) appeared to change their minds during the interview, noting that they would be interested in attending some U3A activities. Others who had been concerned about the membership demographic appeared reassured after being provided with further information. George, 84, outlined how his initial impression of the U3A was altered upon learning further details:
At first, I thought it was going to be highbrow. I saw this and a lot of it was, “No, it’s not me, it’s not me, it’s not me.” Then I had a closer look at it later on and saw some things and thought “Oh, I wouldn't mind going along actually.” (INT4)

This reiterates the importance of ensuring that upon retirement people are able to easily access information regarding what the U3A is for and what it has to offer. Without this, it appears that many potential participants are unlikely to engage with the group due to a poor first impression. Most participants highlighted that it was not the case that the existing U3A needed to change its name in order to attract more members but that public knowledge of its existence, philosophy and mode of organisation needs to be improved.

Former U3A members (those who joined originally in 2011 but had since left) emphasised that as a result of study participation they would look into renewing their membership as they were now aware of new groups better suited their interests:

We said, didn’t we, we might join again this year... yes, I would be interested in joining again ... now that there’s more content there. (Pauline, 82, FG6)
Conclusions and Recommendations

This study has explored the social inclusivity of groups encouraging lifelong learning in Hartlepool. Our findings suggest that there are many opportunities for retirees in Hartlepool and on the whole residents appear to be content with the number of local groups available. The demographic of participants highlighted individuals from lower socio-economic groups do join groups in Hartlepool and continue to engage in local opportunities to an old age. Individuals expressed a high level of enthusiasm for remaining active in retirement through engaging in learning, exercise, voluntary and social opportunities, particularly organised groups. On the whole, participants responded positively to the concept of the U3A and the activities offered by the H&DU3A with some expressing a desire to become a member. The key findings of this study illustrate that participants knew little of the existing group but learning about U3A activities made participants well-disposed towards the organisation, dispelling middle-class myths prompting some to join.

Figure 6 highlights the main barriers to engaging in lifelong learning opportunities found among study participants:

![Figure 6: Summary diagram of main barriers to participation in opportunities in retirement in Hartlepool](image)

As indicated by figure 6, many of these barriers are interlinked, for example, health problems can impact both confidence levels, transport, and ability to access the location of the group. Whilst all of these barriers could potentially prevent participation in the H&DU3A, participants emphasised that lack of knowledge, the ‘U3A’ title and group location were the main reasons for their non-participation in U3A activities. The identification of the title as restrictive among this demographic is reflective of evidence from outside the UK, particularly the work of Formosa on the impact of the term ‘university’ on U3A membership (2000, 2014). In a slight deviation from literature, evidence from this study suggests that
people can find the term ‘third age’ just as problematic. It is interesting to note however, particularly considering participant demographics, that some did express being attracted to the title. Those who felt they had ‘missed out’ on going to university found the title novel and looked upon group membership as a second chance to learn.

Taken at face value, these findings could suggest that in order to improve the social inclusivity of H&DU3A, the group should re-brand, re-locate and re-advertise. However, we do not believe this to be a simple or sensible approach. Concerns about the name were not shared by everyone. Overall, disassociating the H&DU3A from the Third Age Trust is unlikely to benefit the group in the longrun, particularly in light of the fact that the U3A has a very good reputation with Formosa branding it a ‘global success story’ for having revolutionised the lives of a group typically ignored in terms of education (2012, p.114). Relocation would be difficult, as the group currently have an affordable city centre venue, but perhaps public transport links and car parking could be re-considered by the local authority. Finally, careful thought needs to be given to advertising and information provision in order to fully engage with older citizens via a number of channels, both digital and non-digital. However, this has resource implications.

Recommendations
We have structured our recommendations around 3 points raised by Formosa (2010) regarding challenges and visions for the U3A future.

1) ‘It is important that UTAs rally against a passive stance that waits for older persons to knock on their door and engage in serious outreach that seeks to include subgroups which generally do not feel inclined to engage’ (Formosa, 2010, p.9)

This work represents the first stage in ‘serious outreach’ that aims to include subgroups who do not normally participate in U3A activities. Throughout the process of the research, which was itself co-produced, several individuals expressed an interest in U3A activities demonstrating how active outreach can successfully inform and enhance recruitment. Further success may be achieved by a pro-active information campaign that highlights the co-operative and mutual philosophy behind the U3A which could appeal to many individuals without further education, particularly as it mirrors philosophies behind co-operative learning ventures more commonly associated with working class communities such as the ‘Workers Educational Association’, and self-help educational associations that were numerous among mining and other industrial communities prior to the demise of heavy industry in areas such as Hartlepool.

It is vital that the clarity of information provided regarding available opportunities for retirees in Hartlepool is improved, both on- and off-line. To do this a directory must be complied and updated regularly detailing as much information as possible about groups, including: a brief overview of activities, location, time, day of the week and contact information. In recognition of the fact that a large percentage of retirees are not willing or able to access the internet, it is imperative that a printed copy is made available in a central
location (e.g. the library). This must be signposted to ensure it is easy to locate. An online version should also be made available through local authority and voluntary agency websites for tech-savvy older adults. In addition to this it is essential that H&DU3A improve the way they advertise and attempt to target individuals in new ways – such as conducting talks (H&DU3A members had began this toward the end of the study recognising the positive impact of explaining the concept of the U3A upon willingness to attend).

It is also important that efforts are made to keep in regular contact with all former U3A members via post or e-newsletter. This will ensure that anyone who may have left due to loss of interest will be aware of new opportunities that become available. This may increase the number of people who decide to renew their membership after a period of absence (3 participants noted that this was the case for them).

2) ‘UTAs must work to counter psychosocial barriers such as the stereotypical and ageist belief in the adage, “I am too old to learn”’ (Formosa, 2010, p. 9)

The benefit of conducting talks as a form of advertisement must not be underestimated. Not only does this provide the opportunity to introduce individuals to the concept of the U3A but also dispel myths associated with the title and learning in later life. It must be recognised that the term U3A is not self-explanatory and has great potential to conjure negative perceptions before any details are even acquired. Individuals are much more likely to respond positively to a group if they speak with someone knowledgeable about the group. This study presents evidence to suggest that verbal reassurance that a group is worth expending effort for can prove instrumental in encouraging participation.

3) ‘UTAs must work hard and offer alternative learning to attract older men’ (Formosa, 2010, p.9)

In recognition of the impact that predominantly female presence at groups is thought to have on male attendance, it may be beneficial for H&DU3A membership to initiate a male-only activity group. This could be loosely based on the Australian Men’s Shed’s initiative which offers workshop-type spaces to provide opportunities for men to engage in regular hands-on activities. The notable success of this scheme in attracting difficult to engage older men highlights that they are worth-while exploring in the UK (Golding, et al., 2007, p. 7).
Dissemination
The findings of this study will be disseminated in a number of ways. Following the submittal of this report, a summary of all findings will be sent out to the 60 individuals who took part to ensure participants are aware of the impact of their involvement in the study. The U3A headquarters, voluntary agencies in Hartlepool and Hartlepool Adult Education will also be notified, with particular emphasis placed on recommendations for increasing social inclusivity in the area. In addition to this, a peer review article will be formulated and submitted to Ageing and Society in early 2014 and presentations will be developed for both regional and national conferences on Ageing and Education. Finally, with remaining Averil Osborn grant money a dissemination event will be organised in Hartlepool, to which VoiceNorth and other organisations involved in the RITA award will be invited. This will provide a chance to educate local organisations and councillors on the barriers to participation faced by the ‘third generation’.

Study Limitations
Due to practical limitations, primarily time, we did not recruit isolated individuals not engaged in any activities. Consequently it has only been possible to explore barriers to U3A participation among individuals who are engaged in some sort of community activity. Thus it must be stressed that there may be further barriers to participation which it has not been possible to explore.
References


Hamilton, M. (2011) ‘I’m fascinated but I don’t have the confidence’: Struck by the paucity if research into how older people use information and communication. *Adults Learning*, 22(6), pp. 28-31.


The University of the Third Age (U3A) webpage. Available at: http://u3a.org.uk/ (Accessed: 7 January 2014).


Appendices

Appendix 1: Topic Guide

1. Experiences of learning activities since retirement

1A. Could you describe any personal to you? (Reflect on experience)
1B. Are you currently or have you in the past been engaged in any groups (past-times - particularly those which promote the development/maintenance of a skill)?
   - Which ones? Why?
   - If not, why not? Have you ever been tempted to join one? If so which ones? Why these and not others?
   - If no longer a member why did you leave?

2. How do you find out about groups/opportunities?

   Explore engagement with I.T.

3. Do you think it is difficult to find out about groups/opportunities?

   3A. Why?
   3B. What prevents you?

4. Do you think there are enough opportunities for retired people?

   4A. Is there anything that puts you off or prevents you from engaging with the learning opportunities you are aware of?
   4B. Is there anything you would particularly like to do, but haven’t been able to?

5. Have you heard of the University of the Third Age? (Besides this project)

   5A. Is this something you would be interested in? If so why? If not, why not?
   5B. What are your views on it?
   5C. What kind of person do you think it is aimed at?

6. What would encourage you to become a member of the U3A?

7. What elements would you look for if you were thinking about joining a new group?

   7A. What is most important to you?
Appendix 2: Consent Form

Title of Project: Enhancing Lifelong Learning for Seniors (ELLFS)
Name of Researcher: Rebecca Patterson/Members of Hartlepool and District U3A

Please initial all boxes

1. I confirm that I have read and understand the information sheet dated ______ regarding this study. I have had the opportunity to consider the information and ask questions which have been answered to my satisfaction.

2. I am aware that my participation is voluntary and therefore I am free to withdraw at any time without providing a reason.

3. I agree to either being interviewed or participating in a focus group led by researcher, Rebecca Patterson or members of the U3A.

4. I agree to the interview or focus group being audio recorded.

5. I understand that small sections of the interview/focus group (‘quotes’) may be used in published writing about the study and that I will not be identified at any time.

6. I agree to participate in the above study.

Name of Participant   Date    Signature

Name of individual seeking consent   Date    Signature
### Appendix 3: Demographic Sheet

**Gender**
- Male ☐
- Female ☐

**How old are you?**
- 50-54 ☐
- 55-59 ☐
- 60-64 ☐
- 65-69 ☐
- 70-74 ☐
- 75-79 ☐
- 80-84 ☐
- 85+ ☐

**What was your occupation prior to retirement?**
(List up to three if applicable)
1) 
2) 
3) 

**How many years have you lived in the Hartlepool area?**

______________

**Including yourself, how many people are in your household?**

______________

**What is your postcode?**

______________