1 x 1 In depth interviews

Key Findings

1. Loneliness and isolation
2. Health and mental health
3. Financial and practical
4. Feelings and grief
Loneliness and isolation

• For those who have them, **family and close friends** are usually the route to avoiding loneliness. But for those without family, people can feel they have nowhere to turn.

• **Loneliness and isolation are very different.**

• It can be **hard to address loneliness when grieving.** People frequently feel a loss of confidence following a bereavement and are less able to be proactive about their social networks.

“One of the loneliest things; not knowing anyone closely enough who'd had this experience”.

“I'm thinking what must it be like for someone who has got ... no support of a family... It made me aware of what some people must really struggle with”.
• The focus of **attention tends to be on the dying person**, often to the extent that the bereaved person’s needs (particularly mental health needs) are overlooked.

• GPs are often a first port of call for older people struggling with grief but with no **standard training or grief pathways**, responses can vary widely from GP to GP.

“When your loved one, is so ill for that long, your focus is on him...That counsellor said you have suffered trauma for all that time, you couldn’t process and recover before the next one came... that’s why I was very, very ill”.

“I was suicidal for nearly two years and what didn’t help was my GP and family kept saying – ‘it’s early days’.”
Financial and practical impacts

• A lot of people don’t know **what needs to be done after death**.

• **Bereavement is about more than emotions.** The loss of practical contributions can be just as difficult to deal with.

• Preparing for **practical changes** can help with coping after death (bills, passwords etc.)

“We had problems accessing his computer ... I would have said it jokingly - oh what’s your password in case you don’t make it until tomorrow morning”.
Feelings and grief

- The **place and circumstances of death** has a significant impact on grief and can provoke feelings of guilt.

- **Grief counselling** can be beneficial if the person feels comfortable with it but some do not feel it’s “for them”.

“It was being able to express how I felt... I thought I can't talk to them [family] anymore about this, it's upsetting us all but I still needed to talk”.

“The district nurses came to take away his bed and other equipment the day after he died. Suddenly he, and everything to do with him, had disappeared”.

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Independent Age

Advice and support for older age
We were taking our work on bereavement forward and were focusing on two areas;

- How do we ensure that the people in key positions have the right training and knowledge to successfully recognise older people's needs and point them to the right help? GPs, Care Home Staff etc.

- For those who cannot reach out for help – how can we reach them? How can our society (professional body) take a proactive approach to reaching bereaved older people in need of help?

Now focusing on how **COVID-19** is changing the nature of bereavement for older people.