



# The benefits of befriending





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By Befriending Networks

## Index

<b>1. Introduction</b>	<b>Page 2</b>
<b>2. Aim</b>	<b>Page 4</b>
<b>3. Methodology</b>	<b>Page 4</b>
3.1. Participating projects and clients	Page 4
3.2. Data and data collection	Page 4
3.3. Principal outcome	Page 4
3.4. Response	Page 5
<b>4. Findings</b>	<b>Page 5</b>
4.1. Quantitative findings	Page 5
4.2. Qualitative findings	Page 12
<b>5. Discussion</b>	<b>Page 15</b>
5.1. Summary of findings	Page 15
5.2. Study limitations	Page 16
5.3. Implications for befriending services	Page 16
5.4. The benefits of befriending	Page 18
<b>6. Conclusion</b>	<b>Page 18</b>
<b>7. Annex</b>	<b>Page 19</b>

# 1. Introduction

*A Stitch in Time?* supported the third sector to collect and present evidence about its contribution to [Reshaping Care for Older People](#) (RCOP). It was funded by the Scottish Government and run by Evaluation Support Scotland (ESS). The programme used practical action learning to:

- Explain what third sector does, the difference they make and their contribution to RCOP
- Develop appropriate evaluation methods
- Collect and present relevant evidence.

This report was undertaken by Befriending Networks through *A Stitch in Time?*

Befriending Networks is a national charity which provides information, advice, resources, training and a Quality Standard to a wide range of befriending services across the country.

Befriending services, which are normally run by third sector organisations, work with a range of user groups, from those with a particular physical or mental health condition or disability, to looked after children or young people who live in challenging circumstances (e.g. young carers); those who experience social exclusion due to cultural factors (e.g. LGBT), or simply those who are increasingly isolated due to old age. The aim of most befriending services for older people is to mitigate the impact of loneliness by providing companionship, stimulation and, in some cases, enabling people to maintain a level of physical activity and sustain connections with their local community by supporting them on outings.

About 60% of Befriending Networks' member organisations provide a befriending service to older adults, which typically involves the recruitment and training of a volunteer and matching with someone who has been identified by a referring agency as needing support due to their vulnerability and social isolation or loneliness. The volunteer befriender will then pay regular (typically weekly or fortnightly) visits to the 'befriended', participating jointly in social activities and outings where possible, or, for those who are too unwell or otherwise unable to leave their house, providing stimulating companionship by talking, reminiscing, listening to music or simply having a cup of tea together.

Evaluation reports from befriending organisations suggest that this service is considered to be invaluable. Many older people look forward to 'their' befriender visiting every week. For some, their befriender is the only person they see during the week who is not paid to visit them, and who is not coming simply to fulfil a physical care need. There is huge importance attached to this relationship.

There is a paucity of good evidence demonstrating the benefit of befriending services. Organisations' internal evaluations invariably produce a wealth of anecdotal information about the value of the service provided, both for the befriender and the befriended. However, as a result of the wide range of client groups, and constraints of organisational capacity, resources, culture, management, geography and support arrangements experienced by the hundreds of services across the country which describe what they do as

befriending, academic study of this type of service is particularly challenging. Consequently, each individual befriending service, when seeking funding or support, has to demonstrate not only that they provide a good service, but that befriending per se provides benefit to their client group.

Befriending Networks originally attempted to generate evidence about the effectiveness of befriending by engaging its member services in a study of older people's befriending, using the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) to measure improvements in the wellbeing of older people who have a befriender.

It was proposed that befriending co-ordinators ask their new clients to complete a questionnaire before being matched with a befriender, and repeat the process some six months later. Befriending services were approached by e-mail, telephone, and during members' networking meetings, and asked if they would take part in this initiative. This would involve two additional meetings with each befriender over a six month period, and the completion by the coordinator of one form per befriender, in addition.

Initial interest in participating in this study was relatively low (30% of services contacted) and, after looking at the proformas and reading the requirements, the level of engagement dropped further. Services that turned down requests to participate gave many reasons for their non-engagement, including: lack of time, inappropriateness of the study for their client group (e.g. learning disability or dementia), the fact that they already used a different well-being measure, or simply that they did not have time. Some coordinators felt that (some) items on the WEMWBS questionnaire were potentially intrusive and/or upsetting to their clients.

In view of this disappointing response, it was decided not to proceed with the study in its original design. Rather than ask befriending coordinators to participate in the process in a direct way, they would simply be asked to forward information directly to their clients, who could then choose whether or not to respond. Interestingly, engagement by befriending coordinators improved after it was suggested that the study could be conducted without their direct participation, which suggests that the perceived obstacle was befriending coordinators' lack of time or their own level of discomfort at asking certain questions, rather than a desire to protect the client.

The new study design also differed by requesting the completion of the questionnaire on one occasion only, after receipt of befriending support. This more streamlined approach also has some limitations (see below).

The Warwick-Edinburgh Mental Well-being Scale was funded by the Scottish Executive National Programme for improving mental health and well-being, commissioned by NHS Health Scotland, developed by the University of Warwick and the University of Edinburgh, and is jointly owned by NHS Health Scotland, the University of Warwick and the University of Edinburgh.

## 2. Aim

The study was intended to explore perceptions of change in mental well-being among older clients of befriending (and related) projects following receipt of befriending support.

## 3. Methodology

### 3.1. Participating projects and clients

Projects affiliated to Befriending Networks or connected to Evaluation Support Scotland's *A Stitch in Time?* programme, and located in Scotland, whose work included 1:1 befriending with older people, were invited to participate in the study. *A Stitch in Time?* projects that did not focus on befriending, but sought to improve mental well-being, could also participate. Projects were asked to recruit clients who were 65+ years old (the focus of Scottish Government's Reshaping Care for Older People Change Fund) but all people aged at least 50 years were eligible for inclusion. Clients should be in receipt of befriending which had lasted for at least three months, or have completed a spell of befriending that lasted at least three months during the past year. Clients who appeared to have a severe learning or cognitive disability (which would prevent them from understanding the nature of the study; what they were being asked to do, and how the data would be used) were not to be invited to participate because they would not be able to give informed consent. Clients were told that participation in the study was voluntary and that there would be no impact on their (current or future) befriending if they did not take part or withdrew at any stage.

### 3.2. Data and data collection

The data collection procedure differed according to whether the eligible client was currently in receipt of befriending support or had received befriending support during the past year. However, in all cases, clients received a study envelope that contained a letter of invitation (including information about the study), a one page (two-sided) questionnaire and a self-addressed return envelope. The questionnaire asked about the clients' gender and age, and their perception of change in well-being since receiving befriending support (see below). There was also a space where clients could write in comments or stories about their befriending experience. The questionnaire was completed anonymously: no names or identifying information were requested. The information provided in the questionnaire was also treated in complete confidence: nobody from the befriending project had access to any completed questionnaire. Clients were asked to participate on one occasion only.

The questionnaire is reproduced in the appendix (see page 17).

### 3.3. Principal outcome

The principal study outcome was perceived change in well-being, measured by responses to a 14 item scale based on the Warwick-Edinburgh Mental Well-being Scale (WEMWBS). Items were identical to those in the original scale, but the

responses were altered to reflect the study focus on change: 'much more' (scored +2); 'a little more' (+1); 'no change' (0); 'a little less' (-1), and 'much less' (-2). An overall score was calculated by adding the score for each item and dividing by 14. Where an item was not scored (missing), a 'no change' value was substituted. The (theoretical) range of scores for each person was +2 to -2. A 'positive' score (greater than zero) denotes a perception of improvement, a 'negative' score (less than zero) denotes a perception of deterioration, and a score of zero denotes a perception of no change.

### 3.4. Response

93 befriending projects were invited to participate in the study. 37 (40%) projects returned completed questionnaires. In total, 128 questionnaires were returned, of which 123 were included; five were excluded because more than four WEMWBS items were left blank.

Projects returned between 1 (minimum) to 9 (maximum) questionnaires. The mean number of questionnaires per project was 3.3.

Information on gender was missing on 11 questionnaires, while information on age was missing on 13 questionnaires.

## 4. Findings

### 4.1. Quantitative findings

#### *Description of the sample*

Of the 112 clients for whom information on gender is available, 24 (21.4%) were male and 88 (78.6%) were female.

Among the 110 clients for whom information on age is available, the mean age was 73.4 years (sd=12.4) and the age range was 48-94 years.

The distribution by age group was as follows: 35 (31.8%) aged under 66 years, 33 (30%) aged 66-80 years, and 42 (38.2%) aged 81-94 years.

#### *Change in perceived mental well-being across the whole sample: individual items*

There was an overwhelmingly positive response across all items. The greatest amount of positive change was found for the following items: 'I've been feeling interested in other people' (+1.28); 'I've been interested in new things' (+1.15); 'I've been feeling optimistic about the future' (+1.06); 'I've been feeling relaxed' (+1.05); 'I've been feeling good about myself' (+1.05), and 'I've been able to make up my own mind about things' (+1.05).

The lowest level of positive change was found for the following items: 'I've had energy to spare' (+0.43); 'I've been dealing with problems well' (+0.75), and 'I've been feeling useful' (+0.84).

The results for each of the WEMWBS item are presented below (tables 1-14).

**Table 1: 'I've been feeling optimistic about the future': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	3	2.4	2.4	3.3
0 ('no change')	25	20.3	20.3	23.6
+1 ('a little more')	53	43.1	43.1	66.7
+2 ('much more')	41	33.3	33.3	100.0
Total	123	100.0	100.0	

Mean: +1.06

**Table 2: 'I've been feeling useful': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	3	2.4	2.4	3.3
0 ('no change')	40	32.5	32.5	35.8
+1 ('a little more')	50	40.7	40.7	76.4
+2 ('much more')	29	23.6	23.6	100.0
Total	123	100.0	100.0	

Mean: +0.84

**Table 3: 'I've been feeling relaxed': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	4	3.3	3.3	4.1
0 ('no change')	20	16.3	16.3	20.3
+1 ('a little more')	61	49.6	49.6	69.9
+2 ('much more')	37	30.1	30.1	100.0
Total	123	100.0	100.0	

Mean: +1.05

**Table 4: 'I've been feeling interested in other people': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	1	.8	.8	1.6
0 ('no change')	20	16.3	16.3	17.9
+1 ('a little more')	42	34.1	34.1	52.0
+2 ('much more')	59	48.0	48.0	100.0
Total	123	100.0	100.0	

Mean: +1.28

**Table 5: 'I've had energy to spare': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	3	2.4	2.4	2.4
-1 ('a little less')	6	4.9	4.9	7.3
0 ('no change')	63	51.2	51.2	58.5
+1 ('a little more')	37	30.1	30.1	88.6
+2 ('much more')	14	11.4	11.4	100.0
Total	123	100.0	100.0	

Mean: +0.43

**Table 6: 'I've been dealing with problems well': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	7	5.7	5.7	6.5
0 ('no change')	42	34.1	34.1	40.7
+1 ('a little more')	45	36.6	36.6	77.2
+2 ('much more')	28	22.8	22.8	100.0
Total	123	100.0	100.0	

Mean: +0.75

**Table 7: 'I've been thinking clearly': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
0 ('no change')	39	31.7	31.7	32.5
+1 ('a little more')	41	33.3	33.3	65.9
+2 ('much more')	42	34.1	34.1	100.0
Total	123	100.0	100.0	

Mean: +1.00

**Table 8: 'I've been feeling good about myself': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	2	1.6	1.6	1.6
0 ('no change')	28	22.8	22.8	24.4
+1 ('a little more')	53	43.1	43.1	67.5
+2 ('much more')	40	32.5	32.5	100.0
Total	123	100.0	100.0	

Mean: +1.05

**Table 9: 'I've been feeling close to other people': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
0 ('no change')	39	31.7	31.7	32.5
+1 ('a little more')	47	38.2	38.2	70.7
+2 ('much more')	36	29.3	29.3	100.0
Total	123	100.0	100.0	

Mean: +0.95

**Table 10: 'I've been feeling confident': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	2	1.6	1.6	1.6
0 ('no change')	34	27.6	27.6	29.3
+1 ('a little more')	53	43.1	43.1	72.4
+2 ('much more')	34	27.6	27.6	100.0
Total	123	100.0	100.0	

Mean: +0.95

**Table 11: 'I've been able to make up my own mind about things': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -1 ('a little less')	2	1.6	1.6	1.6
0 ('no change')	32	26.0	26.0	27.6
+1 ('a little more')	47	38.2	38.2	65.9
+2 ('much more')	42	34.1	34.1	100.0
Total	123	100.0	100.0	

Mean: +1.05

**Table 12: 'I've been feeling loved': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	3	2.4	2.4	3.3
0 ('no change')	39	31.7	31.7	35.0
+1 ('a little more')	44	35.8	35.8	70.7
+2 ('much more')	36	29.3	29.3	100.0
Total	123	100.0	100.0	

Mean: +0.90

**Table 13: 'I've been interested in new things': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	1	.8	.8	.8
-1 ('a little less')	1	.8	.8	1.6
0 ('no change')	26	21.1	21.1	22.8
+1 ('a little more')	45	36.6	36.6	59.3
+2 ('much more')	50	40.7	40.7	100.0
Total	123	100.0	100.0	

Mean: +1.15

**Table 14: 'I've been feeling cheerful': distribution of scores**

	Frequency	Percent	Valid percent	Cumulative percent
Valid -2 ('much less')	2	1.6	1.6	1.6
-1 ('a little less')	3	2.4	2.4	4.1
0 ('no change')	27	22.0	22.0	26.0
+1 ('a little more')	49	39.8	39.8	65.9
+2 ('much more')	42	34.1	34.1	100.0
Total	123	100.0	100.0	

Mean: +1.02

### *Change in perceived mental well-being across the whole sample: overall*

The total WEMWBS change score (mean across all 14 items) was +0.96 (sd=0.61), close to the value denoting 'a little more'. Only five clients had a mean negative score, while two clients scored zero overall (no change). The remaining 116 clients scored above zero, i.e. denoting positive change. The distribution of overall WEMWBS scores is shown in figure 1.

### *Change in perceived mental well-being: analysis by gender*

For every item and overall, females registered a greater amount of positive change than males. However, for only three items ('I've been feeling close to other people', 'I've been feeling confident' and 'I've been interested in new things') did the difference between males and females reach borderline statistical significance ( $p < 0.10$ ). For the remaining 11 items and the overall mean change score, the difference between males and females was not statistically significant ( $p > 0.10$ ). (This is probably a consequence of small sample size and considerable variation in responses [especially among the males].)

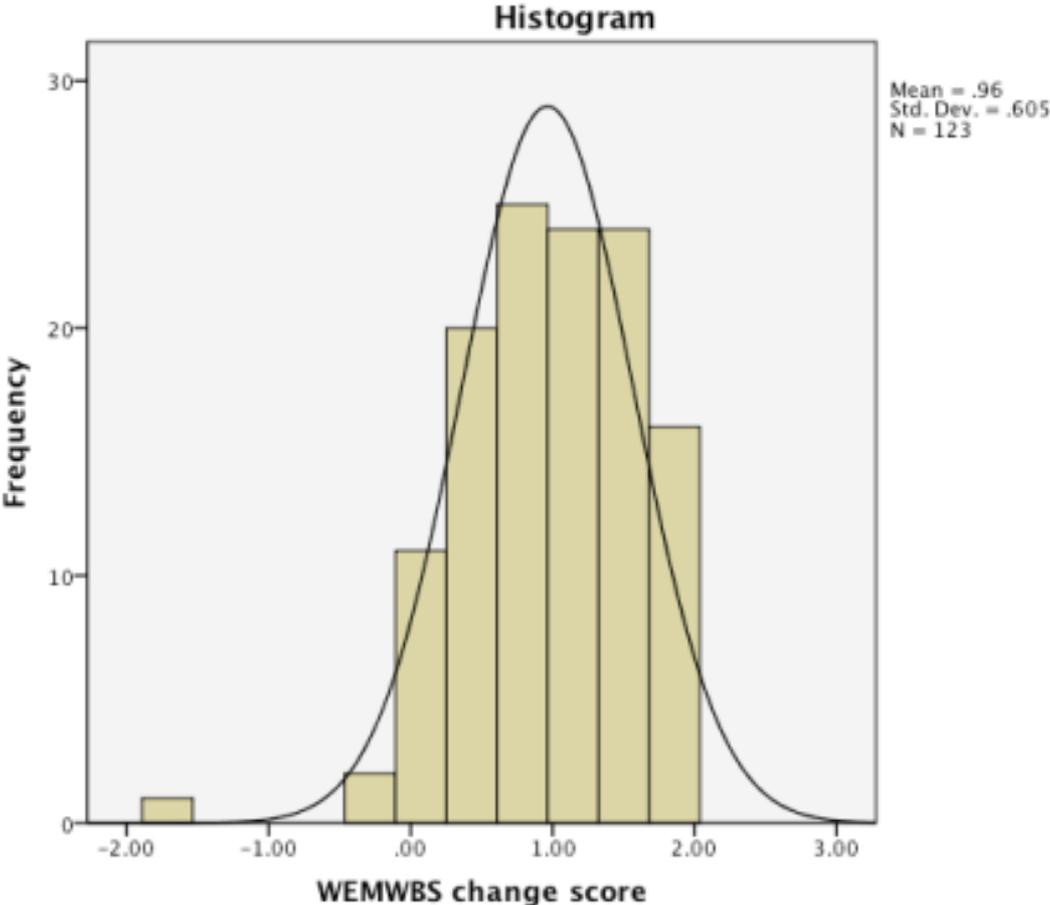
**Table 15: Perceived change in mental well-being: item analysis, by gender**

	<b>Gender</b>	<b>N</b>	<b>Mean score</b>
I've been feeling optimistic about the future	male	24	+1.04
	female	88	+1.07
I've been feeling useful	male	24	+0.71
	female	88	+0.83
I've been feeling relaxed	male	24	+0.79
	female	88	+1.07
I've been feeling interested in other people	male	24	+1.25
	female	88	+1.26
I've had energy to spare	male	24	+0.21
	female	88	+0.47
I've been dealing with problems clearly	male	24	+0.54
	female	88	+0.81
I've been thinking clearly	male	24	+0.75
	female	88	+1.07
I've been feeling good about myself	male	24	+0.83
	female	88	+1.09
I've been feeling close to other people	male	24	+0.67
	female	88	+1.02
I've been feeling confident	male	24	+0.67
	female	88	+1.02
I've been able to make up my own mind about things	male	24	+1.00
	female	88	+1.08
I've been feeling loved	male	24	+0.63
	female	88	+0.94
I've been interested in new things	male	24	+0.88
	female	88	+1.22
I've been feeling cheerful	male	24	+0.96
	female	88	+1.02
<b>WEMWBS total change score</b>	<b>male</b>	<b>24</b>	<b>+0.78</b>
	<b>female</b>	<b>88</b>	<b>+1.00</b>

*Change in perceived mental well-being: analysis by age*

There was a modest (non-significant) positive correlation between age and total WEMWBS score (Pearson  $r = 0.103$ ). This relationship can be seen more clearly in Table 16, in which clients have been assigned to one of three age groups (42-65 years, 66-80 years and 81-94 years). The mean total WEMWBS score increases as age increases. However, the differences across age groups also failed to reach statistical significance ( $p > 0.10$ ).

**Figure 1: Overall perceived change in mental well-being: distribution of scores**



**Table 16: Perceived change in mental well-being, by age group**

Age group	N	Mean score
48-65 years	35	+0.81
66-80 years	33	+0.97
81-94 years	42	+1.04
<b>Total</b>	<b>110</b>	<b>+0.94</b>

**4.2. Qualitative findings**

87 clients took up the invitation to share “comments or stories about [their] befriending experience”. The overwhelming majority of responses were positive in tone. Many made reference to the positive personal qualities of their befriender (see Box 1).

### **Box 1: Positive personal qualities of befrienders (examples)**

*“She is an outstanding personality – interesting, gifted, kind and very good company.”*

*“I feel lucky that I met such a wonderful person.”*

*“She is kind and helpful. She is my best pal.”*

*“She is very kind and interesting.”*

*“I can say we are very fortunate to have very caring befrienders! They are so kind and helpful!”*

*“She is a nice person and she makes me feel comfortable.”*

*“My befriender brightens up my day, she’s like a ray of sunshine when she comes in.”*

*“I feel I have found a new friend who is understanding and compassionate.”*

*“My befriender (distance) is a tonic to me in an otherwise lonely, disappointing life. I look forward to the call each week.... I find my befriender a joy because she is practical, honest and has a positive outlook which challenges me to re-assess how I re-act to situations at times, my befriender has problems too and we help each other. I consider her to be a valued friend.”*

*“I look forward to seeing my befriender, she is good to talk to, down to earth and she cheers me up.”*

*“I have got the most wonderful, caring, kind befriender ... nothing is too much trouble for her.”*

*“[She] is such a nice person and I do like when she is here she cheers me up.”*

*“[She] has always been very kind and understanding to me, and very importantly patient listening to me.”*

Clients also identified social, psychological and behavioural improvements which they attributed to the receipt of befriending (see Box 2).

In common with other investigations of befriending, this study finds that many clients interpreted the relationship with their befriender as a ‘real’ friendship: “She is my best pal.” “I have no family of my own and my befriender has become my family.” “I’ve [...] become a real friend of my befriender.” “I have found a very good friend indeed.” “I feel I have found a new friend [...]” “We are good friends now [...]” “I thoroughly enjoy meeting and chatting with my friend.”

A small minority of clients (n=5) made negative comments about the befriending experience. Two wrote critically about the end of the befriending arrangement: “[...] I was disappointed that it [the befriending arrangement] ended so abruptly.”; “I was disappointed when it [the befriending experience] stopped.” Two were dissatisfied with the frequency or length of visits: “I just wish the visits

were more than once a week.”; “My befriender is only one hour a week, that is not enough to make any difference.” One client wrote tersely (without elaboration): “My last experience was not good.”

**Box 2: Improvements in life domains attributed to receipt of befriending (examples in parenthesis)**

**Social life and social connectedness** (“Made a big difference to my social life...” “I joined a group with my befriender and although she does not come each week now, we meet at the group and I have made more friends within the group.” “[The befriending service] gets me out of the house and gives me something to look forward to every week.” “This service has had a huge positive effect on my life. I have no family of my own and my befriender has become my family.” “I have got the most wonderful, caring, kind befriender. She takes me out every week, we go to the cinema, lunches and shopping, nothing is too much trouble for her. [...] There are many isolated people out there. I myself was very isolated before I got [my befriender]. But I can honestly say my life has been changed since I started with it [befriending].” “[I] feel more connected to society. Best thing that has happened to me.”)

**Mental/psychological well-being** (“A very positive effect on general well-living.” “I meet with my befriender every two weeks on a Tuesday morning for coffee and a chat. I find this very useful as, although I’m in a much better place now than I was after my husband’s death 2 years ago, I still have bad days/times which could easily descend into depression if not dealt with, and one way of dealing with this is that I know I will be meeting up with my befriender which forces (for lack of a better word) me out of the house and gives me a chance to talk things through and put things in perspective.”)

**Coping** (“The befriending scheme [...] has helped me to cope.”)

**Confidence** (“I feel a bit more confident now to try new things.” “I can go out and about with confidence because my befriender knows what to do when I have epileptic seizures. Now I go about running awareness courses about epilepsy, for example to the police and fire brigade, and I have the confidence to this.” “I had no company before I met my befriender. It gave me confidence to meet new people at day care when a place became available.”)

**Independence** (“Since I had my stroke I have found it very difficult to access it. Now with the help of my befriender I am able to use my computer again and [I] am beginning to regain some independence. He is helping me with things I can’t manage to do at present. He is very good.”)

**Physical activity** (“I have just joined an exercise class which I would not have done before...” “I really enjoyed the befriending experience. I was disappointed when it stopped as I have went quite down as I have no one coming to take me out for exercise. I really looked forward to getting out every week with a friend. I feel my progress has went back as I am stuck in the house as I need help with walking.”)

**Trust** (“Trust has been an issue for me due to breaches of trust in my life, causing serious distress. I find my befriender a joy because she is practical, honest and has a positive outlook which challenges me to re-assess how I re-act to situations at times, my befriender has problems too and we help each other. I consider her to be a valued friend.”)

## 5. Discussion

### 5.1. Summary of findings

This study reports the findings of a survey of 123 older clients of 37 befriending projects which was intended to explore their perceptions of change in mental well-being associated with their befriending experiences. The principal quantitative outcome was derived from responses to a 14 item scale based on the Warwick-Edinburgh Mental Well-being Scale (WEMWBS). The questionnaire also sought “comments or stories about [clients’] befriending experience” in an unstructured, qualitative format.

Over three-quarters of the sample was female and the mean age was 73.4 (range 48-94) years.

There was a highly positive perception of change in mental well-being and recognition of other benefits linked to receipt of befriending, both in response to WEMWBS items and in qualitative comments. The total WEMWBS change score (mean across all 14 items) was +0.96 (sd=0.61), close to the value denoting ‘a little more’. Only five clients had a mean negative score, while two clients scored zero overall (no change). The remaining 116 clients scored above zero, i.e. denoting positive change. Likewise, the overwhelming majority of comments were positive in tone. Many made reference to the personal qualities of their befriender. They also identified improvements, which were attributed to the receipt of befriending, in their social life and connectedness to others,

mental/psychological well-being, coping, confidence, independence, physical activity and trust in others.

Further analysis of the WEMWBS data revealed the possibility of an association between perceived improvement in mental well-being associated with the receipt of befriending, on the one hand, and socio-demographic characteristics, on the other. Females registered a greater amount of positive change than males, and there was a tendency for the WEMWBS change score to increase with age. These findings suggest that befriending may have a greater beneficial effect on women and the very old. However, it is important to note that differences in the total WEMWBS score by both gender and age group failed to reach statistical significance. Confirmation of these findings using a larger, representative sample and a more robust research design (see below) is recommended.

## 5.2. Study limitations

It is important to note three main methodological limitations of the survey on which this study is based.

First, the study design is retrospective: there was no contemporaneous assessment of mental well-being (WEMWBS) at baseline, only an assessment of perceived change in mental well-being at some point (unknown) in the course of a befriending arrangement "*compared to how [the befriended] felt before [she/he] spent time with [her/his] befriender.*" There may be a tendency to report more positive change than would be the case using a methodologically stronger design (e.g. measuring current mental well-being at baseline and again at follow-up).

Second, the representativeness of the sample is unknown. Therefore, it is not possible to be confident about generalising the findings to all (older) clients of befriending projects. Dissatisfied befriendeds may have been less likely to return completed questionnaires. There may have been differential willingness to participate in the study by project and/or age and/or gender and/or other (unmeasured) individual characteristics.

Third, the psychometric qualities (validity, reliability) of the scale used to measure perceptions of change in well-being are unknown.

## 5.3. Implications for befriending services

It is widely acknowledged, and a source of frustration, among befriending services that there is insufficient research evidence about the effectiveness of befriending. Befriending Networks, when evaluating its own services to members, invariably receives regular requests to provide such data or to undertake a national study; however, when requesting evaluation data from befriending services, the overall response level is poor. This is likely to be a reflection of the multitude of tasks expected of the individual befriending coordinator, rather than any lack of commitment on their part, as well as the frequency and multiplicity of reporting processes, both internal and external, that they are expected to undertake. While information-gathering is so patchy, it is impossible to collect robust evidence of effectiveness. There needs to be further joint work done to tackle this challenge if befriending services are to be able to demonstrate conclusively that what they do has an impact on the lives of people they support.

Interestingly, a number of befriending services which did not take part in the study cited as a reason the possible discomfort of the respondent about the intrusiveness of the questions. However, the responses that were received from the older people indicated that many were extremely forthcoming about their situation, prepared to complete the questionnaire, and articulate in their additional comments about the service they received. This may suggest that there is reluctance on the part of the befriending service to ask questions which are perceived as intrusive. While it is commendable that befriending services regard the welfare of their befriendees as paramount, it is perhaps worth noting that care should be taken not to make assumptions about capability or preparedness to answer direct questions, as those who did respond seemed keen to share in some detail how they felt about the service.

There are, however, a number of specific issues for befriending services in terms of effective information-gathering, particularly around the disparity of services on offer.

There are hundreds of services across the country that describe all or part of their activity as befriending, and, similarly, services that provide volunteers who support vulnerable people in the community, yet describe what they do without using the term befriending – e.g. ‘community connecting’ or ‘home visiting’ services. Such services can all be assumed to have a valuable preventative role, to a greater or lesser degree; however, each individual befriending service will have different funding arrangements, different targets, and a wide variation in approaches to practice; for example, some services are time limited due to funding constraints or the philosophy of the individual organisation, whereas others, particularly those which work with older people, are open-ended. Some have very specific goals – e.g. to enable people to become more physically active-and others a more general focus on companionship or loneliness. Some services are more successful at volunteer retention than others, and this will impact on the quality of the experience of the befriender. Some of the more negative comments made by respondents about the quality of their experience serve as a reminder that befriending is, after all, a voluntary activity and volunteers cannot always predict the length of their commitment, despite rigorous selection and careful training processes.

Befriending services differ widely from one another in terms of their overall aims. Several services exist to support people with dementia or other degenerative condition (e.g. motor neurone disease, Parkinson’s) where the benefits of befriending will be more difficult to determine, and the outcome for the service user will never be a manifest improvement in their overall quality of life. A service designed, for example, to support people to reconnect with community activities will have very different outcomes and impact measurements from a service which supports people with dementia within care homes. The person-centredness of befriending services is one of the great strengths of this type of intervention, but it invariably makes aggregating data or information across such disparate services fairly meaningless. This particular study did not attempt to differentiate between different types of befriending service, nor was it possible to measure ‘quantity’– i.e. frequency of contact or longevity of the relationship, which, again, will have an impact on the quality of experience of the beneficiary. A few services which describe themselves as providing befriending do this very much as an ‘add-on’ to other means of support, generally because they have identified a need but have not identified sufficient resources to create a service

with, for example, dedicated staff members, or specific volunteer training. It is unrealistic to assume that such services will prioritise thinking about the specific impact of the befriending service, or indeed to assume that a service which is poorly resourced from the beginning will be able to demonstrate any sustained impact on their beneficiaries.

#### 5.4. The benefits of befriending

What is encouraging from the information offered in the study is the sense of warmth and affection from a number of respondents towards their befrienders, and the conviction that they are participating in a real relationship which is meaningful to both parties, and frequently referred to as being life-changing for the befriended. Comments and observations were overwhelmingly positive, with respondents frequently being able to identify specific areas of their lives that have improved since having the support of a befriender. **The case for involving service users' voices in evaluations is made very eloquently by participants in this small study**, and Befriending Networks recommend that they should be central to future work of this kind.

### 6. Conclusion

This study has demonstrated the feasibility of using the Warwick-Edinburgh Mental Well-being Scale to measure change in mental well-being among older people associated with receipt of one to one befriending support. Befriendeds perceived an improvement in mental well-being and recognised other benefits linked to receipt of befriending. There is some suggestion that these positive changes may be more pronounced among women and the oldest age group. However, as a result of methodological limitations, these findings needed to be treated cautiously and confirmed using a more robust study design.

## 7. Appendix: Questionnaire

### BEFRIENDING STUDY: CLIENT QUESTIONNAIRE<sup>1</sup>

We would like to know how you're feeling now compared to how you felt before you spent time with your befriender.

For each statement below, please tick the box that best describes the difference in how you're feeling.

STATEMENTS	Much more	A little more	No change	A little less	Much less
I've been feeling optimistic about the future					
I've been feeling useful					
I've been feeling relaxed					
I've been feeling interested in other people					
I've had energy to spare					
I've been dealing with problems well					
I've been thinking clearly					
I've been feeling good about myself					
I've been feeling close to other people					
I've been feeling confident					
I've been able to make up my own mind about things					
I've been feeling loved					
I've been interested in new things					
I've been feeling cheerful					

<sup>1</sup> This scale is based on the Warwick-Edinburgh Mental Well-being Scale. The response categories have been changed to fit the purpose of the study. The psychometric characteristics of this revised scale are unknown.

The Warwick-Edinburgh Mental Well-being Scale was funded by the Scottish Executive National Programme for improving mental health and well-being, commissioned by NHS Health Scotland, developed by the University of Warwick and the University of Edinburgh, and is jointly owned by NHS Health Scotland, the University of Warwick and the University of Edinburgh.

**A few questions about yourself**

**Are you...** [TICK ONE BOX]

Male

Female

**How old were you on your last birthday?**

\_\_\_\_\_ years [WRITE IN AGE AT YOUR LAST BIRTHDAY]

**Do you have any comments or stories about your befriending experience that you can share with us. Please write in the box below.**

**We're most grateful to you for taking part in this study. Please put the completed questionnaire into the stamped self-addressed envelope and post back to us as soon as possible.**

# A Stitch in Time?

A Stitch in Time? is a partnership project to support the third sector to collect and present evidence about its contribution to Reshaping Care for Older People (RCOP). The programme runs from April 2013 to March 2015 and focuses on third sector organisations working with older people and carers in Lothian.

## A Stitch in Time? publications



**A model to explain the third sector contribution to Reshaping Care for Older People**



**Focus on third sector interventions that allow older people to stay positive and in control**



**Indicator Bank for third sector outcomes for older people**



**Focus on third sector interventions to enable older people to keep or be more financially and materially secure**



**Focus on third sector interventions that make the physical and social environment more age friendly**



**Focus on third sector interventions that make the system work better for older people**



**Focus on third sector interventions to enable older people to keep or be more socially connected**



**Focus on third sector interventions that ensure healthy and active ageing**

To accompany this series there are **evaluation case studies** and a number of **evidence reviews**. To see all publications associated with A Stitch in Time please see Evaluation Support Scotland website.

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