

Evidence Paper to Health, Social Care and Sport Committee's inquiry into loneliness and isolation

Context

Loneliness and unwanted isolation is not a phenomenon specific to Wales. There is a growing awareness of the problem of loneliness and unwanted isolation across the UK as a whole.

The terms "loneliness" and "isolation" are often used interchangeably, but are distinct concepts. People can be socially isolated without feeling lonely, or feel lonely amongst other people. Research by various bodies has suggested a range of definitions for these terms; however, recent work by Swansea University's Centre for Ageing and Dementia Research and the Centre for Innovative Ageing defined loneliness and unwanted isolation as "the unpleasant experience that occurs when a person's network of social relations is deficient in some important way, either quantitatively or qualitatively. In contrast, social isolation is an objective measurement, based on the absence of contact with other people, which can be quantified, and integration with other members of society. It is the opposite of good social support".

The Welsh Government's forthcoming Loneliness and Unwanted Isolation Strategy will determine an agreed definition of what we mean by the term "loneliness and unwanted isolation" for use in Wales. This paper outlines some of our early thoughts as we begin to develop this strategy.

Data from the Cognitive Function and Ageing study -Wales (CFAS-Wales)¹ found that 25.3% of older adults in Wales reported being lonely and 26.9% socially isolated. Research demonstrates that loneliness has an effect on mortality that is similar in scale to smoking 15 cigarettes a day², and consequently tackling loneliness and isolation is needed to protect both the individual and the public purse. Improving people's resilience and making them less susceptible to the harmful effects of loneliness is crucial in maintaining people's health, independence and wellbeing. However, it would be better to prioritise the prevention of loneliness so its impacts are not felt in the first place.

Whilst loneliness and unwanted isolation is usually associated with ageing, it is not just something that affects older people. In 2010, the Mental Health Foundation commissioned a survey³ on loneliness in adults throughout the UK and found that the 18 to 34-year-olds surveyed were more likely to feel lonely often, to worry about feeling alone and to feel depressed because of loneliness than the over-55s.

¹ <https://www.cam.ac.uk/subjects/mrc-cognitive-function-and-ageing-study-%28cfas%29>

² <http://www.ahsw.org.uk/userfiles/Research/Perspectives%20on%20Psychological%20Science-2015-Holt-Lunstad-227-37.pdf>

³ https://www.mentalhealth.org.uk/sites/default/files/the_lonely_society_report.pdf

The recent study ‘Trapped in a bubble’⁴ identified six further vulnerable groups; young new mums; individuals with mobility limitations; individuals with health issues; individuals recently divorced or separated; individuals living without children at home and retirees; and individuals recently bereaved. In addition, some women in ethnic minority groups also experience loneliness and unwanted isolation due to cultural and language barriers⁵.

Recent research by Age UK⁶ has indicated that identifying people at risk of loneliness can be difficult, but targeting those disproportionately affected by loneliness e.g. lower socio-economic groups, the widowed, the physically isolated, people who have recently stopped driving, those with sensory impairment and the very old – has proven most effective.

Loneliness and unwanted isolation is a cross-cutting area of work and the Welsh Government is already taking account of it when considering policy across ministerial portfolios. In particular, the Well-being of Future Generations (Wales) Act 2015 requires that policies take account of the bigger picture in ensuring well-being is protected and enhanced.

The Wales we want is one in which supports connections between people and tackles loneliness and unwanted isolation. It is a Wales where we build on people’s strengths to ensure they have the skills, resources and capacity to access opportunities. Therefore our collective effort should focus on fostering capacity as individuals and people’s connections to others – this is about building healthy, positive relationships between people; tackling isolation and supporting people to build the skills and capacity they need to access opportunities and to contribute to an shape the communities they live in.

Dealing with the health issues that can result in loneliness and isolation

Evidence shows that loneliness and unwanted isolation can contribute to illness. In particular, it is associated with poor mental health and conditions such as cardiovascular disease, hypertension and dementia. Loneliness also has a much wider public health impact too, as it is associated with a number of negative health outcomes including mortality, morbidity, depression and suicide. Minimising the impacts of loneliness and unwanted isolation is therefore beneficial from both a public health and financial perspective.

Primary care settings are essential in helping to combat loneliness and isolation. They are the mainstay of the health system, tackling the root causes of ill health, preventing people from being admitted to hospital unnecessarily, helping those who have been admitted to get home quickly with the right support, and motivating and supporting people with chronic conditions to manage their health at home. As such, it is the first port of call in spotting early signs of loneliness and isolation.

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http://www.redcross.org.uk/~media/BritishRedCross/Documents/What%20we%20do/UK%20services/Co_Op_Trapped_in_a_bubble_report_AW.pdf

⁵ <http://eprints.hud.ac.uk/162/1/WrayGender.pdf>

⁶ http://www.ageuk.org.uk/documents/en-gb/for-professionals/evidence_review_loneliness_and_isolation.pdf?dtrk=true

We are increasingly moving towards a more social model of health through the primary care clusters, which draw in all sources of help to collaborate in assessing and meeting the health and wellbeing needs of individuals, families and local communities in a coordinated and integrated way. These will be ideally placed in supporting those individuals who are suffering from loneliness and unwanted isolation to access, at an early stage, the support and advice they need.

In Wales, we have a vast array of non-clinical community services which offer real health and wellbeing benefits. They range from rambling groups and befriending support, which can have clear beneficial impacts on loneliness and isolation, to debt counselling and parenting classes. These types of activities or support can work alongside clinical care or even act as an alternative to medication. The benefits of community-based support and activities for people feeling isolated and lonely can be numerous. Overall these benefits can result in increased self-esteem, confidence and empowerment.

In line with our ambition for a social model of health and wellbeing, access to these services needs to be systematic and seen as a normal part of the system. Social prescribing is a term for a mechanism that systematically links people with these community services. Locally, there is investment in social prescribing models based on roles which help people to assess their wellbeing needs and agree with them what local care and support will help meet those needs.

In Torfaen, for example, social prescribers are located in GP surgeries and receive referrals from anyone experiencing a social issue that is impacting on their physical or mental health. The patient has the opportunity to tell their whole story, sometimes for the first time, and to work with the social prescriber to decide how best to resolve these issues. After the recognised success of north Torfaen's social prescriber, the scheme was extended to south Torfaen this January.

The Welsh Government is developing proposals to implement its commitment in Taking Wales Forward for a pilot social prescribing scheme by this December. This will be aimed specifically at improving the mental health offer and the support for people with low-to-moderate mental health issues. This will assist in promoting services that improve wellbeing for people and therefore reduce loneliness and isolation.

Tackling stigma and discrimination is a priority area within Together for Mental Health. Such stigma can exacerbate feeling of loneliness and isolation. *Time to Change Wales*, which is part funded by the Welsh Government, is the first national campaign to end the stigma and discrimination faced by people with experience of mental health problems in Wales. It includes a Young Person's programme focused on anti-stigma and discrimination programme led by, and for, young people. Over the course of the project, the Young Champions will directly engage at least 5,000 young people.

Gofal's 'Journeys' project, funded by Welsh Government, aims to enhance and expand the current model of peer support groups who provide people with mental health problems to share experiences, build self-esteem and confidence, and reduce social isolation.

Loneliness and unwanted isolation are often a precursor to dementia. Within the draft Dementia Strategic Action Plan, which went out to formal consultation earlier this year, it also recognises the need to tackle isolation and loneliness. The final document will include actions that look to develop communities / activities that are dementia friendly.

We support the Alzheimer's Society's *Dementia Friends campaign*, which promotes understanding of dementia and aims to reduce its stigma, which can lead to people with dementia experiencing loneliness and social exclusion.

Promoting independence, confidence, health and well-being is vital to preventing and tackling loneliness and unwanted isolation, and this is especially the case for people with sensory impairment. Welsh Government's *Together for Health: Eye Health Delivery Plan* and the *Framework of Action for people who are deaf or living with hearing loss* set out our plans to support people in Wales to live independently in their communities. Both policy documents are underpinned by the need to reduce loneliness and isolation and embrace the principles of the Well-being of Future Generations Act.

We recognise there are barriers to equality and inclusion which must be removed if we are to create a level playing field. This includes not only people who are disabled, but also people with other protected characteristics. *Diverse Cymru* are undertaking a campaign, with support from other organisations, to help combat social isolation in the BME/LGBT communities.

Ageing Well in Wales is a national Programme hosted by the Older People's Commissioner for Wales. It brings together individuals and communities with public, private and voluntary sectors to develop and promote innovative and practical ways to make Wales a good place to grow older for everyone. It focuses on various themes and importantly one of these is to reduce loneliness and unwanted isolation.

Other issues exacerbating loneliness and unwanted isolation

The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 aims to improve prevention, protection and support for people affected by violence against women, domestic abuse and sexual violence. Whilst the Act and the Strategy do not tackle loneliness and isolation per se, we know that many people experiencing violence and abuse may also be living in isolation.

Survivors of violence against women tell us that women's groups and peer support reduces isolation and maximises independent spaces to increase confidence, esteem, and empowerment⁷ Further research has found that BME women are disproportionately affected by different forms of abuse e.g. forced marriage, "honour based" violence, FGM, sexual exploitation in the form of commercial sex work, trafficking etc. The multiple vulnerabilities from these overlapping contexts makes it harder for women to flee violence. Survivors may face additional barriers to seeking help, such as racial discrimination, religious stereotyping, fear of community

⁷ Are you listening and am I being heard? Survivor Consultation: A report of the recommendations of survivors of violence against women, domestic abuse and sexual violence in Wales, March 2016: Cymorth i Ferched Cymru / Welsh Women's Aid).

dishonour and rejection, and an insecure immigration status, all of which may prevent them from accessing protection. Additionally, survivors from ethnic minority communities are likely to have barriers to receiving, or asking for, services.

We must work hard to ensure that the strategy that we produce also focuses on these difficult issues.

Enabling inclusion

The ability to get around is a basic requirement in a modern society. Regular public transport services are important not only in respect of the journeys themselves, but also for the human interaction they enable. For many people, particularly older people and those in isolated communities, getting about is not just about the transaction of the journey itself. It is also about the people they meet and the conversations they have along the way, and at their destination, which can prevent feelings of loneliness and unwanted isolation.

We are providing £25m to local authorities in 2017-18 under the Bus Services Support Grant to help local authorities to subsidise socially-necessary bus and community transport services. Community transport plays an important part in providing access to key services for protected groups, and in improving connectivity to remote rural and urban communities. It provides a variety of services such as community car schemes, door-to-door dial-a-ride services, community bus services and group transport, which address needs not met by public transport. These types of schemes are essential, especially for those who live with disabilities, and those in more remote settings.

Our concessionary travel schemes (both bus and rail) offer an essential life line, particularly to older people and those with a disability. The ability to access free public traffic enables pass holders greater opportunity to access both public services, but also social opportunities.

Increasing levels of physical activity in Wales is a core priority for the Welsh Government. It recognises the role in which physical activity, and specifically active travel, can play in improving health. Active travel helps address some of the gravest health issues we face. Its beneficial impact on a wide range of chronic conditions, such as, heart disease, diabetes, obesity, some cancers and mental illness including helping to reduce the chances of developing dementia, is well proven.

The impact of housing on loneliness and unwanted isolation

Housing and Housing Related Support have an important role to play in helping to tackle loneliness and unwanted isolation and in providing the foundation to enable people to live independent and fulfilling lives and play an active role in the local community.

As people age, in particular, being in a supportive environment and in the right house can play a part in combatting loneliness and unwanted isolation. For older people specifically, who can spend up to 90% of their time in their home, an appropriate home – defined by its location, warmth, and suitability to their needs - is fundamental to their quality of life.

Poor quality and inaccessible housing can contribute towards feelings of loneliness and unwanted isolation. There is a strong case for continued and innovative investment in services which support people to live fulfilled lives, extending independent living in their home and in providing a broader range of housing options.

The installation of assistive technology in, and appropriate adaptations to, the home assists people to live independently, often allowing them to carry on living in their own communities, keeping them connected, mobile, safe and less likely to experience loneliness and unwanted isolation.

Employment and loneliness

We recognise the role that decent and sustainable employment plays as part of a wider network of social interactions that can help to prevent or combat individual feelings of loneliness and unwanted isolation. Work often takes place in a social setting – an office, industrial, retail or community environment that offers the opportunity to interact with work colleagues, customers and others. Work also provides the financial means through which individuals can participate in a range of social activities with family and friends, reducing the risk of loneliness and unwanted isolation.

The role of work in combatting and preventing loneliness and unwanted isolation is important across an individual life-course, but it is particularly important at key transition points in life. A lack of access to work when young can have an isolating effect that can have a longer-term impact, whilst for older people, unemployment adds an additional factor at a time of life when an individual may be under increased risk loneliness and unwanted isolation. Equally, for some people with protected characteristics, for example disabled people, a lack of access to the world of work may reinforce existing feelings of loneliness and unwanted isolation.

We make an indirect contribution to tackling loneliness and unwanted isolation through the broad range of actions we undertake to support jobs (nearly 150,000 supported in the last Assembly term) and the help we provide to equip people with the skills they need to become active in the labour market. However, we also recognise that not all work is in and of itself a panacea to combating loneliness and unwanted isolation.

The changing world of work, the prevalence of some types of home working, and some employment practices mean that not all work takes place in a social setting and even when it is, unfair employment practices can lead to loneliness and isolation in work. Through our fair work agenda and our commitment to make Wales a fair work nation, we are exploring what more we can do with business and others to promote good employment practices and provide those in work with a sense of achievement and value.

Digital inclusion

Digital inclusion is embedded in the Older People's Strategy and the Ageing Well in Wales programme. Digital inclusion remains about ensuring that everyone has the opportunity to benefit from the rapid pace of technological change that is taking place

in our society, so people can use digital technologies, particularly the internet, in ways that enhance their lives.

Those who are not digitally competent may not recognise the benefits. For people to want to use the internet, they have to feel that it is relevant to their own situations, be it for work or in their personal life. Ensuring everyone has access to the internet and the motivation and skills to use it effectively, will help create a more prosperous, healthier and resilient society with equality at its heart. People's life chances can be transformed, including reducing feelings of unwanted isolation and loneliness by helping individuals to stay in touch with friends or family through Skype and opening up access to other online support networks.

The Welsh Government's £1 million per annum dedicated digital inclusion programme, *Digital Communities Wales*, provides support to organisations which work with the most digitally excluded groups (older people; disabled people; those living in social housing; the economically inactive & unemployed), through training and supporting volunteers to act as digital champions.

Older people remain a priority group who need support to use digital technologies, to help them feel less isolated, save money on cheaper online goods and services and help them stay in employment for longer.

Volunteering and Compassionate Communities

Volunteering is important not only in reaching out to those who feel lonely or isolated, but also in reducing an individual's feelings of loneliness and unwanted isolation. The Third Sector Scheme includes a commitment to develop a new Volunteering Policy, which has been developed through a Working Group established by the Third Sector Partnership Council. The Policy sets out the roles of Welsh Government, volunteer-involving organisations and Third Sector Infrastructure bodies in supporting volunteers.

There are a number of community based approaches to supporting people who are lonely and isolated and it is important that any strategy promotes sustainable models that are integrated into the heart of communities and not reliant upon continued financial support for their existence.

The Welsh Government has appointed Wavehill Ltd to undertake a review of the basic principles of sustainable community based volunteering approaches to tackling loneliness and unwanted isolation among older people. The research will have a particular focus on the process, role and models of best practice of volunteer led community engagement for tackling loneliness and unwanted isolation across Wales and the impact they have had. The research will also review available literature and map current befriending services and the mechanisms/protocols used to access them.

It is intended that this work complements the wider work being undertaken by Public Health Wales to review the evidence of the impacts and benefits of structured mechanisms to link people to wellbeing services (Social prescribing).

The research findings will be published in September 2017 and used to inform the development of further community led volunteer models for tackling loneliness and unwanted isolation among older people across Wales in 2017/18 and 2018/19.

Digital Communities Wales are supporting the 'Ffrind i Mi' project, delivered by Aneurin Bevan University Health Board and its partners, to try and make sure anyone who feels lonely or isolated are supported to reconnect with their communities. Funded through the Health Technology Wales Scheme and 1,000 Lives, Ffrind i Mi aims to try and make sure that anyone who feels lonely or isolated are supported to reconnect with their communities.

Working with Community Connectors and existing volunteer befriending services, it looks to recruit as many volunteers as possible to support those who are lonely and/or isolated. Community Connectors work throughout Torfaen, Blaenau Gwent, Monmouthshire, Caerphilly and Newport and aim to reconnect people back into their communities by matching the interests of people to volunteers with the same interests e.g. gardening, watching sport, dog walking etc.

Next Steps

Welsh Government remain committed to reducing loneliness and unwanted isolation through their existing work. However, to ensure greater emphasis is put on this important issue, Welsh Government will be producing a Loneliness and Isolation Strategy. The strategy will give consideration to all groups that could be negatively impacted by loneliness and unwanted isolation, including the groups identified by the '*Trapped in a Bubble*' report. The findings from the Committee's Inquiry will help to inform that strategy.