# WLGA RESPONSE TO THE CONSULTATION ON CONNECTED COMMUNITIES – TACKLING LONELINESS AND SOCIAL ISOLATION



# January 2019

#### **About Us**

- The Welsh Local Government Association (WLGA) represents the 22 local authorities in Wales and the three national park authorities and the three fire and rescue authorities are associate members.
- 2. The WLGA is a politically led cross-party organisation, with the leaders from all local authorities determining policy through the Executive Board and the wider WLGA Council. The WLGA also appoints senior members as Spokespersons and Deputy Spokespersons to provide a national lead on policy matters on behalf of local government.

#### Introduction

- 3. There is growing recognition that loneliness and social isolation is a serious problem, with far reaching implications, not just for individuals, but also for wider communities. Whilst in the past, loneliness and social isolation was sometimes viewed as a trivial matter, it is increasingly understood to be a serious issue which can have a significant impact on a person's mental and physical health.
- 4. A study featured in the BMJ (formerly the British Medical Journal) found that loneliness and social isolation are associated with a 30 per cent higher risk of having a stroke or developing heart disease. The health impact of loneliness is also said to be the equivalent of smoking 15 cigarettes a day. This has a significant impact on public services and in particular on health and social care and we believe that this means that loneliness and social isolation must be recognised as a major public health issue.

- 5. Given the current population predictions, where it is forecast there will be an increase in the number of older people living alone, particularly in the 85+ age range, the issue of loneliness and social isolation is likely to continue to be a significant issue for which public service and partner organisations responses are required. However, it is important to acknowledge that this is not just an issue for older people and that public perceptions of who experiences loneliness is out of sync with the reality, with more people mistakenly perceiving it as an issue faced either solely or predominately by older people. It is therefore welcomed that the consultation recognises this as an issue that can affect anyone, at any age, for a wide variety of reasons.
- 6. The terms loneliness and social isolation are often used interchangeably, but it is possible for people to be isolated but not lonely and vice-versa. Loneliness is a subjective state a response to people's perceptions and feelings about their social connections and well-being rather than an objective state. Therefore, loneliness requires a more subtle response, often going beyond efforts simply to maintain number, or frequency, of social connections. It is welcomed that the consultation document seeks to define both loneliness and social isolation, helping to set out the distinction between loneliness and social isolation and supporting the development of solutions that are not focussed simply on increasing opportunities for people to meet or speak, but on helping to build, maintain and re-establish meaningful relationships.
- 7. The WLGA welcomes the publication of 'Connected Communities: Tackling Loneliness and Isolation' and believes this document, and the subsequent actions that will follow, will help increase the focus and recognition of the negative impact loneliness and isolation can have on people and communities, across all ages and different groups, and the need for agencies to take action in addressing these issues, working together to ensure a holistic approach. We look forward to continuing to work with you as this work develops further.

# Scale, Causes and Impact

8. The Local Government Association report, 'Combating Loneliness', recognises a number of potential risk factors for loneliness which all need to be taken into account when looking at what more can be done to tackle loneliness. These risk factors include: living alone; poor health; being aged 80+; loss of friends; having no access to a car/never using public transport; living in rented accommodation; living on low income or on benefits as main income; having no access to a telephone; and hearing

and sight loss. Variables can include, but are not limited to, households that: have a head of household aged 65-74, or 75+; have one occupant; report various health issues including mental illness, anxiety and depression; do not own a car; speak to their neighbours less than once a month or never; have a low annual income; require help with bin collection; have bereaved older people.

- 9. Social isolation has also been identified as an important health inequality issue. The 2010 Marmot Review found that 'individuals who are socially isolated are between two and five times more likely than those who have strong social ties to die prematurely'. The UCL Institute of Health Equity builds on this work. In a joint initiative with Public Health England, the Institute produced a practical resource summary called 'Reducing Social Isolation Across the Lifecourse'. It comments that 'social isolation is a health inequality issue because many of the associated risk factors are more prevalent among socially disadvantaged groups. Social disadvantage is linked to many of the life experiences that increase risk of social isolation, including poor maternal health, teenage pregnancy, unemployment, and illness in later life.'
- 10. This all points to the fact that the causes of loneliness and social isolation are often complex, multi-layered, and mutually reinforcing. It stems from a combination of personal, community, and UK-wide factors rather than being the product of one event or change in circumstance. People experiencing loneliness and social isolation need different types of support depending on their individual circumstances. To prevent and tackle loneliness and social isolation, different levels of need require a combination of formats and programmes (both formal and informal) as individuals move along the spectrum from temporary to chronic circumstances. It therefore requires a society-wide response where the strengths of multiple partners are utilised. This points to the need to take a cross-governmental approach to tackling loneliness and social isolation and therefore the final plan that is developed in response to this consultation needs to set out how Welsh Government will enable effective joined up cross-governmental responses to loneliness and social isolation. Whilst the consultation identifies a number of programmes and projects across different Welsh Government departments it is essential that these approaches are co-ordinated, aligned with each other and put on a sustainable footing.
- 11. During 2015, a group of independent researchers were tasked by the Social Services Improvement Agency (SSIA) to find out what helps and what can hinder the wellbeing for older people and those

caring for them. This research looked at what the fundamental building blocks of a good life are and importantly in relation to loneliness and social isolation they include:

- **Being independent**: people did not want to have to rely too much on other people
- **Being connected to other people**: there was huge diversity in the relationships that mattered to people friendships with younger people, neighbours who 'pass tomatoes over the garden fence', shopkeepers who say 'hello', as well as partners, family and long-standing friends.
- **Being active**: being able to participate in interests and pleasures which give meaning to life.
- 12. The research also considered what helps or hinders older people achieving wellbeing, identifying the following:
  - Transport: over half of those spoken to still had access to a car those in rural areas felt this
    was essential; although there were criticisms of bus services, the free bus pass was very
    popular and buses can also be key social hubs for older people.
  - **Home environment**: being able to remain in your own home was central to maintaining control for many, though upkeep, utility costs and accessibility were often challenging.
  - Neighbourhood: the availability of local facilities; the sense of community safety (or the fear
    of crime); and the sorts of relationships they had within the local community all impacted on
    wellbeing.
  - Money: some people reported that poverty was causing them to feel anxious and isolated.
  - Information Technology: Some people were using the internet to improve their wellbeing in a range of ways, from ordering food and other shopping to be delivered online; using Skype to keep in touch with dispersed family; or emailing fellow members of social groups. However, fear of scams was a key barrier here, along with knowledge, skills and confidence; cost; poor connectivity; and disability (especially arthritis and visual impairment).
- 13. This research also included the production of a literature review entitled, 'The anatomy of resilience: helps and hindrances as we age: A review of the literature'. This document identifies relevant published research evidence from Wales, the UK, and further afield. Important strands emerge, such as, "Social connectedness" and the importance of finding and building on the strengths in individuals, families and communities; how we plan for and cope with (or not) key life events and transitions; what assists us to seek (or stops us from seeking) timely advice? And what can trigger (or arrest) abrupt declines?

- 14. It is important to appreciate that anyone can experience loneliness and/or social isolation. Although much social policy and practice has focused on tackling the effects of loneliness in later life, it is a problem that exists at all life stages. A poll for the Campaign to End Loneliness found that over three quarters of GPs said they were seeing between one and five lonely people a day. There are key triggers that can disrupt lives and create a situation in which loneliness or social isolation become the norm. These include: becoming a new mum at a young age; retirement; experiencing long-term health issues or mobility limitations; dealing with bereavement; or going through a family breakdown, such as divorce or separation. The relationship between loneliness and these key factors needs to be better understood, with attention given to the experience of loneliness in younger adults, those in middle age and older people. This will ensure interventions are relevant and appropriate to individuals at different times of life.
- 15. One of the biggest challenges for youth services in engaging young people, for example, is the 'pull' of social media which can lead to more young people isolating themselves in bedrooms, which can cause a number of issues inability to socialise and form relationships, depression, anxiety/agoraphobia, lack of exercise and obesity. Work pressures for parents can also compound this as parents are not always able to spend as much time with their children as highlighted in Children's Society report, 'Troubled Teens: A study of the links between parenting and adolescent neglect' which found that many teenagers are left to their own devices too early at home and can therefore feel lonely.

## Ways of Addressing Problems of Loneliness and Social Isolation

16. Despite extensive research into the nature and scale of loneliness and social isolation, there is a lack of high quality evidence to demonstrate the impact of different interventions to combat its effects. There are also differences of opinion about the relative impact of interventions that work at either an individual or a community level. Whilst hard cost benefit analysis of loneliness is still scarce, there is some data that indicates good returns on investment. Given the high cost of the health, social care and other services required by lonely individuals if their circumstances are not addressed there is a strong case for investment in this area.

- 17. The recent British Red Cross and Co-op publication, 'Trapped in a Bubble', points to the need to develop a combination of the following three models of support to tackle loneliness, depending on individual circumstances:
  - Preventative Support
  - Responsive Support
  - Restorative Support

These principles highlight the key 'building blocks' from which to construct successful future services and support, whereby services and support should:

- give a sense of purpose to the individual
- be peer-led and co-designed to include people in similar circumstances
- be local to individuals and easy to access
- be free or affordable
- instil a sense of identity for participants who are going through a period of transition
- provide sustained support, and clear goals and pathways out of support when appropriate
- benefit others and 'give back' to society, which can make individuals feel 'useful'
- be built around shared interests.
- 18. We have seen in England more and more councils, which have responsibility for public health, launching new initiatives to tackle loneliness, as it becomes an increasing public health priority. For example, Barking and Dagenham, Havering and Waltham Forest councils piloted video-calling tablets to help adults over 55 feel socially included. Gloucestershire has also compiled loneliness "maps" which calculate where lonely residents are likely to live, in order to target the right areas.
- 19. This demonstrates the benefit of more joined up and integrated approaches to tackle issues such as loneliness and social isolation. In terms of the Welsh Government's agenda around wellbeing, the WLGA believe that the time is right for a full examination of the creation of a public health improvement role, located within local government. This would provide an opportunity for local authorities to have a significant influence and more joined up approach over the broader determinants of people's health their local environment, housing, transport, employment, and their social interactions all of which are linked to local authorities' core roles and functions and can play an important role in helping to reduce the impact of problems such as loneliness and social isolation.

- 20. As highlighted earlier transport can help people to stay connected and accessible and affordable transport links are part of the solution to tackling social isolation, playing a vital role in supporting people's wellbeing. The majority of local authorities have a budget for subsidising bus routes which are not commercially viable but are considered necessary routes. However, it is becoming increasingly difficult for local authorities to protect this level of subsidy during times of austerity and a number of authorities have had to look at reducing or in some cases end this funding. Local authorities currently administer the Concessionary Fares Scheme which entitles over 60s (and some other categories) to free bus transport, which again supports people, but this is impacted if bus routes are reduced due to financial constraints. Local authorities continue to look for innovative solutions to these problems and we have seen examples being developed, for example, Bwcabus in Carmarthenshire/South Ceredigion and Pembrokeshire which is a multi-partner project, and in Monmouthshire where the Council operates its own community transport company which connects outlying rural areas with towns in Monmouthshire.
- 21. A key part of the Social Services and Well-being (Wales) Act is the production of regional population assessments, which suggest that loneliness and social isolation is being recognised as an issue across regions. Importantly, concerns around the impact of loneliness and isolation are not confined to older people and it is seen as an issue across a number of other groups, including:
  - carers
  - care leavers
  - people with mental health problems
  - people with a physical disability or illness
  - people with a sensory impairment
  - particular BAME groups
  - men (particularly following the loss of a partner) and
  - military veterans.

Two common messages ran alongside this issue in most assessments:

- the need for opportunities to connect and socialise in communities, and;
- the means to connect with communities through improving transport.

- 22. Ways of addressing loneliness and isolation are already being implemented by authorities, with a number of identified services / approaches across the regions, including:
  - places to go in the community, such as libraries, hubs, community centres and cafes (including specialist dementia and stroke cafes)
  - day opportunities, such as day care
  - community activities, such as lunch clubs, walking clubs, dancing, singing, exercise cooking and craft classes
  - community connectors
  - social prescribing
  - peer support groups
  - befriending schemes, including in care homes.
- 23. The plans also recognise that there is more that can be done, with some of the areas identified for development including:
  - opportunities to pilot intergenerational projects
  - more low-level community activities and volunteering, through using community assets
  - adapted and specialist housing
  - making the built environment more accessible
  - improving connectivity, including transport and technology
- 24. Local authorities in partnership with Data Cymru have also developed the Dewis Cymru information and advice website for citizens. Dewis Cymru provides quality information about how people can maintain or improve their well-being, and about organisations which can help them. First and foremost, Dewis Cymru is intended to promote people's well-being by making it easier for them to find out about how to improve their own well-being, and the sources of advice and support which can help them, including on topics such as loneliness and isolation.
- 25. We have also seen the Integrated Care Fund (ICF) being used across regions to help reduce the impact of loneliness and isolation. For example, in Cwm Taf the 'Project 5 ways to wellbeing' is designed to challenge the isolation and loneliness in their older person's population, together with promoting independence at home. ICF funding has also been used to fund community connectors, community co-ordinators and community agents across a number of different authorities. These roles work with all partner agencies in key locations such as Single Points of Access, GP practices

and community settings, with the intention of helping to reduce the impact of social isolation and loneliness, helping to reduce hospital admission and support hospital discharge, and promote independence and overall wellbeing.

### **Current Policy Drivers**

- 26. Prevention has been at the heart of the Welsh Government's legislative programme. The Well-being of Future Generations (Wales) Act aims to make public bodies think more about the long-term, work better with people and communities and each other, looking to prevent problems and take a more joined-up approach. The Social Services and Well-being (Wales) Act also has prevention as one of its key principles the need to ensure that services promote the prevention of escalating need and make sure the right help is available at the right time. Prevention is fundamental to improving health and well-being and helping to reduce the increasing pressures being placed on services.
- 27. However, as highlighted by the recent publication 'Trapped in a Bubble' a lack of awareness about available services and support for people experiencing loneliness was a key barrier to tackling loneliness. Existing support was viewed as prioritising older groups and sometimes overlooking others, at times urgent, support needs. It was also felt that well-meaning, but potentially damaging, one-off interventions stemmed from some providers' difficulties sustaining a service.
- 28. The research found that some of the community-level drivers of loneliness include:
  - A lack of activities available in the community, or feeling that those available are not relevant,
     was a key community-level contributor to loneliness
  - Some traditional spaces for people to come together, such as leisure centres, were
    disappearing and there were less obvious communal spaces for connecting with others in
    modern society. The loss of small and simple yet potentially powerful means of connecting
    regularly meant that some participants who were experiencing disconnection lost even quick
    and fleeting regular exchanges with other people.
  - Infrequent, inaccessible or even non-existent transport infrastructure in communities
    dissuaded them from taking up opportunities to engage. Buses ran infrequently and did not
    allow for travel late at night, train stations were difficult to get to, taxis and the cost of car
    parking were too expensive

- Living in a neighbourhood that was felt to be unsafe or uninviting was another barrier for some participants to go out and engage with their community.
- 29. These are all factors that local authorities play a key role in, with the report recognising the important role that trusted people in communities, such as local authorities can play in delivering support founded on these principles. Councils were identified as being well-placed to signpost to social support and activities, helping individuals to make the first step to accessing services and support.
- 30. However, over the last 8 years Council's core grant funding has reduced by 22%. The statutory services of social services and education have been protected as far as possible by local government. This has meant that other non-statutory preventative community based services, such as leisure, parks, adult education, housing, transport and community facilities, all of which support people's wellbeing and help to delay the point at which an individual's needs warrant a more intensive and costly intervention, have faced the brunt of cuts to local authority budgets out of necessity. The report by Wales Public Services 2025, 'Austerity and Local Government in Wales: an analysis of income and spending priorities, 2009-10 to 2016-17', highlighted the significant impact that eight years of austerity have had on local public services. Cuts in the smaller but vital services that all help to prevent loneliness and social isolation have been deep. The local government funding position has serious consequences for wellbeing it constrains social care which, in turn, constrains the voluntary sector and social care providers.
- 29. The next few years will continue to be extremely challenging with the cumulative financial pressures continuing to mount for local government over the next four years. Just to stand still on providing current services, local government would need a revenue increase of £264m (5% of net spend) in 2019-20 and 4% the year after. These pressures have increased the importance of providing preventative activity and services aimed at early intervention. There is broad agreement of the benefits of early intervention and prevention in the first case, in terms of better life experiences and well-being for individuals and families, as well as reduced costs for public services, particularly in the longer term. There is a need therefore to transform health and care by shifting investment away from treatment and towards prevention, investing in local services which provide a range of preventative approaches which can delay the point at which an individual's needs warrant a more intensive and costly intervention.

30. Local government shares the view of the importance of preventative council services and appreciate these make a vital contribution to reducing pressure on other public services in Wales, such as the NHS. However, reduced budgets have placed increasing pressure on the availability of preventative services, most of which are non-statutory. While new models of service have been established in many authorities, it is likely that any further cuts will continue to see a decline in some community services that promote well-being and help to tackle problems such as loneliness and social isolation.

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<sup>&</sup>lt;sup>1</sup> It should be noted that the future role of local authorities in relation to the Concessionary Fares Scheme is subject to the outcome of a consultation on the White Paper, *Improving Public Transport*. The White Paper also proposes increasing the eligibility age of the mandatory Concessionary Fares Scheme (currently 60 for men and women) to bring it in line with a woman's pensionable age (65 and going up to 66 by October 2020). If that change is made it could possibly impact on the loneliness and isolation of those who rely on the Scheme to get out and about.