

Loneliness: update report

Report of the Chief Officer for Communities, Public Health, Environment and Prosperity

Recommendation: The Health and Wellbeing Board should invite the Health and Wellbeing Scrutiny Committee to assess the effectiveness of the local health and care systems response to loneliness.

1. Context

1.1 The September 2018 Health and Wellbeing Board meeting featured presentations and an evidence report on the topic of loneliness, with an agreed action for a campaign around loneliness supported by the board.

1.2 This report provides a summary of the resulting '12 days, 12 ways to combat loneliness' campaign ran in December 2018 aimed at raising awareness and supporting community members to identify and address the signs of loneliness. This report also provides an overview of other recent work on the subject, and as requested at the September 2018 board meeting, further mapping of loneliness risk in the Devon population.

2. Summary of '12 days, 12 ways to combat loneliness' campaign

2.1 The campaign, designed by the Devon County Council Media and Communications team featured short films which were promoted through social media on alternate days between the 1st and 23rd of December. December was selected to raise awareness of the issue of loneliness over the festive period, reflected in the campaign title '12 days, 12 ways to combat loneliness'. These short films were promoted via Devon County Council's Facebook and Twitter accounts, to ensure the videos reached a wide audience.

2.2 Figure 1 provides a summary of the campaign. The campaign itself was launched via the Devon County Council News Centre with the media release also providing direct links to the 10 short films (two films were used twice) <https://www.devonnewscentre.info/make-them-count-12-days-12-ways-to-combat-loneliness/>. The films were themed around the five ways to wellbeing to highlight ways in which loneliness can be combated through social connection, being active, taking notice, lifelong learning and giving to others. Figure 1 describes the specific content released on the 12 days, which 'way to wellbeing' the films related to, their reach (the number of users who will have been reached by the content on Facebook and Twitter based on the channels used) and engagement in terms of shares and likes. The overall reach of the messages was 791,000, with 178 shares of all videos and 146 likes. The diverse range of video content and ways to combat loneliness highlighted by the campaign reflects how loneliness affects all age groups and sections of the population. In relation to particular themes, the films emphasised the importance of social connections, with a focus on helping people to 'find their flock' and to do something that interests them and connects them to their community. Taking notice of yourself and those around you was another recurring theme with a particular focus on how social media can sometimes increase loneliness, with films encouraging people to 'free their thumbs'. The films also emphasised giving, by encouraging people to help others, check in on neighbours and volunteer. Links were also provided in social media messages to the Devon County Council website page on tackling loneliness <https://www.devon.gov.uk/care-and-health/loneliness/> which provides links to relevant groups and services on Pinpoint (Devon's community directory) and links to other relevant content and information.

2.4 The campaign was promoted through the following local newsletters:

- Cllr Andrew Leadbetter's members update
- Devon Sustainability and Transformation Partnership Bulletin
- Inside Devon (Devon County Council Bulletin to all staff)
- Adult Care and Health Newsletter
- Adult Commissioning and Health Newsletter
- East Devon residents update (East Devon District Council)
- Connect Me targeted e-newsletter

2.5 The press release and campaign also attracted wider attention. This included direct calls from members of the public who were put in contact with relevant services including Pinpoint, the Veterans Hub and local befriending services. BBC Radio Devon were particularly enthusiastic about the campaign, resulting in loneliness being included as a discussion topic on for the lunchtime programme on the 20th of December. This involved an interview with Devon County Council about the campaign, and an interview with a man supported by the 'Men in Sheds' scheme in Exeter who described his own experience and how connecting with others through the service helped him.

Figure 1, Overview of social media messages from the 12 days, 12 ways to combat loneliness campaign

<p>1. Find your flock (1 Dec)</p>  <p>Way to Wellbeing: Connect / Learn Reach: 68,056 Shares: 25 Likes: 33</p>	<p>2. What makes a smile (3 Dec)</p>  <p>Way to Wellbeing: Connect Reach: 135,418 Shares: 30 Likes: 20</p>	<p>3. Free your thumbs (5 Dec)</p>  <p>Way to Wellbeing: Take Notice Reach: 52,818 Shares: 16 Likes: 6</p>
<p>4. Lonely bird (7 Dec)</p>  <p>Way to Wellbeing: Give / Connect Reach: 77,879 Shares: 19 Likes: 17</p>	<p>5. Time for action (9 Dec)</p>  <p>Way to Wellbeing: Be Active Reach: 64,211 Shares: 7 Likes: 9</p>	<p>6. Caged bird (11 Dec)</p>  <p>Way to Wellbeing: Take Notice Reach: 61,403 Shares: 11 Likes: 5</p>
<p>7. Men in sheds (13 Dec)</p>  <p>Way to Wellbeing: Connect / Learn Reach: 44,938 Shares: 5 Likes: 8</p>	<p>8. Toys in tree (15 Dec)</p>  <p>Way to Wellbeing: Give Reach: 72,112 Shares: 25 Likes: 22</p>	<p>9. Cold turkey (17 Dec)</p>  <p>Way to Wellbeing: Take Notice Reach: 69,022 Shares: 9 Likes: 6</p>
<p>10. Show you care (19 Dec)</p>  <p>Way to Wellbeing: Give Reach: 44,863 Shares: 6 Likes: 2</p>	<p>11. Find your flock (21 Dec)</p>  <p>Way to Wellbeing: Connect Reach: 51,949 Shares: 20 Likes: 16</p>	<p>12. Lonely bird (23 Dec)</p>  <p>Way to Wellbeing: Give / Connect Reach: 48,888 Shares: 5 Likes: 2</p>

3. Other recent developments

3.1 In October 2018 Living Options Devon (LOD) launched the 'Time To Talk' project (www.livingoptions.org/support-help/time-talk), which aims to tackle isolation and loneliness amongst disabled people and deaf people. The project tackles the problem of isolation and loneliness in Devon, Plymouth and Torbay by providing a variety of services which are funded by the National Lottery Community Fund. Services include a free confidential telephone support line (with webcam options available for Deaf people who use British Sign Language (BSL)), local 'Chat & Share' groups for people with disabilities to come together, disability-tailored life coaching, information and advice sessions and counselling for Deaf people provided in BSL. The project has a strong emphasis on peer support with disabled people and deaf people supporting others via the telephone line, webcam services and other Time to Talk project activities.

3.2 The December 2018 Devon Health and Wellbeing Board meeting involved the signing of Devon's charter to end loneliness by the chairs of the Devon Health and Wellbeing Board, the Devon Sustainability and Transformation Partnership and Healthwatch Devon. The charter is a statement of intent of behalf of the board and its partners to tackle loneliness by better understanding its extent and impact, raising awareness, involving people who experience it in helping to identify ways to reduce it, ensure local plans emphasise loneliness and promote the five ways to wellbeing. A media release was promoted through NHS, County Council, Healthwatch Devon and other channels.

3.3 Social prescribing provides a means for health professionals to refer people to local community organisations and services that, as highlighted by Wellbeing Exeter at the September 2018 board, can be useful in tackling loneliness. Devon STP has recently established a Social Prescribing Programme to deliver consistency of understanding of the potential of social prescribing and coordinate sharing of learning across the system. This programme will support local approaches and innovation, as well as establishing commonality of approach where valuable. Working as a collaboration of partners across the system, the programme will deliver a range of products, resources and support to across the wider Devon area, including clear referral processes and support to community groups.

4. Identifying higher risk populations in Devon

4.1 According to the analysis of loneliness risk factors produced by the Office for National Statistics (ONS) in 2018 (<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/lonelinesswhatcharacteristicsandcircumstancesareassociatedwithfeelinglonely/2018-04-10>), Characteristics and circumstances associated with a higher likelihood of loneliness included being female, being single or widowed, being in poor health, being in rented accommodation and having a weak sense of belonging to a neighbourhood. Deprivation is also strongly associated with loneliness with those living in more deprived areas more likely to experience it, and loneliness is experienced across the life course with young adults (aged 16-24) reportedly feeling lonely more often than older age groups.

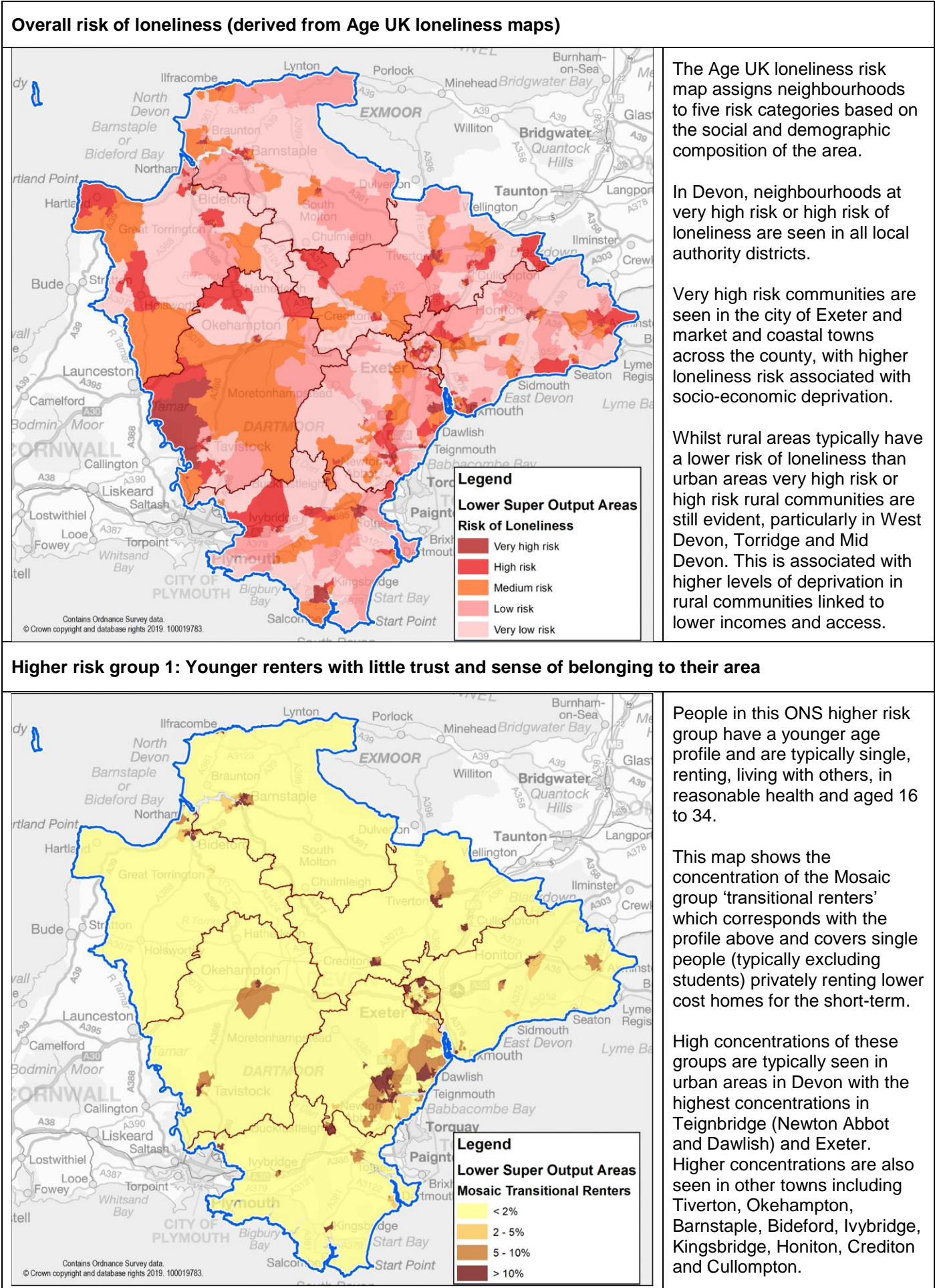
4.2 Age UK have produce loneliness heat maps, which look at the pattern of these and related factors to predict the risk of loneliness in local neighbourhoods (<http://www.ageuk.org.uk/professional-resources-home/research/loneliness-maps/>). Table 1 sets out Devon wards with areas in the very high risk of loneliness category in the Age UK maps. Figure 2 provides more detailed maps of loneliness risk across the Devon population. This includes the loneliness heat maps from Age UK, along with the three population profiles for people at high risk of loneliness defined in the ONS report covering young renters with little trust and sense of belonging to their area, unmarried middle-agers with long-term health conditions, and widowed older homeowners living alone with long-term health conditions. These maps reveal that overall loneliness risk is higher in more deprived areas. Major differences in the local pattern of the three higher risk population groups is seen, highlighting variation in those affected by loneliness and their living circumstances across the life course. Whilst loneliness is typically less common in rural areas, more deprived rural areas in the North and West of the county are at higher risk. When loneliness does occur in rural settings, it can be exacerbated by issues in relation to access to services and transportation, which can make the impact more profound.

Table 1, Devon wards with very high risk of loneliness, 2016

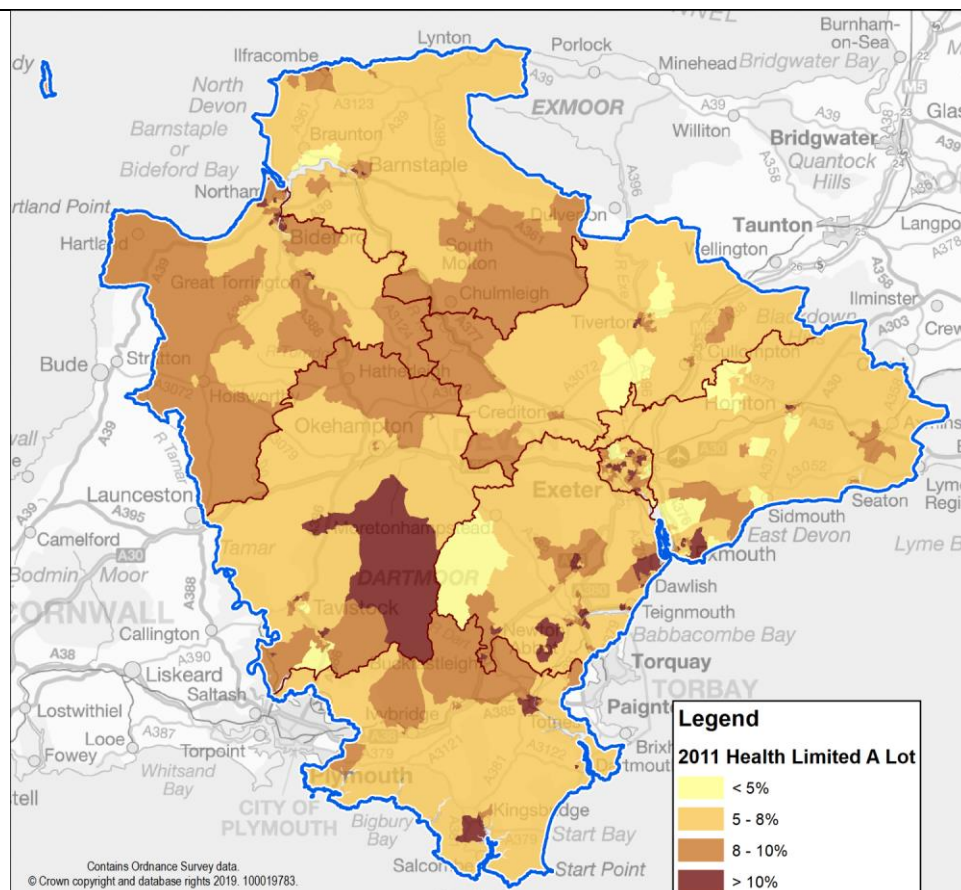
District	Wards
East Devon	Axminster Town, Budleigh Ward, Exmouth Brixington, Exmouth Littleham, Exmouth Town, Exmouth Withycombe Raleigh, Honiton St Michael's, Honiton St Paul's, Seaton Ward, Sidmouth Town
Exeter	Heavitree, Newtown, Polsloe, Priors, St David's, St James, St Leonard's, St Thomas, Whipton Barton
Mid Devon	Castle, Cranmore, Cullompton North, Cullompton South, Lawrence, Lowman, Westexe
North Devon	Braunton West, Central Town, Ilfracombe Central, Ilfracombe West, Newport, South Molton Ward, Yeo Valley
South Hams	Dartmouth and Kingswear, Dartmouth Townstal, Ivybridge Central, South Brent, Totnes Bridgetown, Totnes Town, Westville and Alvington
Teignbridge	Ashburton and Buckfastleigh, Bradley, Buckland & Milber, Bushell, College, Dawlish Central & NE, Kenton with Starcross, Kingsteignton West, Teignmouth Central, Teignmouth East, Teignmouth West
Torridge	Appledore, Bideford East, Bideford North, Bideford South, Northam, Torrington
West Devon	Bere Ferrers, Milton Ford, Okehampton East, Okehampton West, Tamarside, Tavistock North, Tavistock South, Tavistock South West

Source: Age UK Loneliness Maps, 2016

Figure 2, Mapping of population groups at high risk of loneliness in Devon



Higher risk group 2: Unmarried middle-agers, with long-term health conditions

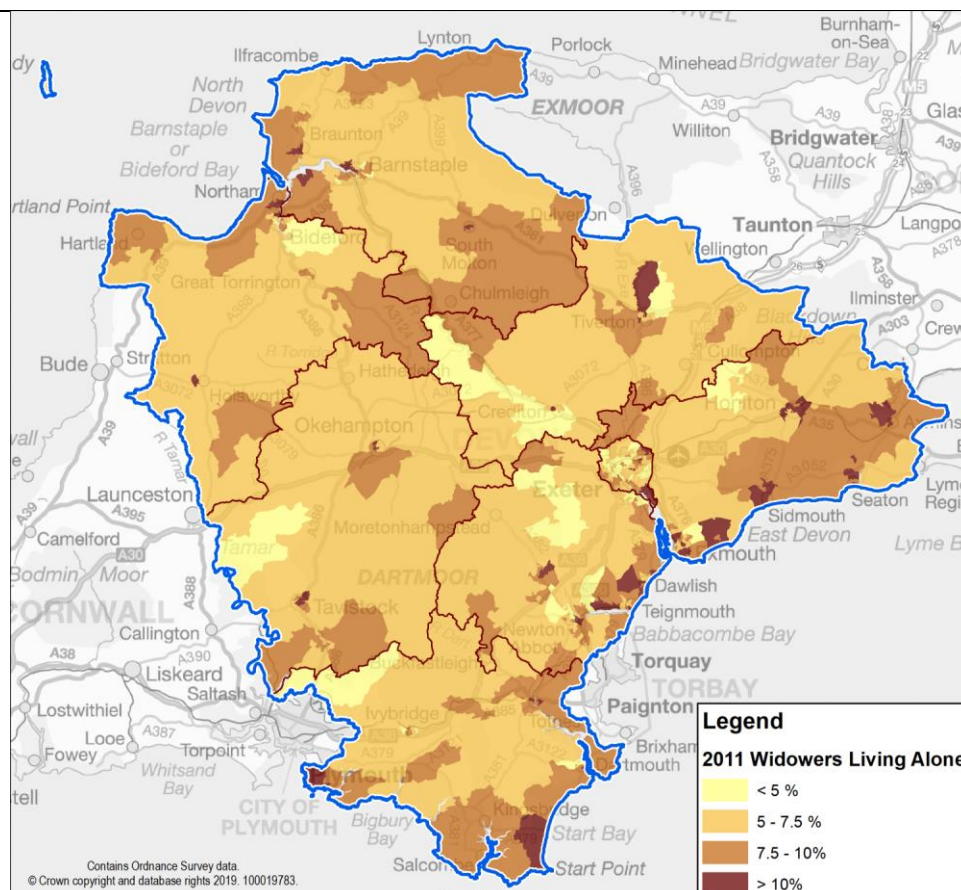


People in this ONS higher risk group are middle-agers and are likely to be single, separated or divorced, living alone, reporting a long-term physical or mental health condition, in poor to fair health, and aged 35 to 64.

This map shows the concentration of working-age adults who reported having a limiting long-term illness or disability in the 2011 census which limited their activities a lot. This cohort are also more likely to be living alone.

The concentration of this group is higher in more deprived areas with concentrations in Exeter, Exmouth, Dawlish, Newton Abbot, Kingsbridge, Totnes and Bideford. Higher concentrations are also seen in rural areas in the North and West of the county, especially in West Dartmoor (Princetown).

Higher risk group 3: Widowed older homeowners living alone with long-term health conditions



People in this ONS higher risk group are older and tend to be widowed, in worse health, living alone, homeowners, aged 65 and over, experiencing a long-term physical or mental health condition, and are more likely to be female.

This map shows the concentration of widowers who were living alone (in own residence) in the 2011 census to provide an indication of the likely pattern of this higher risk group.

Within Devon higher levels were seen in coastal towns and communities, with particular concentrations in Exmouth, Sidmouth, Dawlish and Teignmouth on the South Coast and around Lynton, Barnstaple and Bideford on the North Coast. Higher levels were also seen in some market towns and rural communities.

5. Conclusions and Next Steps

5.1 This report summarised the board's '12 days, 12 ways to combat loneliness' campaign in December 2018, highlighting that the campaign had substantial reach and engagement, and was widely promoted across local organisations and the media, including BBC Radio Devon. Other recent work relating to loneliness include the launch of Living Options Devon's 'Time to Talk' project providing support to disabled people and deaf people, the Devon charter to end loneliness, and the establishment of the Devon STP Social Prescribing Programme. Further risk mapping reveals variation in levels of loneliness across the county, highlighting areas and population groups at greater risk of experience loneliness to help inform the planning of future work.

5.2 Recent work in Devon has highlighted many issues in relation to loneliness, and work is ongoing across a range of statutory and community organisations and partnerships to support and address these issues. A more detailed understanding of the system-wide response to the issue of loneliness would be useful to ensure relevant issues and areas are being prioritised. In light of this, it is recommended that the Health and Wellbeing Board should invite the Health and Wellbeing Scrutiny Committee to assess the effectiveness of the local health and care systems response to loneliness.

6. Risk Management Considerations

Not applicable.

7. Options/Alternatives

Not applicable.

8. Public Health Impact

Actions to address loneliness have the potential to improve public health in Devon.

Dr Virginia Pearson

**CHIEF OFFICER FOR COMMUNITIES, PUBLIC HEALTH, ENVIRONMENT AND PROSPERITY
DEVON COUNTY COUNCIL**

Electoral Divisions: All

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Background Papers

Nil