

# **The Crisis of Loneliness**

## **Policy Consultation Paper**



March 2021

## Introduction

The DUP wish to examine options of how government can address loneliness in Northern Ireland. We realise this is a big problem and has been exacerbated by Covid-19. We welcome views on this consultation from any organisations or individuals who wish to make a contribution.

## Background

Loneliness occurs when there is a lack of social contact or relationships. It can lead to individuals feeling distressed and hopeless. Loneliness is something that we all experience at some point in our lives. For some people it is temporary or related to a specific event, including children leaving home, divorce or bereavement, and for some, the feeling of loneliness is long-lasting. Whilst this can be often seen as an issue that primarily affects older people, this sweeping generalisation is incorrect. Everyone, including children, young people, parents, those with a disability, those who are victims of domestic abuse and serving in our armed forces, to name a few, can be affected.

The UK Government defines loneliness as a;

*'subjective, unwelcome feeling of lack or loss of companionship. It happens when we have a mismatch between the quantity and quality of social relationships that we have, and those that we want.'*<sup>1</sup>

It also should be acknowledged that an individual can be alone frequently but not be lonely, whilst an individual could have a lot of company but still feel lonely. Louise Hawkley, Senior Research Scientist at the University of Chicago, describes loneliness as the following:

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[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/750909/6.4882\\_DCMS\\_Loneliness\\_Strategy\\_web\\_Update.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/750909/6.4882_DCMS_Loneliness_Strategy_web_Update.pdf)

*'Loneliness, distressing experience that occurs when a person's social relationships are perceived by that person to be less in quantity, and especially in quality, than desired. The experience of loneliness is highly subjective; an individual can be alone without feeling lonely and can feel lonely even when with other people.'*<sup>2</sup>

Loneliness matters so greatly as it can affect our physical health as well as our mental health. Related physical health problems can include high blood pressure; higher use of medication; and increased likelihood of developing dementia.<sup>3</sup> Greater social connections have been linked to improved life expectancy and protection against depression. The issue of loneliness requires a wide-ranging response from policy makers and government, both nationally and locally. Researchers from the LSE have estimated that the UK's "epidemic of loneliness" costs £6,000 per person for a decade of an older person's life in health costs and pressure on local services.<sup>4</sup> Therefore it should be considered part of a move towards a preventative approach to healthcare.

### **The consultation process**

This development of this paper will include research and consultation. Within the relevant COVID-19 restrictions a two-stage consultation process will take place;

- Full consultation paper – This will propose policy ideas and options to address the identified issues and those highlighted in the pre-consultation process. Throughout this process, it is also envisaged that there will be direct engagement with some of those who are currently working in this field, and visits to some best practice examples, if possible. In parallel, there will be internal consultation with elected representatives on relevant committees and those with an interest in the policy area.
- Final policy document – Following the consultation process a final policy paper will be adopted that will inform future DUP manifestos.

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<sup>2</sup> <https://www.britannica.com/science/loneliness>

<sup>3</sup> Holwerda, T., Deeg, D., Beekman, A., Van Tilburg, T., Stek, M., Jonker, C., and Schoevers, R. (2012). Research paper: Feelings of loneliness, but not social isolation, predict dementia onset: results from the Amsterdam Study of the Elderly (AMSTEL). Journal of Neurology, Neurosurgery and Psychiatry

<sup>4</sup> <https://www.independent.co.uk/life-style/loneliness-uk-cost-ps6000-person-study-lse-elderly-old-age-a7961146.html>

External engagement will take place with relevant organisations both online and physically where COVID-19 restrictions can be adhered to.

## **DUP delivery and commitments**

The DUP Confidence and Supply Agreement (C&S) funding made allocations for immediate pressures including:

- £200 million for modernising, improving and reforming the health service.
- £100 million in the first year for a range of transformations initiatives that include: £5 million to prevention and strengthening communities and £30 million to improve hospital and community services.

While we welcomed the investment by C&S, we cautioned in our Regional Psychological Trauma paper:

*“Despite the additional investment from our Confidence and Supply Agreement with the Conservative Party, the Democratic Unionist Party considers current waiting times unjustifiably long. We would have concerns that if the full complement of staff is not successfully recruited to new trauma teams in the five health and social care trust areas, the timeliness of access to therapy will not improve”.*

The DUP 2019 Manifesto and Plan made the following commitments that will directly impact loneliness:

- *In 2019-20 this real investment in real lives will include: £19 million for practice-based physiotherapists, mental health specialists and social workers working alongside GPs in local practices and £52 million to enhance community and hospital services, including day case surgery hubs, social services training and investment in mental health services.*
- *The DUP will increase spend on health by at least £1 billion by the end of the Assembly term in 2021, with the budgetary and commissioning cycle extended to three years. This will include: Pursuing a population health-based approach with an increased spend on prevention, Development of innovative approaches for dementia provision, More Intermediate Care at Home to assist particularly older patients, collaborate with community/voluntary organisations to improve leisure opportunities for*

*those with disabilities, including access to inclusive beaches, Social and environmental prescribing encouraged including in situations of loneliness and social isolation.*

- *Maximising benefits from digital technologies with early introduction of a comprehensive electronic health and care record and more data analysts to help understand and identify opportunities for early intervention.*

In the 2019 DUP policy paper, ‘*Modernising Health and Care*’, we support social prescribing options in addressing loneliness. Social prescribing involves referring patients to non-clinical provision and activities in the community and aims to help people who are lonely and isolated. This can include volunteering, arts, cookery, gardening, advice on accessing benefits and sport. Community-based initiatives with loneliness-related health and well-being outcomes could form the basis of a cross-government approach to loneliness.

### **How prevalent is loneliness and who’s at risk?**

Across the United Kingdom data is collected on loneliness, which determines how effective strategies are in delivery. In 2016 to 2017 the Office of National Statistics (ONS) found 5% of adults in England reported feeling lonely often or always.<sup>5</sup> In 2018 a report published by NHS Scotland found 11% of adults in Scotland often feel lonely<sup>6</sup>. The [2016-17 National Survey for Wales](#) found that around 440,000, or 17%, of people in Wales reported being lonely often.<sup>7</sup>

The Northern Ireland Statistics and Research Agency (NISRA) have published findings reporting levels of loneliness locally, in 2018/19, around 1 in every 20 people (5.3%) of respondents reported feeling lonely “often/always” (Figure 1). This is similar to the 2017/18 figure of 4.2%.

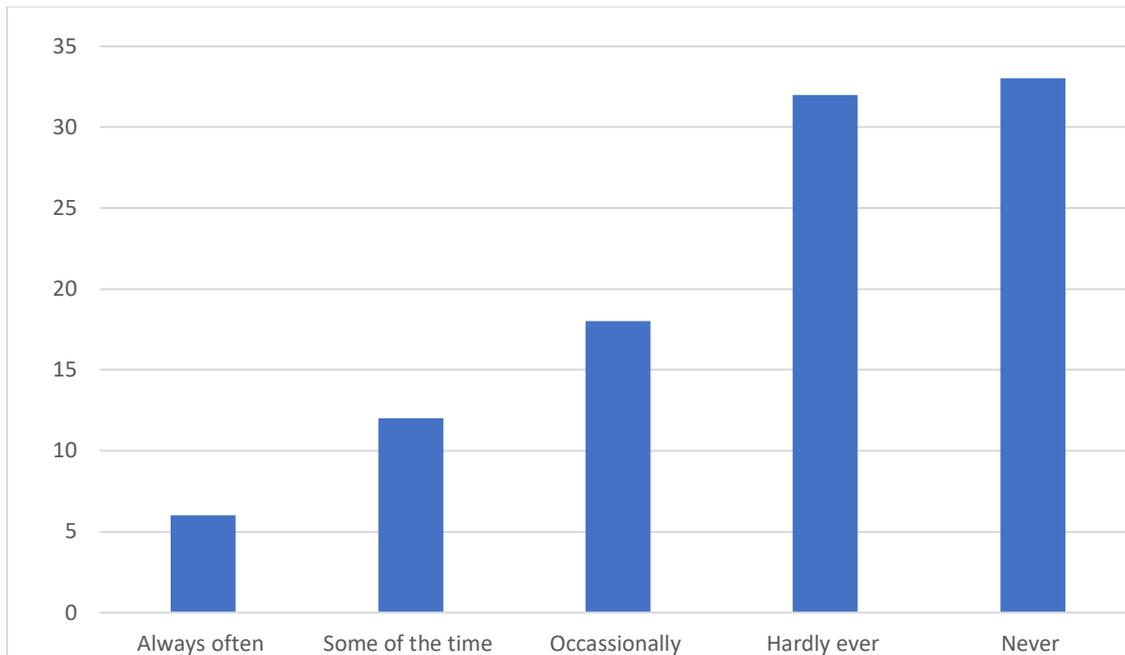
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<https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/lonelinesswhatcharacteristicsandcircumstancesareassociatedwithfeelinglonely/2018-04-10>

<sup>6</sup> <http://www.healthscotland.scot/media/1712/social-isolation-and-loneliness-in-scotland-a-review-of-prevalence-and-trends.pdf#:~:text=Recent%20work%20suggests%20that%2011%25%20of%20the%20adults,that%20adults%20in%20midlife%20and%20the%20E2%80%98oldest%20old%20E2%80%99>

<sup>7</sup> <https://socialcare.wales/curated-research/research-on-loneliness#section-29682-anchor>



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No one is immune to loneliness, although certain groups are more at risk. This can be due to a certain life event, job situation or family circumstance. The UK Government paper, '*A connected society: A strategy for tackling loneliness*' defines the following as risk factors for loneliness:

- *Bullying*
- *Leaving care*
- *Moving jobs*
- *Moving home*
- *Experiencing discrimination*
- *Being a victim of crime*
- *Living in an abusive environment*
- *Becoming a carer*
- *Becoming a parent*
- *Refugees awaiting asylum*
- *Bereavement*
- *Divorce and separation*
- *A period of poor health*
- *Children leaving home*
- *Retirement*

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<sup>8</sup><https://www.nisra.gov.uk/sites/nisra.gov.uk/files/publications/Loneliness%20in%20Northern%20Ireland%202018-19%20report%20PDF.pdf>

- *Moving into care*
- *Disability*<sup>9</sup>

Those who serve or have served in our Armed Forces are also at a high risk of loneliness. The Royal British Legion produced a report in 2018 to look at the triggers for the Armed Forces community. This report found that risk factors in the Armed Forces Community for loneliness and isolation included;

- Increased volume of life transitions
- Armed Forces culture
- Relationship issues
- Accommodation issues
- Exiting the forces
- Health, ageing and injury
- Ageing
- Injury

The New Decade, New Approach deal in Northern Ireland in January 2020 committed to a veteran's commissioner for Northern Ireland. The commitment included:

- Appoint a Northern Ireland Veterans' Commissioner to act as an independent point of contact to support and enhance outcomes for veterans in Northern Ireland.
- Initiate a review of the Aftercare Service in Northern Ireland (ACS) which will consider whether the remit of the ACS should be widened to cover all HM Forces veterans living in Northern Ireland with service-related injuries and conditions.<sup>10</sup>

The Northern Ireland Veterans commissioner Danny Kinahan, who was appointed in August 2020 will have to ensure loneliness and isolation of those who serve or have served in the armed forces is addressed.

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<sup>9</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/750909/6.4882\\_DCMS\\_Loneliness\\_Strategy\\_web\\_Update.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/750909/6.4882_DCMS_Loneliness_Strategy_web_Update.pdf)

<sup>10</sup>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/856998/2020-01-08\\_a\\_new\\_decade\\_\\_a\\_new\\_approach.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/856998/2020-01-08_a_new_decade__a_new_approach.pdf)

## Government Strategies & Approaches

Northern Ireland is the only part of the United Kingdom not to have brought forward a loneliness strategy. Other parts of the UK have brought bespoke strategies forward since 2017. Northern Ireland policymakers do have work ongoing which will be detailed later in this paper.

### *England*

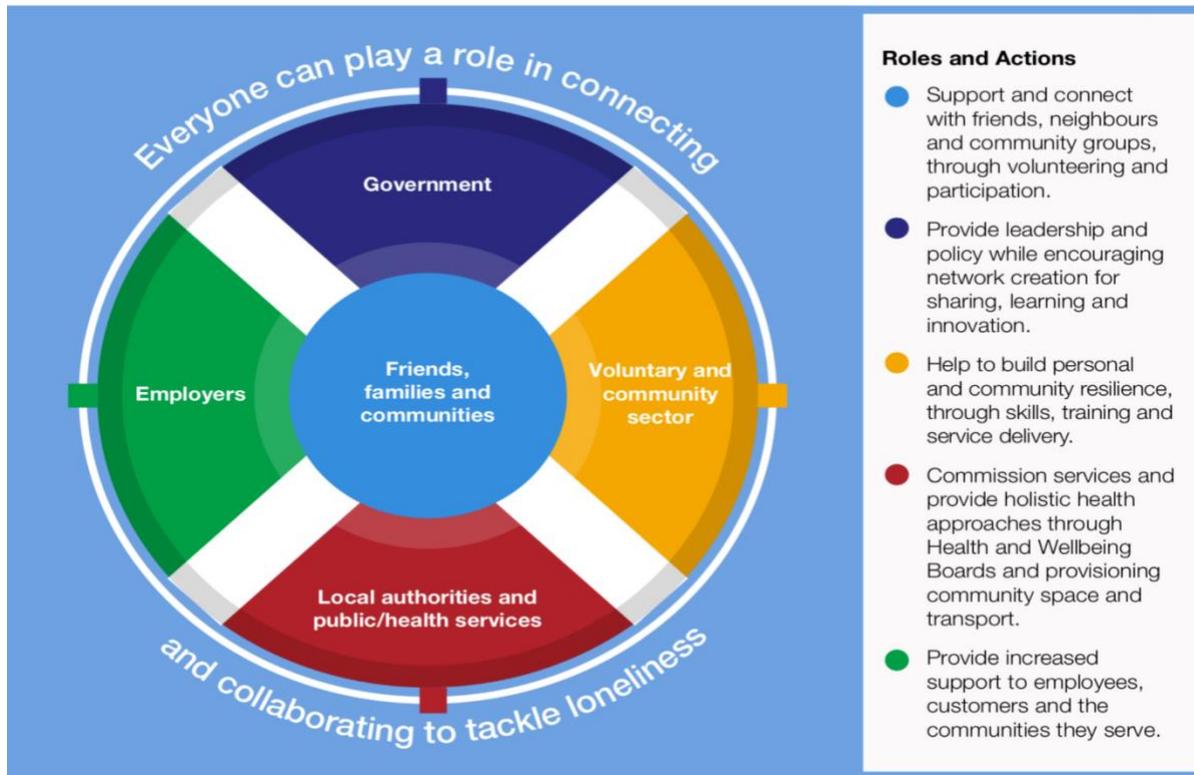
Jo Cox MP set up a commission on loneliness before her death in 2016. The Jo Cox Commission on Loneliness published a report in 2017 with numerous recommendations including:

- *a UK wide strategy on loneliness,*
- *a national indicator on loneliness across all ages and nominated lead Minister to oversee the implementation of a strategy.*

In 2018 the government published '*A Connected Society; A strategy for tackling loneliness*' building on some of the recommendations made by the Jo Cox Commission. This strategy has a range of aims and objectives:

- *Develop consistent measurement for loneliness.*
- *Improve the evidence base around effective interventions.*
- *working with local authorities, health bodies, businesses and the voluntary.*
- *By 2023, government will support all local health and care systems to implement social prescribing connector schemes across the whole country, supporting government's aim to have a universal national offer available in GP practices.*
- *run up to four data pilots with four local authorities to identify ways of ensuring that information and data can be made more accessible.*
- *government will create more sustainable community hubs and spaces, the Department for Digital, Culture, Media and Sport will devote up to £1.8 million.*
- *build partnerships with transport providers and community groups.*
- *schools open up as accessible spaces in the centre of their communities.*
- *Sport England will make new grant awards totalling £1 million from its Active Ageing Fund*

- *annual progress report on the loneliness agenda*
- *encourage more employers to recognise loneliness and support their employees*<sup>11</sup>



In the 2020 review of the strategy, the following was deemed to have been achieved;

- *Frontline workers across the public sector are being helped to recognise and act on loneliness, including: social workers, 19,000 work coaches and other Jobcentre claimant-facing staff.*
- *The expansion and improvement of social prescribing - this is supporting the recruitment of 1,000 additional social prescribing link workers within primary care networks by April 2021.*
- *With over 9.84 million global impressions, over 26,500 site visits and more than 320 organisations having downloaded its toolkit since its launch in June 2019, the government's 'Let's Talk Loneliness' campaign has gained widespread support from across sectors.*
- *initiative between Royal Mail's postal workers and local authorities to identify older isolated people at risk of loneliness.*
- *A network for employers committed to tackling loneliness.*
- *primary and secondary school children should be taught about loneliness from September 2020.*

- *continued to embed the consideration of loneliness across government policy-making by raising awareness of loneliness amongst policy-makers through events.*<sup>12</sup>

In England there is also the Building Connections Fund, a fund of £11.5 million set aside in a partnership between government, the National Lottery Community Fund and the Co-op Foundation. The fund aims to increase social connections, help people form relationships, and support organisations to build on existing work. The fund has awarded grants to 126 voluntary, community and social enterprise organisations working with different groups across England. A final evaluation of the project is expected in 2021.

Social prescribing enables GPs, nurses and other professionals to refer people to non-clinical services to support their health and wellbeing such as yoga for Multiple Sclerosis or a local cooking class for Diabetes. Social prescribing is very much part of the government's strategy. According to new findings from the British Red Cross and Co-op, it is a vital part of treatment to tackle loneliness.<sup>13</sup>

The NHS England '*Personalised care and social prescribing in the NHS long term plan*' paper committed to over 1,000 trained social prescribing link workers will be in place by the end of 2020/21 rising further by 2023/24, with the aim that over 900,000 people are able to be referred to social prescribing schemes by then.<sup>14</sup>

In addition, '*Safe and Connected*', a 2018 scheme in England led by Royal Mail and the Home Office;

*"...is aimed at determining if early intervention by the voluntary sector or local authorities positively impacts on feelings of loneliness, well-being and safety, which in turn contributes to a reduction in the use of statutory services. This will be done by calling at the doorstep of a pre-recruited group of people and asking them 5 pre-agreed questions related to their happiness and wellbeing".*<sup>15</sup>

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<sup>12</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/858909/Loneliness\\_Annual\\_Report\\_-\\_The\\_First\\_Year.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/858909/Loneliness_Annual_Report_-_The_First_Year.pdf)

<sup>13</sup><https://www.redcross.org.uk/about-us/news-and-media/media-centre/press-releases/social-prescribing-is-a-vital-part-of-treatment-to-tackle-loneliness>

<sup>14</sup><https://www.local.gov.uk/sites/default/files/documents/Bev%20Taylor%2C%20Social%20Prescribing%20Development%20Manager%2C%20NHS%20England%20WEB.pdf>

<sup>15</sup>[http://www.cwu.org/wp-content/uploads/2018/10/RM\\_CWU-National-Terms-of-Reference-Safe-Connected-Trial.pdf](http://www.cwu.org/wp-content/uploads/2018/10/RM_CWU-National-Terms-of-Reference-Safe-Connected-Trial.pdf)

The Government strategy was welcomed by the Loneliness Action Group, who said it was ‘*an ambitious strategy to tackle loneliness*’. The loneliness action group is led by the British Red Cross and Co-Op partnership. The group also highlighted the need for greater investment in community infrastructure to support social prescribing.

Some criticism has emerged two years on from the launch of the strategy. The frustrations appear to be with the length of time involved in getting the UK government to drive the strategy forward. Whilst accurate or not, the perception was that nothing was taken forward in the absence of a Minister. A new loneliness Minister, Baroness Diana Barran, is now in place. Therefore, the comprehensive strategy can now be delivered for England to tackle the issue of loneliness in partnership with interest groups. It will be interesting to examine at the data that measures loneliness in England and an evaluation of the strategy.

(Please see more recommendations in Covid-19 & Loneliness section)

### *Scotland*

“*A Connected Scotland; Our strategy for tackling social isolation and loneliness and building stronger social connections*”, is a seven-year strategy that was produced in 2018. The strategy has 4 priorities;

1. *Empower communities and build shared ownership*
2. *Promote positive attitudes and tackle stigma*
3. *Create opportunities for people to connect*
4. *Support and infrastructure that fosters connections*

Some of the commitments in this strategy include;

- *Research to support greater understanding of how social isolation and loneliness interacts with key life transitions.*
- *Convene a roundtable of representatives from the business community to explore further what more the private sector can do to tackle social isolation and loneliness in their communities*

- *Work with stakeholders to better understand what works in reducing the stigma around social isolation and loneliness*
- *Work with older age groups to understand how digital technology can add value to their lives*
- *Pilot innovative housing solutions for older people, testing intergenerational and other co-living arrangements to meet housing needs and reduce social isolation and loneliness.*
- *Review our National Transport Strategy, with accessibility identified as a key theme.<sup>16</sup>*

£1million was committed to deliver this strategy for the first two years in Scotland. In December 2019, the Scottish government provided an additional £140,000 to Age Scotland's helpline and £80,000 to befriending networks.<sup>17</sup> The National Implementation Group will work with government to deliver this strategy, chaired by the Minister for Older People and Equalities, working with key stakeholders and organisations. There will be an update on this strategy in December 2020.

The Campaign to End Loneliness (CEL) welcomed the strategy from the Scottish government as a good start, particularly as it acknowledges the need for government, local authorities and health bodies, civil society, businesses, communities and individuals to all have a role in addressing loneliness. They highlighted the importance of ensuring social prescribing is something that is *'got right'*.

Although the Campaign to End Loneliness welcomed the strategy, they also cautioned about the scale of the challenge to tackle loneliness. According to the British Red Cross, just under one million people in Scotland may be experiencing loneliness.<sup>18</sup> Due to the scale of the problem and so many people in Scotland potentially experiencing loneliness, CEL recommend extra resources for the strategy.

## *Wales*

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<sup>16</sup> [file:///C:/Users/Admin/Downloads/connected-scotland-strategy-tackling-social-isolation-loneliness-building-stronger-social-connections%20\(2\).pdf](file:///C:/Users/Admin/Downloads/connected-scotland-strategy-tackling-social-isolation-loneliness-building-stronger-social-connections%20(2).pdf)

<sup>17</sup> <sup>17</sup> <http://www.befriending.co.uk/>

<sup>18</sup> <https://www.campaigntoendloneliness.org/blog/the-scottish-governments-loneliness-strategy-is-a-good-start-we-look-forward-to-seeing-it-in-action/>

Wales produced their loneliness strategy '*Connected Communities; A strategy for tackling loneliness and social isolation and building stronger social connections*' in February 2020.

This strategy has four priorities:

- *Increasing Opportunities for People to Connect*
- *A Community Infrastructure that Supports Connected Communities*
- *Cohesive and Supportive Communities*
- *Building Awareness and Promoting Positive Attitudes*

This is a detailed strategy with numerous commitments to include;

- *Working with the Welsh Physical Activity Partnership (WPAP) to increase participation in physical activity across Wales.*
- *Working with public and third sector partners to raise awareness of the benefits and opportunities that our national well-being directory.*
- *Working with local authorities and partners to improve access to good quality, timely housing adaptations*
- *A new Single Advice Fund of £8.04m for the provision of information and advice services in 2020*
- *Ensuring people have the knowledge and skills to support self management of long-term conditions for both good health and mental well-being, enabling them to continue to maintain their social connections and participate in their communities.*
- *Developing a guide for businesses on how to tackle employee loneliness and social isolation and actions they can take to support those who do experience these emotions.<sup>19</sup>*

£1.4 million has been made available over the next three years to deliver this strategy.

The CEL has welcomed the Welsh Strategy, particularly the acknowledgement that long term action will be needed by government to tackle the issue. They endorsed the proposal that all new policy development in Wales would assess the impact on loneliness and a cross departmental group would oversee the implementation of the strategy.

There is much going on in regards to loneliness across the United Kingdom, much of which Northern Ireland can learn from.

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<sup>19</sup> <https://gov.wales/sites/default/files/publications/2020-02/connected-communities-strategy-document.pdf>

The DUP propose:

- A loneliness strategy for Northern Ireland.

The Executive Office, working with each government department, could take this forward.

This could encompass the following:

- Social prescribing initiative's – working with GP surgeries. The Department of Health could ensure this policy is taken forward.
- Identifying loneliness – The missing millions report explored mapping local Risk of Loneliness Index data. This would be working with Age NI, health trusts, fire and rescue service, local third sector organisations, housing associations, relevant public services, and key local businesses. Local councils could take the lead through community planning. The Royal mail pilot as touched on could be replicated.
- A transport strategy – transport is often forgotten as a key part of programmes. For example, a programme that brought together older people, if they travel together, they are more likely to build relationships. The Department for Infrastructure would need to ensure a transport strategy has a loneliness component.
- Community Infrastructure – Community and voluntary groups would be key in the delivery of any strategy
- Strengthen and fund new schemes – Building on current schemes funding for programmes that address loneliness through the Department for Communities.
- Implementation group – Lead by DfC and DoH Ministers to include MLAs from each party and key interest groups to ensure a strategy is being implemented to the best of its ability.
- Front line services – Front line staff such as nurses, GPs and Fire service should be trained to identify loneliness.
- Public awareness campaigns - to get people talking about loneliness and remove the stigma.
- Education curriculum – Children should learn about loneliness, how to support people and where to gain help from a young age.

- Employers working group – Get employers talking about how they can support employees who may be lonely.
- Intergenerational work – Programmes that could promote younger people and older people working together.

In our view any such loneliness strategy should be inclusive of the following groups:

- Older people – Many older people live alone or live with someone with a chronic illness
- Children and young people – Can be lonely at any stage of life and we need to ensure we have programmes in place for CYP.
- Carers – Caring for an elderly relative or friend can be lonely even if they work as often there is no time for friends or relationships.
- Victims of crime – Any victim of crime can be lonely, particularly those victims of domestic abuse.
- Cancer patients – May have to remain at home due to the risks on infection.
- Those in care homes – Older people in care homes shouldn't be forgotten.
- The Armed Forces community – Taking account of the Royal British Legion report on Loneliness.
- Dementia Suffers.
- People with disabilities.
- Parents.
- The homeless community.

The DUP would propose:

- The business community to explore what more the private sector can do to tackle social isolation and loneliness in business and community environments.
- Developing a guide for businesses on how to tackle employee loneliness and social isolation, potentially in partnership with business representative organisations.
- Primary and secondary school children should be taught about loneliness in the curriculum.

- Encouraging greater co-working between Central and Local government, the Public Health Agency, Health and Social Care Trusts, and the community and voluntary sector on programmes and initiatives to address loneliness.
- Developing social prescribing schemes to support all health and social care trusts and GP practices.

### *Northern Ireland*

In Northern Ireland there is no overarching strategy, although individual government departments do have strategies in place that can help address loneliness. These include:

- The Department for Infrastructure introduced the concessionary fares scheme, a policy which the DUP have championed. It was first introduced in 1978 and has enabled free travel for anyone over 60 years of age. This scheme is also available for anyone who is registered as partially sighted, refused a licence on medical grounds, known to have a learning disability or in receipt of disability benefits. The Assisted Rural Travel Scheme allows Smart Pass holders (in particular the elderly and disabled) access to concessionary travel on Rural Community Transport Partnership vehicles and schemes.
- The Department for Communities work with a range of bodies to fund programmes that reduce social isolation and loneliness. A review to look at the effectiveness of these programmes and relationships should take place. DfC have invested £72.8 million in 2019/20 in housing support, which provides support to vulnerable people. DfC also support the Community Wellbeing Programme which brings together mental health and wellbeing organisations to support those experiencing mental ill health issues during the Covid-19 pandemic.
- The Department of Health have the *'Protect Life 2 - Suicide Prevention Strategy'*. Whilst this does not specifically address the issue of loneliness, it makes reference to mental health issues and someone being more at risk of suicide if social isolation or

withdrawal factors are present, as well as some of the at risk groups being equal to those at risk of loneliness.

In January 2020, DUP MLA Paul Frew asked the Minister for Health (i) *what measures are in place; and (ii) what work has been implemented to tackle loneliness*. The response was as follows;

*My officials have met with the Institute of Public Health Ireland who have conducted research on this issue in Northern Ireland. This highlights that loneliness is a complex issue, and requires a multi-faceted and cross government approach to address the causes including socio-economic factors, such as inequality. My Department is scoping our existing policies/strategies to help identify how loneliness is being tackled within existing work; to identify gaps and further work needed to progress this important issue.*

*Within the Reform of Adult Social Care, work in progress includes proposals to develop a neighbourhood based, preventative and citizen-focused community support model that promotes positive social wellbeing and connects people to supportive social networks and communities. A public consultation is anticipated early in 2020. The Protect Life strategy acknowledges that loneliness is a contributor to poor mental health and work is progressing on the key theme of Physically Active and Connecting (staying in touch with family, friends and the community). As well as projects such as Men's Shed focusing on reducing isolation of men especially in rural areas which has proved an effective way of engaging people who experience loneliness.*

*The Department is also working cross departmentally and in partnership with DAERA as part of its Rural Society Project Board established in 2019. One aspect of this work is a focus on the need to 'reduce loneliness and social exclusion in rural areas and to minimise the impacts of rural isolation and promote the health and wellbeing of rural dwellers'.<sup>20</sup>*

- Health Trusts across Northern Ireland support a 'Good Morning' service, which provides reassurance to older people, those with a disability, those with addictions or mental health issues and included those experiencing domestic violence. There are currently twenty-three services within the Good Morning Northern Ireland Network.<sup>21</sup>

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<sup>20</sup> <http://aims.niassembly.gov.uk/questions/printquestionssummary.aspx?docid=290939>

<sup>21</sup> <http://www.northerntrust.hscni.net/services/good-morning-services/>

- The Department of Agriculture, Environment and Rural Affairs '*Tackling Rural Poverty and Social Isolation – A New Framework Supporting Rural Communities*' document aims to promote the development of new and innovative approaches to tackling poverty and social isolation in rural areas. The framework will improve access to key services for vulnerable rural dwellers by supporting interventions such as improving urban-rural linkages and improving access to key services. The draft rural policy framework will be issued shortly for public consultation and will include possible interventions to address the issue of loneliness.
- The Department of the Economy have internally completed a survey with staff and have undertaken a range of measures to include a work stream to focus on the wellbeing and work life balance of staff, particularly during the pandemic and the establishment of a project to address issues raised by staff to include health and wellbeing.
- The Department of Education work with the Public Health Agency and Department of Health to develop Emotional Health and Wellbeing in Education framework, in which there is a budget of £5 Million per year. DE will also provide funding for delivery of youth work, which can have a positive impact on young people at risk of loneliness. The Children and Young People's Strategy in which improving play provision, extending youth work and volunteering opportunities.

NISRA, an agency within the Department of Finance (DoF) published their first official report on loneliness earlier this year, as cited earlier in the paper. The Executive Office (TEO) have an active ageing strategy 2016-2020, which doesn't directly target loneliness but will indirectly have a negative impact on loneliness and older people.

The Programme for Government outcomes:

- *We enjoy long, healthy, active lives*
- *11. We connect people and opportunities through our infrastructure and outcome*

- 12. *We give our children and young people the best start in life* will all play direct and indirect roles in addressing loneliness.<sup>22</sup>

The Northern Ireland Assembly have an All-Party Group on Preventing Loneliness established in 2017 with strong DUP involvement. The Action Group on Loneliness Policy in Northern Ireland is the secretariat for the group with representation from Age NI, Campaign to End Loneliness, Mencap, Royal College of General Practitioners, Marie Curie, Carers NI, British Red Cross, Barnardos, Parenting NI and Volunteer Now.

The Royal College of General Practitioners see loneliness as a health epidemic across the UK. They see millions of lonely and socially isolated people each year. They launched a community action plan for Northern Ireland and has recommended a social prescriber in all GP surgeries.

Looking at all four areas, in terms of commitments detailed, the English strategy would be the most thorough in regards to detailed actions. All of the strategies see the value in social prescribing, transport strategies, the community and voluntary sector, raising awareness and promotion of physical activity. The English strategy details how they plan to utilise job centres unused space or when they are closed and provide training for staff to identify loneliness of anyone using the job centre.

Northern Ireland is also doing good things throughout government initiatives to tackle loneliness but is it enough?

### **COVID-19 and Loneliness**

The Covid-19 pandemic has put hospitals and health systems under extreme pressure. A lockdown was announced by the national government and NI Executive in March 2020 and 'shielding' for those over 65 and for those extremely vulnerable. There is both the visible and hidden effects to be considered if we are to fight this battle and win it.

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<sup>22</sup> <https://www.executiveoffice-ni.gov.uk/sites/default/files/publications/execoffice/odp-dec-%202019.pdf>

First Minister Arlene Foster stated at this time that we all needed to play our part and look out for neighbours and be the good Samaritan. Communities and Councils across Northern Ireland co-ordinated efforts for food boxes, prescription deliveries and befriending phone calls.

Anecdotal evidence suggests loneliness has been a rising problem during the Covid-19 lockdown, particularly for those over 65 and those living alone. Long periods of staying at home with little or no social contact, particularly for those who live alone or in another vulnerable group at risk of loneliness, may have potentially worsened the situation.

*However, this has been exacerbated by the current situation. People aged 75+ (41.3%) and people aged 55-64 (41.1%) were “more often lonely” than people in other age groups.<sup>23</sup>*

Poor mental health can often lead to loneliness. The Institute for Fiscal Studies published an initial working paper on lockdown and the effects of social distancing and although not Northern Ireland specific there is data to support how lockdown has contributed to the worsening of mental health issues.

The UK government launched an effort to tackle loneliness during the pandemic and period of social distancing. National organisations working to tackle loneliness and build social connections are invited to apply for a share of £5 million of funding. Organisations in England can apply if they;

- *can demonstrate their ability to reach people in ‘cold spots’ where informal neighbourly support and small local charities are not able to fully meet needs around social connection*
- *serve the needs of groups particularly at risk of loneliness, including those noted in ONS analysis and Community Life Survey and Active Lives Survey data*
- *continue, adapt or expand existing provision where there is a track record of successful delivery*
- *cannot be provided without this additional funding<sup>24</sup>*

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<sup>23</sup>

<https://www.nisra.gov.uk/sites/nisra.gov.uk/files/publications/Loneliness%20in%20Northern%20Ireland%202018-19%20report.pdf>

<sup>24</sup> <https://www.gov.uk/government/publications/5-million-loneliness-covid-19-grant-fund>

In June 2020, the 'Let's Talk Loneliness' campaign in England encouraged individuals to consider writing letters and cards to those still isolating as lockdown measures ease to ensure they don't feel forgotten.

The Action Group on Loneliness Policy in Northern Ireland in response to COVID-19 are calling on the NI Executive to take immediate and urgent action:

- *Ministerial lead on loneliness: to lead immediate cross-departmental action*
- *Launch a public campaign: to get people talking openly about loneliness*
- *Funding: loneliness to be a priority category in COVID-19 response and recovery funding*
- *Publish loneliness guidance: on supporting yourself and others safely*
- *Cross-sector loneliness implementation group: bringing together the community and voluntary sector, businesses, schools, employers, health and social care - to share best practice and promote action on loneliness across society, as we all adapt and look to rebuild individual and community resilience as we recover from the COVID-19 pandemic<sup>25</sup>*

The DUP would propose:

- A clear action plan for recovery from Covid-19 and how this has impacted upon loneliness.

Social distancing may continue for a further period of time and we need to address the impact that might have in regard to loneliness. The lasting outcomes are yet to be determined but they are likely to be considerable. There is a heightened awareness of loneliness due to COVID-19 and how tackling it is now an even more integral part of policy making.

Telephone befriending services for someone who lives alone, older people, or someone who could do with a friendly phone call can be beneficial. This call can have a positive impact of anyone impacted by loneliness or isolation. Across the charity, community and voluntary sectors befriending phone calls take place to those who at risk of loneliness, this would have been stepped up during COVID-19 as a lifeline. There are befriending services across Northern Ireland ongoing to include Good Morning North Belfast and Oasis NI but gaps still exist.

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<sup>25</sup> <https://www.ageuk.org.uk/globalassets/age-ni/documents/policy/tackling-loneliness-and-building-connections---statement-on-covid-19.pdf>

The DUP propose:

- Establishing a cross-sector loneliness implementation group, to include government, business and the community and voluntary sector. This could include community and voluntary sector, businesses, schools, employers, health and social care - to share best practice and promote action on loneliness.
- Befriending schemes funded to ensure the most vulnerable can be reached and receive a friendly phone call. There are programmes currently ongoing and it is for DfCs to map these and ensure gaps are filled.

We welcome all feedback on how loneliness could be addressed, and in particular after the impact of COVID-19, and the associated regulations.

## Questions

1. Are there any groups at risk of loneliness that haven't been identified?
2. What do you consider the key learning from the strategies and approaches elsewhere in the UK?
3. Should Northern Ireland have a stand-alone strategy or is enough already being delivered by government departments?
4. How would a loneliness strategy be best delivered by government? What government department should lead and should there be an implementation group?
5. How do you believe covid-19 has affected the problem of loneliness?
6. How should social prescribing be delivered?

7. What should be included in a transport strategy to address loneliness and social isolation?
8. What role can the community and voluntary sector play?
9. What role can employers and businesses play?
10. What would a public awareness campaign look like?

Please email your answers and comments to [skillen@dup.org.uk](mailto:skillen@dup.org.uk)