# Department for Communities Scrutiny Committee Task & Finish Group 2018/19

## Loneliness in Carmarthenshire

# **Draft Planning & Scoping Document**

Task & Finish Objective(s)	To review the impact of loneliness in Carmarthenshire
Context	Loneliness is seen by many as one of the largest health concerns we face. There has been growing political interest in loneliness as a significant social problem. Here are the reasons why:
	<ul> <li>Health risks</li> <li>Loneliness is as bad for you as smoking 15 cigarettes a day¹.</li> <li>Loneliness is worse for you than obesity².</li> <li>Lonely people are more likely to suffer from heart disease³.</li> <li>Loneliness is likely to increase your risk of death by 29%⁴</li> <li>Lonely people are 1.64 times more likely to develop dementia, this was distinct from social isolation factors such as living alone or being unmarried⁵.</li> <li>Loneliness has a negative impact on willpower, which means that lonely people are more likely to have unhealthier diets, take less exercise and engage in behaviour that negatively impact on their health⁶</li> </ul>
	<ul> <li>Mental health risks</li> <li>Feeling and mental health problem are strongly linked. Having a mental health problem increases your chance of feeling lonely, and feeling lonely can have a negative impact on your mental health.<sup>7</sup></li> <li>A recent study found that the presence of loneliness is predictor for depression.<sup>8</sup></li> <li>Drug abuse and eating disorders are linked to loneliness<sup>9</sup></li> </ul>

<sup>&</sup>lt;sup>1</sup> (Holt-Lunstad, 2010)

<sup>&</sup>lt;sup>2</sup> •(Holt-Lunstad, 2010)

<sup>&</sup>lt;sup>3</sup> •(Valtorta et al, 2016)

<sup>4 (</sup>Holt-Lunstad, 2015)

<sup>&</sup>lt;sup>5</sup> (Holwerdal et al 2010)

<sup>&</sup>lt;sup>6</sup> •(Twenge et al 2001)

<sup>&</sup>lt;sup>7</sup> MIND www.mond.co.uk

<sup>&</sup>lt;sup>8</sup> Lonely Society Report The Mental Health Foundation

<sup>&</sup>lt;sup>9</sup> Wang et al Social Isolation and Mental Health

### Who is affected by loneliness?

- National Survey for Wales showed the 17% of people in Wales were lonely and 54% of people experienced some feelings of loneliness.
- Loneliness is not about someone's "personality", but likely to be driven by other factors such as health and economic status. Illness and unemployment made loneliness much more likely as well as those in the caring role.<sup>10</sup>
- Women are consistently more likely than men to report feelings of loneliness. But research suggests this is influenced by a reluctance among some men to admit to the extent of their loneliness.<sup>11</sup>

#### Loneliness in older age

- There are 1.2 million chronically lonely older people in the UK (Age UK 2016, No-one should have no one).
- Half a million older people go at least five or six days a week without seeing or speaking to anyone at all (Age UK 2016, No-one should have no one).
- Two fifths all older people (about 3.9 million) say the television is their main company (Age, U.K., 2014. Evidence Review: Loneliness in Later Life. London: Age UK).

#### Loneliness in younger people

- A study by The Co-op and the British Red Cross reveals over
   9 million people in the UK across all adult ages more than the population of London – are either always or often lonely.
- Young adults are more likely to feel lonely than older age groups, says a study from the Office for National Statistics.
- Research has found that almost 10% of people aged 16 to 24 were "always or often" lonely the highest proportion of any age group. This was more than three times higher than people aged 65 and over.<sup>12</sup>

#### Loneliness and families

- A survey by Action for Children found that 43% of 17 25
  year olds who used their service had experienced problems
  with loneliness, and that of this same group less than half
  said they felt loved.
- Action for Children have also reported 24% of parents surveyed said they were always or often lonely.

#### Loneliness and disabled people

 Research by Sense has shown that up to 50% of disabled people will be lonely on any given day.

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<sup>&</sup>lt;sup>10</sup> Campaign to end loneliness https://www.campaigntoendloneliness.org/resources/

<sup>&</sup>lt;sup>11</sup> Psychology Today https://www.psychologytoday.com/us/blog/the-art-closeness/201601/3-surprising-truths-about-gender-and-loneliness

<sup>&</sup>lt;sup>12</sup> ONS

#### Loneliness and the economy

 Research commissioned by Eden Project initiative The Big Lunch found that disconnected communities could be costing the UK economy £32 billion every year.

#### **Loneliness in Carmarthenshire**

There are no specific statistics that measure the perception of loneliness in Carmarthenshire but there a number of factors which indicate that it may be a major issue here:

- 30% of the population live alone<sup>13</sup>
- West Wales is one of the poorest regions in Northern Europe and there are links between poverty and loneliness.
- Two of the main sectors in Carmarthenshire are tourism and agriculture, which are seasonal and particularly in the case of farming, solitary.
- Illness is a predictor of loneliness and 1 in 4 people in Carmarthenshire have a limiting long term illness
- 23% of the population is over 65
- 13% of the people in Carmarthenshire are carers
- 3 out of 10 people in the county suffer from mental health condition.
- The wellbeing assessment identified that people feeling in that they belong to their community is reducing and that people see the importance of social connectedness.

#### Loneliness in Wales

- It was announced in Feb 2018 that tackling the causes of loneliness and social isolation is a national priority for the Welsh Government, (Minister for Children and Social Care, Huw Irranca-Davies)
- The Welsh Government have agreed to: will:
  - Identify areas of work across that could be accelerated to tackle the issue
  - During 2018, publish for consultation a crossgovernment strategy on loneliness and isolation with a final strategy published by March 2019
  - Commission work to assess the impact of loneliness and isolation on health and well-being and whether people experiencing these issues make increased use of public services.

### Membership

#### **Elected Members**

- To be agreed at the Social Care & Health Scrutiny Committee Meeting to be held on 21st May, 2018
- Up to 6 Elected Members appointed to reflect the political balance of the Council as whole.

<sup>&</sup>lt;sup>13</sup> Carmarthenshire's Wellbeing Plan http://www.thecarmarthenshirewewant.wales/

	Advisors / Support Officers
	TBC
	150
The main aims of the review	To review the prevalence and impact on loneliness in Carmarthenshire
	To review strategy, action plan and services in place to address loneliness
	To formulate recommendations for consideration by the Executive Board.
Scope of the review	This review will focus on Carmarthenshire's strategy and delivery plan to address loneliness.
How it will contribute to achieving	Contributes to the following outcomes from the County Council's Corporate Strategy 2015-20:
corporate / community objectives and well- being objectives	<ul> <li>People in Carmarthenshire are healthier</li> <li>Providing services as efficiently as possible, ensuring value for money</li> <li>Investigating and developing new ways of working and providing services</li> <li>Increasing collaboration with our partners and communities in order support the delivery of services</li> </ul>
	This project will link directly to the following Carmarthenshire County Council Well-being objectives:
	<ul> <li>Strongly connected people, places and organisations who are resilient to change.</li> </ul>
	Delivering Carmarthenshire County Council Ageing Well Plan:
	Loneliness and isolation
	Dementia Friendly communities
	Age friendly communities
	Opportunities for employment and volunteering
	Delivering Carmarthenshire's Vision for Sustainable Services for Older People:
	<ul> <li>Promote independence, community engagement and social inclusion.</li> </ul>
	Promote health and wellbeing of older people

List of key	Integrated Services
stakeholders	Housing/Direct Services
[not exhaustive]	Mental Health/Learning disability Services
	Community Regeneration
	Leisure
	Public Health
	HDUHB Primary Care
	CAVS / Third Sector
	Non-maintained Sector and Private providers
	Democratic Services (information on how often reported from Elected Members)
	Other as identified
What information / documents are required to inform the work of the study? [not exhaustive]	To be agreed at the meeting of the Social Care & Health Scrutiny Committee to be held on 21st May, 2018
Timescale for	Monday, 21 <sup>st</sup> May, 2018
completion of the review	Draft Planning & Scoping Document to SC&H Scrutiny Committee
	Research and Evidence Gathering period – June to November 2018:-
	Thursday, 14 <sup>th</sup> June, 2018 – T&F Group Meeting 1
	Agree overall approach for the review
	Draft project plan
	Brait project plan
	Thursday, 19 <sup>th</sup> July, 2018 – T&F Group Meeting 2
	Thursday, 13 <sup>th</sup> September, 2018 – T&F Group Meeting 3
	Wednesday, 17 <sup>th</sup> October, 2018 – T&F Group Meeting 4
	Monday, 19 <sup>th</sup> November, 2018 – T&F Group Meeting 5
	Monday, 17 <sup>th</sup> December, 2018
	Final Report to Committee