



Combating Loneliness amongst older people

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Best of Times and the Worst of Times

- **The Worst**

Austerity: public services at full stretch and many being cut back

Local Government and Voluntary sector especially vulnerable, but health also struggle in many areas.

- **The Best**

Massive public response to Age UK's No-one should have No-one Campaign 2015 and 2016

Lots going on, and a real will from all sides to work together to make a difference



Key Principles

- Embedding solutions to loneliness in the wider community more effective than a stand-alone loneliness service
- NHS, Local Government and Public Health should work together: loneliness is a well being and active community issue as well as a health issue
- Take a whole person, person-centred, coproduction approach
- Addressing prevention and early intervention as well as chronic loneliness identifies opportunities and solutions
- Too narrow an approach will compromise effectiveness
- And now is a golden moment for mobilising people across the community



Growing public awareness

- Response to Age UK's No-one should have No-one Christmas Campaign
 - 17,000 peak in enquires in 2016/17 compared with of 7,000 enquiries in 2015/16 and no peak before
 - 43,000 annual enquires about volunteering compared with 20,00 in 2015/16 and 8,000 in 2014/15
- Jo Cox Commission on Loneliness
 - Huge sign up from across voluntary sector
 - Strong MP and ministerial interest
- Barnsley Age UK recruiting 'eyes on the ground' – overwhelming response
- British Red Cross recruiting volunteers in London: oversubscribed in two weeks





Over 150 local Age UKs delivered social, leisure and educational activities.



Over 90,000 older people supported by a practical help at home service.



Age UK and our network of local Age UKs were supported by approximately **75,000 volunteers and campaigners.**

Local Age UKs offered over **1,700 services.**



Over 5 million people reached through our national and local information & advice



96% of English postcodes are covered by a local Age UK.

Age UK current programmes to address loneliness

- More than 120 local Age UKs provide social activities which help prevent or counteract loneliness, and/or with specific befriending services.
- Other services – information and advice on care and benefits, repairs, shops etc can help identify people who are lonely as well as practical help
- Call in Time – national befriending call services
- Nationally ‘No-one should have no-one’ – mobilising public awareness and opportunities to volunteer and ‘Call in Time’
- Raising awareness of what works: with the Campaign and with the Local Government Association
- Test and Learn pilots with local Age UKs



What do we mean by loneliness?

- Lacking meaningful companionship
- Can be associated with, but not the same as, being on your own.
- UCLA three item indicators:
 - *How often do you feel you lack companionship?*
 - *How often do you feel isolated from others*
 - *How often do you feel left out*



Why is it important? Misery

“People seriously underestimate the awfulness of loneliness.

I had nobody. I was completely lost. Day and night, week after week, month after month. Hours become like days. Days become like weeks. The loneliness gets under your skin.”

“ Call in Time has changed my life from a colourless day by day of ‘getting through it’ to getting back into ‘LIFE’ state. It’s been a gradual process but with the ongoing care and concern from Call in Time I am a much happier person.”



Barbara, 85



Impact on health and increases pressure on health and care services

- Association with higher incidence of strokes and heart disease, falls, depression and dementia, suicide
- Role of stress hormones
- Healthy and unhealthy behaviours
- Increased demand on health and care services
- Estimate 1.2 million older people in UK, and numbers increasing



What works? Testing Promising Approaches

- Reach:
 - Eyes on the ground
 - Mapping
 - Outreach
- Understand
 - People are different
 - Find out what will work for them
 - Listen, don't make assumptions
 - Work with the lonely person
 - Help to help themselves
- Support
 - Tailored to personal needs and circumstances
 - Often short term but may need to be longer
- Evaluation
 - What works



Eyes on the ground

- Loneliness embedded in other services: across all local Age UK services: trained to recognise signs and to ask.
Energised the local Age UKs
- Existing networks: eg health and social care, other voluntary sector organisations, home from hospital services, GPs receptionists, district nurses
- Other public sector professionals: Police Community Support Officers, Fire and Rescue
- Employers: employees and front line staff – the co-op, tesco's
- Local shops and services: hairdressers, cafes, shops, pubs, parks, libraries, post offices, plumbers, electricians.
- Local MPs and councillors
- Local campaigns and activities: Neighbours, relatives, friends – Happy to chat! Street Parties. Pop up events



Community mobilisation: Range of Roles

- Publicise services
- Refer to services
- Engage and listen
- Help to find solutions

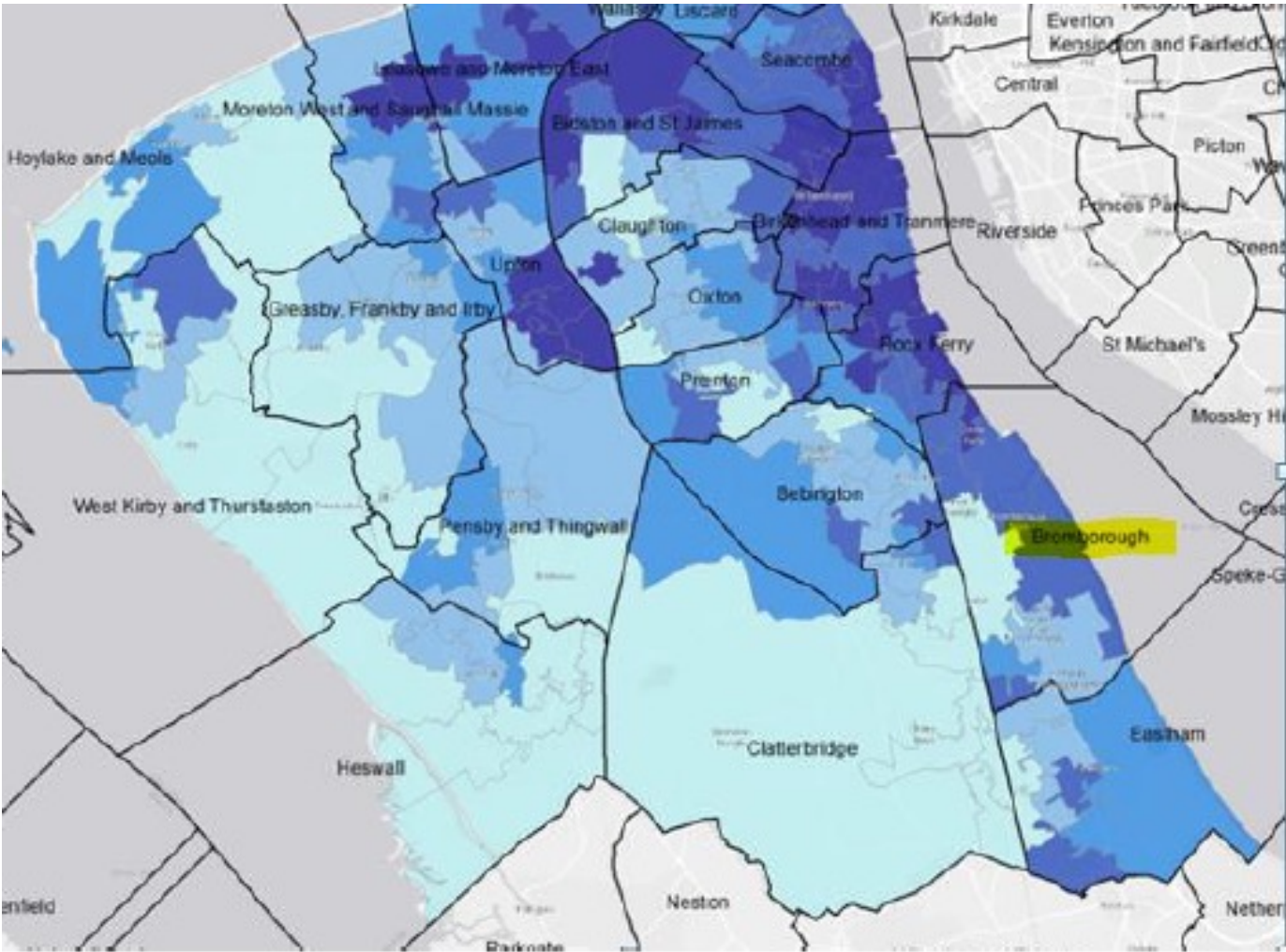


Using data to identify those at risk

- Research tool to measure and map risk of loneliness among older people in local community
- Based on analysis of the English Longitudinal Study of Ageing and developed with the Office for National Statistics
- Most important risk factors include:
 - poor health
 - household size / living alone
 - marital status / being widowed, divorced

www.ageuk.org.uk/professional-resources-home/research/loneliness-maps/

Loneliness Heat Maps - Wirral



Understand Guided Conversation

- Provide opportunity for older person to talk and be listened to.
- Explore whether lonely, and if so, how lonely
- Explore interests
- Find out what could help the older person find purpose and pleasure
- Identify the barriers and help needed to overcome them
- Ongoing process
- Needs training and ability to deal with upset



Support

- Telephone calls may provide bridging service
- Matching with volunteer
- Visits to home
- Identifying what would help and then helping to access: eg Accompanying on public transport; going together to lunch club, book club, introducing to people with similar interests; internet etc
- Also other services, like Benefits and Handyperson may also help 'break the mood' and energise. Transport may be key element
- Sensitivity to adapt service over time
- Flexible guidance on how long: contextual judgement on 'dependency'



Evaluate

- UCLA three item questions:
 - How often do you feel you lack companionship
 - How often do you feel isolated from others
 - How often do you feel left out
- Score from 3 (Hardly Ever) to 9 (often)
- Asked at Guided Conversation
- Asked again 6 to 12 weeks after intervention started

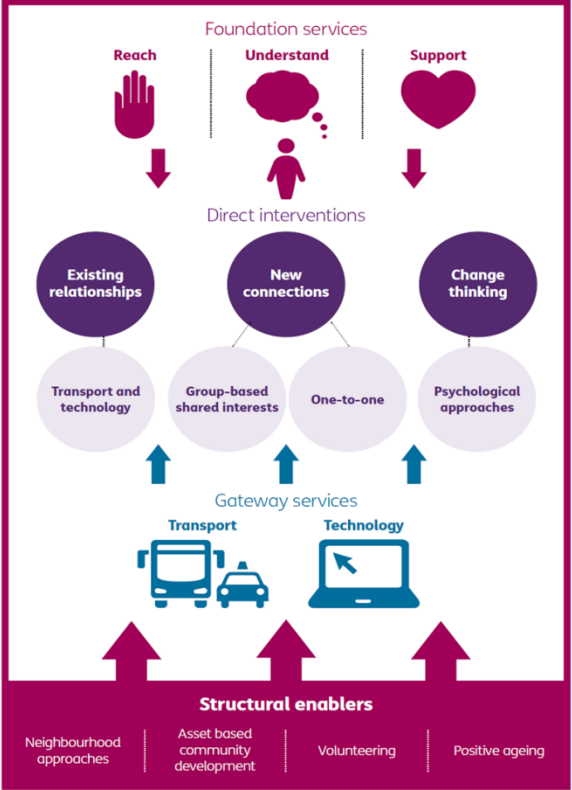


What have we learnt?

- This approach has led to a statistically significant reduction in loneliness scores: 88% of people who were often lonely saw a reduction in their scores
- Treat as part of a mosaic of services: need to resolve other issues too, such as money worries
- Guided conversation itself can have a significant impact
- Offer immediate support, even if short-term & low level
- Train staff and volunteers to manage the guided conversation and ask the UCLA 3-point questions



Foundation services one element in a much wider setting



Foundation services

Direct Interventions

Gateway Services

Structured Interventions



Some elephant traps to avoid

Narrow focus can have unintended consequences

- Not lonely enough?
 - Investment in reach?
 - Turning away people who self refer?
 - Prevention and mobilisation
- Exclude if in receipt of social care? Issue is whether lonely. Consequences the same
- Payment by net impact on loneliness? Responsible for things outside control?
- Whole service criteria for success: how has the service helped? What has the individual gone on to do? Measures of growth in community capacity?



Further information from Age UK

No-one should have no-one report.

This and other reports and videos at:

www.ageuk.org.uk/no-one



