

Community wellbeing: connected people and places

UPDATE BRIEFING – August 2021

A highly collaborative piece of work on community wellbeing and connectedness in East Sussex will be taking place over the coming months. Through this work we will make progress on two important and linked initiatives:

- **Partnership approaches to community wellbeing in East Sussex**, including the future scope of Community Hubs. Community Hubs have been an important part of supporting the immediate needs of our communities during the pandemic. We are now keen to explore how communities experiencing longer-term barriers can achieve good health and wellbeing.
- A new COVID-19 recovery project to help us develop a **systems approach to tackling loneliness and social isolation in East Sussex**. The aim of the work is to understand the nature and impact of loneliness on East Sussex residents and identify future opportunities and approaches to mitigate its worst effects.

Active participation of many different people and organisations will be needed to achieve these aims, along with a recognition that we can all have a role in making positive change. Collaborate CIC will be supporting us to explore these complicated and significant issues up until February 2022.

Collaborate is a social change agency that helps people, organisations, services and systems to work together to tackle complex social challenges. They have a wealth of experience in collaborative approaches to involvement and engagement, which will help us to explore how the system can more effectively respond to social isolation and unlock potential in local places through building connections.

Connection Campaign

During the initial phases a '**Connection Campaign**' will bring people together to explore how communities across East Sussex can become more connected, and how we can all work better together to make this happen. Organisations across East Sussex will be involved in the campaign through participating in events and engaging with local people about what connection means for them.

From September onwards, there will be a series of engagement opportunities, using an appreciative inquiry¹ approach, including:

¹ Appreciative inquiry is an approach for creating and sustaining change that focuses on what's working well and seeks to build on this, instead of a more traditional focus on problems and weaknesses. This approach doesn't pretend there are no real or challenging

- **Partner engagement** – Collaborate will engage with a broad range of partners across the County to inform and shape the work. This will include diagnostic interviews with a range of partners and two collaborative workshops bringing together organisations across East Sussex.
- **Broad resident engagement** – this will aim to hear from as many residents as possible through methods including individual conversations, group conversations and online surveys. Collaborate will work with interested local partners to conduct this work, including developing a toolkit and providing training to enable generation of insights as part of people’s day-to-day roles.
- **Deep targeted resident engagement** – this will aim to reach people who are most isolated, particularly those who have disproportionately experienced loneliness during the pandemic. Collaborate will work with local engagement partners 3VA, Rother Voluntary Action and Hastings Voluntary Action to conduct this aspect of engagement activity to draw on local relationships and insight.

The engagement phase will culminate in Connection Campaign co-creation events. These will bring together local people and partners to explore findings, map assets, celebrate great examples of community-led activity, and identify what needs to happen locally to enable everyone to help build a more connected community. Later stages of the project will involve synthesising the findings, developing recommendations, and supporting experimentation or ‘deep dives’ to help develop new models and ways of working.

How can you help?

Please spread the word about the project to colleagues and organisations who may be interested. Send any documents or research that you think would be useful, as well as any details of relevant upcoming events relating to loneliness or connection to the email below.

GET IN TOUCH NOW to be part of our participatory research to help find out more about people's experience of loneliness. An important part of the broad engagement involves staff (and volunteers) having brief conversations with residents about ‘connection’ and capturing their responses. A briefing session in early September and a toolkit will support this. **If you could help to make sure the residents you work with are represented, find out more by contacting:** tajwar@collaboratecic.com (ideally by Friday 27th August 2021 at the latest).

A little more background on the reason for this project...

Why is tackling loneliness important?

There is an extensive evidence base about the impact of loneliness and social isolation on people’s lives, their relationships and their wellbeing. It is also a serious public health concern. It leads to higher rates of premature mortality comparable to those associated with smoking and alcohol consumption – around 30 per cent higher than for the general population² and is a risk factor in developing depression.³

problems, but it asks you to look at them and redefine them in a way that generates a number of positive possibilities. So instead of starting with ‘what’s the problem’ and looking for fixes it starts with ‘what’s already working’ and how can we build on that?

² Holt-Lunstad J, Smith TB, Baker M, et al. (2015) *Loneliness and Social Isolation as Risk Factors for Mortality - A Meta-Analytic Review Perspectives on Psychology*, published online 2015 <http://pps.sagepub.com/content/10/2/227.abstract>

³ Cacioppo, Hughes, et al. (2006) *Loneliness as a Specific Risk Factor for Depressive Symptoms: Cross-Sectional and Longitudinal Analyses*, American Psychological Association, 2006

How can loneliness be defined?

Loneliness can be a feeling that the quantity and quality of our relationships are not as good as we would like them to be. This is different from being isolated or alone, which are more objective measures of how much time we spend with how many other people, or solitude, which can in fact be positive and restorative for wellbeing.

Loneliness can be **social**, where we feel a lack of social connections, **emotional**, where we feel like we lack meaningful relationships to the extent that we don't belong, and/or **existential**, where we might feel entirely separate from other people.

Whilst loneliness is often associated with social isolation, these two concepts, though linked, are distinct and may need to be tackled using different approaches. The first national loneliness strategy, [A connected society](#), included commitments to act to reduce loneliness and has four key themes to address the issue:

- **Infrastructure:** transport, housing and community buildings
- **Integrated working:** between local authorities, charitable organisations, the private sector and the wider community
- **Social prescribing:** utilising community activities to redirect those experiencing loneliness away from primary care
- **Cultural change:** a societal shift to build resilience and increase connections.

What do we already know about the local experience of loneliness?

The [2017 East Sussex Community Survey](#) found that a quarter of residents in the county (25%) said they feel lonely living in their local area 'often' or 'some of the time'. At district/borough level, those in Hastings (30%) are more likely than average to feel lonely often or some of the time, whilst in Wealden residents are less likely to feel this way (21%). Sub-groups more likely than average to feel lonely with this regularity include:

- women (27% vs. 22% of men)
- 18-24 year olds (36%), 25-34 year olds (29%) and those aged 75+ years (29%)
- workless residents (51% vs. 20% of those in work)
- residents in education or training (42% vs. 25% overall)
- 'homemakers'/others (those whose working status is 'doing something else' (30% vs. 25% overall)
- social renters (44%) and private renters (36% vs. 20% of owner occupiers)
- ethnic minorities (45% vs. 24% of White residents)
- LGBT residents (34% vs. 23% of heterosexual residents)
- those with a disability (43% vs. 19% of those without)
- those in poor health (52% vs. 18% of those in good health)
- Single person households and single parents (both 39% vs. 25% overall), and
- those without children in the household (26%).

The impact of the coronavirus (COVID-19) pandemic

Coronavirus (COVID-19) restrictions are likely to have worsened loneliness and social isolation for many people, particularly those already at risk. The effect is likely to be particularly strong due to social distancing, heightened health anxieties and wider economic and social impacts, such as job losses. Young people, those living alone, those who have been shielding, those on low incomes and students are likely to have been at an even greater risk of loneliness over this period.

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