CHURCH URBAN FUND

CONNECTING COMMUNITIES:
THE IMPACT OF LONELINESS
AND OPPORTUNITIES FOR
CHURCHES TO RESPOND

Connecting Communities

Loneliness is an increasingly common experience in Britain. Almost one in five of us say that we feel lonely often or always[1], one in ten say they have no close friends[2] and, in 2014, 64% of Anglican church leaders said that loneliness and isolation was a significant problem in their area – up from 58% in 2011.[3] As our society changes and people live longer, move further afield to work and are more likely to live on their own, increasing numbers of us are living with the kind of chronic, crippling loneliness that affects our sense of self, as well as our physical and mental health.

A heightened awareness of the impact of loneliness has led to a wide variety of responses in recent years from government[4], the media[5] and charitable organisations.[6,7] Within this ecosystem of activity, churches have an important, and in many ways, unique role to play. Research has shown that churches often act as the glue of their local communities; they invite people into communities of friendship and build resilience by enabling networks of mutual support to grow.[8] As the number of people experiencing loneliness is likely to increase in the years to come, primarily as a result of our ageing population, this kind of local and relational response will become even more important.

This briefing paper seeks to support churches in their response to loneliness. First, it provides a brief overview of the problem – what it is, where it is and why it is, and how it impacts on our health and our communities. Second, it draws upon the available literature to summarise best practice responses, identifying principles that can be used to develop and refine effective church-based responses to loneliness.

KEY FACT

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What is loneliness?

Loneliness is the 'perceived gap between the quality and quantity of relationships that we have and those we want'.[9]

Loneliness is the 'perceived gap between the quality and quantity of relationships that we have and those we want'.[9] Everyone experiences loneliness at some time in their lives, for example in moving to a new city or school, after a bereavement or loss, or simply in that fleeting moment of feeling alone in a room of strangers. It is often understood as a feeling akin to and as useful as hunger or thirst:'it is our internal trigger, letting us know it's time to seek company, as hunger lets us know it's time to eat.'[10]

However loneliness can also move beyond the short-term, situational loneliness described above. It can become chronic, wearing us down with deeply negative impacts on our mental, emotional and physical health, as well as on our families, community and wider society. It is this type of loneliness we are discussing in this paper.

Whilst loneliness and isolation are often talked about together, and though they do intersect and need to be considered alongside each other, there are important distinctions between the two. Isolation is an objective state – defined by the number of social connections and contacts a person has. Isolation can be a choice, and one in which people can sometimes live very happy and satisfying lives. In contrast, loneliness is subjective and consists of a perceived lack of relationships. It is a deeply personal experience, and therefore its 'causes, consequences and indeed its very existence are impossible to determine without reference to the individual and their own values, needs, wishes and feelings.'[11]

What is the impact of loneliness?

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Loneliness damages our physical and mental health. Studies show that being lonely can be as harmful to our bodies as smoking 15 cigarettes a day. It is more damaging than obesity and increases the risk of developing a disability. Research has also found that lonely people are at greater risk of cognitive decline and have a 64% increased chance of developing clinical dementia.[12]

Loneliness also impacts our ability to maintain and build new relationships. When we feel lonely, our body is telling us to go and find the human connections that we crave. However when loneliness becomes entrenched we are more likely to withdraw; it erodes our ability to connect by damaging our self-esteem, or by weakening our ability to regulate emotions which are otherwise kept in perspective by communication with others.[13]

Loneliness also has a wider impact on the health and vibrancy of our communities. As those who are lonely lose confidence and withdraw, their communities lose their valuable skills, talents, passions and resources, and are poorer for it.

Who is lonely?

Loneliness can occur at any time and for any number of reasons. It affects people of all ages and cuts across the socio-economic spectrum. Yet particular groups are more vulnerable to feeling alone and cut off from others, often as a result of being in a particular stage of life or period of transition. Here we mention four groups.

Young people: Perhaps surprisingly, young people are more likely to feel lonely than those in any other age bracket.[14] More than a third of 18-34 year olds worry about feeling lonely, and yet 42% would be embarrassed to admit feeling lonely.[15] There are many reasons that young people may feel lonely, such as moving to university away from the structures of family homes and networks, being unemployed, or the substitution of social media in place of face-to-face interactions, which can compound a feeling of isolation. Almost a third of 18-24 year olds say that they spend too much time communicating with family and friends online when they should be seeing them in person.[16]

The elderly: The way in which our society is structured, with smaller families, two working-parent households and children who move away from their parents for jobs mean that many older people live alone and aren't often visited by their children or other relatives.[17] In fact, 36% of all those over 65 years old live alone, which is roughly 3.5 million people.[18] As well as having little contact with family, older people can also often lose touch with their other contacts, as they or their friends become increasingly ill and less able to leave their homes, or they suffer bereavements which leave them feeling less able to make connections with new people. This isolation from human connection is widespread among those over 75, with nearly half saying that television or pets are their main form of company, and with as many as 13% of over 75 year olds admitting that they are either often or always lonely.[19]

Those with mental health problems: Loneliness can be both a cause and a result of mental illness. More than half of people with depression or anxiety say that their health condition has caused them to isolate themselves from family members. This is illustrated by the fact that 20% of people with common mental health problems live alone, compared with 6% of the overall population, and that a person with severe mental health problems is four times more likely than average to have no close friends.[20] This isolation can occur for many reasons, such as the loss of self-esteem, an inability or phobia of leaving the house, the loss of a job and its associated feeling of belonging, or the effects of medication on a person's physical appearance.[21]

Those 'on the margins': People on the margins of society are more vulnerable to loneliness because of their relative isolation, for example immigrants who are separated from their communities by language and cultural barriers, the unemployed who are isolated from work colleagues, asylum seekers who have experienced trauma or tragedy, or those living in rural communities with little access to services or transport.

How can churches best respond to loneliness?

Many churches are already responding to the problem of loneliness. In 2014, 46% of church leaders said their church was providing organised activities to help the lonely and isolated, and 41% said they were offering informal support.[22]

As a report published by the diocese of Oxford showed, church responses to loneliness can include community cafés, visiting schemes, befriending services and chaplaincy support.[23] Many churches also support those who are lonely by simply offering a place to spend time and meet others free of charge.

Numerous studies have been done to determine which types of interventions are most effective in reducing loneliness and they have found that some have more impact than others. In order to help churches further develop and refine their responses to loneliness, we share three key findings from the literature.

1 Group-based activities are better than one-to-one interventions

Evidence has shown that group activities are more effective in reducing loneliness than one-to-one interventions.[24] Belonging to multiple social groups can help to prevent loneliness developing in the first place and can also benefit those who are already experiencing chronic loneliness and its associated impacts such as anxiety and depression. Indeed, belonging to a range of groups 'enhances our resilience, enabling us to cope more effectively with difficult life changes such as the death of a loved one, job loss or a move'.[25]

One-to-one interventions, such as befriending services, can be valuable in situations where there are significant barriers to engaging more widely, for example when someone is unable to leave their home because of a disability or phobia. However, wherever possible, the ultimate goal of such befriending services should be to help people access the type of group activities that have been proven to reduce loneliness more effectively.

It can be challenging to find and reach lonely people and so there is the risk that group activities will simply serve those who are already more socially connected. There are two ways to mitigate this risk. Firstly, training and equipping those who are likely to have contact with lonely people, such as church leaders, postmen and teachers, to be more proactive in identifying lonely people and signposting to local groups. For example, the Leeds Senior Network recruited volunteer Community Connectors to identify and connect people who were not already engaged in groups and activities.[26]

Secondly, working in partnership with local health services. Over three quarters of family doctors report that between one and five patients a day attend their surgery primarily because they are lonely, so GP
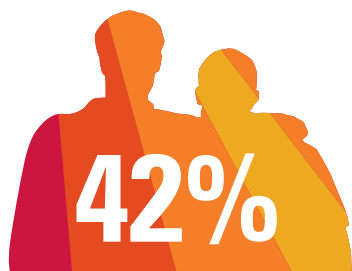
surgeries can be a vital site for making contact.[27] For example, Voluntary Action Rotherham employed a social prescribing team who work with patients identified by GPs and help them to access local groups.[28]

2 Activity groups based on mutual interest are more effective than groups that target lonely people

Not all group activities are equal. Research has found that groups based on mutual interest are more effective in reducing loneliness than groups where the primary offer is social contact.[29] Interest-based groups could include any form of activity from sports to knitting, from gardening to baking, from music to art. The important thing is that an individual feels a part of the group: research shows that the more an individual identifies with the group, the stronger their sense of belonging and membership, and the more likely they are to experience significant physical and mental benefits as a result of that membership.[30]

Before inviting people to join a particular group it can be beneficial to allow time for in-depth conversations that help to uncover an individual's particular interests and needs. Because loneliness is such a subjective experience, based on a personal understanding and valuing of relationships, an important component of any response is to understand the specific

desires and needs of those who are lonely. At Living Well, an organisation which works with older people in Cornwall, staff map opportunities for people to get involved in community activities. Before making a referral they begin with a relatively unstructured but guided conversation, exploring the person's circumstances, interests and needs, and leading to a discussion about available options. This means that responses are tailored to exactly what the person experiencing loneliness wants, which can range from joining a community choir, enrolling in an educational course or accessing professional support in tackling depression.[31]

## 3 Groups are most effective when they allow members to take responsibility for leadership

Research has shown that an important component of well-being is having a strong sense of purpose and that this often comes from being able to contribute and give to others.[32] A systematic review carried out in 2012 found that volunteering can have a positive effect on people's health, life satisfaction, self-esteem, ability to cope, depression and mortality.[33] One study also found that church-related volunteering had a larger effect on depression than secular volunteering.[34]

This research suggests that groups which offer people the opportunity to volunteer, to contribute to the running of the group and to help others will be more effective in reducing loneliness and in increasing wellbeing compared to groups where members passively receive help from others.

Older people in particular emphasise the need for reciprocity in social support. Research shows that this kind of reciprocity is more likely to occur when the group organisers and the group members 'belong to the same generation, have common interests and share a common culture and social background'.[35] This does not mean that every group needs to be homogenous, for example inter-generational groups have been found to lead to beneficial outcomes[36], but shows the importance of creating contexts where genuine, lasting friendships are more likely to grow and where people will feel more able to contribute to the wider group. HenPower, a project to reduce loneliness amongst older people, encourages this type of reciprocity and participation by offering people in care homes the opportunity to look after hens. Rearing the hens together, participants then visit schools, festivals and community events to give talks about hen-keeping. This type of group activity helps to build friendships and also give people a sense of purpose in being able to care for the hens and teach others about them.[37]
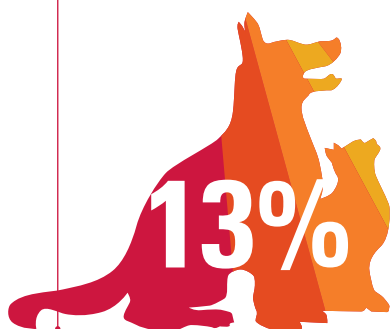
CASE STUDY

The Vintage Banquet

The Vintage Banquet is a weekly lunch hosted at St Peter's, Norbiton, and anyone aged over 60 is encouraged to come along for 'fun, faith, food and friendship'. The welcoming atmosphere draws people in from very different walks of life.

The food for the banquet is made and served by volunteers, with the support of staff and guests from the JOEL night shelter based at St Peter's. People who stay at the night shelter receive training through a 'Cook and Eat Programme' which gives them NVQ-level food hygiene and catering skills. The banquet becomes an opportunity for them to use those skills, to build their confidence and work in a team to serve another part of the St Peter's community.

'The Vintage Banquet is about getting people to share together,' says vicar Peter, 'We all bring what we can to the table - the older people bring themselves, their memories and their jokes, the homeless and other volunteers bring their contribution of helping out. It's about sharing both the joys and pains of life. It's amazing how powerful preparing and eating food together can be for breaking down barriers. We just have a good time together and that really helps to reduce the sense of isolation that exists in both groups.'

Conclusions

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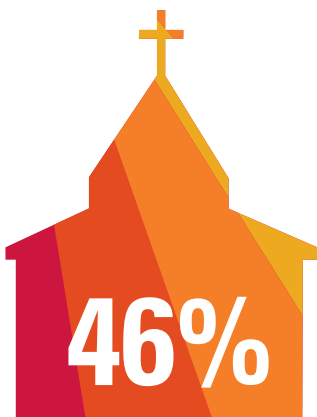
Churches are uniquely well placed to carry out the types of activities that have been proven to be most effective in reducing loneliness.

As a result of their local presence and their existing community life, churches are able to welcome people of all ages and stages of life into the new friendships and activity groups that help to reduce loneliness. They can also offer people opportunities to give, as well as to receive. By allowing people to take ownership of those groups, to volunteer and to give of themselves to others, churches can help to build people's wellbeing, self-esteem and sense of purpose. In our increasingly fragmented society it is crucial that churches continue to respond to the issue of loneliness, offering hope and friendship to those most isolated in our communities.

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