

Research Bulletin 13

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About the Research Bulletin

The Campaign to End Loneliness Research Hub supports the work of the Campaign by gathering, communicating and contributing to the evidence base around loneliness and isolation. The Research Hub aims to fill gaps in the research and engage in areas of controversy and debate. Members of the Hub include leading academics in the field along with public and voluntary sector representatives. To find out more about the Campaign to End Loneliness, visit [our website](#).

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News from the Research Hub

Research Hub Meeting: 23 January 2015

On 23 January, the Campaign to End Loneliness hosted the first Research Hub meeting of 2015. Chaired by Professor Vanessa Burholt, we heard presentations from Public Health England and the Behavioural Insights Team, the University of Kent, Swansea University and Brunel University. The 25 attendees came from 15 different universities plus a number of statutory and third sector organisations.

Presentation slides the day are available to download from the Campaign to End Loneliness website [here](#).

NIHR School for Social Care Research & Campaign to End Loneliness “Research Showcase”

On 17 April, the Campaign and the NIHR School for Social Care Research are hosting a joint ‘showcase’ event to share the latest research focusing on loneliness, social isolation, wellbeing and prevention. Research Hub Co-Chairs, Professors Vanessa Burholt and Christina Victor will be one of six speakers.

More information about the event can be found in the “Upcoming Events” section of this Bulletin.

Latest Research

Promising approaches to reducing loneliness and isolation in later life

This comprehensive report reviews what can be done by services and commissioners about loneliness in older age. It draws on a range of initiatives currently running in the UK, the views of experts in the field and the academic evidence base to share examples of, and make recommendations for, reducing loneliness.

What the research found: The report brings together different types of evidence for initiatives that contribute to tackling loneliness. It proposes a new framework for loneliness ‘interventions’ that can be put in place in order to provide a comprehensive local system of services that prevent and alleviate loneliness.

The framework includes:

- *Foundation services*

These are services which take first steps to tackling loneliness, and address three particular challenges that organisations who are working with lonely people face. Firstly, a foundation service might reach out to people who feel lonely. They might do this by using data to identify ‘at risk’ people (e.g. based on marital status, mental or physical health) or by making ‘human contact’ through trained workers in the community.

Secondly, a foundation service takes the time to talk to lonely older adults and get to grips with the individual’s needs and interests. This approach is effective in identifying and responding to loneliness through in-depth conversations and identifying person-centred approaches to meet individual need.

Thirdly, a foundation service might be concerned with supporting older adults to have more access to their communities and make meaningful connections. Individuals are reconnected with the wider community through ‘buddies’ or mentors.

- *Direct interventions*

These are services that help older adults to develop new connections and social relationships, while also maintaining existing relationship. Interventions could be group-based – which are particularly effective when they focus on shared interests and involve older people in delivery and design. One-to-one approaches, for example befriending initiatives, can be more appropriate for those unable to get out and about in the community.

Older adults could also be supported to change their way of thinking about their relationships. Psychological approaches, such as Cognitive Behavioural Therapy and Mindfulness have been successful in managing depression. It is expected that applying these approaches to addressing loneliness would also be effective.

- *Gateway Services*

These act as a ‘glue’ to help communities come together. Improving access to transport and technology (e.g. Skype and other internet-based initiatives) could support individuals to maintain existing relationships, or to reconnect with relationships they may have lost touch with over the years.

- *Structural Enablers*

A structural enabler is a service or wider initiative that creates the right conditions in a community for addressing loneliness. For example, encouraging volunteering, adopting a positive ageing strategy or investing in asset based community development can support communities to facilitate social activities and encourage active participation.

Implications for practice: A number of implications for service providers and commissioners are presenting by this report. Service providers should make sure the necessary connections and partnerships exist, to ensure that they are making a positive contribution to a wider framework of services and support that prevent or alleviate loneliness. Services should also do more to document the impact of their work on loneliness, to ensure that evidence for loneliness initiatives is developed and improved.

Commissioners concerned about tackle loneliness should support a range of initiatives and services with different approaches to the issue of loneliness. Funding or supporting a spectrum of foundation services, gateway services, direct interventions and structural enablers will ensure loneliness is tackled at the personal level and meet the need of the individual.

About the research: This report draws on a range of sources, both academic and from other available evidence, to guide commissions and funders of services that support older people to identify need in the

community. It also looks to support service providers in delivering loneliness interventions, and to shape future research in the field of loneliness.

Research reference: Jopling, K. 2015. *Promising approaches to reducing loneliness and isolation in later life* <http://www.campaigntoendloneliness.org/wp-content/uploads/Promising-approaches-to-reducing-loneliness-and-isolation-in-later-life.pdf>

Sight loss, loneliness and isolation

The review of academic literature from 1993 onwards examines the nature and extent of loneliness and isolation for people with sight loss.

What the research found: The literature review concludes that loneliness and social isolation should not be considered an inevitable consequence of sight loss. However, it is recognised that loneliness and social isolation are important issues for people with sight loss. When combined with additional factors such as physical decline, loneliness and social isolation have a detrimental impact on both physical and psychological wellbeing. This in turn has a negative impact on a person's ability to manage everyday tasks or activities, such as shopping, cooking, or socialising with others. As a result, contact with other people is reduced.

How people feel about their relationships can influence loneliness and social isolation. For example, if a person with sight loss is satisfied with their social connections and support, they are less likely to experience loneliness. However, older people with sight loss are more likely to experience poor relationships which, in turn, contribute to further loneliness and social isolation.

Although women with sight loss appeared to experience greater loneliness than men initially, over time this difference was reduced. This finding suggests men and women may adapt differently to sight loss, which further impacts on loneliness and social isolation they may experience.

Implications for practice: The findings of the research have implications for those working with people with sight loss. Service providers and commissioners should be aware that people with sight loss are more likely to experience poor relationships, which in turn could lead to increased loneliness and social isolation. Additionally, feeling lonely or socially isolated can contribute to a person's ability to carry out everyday tasks and their mobility, further contributing to a spiral of loneliness. Service providers should be aware of this to ensure people with sight loss can be best supported to maintain their mobility, independence and wellbeing.

Considering the complex ways in which loneliness and social isolation interact with other factors, more should be done to ensure that people with sight loss are given emotional support they may need at an early stage. The Adult UK sight loss pathway is used to identify key points at which this support might be offered. Increased use of such tools could prevent the onset of loneliness and social isolation, where factors permitted, in people with sight loss.

About the research: The report reviewed published literature on loneliness, social isolation and visual impairment from 1993 onwards. Literature was reviewed between May and July 2013.

Research reference: Hodge, S. and Eccles, F. 2013. 'Loneliness, Social Isolation and Sight Loss: A literature review conducted for Thomas Pocklington Trust', Lancaster University. Available at: eprints.lancs.ac.uk/68597/1/loneliness_social_isolation_and_sight_loss_final_report_dec_13.pdf

Loneliness linked to a decline in cognitive function

This review of literature considered the association between loneliness and cognitive function, in order to understand the impact of this association on older adults.

What the research found: Greater loneliness was linked to a decline in cognitive function in older adults. This was the case whether some was experiencing social or emotional loneliness. However, a cause-and-effect relationship cannot be clarified by the research but the role of social interactions may be:

- Limited social interactions may cause loneliness, which in turn results in cognitive decline
- Cognitive decline may lead to a decline in social interactions, which consequently result in loneliness

Additionally, it was found that social networks, dementia and depressive symptoms did not have impact on the link between loneliness and cognitive function in a person: people with higher levels of loneliness continued to show a decline in cognitive function regardless of these factors.

Implications for practice: The literature reviewed outlines the association between loneliness and cognitive decline. Commissioners should therefore invest in low-level preventative services, such as transport, that enable younger-older people to stay connected with others in the community (See "Latest Research" item 1: "Promising Approaches"). A greater and more detailed understanding of the link between loneliness and cognitive decline will better inform commissioners and service providers. Therefore further exploration into this association is needed, as is the need to consider the link between cognitive decline and social networks.

About the research: The research reviewed ten studies, all of which examined older adults aged 60 and over, and were published between January 2000 and July 2013.

Research reference: Boss, L., Kang, D.-H. and Branson, S. 2015. 'Loneliness and cognitive function in the older adult: a systematic review', *International Psychogeriatrics*, 1-13: doi:10.1017/S1041610214002749

What do we know about "social capital" in the United Kingdom?

The Office for National Statistics (ONS) has released a new report that analyses the levels of social capital in the United Kingdom. They define social capital as "social connections and all the benefits they generate" – and this report covers four aspects of social capital: personal relationships, social network support, civic engagement and trust.

What the research found: The first set of measures focus on the characteristics of people's relationships – including the size of social networks, satisfaction with relationships and trust within neighbourhoods. The data comes from a mix of surveys and was collected in 2011/12. Headline findings include:

- 1 in 10 people (aged 18+) in the UK said that they experienced loneliness “all, most or more than half of the time” over the previous two weeks to being surveyed
- 36% of UK residents wished that they could spend more time with family – and the same proportion also said they wished that they “had more social contacts”
- Nearly three quarters (71%) of those surveyed thought that people in their neighbourhood were “willing to help each other”

The report shows the correlation between numbers of close friendships and satisfaction with life. Of the people who had no close friends, 26% said that they were dissatisfied with their life. This was compared to just 14% of people who had 10 or more close friends and were dissatisfied with life.

The research also found that loneliness has a negative impact on our life experiences and attitudes. Of those who report feeling lonely all the time:

- 48% felt “left out of society”
- 41% said that what they do is “not recognised by others”
- 32% feel that what they do in their life is “not worthwhile”

These findings are made more significant when compared to people who never reported feeling lonely: only 7% of this group feel left out of society, 17% feel what they do is not recognised and just 5% feel that their life is not worthwhile.

Finally, the report looks at whether people in the UK have someone to rely on if they had a “serious problem”. Overall, 87% of people said that they could rely on a partner, family member or friend. However, the majority of people were most likely to “rely a lot” on a partner (83%) compared to 62% relying a lot on family, and just less than half of people (45%) relying a lot on friends.

Implications for practice: This Office for National Statistics (ONS) report reminds us that consistently 10% of the population – across all age groups – are experiencing loneliness regularly. This is similar to past estimates, in our *Safeguarding the Convoy* report from 2011 we reported that 5-16% of people aged 65+ said they felt lonely all of most of the time. Although chronic loneliness is a minority experience, the fact that levels appear to remain consistent could indicate that – as our population increases – we are facing a rise in loneliness in our population.

The research makes it clear that loneliness has a significant influence on quality of life, and how we view ourselves and our role in society. It clearly indicates that improving the quantity – and quality – of

relationships can help with mental wellbeing and satisfaction with life. But those working to prevent or alleviate loneliness could also seek to change individual's attitudes by creating services and support that value everyone's contribution and generate purpose.

Finally, those in contact with people who have been bereaved – from registrars to local community groups – should recognise that losing a partner could also indicate the loss of other support and help in a crisis, or on a daily basis, even if they have family and friends around.

About the research: As part of the Measuring National Well-being Programme, the ONS created 25 headline measures for social capital to help them build the evidence base behind the concept and its implications for people living in the UK. The report data is taken from a number of different sources, including Understanding Society Survey, European Social Survey, European Quality of Life survey and Community Life Survey.

Research reference: Siegler, V. 2015. *Measuring National Well-being, An analysis of Social Capital in the United Kingdom* (ONS: London)

Understanding and regulating emotions may reduce risk of loneliness

The research looks at prospective relationships between loneliness and emotional functioning in young adolescents in England. The study attempts to draw an association between a person's ability to regulate emotions to feelings of loneliness.

What the research found: Two different types of emotional skills were considered in the research: understanding and managing emotions, and perceiving and using emotions. Emotional skills may protect a person from experiencing loneliness. However while poor emotional skills may cause loneliness, loneliness may in turn cause an impairment in our ability to understand and manage emotions. The research found:

- Adolescents who can understand and manage their emotions have a reduced risk of experiencing loneliness. However loneliness, over time, also reduces this emotional ability in a person.
- Poor emotional skills are likely to increase the risk of loneliness over time. In males, this is the case when also coupled with lower ability to perceive and use emotions.

Implications for practice: Considering that the research was carried out with adolescents and with a small sample, applying the findings to working with older adults is somewhat limited. However, the research does make us aware that loneliness can affect our ability to understand and manage emotions, which can also predict feelings of loneliness over a period of time.

Men may be more at risk of loneliness over time as a result of reduced ability to perceive and use emotions than females. This may suggest implications for how males can be supported by practitioners and service providers to ensure they do not become lonely or isolated in older age. Whilst the researchers conclude that

more research is needed to examine these prospective links between emotional functioning and loneliness it does give us a greater insight into *why* people experience loneliness.

About the research: For the purpose of the research, a person's emotional skills were considered using the framework of ability emotional intelligence (AEI). This framework looks at four aspects of emotional ability: perceiving emotions, using emotions to facilitate thought, understanding emotion and managing emotion. AEI has been previously linked to loneliness in studies, social support and relationships.

Research reference: Wols, A., Scholte, R. H. J. and Qualter, P. 2015. 'Prospective associations between loneliness and emotional intelligence', *Journal of Adolescence*, 39: 40-48.

Sibling support and childhood memories can influence loneliness in later life

This paper examines the role of childhood memories, family ties and sibling support for loneliness in ever-widowed older adults (i.e. person who has at some point in their life experienced the death of a spouse).

What the research found: Experiences during childhood were important for social relationships in adulthood, with positive family ties reducing loneliness. In particular, memories and experiences of a supporting father could reduce loneliness in widowed older adults. Interestingly, results suggest that negative family experiences as a child may have resulted in better sibling bonding, possibly as protection.

Evidence suggests that relationships with siblings can influence the wellbeing of a person. A sibling providing emotional support could reduce the loneliness experiences by a widower. Bonds with siblings in later life were based on regular visits and phone calls; however this could be difficult to maintain, often when siblings move some distance away. The researchers found that emotional support could therefore be reliant on long-distance phone calls.

While positive relationships with siblings have been shown to have a reducing effect on loneliness, negative bonds with siblings result in higher levels of loneliness experienced. Additionally, a decrease in the social support offered by siblings can lead to the onset of loneliness.

Implications for practice: Good relationships with siblings and family ties are evidently important in preventing loneliness in later life. Siblings can provide emotional support to brothers and sisters and so it would be beneficial to learn more about the role of siblings in a person's social network. Furthermore, charities and other organisations should consider how best they can support older adults to maintain their relationship with siblings and other family members, to prevent the onset of loneliness.

About the research: The study was conducted using qualitative and quantitative data from the second wave of the Netherlands Kinship Panel Study. The data of 218 older adults were selected for quantitative analysis, all of whom were aged 50 years or over and had experienced the death of a partner. As part of this data, loneliness was measured using the De Jong Gierveld 11 item loneliness scale.

Research reference: Merz, E.-M. and De Jong Gierveld, J. 2014. 'Childhood memories, family ties, sibling support and loneliness in ever-widowed older adults: quantitative and qualitative results', *Ageing and Society* doi.org/10.1017/S0144686X14001329

Bereavement disrupts the immune system of older people

This paper studies the link between loss and stress levels in older adults, and the subsequent implications for the health of the person.

What the research found: Bereavement has a number of physical and mental consequences. This study links bereavement to an imbalance between two stress-activating hormones, cortisol and 'DHEAS'. Bereaved older adults were found to have much higher levels of cortisol, which acted to inhibit the immune system. As a result, older adults were left vulnerable to increased risk of illness and infection.

Bereaved persons also indicated significant feelings of loss and the research found that people who are bereaved but have higher levels of social support will have lower levels of cortisol, which can affect the immune system. The relationship to the person lost (e.g. spouse or distant relative) can also play a part in increasing risk of poor health.

Implications for practice: The results have implications for those supporting older adults in the period following a bereavement to prevent the onset of loneliness and maintain physical health. Services and people working with older adults should be aware that experiencing bereavement can lead to stress-activating hormones that negatively affect our immune system and, consequently, the risk of illness.

In a recent Guardian article, author of the research Anna Phillips noted, "One of the best things people can do is re-engage with their social support networks. Do not socially isolate yourself at times of stress, particularly bereavement...That's hard in older groups because the person they've lost might have been their main source of support. That's why it's really important to be involved in the community so you are not left alone as an old person when this happens."

About the research: Two groups were compared in the research; young adults (mean age 32 years) and older adults (mean age 72 years). Neutrophil function and levels of stress hormones cortisol and dehydroepiandrosterone sulphate were assessed for effect on bereavement across the two groups.

Research reference: Vitlic, A., Knanfer, R., Lord, J. M., Carroll, D. and Phillips, A. C. 2014. 'Bereavement reduces neutrophil oxidative burst only in older adults: role of the HPA axis and immunosenescence', *Immunity and Ageing*, 11: 13. Available at: www.immunityageing.com/content/11/1/13

Loneliness is the "biggest challenge" facing refugees and migrants in London

This research studies the experiences of loneliness in migrants, refugees and asylum seekers living in London. Those interviewed were members of The Forum, a charity which supports migrant and refugee communities with their integration into British society.

What the research found: The researchers found that although there were a number of reasons for people moving to the UK, 58% of people taking part in the research described loneliness and isolation as their biggest challenge living in London. A number of inter-related challenges were identified by the research, which were linked to loneliness and isolation.

Migrants were found to feel lonely or isolated in a new country as a result of:

- Loss of family and friends
- Lack of social networks
- Language barriers
- Lack of access to services and resources
- Loss of status
- Loss of identity
- Loss of job or career
- Cultural differences
- Discrimination and stigma connected to being a foreigner
- Isolating impact of government policies

These challenges are particularly heightened when there is no-one for a person to turn to, often having left friends, family or support networks in their country of origin. The Forum supports people to meet others and to build up these support networks through information relationships. The Forum also tackles loneliness by connecting people and keeping people active in the community, for example through community-based support networks, volunteering and educational activities.

Implications for practice: There are a number of recommendations presented in the report: better housing for migrants and refugees; better welfare support and cash benefits to travel around the city; the ability to undertake employment; and adequate advice and information.

In particular, improving access to language and further education would help migrants and refugees to build social relationships. Supporting people to learn the English language would reduce language barriers and help people to develop their social networks and integrate with others.

About the research: The research was carried out with people who participated in The Forum's New Beginnings Mentoring Project; mentors and mentees were both interviewed. Stakeholders with experience in integration, health and social issues were also interviewed, such as doctors and psychologists.

Research reference: Christodoulou, P. (year) 'This is how it feels to be lonely: A report on migrant and refugees' experiences with loneliness in London' (The Forum: London) http://migrantforum.org.uk/wp-content/uploads/2014/09/Loneliness-report_The-Forum_UPDATED.pdf

Churches help deprived communities to ‘flourish’

This case-study research looks at the impact of local Church of England (CoE) churches in deprived communities of England, with a greater focus on the nature of what the churches are doing, rather than the scale.

What the research found: CoE churches provide services to the wider community. The research found a key focus of their work was on building social relationships and designing community projects to respond to particular local needs. Material deprivation, the research found, created greater social isolation and so many programmes or initiatives worked to meet this need. Many churches were found to run shelters for homeless people or food-banks. These approaches were considered to be a useful way of engaging with people who may benefit from further involvement with other activities run by the church.

The churches aim to support communities to “flourish”. In particular, ‘neighbourliness’ – helping people to build relationships and have mutual support for each other – was a strong focus of their work. This included providing a space for people to interact with each other, such as activity groups and lunch clubs. This gave people somewhere to socialise, build social relationships, and particularly in older adults it is noted, to reduce loneliness or social isolation.

Implications for practice: The research noted the importance of the churches in bringing people in an ‘individualistic and lonely society’ together, therefore their importance in a community should not be negated. Churches offer a space for older adults to socialise and take part in activities, reducing loneliness and social isolation. In practice, the churches can help communities to become stronger and more resilient through providing practical, emotional and social support to local people.

About the research: Twelve case studies of Church of England congregations were created for the research. 158 interviews were conducted and 58 sessions observed over a 12 month period.

Research reference: Bickley, P. 2014. ‘Good Neighbours: How Churches Help Communities Flourish’ Available at: <http://www.cuf.org.uk/sites/default/files/PDFs/Research/Good%20Neighbours%20Report-CUF-Theos-2014.pdf>

Upcoming research

Social Activities in Retirement Housing: Their potential for reducing loneliness and improving the quality of life

About the research: Retirement housing, providing homes to almost 7% of older people in England, is an important site of interventions to address isolation and loneliness by bringing people together with neighbours. In 2013-14, Dr Anne Gray, of London South Bank University, and George Worlledge of Hanover

Housing Association conducted a postal survey and focus groups with tenants on 8 Hanover estates around London to investigate how organised social activities develop friendships and mutual support between neighbours. Further information on the range of activities and managers' role in supporting them was obtained from a survey of 326 Hanover managers of retirement housing.

The survey was followed by a literature search on loneliness amongst older people to inform the development of good practice in the organisation and facilitation of social activities in retirement housing.

Early results: The postal survey (n=120) asked who residents would most rely on times of difficulty, and who would shop or help with laundry if they were ill. People who did not have children or whose children did not live within 50 miles (41% of the total) were the most vulnerable and lacking in help, and more likely to depend on professional carers. People with non-family social networks developed through group social activities or voluntary work were less likely to depend on relatives, and more likely than others to obtain help in difficulties both from neighbours and from friends outside the estate. Concurring with data from the English Longitudinal Study of Ageing, the survey found that residents of retirement housing are especially likely to be widowed or in frail health. These characteristics have been demonstrated by other studies to be associated with loneliness in older age. This presents a challenge to housing providers: how can they compensate for this vulnerability and support their clients to have a rich and supportive social life?

A friendly, accepting and vibrant common room, with plenty of interesting activity, seems to be one important factor in helping people to develop friendships with their neighbours in retirement housing.

Other factors include the age mix of residents, the 'dependency' mix, the 'social capital' residents bring to the retirement housing environment from their previous lives, as well as building design. Residents in the 66-75 age range are the main leaders of both residents' committees and common room activities. Older, frailer residents are less active; younger ones still have social lives more outside the estate.

What kinds of activities can best help people in retirement housing avoid loneliness and are they in fact being provided? Academic evidence on loneliness and good practice examples points to certain social activities being more helpful than others in enabling people to develop supportive relationships. They attest the importance of a wide range of activities to suit different interests and provide mental stimulation. Cross-generational contact and integration of older people with the wider community is also important.

The typical 'menu' of social activities in retirement estates varies enormously, but is often somewhat narrow, focussed on tea, coffee, birthday or Christmas parties and bingo. Residents' groups often need support in organising a wider range of activities that can be more stimulating. Estate managers have an important role in bringing in younger volunteers, speakers, trainers and partnerships with other organisations as well as organising outings, all of which improve the activities 'menu'. They often go beyond their job descriptions in helping residents organise social events, especially where there is a residents' group

to encourage them. The challenge for housing providers is how to maintain this valuable role in the face of limited manager time and funding, and how to help residents form and sustain their own organising groups and do more for themselves. Growing recognition of how housing providers can improve health and wellbeing of their residents by facilitating a good social environment means that providers, especially RSLs, also need to plan and design services to tackle loneliness.

Publications (available and planned)

- Gray, A. (forthcoming) Social Capital and Neighbourhood in Older People's Housing in (eds) Forsman,A. and Nyqvist,F. *Social Capital and Health amongst Older People*, Springer, New York.
- Gray, Anne, 2014 Care in the community or care of the community ? Some reflections on the role of support services in retirement housing, *Housing, Care and Support* (June)
- A working paper to be placed on the University's website in March and an academic journal paper in preparation. Drafts are available from the authors on request and comments would be welcome

Upcoming events

Research Showcase: Loneliness, prevention and wellbeing

'Research Showcase: Loneliness, prevention and wellbeing' is a free, one-day conference to be held on Friday 17 April 2015 in London. This event – jointly hosted by the [NIHR School for Social Care Research \(SSCR\)](#) and the [Campaign to End Loneliness](#) – will explore the latest research into loneliness, isolation, wellbeing and prevention and discuss some of the gaps in our evidence base. Delegates will:

- Hear about research findings focusing on loneliness, , prevention and wellbeing across the life-course
- Improve understanding of wellbeing and loneliness, and take away ideas about how to make positive changes, for example to social care commissioning or service provision
- Network with colleagues working in similar areas
- Identify and discuss some of the gaps in the current research base on loneliness and isolation.

An agenda will be available shortly. However, we're pleased to say that some of the leading researchers in this field will be speaking, including:

- Professor Vanessa Burholt, Swansea University
- Professor Christina Victor, Brunel University
- Dr Aparna Shankar, UCL

The event will start at 10.30 and finish by 16.00, and will be held in central London. Space is limited, so book your free place today via [our Eventbrite page](#).

Evaluating loneliness and isolation services

Case Study: Newham Bereavement Service

About the service: The Newham Bereavement Service, a partnership between [St Joseph's Hospice](#) and [Newham Talking Therapies](#), offers befriending to bereaved individuals. The community-led service supports people to cope with the loss of family or friends. The service is delivered by volunteers and since 2012 has matched over 100 befriending 'pairs'.

What is going well? After the death of a family member or friend, befriending can be important at a time of reduced social networks and activities. Specifically, befrienders can play a vital role in combating loneliness in older adults. An evaluation of the service reviewed by Which? reviewed the experiences of both the volunteers and people using the Newham Bereavement Service. Befriending was found to have a positive impact on bereaved individuals over a period of time:

- Befriending built stronger communities by emphasising to clients that social bonds were still present, beyond the loved ones they had lost
- The informal setting of befriending (e.g. home, café or community centre) highlighted the social nature of the relationship. This also encouraged those who were socially isolated to engage more with others and the community
- The emotional support that was provided by befrienders had a therapeutic effect on bereaved individuals and had a positive impact on a person's ability to move on from their grief

Learning for others: Bereavement can have a negative impact on an individual, causing loneliness and social isolation. In turn, this impacts on everyday aspects of a person's life including mental and physical well-being. Befriending can have a positive impact on bereaved individuals by encouraging them to engage with others and recognise the social relationships and bonds that exist in their life. What is important about befriending is giving a bereaved person the chance to talk, share their experiences and be listened to in a non-judgemental way. The full report is available [here](#).

Case Study: Circles of Support for People with Dementia

About the service: Circles of Support for People with Dementia was a three-year pilot project and was one of the first of its kind in the UK to work to build a supportive network or 'circle' for a person with dementia. The aim is that this circle supports the person with dementia to identify new opportunities to enhance their life.

What is going well? The project was evaluated through interviews with people with dementia, family members, staff from partner organisations and project staff. The evaluation identified that the Circle of

Support was beneficial to not only the person with dementia, but also the family members, friends and professionals involved. Outcomes were achieved which benefited the person living with dementia:

- People with dementia were now engaging in more things that they wanted to do
- There was an increase in a person's social network, which also seemed to be stronger
- There was the opportunity for mutual and peer support from other people living with dementia.

Positive outcomes also reflected the needs of the main carer of a person with dementia. Carers felt more supported by the Circle of Support, which in turn positively impacted on their ability to care for the person with dementia. The evidence from the evaluation suggests that the principles of Circles of Support have the potential to be beneficial in supporting a person with dementia. It is a flexible and person-centred approach, which challenged stigma and promotes a positive way of living with dementia.

Learning for others: Although the Circle of Support model has a lot of potential, there are a number of recommendations presented by the evaluation. Developing a Circle of Support soon after a person has been diagnosed with dementia is likely to have the most positive and profound impact. Also, people with dementia often don't have the existing social connections to be able to develop a Circle of Support. Circles of Support should be developed and maintained before social connections begin to be lost.

Circles of Support should incorporate a wide range of services, people and opportunities, rather than considered an alternative to other forms of support. Such support options are lacking for people with dementia, yet Circles of Support shows the potential to have positive impact on a person with dementia's life. Additionally, there is a clear need for continuing to challenge stigma to help create communities that are more inclusive of people with dementia. The full report and other useful information are available [here](#).

Contribute to the Research Bulletin

If you would like to contribute to the next Research Bulletin please contact Anna Goodman (anna@campaigntoendloneliness.org.uk). We will consider any research into loneliness or isolation in older age, published or unpublished, including academic articles, new reports, local evaluations and case studies.

About the Campaign to End Loneliness

The Campaign to End Loneliness is a network of national, regional and local organisations and individuals that work through community action, sharing good practice, engaging in policy and research to combat loneliness in older age in the UK. The Campaign is led by 5 partners: Age UK Oxfordshire, Independent Age, Manchester City Council, Royal Voluntary Service and Sense. The Campaign to End Loneliness has over 1,800 supporters across the United Kingdom. To find out more about becoming a supporter and the work of the Campaign, visit: www.campaigntoendloneliness.org.uk