

Connected Communities, January 2019

Tenovus Cancer Care is Wales' leading cancer charity. Our aims are simple. We want to help prevent, treat and find a cure for cancer.

We do this by offering support, advice and treatment to cancer patients and their loved ones. We also promote healthy lifestyles and fund cancer research to find new ways to prevent it, diagnose it, and treat it.

We welcome the opportunity to respond to this important consultation.

Q1: Do you agree with our definitions of loneliness and social isolation? If not, what would you propose instead?

Loneliness:	[is] a subjective, unwelcome feeling of a lack or loss of connections, which happens when we have a mismatch between the quality of social relationships that we have, and those that we would like to have.
Comments:	Agree

Social isolation:	[refers] to the quantity of the social relationships a person has at individual, group, community and societal levels.
Comments:	<p>Social isolation is not just about the quantity; the quality of relationships also has to be considered. For example, if an individual has one source of high-quality social interaction then the lack of other sources becomes less relevant.</p> <p>Some people who are a member of choir will not consider they are socially isolated despite only being part of one social group for example.</p>

Q2: How can we help people to understand the trigger points for loneliness and social isolation and to build emotional and psychological resilience to enable them to take steps to avoid or reduce these feelings?

Among the greatest barriers to integration that prompts loneliness and social isolation is an individual's perceived inability to share experiences of loneliness and their 'shame' about experiencing loneliness in the first place. Empowering people and providing a space wherein they can talk openly about their feelings is essential in overcoming this barrier.

Equally, a basic understanding of the triggers of negative human thought processes, particularly those that lead to cynical and pessimistic cycles could play a key role in helping individuals identify coping mechanisms to mitigate routes that might otherwise lead a self-fulfilling prophecy of social isolation.

Q3: How can the Welsh Government foster the right environment and create the right conditions to build resilient communities?

Providing, or supporting, spaces in which people can congregate together is one way of fostering positive social interactions that lead to resilient communities. Tenovus Cancer Care believes that consideration of how this could be achieved should form a guiding principal in governmental strategies, including funding streams provided through Welsh Government programmes.

Q4: How can children and young people be better equipped with the skills to establish and maintain meaningful social connections?

Encouraging and providing environments wherein children and young people are able to participate in talking and group therapies would enable them to grow up in a world that is more amenable to open communication and the meaningful social connections that follow. This could include exploring alternative methods of teaching so students can fully express themselves, including an adequately funded arts curriculum.

Q5: How do we ensure that schools can better support children and young people who may be lonely and socially isolated?

In addition to the above points regarding participation in talking and group therapies, ensuring a robust provision of child and adolescent mental health services (CAMHS) is essential to ensure the referral pathway is such as to allow students to fully express themselves without judgement.

Q6: What more can the housing sector do to reduce loneliness and social isolation? How can the Welsh Government support this?

Please see our responses to Q8, Q11 and Q13.

Q7: What more can the Welsh Government do to support the improvement of transport services across Wales?

Reducing transport-linked multiple deprivation by supporting a comprehensive provision of public transport is essential in reducing social isolation. In particular more robust guidance regarding universal service provision along less profitable routes, especially in rural areas would be welcomed.

Q8: How can we try to ensure that people have access to digital technology and the ability to use it safely?

A new indicator related to access to broadband services is proposed in the 2019 Welsh Index of Multiple Deprivation. While this is welcome Tenovus Cancer Care suggest that where broadband may be available in an area it may not be taken up on the margins of deprivation as a result of the commitment, contractual and architectural needed to access broadband services. Therefore *uptake* of broadband services might be a better measure of deprivation, or lack thereof, since it more accurately reflects the financial ability to access services. It would also highlight secondary issues related to agency such as tenant vs owner-occupier status, with the former being more vulnerable to not being able to access broadband if structural changes are required to the property in the course of its installation.

Equally there is an argument that lack of *uptake* of mobile data services may be a greater risk to deprivation than lack of access to broadband services. Due to the lower costs of entry and access (both physical and financial) to mobile services they could be considered more sensitive to changes in deprivation levels and therefore a better indicator overall. Therefore focussing on these areas of deprivation will be key in ensuring that people have access to, and are able to use, digital technology.

Nevertheless Tenovus Cancer Care recognises that debate continues regarding the balance of benefits of access to digital technologies on social isolation, particularly those in relation to social media. The precise relationship between opening doors to engagement to those who are currently isolated, and compounding deficits in social interaction, particularly meaningful social interaction, is complex. Therefore access to digital technologies is not *sine qua non* to combatting social isolation.

Q9: What experience do you have of the impact of social services on addressing loneliness and isolation?

Tenovus Cancer Care operates two key programmes that seek to address loneliness and social isolation.

ACTivate Your Life – Affected by Cancer seeks to tackle loneliness and aid the emotional recovery from cancer by teaching participants about how their mind works, how their reactions may make life more difficult and how to face emotional trauma.

Our *Sing with Us* choirs are fun, uplifting and friendly, and provide a safe space for anyone affected by cancer. This can be whether they're a patient, survivor, carer or someone who has been bereaved through cancer. It allows them to discuss the impacts of cancer upon them, emotionally or physically.

Q10: What more can the social care sector do to tackle loneliness and isolation?

Please see our response to Q8.

Q11: What more can we do to encourage people who are at risk of becoming lonely and isolated to get involved in local groups that promote physical activity?

Increased promotion and awareness of relevant local groups is essential in encouraging participation among at-risk groups. It is important that this awareness and promotion is not wholly reliant upon access to the internet. In addition to reasons alluded to above regarding access to digital technologies, the digital revolution within the health and care services risks excluding the most vulnerable.¹ Central databases of groups would be helpful, as would promotion of such groups via networks of community notice boards, for example.

Q12: In what other ways can health services play their part in reducing loneliness and social isolation?

Social prescription certainly has an important role to play in the future of the NHS in combatting certain ailments. Not only does social prescription have significant potential in the prevention of certain conditions but it also has the potential to deal with health issues in the primary sector, rather than allowing them to escalate to the secondary care sector. A directory of such services could help empower staff and patients alike to be forceful in exploring these options.

Q13: What more can the Welsh Government do to encourage people to volunteer?

Volunteering is widely recognised as having significant social benefits not only just for the Third sector but also for those able to participate in it. However, it must also be recognised that, regrettably, volunteering is a luxury activity for many and a necessity for some. In order for volunteering, and the social benefits that result from participation in it, to become more widely participated in a greater focus needs to be placed upon deprivation. This would allow for a greater proportion of people toward the centre of the economic bell-curve to engage in a more meaningful fashion in volunteering. While Tenovus Cancer Care recognises that not all policy levers are available to the Welsh Government there is nevertheless scope for interventions such as a more universal provision of subsidised child care and public transport (see Q7), access to flexible working arrangements and even the provision of a universal basic income as tools that may better foster such an environment.

Q14: How can the Third sector play a stronger role in helping to tackle loneliness and social isolation? What can the Welsh Government and other public bodies do to support this?

Please refer to responses above – in particular those related to Q8, Q11, Q12 and Q13.

Q15: How can employers and businesses play their part in reducing loneliness and social isolation?

Please see our response to Q13.

¹ *Digital Inclusion in Health and Care in Wales*. Wales Cooperative Centre, 2018.
Available at: <https://wales.coop/digital-inclusion-report-2018/>

Q16: What more can the Welsh Government do to support those who experience poverty alongside loneliness and social isolation?

Please see our response to Q13.

Q17: What more can we do to build community resilience and support communities to combat loneliness and social isolation?

Please see our response to Q3.

Q18: Do you agree with our proposed approach? If not, what would you otherwise suggest?

Tenovus Cancer Care agrees with the general themes, supplemented by our responses within this document.

Q19: Are you aware of examples of successful interventions within Wales, or beyond, that you think we should be looking at?

In addition to the Tenovus Cancer Care *Sing with Us* and ACTivate Your Life – Affected by Cancer courses (see Q9), Men’s Shed Cymru² and Campaign to End Loneliness³ are both positive interventions that merit further investigation.

Q20: Are there other ways in which we can measure loneliness and social isolation?

Our response to the consultation on proposed changes to the 2019 Welsh Index of Multiple Deprivation contains a number of comments that relate to loneliness and social isolation – particularly around access to transport, and broadband services. It [is available to view here](#).

Q21: We would like to know your views on the effects that our proposed approach to tackling loneliness and social isolation would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English. What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?

We would expect the approach to be consistent with the Welsh Language (Wales) Measure 2011.

Q22: Please also explain how you believe the proposed approach could be formulated or changed so as to have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language, and no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.

Not applicable.

23: We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:

Not applicable.

² <https://www.mensshedsymru.co.uk/>

³ <https://www.campaigntoendloneliness.org/>