

EQUALITY IMPACT ASSESSMENT AND ANALYSIS

Precious Time – a Strategy for Reducing Loneliness and Isolation in South Gloucestershire

INTRODUCTION

The Precious Time Strategy defines social isolation and loneliness, sets out what is known about the issue in South Gloucestershire, recommends an approach to reducing social isolation and loneliness, and highlights the key actions to deliver positive change. The approach is based on the involvement of a wide range of agencies. The strategy focuses predominantly, but not exclusively, on the issues of loneliness and isolation for older people, but does encompass issues for other groups of people.

The ambition for the strategy is that no one in South Gloucestershire should experience isolation, loneliness or lack of social relationships against their wishes. There are a number of principles to guide the delivery of the strategy, with a strong emphasis on involving and developing the assets of local communities:

- loneliness and isolation are not the sole responsibility of one organisation – tackling the issue needs all organisations, sectors, residents and communities to work together and in partnership.
- loneliness due to lack of social contact is not an inevitable part of growing older; we can work together to reduce loneliness among older people.
- we will involve older people and others including those who are experiencing or are at risk of loneliness in mapping local community assets and looking at the solutions to the issue of loneliness.
- we will develop an action plan to focus our joint efforts and map our progress.
- we will look to deliver services and activities in new and innovative ways, developing the strengths and assets in local communities, and the contribution of volunteers. We will promote the following guidelines when developing our responses to social isolation and loneliness:
 - responses should be based on people both giving and receiving support, acknowledging the contribution that all people can make;
 - responses should aim to generate real friendships and connections in communities;
 - responses should be based around normal and mainstream activities that help to reduce stigma;
 - we should acknowledge the importance of focusing on productive activities;
 - we recognise the strength of local people in designing solutions to the issue;
 - responses are affordable and where possible self-sustaining.

Work towards the aims of the strategy has been ongoing since 2012; Community Capacity Building Workshops provided by the Local Government Association and representatives from Think Local Act Personal highlighted isolation and loneliness as a key issue that lends itself to a community development approach; and organisations funded by the Adults Department of the Council to tackle the issue have been working together since 2012 to share resources and develop an overarching approach to identifying and working with individuals. Other activities are funded by the Clinical Commissioning Group and the Health Department in the Council.

The strategy is due to be taken to the Health and Wellbeing Board for endorsement in November 2013.

RESEARCH AND CONSULTATION CONDUCTED

The strategy draws on both national and local research that throws light on the issue from different perspectives. Full references are given in the references section at the end of the strategy. A considerable part of the action plan focuses on working with local communities to understand the issue locally and plan responses, as well as understanding approaches that are working well to reduce loneliness and isolation. Research has highlighted the main risk factors relating to social isolation and loneliness.

This Equality Impact Assessment and Analysis has considered the requirements of The Equality Act 2010, including the Public Sector Equality Duty, and has conducted an analysis of the policy. The results of the assessment and analysis can be found below.

IDENTIFICATION AND ANALYSIS OF EQUALITIES ISSUES AND IMPACTS

Group	Potential impacts	Actions Moving Forwards
Age (older people)	Older people are disproportionately affected by loneliness and isolation for a number of reasons. Many of the risk factors for loneliness impact more on older people, including: empty nest, retirement, bereavement, onset of illness or disability, and onset of dementia particularly. The loneliness of people living in care homes is an identified issue. The risk of being lonely increases for people aged over 80. As the population ages, even more individuals are likely to be lonely. Living alone is another risk factor, and over half (51%) of all people aged 75 or over live alone.	Work to date from the Precious Time Strategy has focused predominantly on older people. Promoting the positive impacts of volunteering, particularly for older people, is an important part of the strategy, and is seen as a tool in itself for reducing loneliness amongst older people. More work is needed to understand the areas that have higher levels of older people affected by loneliness and isolation and to work with the local community to address the issue; the Town and Parish Councils and Over 50s Forum will play a key part in this work.
Age (younger people)	Local research by Southern Brooks Community Partnership has highlighted several at risk groups: young mothers, victims of hate crime, ex prisoners. Homeless people are also a risk group. Also young people not in education or work are another at risk group, along with young carers providing support to a parent or disabled sibling.	These areas will be explored in the knowledge and mapping workstream of the strategy, so that an understanding develops of how loneliness impacts on these groups. Links to other strategy groups will also be established, to share learning and different approaches, and ensure work is joined up and co-ordinated.
Disability	Onset of disability is a key risk factor for loneliness. Local research by Southern Brooks Community Partnership has identified disabled people and people with mental health issues, including dementia, at risk of loneliness.	Southern Brooks Community Partnership are working towards making Patchway dementia friendly, and learning in relation to what makes a friendly community, and how to include people with dementia more in their communities will be taken forward through the project. The Disability Equality Network for South Gloucestershire are invited to take part in the knowledge and mapping workstream, to gain a better understanding of issues for disabled people in relation to loneliness and isolation. The DEN will also be invited to take part in the Environment Workstream, to understand better the practical issues facing disabled people.
Race	Local research by Southern Brooks Community Partnership has identified that people from black and	Greater research is required at a local level to understand the picture in South Gloucestershire. This work will be

	<p>minority ethnic groups, including travellers, are at a higher risk of loneliness. Older people from minority ethnic groups are generally at a higher risk of isolation than the white British population. National research has shown marked variations between ethnic groups, for example 7% of older Indian people say they are lonely, compared to 24% of older Chinese people. Not speaking English can also increase the risk of feeling lonely and isolated.</p>	<p>undertaken through the knowledge and mapping group, and will call on the knowledge from key organisations and staff to understand this picture.</p>
Sex	<p>Older men are generally more likely to feel isolated than women, however there are more women living alone in older age than men.</p>	<p>An initial monitoring framework is in place to identify and measure outcomes for people using Precious Time services, either as users of a service or as volunteers. This has the potential to identify if different interventions have different outcomes according to gender. Research has shown that men generally prefer activities that are focussed on doing or producing something, and this learning will be built in when developing services so as to encourage men to be involved.</p>
Sexual Orientation	<p>Gay men and lesbians are at a greater risk of becoming lonely and isolated as they age, since they are more likely to live alone and have less contact with family. Younger gay, lesbian and transgender people may also feel isolated and excluded from their peers.</p>	<p>This area will be explored further in the Knowledge and Mapping Workstream.</p>
Religion/Belief	<p>Religion or belief is seen as a protective factor against loneliness and isolation, as involvement in faith groups is likely to widen social contacts and offer the potential for involvement in the local community.</p>	<p>Faith communities have an important role to play in reducing isolation and loneliness, and in continuing to support members who become disabled to take part in their faith community. Faith groups will play an important part in understanding loneliness and isolation in specific communities.</p>
Gender Reassignment	<p>There is currently little research available in this area.</p>	<p>This area will be explored further in the Knowledge and Mapping Workstream.</p>
Pregnancy and Maternity	<p>The Strategy identified young mums as being potentially more likely to feel isolated.</p>	<p>This area will be explored further in the Knowledge and Mapping Workstream.</p>
Marriage and Civil Partnership	<p>The strategy identifies that loneliness and isolation can become an issue when people go through periods of change around major life events and transitions; this includes bereavement or the ending of a relationship. Whilst not solely an issue centred around 'marriage and/or</p>	<p>This area will be explored further in the Knowledge and Mapping Workstream.</p>

	civil partnership', this EqIAA raises this issue.	
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ACTIONS TO BE TAKEN AS A RESULT OF THIS EqIAA

- The actions above are built into or will be built into the Strategy Workstreams.
- Particular focus is required to ensure an asset based approach is used when working with local communities, so that the voices of people affected by loneliness and isolation are heard, and local solutions are sought. Work has already begun on developing this approach in the Developing Support in Communities workstream.
- As new strategy groups develop, for example the Mental Health and Wellbeing Strategy (which is included in the Making the Best Start in Life and Making the Healthy Choice the Easy Choice sections of the Health and Wellbeing Strategy), it will be vital for there to be linkages between the two strategies, to make the best use of resources, share knowledge and ensure equalities impacts are assessed as new services are commissioned or developed.

Denise Swain
Strategy and Partnerships Manager
Children, Adults and Health Department