healthwatch
Gloucestershire
local health and social care shaped by you

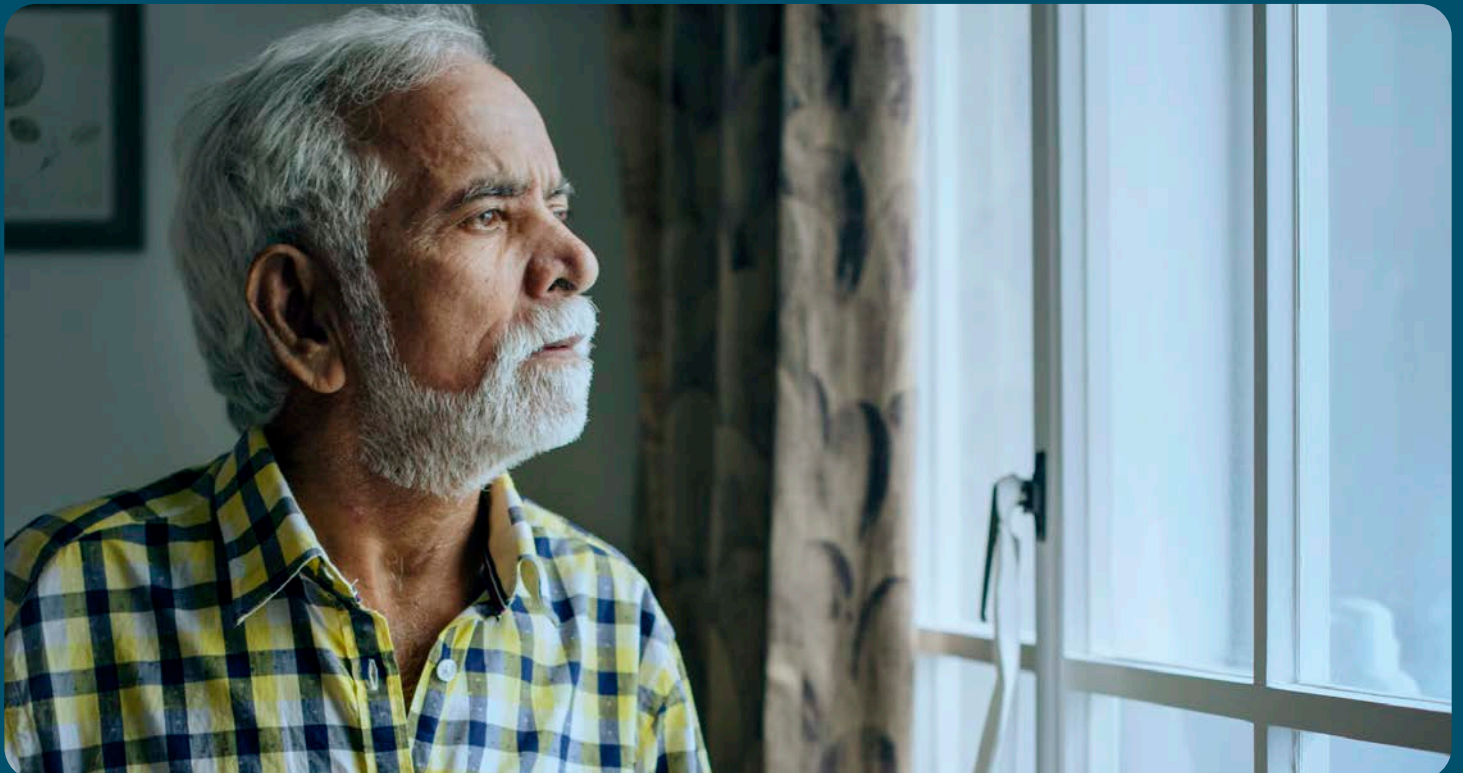# Let's talk about social isolation and loneliness in Gloucestershire.

What does it mean to you?
What makes a difference?
What more could be done to help?

Full report: September 2021

Contents

1. About us

Healthwatch Gloucestershire is the county's health and social care champion. We listen to your experiences of using local health and care services and hear about the issues that matter to you. We are independent and impartial, and your feedback is confidential. We can also help you find reliable and trustworthy information and advice to help you get the care and support you need.

As an independent statutory body, we have the power to make sure NHS leaders and other decision makers listen to your feedback and use it to improve standards of care. This report is an example of how your views are shared.

Healthwatch Gloucestershire is part of a network of over 150 local Healthwatch across the country. We cover the geographical area of Gloucestershire County Council, which includes the districts and boroughs of Cheltenham, Cotswold, Forest of Dean, Gloucester, Stroud and Tewkesbury.

2. Background

Gloucestershire's Health and Wellbeing Board have identified social isolation as an area that needs attention, so we sought to understand what social isolation and loneliness means for people living in Gloucestershire.

Previous Healthwatch Gloucestershire research[1] found that 68% of respondents living with a long-term health condition said they had felt more isolated/lonely during the Covid-19 pandemic.

This report presents the findings from our deeper dive into social isolation and loneliness.

Our aims

- To draw clear distinctions between loneliness and social isolation.
- To identify and understand people's experience of isolation and loneliness in Gloucestershire.
- To identify existing services and activities locally.
- To present current examples of best practice that could be effective in helping to tackle social isolation and loneliness in Gloucestershire.

---

[1] *Living with a long-term health condition in Covid-19: What local people told us* (Dec 2020)

3. What we did

Public engagement campaign, 22 March – 21 April 2021

We conducted a short online survey (see **Appendix A**), launched a direct telephone number for respondents to contact our researcher, and invited participants to send a creative response to the themes of social isolation and loneliness. Individuals sending a creative response were also entered into a £100 voucher-prize competition. We also held a creative workshop/focus group with members of the Gloucestershire Carers Hub.

The public engagement campaign was promoted on our website, and through targeted social media posts on Facebook, Instagram and Twitter. An additional targeted Facebook campaign was conducted by Gloucestershire Live Partners (10 April – 16 April). Our campaign was also promoted in our E-Bulletin, through local organisations and the media.

The research and information presented in this report was collated by a consultant Graduate Researcher. Our researcher analysed findings over a two-month period (1 March – 30 April).

Sharing knowledge and good practice

Our researcher talked to organisations from across the country who work in the voluntary and community services sector, and in the wider integrated care system. This provided valuable insight about the different types of work taking place around the country to help tackle social isolation and loneliness.

4. Who we spoke to

Public engagement

- Our survey was completed by 46 people.
- Our focus group with the Gloucestershire Carers Hub was attended by four people.
- Two people sent us a creative response.
- Our public engagement campaign was shared with 17 organisations.
- Five organisations were sent information to promote our creative call-out (it was posted in the Arts Admin E-Bulletin and on the Create Gloucestershire website).
- 13 organisations were invited to a creative workshop/focus group.

Research engagement – organisations and businesses

- We contacted 53 organisations working in the voluntary and community services sector and the wider integrated care system; 19 responses were received.

Co-design feedback – our survey

- 11 organisations were contacted, and two responses were received.

5. Social isolation and loneliness

While often used interchangeably, social isolation and loneliness have different definitions. Someone who is socially isolated has few or no social contacts and this may be through choice or through circumstance. Loneliness describes the gap between the social contact someone wants, and the social contact they actually experience. While not everyone who is isolated is lonely, it is common for someone who is socially isolated to experience loneliness.

Loneliness can affect anyone and can be triggered by common events in a person's life, for example, moving to a new area, bereavement, starting university or a new job. Other risk factors include discrimination, bullying and poor health. The Campaign to End Loneliness identifies different types of loneliness, for example, emotional or existential loneliness.

Example: Someone with social anxiety (social phobia) may struggle to engage in certain activities that involve other people, acting as a barrier to forming a meaningful relationship.

Often, loneliness is regarded as being a mental health problem. Mind, the mental health charity, does not consider loneliness as a mental health condition, however, having a mental health condition can increase your chances of experiencing loneliness. Loneliness can have a significant impact on your long-term mental health and increases your risk of certain conditions including depression, anxiety and sleep problems.

Health risks of social isolation and loneliness

Loneliness – as dangerous as smoking?

Widespread research highlights the detrimental effect of loneliness on our health, even suggesting that loneliness increases our risk of death by 26%. Other health risks of social isolation and loneliness include an increase in blood pressure, the risk of stroke and developing coronary heart disease. Living alone and having poor social connections is also widely acknowledged as being as damaging as smoking 15 cigarettes a day.[2]

Identifying most at-risk groups

A recent study from the Mental Health Foundation[3], as reported in Gloucestershire Live (2021), highlights the greater risks of loneliness to young people. The survey findings suggest that full-time students, those who are unemployed and young adults were the most seriously affected and more commonly experience hopelessness, loneliness and suicidal feelings.

This of course, does not erase the wealth of research highlighting the impact of loneliness on older people, rather it suggests that loneliness has become a problem across our wider society.

There is less information and research on loneliness in people with black and minority ethnic backgrounds, however the British Red Cross *Barriers to Belonging* report[4] explores the obstacles faced by people in accessing help. They report that 67% of respondents who felt that they didn't belong in their community were always or often lonely, and highlight the impact of xenophobia, racism and discrimination as overlooked triggers of loneliness. Similarly for LGBTQ+-identifying people, there is less widespread research despite the community having a higher susceptibility to mental health issues and discrimination.

---

[2] https://www.campaigntoendloneliness.org/the-facts-on-loneliness/

[3] https://www.mentalhealth.org.uk/news/pandemic-one-year-landmark-mental-health-study-reveals-mixed-picture (March 2021)

[4] https://www.redcross.org.uk/about-us/what-we-do/we-speak-up-for-change/barriers-to-belonging

The financial costs of loneliness?

A study by the Eden Project 'The Big Lunch' initiative found that disconnected communities could cost the UK economy £32 billion each year.[5]

THE VALUE OF CONNECTED COMMUNITIES

£32 BILLION — COST OF DISCONNECTED UK COMMUNITIES

£15 BILLION Worth of RESOURCES and HELP shared by neighbours today. That's £726 per person each year

£2.7BILLION Saved by health services because of initiatives like The Big Lunch and Community Camps. This could be £7.9BILLION if more people took part

12% BOOST in productivity when people are happier. That's an extra hour of work done each day

And a BOOST of £18 BILLION for the UK economy if everyone got involved in COMMUNITY ACTIVITIES

8/10 KEEP IN TOUCH people involved in community activities with people they meet

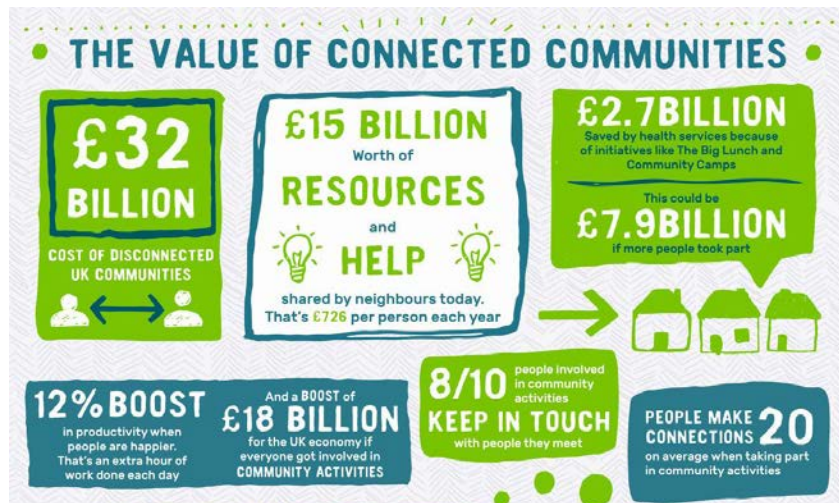PEOPLE MAKE CONNECTIONS 20 on average when taking part in community activities

image: www.edenprojectcommunities.com

NHS Long-Term Plan and what this means for social isolation/loneliness

Integrated Care Systems

By April 2022, all parts of England will be served by an Integrated Care System (ICS) as outlined in the NHS Long Term Plan, joining the NHS with local councils and partners. The plan is designed to remove divisions between physical and mental healthcare and between hospitals, family doctors and council services, after identifying that the separation results in disjointed care.

These partnerships have been forming since 2018 with the inclusion of strategic partners such as the voluntary, community and social enterprise sector. More services have been developed to keep people healthy, reduce hospitalisation and work under shared priorities for the future. Where most people are expected to access the services they need in their local town or district, partnership also forms an important factor in integration.

image: www.england.nhs.uk

Easy referral from all local agencies

Collaborative commissioning and partnership working

Workforce development

Social Prescribing Link Worker Employed to give time. Part of primary care and local social prescribing connector scheme

Support for community groups

Common outcomes framework

What matters to me Create a personalised plan

Social prescribing

Social prescribing[6] is one of the biggest initiatives in the Long-Term Plan for tackling loneliness and it is a key component in universal personalised care. Social prescribing staff, or link workers, provide a one-to-one service, focusing on the patients values and take a holistic approach to their wellbeing. Patients are then connected to statutory services and community groups for their recommended support, and they also receive guidance to form new groups. While social prescribing is part of the loneliness and isolation solution, it also works for people with one or more long-term conditions, people with complex social needs and those who need support with their mental health.

---

[5] https://www.edenprojectcommunities.com/the-cost-of-disconnected-communities
[6] https://www.england.nhs.uk/personalisedcare/social-prescribing/

6. What people told us

Key messages

- Most people told us that they were lonely almost all of the time, frequently or sometimes.

- We identified the Covid-19 pandemic, being single, widowed or divorced, and/or having a long-term health condition, as key factors of loneliness.

- Most respondents said there aren't any opportunities to meet new people in their local area, however, many identified that there are already groups that offer the chance to connect with others. Some people highlighted issues in attending these groups including accessibility, poor transport, and a lack of groups outside of working hours.

- Some respondents identified problems with their housing providers and inadequate financial support as causes of isolation and/or loneliness.

- Many people told us they were dissatisfied with their current relationships, and some told us they have no friends in Gloucestershire (yet have friends elsewhere).

- Many people expressed that they would find it difficult to ask for help, with some identifying the cause as feeling uncomfortable or embarrassed.

Survey

46 people completed our online survey. Key findings about are set out below. For a full breakdown of the demographic survey responses (questions 10-18), see **Appendix B**.

Demographics

60% of survey respondents were aged 55+ and over (28 people), 78% identified as female (36 people) and 89% were White British (41 people). Geographically, respondents came from a variety of postcode areas within Gloucestershire.

Survey responses

The charts in this report present an analysis of responses to our key questions. We wanted to know if people were lonely, how many of these people had satisfying relationships and support networks, and whether they were aware of opportunities to meet new people in their local area. We also wanted to know how many of our respondents lived alone, and if they receive support to remain independent in their homes.

Our video[7] highlights some of the 'Tell us more' responses that we received.

---

[7] https://vimeo.com/542758873

Figure 1: How often do you feel lonely? [8]
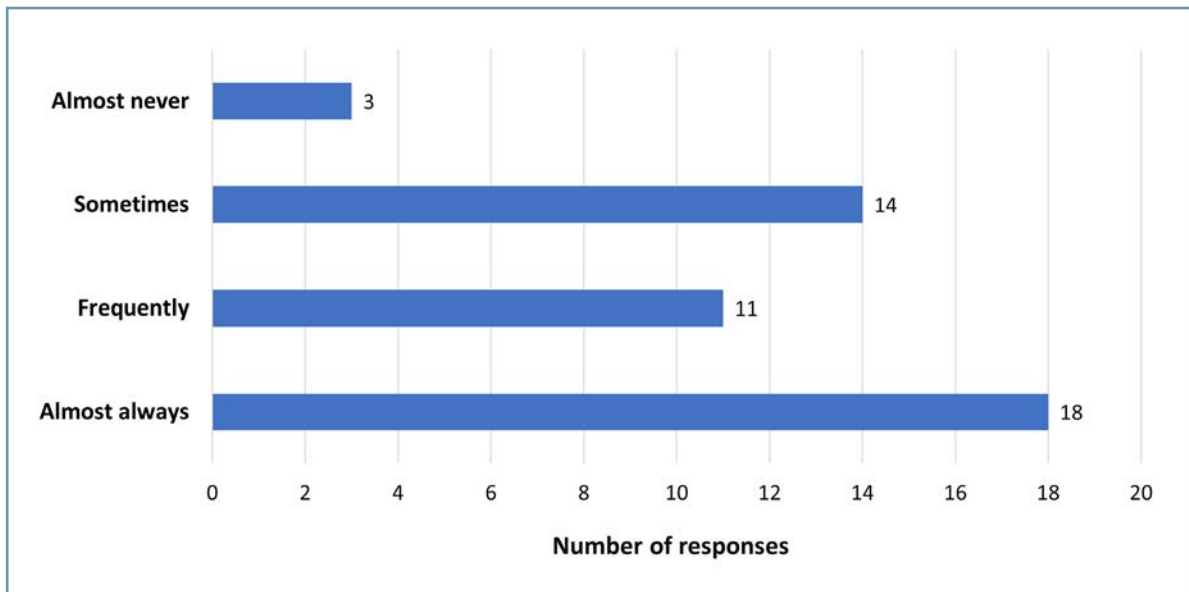
Most people told us that they were lonely almost all of the time, frequently or sometimes.

We identified the Covid-19 pandemic, being single, widowed or divorced and/or having a long-term health condition as key factors of loneliness.

Tell us more... [9]

"I am 64 and live alone after a divorce that left me with depression and anxiety, which stops me working... I can go several days without speaking to anyone." | "I don't find life as a widow very easy." | "Only since having long-term health issues, shielding for a year and moving house in-between shielding." | "I recently split up from my boyfriend which meant I lost my support bubble of him and his Dad." | "The pandemic has undoubtedly fractured society as well as paradoxically drawn those who were close, closer."

---
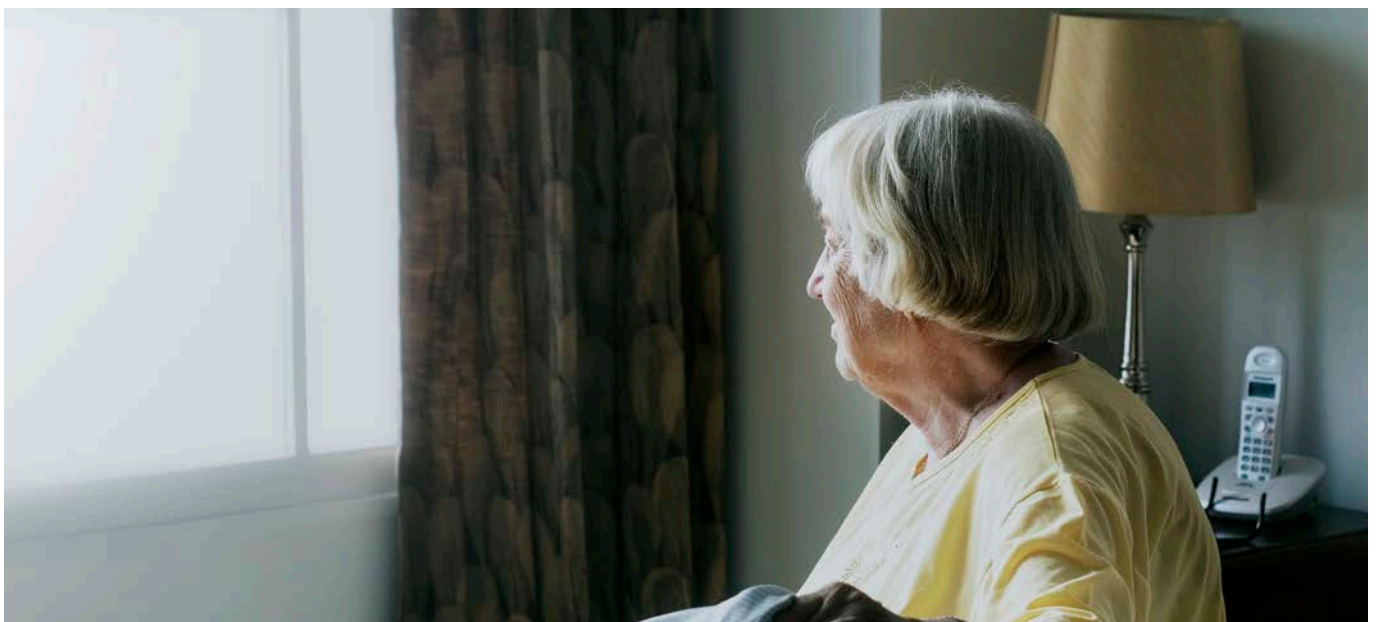
[8] These charts are an analysis of the data received in our survey.

[9] These quotes are 'Tell us more' responses from our survey.

Figure 2: I am content with my friendships and relationships
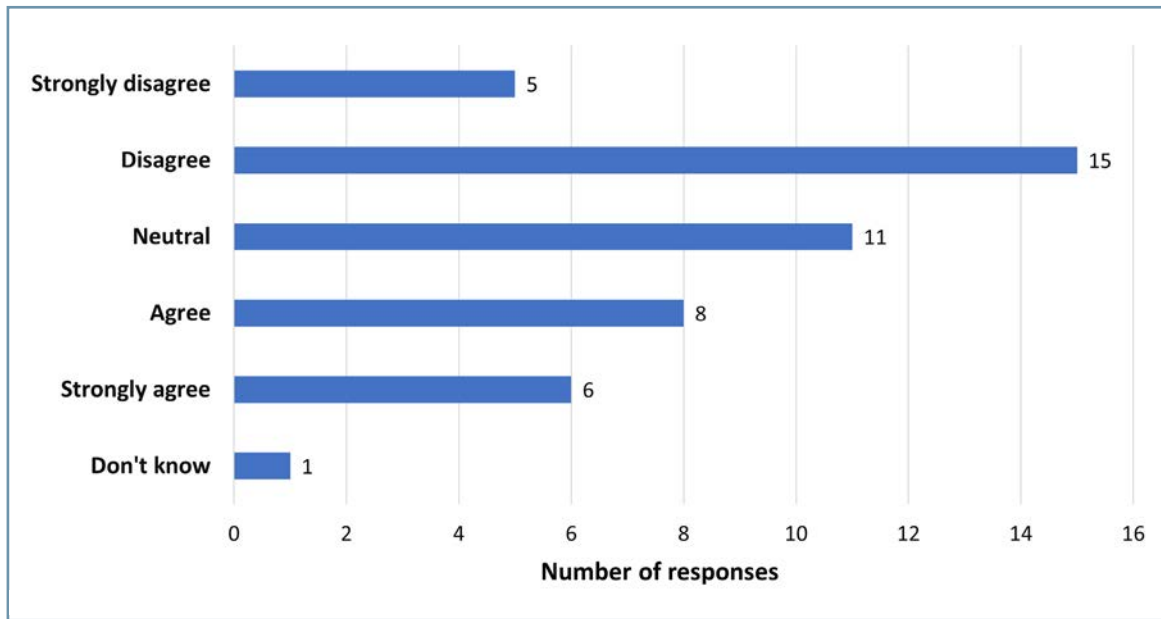
When asked how content they were with their current relationships, many people told us they were dissatisfied, and some told us they have no friends in Gloucestershire (yet have friends elsewhere).

> **Tell us more...**
>
> "I have no friends or family in Gloucestershire." | "I have no one. At least that is what I believe. I don't have any mates my age really close to me." | "I feel that it would be nice to make some new friends, but I find this county very unfriendly so I feel that it would never happen here."

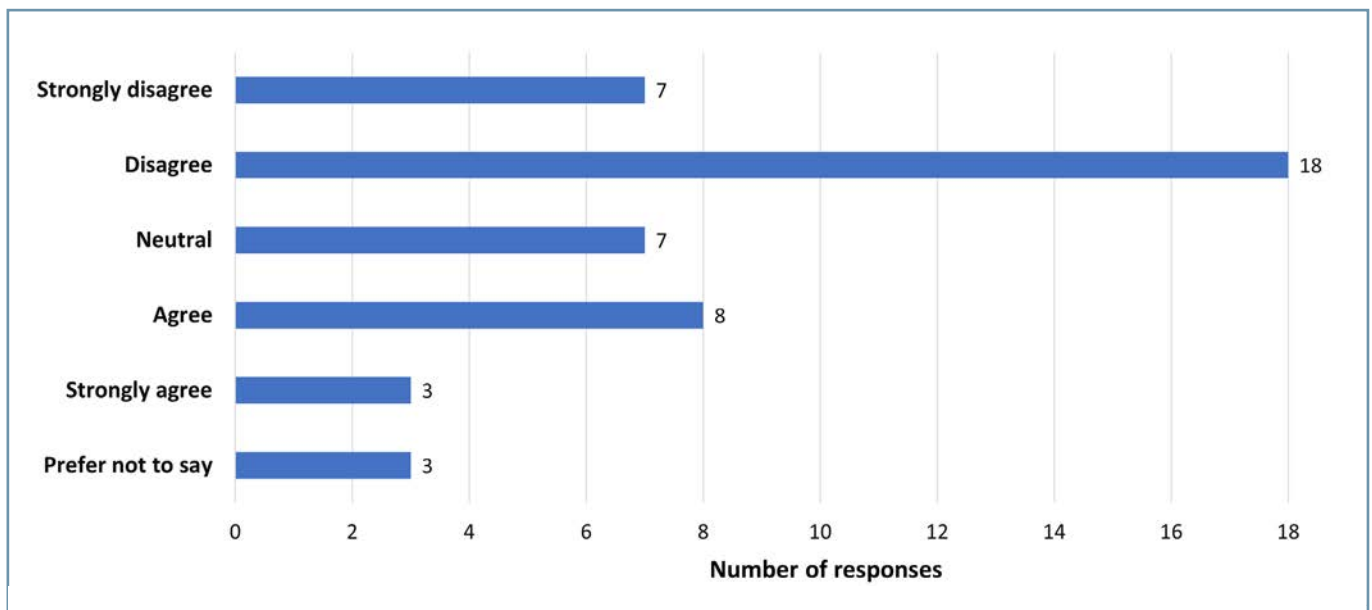**Figure 3: My relationships are as satisfying as I would want them to be**
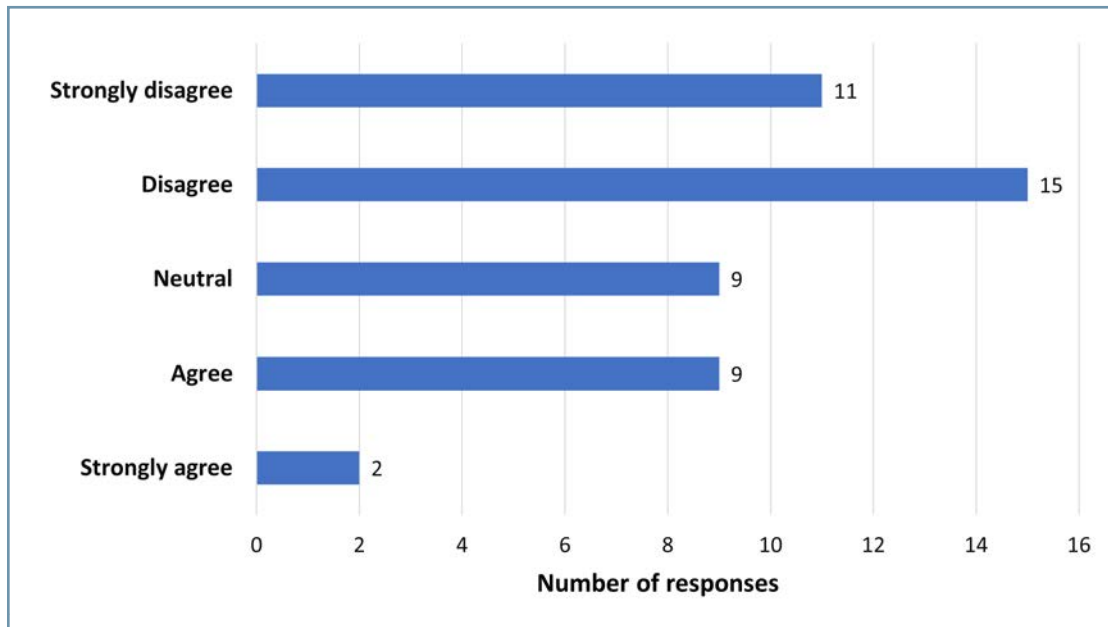
Figure 4: I have enough people I feel comfortable asking for help any time

Horizontal bar chart showing number of responses:
- Strongly disagree: 11
- Disagree: 15
- Neutral: 9
- Agree: 9
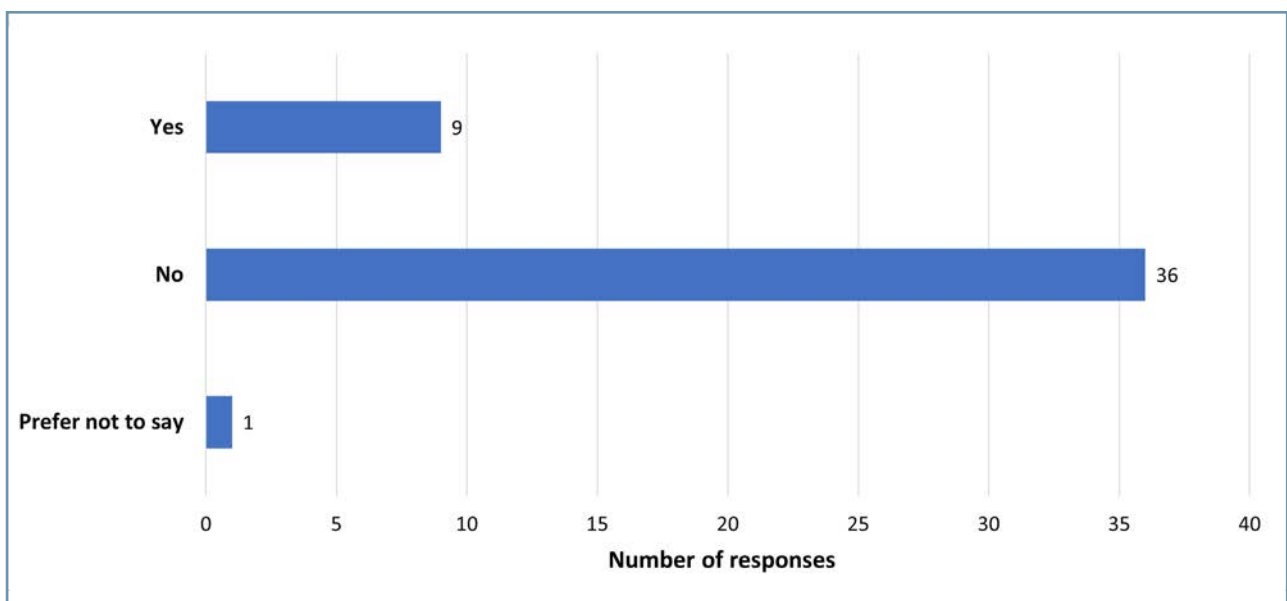- Strongly agree: 2

X-axis: Number of responses (0 to 16)

Many people expressed that they would find it difficult to ask for help, with some identifying feeling uncomfortable or embarrassed.

Tell us more...

"I would feel a burden to keep asking." | "I find it embarrassing to talk about." | "I don't like asking people if I'm not close to them." | "It's hard asking, and I don't want to share my grief with them. They have their lives, and I don't have a life." | "I know many people who would be willing to help, but I wouldn't feel comfortable asking."

Figure 5: Do you have opportunities to meet new people in your area?

Horizontal bar chart showing number of responses:
- Yes: 9
- No: 36
- Prefer not to say: 1

X-axis: Number of responses (0 to 40)

Most respondents said there aren't any opportunities to meet new people in their local area, however, many identified there are already groups that offer the chance to connect with others. Some highlighted issues in attending these groups including accessibility, poor transport and a lack of groups outside of working hours.

Tell us more...

"I do, but I don't drive." | "I live a distance from the local town. There is nowhere for me to go. I have to work to support myself and most friendship clubs are during the day when I am at work." | "I'm busy at work during the week." | "There is no option for help or to meet new people, especially with the social impact autism has on meeting new people." | "Lack of services, lack of transport." | "There is nothing in my area apart from retired people's groups." | "In theory, yes, but activities and events I'd like to attend are often held in places I can't access independently."

**Figure 6: How many people including yourself live in your household?**
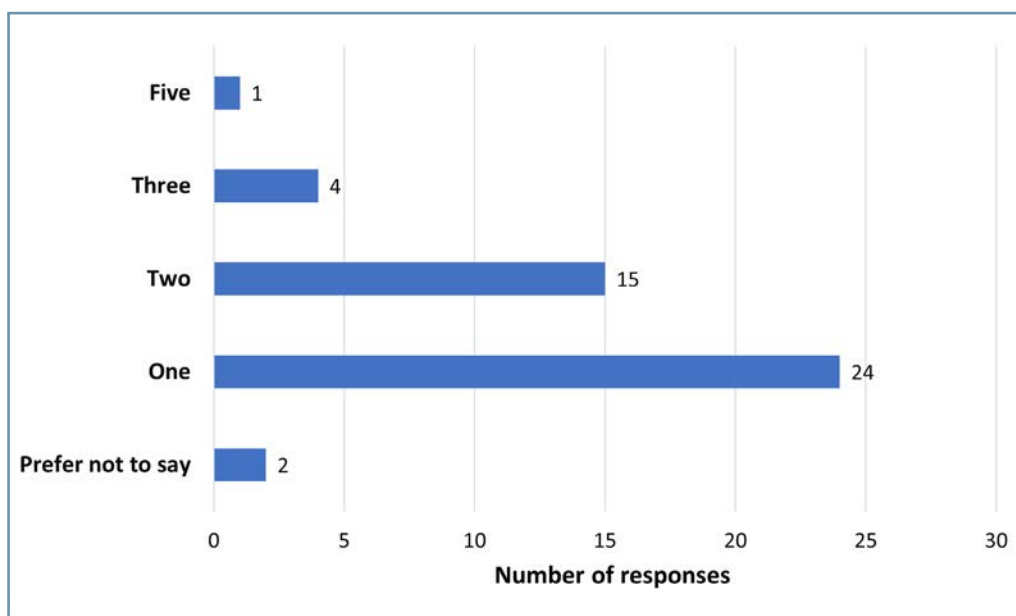
Most respondents live by themselves. We received a few 'Tell us more' responses highlighting this as a key factor of their isolation.

Tell us more...

"I don't feel lonely, but I feel isolated, particularly in the North Cotswolds when needing to travel to Gloucestershire Royal Hospital or Cheltenham Hospital. There are no real timely public transport options to Gloucester..." | "I am so alone; I've been living on my own for four years now. I've got no friends, no job, no social life at all..." | "Despite having family and friends, there are still so many hours or days spent alone. It feels isolating, especially when people are doing family things, such as at weekends and bank holidays."

Figure 7: Do you have any support to help you remain independent at home?
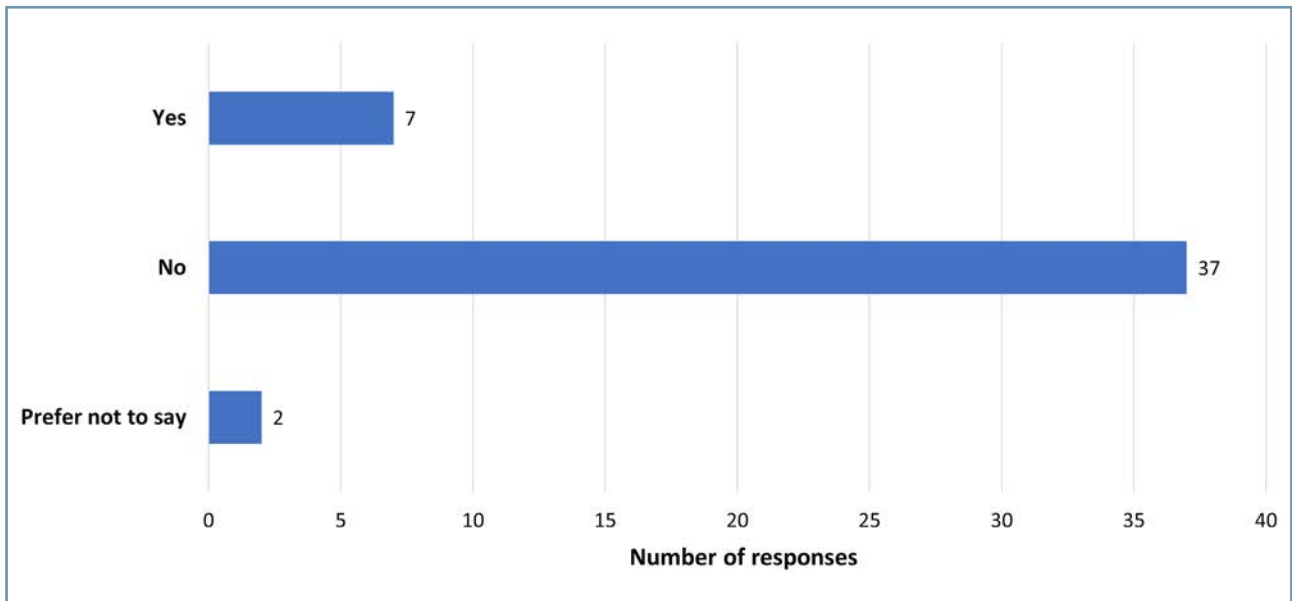
We wanted to identify those that needed support to remain independent at home. Through our 'Tell us more' responses, we identified that many people feel they aren't getting adequate support.

Tell us more...

"I really need the help of a cleaner, but I cannot risk catching Covid." | "Neither my son as a disabled person, nor myself as his carer, have been able to secure any support." | "I am disabled, I don't drive, I cannot retire, I have to work and it's hard. Who wants to help me?" | "There is no support for single parents who are isolated, and I can't afford care or cleaning staff..." | "I am capable of looking after myself, loneliness is the problem, not inactivity."

Is there anything else you'd like to tell us?

Some respondents identified problems with their housing providers and inadequate financial support as causes of isolation and/or loneliness.

Tell us more...

"Financial help for bereaved people who cannot retire, who have little or no money, household income cut in half, yet still have all the bills to live in a home. No one wants to help unless you are young and with children." | "Why can't housing associations have a priority list like the energy and water companies?" | "Much of this requires the development of robust anti-poverty strategies to give everyone the resources to provide adequately for their basic human needs." | "If you live in private renting, it's easier to get the equipment and support you need. The housing association can't be 'forced' to help you, it doesn't reflect the social needs, given that it's social housing..."

Creative workshop/focus group

We held an online creative workshop/focus group on 16 April with the Gloucestershire Carers Hub. This is a summary of the views raised during the session.

'Not another thing to organise'

When discussing support services, one view was that it can be difficult to contact these services if you are already busy with care responsibilities. They mentioned that the process of contacting a service, who may then put you in touch with someone else, is tiring, particularly if you are required to follow-up on appointments.

Another view was that even if you do access a support service, it can be challenging to make changes, particularly as it may disrupt the person you are caring for, for example, by requiring a change to the environment they have grown used to.

The effect of lockdown

The group expressed that they had found the lockdowns challenging, and people were generally feeling nervous about lockdown lifting.

The benefit of creative groups [11]

The group spoke highly of a number of online activity sessions they had joined during lockdown, particularly art groups. It was generally felt that these groups enabled conversation and the chance to connect with others over a common interest. It was generally agreed that face-to-face groups enable people to make better connections and engage fully with the session.

One participant commented that they (and their partner) had a full diary of online activities scheduled, and because weekends were particularly difficult, they had started their own online group.

One participant, who has enjoyed regular art groups online, told us: *"As soon as the session ends, the loneliness kicks in again…"*

---

7. Considerations

We have identified some examples of initiatives happening across the country that are making a difference in their area. These may be effective in helping to tackle loneliness and social isolation in Gloucestershire, where we could find little evidence of a strategic and coherent approach. We have provided a brief background on these services, links to additional resources and highlighted things to consider.

The Portsmouth Playbook

Functional aspects buffer against the negative impacts of social isolation	Structural aspects promote and sustain the degree of natural social integration
• Befriending services • Support groups • Bereavement counselling • Day centres • Received health and care services Safeguarding and family conferencing	• Breakfast clubs • Faith groups • Sports and recreation • Employment • Volunteering • Civic participation • Social media • Men in sheds

The Portsmouth Playbook[12] is one of a series of playbook programmes designed to look at a place-based approach to health and social care matters in England.

This playbook looks at supporting a 'family-first' approach amongst managers, commissioners, and front-line practitioners. It aims to prevent the harms of loneliness and social isolation in the community by strengthening existing structural integration opportunities.

The programme's launch was supported by a webinar attended by over 150 stakeholders in collaboration with The Jo Cox Foundation and their Connection Coalition. One key focus was that the priority extends beyond the voluntary sector to any organisation affected by the health and economic impacts of social isolation and loneliness.

Programme partners on the pilot include Solent NHS Trust, NHS Portsmouth Clinical Commissioning Group, Portsmouth City Council and the Ministry of Housing, Communities and Local Government. The latter will use learning from the pilot to assist other local planning authorities to ensure that both their community structures and spaces support the formation of empowerment and connections.

The three core tenants of the playbook approach as set out in their ***Connecting People and Place*** report are as follows.

- **Be aware** – There is a need to raise awareness across the health and care workforce of the harms and risks associated with social isolation and loneliness.
- **Recognise** – There is a need to increase the capacity and competence of the workforce to recognise social isolation and loneliness. This should encompass more effective assessment methods but also more targeted use of sign posting to ensure people are directed to the right level of support at the earliest stage.
- **Respond** – Social isolation and loneliness is multi-faceted and there is no single response or service that can address all the issues or respond to every need. There is a need for an overarching response strategy that can ensure the right workforce competencies and skills to respond in the right way at the right time. (Daya 2020:p47)

Things to consider

Rahim Daya (Breaking Barriers Innovations) and Nicolas Werran (DragonGate), two key partners on the Portsmouth Playbook project talked to us about the importance of a place-based approach when getting to the route of the problem. The implementation of a place-based structure should not feel new, rather it should feel logical, using what's already there rather than creating something new (for example, a new group or service). While the Portsmouth Playbook focuses on preventative action for social isolation and loneliness, it was suggested that other health and social care priorities can feature within this model.

---

[12] https://www.youtube.com/watch?v=RRKKR3cLdws

Covid-19 response

On asking about data to reflect the success of the programme, the newness of the initiative was reiterated. They acknowledged the current vaccine rollout across the UK being a priority position in most UK areas, which has delayed the anticipated momentum of the programme. It was also suggested that despite the vaccine rollout, some front-line organisations in Portsmouth have already begun implementing the playbook approach.

Social Impact Bonds

What is a Social Impact Bond?

A Social Impact Bond (SIB) brings together the public, voluntary and private sectors to tackle social challenges. They are a commissioning resource designed to help organisations deliver outcomes and generate funding for services conditional on results. Over 30 SIBs are supporting many communities across the UK with a few now supporting social isolation and loneliness projects.

Reconnections in Worcestershire

In 2015, Age UK partnered with Social Finance to run Reconnections, a pilot scheme designed to help alleviate loneliness in the older population of Worcestershire. This pilot scheme was the first to use a SIB in England to reduce social isolation and loneliness.

Reconnections supported people aged 50 and over, offering individuals a one-to-one plan tailored to their needs. Cases were followed up by a community volunteer or case worker who supported clients to engage with activities, people or places via befriending services, self-help groups or through signposting to other support services in the county. Cases ran over a 6-9 month period and the results were measured from the beginning of the programme and again at 18 months.

The pilot ended in 2020 after five years and was a success, which is reflected in the statistics and client testimonies.

> 'Overall 64% of clients felt less lonely and 18% felt no change. Using the UCLA scale for loneliness we set a 0.8 benchmark for reduction but positively, we saw an average drop point of -1.39 at six months and -1.28 a year after receiving the service - meaning a reduction in loneliness is sustained beyond the service delivery cycle.'[13]

> "Reconnections is bringing out the person I used to be. Their kindness, patience and enthusiasm for me personally has improved my lot so much. My sincerest thanks to you for the help you've given me."

While service users reported good experiences of Reconnections, their volunteers also spoke positively about the scheme with Age UK reporting that '100% of the volunteers surveyed in 2019 and 2020 would recommend volunteering for Reconnections.'[14]

The National Lottery Community Fund produced a detailed report[15] with Commissioning Better Outcomes evaluating their use of Social Impact Bonds. Here are some examples of their findings.

Pros	Cons
A strong case for investment	Lengthy procurement process
Focusing on longer-term outcomes	Resource intensive
Low financial risk for the public sector and VCSE service providers	A lack of capacity around management

---

[13,14] https://www.ageuk.org.uk/herefordshireandworcestershire/our-services/reconnections/

[15] *Reconnections Social Impact Bond: reducing loneliness in Worcestershire* (2016)

People Like Us

Following its success, commissioners in Worcestershire supported an extended service of Reconnections to be delivered by Onside Advocacy under a new service named People Like Us (PLUS). PLUS operates in Worcestershire and offers person-centred support to adults aged 18 and over experiencing loneliness or isolation.

PLUS supports their clients by helping build their confidence and independence to access opportunities to help alleviate their loneliness, such as local groups appropriate to their interests. They also source information and accompany their clients to activities providing support over a six-month period or longer depending on the client's needs.

By building the client's independence they are able to continue accessing the groups or services found during the programme, prolonging the benefits beyond the 6-months. This ensures that the person is not left with less after the programme, for example, suddenly feeling cut off again.

> John Whittall (PLUS):
>
> "It has been proven many times that isolation not only affects mental health but has a direct link to physical wellbeing. We see the person behind the isolation and loneliness, to help with a clear focus on building confidence and independence to enjoy life a little more while knowing they are not on their own and they are valued."[16]

Things to consider

Based on available evidence for the Reconnections pilot, the improved health and wellbeing of service users is expected to generate more than £3 million pounds in savings to the public sector over a 15-year period.[17]

SIBs support a multiagency approach in tackling a complex social problem, something that is being widely supported by the NHS through Integrated Care Systems. They also support cost-effective resourcing by investing in existing services.

Accessing technology – WaveLength

WaveLength provide TVs, radios and tablet computers to people who are living in poverty and are lonely or socially isolated.

A number of people can apply on behalf of an individual, including a friend or neighbour, a charity worker or volunteer and applications can also be made for groups, for example, refuges and community centres.

WaveLength check in with the recipient to see how they're getting on with the equipment, and provide further information on their website, including information on how to meet people online (for example, activities, volunteering and befriending) and safety tips.

---

[16] Hind, N (2021). Direct quote from Whittall, J.
[17] *Reconnections Social Impact Bond: reducing loneliness in Worcestershire* (2016)

Community Circles

[Community Circles](#)[18] connect people with their communities by building a support circle around the individual in need. While they are there for anyone who wants to make a change in their life, they are often used to support people experiencing disconnection and loneliness.

A circle is made up of two or more people around the individual, and together they support the person to achieve their goals, for example, starting a new hobby, or getting better connected to their family and friends. A circle facilitator, chosen by the individual, keeps the circle together by organising meetings and keeping them focused on action. The facilitator actively makes use of community assets and encourages empowering conversations and self-help.
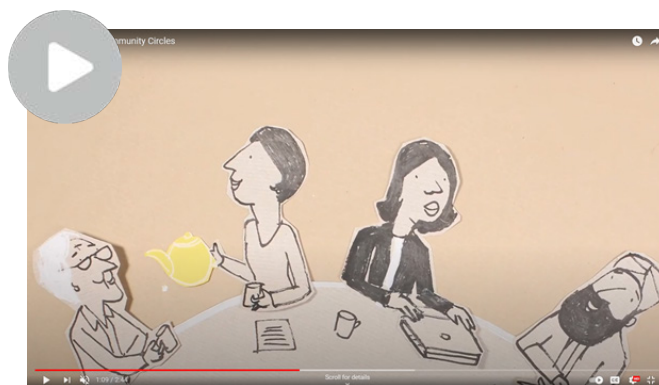
Age UK Gloucestershire – Ageing without children project

[Age UK Gloucestershire](#) are developing a new initiative to support those ageing without children, following the Community Circles model.

There is an increase in people ageing without children, and reasons for this are vast, including those who have chosen not to be parents, those whose children live far away and those whose children are unable to support them for other reasons, for example, they have a long-term disability.

Statistics compiled by [Ageing Without Children](#) suggest the number of people aged 65 and over without adult children is likely to reach 2 million by 2030 and that currently, 92% of informal care is provided by an individual's family.[19]

> Helen Atkinson (Age UK Gloucestershire)
>
> "We are very excited to have the opportunity to pilot a Community Circles project for some of those ageing without children in Gloucestershire. We are hoping that by exploring this model of support with a specific cohort we will be able to encourage the building of some meaningful local connections with individuals.
>
> "We will have the opportunity to see how well this provides an effective structure to promote wellbeing and measure its impact on social isolation and lack of connection. This model of support will look at what matters to an individual and facilitate the community and family networks around a person to provide the relationships and contacts needed.
>
> "Raising awareness of the issues of social isolation and loneliness amongst the wider population is also crucial and may encourage people to take positive action to maintain connections as this clearly has wider health considerations for everyone." [20]

Things to consider

Community Circles are partnered with Wigan Council, Age UK Doncaster and Wellbeing Teams and are not currently operating in Gloucestershire. There are a number of [options](#) for people looking to develop a circle in their area including provider organisations, local authority commissioners and community groups.

---

[18] https://www.youtube.com/watch?v=HuLCz8sRWN0&t=2s

[19] *Briefing paper on people ageing without Children* (2019)

[20] Hind, N (2021). Direct quote from Atkinson, H.

Looking out for our neighbours

Looking out for our neighbours[21] is a social marketing campaign operating in West Yorkshire and Harrogate supported by the local NHS Health and Care partnership. The campaign helps people feel better in the areas they live by encouraging neighbourly gestures like calling round for a cup of tea to hosting community activities.

45,000 people across West Yorkshire and Harrogate have engaged with the scheme since its launch in March 2019. The 'Phase 1' campaign evaluation[22] reported that 84% of survey respondents found the neighbour packs 'very useful' or 'useful' and three out of four (75%) of people engaged in a new activity to look out for their neighbour. It was concluded that they would continue the campaign beyond the pilot considering the low cost and overall positive impact.
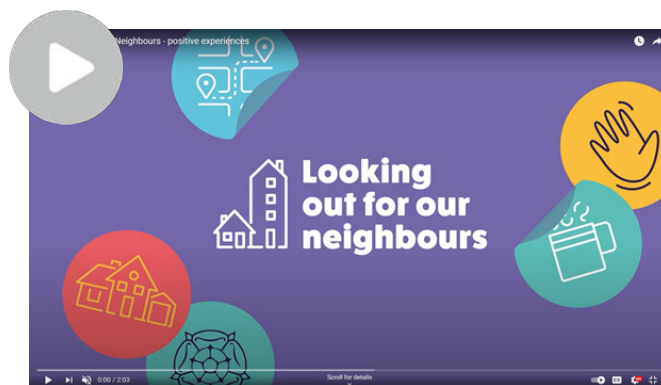
Covid-19 response

Responding to the Covid-19 pandemic, they launched 'Our neighbours', an online reality mini-series. The topical series involved conversations on life during Covid-19 and kindness in the community, encouraging individuals to look after their wellbeing in Lockdown. The project evaluation[23] reflects that 27,900 people viewed the videos and 2,905 visits were made to the campaign website.

Things to consider

NHS Wakefield CCG informed us that anyone can use the online resources to start their own campaign, with permission to include your own organisational logos.

Local insight and community engagement is key to the mobilisation of this scheme.

Together Network and Places of Welcome

Church Urban Fund builds partnerships with local people and organisations within their communities, working alongside other groups of all faiths and secular organisations. Their three organisational streams are: the Together Network, Near Neighbours and the Just Finance Foundation.

The Together Network is currently formed of 21 faith-based partnerships which focus on the needs of the communities in which they operate. Each Together Network partner employs a development worker or workers to support and develop local projects, drawing on the skills of local people to build thriving communities.

Places of Welcome[24] (an initiative within The Together Network) is a growing network of community groups providing people from all faiths (and none) with places to connect, contribute their skills and feel a sense of belonging within their area. The 400+ groups take place across a variety of community buildings in the UK and are open to everyone regardless of their circumstances or situation.

---

[21] https://www.youtube.com/watch?v=UoQGPXWu9p4
[22] LOFN Campaign Evaluation: March-June 2019
[23] LOFN Phase 3 Campaign Evaluation: January 2021
[24] https://www.youtube.com/watch?v=JXOSTuzuo2c

Covid-19 response

Church Urban Fund has offered a number of free support services for organisations to move their services online including support for those with little experience. This includes a pair of free workshops through their Near Neighbours Programme, called Diverting to Digital.

Places of Welcome moved online to Zoom or similar platforms, some have kept in touch by phone, and others have set up systems of support including regular food drops for those self-isolating.

Together Network partner Transforming Communities Together, set up Bringing People Together to connect people during lockdown. Drawing on learning from Places of Welcome, Bringing People Together uses telephone and online platforms to enable people to connect safely and form lasting friendships.

Things to consider

You can join the Place of Welcome network whether you already have an existing drop-in style activity, or you would like to set up a new Place of Welcome in your community. Submit a form to be connected to a local Area Coordinator who will provide access to resources. Costs of running a group vary, for example, the organiser's location, but they tend to be low.

Specific interest groups

Many people told us they would like to see more social activity groups tailored toward specific interests. We also received responses suggesting that a place to find information on existing groups would be helpful.

> Tell us more... [25]
>
> "Anything that allows social interaction." | "Craft clubs, social clubs, lunch clubs." | "More friendly community run cafes and groups." | "Photography groups." | "More social groups, perhaps linked to churches." | "Increase activity groups (could be art, social justice, human rights, music...)" | "Groups targeted at single older people who want to make new friends." | "Local groups, supportive groups..." | "Yoga, walking groups outside office hours, Tai Chi." | "Groups for people with mental health issues." | "Free or inexpensive dance and art groups."

Example: The Glamour Club, Worthing, West Sussex

Janice Moth, the owner and creator of The Glamour Club[26] has worked in mental health for over a decade. She decided to help eradicate loneliness, and loneliness caused by social isolation after seeing shocking statistics reflecting the unnecessary deaths caused by loneliness and having experienced chronic loneliness herself.

Defined as a 'great night out during the day' the bi-monthly events run on Saturday afternoons and are priced at £10. Guests are greeted on arrival by a stilt-walking butler and are served afternoon tea by table hosts to a live entertainment soundtrack of classics from the 1940s-1970s. The events are for those aged 50+, but everyone is welcome. The Glamour Club team are all volunteers and are Dementia Friends, disability confident, eco-friendly and intergenerational.

---

[25] These quotes are 'Tell us more' responses from our survey.
[26] https://www.youtube.com/watch?v=lnun24ukvkM&t=60s

This award-winning venture has been recognised nationally and locally, and is attended by chief executives, disability inclusion leads and programme directors working for mental health services.

The Glamour Club are currently working on a licensing agreement so that areas looking to start their own event can purchase the rights alongside a training and development pack.

Covid-19 response

During the Covid-19 pandemic, The Glamour Club hosted an online event for Worthing Mental Health Awareness Week and World Mental Health Awareness Day. They also launched their 'Take-Away Experience' for local residents and ramped up their social media engagement campaigns.

Things to consider

The VCS Alliance and Your Circle are useful directories in seeking support services. Establishing a specific directory for loneliness and/or social isolation support and highlighting the work of social prescribing services (GRCC Community Wellbeing Service) may be helpful.

8. Gloucestershire-based services

During our research, we received little response from Gloucestershire-based services. We appreciate the lack of responses were down to a significant increase in pressure on these services, particularly as the research for this report was conducted during our most recent lockdown.

Here are a few points of interest to support our considerations:

- We are aware that the Cotswold District has a strategic focus on community connection.
- Gloucester City focus on community building/asset-based community development.

We have compiled a list of local services (see **Appendix C**) that may be helpful to those who are seeking support. Under the Considerations section above [7.f) 'Example of a specific interest group'] we have provided contact information for the Social Prescribing service which provides one-to-one support in finding local support groups.

9. Recommendations

We believe there isn't a 'one size fits all' approach to tackling social isolation and loneliness. Instead, we have shared a range of examples of well supported initiatives happening nationwide that could be effective in Gloucestershire.

Each initiative makes use of local insight and facilities within their respective communities. They have also received significant backing and support from local health and social care decision-makers elsewhere and receive a high degree of praise from service users.

Each of the projects we have highlighted could be effective on its own. For example, establishing a Reconnections service in Gloucestershire does not rely on the implementation of a Together Network. However, we noted the lack of a coherent approach in Gloucestershire and therefore suggest that a number of approaches working alongside each other would be most effective.

We recommend the following approaches:

- Adopting a place-based, preventative approach like the **Portsmouth Playbook** could be effective in strengthening existing structural integration opportunities. Forming a **Together Network** (Church Urban Fund) could also be an effective structural solution for the same reason as it makes use of local people, facilities and services to strengthen communities.

- It could be effective to use **Social Impact Bonds** to strengthen existing services or invest in robust support services such as **Community Circles**, **Reconnections**, or the **PLUS** service. (See below for examples of helpful services in Gloucestershire that could be the foundation for further investment to tackle social isolation.)

- Forming more specific interest groups, such as **Places of Welcome** or **The Glamour Club** is something that many of our respondents suggested. In addition, raising the profile of the **Social Prescribing** services would be helpful as they are designed to provide one-to-one support which includes signposting to groups and services.

- As a social marketing initiative, **Looking out for our neighbours** could be an effective way to unify communities in Gloucestershire by generating wide-spread conversation and fostering connections. It may also encourage neighbourly gestures and further initiatives that grow from these interactions from the ground up, such as community engagement activities.

10. Stakeholder's responses

Gloucestershire Clinical Commissioning Group/One Gloucestershire
Jo Underwood, Transformation Programme Director

"We want Gloucestershire to be a county where the importance of our social infrastructure to improve connectivity and community cohesion is understood and acted upon, and in which loneliness and social isolation are recognised openly as something likely to affect us all.

"Just as Covid-19 has bought some people and communities together, it has also torn us apart and deepened existing absence of connection for many of us. A sense of meaning, purpose and human connection are key to supporting all of us who feel lonely or isolated, some or all of the time.

"This report highlights so many great examples of ways to achieve this and we're lucky there is already a wide variety of initiatives available closer to home. However, as the report's participants illustrate, there is a long way for us to go before connection and support are available everywhere they are wanted. The NHS with our Integrated Care System partners is committed to continuing to work together to co-ordinate our efforts and resources to tackle loneliness and isolation and the impact it has on our health and wellbeing."

NHS
Gloucestershire
Clinical Commissioning Group

One Gloucestershire
Transforming Care, Transforming Communities

11. Thank you

Thank you to everyone who engaged with our campaign. An additional thanks to Evolving Communities, Age UK Gloucestershire, Gloucestershire Carers Hub, Dashing Bear Productions, Breaking Barriers Innovations, GRCC, Guideposts, Church Urban Fund, People Like Us (Onside Advocacy), BBC Radio Gloucestershire and the Forest of Dean Health Forum.

12. Appendices

Appendix A. Survey questions

Let's talk about social isolation and loneliness

We know that social isolation is as an issue for many people in our communities, through our previous work and the work of Gloucestershire's Health and Wellbeing Board. Tackling social isolation is also at the heart of the NHS move towards healthcare that links local services and communities.

We want to build a better understanding of what social isolation and loneliness mean for people living in Gloucestershire, particularly in the context of COVID-19. And, we want to identify areas of good practice in health, wellbeing, and social care, to help our local services understand how to tackle social isolation.

What are we doing?

We are reviewing work that has already been carried out locally and nationally, to identify examples of best practice in health and wellbeing services. We are talking to people in Gloucestershire who are socially isolated - gathering their views and experiences, asking what makes a difference and what more could be done.

Share your views and experiences

You can help us build a better understanding of what social isolation and loneliness mean for Gloucestershire by sharing your views. Your feedback can be anonymous.

1. How often do you feel lonely?
- ☐ Almost never
- ☐ Rarely
- ☐ Sometimes
- ☐ Frequently
- ☐ Almost always
- ☐ I'd prefer not to say

Tell us more (optional)

Please select how much you agree or disagree with the three statements below:

2. I am content with my friendships and relationships
- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree
- ☐ Don't know / I'd prefer not to answer

Tell us more (optional)

3. I have enough people I feel comfortable asking for help at any time
- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree
- ☐ Don't know / I'd prefer not to answer

Tell us more (optional)

4. My relationships are as satisfying as I would want them to be

☐ Strongly Disagree
☐ Disagree
☐ Neutral
☐ Agree
☐ Strongly Agree
☐ Don't know / I'd prefer not to answer

Tell us more (optional)

5. Do you have opportunities to meet new people in your local area?

☐ Yes
☐ No
☐ I'd prefer not to say

Tell us more (optional)

6. What would you like to see in your local area to help people make better connections?
(for example, specific activity groups, facilities)

7. How many people, including yourself, live in your household?

8. Do you have any support to help you remain independent at home?
(for example, visits from care workers, cleaning staff)

☐ Yes
☐ No
☐ I'd prefer not to say

9. Is there anything else you would like to tell us?

Tell us a bit more about you

By telling us more information about yourself, you can help us better understand how people's experiences may differ depending on their personal characteristics. However, if you do not wish to answer these questions you do not have to.

10. Please tell us the first part of your postcode, for example GL15

11. Please tell us which age category you fall into:

☐ 13-17
☐ 18-24
☐ 25-34
☐ 35-44
☐ 45-54
☐ 55-64
☐ 65-74
☐ 75+
☐ I'd prefer not to say

12. Please tell us what gender you identify with:

☐ Male
☐ Female
☐ Non-binary
☐ I'd prefer not to say
☐ Other (please specify):

13. Is your gender different to the sex that was assigned to you at birth?
- ☐ Yes
- ☐ No
- ☐ I'd prefer not to say

14. Please select your ethnic background:
- ☐ Arab
- ☐ Asian / Asian British: Bangladeshi
- ☐ Asian / Asian British: Chinese
- ☐ Asian / Asian British: Indian
- ☐ Asian / Asian British: Pakistani
- ☐ Asian / Asian British: Any other Asian / Asian British background
- ☐ Black / Black British: African
- ☐ Black / Black British: Caribbean
- ☐ Black / Black British: Any other Black / Black British background
- ☐ Gypsy, Roma or Traveller
- ☐ Mixed / Multiple ethnic groups: Asian and White
- ☐ Mixed / Multiple ethnic groups: Black African and White
- ☐ Mixed / Multiple ethnic groups: Black Caribbean and White
- ☐ Mixed / Multiple ethnic groups: Any other Mixed / Multiple ethnic background
- ☐ White: British / English / Northern Irish / Scottish / Welsh
- ☐ White: Irish
- ☐ White: Any other White background
- ☐ I'd prefer not to say
- ☐ Other (please specify):

15. Please tell us which sexual orientation you identify with:
- ☐ Asexual
- ☐ Bisexual
- ☐ Gay
- ☐ Heterosexual / Straight
- ☐ Lesbian
- ☐ Pansexual
- ☐ I'd prefer not to say
- ☐ Other (please specify):

16. Please tell us about your religion or beliefs:
- ☐ Buddhist
- ☐ Christian
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ No religion
- ☐ I'd prefer not to say
- ☐ Other (please specify):

17. Please tell us about your marital or civil partnership status:
- ☐ Single
- ☐ Married
- ☐ In a civil partnership
- ☐ Co-habiting
- ☐ Separated

- ☐ Divorced / dissolved civil partnership
- ☐ Widowed
- ☐ I'd prefer not to say

18. Do you consider yourself to be a carer (paid or unpaid), have a disability or a long-term health condition? (Please select all that apply):
- ☐ Yes, I consider myself to be a carer
- ☐ Yes, I consider myself to have a disability
- ☐ Yes, I consider myself to have a long-term health condition
- ☐ None of the above
- ☐ I'd prefer not to say
- ☐ Other (please specify):

Appendix B. Demographics

Postcode areas
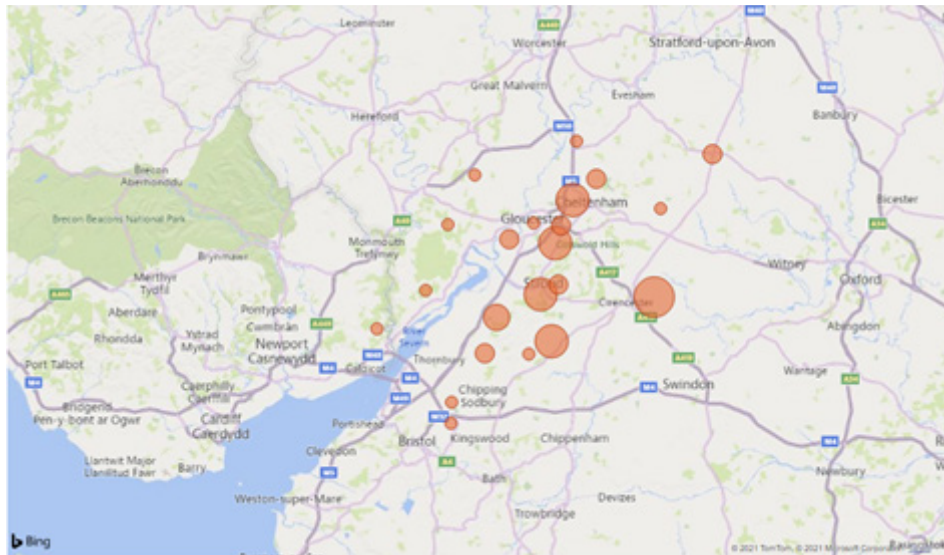
Q.11) Please tell us which age category you fall into	Total
18 - 24 years	3
25 - 34 years	5
35 - 44 years	1
45 - 54 years	8
55 - 64 years	14
65 - 74 years	10
75+ years	4
Did not answer	1
Total	**46**

Q.12) Please tell up what gender you identify with	Total
Female	36
Male	9
Did not answer	1
Total	**46**

Q.13) Is your gender different to the sex that was assigned to you at birth?	Total
Yes	2
No	44
Total	**46**

Q.14) Please select your ethnic background	Total
White: any other White background	2
White: British / English / Northern Irish / Scottish / Welsh	41
Prefer not to say	2
Did not answer	1
Total	**46**

Q.15) Please tell us which sexual orientation you identify with	Total
Lesbian	2
Heterosexual / Straight	37
Bisexual	1
Asexual	1
Prefer not to say	2
Did not answer	3
Total	**46**

Q.16) Please tell us about your religion or beliefs	Total
Pagan	1
Christian	17
Agnostic	1
Follow Christian morals / ethics	1
No religion	21

Prefer not to say	4
Did not answer	1
Total	**46**

Q.17) Please tell us about your marital or civil partnership status	Total
Widowed	9
Single	11
Separated	4
Married	6
In a civil partnership	2
Divorced / dissolved civil partnership	11
Co-habiting	1
Prefer not to say	1
Did not answer	1
Total	**46**

Q.18.a) Do you consider yourself to be a carer (paid or unpaid)?	Total
Yes	7
No	39
Total	**46**

Q.18.b) Do you consider yourself to have a disability?	Total
Yes	17
No	29
Total	**46**

Q.18.c) Do you consider yourself to have a long-term condition?	Total
Yes	21
No	25
Total	**46**

Appendix C. Local services

Active Impact | https://www.activeimpact.org.uk/

Age UK Gloucestershire | https://www.ageuk.org.uk/gloucestershire/

Barnwood Trust | https://www.barnwoodtrust.org/

Be Well Gloucestershire | https://www.bewellglos.org.uk/

Brockworth Link | http://www.brockworthlink.org.uk/

Cotswold Friends | https://www.cotswoldfriends.org/

Crossroads Care Gloucestershire | http://www.crossroadscareglos.org.uk/

Forest Voluntary Action Forum https://fvaf.org.uk/

Gay Glos | https://www.gayglos.org/

GL11 Community Hub | https://www.gl11.org.uk/

Glo-Active | https://glo-active.co.uk/

Gloucester Rugby Foundation | https://www.gloucesterrugby.co.uk/foundation

Gloucestershire Carers Hub | https://gloucestershirecarershub.co.uk/

Greenwood's Therapeutic Horticulture | https://greenwoodtherapeutichorticulture.co.uk/about

Guideposts | https://guideposts.org.uk/

Hesters Way Partnership | http://hwpartnership.org.uk/

Inclusion Gloucestershire | https://www.inclusiongloucestershire.co.uk/

Men in Sheds Cheltenham and Gloucester | https://meninsheds-gloucester.org/

P3 Gloucester | https://www.p3charity.org/get-help/service-results?location=gloucester

Re Connect | https://www.cscic.org/info/our-projects/re-connect/

SSAFA Gloucestershire | https://www.ssafa.org.uk/gloucestershire

The Family Haven | https://thefamilyhaven.com/

The Friendship Café | https://thefriendshipcafe.com/

WAM Youth | http://www.wamyouth.org.uk/wp/

13. References

Age UK Hereford & Worcestershire. (n.d) About Reconnections. Available from: http://www.reconnectionsservice.org.uk/ [Accessed March 2021]

Age UK Hereford & Worcestershire. (n.d) Reconnections (Now being delivered by Onside Advocacy) – Tackling loneliness across Worcestershire. Available from: https://www.ageuk.org.uk/herefordshireandworcestershire/our-services/reconnections/ [Accessed March 2021]

Bashford, J and Daya, R. (2020) Connecting People and Place: An action plan for addressing social isolation and loneliness in north Portsmouth. Available from: https://bbi.uk.com/wp-content/uploads/BBI-Portsmouth-Final-Report-and-Action-Plan.pdf [Accessed March 2021]

Breaking Barriers Innovations. (2020) Available from: https://bbi.uk.com/ [Accessed March 2021]

Breaking Barriers Innovations. (2020) A Little More Conversation, a Little More Action. FULL WEBINAR with Jo Cox Foundation. Available from: https://www.youtube.com/watch?v=u94dczkA2z4 [Accessed March 2021]

Breaking Barriers Innovations. (2020) Introduction to BBI Portsmouth Playbook Programme. Available from: https://www.youtube.com/watch?v=RRKKR3cLdws [Accessed March 2021]

Breaking Barriers Innovations. (2020) The Portsmouth Playbook. Available from: https://bbi.uk.com/the-playbook-programme/the-portsmouth-playbook/ [Accessed March 2021]

Bringing People Together. (n.d) Available from: https://www.bringingpeopletogether.org.uk/ [Accessed April 2021]

British Red Cross. (n.d) Barriers to belonging. Available from: https://www.redcross.org.uk/about-us/what-we-do/we-speak-up-for-change/barriers-to-belonging [Accessed March 2021]

Campaign to End Loneliness. (n.d) About loneliness. Available from: https://www.campaigntoendloneliness.org/about-loneliness/ [Accessed March 2021]

Campaign to End Loneliness. (n.d) The facts on loneliness. Available from: https://www.campaigntoendloneliness.org/the-facts-on-loneliness/ [Accessed March 2021]

Church Urban Fund. (n.d) Available from: https://cuf.org.uk/ [Accessed April 2021]

Commissioning Better Outcomes. (n.d) Reconnections Social Impact Bond: reducing loneliness in Worcestershire. Available from: https://www.tnlcommunityfund.org.uk/media/research-documents/social-investment/Reconnections-SIB-In-Depth-Review-Report_190320_122442.pdf?mtime=20190320122442 [Accessed March 2021]

Community Circles. (n.d) Available from: https://www.community-circles.co.uk/ [Accessed April 2021]

Community Circles. (n.d.) Developing Circles where you live or work. Available from: https://www.community-circles.co.uk/developing-circles/ [Accessed April 2021]

Community Circles. (2016) Rally Round and Community Circles. Available from: https://www.youtube.com/watch?v=HuLCz8sRWN0&t=2s [Accessed April 2021]

Connection Coalition. (n.d) Available from: https://www.connectioncoalition.org.uk/?gclid=EAIaIQobChMI4u6-t77a7wIVxu7tCh3kuQcnEAAYASAAEgKyO_D_BwE [Accessed March 2021]

Connection Coalition. (n.d.) Join the Connection Coalition. Available from: https://www.connectioncoalition.org.uk/join [Accessed March 2021]

Connection Coalition. (n.d) Members. Available from: https://www.connectioncoalition.org.uk/members [Accessed April 2021]

Connection Coalition. (n.d) Resources, tools and activities of connection to share. Available from: https://www.connectioncoalition.org.uk/resources [Accessed March 2021]

DragonGate. (2017) Available from: https://www.dgmi.co.uk/ [Accessed March 2021]

Gloucestershire VCS Alliance. (n.d) Available from: http://www.glosvcsalliance.org.uk/ [Accessed March 2021]

Eden Project Communities. (n.d) The cost of disconnected communities. Available from: https://www.edenprojectcommunities.com/the-cost-of-disconnected-communities [Accessed April 2021]

Gibbons, B. (2021) Loneliness numbers double during Covid crisis – with young adults most affected. Available from: https://www.gloucestershirelive.co.uk/news/uk-world-news/loneliness-numbers-double-during-Covid-5211732 [Accessed March 2021]

GOV.UK. (2017) A guide to Social Impact Bonds. Available from: https://www.gov.uk/guidance/social-impact-bonds [Accessed March 2021]

Healthwatch Gloucestershire. (2021) Available from: https://www.healthwatchgloucestershire.co.uk/ [Accessed: April 2021]

Healthwatch Gloucestershire. (2020) Living with a long-term health condition in Covid-19 – What local people told us. Available from: https://www.healthwatchgloucestershire.co.uk/wp-content/uploads/HWGlos-LongTerm-and-Covid-report-FINAL2.pdf [Accessed April 2021]

Just Finance Foundation. (n.d) Available from: https://www.justfinancefoundation.org.uk/ [Accessed April 2021]

Looking out for our neighbours. (n.d) Available from: https://ourneighbours.org.uk/about/ [Accessed April 2021]

Looking out for our neighbours. (2019) Campaign Evaluation: March – June 2019. Available from: https://www.wyhpartnership.co.uk/application/files/2915/6439/7808/Neighbours_Evaluation_email_version.pdf [Accessed April 2021]

Looking out for our neighbours. (2021) Phase 3 campaign report. Available from: https://www.wyhpartnership.co.uk/application/files/4716/1126/2837/LOFN_evaluation_January_2021.pdf [Accessed April 2021]

Looking out for our neighbours. (n.d) Look out for one another with our helpful neighbour resources. Available from: https://ourneighbours.org.uk/resources/ [Accessed April 2021]

Mind. (2019) Loneliness. Available from: https://www.mind.org.uk/information-support/tips-for-everyday-living/loneliness/about-loneliness [Accessed March 2021]

Near Neighbours. (n.d) Available from: https://www.near-neighbours.org.uk/ [Accessed April 2021]

Near Neighbours. (n.d) #Diverting2Digital. Available from: https://www.near-neighbours.org.uk/diverting2digital [Accessed April 2021]

NHS. (n.d) Delivering universal personalised care. Available from: https://www.england.nhs.uk/personalisedcare/upc/ [Accessed March 2021]

NHS. (n.d) NHS Long Term Plan. Available from: https://www.longtermplan.nhs.uk/ [Accessed March 2021]

NHS. (n.d) Social Prescribing. Available from: https://www.england.nhs.uk/personalisedcare/social-prescribing/ [Accessed March 2021]

NHS. (n.d) What are integrated care systems? Available from: https://www.england.nhs.uk/integratedcare/what-is-integrated-care/ [Accessed April 2021]

Onside Advocacy. (n.d) Combatting Loneliness and Isolation in Worcestershire. Available from: https://www.onside-advocacy.org.uk/plus [Accessed April 2021]

Places of Welcome. (n.d) Join us. Available from: https://www.placesofwelcome.org.uk/join-us [Accessed April 2021]

Social Finance. (2021) Available from: https://www.socialfinance.org.uk/ [Accessed March 2021]

The Glamour Club. (2021) Available from: https://www.theglamourclub.co.uk/ [Accessed April 2021]

The Glamour Club. (2020) The Glamour Club Launch Party October 2018. Available from: https://www.youtube.com/watch?v=Inun24ukvkM&t=60s [Accessed April 2021]

The Jo Cox Foundation. (2019) Available from: https://www.jocoxfoundation.org/?gclid=EAIaIQobChMIp8DyprDa7wIVFuvtCh1JNgKGEAAYASAAEgIPePD_BwE [Accessed March 2021]

Together Network. (n.d) Available from: https://togethernetwork.org.uk/ [Accessed April 2021]

Transforming Communities Together. (2017) What is a Place of Welcome? Available from: https://www.youtube.com/watch?v=JXOSTuzuo2c [Accessed March 2021]

Wavelength. (n.d) Available from: https://wavelength.org.uk/what-we-do/ [Accessed April 2021]

West Yorks & Harrogate Health & Care Partnership. (n.d) Looking out for our neighbours. Available from: https://www.wyhpartnership.co.uk/get-involved/looking-out-for-our-neighbours [Accessed April 2021]

Why not get involved?

🌐 healthwatchgloucestershire.co.uk

✉️ info@healthwatchgloucestershire.co.uk

📞 0800 652 5193

📍 13 Wheatstone Court, Davy Way, Waterwells Business Park, Quedgeley, GLOUCESTER GL2 2AQ

f @HealthwatchGloucestershire

🐦 @HealthwatchGlos

in healthwatch-gloucestershire

📷 healthwatch_gloucestershire

healthwatch
Gloucestershire